



Influence of religion and gender on the birth control attitude among young adults

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Abstract

The prime objective of the study was to evaluate the attitude of the young couple towards the family planning and the influencing factors of the religion and gender on it. Questionnaire method was used to collect data from 305 participants including Females (N=226) and Males (N=79) in the age group of 18-26 from southern and central Kerala. Convenient sampling method was used by the researcher to select participants. The study revealed that religion and gender have an influence on the family planning among young adults.

Keywords: family planning, contraceptives, religion, gender

Introduction

Religion is at the heart of the debates centered around contraceptive use. People in primitive and preliterate societies have tried to control birth rate by practicing infanticide and abortion. When primitive women understood the advantages of conception control, they tried to use contraception (Schenker, 1993) [9]. Religious view of children is helping to understand religious views of birth control, and religion primarily focus on the family. Religious views on various forms of contraception were varied and they shared a common value such as, children and their lives are a gift from God. Therefore, there is a common perception that the act of sexual intercourse is mostly for procreation (Yen, 2021) [10]. But it was widely practiced as pleasure seeking behavior among most of the people. Birth control is the practice of controlling the number of children by using various methods of contraception (Oxford Advanced Learner's Dictionary, 2010) [7].

India has many population control policies for controlling the population explosion. Population explosion was a burden for the economic development of India. The one of the most important policies was the Government of India launched the National population policy 2000 [6], it further aims to strike a balance between population expansion and resource availability and to improve everyone's productive health at every stage of their lives. National population policy (2000) [6] helps to uplift the living standards of the people and provide equal opportunities to become productive individuals in society. This policy was implemented to control the overpopulation. Even so, the misconceptions negatively affected the contraceptive usage. Many of the women in developing countries want to avoid pregnancy and they are not using modern contraceptives. There are lots of misconceptions existing about family planning. People believed that such practices negatively affected on sexual desires and

performances, family planning puts the health of their wife at risk, long-term use of family planning methods will cause infertility, family planning is form of abortion and family is expensive. These existing misconceptions may reduce the confidence among women who use the contraceptives. But the fact is, by using contraceptives individuals can prevent sexually transmitted infections, and decrease the chances of getting infected with HIV, family planning prevent pregnancy and help couples avoid unplanned pregnancies. (Manila Standard Lifestyle, 2019) [5]. These are the main barrier to use contraceptives.

In our society, women should always be undergone to tubal ligation and control birth rate with their delivery. The rate of men undergone vasectomy and other type of birth control techniques were very low. Popular technique followed by men was the usage of condom. In India, the situation was quite different at five decades ago when family planning was introduced. The number of accepting family planning technique was mainly vasectomy, was three to four times more than that of women. This trend continued for over two decades. A dramatic change occurred when vasectomy programme was pushed hard, and it became a political issue resulting in the defeat of ruling party. Thereafter vasectomy became quite unpopular, and number of vasectomies became quite acceptors started dwindling down (Balaiah, 2007) [2]. An existing unwritten societal norm that sterilization was practiced commonly among females, tubectomy was mostly practicing sterilization method among people than vasectomy. All these evidenced that there is a gender difference in practicing family planning techniques. Women's have the pressure from the medical professionals, parents, and their partners to undergo sterilisation during the time of delivery.

Abortion is still a difficult, contentious, and even unresolved issue for some religious groups. But in the religious teachings

were said abortion is a wrong process and it takes away a child’s right to live. So, the partners or the family members will not support this. Nowadays the societal view about the abortion is not getting a warm acceptance. The main reason for the non-acceptance of abortion is that it will adversely affect the mother’s health. These process where do have in secretly through the pills, but in case the society will know this, people think this may unethical. That is why the contraceptives, and the abortion were became the ethical issue of the society. Contraceptives widely used as a means for safest sexual practices and for the prevention of unwanted pregnancies among adults and adolescents.

Most of the religions have taken strong positions against the abortion and they have their own religious values, norms, and ethics. Religion opposes abortion in all circumstances, because every religious teaching said abortion is wrong and do not do it. But in fact, not every people will accept this, most of them were live out their religious beliefs and rituals. In some cases, the religion allows the abortion, because it is necessary for saving the life of the mother (Aramesh, 2019) [1]. Every individual believing in their religion, but not all of them follow what those religions teach. Religious views on the use of contraceptives were also against to the national population policy. Religion always promotes natural birth control techniques, but followers go beyond it and use various types of birth control devices.

Indiscriminative usage of contraceptives creates adverse effects among weaker sections such as tribals. In the tribal setting, people faced many maternal and child birth problems. Most of the tribals are not aware about the contraceptives and its proper usage. The real health issues prevailing among the tribal populations are the wide spread poverty, illiteracy, malnutrition, non-availability of safe drinking water and unhygienic living conditions and poor maternal and child health services have been reported in several studies are the possible contributing factors for dismal health conditions prevailing among the tribal communities in India. Maternal care and child cares are important aspects in health care setting which are largely neglected among such marginalised groups. The health status of the tribals in lower and inferior, compared to that of the general population. Several studies have suggested higher infant mortality rate, higher fertility rate and greater malnourishment. Malnutrition is a common and has greatly affected the general physique of the tribals (Narayana, 2013) [4].

The use of medicines intended to postpone or delay menstruation is excessive among tribals. It causes their infertility. While these problems persist, they often apply contraceptive measures. As a result of all this, the birth rate has comedown drastically in many communities. As the part of the culture, tribal women during menstruation have to shift to a separate place called *Valappura*. Because they are not allowed to stay in their own house during the menstruation. To prevent this, they try to postpone menstruation by using medicines. The study of (Ghule, 2015) [3] evidenced that the over usage of Oral Contraceptive Pills (OCPs) will cause so many side effects in the body. Sometimes oral pills do not suit the body, weight gain, vomiting, stomach ache can happen. OCP use long term would lead to irregular menstrual cycles and ultimately result in women’s infertility. In the midst of the above mentioned condition, the attitude of the young couple towards the family

planning and the influencing factors to be assessed. So, the study is entitled as ‘influence of religion and gender on the birth control attitude among young adults.’

Objectives

- To find out whether there is any gender difference in attitude towards birth control among young adults.
- To find out whether there is any difference in attitude towards birth control among young adults based on their religion.

Hypotheses

- There will be a significant gender difference in attitude towards family planning among young adults.
- There will be a significant difference in attitude towards family planning among young adults based on their religion.

Sample

The sample consists of 305 married young adults from southern and central Kerala through convenient sampling. Researcher used questionnaire method for collecting data.

Tools

A self- prepared demographic data sheet was used to collect personal details such as age, gender, religion etc. Family planning and birth control attitude scale Rajamanickam, (2020).

Results and Discussion

Table 1: Mean standard deviation and corresponding ‘t’ value of family planning attitude of males and females

Variable	Mean of Males (N=79)	SD	Mean of Females (N=226)	SD	‘t’ value
Gender	190.835	21.88	186.6062	34.293	1.025

The ‘t’ value (1.025) of males and females in family planning not statistically significant. Gender is not an influential factor in family planning attitude among young adults. The difference is not statistically significant. It may be due to gender is not a factor which determines family planning attitude.

Hence, hypothesis there will be a significant difference in attitude towards family planning among young adults on their gender is rejected.

Gender is not an influencing factor here, because now everyone has getting equal education. Perhaps due to its effect, gender is not influenced the family planning. Here does not create gender disparity. Males and females are equally involved in the family planning.

Table 2: ANOVA of attitude towards family planning among young adults with respect to their religion

Family Planning		Sum of Squares	df	Mean Square	F
	Between Groups	12492.285	2	6246.142	6.492*
	Within Groups	290581.564	302	962.191	

*Significant at 0.05 level of significance

From the above table calculated ‘F’ value for family planning is 6.492 which is higher than the table value and it significant

at 0.05 level of significance and the hypothesis is accepted. The results of group mean analysis given below.

Table 3: Post hoc test with respect to religion

Religion N	N	Subset for alpha = 0.05	
		1	2
Christian	126	180.7143	-
Muslim	44	186.7500	186.7500
Hindu	135	-	194.5333
Sig.	-	.223	.116

The group mean analysis of the above table is indicating that Hindu religion is having high family planning attitude 194.5333. Muslim religion having the low family planning attitude than the Hindu. Christians kept a difference with Hindus, Muslims do not differ with other to religious groups. Sample belonged to Hindu religion, having the high family planning attitude, because they are giving more importance to age at the marriage. Most part of the Hindus were aware about the family planning methods and give importance to wife’s health. Here the religion is an influencing factor in the family planning because every religion follows their own culture, traditions, beliefs and values. Present findings supported the study of Sinha (1986) found that Hindus have more positive attitude towards family planning than Muslims. According to Priyanka (2014) [8] viewed that Hindu females of both younger and older group keeps adequate diets as most important factor for the wife’s health. Secondly, they give importance to age at marriage then proper gap between children, number of children and lastly pollution free environment. Here the Muslim religion have the low family planning attitude than the Hindu, because they have lack of the proper education, and they are more religious. Muslim religion promoted the number of children and early marriage.

Conclusion

Family planning policy and usage of contraceptives evoke multifaceted impacts among communities. Religion, gender, age and many more unexplored factors directly and indirectly influenced to generate an attitude regarding it.

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