

Religious and Cultural Influences on Contraception

Amirrtha Srikanthan, Robert L. Reid, MD, FRCSC

Division of Reproductive Endocrinology and Infertility, Department of Obstetrics and Gynecology, Queen's University, Kingston ON

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 : Éclaircir 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.

Key Words: Religion, contraception, emergency contraception, abortion, Buddhism, Christianity, Chinese traditional beliefs, Hinduism, Islam, Judaism

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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 prohibited⁶ 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

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