

Religiosity as a Factor of Fertility and Contraceptive Behavior in Pakistan

M. Iqbal Zafar, Fawad Asif and ¹Sultan Adil

Department of Rural Sociology,

¹Department of Agricultural Economics, University of Agriculture, Faisalabad-38040, Pakistan

ABSTRACT

A study was conducted in two major urban centres Faisalabad and Lahore of Pakistan to know the views of respondents about the contraceptive use and family size and composition. Total 1100 women (400 users and 700 non-users of contraception) were interviewed to explore objectives. The high level of fatalism regarding procreation with low sense of personal effectiveness in controlling fertility and prohibition of contraceptive use (perceived by people) in Islamic for birth spacing are undoubtedly responsible for high fertility in Pakistan. The Islamic view point on the issue of fatalism and contraceptive use clearly demonstrates that pronatalist tendencies in Islam stem less from direct injunctions to procreate than from the support of other socio-cultural values and misinformation about the religion. Islam imposes restriction, on procreation in terms of responsibilities involved in children's socialization. Islam does not encourage the viewpoint that predestination makes a human being skeptical with regard to control over his own actions. The use of wisdom to plan every day life for the betterment of family and society is according to the principles of Islam. A number of hadiths permit the use of 'Al-azl or coitus interruptus' as a method of contraception. From the findings of this study it can be argued that fertility decline is only possible when it is no longer regarded as fatalistic and comes into the realm of perceived personal control.

Key words: Islam, fatalism, procreation, fertility, contraception, Pakistan

INTRODUCTION

Every religion defines general principles, laws and directives to which man/woman refer when he/she wants to elicit particular and general solutions for various aspects of life. So it is impossible to disassociate the concept of religion from its social functions. The role of Islam, Catholicism and Hinduism in the context of fertility behavior has been generally described in numerous studies. Religion prescribes a code of life, refers to a system of beliefs, attitudes and practices that individuals share in groups and through this orientation towards life and death, is supposed to influence one's reproductive behavior.

The major religions such as Christianity and Hinduism stress the value of children over both secular and otherworldly concerns. For example, the Christian stress on fertility is derived from the Old Testament injunction 'Be Fruitful and Multiply'. Hinduism values children because of their role in the funeral rites of the deceased parents. The spirit of Islam also advocates the creation of the family and urges both men and women not to practice continued celibacy. It is mentioned in the Quran 'O our lord! give us in our wives and offspring the joy of our eyes and make us examples to those who fear thee (Sura 25/74)'.

Demographers claimed that high fertility in many societies is due to religious doctrine. Demographers held the view that Roman Catholicism's opposition to modern contraception is generally related to high fertility in Latin America (Day, 1968). Others believe that Islam is the main religion, which opposes the concept of family limitation among the major religions on earth. Kirk (1967) argued that fertility of Muslim countries (such as Pakistan and Bangladesh) was higher in the Indian Subcontinent. Fertility of the Indian Muslim was higher than the Hindu with similar socio-economic conditions. Kirk concluded that Muslim fertility:

1. Was almost universally high.
2. Showed no evidence of important trends over time.
3. was generally higher than that of neighboring people of other major religions. (p.71)

As mentioned earlier, Islam is often considered a barrier to the diffusion of contraceptive technology because the followers of the religion believe that children are amongst the richest blessings that God bestows. The creation of human souls is by His authority. He allows one to come into the world- and therefore any attempt to stop or terminate the reproductive process is against the will of God. Usually the higher levels of fertility in many Muslim countries in comparison to their non-Muslim neighbours in the Middle East, Central Asia, South East Asia and the Indian subcontinent are presented as an example of religious influence on fertility behaviour (Kirk, 1971). There are however studies which contradict that idea. Choudhury (1971) pointed out that the Muslim religion is not a differential factor of fertility behaviour because in Bangladesh no difference in fertility levels between Muslim and Hindus has appeared. The author stated that Islam does not oppose the idea of family limitation. The use of contraception may also be clearly inferred from the permissibility of 'Azl' (Al-azl is known as a method of contraception by which the husband withdrawing from his wife prevents his semen entering into her uterus) from the Quranic verse: 'Your wives are your field: go in, therefore, to your field as you will; but do first some act for your souls' good: and fear your God and know that you must meet Him (Sura 2/223)'.

Arguments against contraceptive use often quote the following verse from the Holy Quran

"Do not kill your children out of poverty. We will provide for them and it is We who provide for you also. Killing them is a serious mistake." Still many religious leaders in many countries oppose the idea of contraceptive use. For example, the most noteworthy indictment of family planning was made by Maulana Maududi, the leader of a religiously oriented political party with a significant following, in a book that he published in several editions in English and Urdu (local language). In Pakistan withdrawal of the official family planning programme was announced in the electoral promises of several religious parties including Maududi's own party (Omran, 1992).

Today, the Muslim Jurists of many countries support the idea of family limitation through the use of modern methods of contraception. However, the opinion has been repeatedly expressed that Islam may offer a prolonged resistance to fertility decline because of the institutional pressures among its population to have many children, especially sons. The low status of Muslim women is a factor responsible for higher fertility (Mazur, 1967 and Rizk, 1963). The UN (1971) suggested that high fertility of Muslim women has been encouraged by fatalistic attitudes in Islam stemming from a strong belief in the active providence of God and the shyness of Muslim women which stemmed their interest in fertility regulation.

Different studies provide the evidence of close association between contraceptive behaviour and intensity of religious views and frequency of religious practices. Jones (1982) found that religious affiliation was associated with achieved fertility. He found higher fertility among the Catholics than the Protestants. The author also found in France considerable excess in fertility amongst the Muslims and the Catholics. Jones further explained in terms of modernity that the Protestants are more liberal than the Catholics and the Catholics are more liberal than the Muslims. Hence, the Protestants are more modern than the Catholics and the Catholics are more modern than the Muslims because the degree of liberality is positively associated with modernity. The higher the degree of liberality, the more likely a person will be modern and have positive views towards contraceptive use and having a smaller family. He also pointed out that the intensity of religious feelings is associated with number of births. This is more true in countries that are predominantly Catholic, where the difference in the most religious and least religious women was at least 0.5 children. This association was also observed among the Catholics of Great Britain and the USA. Briefly, Jones (1982) stated religious beliefs and practices could have an appreciable impact on childbearing. Sander (1992) also examined the influence of Catholicism on fertility in the United States. The author is of opinion that Catholic norms have a considerable impact on fertility for respondents born before 1920. Variation in fertility after this period is weakly associated with a Catholic upbringing. The author concluded that changes in fertility behaviour over time are due the changes in the religious belief system.

Keeping in view the above discussion and misconceptions concerning the religious position on birth control among the general population in Muslim countries, it was suggested that religion may actually prove to be a 'double-edged sword' (Fishet, 1969). Variation in interpretations could exert a powerful influence on couple's fertility decision style. The study was designed to assess the influence of religiosity in terms of frequency of religious practices and fatalism on contraceptive and fertility behaviour. The study also aimed to interpret the perceptions of the respondents and Mosque Imams about contraceptive use in the perspective of Islam.

MATERIALS AND METHODS

A comparative study was conducted to achieve the objectives of the study. Two groups of women users and non-users were selected from the two major cities of Pakistan, Lahore and Faisalabad. The users group was the fecund women (having at least one birth in the last five years) of age 25 years and more with at least two living children, who were using any method of modern contraception excluding sterilization and living with their husbands. The non-users group was a group of women possessing similar characteristics as mentioned for users of the modern methods but who were not using any method of contraception.

Since a ready-to-use sampling frame of currently married women was not available, a multistage cluster systematic sampling design was used. Three localities which had family planning clinics or family welfare centres or both were randomly selected from each city and a required number of bazaars (treated as a cluster) were selected at random from each of the localities by taking into account the number of households in the bazaars to provide the basic sampling frame. 350 non-users of any methods were interviewed through systematic random sampling from each of the cities. Three family planning clinics situated in the selected localities of each city were approached, to interview users of modern methods. As the use rate of modern methods of contraception in Pakistan is low, the other group of 200 current users of modern methods was interviewed from the family planning clinics and family welfare centres in each area. Therefore the total sample size of users of modern methods and non-users of any method from both cities was 1100.

A qualitative study was also conducted to have insight into the perceptions of respondents and local religious leaders about contraceptive use. Social scientists working in family planning and population studies emphasized the joint application of quantitative and qualitative techniques for better understanding of people's views about human reproductive and contraceptive behaviour (Knodel *et al.*, 1984 and Schearer, 1981).

It was likely that reproductive and contraceptive behaviour of users of modern methods and non-users of any method would be different. So separate sessions for discussion were arranged for non-users and users with a slight change in the interviewing schedule selected for discussion. There were two groups of users of modern methods (excluding sterilization) from each city (Lahore and Faisalabad), two groups of non-users of any method one from each of these cities and one group of Ulemas/Imams of the two sects the 'Sunni' and the 'Ahlahadis' from Faisalabad.

The measure developed by Coombs (1975) was used in the study to measure family size preferences (IN). The measure was based on the conjoint measurement and the unfolding theory of preferential choice. The position of respondents was located on the IN continuum scales by asking a series of questions about family size preferences. The places of individuals on the IN psychological scales range from IN 1 (a preference for a small family) to IN 7 (a preference for a large family). The higher the IN values the greater the potential toward large families. The IN scale provides the pure measure of family size preferences independent of the influence of sex preference. The measure represents an underlying preference structure or bias which has been identified to be more predictive of fertility behaviour (Coombs, 1976; Coombs and Sun, 1978) than a single valued first preference, because every question involved in this approach for assessing the family size preference was not arbitrarily chosen, but was based on the measurement-theoretic approach (Coombs, 1975). In the study the contraceptive use and fertility preferences in terms of family size preferences measured through Coombs's Scale were used as the dependent variables.

The association of variables on religious practices and fatalistic attitudes with contraceptive and fertility behaviour has been investigated through bivariate analysis. The significance of the association between variables was tested through the application of the statistical test of Chi-square.

RESULTS

Socio-economic and Demographic Characteristics

The level of educational attainment in a society is an important indicator of its social development. Moreover, educational attainment has also been shown to have a significant effect on fertility and contraceptive behaviour (PDHS, 1991). Table 1 highlights the socio-economic and demographic conditions of currently married women of age 25-45 years. 42% of the respondents were almost illiterate. The findings are consistent with the findings of

Table 1: Percentage Distribution of IN Scale Values and User's and Non-users by Socio-economic and Demographic Variables

Variables %	User %	Nonusers %	Family Bias(Coombs' IN Score)			Total
			1-4 Small + Medium	5 Large	6-7 Very large	
Woman's Education						
0-4	30.3	48.0	9.0	19.7	71.3	457.0
5-9	19.8	30.5	14.7	25.6	59.7	293.0
10-16	50.0	21.4	37.1	30.9	32.0	350.0
Total	400.0	700.0	214.0	273.0	613.0	1100.0
Mean	7.6	5.1	---	---	---	6.0
Sig. level	0.01	0.01				
Husband's Education						
0-9	33.8	49.9	10.7	19.4	69.8	484.0
10-13	30.3	30.7	14.9	28.0	57.1	336.0
14-16	36.0	19.4	40.0	30.4	29.6	280.0
Total	400.0	700.0	214.0	273.0	613.0	1100.0
Mean Schooling	8.8	7.96	---	---	---	8.6
sig. level	0.01	0.01				
Family Income						
Less than 24000	31.4	28.4	14.9	24.1	61.0	323.0
240001-50000	41.0	46.3	19.6	25.2	55.3	485.0
50000+	27.6	25.3	24.8	24.8	50.3	286.0
Total	398.0	696.0	214.0	271.0	609.0	1094.0
Sig. level	0.23501	0.05				
Age at Marriage						
14-20	59.8	78.9	13.9	22.6	63.5	791.0
21-25	35.5	17.9	33.3	29.6	37.1	267.0
26-33	4.8	3.3	35.7	35.7	28.6	42.0
Total	400.0	700.0	214.0	273.0	613.0	1100.0
Mean Age	20.2	19.1	---	---	---	19.5
Sig. level	0.01	0.01				
Living Children						
2-3	43.0	37.9	31.6	28.8	39.6	437.0
4	25.0	21.0	18.2	29.6	52.2	247.0
5-6	25.0	28.6	9.0	21.0	70.0	300.0
7+	7.0	12.6	3.4	9.5	87.1	116.0
Total	400.0	700.0	214.0	273.0	613.0	1100.0
Mean	3.97	4.3	---	---	---	4.18
Chi-square & Cramers' V		0.00676	0.00000			

the PDHS (1991). According to the survey the female illiteracy rate was 43% in 1991 for urban areas of Pakistan. The comparison of the users of modern methods and the non-users of any method reveals that users had a higher level of literacy than non-users.

The norm in Pakistan for women is to stay at home and take care of the husband and children. It is not common for women to join the labour market and their mobility is restricted. Information on women's occupation indicate that A small fraction of the respondents were engaged in cash paid jobs. The majority of respondents (85 per cent) were performing traditional duties, looking after their children and husbands by living at home. The PDHS (1991) also recorded that 17% of married women engaged in cash paid jobs in urban Pakistan. Although a small proportion of the women was working, the majority (57%) was working in Government Organizations, the remainder were earning a low income from minor and private professions. In Pakistan, respectable jobs for women are considered to be in Government institutions concerning education and health. It emerges from the results that the husbands and society like to see women in their traditional role, although they may have a good level of education. PDHS (1991) also found that women who were working were not highly educated. People believe that the division of the labour role in Islam is clearly defined. The prime responsibility of a woman is to deal with domestic affairs.

Age at marriage is considered very important in the study of fertility and contraceptive behaviour, because it is more related to cultural than demographic aspects. The age at marriage varies within and among societies, depending upon the values, norms and beliefs about marriage, which a society possesses. It is noted that about 72 percent of the respondents (Table 1) were married by the age of 20 and almost every woman was married by the age of 25. In Pakistan, extra-marital relations are absolutely prohibited and are punishable. A woman enjoys sexual life only after marriage. The percentage of users who got married by age 20 was 60 which was significantly lower than 79 percent of the non-users. A negligible proportion of the users and non-users were married after age 25. The mean age at marriage for the non-users was found to be one year less than for the users. This difference may be because the users had a higher level of education than the non-users. Zafar *et al.* (1995) found a positive

association between the mean age at marriage for women and their educational attainment. The mean age at first marriage for the users was slightly above 20. The overall mean age at marriage for the respondents was about 20 years, which is almost the same as recorded in various national surveys (PDS 1989; PDHS 1991). According to the PDHS and PDS the mean age at marriage was 21.7 years and 20.6 years respectively. The mean age at marriage in this study is higher than the national figure because the study is conducted in urban areas. The explanation of that difference can be found in the age group 25-45 years which was selected for the study. The younger women, who were not included in the study, may have a higher age at marriage than the older women. A similar observation has been made in the PDHS (1991).

The FGDs also supported the idea of early marriage and childbearing. The discussions reveal that marriage is a religious and cultural idea. Early marriage, especially for females, is the norm in Pakistan. The majority of respondents believed that the ideal age at marriage for woman should be around 19. The respondents pointed out the social implications of late marriage as well as the religious responsibility of early marriage. Many discussants frequently expressed that if a girl is of 'heavy' (over) age, no parents would like their son to marry that girl because she would not look pretty and smart, having at that time a wrinkled face. The impression gained from the discussions was also that early marriage protects the society from illicit sex.

It emerged from the analysis of first age at marriage that the marriage pattern is influenced by the religious belief system. Pakistan is an Islamic country with a dominant Muslim population (98 percent). People have a belief that the religion advocates early marriage, particularly for women. The Ulemas views on the issue were very strict. The Ulema/Imam Masjid of the two sects i.e. the Sunni and the Ahlay-Hadis supported the concept of early marriage of girls on religious grounds and condemned the strategy of late marriage. They emphasized that young age at marriage is one of the prime factors and unique solutions for keeping the social atmosphere pious and sublime. In the view of one religious leader: "It is the basic and prime responsibility of parents to marry their daughters as soon as possible after attaining the age of menarche. If parents intentionally delay marriage of their daughters, they deviate from the Islamic principles and commit a sin". (a married Imam aged 45 with 7 living children and 10 years schooling)

The cumulative number of children ever born is also shown in Table 1. Table 1 shows that women in their childbearing (25-45) had an average of 4.7 children. The finding is consistent with the findings of many surveys conducted at national level (PDHS 1991; PCPS 1985; PFS 1975). The mean number of children ever born for currently married women reported in the PDHS, PCPS and PFS were 4.1, 4.3 and 4.3 respectively. The consistent pattern of the children ever born from the last two decades is an indication that there is no significant decrease in the fertility levels in Pakistan. The higher level of fertility recorded in this study than the levels reported in different national surveys is due to exclusion of the younger women of age 15-24 years.

As mentioned earlier the measures developed by Coombs (1975) to assess the extent of family size preference were used in this study. The results on fertility preference are presented in Table 1. The data show that about 56 per cent of the respondents had underlying preferences for very large families (IN 6-7) and about one quarter of the respondents had underlying preferences for large families (IN 5). A negligible proportion (2.4%) of the women had underlying preferences for very small families (IN 1-3). A small percentage of the respondents was identified on the IN (4) scale - the preference for medium families. The pattern of underlying preferences and higher level of fertility support the cultural belief system that restriction on procreation is an unislamic action.

The Ulemas views are worth mentioning here on the topic of family size. All Ulemas expressed that decisions about the number of children are not within the authority of human beings. Restrictions on the number of children are unacceptable from the Islamic viewpoint. God, who is the procreator, takes the decisions about the number of children. They firmly explained that there is no need to limit children from the fear of food shortage because God is responsible for providing all the basic necessities of life. One Imam who had a master's degree in Islamic studies stressed that: "It is not within the control of human beings to increase or decrease the number of children. To think about the issue is purely an unislamic action. The decisions about the number of children are taken by the Almighty Who has absolute power and also Who is creator and provider." (Unmarried Imam aged 30 years with 16 years schooling)

One Imam adopted quite an extreme view and stated that thinking about limiting children is a action punishable by God. He stated that: "Creator is God. To whom He desires gives more and to whom He desires gives less. Any one, who attempted and attempts to stop the process of childbearing, he is committing sin and crime from the Islamic viewpoint. He is criminal and punishable." (a married Imam aged 26 with 3 living children and 6 years schooling)

Religiosity and Fatalism

Analysis indicates that most of the respondents do not know whether or not the use of contraception is allowed in Islam. The findings support the wide spread misunderstanding prevailing in many Islamic countries that contraception is not according to the ethos of Islam. The analysis of FGDs of the users' and non-users' views in both localities indicates that respondents really do not know the position of contraception in the religion. Most respondents and all Ullemas had a firm belief that contraception is not allowed in Islam. Ullemas expressed that there is no place for contraception to limit and space births in Islam. Planning to have a birth after a period of time is purely an unislamic action. They elaborated their viewpoint by saying that although marriage facilitates legal sexual enjoyment for spouses, it is mainly concerned with procreation and family formation. They stressed that God has

Table 2: Percentage Distribution of IN Scale Values of User's and Non-users by Religiosity and Fatalism Variables

Variables %	User %	Nonusers %	Family Bias(Coombs' IN Score)			Total
			1-4 Small +Medium	5 Large	6-7 Very large	
It is not worth planning in advance, because many things happen according to destiny						
Agree	38.1	61.5	16.5	23.4	60.1	576
Disagree	52.8	30.4	25.1	26.0	48.9	419
No opinion	9.1	8.1	10.9	27.2	62.0	92
Chi-square & Cramers' V		0.0000	0.00053			
All the basic needs of a family are provided by God, even if parents are not able to work.						
Agree	16.7	42.4	8.3	18.8	72.9	361
No opinion	15.4	15.1	16.3	34.3	49.4	166
Disagree	67.8	42.5	27.7	25.7	46.6	564
Total	395	696.0	213.0	270.0	608.0	1091
Chi-square & Cramers' V		0.0000	0.00000			
How often, do you say your prayers?.						
Regularly)	29.1	27.3	24.1	24.4	51.5	307
Weakly	43.6	54.4	18.2	24.4	57.4	554
Occasionally	27.3	18.3	16.5	26.6	57.0	237
Total	396	691.0	214.0	273.0	611.0	1098
Chi-square & Cramers' V		0.0040	0.15692			
How often, do you recite the Holy Quran?						
Regularly	35.2	40.4	20.5	21.9	57.6	420
weakly	20.0	25.6	17.5	28.4	54.1	257
Occasionally	44.8	34.0	19.6	25.7	54.7	413
Total	395	695.0	212.0	271.0	607.0	1090
Chi-square & Cramers' V		0.00151	0.39509			
For how many days have you fasted this last Ramdhan?						
16-30	71.5	70.9	20.2	24.6	55.2	782
6-15	16.0	19.0	14.7	24.4	60.9	197
0-5	12.5	10.1	22.3	27.3	50.4	121
Total	400	700.0	214.0	273.0	613.0	1100
Chi-square & Cramers' V		0.27531	0.29424			

mentioned many times in the Holy Qur'an He is the procreator and provider. People have weak belief and faith in God and are deviated from the real path of Islam. If they have a firm belief that God is really procreator and provider, then we will never face any problem by having many children. The problems and hardships, which we are facing now, are due to deviation from the teaching of Islam. The respondents mentioned that there should be no doubt about prohibition of contraception because the Holy Prophet (PBUH) said 'increase his nation'.

On this issue users expressed that there is no exact verse or hadith which provides clear evidence of permission of contraception for limiting and spacing children. They also explained that they have no deep knowledge of religion. They have only heard from elders and friends that contraception is prohibited in Islam. When it was asked (from users), then why are you using contraception, some women pointed out that they were not doing everything according to the teachings of Islam and also our religion does not like hardships for its followers. If we do not use contraception, then there will be many children. Life is very expensive and income is limited and furthermore job opportunities for children seem to be rare. In these circumstances, it is very difficult to bear many children and meet their right demands. One respondent said: It is heard from elders that Islam does not allow contraception for limiting and stopping children.... It is impossible to afford many children. (a user of contraception aged 32 with 4 living children and 8 years schooling)

The table reveals that religious practices such as saying prayers, reciting the Holy Quran and fasting, had no association with contraceptive and fertility behaviour. Women who had a high intensity of religious practice had the

same fertility behaviour as women who rarely recited the Holy Quran, said prayers and fasted. It is not appropriate to say that women who have low intensity of religious practice are more modern and more support the idea of contraception than women who have high intensity. The logical explanation may be that the women who have high intensity of religious practice more likely understand the real spirit of Islam in terms of family formation.

Although the users views were liberal on the issue of fatalism, overall impression developed from the participants responses was that the fatalism is deeply rooted in the society and had a strong influence on people's lifestyle. The majority of respondents (60%) who believed that it is not worth planning in advance because things happen according to destiny had a preference for very large families. This compared with 49 per cent of women who did not agree with the viewpoint and preferred very large families (Table 2). The analysis gives an impression that blind faith is widespread in segments of the population bearing different socio-economic dimensions. The table also indicates that faith is strongly present among non-users. 62% of the users as compared to 38% of the non-users supported the fatalistic attitude (Table 2). The fatalism dimension was further explored by asking 'whether all the basic needs of a family are provided by God, even if parents are not able to work'. 42% of the non-users as compared to 17% of the users agreed with the statement (Table 2). It emerged that the proportion of respondents who agreed with the statement and supported the idea of very large families was greater than the women who disagreed with the statement and had very large family size preferences. 73% of those who agreed with the statement as compared to 47% of those who did not agree with the statement stood at the extreme end of IN scale (6-7: very large family preference). Only 8% of the respondents who agreed with the statement preferred small and medium families, whereas this percentage was 28 for those who preferred small + medium families and did not agree with the statement.

It was noticed from the FGDs that the majority of the respondents from both areas were not only lacking in planning about family formation, but also in other matters of daily life. Most had a firm belief that every happening is from God, even a leaf on a tree cannot move without His order. It is useless to plan and think. It is not more than a waste of time. He is 'Qadiri-Mutluq' (absolute power). It is beneficial for human beings to leave all matters with God. He knows best which thing is best for a person. A blind belief in God is well explained from the following expressions of some of the respondents recorded during the focus group discussions:

A human receives that thing which is written in his/her fate. There is no need to think or plan about any issue. Planning and thinking are useless. Everything happens according to destiny. A human should believe in God completely without any thinking for his/her welfare. (a non-user aged 36 with 5 living children and 5 years schooling)

Trust in God. A person achieves that which is written in his fate. It is useless to plan or to try or to think to get more. All plans can fail. It is seen that many parents planned to stop children but God has given them children in spite of using contraception. We people have not strong believe in God, therefore we are suffering. (a non-user aged 32 with 4 children and no schooling)

It also emerged from the discussion that some of respondents (largely users) had an understanding of the philosophy of religion on the issue. These participants (users) stressed that planning is not only beneficial for the family structure, but also for every walk of life. No doubt, every happening is from God, but He has given 'wisdom' to human beings. The real philosophy of the religion demands the utilization of wisdom in order to do work systematically. The religion does not appreciate that persons should perform duties by keeping their eyes closed. Utilization of the senses and available resources are essential for great achievements. Some of the users' views on the issue reflect the significance of planning, as follows:

In my opinion planning in all activities is essential. Do not leave all work with God. If a person does not move his hands (struggle), he will get nothing. She also added, God helps those who help themselves. (a user aged 35 with 4 children and 8 years schooling)

Life is the name for continuous struggle and planning. It does not look nice to put hand on hand and believe that God will provide necessities of life. This is the wrong thinking. Man should work hard with planning which makes every difficult task easy. (a user aged 27 with 2 living children and 10 years schooling)

DISCUSSION

The stated desired family size is commonly regarded as the respondent's perception of prevailing norms in the community (Pullum, 1988). Desire for large families (Coombs's IN scale) which is deeply rooted in Pakistan can be taken as a community norm. It can be interpreted that women who have many children are

culturally and socially rewarded for this behaviour and women who have few children are negatively sanctioned. As discussed earlier, the high level of fatalism regarding procreation with a low sense of personal effectiveness in controlling fertility is undoubtedly responsible for high fertility in Pakistan. Transition from high fertility to low fertility occurred with the transition from the fatalistic notion that the number of children is beyond the control of the parents, to the notion that it is within the realm of individual control and subject to social rewards and sanctions. From the findings of this study it can be argued that fertility decline is only possible when it is no longer regarded as fatalistic and comes into the realm of perceived personal control.

As suggested in many studies discussed earlier, Islam with its distinctive character, is considered a major hindrance to the assimilation of the family planning programme and small family norms (Kirk, 1971). The quantitative and qualitative findings indicate Islam opposes the idea of small family norms and use of family planning for birth spacing. The pronatalist tendencies in Islam stem less from direct injunctions to procreate than from the support of other socio-cultural values and misinformation about the religion. Flexibility and tolerance commanded by religion in family life and birth control are not taken in their real sense in Pakistan.

The Islamic approach towards procreation is seen to be rational. Islam advises its followers to adopt the moderate way without going to the extreme of unrestricted multiplication of children or rejection of procreation. Islam imposes restriction, on procreation in terms of responsibilities involved in children's socialization. As regard to the concept of predestination, Islam does not encourage the viewpoint that predestination makes a human being sceptical with regard to control over his own actions. The use of wisdom to plan every day life for the betterment of family and society is according to the principles of Islam. A number of hadiths permit the use of 'Al-azl or coitus interruptus' as a method of contraception. The restriction on number of children is imposed in terms of ability to meet the basic necessities of life. A person who can not afford the basic requirement of many children, is not allowed to have them. This is clear from the Holy verse of the Quran: 'And let be afraid to wrong the orphans, who, should they leave behind them weakly offspring, would be solicitous on their account'. It is worth mentioning the family life of the Holy Prophet Mohammad (peace be upon Him). The prophet had 11 wives, but he had only 5 children according to Sunni belief and 2 according to the Shia sect. His only son died in infancy but he never craved for a larger family though he was taunted as 'the sonless' by the Meccans. The idea is further supported by many Islamic Jurists. They expressed the view that Islam does not oppose the concept of family limitation through the use of modern methods of contraception, except abortion. The views of the four schools of Jurisprudence and approval by many Islamic scholars and theologians clearly indicate that contraceptive use for birth control is not prohibited in Islam.

The conclusion that can be drawn is that the misunderstanding prevailing in the society about the Islamic viewpoint on family life and family limitation is also a primary factor responsible for the high fertility in Pakistan. There is a need to create an atmosphere of consensus that family limitation is an area of legitimate intervention and responsibility. This consensus does not exist in the larger segment of the population. It is clear from the above discussion that many people do not understand the real meaning of predestination and reliance on God and they believe that their views on the issue of Provider, Creator and reliance on God are according to the teaching of Islam. There is a need to make people aware about the real meaning of predestination (Qadar) and reliance on Allah (tawakkul). Results also suggest that until socio-cultural development takes place to the extent that effective contraception becomes a dominant norm, intensive efforts for improving personal contraceptive intentions, status, social support, permissibility of contraception and eradication of fatalism are perhaps the best policy options available.

REFERENCES

- Chaudhury, R.H., 1971. Differential Fertility by Religious Groups in East Pakistan. *Social Biology*, 18: 188-191.
- Coombs, L.C., 1976. Are Cross- Cultural Preferences Comparisons Possible? A Measurement- Theoretic Approach. IUSSP Paper No. 5, Liege, Belgium.
- Coombs, L.C., 1975. The Measurement of Family Size Preferences and Subsequent Fertility. *Demography*, 11: 587-611.

- Coombs, L.C. and T.H. Sun, 1978. Family Composition Preferences in a Developing Culture: The Case of Taiwan, 1973. *Population Studies*, 31: 43-64.
- Day, L.H., 1968. Natality and Ethnocentrism: Some relationships Suggested by an analysis of Catholic-Protestant Differentials, *Population Studies*, 22: 27-50.
- Fishet, N., 1969. Prospect for Fertility Planning in Turkey. In Behrman, S.J. *et al.* (eds.) *Fertility and Family Planning*, Ann Arbor, Michigan, pp: 467-477.
- Jones, E.F., 1982. Socio-Economic Differentials in Achieved Fertility. *Comparative Studies*, 21: 14-25.
- Kirk, D., 1967. Factors Affecting Muslim Natality. In Schieffelin, O. (ed.) *Muslim Attitudes Towards Family Planning*, The Population Council, Inc. New York, pp: 66-83.
- Kirk, D., 1971. *A New Demographic Transition*. National Academy of Sciences, Baltimore, John Hopkins Press, U.S.A.
- Knodel, J.E., N. Havanon and A. Pramualratana, 1984. Fertility Transitions in Thailand: A Qualitative Analysis. *Population Development Review*, 10: 297-245.
- Mazur, D.P., 1967. Fertility Among Ethnic Groups in the USSR. *Demography*, 4: 72-75.
- Omran, A.R., 1992. *Family Planning in the Legacy of Islam*. Routledge, London and New York.
- Pakistan Demographic Survey, 1989. Federal Bureau of Statistics, Islamabad.
- Pakistan Fertility Survey, 1975. Government of Pakistan, Islamabad.
- Pakistan Contraceptive Prevalence Survey, 1985. National Institute of Population Studies (1986), Islamabad.
- Pakistan Demographic and Health Survey, 1991. National Institute of Population Studies (1992) 1990/1991, Islamabad, Pakistan, July, 1992.
- Pullum, T.W., 1988. Evidence for and Against the Emergence of Family Size Norms in Pakistan. Working Paper No. 21, National Institute of Population Studies, Islamabad.
- Rizk, H., 1963. Social and Psychological Factors Affecting Fertility in the United Arab Republic. *Journal of Marriage and Family*, 25: 69-73.
- Sander, W., 1992. Catholicism and Economics of Fertility. *Population, Studies*, 46: 477-490.
- Schearer, S.B., 1981. Focus Group and Survey Research on Family Planning in Mexico. *Studies in Family Planning*, 12: 407-458, part 1.
- The Holy Koran. Text Translated by Abdullah yousuf, 1946: 1083. Mcgregor and Werner.
- United Nations, 1971. *Human Fertility and National Development: A Challenge to Science and Technology*. Department of Economic and Social Affairs, New York.
- Zafar, M.I., 1995. Significance of Beliefs and Values in Predicting Fertility and Contraceptive Behaviour in Pakistan, *J. Bio-Social Sci.*, 27.