



## ENCYCLOPEDIA OF WOMEN AND ISLAMIC CULTURES

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### EWIC PUBLIC OUTREACH PROJECT

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#### EWIC Staff Report: **CONTRACEPTIVE USE IN MUSLIM-MAJORITY COUNTRIES**

This concept sheet explores contraceptive use in Muslim-majority countries. Birth control use has been on the rise in recent years with the increasing adoption and awareness of family- planning practices.

Data gathered by Pew research forum indicates that in Muslim-majority countries the percentage of married women between ages 15-49 who are using medically accepted forms of birth control, (considered for this study to be forms of birth control such as condoms, birth control pills, spermicidal foams, intrauterine devices or tubal ligations) is at 39.4 %. On the other hand, married women in these same countries between the ages of 15- 49 who are using other forms of birth control is listed at a slightly higher percentage, 47.8%. As a comparison married women between the ages of 15-49 in non-Muslim –majority, less developed countries using any method (read non-medical birth control forms such as coitus interruptus and prolonged breastfeeding and the rhythm method) of birth control is at 68.3% while women using “modern” (or medical) forms of birth control in these same regions is at 57.8%.

Statistics given in the Pew report for countries listed as non-Muslim majority, and “more-developed” reveals numbers only marginally higher than those in the so-called “less- developed” regions of the world. These numbers are: for women between the ages of 15-49 who are married the use of medical birth control methods was at 68.5% and for women using non-medical methods of birth control the total percentage was 57.9%.

While information on abortions in Muslim –majority countries is somewhat scarce in Albania, Azerbaijan, Bahrain, Kazakhstan, Kyrgyzstan, Tajikistan, Tunisia, Turkey, Turkmenistan and Uzbekistan abortion is allowed, “Without restriction to reason” but with gestation limits. In the countries of Algeria, Gambia, Malaysia, and Sierra Leone abortion is permitted in order to pre-serve the mental or physical health of the mother. In Burkina Faso, Chad, Comoros, Djibouti, Guinea, Jordan, Kuwait, Maldives, Morocco, Niger, Pakistan, Qatar and Saudi Arabia abortions are permitted when in order to save the life of the mother or to preserve the physical health of the mother. In Egypt, Iraq, Mauritania, Oman, Senegal and Somalia abortion is permitted only to save the life of the mother. <http://www.pewforum.org/future-of-the-global-muslim-population-related-factors-contraception.aspx>

Many of the existing anti-choice abortion laws in Africa are tied directly to colonial codes. These dated and patriarchal colonial codes have remained in place, and had a direct effect on societal attitudes regarding abortion. Dr. Brookma-Amissah current vice president of the reproductive-health nongovernmental organization, Ipas has noted that, “It is not as if it is by custom that Africans are against abortion. Rather, it is the colonial laws that we need to get rid of.” <http://latitude.blogs.nytimes.com/2011/12/15/africas-abortion-wars/>

Between 2007 and 2010 the World Bank collected data on contraceptive prevalence among women ages 15-49 in Muslim-majority countries. The World Bank, unlike the PEW research did not differentiate between medical or non-medical forms of birth control. Instead the World Bank defines contraceptive use as the “percentage of women who are practicing or whose sexual partners are practicing, any form of contraception.” The results of their data are in the chart below  
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Afghanistan (2008) 23%	Mauritania (2007) 9%
Bangladesh (2008) 53%	Nigeria (2008) 15%
Djibouti (2008) 23%	Oman (2008) 24%
Egypt (2009) 60%	Pakistan (2008) 27%
India (2007) 54%	Saudi Arabia (2007) 25%
Indonesia (2010) 56%	Syria (2010) 54%
Jordan (2009) 59%	Tajikistan (2007) 37%
Maldives (2009) 35%	Turkey (2008) 73%

According to a 2008 DHS press report on medical methods of contraceptive use worldwide, contraceptive use by married women has been on the rise across the board. The DHS press release cited Egypt as an example, where 57 percent of married women indicated that they were using some form of “modern” contraception in 2003. This number was up considerably from the 1988 statistics for Egypt which reported contraceptive use at 36 percent.

The same DHS press release also noted that injectable and oral contraceptive forms of birth control were the most popular methods employed in sub-Saharan Africa. Citing Egypt again as an example, the DHS report noted that more than one-third of women in Egypt use Intrauterine Devices (IUDs). In Muslim-majority countries married couples engaging in dialogue concerning contraceptive use ranged from very low, 7 percent in Nigeria, to relatively high, forty percent in Bangladesh and very high in Jordan with a reported sixty-three percent of spousal partners engaging in conversation in regards to family planning methods. <http://www.measuredhs.com/Who-We-Are/About-Us.cfm>

In Iran, contraceptive use is at 81.5%. This high rate of contraceptive use has been contributed to the support of religious leaders, education, legitimization of family -planning programs by both the government and religious leaders, as well as solid support in the form of free family planning services from the government. The 2011 World Health Statistics rates Iran as among the highest in the region for family-planning services.

Motlaq, M. E., Eslami, M., Yazdanpanah, M., & Na-khaee, N. (2013). Contraceptive use and unmet need for family planning in Iran. *International Journal of Gynecology & Obstetrics*.  
[http://www.who.int/whosis/whostat/EN\\_WHS2011\\_Full.pdf](http://www.who.int/whosis/whostat/EN_WHS2011_Full.pdf) [Published 2011]

In Indonesia 88% of the population is Muslim. Commitment to family-planning in Indonesia has given rise to 60% of married women utilizing contraceptives. Since 2010 the Indonesian government has prioritized family-planning by providing free services to seven of its 33 provinces. Additionally, at the London Summit on Family Planning the Indonesian government agreed to provide family-planning services at no-cost to the rest of the country by 2014 as a part of the Universal Healthcare Coverage program. <http://advancefamilyplanning.org/indonesia>