

Decision-Making in Family Planning: Women, Planned Children and Contraceptive Methods in Muslim Family

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Abstract

Family planning programmes are not optimal for Muslim women; this is inseparable from the view that contraception is controversial in Islamic teachings. This study aims to examine the influence of the ideal number of children, the role of husbands, the desired last child, and the type of contraception in Muslim women of childbearing age from the perspective of Islam and health. This study used data from the 2017 IDHS in Aceh, West Sumatra, Riau, West Java, Central Java, and East Java on 5797 Muslim women from January to December 2022. The results of this study showed a significant association between the ideal number of boys ($p < 0.001$; PR = 1.332), number of daughters ($p < 0.001$; PR = 1.289), husbands who decide ($p = 0.004$), and contraceptive types ($p < 0.001$; PR = 1.205) with family planning use. The family planning use is influenced by factors such as gender preference, joint decision-making, and the type of contraceptive used. Modern contraceptives are more effective and reliable, suggesting a trend toward modern methods for family planning.

Keywords:

Contraceptive, Family Planning, Husband, Muslim Women

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Introduction

Developing nations should implement birth control measures to combat the threat of overpopulation due to a lack of resources.¹ Population growth is inevitable in both Muslim and Western countries. The family planning program is a strategic approach designed to address population growth and ensure sustainable development. The family planning programme that controls the number of children is a programme that is opposed by some Muslims, even though Muslims need a large population to face the times (war, science, and technology). The rejection of family planning programmes continues in various Islamic countries or countries with a majority Muslim population.²

The First Malaysia Plan and subsequent national development plans drastically increased the Contraceptive Prevalence Rate (CPR). However, CPR has stagnated due to a shift in policy interest from Family Planning (FP) to family development and reproductive health.³ This condition has

¹ Saima Waheed, "Islam and Myths about Family Planing: The Impact of Greenstar Media Advertisement Campaign on the Mindset of the Rural Dwellers of Pakistan," *Journal of Islamic Thought and Civilization (JITC)* 10, no. 1 (2020): 333–45, <https://doi.org/https://doi.org/10.32350/jitc.101.18>.

² Ibnu Irawan, "Argumentasi Keluarga Berencana Dalam Hukum Islam (Studi Fatwa Syaikh Mahmud Syaltut).," *JAWI* 3, no. 2 (2020): 178–203, <https://doi.org/dx.doi.org/10.24042/jw.v3i2.8078>.

³ Tey Nai Peng, "Trends in Delayed and Non-Marriage in Peninsular Malaysia," *Asian Population Studies* 3, no. 3 (2007): 243–61, <https://doi.org/doi.org/10.1080/17441730701746391>.

led to many contraceptive users opting for less effective traditional methods.⁴ Comparatively to other South Asian nations, Pakistan's CPR increased modestly from 5.5% in 1969 to 9.1% in 1985 and then fluctuated around 20% in the 1990s and 2000s before reaching 34% in 2019.⁵ The low CPR in Pakistan can be attributed to the strong anti-family planning (FP) sentiment among the conservative Islamic population.⁶

Mahmud Syaltut, a Muslim intellectual who saw the benefits of the family planning programme, then issued a ruling on the permissibility of the family planning programme.⁷ However, Mahmud Syaltut forbade limiting children to a certain number.

Indonesia is one of the most populous countries in the world, with a population of 273,879,750. This large population will be a double-edged sword for the Indonesian people because, if managed properly, it will be an

⁴ Keh Yoong Hoo, "Factors Associated with Contraceptive Use in Malaysia and Pakistan," *Pertanika Journal of Social Sciences and Humanitie* 31, no. 1 (2023): 265-281., <https://doi.org/10.47836/pjssh.31.1.14>.

⁵ Lavleen Mohan Singh, "Determinants of Modern Contraceptive Use and Unmet Need for Family Planning among the Urban Poor," *Journal of Social Sciences* 8, no. 5 (2020): 451-473., <https://doi.org/doi.org/10.4236/jss.2020.85031>.

⁶ Aneel Shahzad, "Differentials in Female Age at Marriage in Pakistan: Have They Changed or Not?," *Nust Journal Of Social Sciences And Humanities* 3, no. 1 (2017): 71-94., <https://doi.org/doi.org/10.51732/njssh.v3i1.19>.

⁷ Irawan, "Argumentasi Keluarga Berencana Dalam Hukum Islam (Studi Fatwa Syaikh Mahmud Syaltut)."

advantage for them.⁸ Since 1970, the Indonesian government has introduced the term "family planning, a movement to form a healthy and prosperous family by limiting births. However, the Indonesian people could not easily accept the implementation of family planning because Indonesia, as a country with the largest adherents of Islam in the world, always makes the Quran and Hadith a way of life.

A marriage aims to maintain the continuity of life for the next generation; the progress of Islam will depend on the next generation. Islam favours many quality offspring, both male and female, but behind that, Islam also makes it easy for every Muslim to regulate their offspring if driven by strong reasons.⁹

Islam is *Rahmatan lil 'Ālamīn* (a blessing for all worlds); with the rapid advancement of technology and science in the Islamic community, Islam proposes to stick to the Source of Islamic Law, namely the Qur'an and Hadith.¹⁰ Islamic society is an inseparable part of the world; it cannot escape from issues concerning the legal

⁸ Emilia Sari, "Family Planning Perspectives on Ulama Hadith [Keluarga Berencana Perspektif Ulama Hadis]," *Sosial Dan Budaya Syar'i* 6, no. 1 (2019): 55–70, <https://doi.org/10.15408/sjsbs.v6i1.10452>.

⁹ Nurhayati, *Fikih Kesehatan: Pengantar Komprehensif*, ed. Azhari Akmal Tarigan (Jakarta: PT. Kencana, 2020).

¹⁰ Muhibbuthabry, "Qanun, Religious Education, Religiosity and Sexual Activity among Muslim Youth," *HTS Teologiese Studies/Theological Studies* 79, no. 1 (2023): 8020–29, <https://doi.org/https://doi.org/10.4102/hts.v79i1.8020>.

position of a problem.¹¹ New issues with legal status clearly and explicitly stated in the Qur'an and Hadith are believed not to cause pros and cons among the Islamic community; however, issues whose legal status is not yet clear in the two sources of Islamic law are where *ijtihad* (the ulema agreement) comes into play to resolve new legal issues.

Family planning is an action that helps individuals or couples limit children, avoid unwanted births, obtain desired births, regulate the interval between pregnancies, and determine the number of children in the family.¹² Family planning is aimed at controlling and limiting births or efforts to temporarily or permanently prevent pregnancy in connection with certain situations and conditions, both for the family concerned and for the benefit of society and the state.¹³

Family planning issues still often raise differences of opinion among ulemas, where some allow and forbid the types of contraceptives recommended in the family

¹¹ Nurhayati, "Funeral Processes During the COVID-19 Pandemic: Perceptions Among Islamic Religious Leaders in Indonesia," *Journal of Religion and Health* 60, no. 1 (2021): 3418–33, <https://doi.org/https://doi.org/10.1007/s10943-021-01418-z>.

¹² Lusiana Weni, "Determinants of Long-Term Contraceptive Method Selection Among Active Family Planning Acceptors at Pedamaran Health Centre," *Contagion : Scientific Periodical of Public Health and Coastal Health* 1, no. 1 (2019): 9–16, <https://doi.org/10.30829/contagion.v1i01.4819>.

¹³ Al-Fauzi, "Keluarga Berencana Perspektif Islam Dalam Bingkai Keindonesiaan," *Lentera* 3, no. 1 (2017): 1–10.

planning programme.¹⁴ The views of various ulemas on family planning, namely the first Islamic religion that forbids vasectomies and tubectomy types of contraception because they have permanent properties, but some ulemas allow contraception.^{15,16}

Some ulemas oppose family planning, citing the Prophet Muhammad's desire to have more Muslims in the afterlife. In contrast, others view it as a sinful act or an outside concept. Some adherents believe Islam promotes family planning, while others view it as a sinful act or an outside concept. The text also explains that some adherents do not use contraceptives because it is not their custom.¹⁷

¹⁴ Muhammad Ancha Sitorus, "The Effect of Media Frequency and Information Exposure About Family Planning on Perceptions of the Ideal Number of Children: An Analysis of 2017 IDHS Data [Pengaruh Frekuensi Media Dan Keterpaparan Informasi Tentang KB Terhadap Persepsi Jumlah Anak Ideal:]," *Jurnal Kesehatan* 14, no. 1 (2021): 84–94, <https://doi.org/10.24252/kesehatan.v14i1.16929>.

¹⁵ Eva Dyah Pratiwi, "Agama Dengan Keikutsertaan Keluarga Berencana (KB) Dan Pemilihan Jenis Alat Kontrasepsi Pada Pasangan Usia Subur (PUS) Di Desa Argomulyo Sedayu Bantul Yogyakarta.," *Jurnal Ners Dan Kebidanan Indonesia* 3, no. 1 (2015): 1–9, [https://doi.org/http://dx.doi.org/10.21927/jnki.2015.3\(1\).1-9](https://doi.org/http://dx.doi.org/10.21927/jnki.2015.3(1).1-9).; Siti Aisyah, "Islamic Law Analysis of the Implementation of Family Planning Village (KB) (Case Study in Inrello Village, Keera District, Wajo Regency) [Analisis Hukum Islam Terhadap Penerapan Kampung Keluarga Berencana (KB) (Studi Kasus Di Desa Inrello Kecamatan Keera]," *Mazahibuna* 2, no. 1 (2020): 1–10, <https://doi.org/https://doi.org/10.24252/mh.v2i1.14283>.

¹⁷ Hemat Shafiqullah, "The Family Planning Conundrum in Afghanistan," *Health Promotion International* 33, no. 1 (2016): 311–317, <https://doi.org/doi:10.1093/heapro/daw081>.

In Malaysia and Pakistan, the prevalence of modern contraception decreased with age at first marriage, while traditional methods increased. Rural women reported a higher rate of modern contraception use in Malaysia, while urban women were more likely to use a traditional method in Pakistan.¹⁸

Muslim families today have experienced many changes in family life, including more wives having higher education and working to improve their family finances.¹⁹ The increasing number of modern contraceptives is one of the factors that encourage the use of family planning among Muslims. Family planning policies have significantly contributed to helping working women increase family income and thus reduce the risk of poverty in the family.²⁰

The great willingness to have a large family, the perceived health benefits of family planning, and concerns regarding modern contraceptive methods were connected to religious interpretations. The majority of ulemas stated

¹⁸ Hoo, "Factors Associated with Contraceptive Use in Malaysia and Pakistan."

¹⁹ Sabawoon Ajmal, "Factors Affecting Contraceptive Use and Unmet Need among Currently Married Women in Afghanistan: Further Analysis of the 2015 Afghanistan Demographic and Health Survey," *Journal of Global Health Reports* 2, no. 1 (2018): 1–14, <https://doi.org/https://doi.org/10.29392/joghr.2.e2018037>.

²⁰ Dea Sa'adah, "Analisis Praktik Keluarga Berencana Pada Wanita Karir Di Kecamatan Cilamaya Kulon Kabupaten Karawang Perspektif Masalah Mursalah," *Journal Riset Hukum Keluarga Islam* 1, no. 2 (2022): 97–103, <https://doi.org/https://doi.org/10.29313/jrhki.v1i2.579>.

that family planning was not prohibited in Islam unless it harmed the body.²¹

Numerous obstacles exist regarding the use of contraceptives, particularly for women; they are perpetually confronted with obstacles in this context.²² The decision regarding female contraception depends on the husband and wife's mentality, family members, religion, education, and financial situation, among other factors. In addition, numerous socioeconomic and cultural factors also impact the couple's contraceptive use.²³ It is also noted that demographic factors such as age, son preferences, and the number of sons and daughters play an important role in contraceptive utilisation.²⁴ This study aims to examine the influence of the ideal number of children, the role of husbands, the desired last child, and the type of contraception on the use of contraception in Muslim women of childbearing age from the perspective of Islam and health.

²¹ Shafiqullah, "The Family Planning Conundrum in Afghanistan."

²² Md. Shahidul Islam, "Determinants of Contraceptive Method Choice in Bangladesh: Male Perspectives," *South East Asia Journal of Public Health* 3, no. 1 (2014): 50–56., <https://doi.org/https://doi.org/10.3329/seajph.v3i1.17711>.

²³ Md. Shahidul Islam, "Women Knowledge, Attitude, Approval of Family Planning and Contraceptive Use in Bangladesh," *Asia Pacific Journal of Multidisciplinary Research* 4, no. 2 (2016): 76–82, <https://doi.org/https://doi.org/10.32413/pjph.v7i1.18>.

²⁴ Tasnim Khan, "Fertility Behaviour of Women and Their Household Characteristics: A Case Study of Punjab, Pakistan.," *Journal of Human Ecology* 30, no. 1 (2010): 11–17, <https://doi.org/https://doi.org/10.1080/09709274.2010.11906267>.

Methodology

This study used a cross-sectional design conducted using secondary data from the 2017 Indonesian Health Demographic Survey (IDHS) of women of childbearing age, namely 5797 women of childbearing age from The National Population and Family Planning Agency. The data will encompass survival or discontinuation of family planning among Muslim women, perceptions of ideal family size, the desired status of the youngest child, and the role of husbands in family planning decisions. This study uses research data from provinces where most of the population is Muslim, namely Aceh Province, West Sumatra, Riau, West Java, East Java, and Central Java. This research was conducted from January 2022 to December 2022.

Measure

This study used the Indonesian Health Demographic Survey (IDHS) instrument for women of childbearing age. The independent variables in this study are the ideal number of boys (don't have to have a boy, must have a boy), the ideal number of daughters (don't have to have a boy, must have a boy), the role of the husband (husband-wife agreement, husband wants more children, husband wants fewer children, husband does not decide anything), the wanted last child (wanted then, wanted later, wanted no more), the contraceptive type (modern method, traditional

method), and the type of contraception. In contrast, the dependent variable is the use of contraception in women of childbearing age (using family planning or discontinuing family planning).

Data Analysis

This study will determine the frequency distribution and percentage for each dependent and independent variable. This study will analyze the relationships between independent variables such as how ideal children, wanted last child, and the role of husbands and the dependent variable of family planning usage among Muslim women. Chi-square analysis will be applied to assess these relationships, while risk analysis, using the prevalence rate (PR), will be conducted to determine the likelihood of family planning usage among Muslim women. The data in this study will be analyzed using JASP software, version 16.

Contraceptive and Family Planning Issues in Number

Table 1. Distribusi Reason of Last Discontinuation Contraceptive in Indonesia

Reason of Last Discontinuation Contraceptive	Frequency	Percent
Husband Disapproved Contraceptive	995	17.1
Fatalistic Religions	45	0.8
Side Effect Health	607	10.5
Inconvenient to use	228	3.9

Reason of Last Discontinuation Contraceptive	Frequency	Percent
Using Contraceptive	3923	67.7
Total	5797	100.00

The results of this study indicate that the reasons for the last discontinuation of contraceptives were husband disapproval (17.1%), fatalistic religions (0.8%), side effects on health (10.5%), and inconvenient use (3.9%).

Table 2. Distribution of Contraceptive Type Used by Women of Childbearing Age in Indonesia

Contraceptive Type Used	Frequency	Percent
Pill	1131	19.6
IUD	499	8.6
Injections	368	6.3
Male condom	284	4.9
Female sterilization	485	8.4
Male sterilization	20	0.3
Periodic abstinence	152	2.6
Coitus interruptus / <i>Azl</i>	364	6.3
Herbal plants	35	0.6
Implants	346	6
Lactational amenorrhea (LAM)	6	0.1
Traditional methods	2107	36.3
Total	5797	100.00

The results showed that the most widely used modern contraceptives were pills (19.6%), IUDs (8.6%), and injections (6.3%). Long-term contraception is widely used

by women of childbearing age, such as female sterilization (8.4%) and male sterilization (0.3%). Traditional contraceptives that are widely used are Coitus interruptus/Azl (6.3%) and periodic abstinence (2.6%).

Table 3 Cross-tabulation of Ideal Number of Children, Husband's Decision on Children, Contraceptive Type Used with Family Planning Use among Muslim Women in Indonesia

Variable (N 5797)	Using Family Planning		Discontinue d Family Planning		Total		P	PR
	n	%	n	%	N	%		
Ideal Number of Boys								
Unnecessary to have a boy	611	10.5	377	6.5	988	17	<0.001	1.332
Must have a boy	2640	45.5	2169	37.4	4809	83		
The ideal number of daughters								
Unnecessary to have a girl	604	10.4	383	6.6	987	17.02	<0.001	1.289
Must have daughters	2647	45.7	2163	37.3	4810	82.98		
Husband's decision on children								
Husband-Wife Agreement	2015	38.1	1636	31	3651	69.1		
Husband wants more children	513	9.7	505	9.6	1018	19.3	0.004	-
Husband wants fewer children	113	2.1	110	2.1	223	4.2		
Husband does not decide anything	237	4.5	153	2.9	390	7.4		

Variable (N 5797)	Using Family Planning		Discontinue d Family Planning		Total		P	PR
	n	%	n	%	N	%		
Wanted Last Child								
Wanted then	612	24.1	1371	54	1983	78.1		
Wanted later	58	2.3	191	7.5	249	9.8	0.028	
Wanted no more	83	3.3	223	8.8	306	12.1		
Contraceptive Type								
Modern method	2986	51.5	2260	39	5246	90.5	<0.00 1	1.20 5
Traditional method	265	4.6	286	4.9	551	9.5		

The results of this study show that families who require sons tend not to use family planning (37.4%), and families who do not require sons tend to use family planning (10.5%). There was a significant association between the ideal number of boys and family planning use ($p < 0.001$). Families that did not require sons had a 1.332 times higher risk of using family planning compared to families that required sons to use family planning.

The results of this study show that families who require daughters tend not to use family planning (37.3%), and families who do not tend to use family planning (10.4%). There was a significant association between the

ideal number of daughters and family planning use ($p < 0.001$). Families that did not require daughters had 1.289 times the risk of using family planning compared to families that required daughters to use family planning.

The study shows that husbands who make joint decisions with their wives regarding the number of children are more likely to opt for family planning (38.1%). However, wives use family planning (2.1%). There is a significant relationship between husbands who decide the number of children in the family and the use of family planning ($p = 0.004$).

This study showed that wives who wanted their last child tended to use family planning (24.1%), and wives who did not want another child still did not use family planning (2.9%). There was a significant association between the desire for the last child and the use of family planning ($p = 0.028$).

The results of this study showed that modern contraceptive types tended to use family planning (51.5%), and users who used traditional contraceptives tended to discontinue family planning (4.9%). There was a significant association between the type of family planning and family planning use ($p < 0.001$). Modern family planning had a 1.205 times higher risk of use compared to traditional family planning.

Fiqh, Contraceptive and Family Planning Discussion

Instead of religious arguments, Muslims who participate in family planning are motivated by health reasons.²⁵ Many Ulemas allow family planning because it is important for maintaining the health of mothers and children, supporting other population development programmes, and being part of human rights. Islamic manuscripts do not prohibit contraception, but it is necessary to review the relevant verses of the Holy Qur'an and hadith to understand the issue in a scholarly manner.²⁶

According to the findings of this study, one of the reasons women of childbearing age do not use family planning is that they believe it is forbidden in Islam (364 women of childbearing age). Women of reproductive age often avoid contraception due to Islamic teachings and social norms. This perception, reinforced by fertility values, limits access to reproductive health services. Despite some Islamic countries promoting family planning, this stance is

²⁵ Pratiwi, "Agama Dengan Keikutsertaan Keluarga Berencana (KB) Dan Pemilihan Jenis Alat Kontrasepsi Pada Pasangan Usia Subur (PUS) Di Desa Argomulyo Sedayu Bantul Yogyakarta."

²⁶ Waheed, "Islam and Myths about Family Planing: The Impact of Greenstar Media Advertisement Campaign on the Mindset of the Rural Dwellers of Pakistan."

not universally accepted.^{27, 28} Children are seen as a gift of God, and it is written in the Qur'an: *the beautification of life*.²⁹

Because all family planning acceptors—not just one—receive the benefits, the family planning programme has general benefits (*maṣlahah 'āmmah*). These benefits concern the welfare of many people, including wives, husbands, children, and the general public. Furthermore, most importantly, these benefits align with the general principle that husbands and wives using family planning can still channel their biological needs and maintain health and welfare in the household.³⁰

Islam has included the concept of human rights in its teachings.^{31;32} Imam al-Ghazali formulated that there

²⁷ Ibnu Irawan, "Argumentation of Family Planning in Islamic Law (Fatwa Study of Shaykh Mahmud Syaltut).," *Jawi* 3, no. 2 (2021): 1–15, <https://doi.org/10.24042/jw.v3i2.8078>.

²⁸ Moazzam Ali, "Perceptions of Men on Role of Religious Leaders in Reproductive Health Issues in Rural Pakistan.," *Journal of Biosocial Science* 37, no. 1 (2005): 115-122., <https://doi.org/10.1017/S0021932003006473>.

²⁹ Waheed, "Islam and Myths about Family Planing: The Impact of Greenstar Media Advertisement Campaign on the Mindset of the Rural Dwellers of Pakistan."

³⁰ Sa'adah, "Analisis Praktik Keluarga Berencana Pada Wanita Karir Di Kecamatan Cilamaya Kulon Kabupaten Karawang Perspektif Masalah Mursalah."

³¹ Muhammad Syukri Albani Nasution, "Hifz Al-Din (Maintaining Religion) and Hifz Al-Ummah (Developing National Integration): Resistance of Muslim Youth to Non-Muslim Leader Candidates in Election," *HTS Teologiese Studies / Theological Studies* 78, no. 4 (2022): 1–9, <https://doi.org/https://doi.org/10.4102/hts.v78i4.7526>.

³² Watni Marpaung, "The Impact of Dharar [Damage], Maslahat [Benefits] and Religiosity to Smoking Behaviour,"

are five basic rights inherent in humans called *al-Kulliyat al-Khamsah*, which include the right to the ability to live (*hifzh al-nafs*), the right to property ownership (*hifzh al-māl*), the right to freedom of thought (*hifzh al-aql*), the right to the continuity of offspring (*hifzh al-nasl*), and the right to freedom of religion (*hifzh al-din*). These five rights are an elaboration of the benefit ideal (*maṣlahah*). If these five rights are well and properly accommodated, then it means that the public good has been fulfilled. Conversely, if they are not, let alone none, then there is no benefit to public life. Al-Ghazali asserted that everything that contains the protection of these five things is a benefit, and everything that negates it is damaged (*mafsadah*), and rejecting damage is a form of realization of the ideal of the benefit.³³

The results of this study showed that modern contraceptive types tended to use family planning (51.5%), and users who used traditional contraceptives (*al-'azl* or coitus interruptus, Lactational amenorrhea, Periodic abstinence, herbal plants) tended to discontinue family planning (4.9%). There was a significant association between the type of family planning and family planning

Contagion :Scientific Periodical of Public Health and Coastal Health 2, no. 2 (2020): 118–29,
<https://doi.org/http://dx.doi.org/10.30829/contagion.v2i2.14857>

³³ Sabrur Rohim, “Argumen Program Keluarga Beencana Dalam Islam,” *Jurnal Ilmu Syari’ah Dan Hukum 2*, no. 2 (2016): 1–10,
<https://doi.org/https://doi.org/10.22515/alakhkam.v2i2.501>.

use ($p < 0.001$). Modern family planning had a 1.205-times higher risk of use compared to traditional family planning.

Traditional contraception is one of the contraceptives recommended by scholars because it does not prohibit the teachings of Islam and has been used for generations by ulemas such as "*al-'azl*" (Coitus interruptus), lactational amenorrhea, and periodic abstinence. Traditional contraception has medical shortcomings as it has very low accuracy in preventing pregnancy, resulting in unwanted pregnancies.³⁴

From a fiqh perspective, family planning is compared to "*al-'azl*" (Coitus interruptus), which is the emission of semen outside the vagina. In ancient times, "*al-'azl*" (Coitus interruptus) was used to prevent pregnancy. While birth control is also used to prevent pregnancy, the difference is that "*al-'azl*" (Coitus interruptus) is without a tool, while birth control is with tools such as condoms and spirals. The two are brought together because they want to prevent pregnancy, not terminate it. Based on this explanation, when discussing family planning, the first thing that must be known is the ruling on "*al-'azl*" (Coitus interruptus), and if the legal position of "*azl*" is known, then we only need to equate the ruling.³⁵

³⁴ Nurhayati, *Fikih Kesehatan: Pengantar Komprehensif*.

³⁵ Mahbub Ma'afi Ramdhan, "Dasar Hukum KB," islam.nu.or.id, 2014, <https://islam.nu.or.id/bahtsul-masail/dasar-hukum-kb-LCxME>.

At the time of the Prophet Muhammad, there was no teaching to follow family planning or prevent pregnancy among Muslims. There was no serious effort or endeavour to make *al-'azl* (Coitus interruptus) a widespread practice and popular action among the people.³⁶

Some of the companions of the Prophet Muhammad SAW who did it were no more than emergencies when their circumstances needed it. The Prophet Muhammad SAW did not recommend or prohibit *al-'azl* (interrupted intercourse). Nowadays, people have invented many tools to prevent and stop pregnancy for the well-being of their families and the nation.

Men have a disproportionate amount of power and influence at household levels, including for contraceptive use or nonuse, despite traditional women-centered approaches to family planning.^{37,38} This study showed that

³⁶ Watni Marpaung, "Religious Education, Smoking Laws and Islamic Organisations with Mosque Worshipers Smoking Behaviour," *Contagion: Scientific Periodical of Public Health and Coastal Health* 4, no. 2 (2022): 182–92, <https://doi.org/http://dx.doi.org/10.30829/contagion.v4i2.14859>.

³⁷ Batula Abdi, "Muslim Men's Perceptions and Attitudes on Family Planning: A Qualitative Study in Wajir and Lamu Counties in Kenya," *Sexual and Reproductive Health Matters* 29, no. 1 (2021): 1–11, <https://doi.org/https://doi.org/10.1080/26410397.2021.1893890>.

³⁸ Tekou B. Koffi, "Engaging Men in Family Planning: Perspectives From Married Men in Lomé, Togo," *Global Health: Science and Practice* 6, no. 2 (2018): 317–29, <https://doi.org/https://doi.org/10.9745/GHSP-D-17-00471>.

husbands who determine the number of children together between husband and wife tend to use family planning (38.1%), and husbands want fewer children. However, wives use family planning (2.1%). There is a significant relationship between husbands who decide the number of children in the family and the use of family planning ($p = 0.004$).

In many cultures, husbands influence family size and family planning, often due to traditional gender roles. Men's perspectives on contraception can limit women's reproductive autonomy in rural and conservative communities. Gender dynamics in family planning are shaped by social, economic, and religious expectations.^{39,40} A woman cannot use contraception without her husband's permission.⁴¹ Women who use contraceptives covertly must make the decision together. If a woman must use family planning, she must consult with the head of the household (husband), as he is ultimately responsible for

³⁹ Muhammad Ancha Sitorus, "Analysis of Preferences for the Ideal Number of Children in North Sumatra Province (IDHS 2017 Secondary Data Analysis).," *Contagion: Scientific Periodical of Public Health and Coastal Health*, 2, no. 2 (2020): 87–98, <https://doi.org/10.30829/contagion.v2i2.7989>.

⁴⁰ Ali, "Perceptions of Men on Role of Religious Leaders in Reproductive Health Issues in Rural Pakistan."

⁴¹ AJ Etokidem, "Family Planning Practices of Rural Community Dwellers in Cross River State, Nigeria.," *Niger J Clin Pract* 20, no. 1 (2017): 707-715., https://doi.org/10.4103/njcp.njcp_193_15.

the family's maintenance, education, and all other requirements at the family level.⁴²

Family planning does not aim to limit pregnancy and birth, which is seen as very contrary to the existence and essence of marriage, but only to control the pregnancy and birth of children. From the perspective of the functions and benefits of family planning that can create benefits and prevent harm, there is no doubt about its permissibility in Islam.

Family planning contains benefits; where family planning is birth control with efforts to prevent pregnancy temporarily or even forever in certain situations and conditions; family planning provides benefits for family planning acceptors and the benefit of society and the nation. Exploring the law with the *maṣlahah mursalah* method is called *istiṣlah*, which is a concept in Islamic law thought that makes *maṣlahah* (human needs), which are not bound (*mursalah*) into a secondary source of law; this concept is better known as *al-maṣlahah mursalah* or *al-maṣalih al-mursalah*.⁴³

There is a community assumption that having many offspring is a challenge to educate their children to become

⁴² Council, "Husband's Approval of Contraceptive Use in Metropolitan Indonesia: Program Implications.," *Stud Fam Plann.* 19, no. 3 (2016): 162–168.

⁴³ Sa'adah, "Analisis Praktik Keluarga Berencana Pada Wanita Karir Di Kecamatan Cilamaya Kulon Kabupaten Karawang Perspektif Masalah Mursalah."

pious and religious children, and they fear poverty if they have many offspring despite Allah having guaranteed the sustenance of every human being.⁴⁴

A wanted pregnancy occurs when a couple wants another child.⁴⁵ Unplanned (mistimed) Pregnancy is a pregnancy that occurs in a married couple who still wants a child, but the pregnancy occurs earlier than planned.⁴⁶ Meanwhile, unwanted pregnancy is a pregnancy that occurs in a married couple who no longer wants a child.⁴⁷

This study showed that wives who wanted their last child tended to use family planning (24.1%), and wives who did not want another child still did not use family planning (2.9%). There was a significant association between the desire for the last child and the use of family planning ($p = 0.028$).

⁴⁴ Aisyah, "Islamic Law Analysis of the Implementation of Family Planning Village (KB) (Case Study in Inrello Village, Keera District, Wajo Regency) [Analisis Hukum Islam Terhadap Penerapan Kampung Keluarga Berencana (KB) (Studi Kasus Di Desa Inrello Kecamatan Keera ."

⁴⁵ Kirana Anggraini, "Faktor-Faktor Yang Berhubungan Dengan Kehamilan Tidak Diinginkan Di Indonesia," *PROMOTIF: Jurnal Kesehatan Masyarakat* 8, no. 1 (2018): 27–37, <https://doi.org/https://doi.org/10.56338/pjkm.v8i1.227>.

⁴⁶ S.S. Arsyad, S. Nurhayati, and M.B Raharja, "Faktor Yang Berkaitan Dengan Kehamilan Tidak Diinginkan Di Indonesia. Analisis Data Sekunder Hasil Survei Demografi Dan Kesehatan Indonesia 2017," *Puslitbang Kependudukan*, 2018.

⁴⁷ Ika Saptarini, "Determinan Kehamilan Tidak Diinginkan Di Indonesia (Analisis Data Sekunder Riskesdas 2013)," *Indonesian Journal of Reproductive Health (Kespro)* 7, no. 1 (2016): 15–24.

Many families decide to use family planning due to the existence of *maṣlahah* (benefits); the use of family planning is a harmless way to be able to span the time of pregnancy or the birth of a baby, where the results of child thinning in social society aim to suppress the explosion of population uncontrollably. The results of this study indicate that the practice of family planning among career women is *maṣlahah* (benefits).⁴⁸

Family planning counseling programs on the proper use of contraceptives, especially on the choice of contraceptives such as pills and condoms, should be explained until couples fully understand. Therefore, the unexpected risk of pregnancy due to failure to use these contraceptives can be reduced.^{49,50} The use of traditional contraceptives should also be explained thoroughly to avoid misunderstandings and women experiencing unwanted pregnancies.⁵¹

⁴⁸ Sa'adah, "Analisis Praktik Keluarga Berencana Pada Wanita Karir Di Kecamatan Cilamaya Kulon Kabupaten Karawang Perspektif Masalah Mursalah."

⁴⁹ Remare R Ettarh and Catherine Kyobutungi, "Physical Access to Health Facilities and Contraceptive Use in Kenya: Evidence from the 2008-2009 Kenya Demographic and Health Survey," *African Journal of Reproductive Health / La Revue Africaine de La Santé Reproductive* 16, no. 3 (2012): 48-56.

⁵⁰ Nermin Erol, "Unintended Pregnancy and Prenatal Care: A Study from a Maternity Hospital in Turkey.," *The European Journal of Contraception and Reproductive Health Care* 15, no. 4 (n.d.): 290-300., <https://doi.org/10.3109/13625187.2010.500424>.

⁵¹ Alemayehu Gonie et al., "Determinants of Family Planning Use among Married Women in Bale Eco-Region, Southeast Ethiopia: A

Conclusion

This study highlights several key factors that significantly influence family planning use among families. Notably, the desire for sons or daughters is inversely related to family planning adoption, with families that do not prioritize having a specific gender of children showing a higher likelihood of using family planning. Families that did not require sons had a 1.332 times higher risk of family planning use, while those not prioritizing daughters had a 1.289 times higher likelihood of adopting family planning methods.

Joint decision-making between spouses on the desired number of children also positively impacts family planning usage, with families engaging in shared decision-making showing a markedly higher uptake of family planning. The results additionally reveal that wives with a firm intention to limit their family size are more likely to use family planning, underscoring the role of women's preferences in contraceptive adoption.

Furthermore, the type of contraceptive used significantly affects family planning continuity, with modern contraceptives associated with a higher likelihood of sustained family planning usage compared to traditional methods. This finding suggests a trend toward modern

contraceptive methods due to their effectiveness and reliability.

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