Religious and Cultural Influences on Contraception

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Abstract

Objective: To elucidate the religious and cultural influences that may affect the acceptance and use of various methods of contraception, including emergency contraception.

Methods: Literature searches were conducted to identify religious teachings related to family, sexual relations, and family planning for Christianity, Judaism, Islam, Hinduism, Buddhism, and Chinese religious traditions. Religious scholars from each of the major religions were consulted for additional information regarding how various subgroups within that religion may interpret and apply religious teachings in specific circumstances.

Results: Religious and cultural factors have the potential to influence the acceptance and use of contraception by couples from different religious backgrounds in very distinct ways. Within religions, different sects may interpret religious teachings on this subject in varying ways, and individual women and their partners may choose to ignore religious teachings. Cultural factors are equally important in couples' decisions about family size and contraception.

Conclusion: When new immigrants are faced with the challenges of acclimating to a new society and a new way of life, they may anchor strongly to traditional religious and cultural expectations regarding family, sexuality, and fertility. While health care providers must be cautious not to attribute stereotypical religious, social, and cultural characteristics to women seeking advice about contraception, they do need to recognize that different value systems may influence contraception decision-making in couples of different faiths. This increased cultural awareness needs to be tempered by the understanding that each patient encounter is unique. The values that an individual woman holds may not be in keeping with the official teachings of her religion or the cultural norms reported by other members of the same culture.

Résumé

Objectif : Élucider les influences religieuses et culturelles pouvant affecter l'acceptation et l'utilisation de divers modes de contraception, y compris la contraception d'urgence.

Méthodes : Des analyses documentaires ont été menées pour identifier les enseignements religieux portant sur la famille, les relations sexuelles et la planification familiale que proposent le christianisme, le judaïsme, l'islamisme, l'hindouisme, le bouddhisme et les traditions religieuses chinoises. Nous avons consulté des érudits de chacune des principales religions, afin d'obtenir des renseignements supplémentaires sur la façon dont divers sous-groupes au sein de ces religions pouvaient interpréter et mettre en application des enseignements religieux dans des circonstances particulières.

Résultats : Les facteurs religieux et culturels présentent le potentiel d'influencer l'acceptation et l'utilisation de la contraception par les couples provenant de divers contextes religieux, et ce, de façons très distinctes. Au sein de chacune de ces religions, il est possible que chacune des sectes sous-jacentes interprète les enseignements religieux à ce sujet d'une façon distincte; il est également possible que certaines femmes et leurs partenaires choisissent de ne pas se plier à ces enseignements religieux. Les facteurs culturels sont tout aussi importants en ce qui concerne les décisions des couples en matière de planification familiale et de contraception.

Conclusion : Lorsque de nouveaux immigrants font face aux défis que présente l'acclimatation à une nouvelle société et à un nouveau mode de vie, ils peuvent avoir tendance à s'ancrer fermement à des attentes religieuses et culturelles traditionnelles en matière de famille, de sexualité et de fertilité. Bien que les fournisseurs de soins de santé doivent se garder d'attribuer des caractéristiques religieuses, sociales et culturelles stéréotypées aux femmes qui souhaitent obtenir des conseils en matière de contraception, ils se doivent de reconnaître que différents systèmes de valeur peuvent influencer les décisions en matière de contraception au sein de couples de différentes confessions religieuses. Cette sensibilisation culturelle se doit d'être tempérée par la compréhension du fait que chaque patiente est unique. Les valeurs d'une femme donnée peuvent ne pas s'inscrire dans le cadre de la doctrine officielle de sa religion ou des normes adoptées par d'autres membres de la même culture.

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INTRODUCTION

Despite the wide range of effective contraceptive options available to women in developed countries, unintended pregnancies continue to occur in large numbers, and rates of sexually transmitted infections remain high.[1,2] A number of factors can affect a woman's access to, or effective use of, contraception. The barriers to effective use of contraception have been well documented[3,4] and will not be reviewed here. Among these barriers are personal beliefs and values that can be shaped by both culture and religion.

When a couple's most fundamental assumptions of a faith are dissimilar to those of the health care provider, medical recommendations may be made that are not in keeping with the couple's religious or cultural values. Health care providers in culturally diverse nations must understand the possible influences of culture and religion on a couple's willingness to use contraception, and they should be familiar with a range of contraceptive options in order to address such situations in the most appropriate way. Of Canada's 30 million citizens, the majority identified as Christian in the 2001 Census, with Roman Catholicism being the most predominant denomination. However, adherents of Judaism, Islam, Hinduism, Buddhism, and Chinese religious traditions also constitute a significant number of individuals, with hundreds of thousands of devotees in Canada.[5]

This paper will outline the basic teachings of the above religions with respect to contraceptive usage and acceptability. Where possible, the most conservative teachings will be presented. Within a faith there is often no consensus among practitioners, although for some religions, universal doctrines may be enunciated. Over and above religious views, the cultural values of a given population may greatly affect sexual and contraceptive behaviour. Some religions are subdivided into denominations, adherents of which may have their own distinct interpretation of religious teachings. These differences complicate the attempt to articulate a single position for a given religion. In addition, although individuals may identify with a particular faith, they may not agree at a personal level with official teachings. Whether a particular woman and her partner adhere to these beliefs is a matter for discussion on an individual basis.

METHODS AND MATERIALS

A review of the relevant literature was conducted. Articles were found through searches of Medline, PubMed, EMBASE, ATLA, Sociological Abstracts, and the Gender Studies Database. Primary and review articles were selected from those retrieved through exploded searches using the following MeSH headings: Christianity, Judaism, Islam, Buddhism, Hinduism, Confucianism, Taoism, Eastern Chinese Traditions, birth control, contraception, family planning, contraceptive behaviour, sexual behaviour, reproductive techniques, sex, and religion. Initially, articles published between 1996 and 2006 were included in the search but this was expanded to include primary sources prior to these dates.

Experts from each of the religions investigated were contacted to corroborate information gathered through the literature review and discuss current practices within populations. All interviews were conducted using a standardized questionnaire. Interviews were conducted either over the phone, in person, or via email depending on the availability of the expert. All experts were supplied with the findings of the investigators and then asked to comment on a series of questions (Appendix).

RESULTS

Christianity

Christians draw their inspiration from the life of Jesus of Nazareth, the proclaimed son of God.[6] There are three major denominations within Christianity: Roman Catholicism, Eastern Orthodoxy, and Protestantism.

Beliefs about sexuality and family

Traditionally, human sexuality has been viewed as a powerful and attractive yet destabilizing force. Throughout much of history, sex has been valued for its procreative powers exclusively.[6,7] During the 20th century, theologians have begun to offer a more positive assessment of sexual intercourse; love and personal fulfillment have been rising in importance.[6] Churches still look favourably upon couples who have children but maintain that respect and sensitivity should be shown to couples who do not feel called to conceive children.[6]

Roman Catholicism

Within Catholicism, the primary purpose of marriage and sexual intercourse is procreation.[8] Every act of intercourse must remain open to conception.[8] Contraception destroys any potential to produce new life and violates the principal purpose of marriage.[9] This contraception ban is against unnatural means of contraception, which include chemical and barrier methods.[9] Abstinence and the rhythm method are the only officially approved methods of birth spacing.[9] These forms of family planning may be used for medical, economic, and social indications.[8] Contraceptive intent and results when these methods are used are no longer considered sinful.[10] All other forms of birth control are forbidden.[9] In Catholicism, new life is treated as a person from the moment of conception.[6] All forms of abortion and emergency contraception are prohibited[6] except for measures normally taken to save a mother that result in the death of the fetus.[10]

Eastern Orthodox

The morality of contraception continues to be discussed in modern Orthodoxy.[11] At its strictest, the Orthodox Church permits only abstinence as a method of contraception.[12] The sole purpose of sex is procreation.[12] Increasing consensus in Orthodox theology affirms a more liberal line of thought: the intention to conceive children within the sacrament of marriage does not prohibit the regulation of births.[11] Contraception may be used only within marriage; however, a mentality that excludes children on principle is unacceptable.[11] Officially, the Eastern Orthodox Church

has not prohibited contraception.[11] Any method that does not destroy the product of conception may be used[11]; the contraceptive method decision is left to the discretion of the couple.[11]

Permanent forms of contraception may not be used unless a morally justifiable reason exists, such as unavoidable genetic disease, conditions that make raising children impossible, or unacceptable risk of maternal morbidity or mortality.[11] When discussing contraception, health care providers should be aware that intrauterine contraceptive devices may be problematic for some Orthodox Christians and that a detailed discussion of how these devices prevent conception may be required.[13] Since newer hormone releasing intrauterine systems are considered to prevent fertilization as opposed to preventing implantation,[13] they may be more acceptable.

Continuous hormonal contraception such as DMPA, continuous oral contraceptives, or the Mirena, while effective and increasingly popular for the prevention of menstrual cycle-associated symptoms like PMS, dysmenorrhea, and menorrhagia, may not be acceptable to some women who value regular monthly menstruation.

Within the Orthodox faith, abortion and emergency contraception are prohibited.[11] Nonetheless, the church may sanction a termination when medical opinion is that the mother would otherwise die.[6]

Protestantism

Literal interpretation of the Bible has resulted in disapproval of contraception among conservative Protestants, such as Evangelical and Fundamentalist Protestants; the use of contraception would violate God's command to "be fruitful and multiply."[6] Although mainstream conservative Protestants believe that marriages should be procreative, there are no prohibitions against using contraception within a marriage that already has children.[6] Reproductive health decisions, such as the final size of the family, the appropriate conditions for contraception and the choice of contraception, are left to the discretion of the couple.[14] Virtually all liberal Christian communities accept the use of contraception within marriage for the purpose of exercising responsible parenthood, enhancing marital love, and protecting women's health.[6,8,9] Health care providers should begin contraception discussions with Protestant patients by determining which Protestantism denomination the couple are affiliated with and whether they adhere to conservative beliefs about contraception.

Protestantism considers abortion a sin; however, the permissibility of abortion and emergency contraception varies between denominations. Conservative Protestantism has condemned all abortion.[6] The majority of mainstream conservative Protestant denominations permit terminations when the mother's life is threatened.[6] In situations of unwanted pregnancies, the decision is left to the woman.[15] Liberal Protestants favour a woman making her own decision to actualize her moral agency.[6]

Current cultural trends

Religion was not found to be the principal influence on the decision to use contraception within North American Christian populations.[16–18] Canadian statistics demonstrate that the role of religion in determining contraceptive usage between denominations has greatly disappeared; however, contraception use was highest among Canadians with no religious affiliation.[16] Family sizes between Protestants and Catholics in the United States were also found to be comparable.[17] Within the US Latina population, religion was found to influence perceptions of ideal family size but did not negatively affect contraceptive practice.[18] Socioeconomic factors, such as low education levels, were found to influence family size far more than religious factors.[18]

Judaism

Judaism's most central religious principle is belief in a single God.[19] The highest goal in life is to act harmoniously with the will of this God, who demands both justice and compassion. Many followers of Judaism identify as secular Jews.[19] Religious adherents are affiliated with one of four major denominations: Orthodox, Conservative, Reform, and Reconstructionist.[19]

Beliefs about sexuality and family

Sexual relations are valued and encouraged within marriage only.[8] Such relations are addressed in two separate commandments from God. The first is to "be fruitful and multiply," and the second is that a man must not withhold from his wife her conjugal rights.[8] The Reform denomination has expressed more liberal views regarding non-marital sex, recognizing that a couple may find emotional, sexual, and spiritual intimacy without marriage.[19]

Contraception beliefs in Orthodox Judaism

Birth control is generally not encouraged in Orthodox Judaism.[20] Within Judaism, procreation is a religious duty for males but a meritorious act for females[15]; thus, husbands must be informed of and approve the use of contraception.[19,21] Rabbinical rulings allow contraception for medical indications that threaten a woman's life and mental or physical health.[8] Otherwise, contraceptive use is not permitted.[8]

Only a selection of the contraceptive methods available may be used. Religious prohibition against improper emission of semen prohibits male contraceptives, including coitus interruptus and condoms[8,22] Abstinence is prohibited as the woman's conjugal rights are frustrated.[8] The rhythm method is considered unacceptable, as it frustrates the woman's conjugal rights and places her at undue risk for

future pregnancies should she have irregular menses.[15] Male hormonal preparations and sterilization techniques are prohibited, as it is forbidden to impair male reproductive organs.[8]

Once rabbinical sanction is obtained, the most acceptable contraceptive method is one that least interferes with the natural sex act, the sexual pleasure of both partners, and the full mobility and natural course of sperm.[15] Thus, female contraceptives are permissible; however, the type of device used depends on what the family and their rabbi deem suitable.[21] Oral contraceptives are the least objectionable method[15]; the most commonly accepted contraceptive devices include oral contraceptives, diaphragms, and spermicides.[8] Post-coital contraception is also acceptable.[8,15] Intra-uterine devices are controversial; if implantation of a fertilized ovum is prevented, IUCDs are equated to a form of abortion.[15,22] If an additional pregnancy would be life threatening to the woman, reversible sterilization may be permitted.[23]

The Orthodox practice of niddah further influences contraceptive choice.[21] A period of sexual unavailability, niddah, must be observed during a woman's reproductive cycle.[21] This period begins on the first day of the menstrual period and ends seven days after the last sign of bleeding. During this period, spouses may not touch, sleep in the same bed, or have intercourse.[21] Problems can arise with intermenstrual spotting, as the niddah must be respected with every bleed.[21] Additionally, some women participate in a ritual cleansing bath post menstruation.[22] Continuous hormonal contraception may not be acceptable to these women who value regular monthly menstruation and subsequent religious cleansing.

More liberal Jewish denominations, such as Reform, permit birth control use by men and women.[19] Responsible family planning that considers the woman's health and the welfare of the family and future children is encouraged[19]; thus, contraception can also be used for socioeconomic reasons.[19]

Abortion and emergency contraception

Within Orthodox Judaism, rabbinical sanctions for terminations are permitted when continuation of the pregnancy threatens the mother's life through either physical or mental illness.[20] Additionally, some rabbis may permit terminations for incest, adultery, and rape.[15] Conservative Judaism also permits therapeutic abortions for non-life threatening risks to the mother's well-being.[19] Reform Judaism advocates for a woman's right to decide without interference.[19] The permissibility of emergency contraception is similar to the permissibility of terminations.

Current cultural trends

A study published in 2000 found that in Israel, prevalence of contraceptive use decreased with increased religiosity among married Jewish women.[22] Contraceptive method choices, however, were largely influenced by factors unrelated to religious doctrine. Once the decision to use contraception had been made, contraceptive method choices were largely influenced by factors such as suitability of the method to the intended fertility control needs, peer influences, number of current children, age of the woman, and education of the husband and wife.[22]

Islam

Central to the beliefs of Islam is that Allah—God—is the creator of the universe and humankind.[24,25] Islam is a comprehensive system used to regulate spiritual and political aspects of individual and communal life.[24] By studying various religious sources, Islamic jurists classify human actions as obligatory, recommended, permitted, disapproved but not forbidden, or forbidden.[25] Distinct schools of Islamic jurisprudence have developed over time.[26] These schools represent different traditions of interpretation and are not considered distinct denominations.[26]

Beliefs about sexuality and family

Family and marriage are fundamental to Islamic society, yet are not obligatory duties.[27] Individuals unable to undertake the responsibilities of marriage, including the physical care and social, cultural, and moral training of children, should postpone marriage.[26] Parents are obligated to ensure the rights of children are attained.[26] These rights, as prescribed by the Quran, include the right to an education, religious training, future security, and equitable treatment.[9,26] Islam recognizes the normalcy of sexual drives. Sex is permitted provided it is used within marriage and may be used for procreation and pleasure[24,25,28]; each sexual act need not be for the exclusive purpose of procreation.[28]

Islamic beliefs about family planning

The majority of Islamic jurists indicate that family planning is not forbidden.[26] Muslim opinion regarding the further classification of contraception ranges from permissible to disapproved.[26] Some fundamentalist Muslims insist that any form of contraception violates God's intentions.[28]

Historically, coitus interruptus has been permitted in the Quran.[28] When contraception justification is provided, such as health, social, or economic indications, coitus interruptus becomes recommended.[26] Through analogous reasoning, authorities permit modern methods of contraception as lawful, given that they are temporary, safe, and legal.[9] Any device that does not induce abortion[28] and is reversible may be used.[26] Irreversible sterilization methods are not permitted.[25] Contraception may be used only within marriage.[29] Justifiable reasons for contraceptive usage include health

risks, economics, preservation of the woman's appearance, and improving the quality of offspring.[7] Health risks need not be life-threatening.[26] Continuous hormonal contraception, as it is reversible, is permissible as a form of contraception; however, it may not be acceptable to some women who value regular monthly menstruation. In contraception discussions with Muslims, health care providers should first determine whether the couple hold conservative beliefs about contraception and whether they consider contraception to be permissible and encouraged or permissible yet disapproved.

The Islamic concept of *Hejab*—modesty—may affect gynaecological care.[29] Some societies interpret this concept as meaning health care practitioners of the same gender are required to carry out all medical examinations.[30] Such religious restrictions among traditional Muslims may prevent women having intimate examinations when a health care provider of the same sex is not readily available,[24] thereby influencing medical care and contraceptive decision-making.

Abortion and emergency contraception

Abortion of a viable fetus is considered a serious crime equivalent to that of murder.[29] Emergency contraception is also disapproved. However, the prevailing view in Islam is that both are permissible in certain situations.[7] Depending on the Islamic school and length of gestation, religious opinion varies from unconditional permissibility to unconditional prohibition.[26] Valid reasons may include unacceptable risk of maternal mortality, a deformed or non-viable fetus, rape, and economic indications.[26,27,29]

Current cultural trends

Opinion of Muslim adherents regarding contraception varies from permitted to permitted but discouraged to not permitted.[30] When used as synonymous to birth spacing as opposed to limiting the final family size, family planning support increased among traditional couples.[25] In Muslim societies, traditional pressure, familial pressure, and religious pressure influence the decision to procreate.[31,32] Additional factors found to modify contraceptive usage are gender, socioeconomic background, gender and number of current children, location of residence, country of origin, education, opinions of other women in the household, accessibility of resources, misconceptions about the side effects of modern contraceptives, and associations of fertility with femininity.[25,31–34] The low status of Muslim women within certain communities may further hinder contraceptive usage.[26] This inequality is a construct of the communities in which the women live. According to Islamic law, Muslim women are considered equal to men in terms of religious, social, and patriotic responsibilities.[26]

Hinduism

Hinduism, more a confederation of religions than a single dogmatically unified one, holds faith in multiple deities.[35,36] Karma is a strong feature of Hinduism.[37] The basic belief of karma is that one reaps what one sows; it is a demand for accountability that is strongly tied to the belief in reincarnation.[7] The basis of reincarnation is that a continuous cycle of rebirth exists. One may attain emancipation, nirvana, from this cycle through self-inquiry and self-realization.[35] Human form is the highest form of life and is attained after innumerable cycles[37]; thus human life is a unique gift through which one may end the cycle of rebirth.[35]

Beliefs about sexuality and family

Sexual relationships are to be experienced and mutually enjoyed within the limits of marriage.[36,37] Such relations are for both procreation and pleasure.[37] Marriage is viewed as essential for the stability of social order.[37] Reincarnation requires that children pray for the souls of ancestors; however, a cultural emphasis on patrilineage has created a tremendous emphasis on the need for male children.[37] Although cultural influences have traditionally encouraged large families, the sacred families illustrate the prototypes of the ideal family, specifically, small and united with a deeply ingrained sense of honour, duty, justice, and righteousness.[35]

Beliefs about contraception

Religious doctrine lacks any prohibitions or obligations with respect to contraception; thus all contraceptive methods are acceptable, including continuous contraception.[9,37] Generally, there is much flexibility within Hindu doctrine, and most decisions are based on intention and motivation.[33,35] If the contraceptive intent is not morally wrong, no ethical or spiritual harm occurs.[9] Hinduism regards the decision to use contraception as a personal matter for women that is not usually within the scope of religious injunction.[33] The concept of liberty is core to Hinduism—the freedom to choose one's path must exist, as this is the only way to connect with one's spirituality.[35] The decision to use contraception and the choice of contraceptive method is therefore a personal choice.

Abortion and emergency contraception

Conception is considered the result of a divine act whereby life enters the embryo; thus, abortion and emergency contraception are condemned.[35] Despite this apparently firm stance, there is flexibility. Hinduism has traditionally rejected absolutism and encourages individuals to enact their moral agency.[33,35] Although abortion is discouraged, in certain situations, women may decide it is a necessary and moral course of action for their circumstances.[35]

Potential cultural limitations

Sexual health is often considered a taboo topic in traditional Indian families.[38,39] Young women and men may have no

education regarding contraception, normal sexual intercourse, or sexually transmitted infections and may not understand concepts of ovulation and timing of pregnancies.[38] Women are generally not educated about contraceptive options until after the birth of the first child.[40] The birth of the first child is used to assure the families involved that the marriage was a good match[38,40]; thus, among some couples, birth control may be forbidden until the first child is born.[40]

Studies have demonstrated that traditional Indian men do not desire fertility regulation.[38,41] An attempt made by the woman to influence these decisions could potentially result in physical abuse, allegations of infidelity, or divorce.[38] When discussing contraception, it may be prudent to ask married women whether contraceptive methods should first be discussed with the husband or if permission to discuss contraception with the wife must be gained from the husband.[38]

Current cultural trends

Despite the religious permissibility of contraception, not all Hindu women utilize contraceptive methods.[33] Lack of family planning success in India among Hindu women has been attributed to cultural resistance, sexism, and lack of female empowerment.[35] Factors found to decrease contraceptive use include lower education levels,[33,42] higher numbers of female family members residing in the home, and decreased accessibility of services.[33]

Buddhism

The essence of Buddhism is abandonment of preoccupations with materialistic desires and the passions of life[9]; however, specific Buddhist practices are greatly influenced by the cultural traditions and customs of adherents.[43] The greatest objective of Buddhism is enlightenment, which is attained through self change and inner transformation.[44] Most Buddhists believe in kammatic Buddhism, also known as reincarnation, and strive for nirvana, attenuation of the cycle of rebirth.[43] Kamma is a neutral term that means any action produces an effect, positive or negative, in this life and the next.[44] Nirvana occurs when prior bad kamma has been balanced by good kamma.[44]

Beliefs about sexuality and family

Buddhism does not stress procreation; thus, the tradition of high fertility is related to cultural rather than religious factors.[9] Marriage and sexuality are considered positive; however, marriage is not a religious duty.[43] Sexuality is neither sinful nor spiritually redeeming nor consecrated through marriage.[44] Sexual activity and thoughts, because of their instinctual and unconscious nature, serve to reinforce unenlightened tendencies.[44] Buddhist practice aims to transform the deepest inclinations of individuals; thus, sexuality is considered an obstacle to enlightenment.[45]

Contraception beliefs

The Buddhist attitude towards family planning allows both men and women the right to use any non-violent form of contraception.[45] Family planning is permissible and encouraged when the intention to use contraception is wholesome or non-maleficent.[43,45] According to Buddhist theory, life begins at the moment of conception, thus non-violent contraceptive methods are those that do not destroy the products of conception.[43,45] There are no specific prohibitions or obligations regarding contraception in Buddhist theory[9]; thus, modern contraceptive methods are permissible. Abstinence is the method of choice; however, other methods, including permanent sterilization and continuous contraception, are not opposed.[45] IUCDs may be problematic for those who believe that they work by preventing implantation. A discussion about other likely mechanisms of action for the IUCD, including prevention of fertilization,[13] may influence acceptability. Contraception may not be used to engage in self-indulgent activities such as promiscuity.[43] Such behaviour is considered to result from ineffective control of one's passions.[43]

Abortion and emergency contraception

Although abortion and emergency contraception are considered murder, both are permissible in certain situations.[45]Any situation can be used to justify terminations (such as maternal health, rape, economic hardship) provided that the intentions of the mother are ethically sound.[43] The moral severity of the termination depends on the state of mind of the mother; thus, unwholesome intentions, such as greed, hatred, or anger, are considered immoral.[43] When terminations are required, early terminations are preferred to later terminations.[43]

Current cultural trends

In Thailand, the majority of Buddhist women of reproductive age utilize contraception.[46] Despite this increased usage, uncomfortable feelings toward contraception remain. There is a sense that it is against the traditional culture of sexual values and may lead to widespread premarital sexual intercourse.[43] Also, proper education regarding accurate contraceptive use among women is lacking.[43,46] This is important since evidence indicates that women are more involved in contraceptive usage than men.[43]

Chinese Religious Traditions

Although distinct traditions, both Confucianism and Taoism teach that peace and harmony were the original state of the universe and are the ultimate goals of human life.[7,47] Neither tradition believes in a creator God separate from the world.[47] According to Confucianism, the most

important aspect of being human is conduct within the family.[48] Taoism emphasizes Tao, the way of nature, and human spontaneity; the central concern of Taoist tradition is to return to nature and spontaneity and become one with the natural flow of life.[47]

Beliefs about sexuality and family

Family has occupied a valued position in Chinese civilization since early times. In Chinese tradition, the greatest tragedy is a lack of descendants.[47] Families must not merely have children, but have good, healthy, talented children.[7] Thus, the Chinese have long been conscious of the need for careful planning to ensure quality children.[7,47]

The four equal purposes of human sexuality are reproduction, spiritual elevation, pleasure, and health.[7,47] Confucianism has traditionally emphasized the reproductive aspects of sexuality whereas Taoism has emphasized health and longevity.[47] The majority of modern Chinese accept the general philosophy of sexuality, in that it is vital to pleasure, health, and reproduction.

Contraceptive beliefs

There is no religious opposition to any contraceptive method in Confucianism or Taoism. All modern approaches to family planning are acceptable.[47] Because of beliefs regarding harmony with nature, natural methods of contraception are more acceptable among traditional ethnic Chinese.[7,47] These beliefs are based on various concepts of natural principles, such as the rhythmic change of pin and ying, conceived of by Confucians and Taoists.[48] Thus, there is increased trust in contraceptive methods such as withdrawal and rhythm. Although other forms of contraception, including continuous contraception, are not opposed, women may not choose to use these methods.

Abortion and emergency contraception

Generally, abortion and emergency contraception are not endorsed; however, neither are prohibited through explicit code.[7,47] Chinese attitudes are mostly tolerant and compassionate. Terminations are not viewed as wrong unless completed unnecessarily, and they have never been considered equivalent to murder.[47]

Current cultural trends

Despite the permissibility of all contraceptive methods, barriers to effective, accurate use exist. According to recent studies, ethnic Chinese and Korean women in Vancouver held many negative attitudes against oral contraceptives which became barriers to proper usage.[49–51] The main concerns were fears of weight gain and infertility and cultural perceptions that women using oral contraceptives were bad or promiscuous.[49,51] Of Chinese women presenting for pregnancy termination, the most frequently used forms of contraception were condoms, coitus interruptus, and the rhythm method.[49] The efficacy of these contraceptive methods was hindered, as all methods required cooperation of the male partner. When power imbalances exist within the relationship, the ability to prevent unwanted pregnancies decreases.[50] Another barrier to the effective use of the rhythm method was a lack of knowledge of how to use the method, particularly for women with irregular menses.[50]

DISCUSSION

Christian teachings vary depending upon the denomination. Roman Catholicism teaches that the primary purpose of sexual relations is procreation within marriage. Roman Catholics are therefore forbidden to use medical or physical contraceptive methods. Natural contraceptive methods such as abstinence and the rhythm method remain permissible. Although Eastern Orthodox Christianity holds a similar view of the purpose of sexual relations, most contraceptive methods are permitted. Among conservative Protestant groups, the need to procreate reflects a literal interpretation of the Bible, yet it is common for adherents to use birth control after the family is complete. Liberal Protestants, while encouraging procreation, accept that this is not the sole purpose of sexual relations. Among Protestants, no specific forms of contraception are forbidden. In Orthodox Judaism, having multiple children is encouraged; however, contraception may be used for medical indications. Islam similarly encourages large families and requires parents to ensure that the basic rights of children are met. Family planning is not forbidden but is more commonly used by traditional adherents for birth spacing rather than to restrict the overall size of families. Despite this permissibility, not all adherents of Islam are aware that contraceptive use is permitted. According to Hindu doctrine, women were created to have children, particularly sons; however, there are no specific religious prohibitions against contraception. Buddhist religious dogma does not stress procreation; thus, contraception may be used. Despite the permissiveness of Hinduism and Buddhism, cultural factors often encourage large families and this may hinder contraceptive use. Chinese religious traditions, such as Confucianism and Taoism, do not prohibit birth control. Cultural views that associate certain contraceptive methods with promiscuous behaviour, a lack of information about the safety of contraceptive methods, and lack of access because of the expense or availability of contraceptives may limit their effective utilization.

Despite the importance of religion in influencing decisions, practitioners of a faith do not necessarily adhere to the prescribed doctrines of their faith. Ninety-five percent of women in North America will use a contraceptive method at some point during their reproductive years, despite the prohibition of modern contraception by some religions.[52]

As confirmed by various experts and literature sources, a woman's ability and willingness to utilize contraception is affected by whether she identifies with orthodox, traditional, or liberal interpretations of her religion. Contraceptive behaviour is often influenced by additional factors such as suitability of the specific method to fertility control, peer influences, and cultural effects.[22] Such factors appear to modify the acceptance and application of various theologies. Furthermore, differences in contraceptive usage among couples are more reflective of differentials in husband-wife communication, gender roles, access to contraception, traditional values regarding appropriate family size, cultural restrictions, and social class of theological restrictions.[8]

The contraceptive attitudes and behaviours for the different religions reviewed here do not necessarily reflect the behaviours of North American women. When faced with the challenges of acclimating to a new society and way of life, women may anchor more strongly to traditional religious and cultural expectations with respect to family, sexuality, and fertility. Evidence from the broader world view described here may provide insight into the cultural values and behaviours that can influence recent immigrants.

Finally, health care providers must be cautious that they do not attribute stereotypical religious, social, and cultural characteristics to women seeking advice about contraception. The generalizations presented in this review should enhance awareness and recognition of the environments and value systems that may influence contraception decision-making in couples of different faiths. This increased cultural competence should be tempered by the understanding that each patient encounter is unique. The values that an individual woman holds may not be in keeping with the documented official teachings of her religion or the expected cultural norms reported by other members of the same culture.

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APPENDIX

1. What is the stance on family planning from insert religion as it relates to
   a) contraception?
   b) postcoital (emergency) contraception?
   c) termination of early pregnancy (before 12 weeks)?
2. Is this doctrine widely adopted and followed by members of the religion? Are there many penalties, religious or otherwise, for those who fail to follow this doctrine?
3. Is there a difference in acceptability across the denominations of this faith?
4. What are insert religion teachings regarding sex, sexuality, and family?
5. What family planning practices, if any are allowed? Are any methods of contraception permitted? Forbidden? Somewhere in between?
6. Are there practices/teachings in this religion that could limit a woman's ability to take personal responsibility for whether or not she becomes pregnant?
7. Are there any resources that you can direct me to assist with my research?