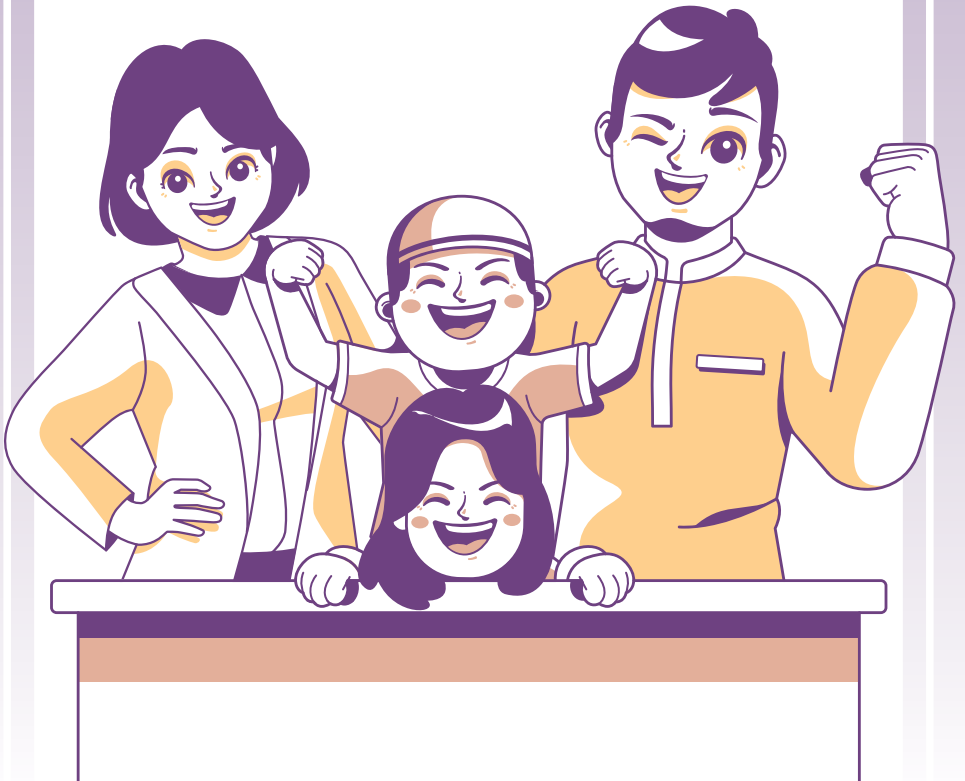


sisters in islam

# Islam and Family Planning



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# Introduction

Family planning constitutes a method of regulating fertility and preventing conception, whether temporarily or permanently. This decision is typically made by individuals or couples based on familial interests and the broader welfare of the community and nation (*Hermanto et al., 2020*). Furthermore, it is considered a fundamental human right for individuals to be able to determine the timing and number of children that they wish to have freely, and responsibly, (*UNU-IIGH, 2020*).

Family planning, particularly when modern contraceptive methods are employed, is widely recognised as one of the most beneficial and cost-effective public health interventions. It holds the potential to improve health outcomes by averting unintended pregnancies, reducing maternal by approximately 30% and infant mortality rates by about 10%, respectively, and mitigating morbidity (*UNU-IIGH, 2020*).

Within the framework of Shari'ah principles, Muslim women are entitled to a high standard of sexual and reproductive health, enabling them to make independent decisions regarding marriage, motherhood, contraception, and sexuality, free from coercion and discrimination. However, despite these rights, Muslim women globally often lack agency in expressing their views on matters related to sexual and reproductive health, including contraception, childbirth, and sexual relations.



Sisters in Islam convened a Southeast Asian workshop on Islam, Reproductive Health and Women's Rights, in 1998. The workshop aimed to advance a progressive understanding of Islamic teachings on reproductive health and women's rights by facilitating an exchange of perspectives, analyses, and experiences among scholars and activists in the field.

The workshop brought together 43 participants from various countries, including Indonesia, Malaysia, the Philippines, Singapore, Thailand, Egypt, Pakistan, and the USA. Attendees included international Islamic scholars, activists in women's health and rights, Shari'ah lawyers, and policymakers. Proceedings of the workshop were documented in a report published in 1999, with a subsequent book comprising presented papers released in 2000.

Acknowledging the evolving landscape surrounding family planning and reproductive health issues, the workshop provided a platform for international Islamic scholars, activists, Shari'ah lawyers, and policymakers to discuss and address these critical topics.

Collaborating with the Kelantan Family Planning Association, SIS aims to provide easily accessible and readable information on Islamic perspectives on family planning. This collaboration seeks to address the urgent need for such information among service providers and assist Muslim individuals in making informed decisions regarding contraception.

# 01



## Family Planning in Islam

### **01. What does the Quran say about family planning?**

There are a variety of opinions regarding family planning. Scholars have associated several Quranic verses with family planning. The opinions are divided into two – family planning is either allowed or forbidden.

The Quran specifically advises mothers to breastfeed their children for two full years.

**Verse 233 of Surah Al-Baqarah (2:233)** can be translated to ‘the mothers shall give suck to their offspring for two whole years if the father desires to complete the term. But he shall bear the cost of their food and clothing on equitable terms. No soul shall have a burden laid on it greater than it can bear. No mother shall be treated unfairly on account of her child or father on account of his child. An heir shall be chargeable in the same way if they both decide on weaning by mutual consent and after due consultation there is no blame on them. If ye decide on a foster-mother for your offspring there is no blame on you provided ye pay (the mother) what ye offered on equitable terms. But fear God and know that God sees well what ye do’. (Translation by Abdullah Yusuf Ali).

Scholars interpret this mention of a two-year breastfeeding period as a means of spacing childbirth, allowing sufficient time for maternal recovery and child-rearing (Abdi et al 2020). Notably, the Quranic recommendation aligns with the World Health Organization’s (WHO) guidance on birth spacing, which also advocates a two-year interval.

It is essential to prioritise minimising harm and safeguarding the well-being of the community.

This is aligned with **Surah Al-Baqarah (2:195)**, which translates to ‘And spend of your substance in the cause of God and make not your own hands contribute to your destruction but do good; for God loveth those who do good’. (Translation by Abdullah Yusuf Ali).

## 02. Why do some opinions not support family planning?

Opinions on family planning are varied and there are a few which do not support family. Several ulama globally have taken verses in the Quran to indirectly imply a prohibition on the following grounds:

Family planning is like infanticide (*wa’d*) which is prohibited.

Family planning contradicts predestination (*qadar*) and reliance on Allah swt (*tawakkal*).

Family planning denies the ability of Allah swt to provide for any number of children (*rezeki*).

Family planning is against the call for multitude (*kathrah*).



**Surah al-An'am (6:151)** translates to 'Say: "Come I will rehearse what God hath (really) prohibited you from": join not anything as equal with Him; be good to your parents: kill not your children on a plea of want; We provide sustenance for you and them; come not nigh to shameful deeds whether open or secret; take not life which God hath made sacred except by way of justice and law: thus doth He command you that ye may learn wisdom'. (Translation by Abdullah Yusuf Ali).

It has been argued that the verse emphasises Allah swt providing sustenance and provision for every child and family ([muftiwp.gov.my](http://muftiwp.gov.my) 2016).

There is also **Verse 46 of Surah Al-Kahf (18:46)** which translates to 'Wealth and sons are allurements of the life of this world: But the things that endure, Good Deeds, are best in the sight of thy Lord, as rewards, and best as (the foundation for) hopes'. (Translation by Abdullah Yusuf Ali).

Scholars have argued that the verse shows Islam encourages having numerous children as they are a source of joy and a gift from God and that procreation is a fundamental part of marriage.

Therefore, some scholars believe that family planning contradicts Allah's will and His ability to provide. Nonetheless, it is important to note that neither of these verses specifically addresses contraception; rather, they highlight the value of children and emphasise the obligation to protect their lives ([Abdi et al 2020](#)).

The Quran does not explicitly forbid birth control nor impose restrictions on spacing pregnancies or limit the number of children. Many Islamic jurists consider family planning permissible in Islam. These jurists argue that the absence of specific guidance on contraception in the Quran is not an oversight by God, as He is believed to be all-knowing, and Islam is applicable throughout time ([Roudi-Fahimi 2004](#)).

### **03. Was any form of birth control practised during the time of the Prophet Muhammad saw?**

There are some 32 authenticated hadith concerning the practice of *al-azl* (withdrawal, coitus interruptus) as a contraceptive measure used by the Muslims at the time of the Prophet saw and by some of the Companions.

This method of preventing pregnancy was repeatedly mentioned to the Prophet and he did not prohibit it.

One hadith states that: “We [the Companions of the Prophet saw] used to practise *al-azl* during the time of the Prophet while the Quran was being revealed.” (Authenticated by al-Bukhari, Muslim, Tirmidhi, Ibn Majah and Ibn Hanbal).

Another hadith states that: “We used to practise *al-azl* during the time of the Prophet saw. The Prophet came to know about it but did not forbid us [doing it].” (Authenticated by Muslim).

No verse was revealed to ban the practice of *al-azl* as a form of contraception at a time when the Companions and Muslims of Medina were practising, it means that Allah swt does not prohibit the practice. The Companions practised *al-azl* with the Prophet’s knowledge and approval and it was considered by most theologians as confirmation of the permissibility of *al-azl*.



# 02



## The Malaysian Context

### 04. What are the fatwas and religious opinions (*fiqh*) on family planning in Malaysia?

Family planning is known as *Tanzim al-usrah* in Islamic *fiqh*. There are two forms of family planning, which are: –

- a) *Tanzim al-Nasal*
- b) *Tahdid al-Nasal*

#### 4.1 What is *Tanzim al-Nasal*?

According to the website of Mufti of Federal Territory's Office (2016), *Tanzim al-Nasal*, also known as birth spacing, is a family planning approach aimed at increasing the time interval between pregnancies. It involves various methods such as using contraceptive pills or intrauterine devices, engaging in sexual intercourse during infertile periods, using condoms, practising withdrawal methods, and ensuring post-intercourse semen removal from the woman's vagina.

*Tanzim al-Nasal* is considered permissible when three prerequisites are met:

- a The belief that a child is a divine blessing from Allah swt, and no external force can hinder its arrival. Consequently, it becomes obligatory for the couple to cherish and care for the child if they are blessed with one.
- b Ensuring that the chosen method of family planning poses no harm, particularly to the well-being of the wife.
- c The seeking of mutual agreement and consent from both the husband and wife before proceeding with the family planning measures.

Methods of *Tanzim al-nasal* are allowed following an athar (narration/ recounted) from Jabir RA, which translates to 'We used to practice coitus interruptus during the time of the Messenger of Allah when the Quran was being revealed' (*Sahih al-Bukhari 5209*).

#### 4.2 What is *Tahdid al-Nasal*?

*Tahdid al-Nasal* connotes a type of family planning that is more permanent, which is considered forbidden in Islam by many religious scholars (*Anuar & Rizal 2018*). It refers to the permanent medical or surgical procedures of sterilisation and abortion. According to the website of the Mufti of Federal Territory's Office (2016), these methods are strictly forbidden as they involve altering Allah's creation (in the case of sterilisation) and committing the act of murder (in the case of abortion). Such actions also disregard Allah's role as the ultimate Provider for both the parents and the child. Additionally, these practices are prohibited for unmarried individuals.

There is still a requirement for sterilization in women in circumstances that pose harm to the mother. For example, if a mother has undergone caesarean

surgery to deliver a child more than four times, sterilisation for women becomes obligatory. However, it is essential that the sterilisation method used can be reversed at a suitable time for pregnancy. This is because adhesions or scars in the uterus increase the risks and dangers during pregnancy. Conditions such as placenta accreta (abnormal attachment of placenta) and placenta previa (placenta lying low in the uterus) can lead to excessive bleeding during surgery (Nor & Yusof 2020).

## 05. What do the fatwas say about family planning in Malaysia?

The Malaysian National Fatwa Council 1981 issued a fatwa permitting contraception under the following conditions:

The wife is too weak or ill.

The husband or the wife carries a hereditary illness.

A pregnancy would endanger the life of the mother.

The wife has pregnancies too frequently.

The husband and the wife decide to space the children for reasons of health, education, and family happiness.

During the 28th Malaysian Islamic Religious Council Fatwa Committee *Muzakarah* (dialogue) held on 29th February 1991, the topic of discussion was the Norplant Suspension System (an implant-based contraceptive) within the framework of the National Family Planning Program. It was determined that the utilisation of the Norplant Suspension System is permissible. However, it is important to acknowledge that the usage of this system is subject to the decision made during the 12th *Muzakarah* on 20th January 1977, which serves as the governing ruling on Family Planning.

The Decision outlines the following:

- a) Sterilisation of both men and women is strictly forbidden.
- b) Preventing or limiting the number of children is also prohibited unless specific circumstances are permitted by *syarak*.

- c) Family planning methods that prioritise the health, education, and overall well-being of the family, employing approaches not covered by points (a) and (b), are considered permissible.

(Source: Compilation of Islamic Rulings Muzakarah Fatwa Committee of the National Council for Islamic Religious Affairs, pg. 138)

## 06. What are the laws and policies affecting family planning in Malaysia?

In present-day Malaysia, there are three primary organisations responsible for delivering family planning (FP) services:

- 1 the Ministry of Health Malaysia (MOH),
- 2 the National Population and Family Development Board (NPFDB), and
- 3 the Federation of Reproductive Health Associations, Malaysia (FRHAM); a non-governmental agency. Each of these agencies plays a distinct role in offering a range of contraceptive methods to couples and overseeing the subsequent aspects of FP (*Mansor et al 2015*).

The Population and Development Act of 1966 was enacted on 1 June 1966, establishing Lembaga Penduduk dan Pembangunan Keluarga (LPPKN) or National Population and Family Development Board as an autonomous statutory body. The Act outlined seven objectives for the LPPKN, which include:

- i. developing policies and strategies to promote knowledge and practice of Family Planning, with a specific focus on the well-being of mothers, children, and families.
- ii. programming, coordinating, and overseeing national FP activities.
- iii. providing training for all individuals involved in FP initiatives.
- iv. researching medical and biological methods related to FP.
- v. encouraging studies and research on the connections between social, cultural, economic, and population changes, as well as national fertility and maternity.

- vi. establishing evaluation mechanisms to periodically assess the effectiveness of the FP program and measure progress towards achieving national objectives.
- vii. hiring officers and assistants, as approved by the MWFCD (Ministry of Women, Family, and Community Development), to carry out the functions and responsibilities of the LPPKN.

## 07. What obstacles or difficulties are faced in raising awareness about family planning in Malaysia?

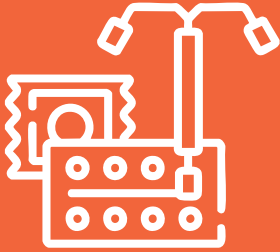
Research has shown that modern contraceptive methods are not widely used by married women in Malaysia. Throughout the past three decades, the rate of contraception has remained at approximately 50% for any method. However, when it comes to modern forms of contraception, only 34% of women opt for these methods (*Mansor et al 2015*). The Reproductive Rights Advocacy Alliance Malaysia (RRAAM) has reported a rise in unwanted pregnancies. It is due to the low uptake of contraception among Malaysian women.

The lack of family planning (FP) practice in Malaysia may be due to insufficient education and promotion of reproductive health. Additionally, there is a shortage of healthcare facilities and other factors such as poor compliance, lower levels of education, and socio-demographic factors contribute to this issue (*Mansor et al 2015*). Malaysia, like other countries in Southeast Asia, is experiencing rapid population growth, which has implications for the community and the economy.

An increasing number of Malaysian women are getting married and becoming pregnant for the first time after the age of 30, some of these can be considered high-risk pregnancies. Consequently, these women are less inclined to use family planning methods. The reasons for this include lack of information, knowledge, and positive attitudes towards contraception, concerns about safety or side effects, limited access to quality services, religious beliefs, socio-demographic factors, and limited choices of methods. These factors can lead to higher rates of maternal and perinatal complications and even mortality. Understanding these factors can help identify barriers to family planning practices and encourage active participation in family planning (*Mansor et al 2015*).

# 03

## Forms of Planning & Their Permissibility



### 08. What are the traditional forms of family planning?

There is a range of methods for family planning both in traditional and modern forms.

Muslim physicians during the medieval period extensively studied the medical aspects of birth control. These investigations were remarkable and surpassed European medical research until the 19th century (*Ibrahim 2018*). For instance, Ibn Sina (Avicenna) in his work “Qanun” or The Canon of Medicine listed 20 substances for birth control, while physicians like Abu-Bakr al-Razi in his “Al-Hawi fi al-Tibb” listed 176. The historical evidence abundantly demonstrates the widespread endorsement of contraceptive practices in Islamic history, both in theory and practice, through the legacy of medical encyclopedias.

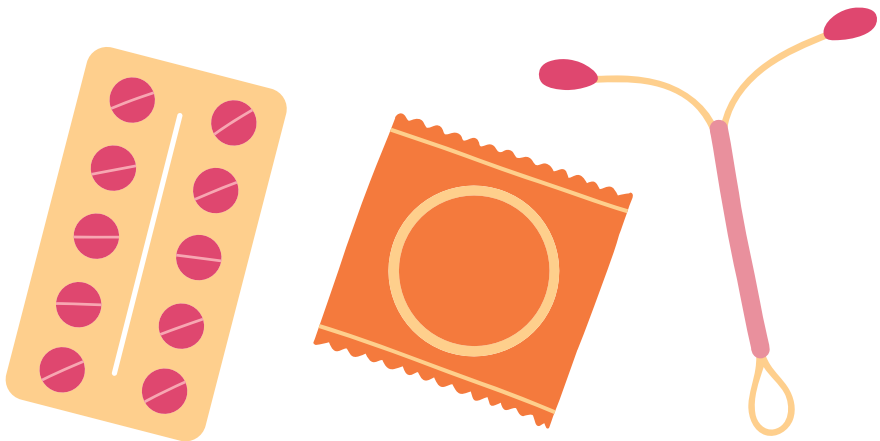


As mentioned, one of the methods employed by the companions during the time of the Prophet saw was the 'azl method, i.e. "coitus interruptus". This technique involves interruption of sexual intercourse before orgasm, commonly known as withdrawal or pull-out method. The male partner withdraws his penis from the vagina before ejaculating to prevent semen from entering the vagina and causing pregnancy. However, not all men possess complete control over this method, and inadvertent release of semen into the vagina may occur without the man's awareness. Hence, pregnancy can still transpire, making the effectiveness of this method reliant on its proper execution (Nor & Yusof 2020).

The rhythm method, known as the calendar method or calendar rhythm method, is a natural family planning technique. It involves monitoring your menstrual cycle history to forecast your ovulation period, enabling you to identify your most fertile times (Mayo Clinic 2023). For those aiming to conceive, this method can help pinpoint optimal intercourse days. Conversely, for those seeking to prevent pregnancy, the rhythm method aids in identifying days when unprotected intercourse should be avoided.

## 09. What are the modern forms of family planning?

The types of modern family planning methods can be divided into two, namely hormonal contraceptives and non-hormonal contraceptives (Nor & Yusof 2020). Hormonal contraceptives are the pill, depo injection and implant. Hormonal contraceptives such as birth control pills are a type of medicine consumed by women to prevent pregnancy. Examples of non-hormonal contraceptives are condoms, diaphragms, and IUDs/IUS. Non-hormonal contraceptives are family planning tools or methods that do not contain any form of hormones in them.



## 10. Does this mean that I can take the pill as a form of contraception?

Yes. It is not a sin to practice family planning by taking the contraceptive pill. The pill works by preventing ovulation and thickening the cervical mucus, thus making it difficult for the sperm to enter the uterus (*NHS 2020*). The pill makes sure that there is no meeting of the egg and the sperm at all. In fact, not only does no fertilisation take place, but the issue of killing either the sperm or the egg also does not arise as the pill ensures that there is no production of an egg and that the sperm does not even enter the uterus (*NHS 2020*). No fertilisation takes place.

The contraceptive pill contains one or two artificial hormones, like the hormones produced by the body at the time of pregnancy. Artificial hormone is a chemical product. It does not contain any animal by-products. The ingredients in the contraceptive pill have all been certified by the Drug Control Authority of the Malaysian Ministry of Health.

## 11. Does Islam allow the use of the Intrauterine Device (IUD)?

The use of an IUD is permissible. Any form of family planning method that prevents pregnancy and blocks fertilisation between the egg and the sperm is not forbidden in Islam. The IUD method is also a temporary method of contraception which does not permanently destroy a person's ability to procreate.

While the exact working of the mechanism remains unclear, the IUD does not prevent ovulation. Research shows that the IUD can prevent fertilisation by quickening the movement of the egg in the fallopian tubes and therefore preventing it from meeting the sperm. It can also change the uterine wall and affect its ability to receive the egg, as well as impede the movement of the sperm through the uterus and fallopian tubes.

## 12. What is the Islamic ruling in the case of a woman who dies with the IUD in her body? Should the IUD be taken out?

The IUD is made of plastic and copper and does not contain any medicine or forbidden ingredients. When a woman dies, her IUD does not have to be taken out of her body, just as an artificial bone or pacemaker need not be removed from the body of a Muslim at the time of death.

### 13. If my husband wears a condom, does this mean that we are killing an embryo?

The condom acts by collecting the semen that is ejaculated at the time of intercourse. The sperm is not an embryo. Only by fertilisation with the egg can an embryo be formed. The semen does not enter the vagina and therefore fertilisation does not take place, and no embryo is formed. The issue, therefore, of killing an embryo does not arise.

### 14. Is it true that it is a sin to use a condom because the semen is thrown away?

This is not true. Prophet Muhammad saw himself permitting the ummah to practice family planning by using the withdrawal method, in which the semen is ejaculated outside the vagina.

### 15. Is contraception equivalent to infanticide?

Those who oppose family planning argue that any practice that prevents pregnancy is infanticide. They quote several Quranic verses which prohibit infanticide such as [Surah al-An'am \(6:140, 6:151\)](#), [Surah al-Isra' \(17:31\)](#), [Surah al-Mumtahanah \(60:12\)](#), [Surah al-Takwir \(81:8-9\)](#), to justify why contraception is not allowed in Islam.

Preventing pregnancy is not infanticide. Infanticide occurs when a live child, already born into this world, is slain, buried alive, or abandoned. These were common practices, especially with the girl child, during the time of *Jahiliyyah*. Allah swt abhorred such practices, and the above verses were revealed explicitly prohibiting infanticide and declaring it a great sin.

Contraception prevents fertilisation. This means an embryo is not formed, and there is no question of it going through the stages of becoming a foetus and being brought into this world as a child. The prevention of fertilisation cannot, be considered infanticide.

Infanticide also occurs when a fully formed foetus (medically, this is defined as three months-old) is aborted. Proponents of family planning cite Imam Ali who, in the presence of Caliph Omar and other Companions maintained that infanticide could only apply once the foetus reached the seventh stage of creation, i.e. the stage of being "another creature" (*khalqan 'aakhar*). He based his opinion on [Surah al-Mu'minun \(23: 12, 13 and 14\)](#) explains the stages of creation:

*'Man We did create From a quintessence (of clay); Then We placed him as (a drop of) sperm In a place of rest, Firmly fixed; Then We made the sperm Into a clot of congealed blood; Then of that clot We made A (foetus) lump; then We Made out of that lump Bones and clothed the bones With flesh; then We developed Out of it another creature. So blessed be God, The Best to create!'*  
(Translation by Abdullah Yusuf Ali).

## 16. Can the use of contraception be regarded as opposing the concept of predestination (*qadar*), reliance on Allah swt (*tawakkal*) and the belief that Allah swt will provide for everything?

All Muslims believe in *qadar* and *tawakkal*. Ulama who supports the use of contraception sees its use as only a means to space out one's children. The result of the use of contraception is still in the hands of Allah swt. Contraception can succeed or fail, as Allah swt wills.

Islam does not encourage helplessness or idleness stemming from the belief that Allah swt will provide for human beings regardless of their efforts. Such an attitude prevents the ummah from progressing and benefiting from human and technological advances. To deepen rivers, to build dams and retaining walls to control flood waters – none of these acts constitute a denial of Allah's swt will or reliance on Allah swt.

### Surah al-Imran (3: 159):

*'It is part of the Mercy of God that thou dost deal gently with them. Wert thou severe or harsh hearted they would have broken away from about thee; so, pass over (their faults) and ask for (God's) forgiveness for them; and consult them in affairs (of the moment). Then when thou hast taken a decision put thy trust in God. For God loves those who put their trust (in Him).'* (Translation by Abdullah Yusuf Ali).

The last sentence means one is expected to use one's wisdom to take the initiative to achieve one's objectives, and only after that to rely on Allah swt.

Caliph Omar explained this verse to mean that, "Reliance on Allah swt means to plant the seed in the earth, then trust in Allah swt [for a good crop]."

In another hadith, a man who came to pray in the mosque asked the Prophet saw whether to tie his camel or just put his trust in Allah swt, the Prophet saw replied, “Hobble her and rely on Allah swt”. (Authenticated by al-Tirmidhi)

In other words, the Muslim is supposed to take the initiative first, and thereafter rely on Allah.

## 17. Does Islam advocate the ummah to have many children?

Those who oppose family planning proclaim that Islam ordains that the Muslim ummah procreates multitudes (*kathrah*) and that failure to do so is a deviation from the right path. They quote a popular hadith which states:

*‘Marry and multiply, for I shall make a display of you before other nations on the Day of Judgement.’* (Authenticated by Ibn Mardawehi with narration considered weak by al-Iraqi)

According to Dr Omran, however, the word “multiply” in the hadith is open to differing interpretations. It could mean marrying and procreating and having children, but not necessarily so many that this becomes a burden to the family and society.

Others have argued that while people usually hope to have children in marriage, this wish is not always fulfilled. This can be due to infertility, genetic illness, or a child’s death. If the purpose of marriage is to have children, should all marriages that fail to produce children be dissolved?

Should men and women who are infertile be prevented from marrying even though the inability to have children is not due to their intent? In fact, in Islam, no one may be asked to carry a burden which is beyond their capacity to handle (**Surah al-Baqarah, 2:286**).

Opponents of family planning also claim that family planning is a Western conspiracy to reduce the number of Muslims and diminish their power. Proponents of family planning, however, believe that the future of today’s Muslims has more to do with the quality of the ummah, its strength and progress, the ability to compete globally, and its piety and solidarity rather than the mere quantity of people.

## 18. Can the use of contraception be justified for other reasons?

In his research, Dr Omran compiled a list of 10 justifications acceptable to Muslim jurists:

- 1 to avoid health risks to a suckling child from the “changed” milk of a pregnant woman.
- 2 to avoid health risks, mental and physical, to the mother from repeated pregnancies and pregnancies at short intervals or young age.
- 3 to avoid pregnancy for an already sick wife.
- 4 to avoid transmission of disease to a progeny from affected parents.
- 5 to preserve a wife’s beauty and physical fitness, for the continued enjoyment of her.
- 6 husband and happier marital life, and to keep the husband faithful.
- 7 to avoid the economic hardships of caring for a large family which might compel parents to resort to illegal means to take care of many children or exhaust themselves in earning a living.
- 8 to allow for the education, proper upbringing and religious training of children which is more feasible with a small rather than a large family size.
- 9 to avoid the danger of their children being converted from Islam in enemy territory.
- 10 to avoid having children in times of religious decline.
- 11 to provide separate sleeping arrangements for children, a practice that is more feasible with fewer children.

In 1988, the late Dr Mohammed Sayed Tantawi, then Mufti of Egypt (and former the Grand Imam of al-Azhar University), issued a progressive fatwa which sanctioned family planning for economic, cultural or health reasons.

He also approved contraception for demographic reasons. According to this fatwa, it is justified for a rich couple with three children to use contraception not because they cannot afford more children, but because of the larger national interest to control population growth in the country in which they live.

## 19. What are the unacceptable reasons?

According to Dr Omran, they are:

To avoid bearing female children

To avoid pregnancy out of resenting the parental role

## 20. Should the use of contraception be a shared responsibility of a wife and husband?

Any major decisions in the family should be made with mutual consultation and consent between the husband and wife. Since *al-azl* was the common form of contraception in the early years of Islam, the juristic opinion was that it was permissible for men to use the withdrawal method, but with the consent of the wife as her pleasure would be affected.

Today, very few men take responsibility for contraception. Currently, there are only three family planning methods for men (condom, withdrawal, and vasectomy), while many exist for women. The burden of contraception usually falls on to women.

Sometimes the concept of mutual consultation and consent may pose a problem when a conflict arises between the husband and wife, especially in situations when the wife is regarded as unequal to her husband. In these circumstances, likely the husband's wish will be the dominant factor in deciding whether to use contraception, which method of contraception to use, or who should be responsible for contraception.

This of course violates the concept of mutual consultation and consent in Islam.

Involving men in family planning counselling leads to increased adoption of contraception, higher client satisfaction, effective use of contraceptives, and better continuation rates (*Najafi-Sharjabad et al 2014*). Husbands' opposition has been identified as a significant barrier preventing married women in Turkey from using any contraceptive methods. Similarly, in South Asia, the influence of peers, mothers-in-law, and elders have a role to play. Urban women are more

likely to use family planning if their mothers-in-law discuss it as an option for their families. Effective communication between husband and wife regarding family planning and their desired number of children is closely associated with successful contraceptive use.

## **21. Is it a woman's right to make a decision that is in her best interest and the best interest of the family when she fails to obtain consent from her spouse, even after consultation?**

According to Dr Omran and other Islamic scholars, in cases of necessity, exceptions to the rule of consent and consultation can be made following the conclusion that was reached among Islamic scholars at the Sisters in Islam's Regional Workshop on Islam, Reproductive Health and Women's Rights.

One justification for such an exception could be for reasons of health or welfare of the woman and/or the children. It was pointed out that the Hanbali school also holds the position that a wife can bypass the consent of the husband in extraordinary situations, for example, for the welfare of the family.

Thus, if having another child will adversely affect the woman's mental or physical well-being or the family's ability to provide adequately for the children, then a woman has the right to use contraception without the consent of the husband.

It is the woman who will get pregnant and bear the children. It is she who will be primarily responsible for and most burdened by the upbringing of the children, as most men still do not share equally the daily responsibility of childcare and housework. It would be logical, therefore, to assume that there would be cases where the woman should have the right to make such a decision if she and her spouse could not reach a mutual agreement.

## **22. What do women themselves think and do?**

In 1992, the International Reproductive Rights Research Action Group (IRRRAG) undertook a major international research project on grassroots women and their sense of entitlement or self-determination in everyday decisions about childbearing, work, marriage, fertility control and sexual relations.

The study on Malaysia revealed that Malaysian women showed a strong sense of entitlement, a consciousness of their right or authority to make decisions regarding fertility. Most of the 71 women interviewed in the study decided



to limit their childbearing through contraception, sterilisation or abortion. Often they decided on their own, without the knowledge or consent of their husbands.

It was found that they based this decision on the fact that as mothers, they were the ones primarily responsible for and most burdened by the upbringing of the children. This resolve cuts across ethnicity and religion and was reflected in the six other countries in the study; Egypt, Nigeria, Brazil, Mexico, the Philippines and the United States.

Hundreds of women interviewed rationalised that God is forgiving and was sure to understand the compelling grounds for the use of contraception; for the refusal of unwanted sex with their husbands; and, in some unavoidable circumstances, for their resorting to abortion. Thus, even though religious beliefs, as well as the teachings of the ulama, may prescribe otherwise, the women in the study had developed a practical morality based on their bodily suffering and their strong sense of social responsibility for their children and families.

### 23. Is sterilisation allowed in Islam?

Sterilisation was unknown during the time of the Prophet saw. Contemporary theologians had virtually no guidance from the usual sources of jurisprudence. Nevertheless, the majority of theologians prohibit permanent sterilisation because they likened it to castration and therefore considered it to be a change in Allah's swt creation.

Female sterilisation, commonly referred to as bilateral tubal ligation (BTL), is a procedure that involves tying, cutting, or removing the fallopian tubes, which are responsible for carrying eggs from the ovaries to the uterus. It is important to note that this method is permanent and offers a high level of contraceptive effectiveness, even though there remains a minimal possibility of pregnancy.

Various factors contribute to a woman's decision to choose this method of family planning, including advanced age, pre-existing health conditions that pose risks to the woman and her potential child, and a history of multiple caesarean section deliveries (three to five or more) (*Nor & Yusof 2020*).

There is a method of male sterilisation known as vasectomy, which offers a relatively simple surgical procedure. During a vasectomy, the sperm duct, known as the vas deferens, is either tied or removed, resulting in the absence of sperm in the man's semen. It is worth noting that even if the vas deferens is cut, it can be reconnected or opened. Unlike female sterilisation, vasectomy does

not require an extensive procedure, as it involves fewer tools. Additionally, the associated risks of this surgery are generally lower than those associated with female sterilisation (Nor & Yusof 2020).

However, Dr Omran and other Islamic scholars point out that vasectomy or tubal ligation does not impair the man or the woman's hormonal functions. Neither do these methods of sterilisation affect the man or the woman's sexual desire or ability to have normal sex. Therefore, they argue, that sterilisation cannot be equated to castration, which is the removal of the testicles, a procedure that affects the man's sexual abilities.

## 24. Is there a fatwa on sterilisation in Malaysia?

The National Fatwa Council in 1981 ruled that sterilising a man or woman is forbidden (*haram*). This is because sterilisation is regarded as a permanent form of contraception as it permanently impairs a person's reproductive function. However, exceptions can be made in certain situations. For example, when a woman cannot use any form of contraception for health reasons and pregnancy could endanger her life, sterilisation is permissible.

## 25. Why do some jurists say that sterilisation is permissible as a contraceptive method?

A small minority of jurists permit sterilisation because:

- i. there is no text on the prohibition of sterilisation either in the Quran or Sunnah.
- ii. sterilisation is a form of prolonged contraception and is resorted to after the desired number of children is achieved.
- iii. sterilisation protects a woman in her thirties, e.g., from prolonged use and cost of contraceptive methods.

Sheikh Ahmad Ibrahim, a leading Egyptian theologian in the first half of the 20th century, concluded that he saw no religious objection to sterilisation as it is not a crime against a being already in existence, nor a crime against a living child as the procedure avoids having children by avoiding the element that produces them in a generally accepted manner.

The Imami (Shi'i Islam) school of law allows sterilisation. It is assumed that such a serious decision is made voluntarily and for acceptable reasons (*Omran 1998*).

## 26. Now that sterilisation can be reversible, what do the jurists say about it?

According to Dr Omran, there are new arguments among jurists that sterilisation could be a permissible form of contraception. This is because advances in medical technology have made it possible for sterilisation done by surgical procedure to be reversed. A surgeon can recanalise a woman's fallopian tubes and a man's sperm duct should they later decide to have more children. Some methods of sterilisation are, in other words, no longer a permanent form of contraception, thus negating the old arguments against sterilisation being an unacceptable form of contraception based on permanently impairing a person's reproductive functions.



# 04



## On Abortion

### **27. Is abortion allowed in Islam?**

The contentious issue of legalising abortion becomes highly debatable due to the Islamic regulations concerning it. Within Islam, the act of abortion is generally regarded as morally incorrect as the Quran emphasises the sanctity of life. The sacred text explicitly states that terminating a pregnancy solely out of fear of inadequate provisions for the child is impermissible. Nevertheless, given the principle in Shari'ah law that promotes selecting the lesser of two undesirable options, most scholars concur that abortion is permissible if the mother's life is at risk due to the pregnancy. If the life of a woman is in danger, there is a consensus that abortion is permitted in Islam. In other cases, opinions differ.

There are varying opinions about the permissibility of abortion before 120 days. These include permitted:

Unconditionally, according to the views of the Zaydi, some Shafie and Hanafi scholars, and a few Maliki and Hanbali scholars

Conditionally if there is an excuse, according to some Hanafi and Shafie scholars

Under 40 days only – a minority opinion of Maliki scholars and Sai'id al-Boutti (Syrian Shari'ah scholar)

Abortion is prohibited under the following circumstances:

- 1 forced abortion done against the woman's will.
- 2 abortion as a routine method of family planning.
- 3 an unsafe abortion that will endanger the woman's life.
- 4 unsafe/unsanitary abortion due to medical circumstances under which it is conducted.
- 5 gender-selective abortion, i.e. abortion carried out based on the sex of the foetus.
- 6 pregnancies that have passed the fourth month (120 days) which is considered the time of ensoulment by most jurists.

Dr Omran pointed out that there is now debate among contemporary scholars on the time of ensoulment. Medical technology has shown that the quickening of the foetus takes place long before 120 days and therefore some scholars now believe that abortion is not permitted even before the earlier acceptable timeframe.

## 28. What does the Malaysian law say about abortion?

Following section 312 of the Penal Code 1936 in Malaysia, there exists a provision that permits abortion under specific circumstances. This provision allows medical practitioners to legally conduct abortions if they determine that the continuation of the pregnancy would pose a greater risk to the woman's physical and/or psychological well-being compared to terminating the pregnancy.

According to Shari'ah law, as stated in the fatwa issued by the 26th Muzakarah of the National Fatwa Committee in 1990, abortion is permissible if the foetus is within 120 days of gestation and the mother's life is in jeopardy, or if the foetus exhibits abnormalities. In cases involving girls under 18 years of age, parental consent is required.

## 29. Are there any policies regarding the termination of pregnancy in Malaysia?

Countries with strict abortion laws typically address unwanted pregnancies solely through primary and tertiary prevention measures. Primary prevention involves the provision of contraceptives, which can occasionally fail and may not be universally accessible. Tertiary prevention focuses on managing complications arising from unsafe abortions and providing post-abortion care. However, secondary prevention, which involves the availability of safe abortion services, is generally lacking.

As part of the strategy to reduce maternal mortality and morbidity, the Malaysian Ministry of Health (MoH) introduced the 2012 Guidelines for Termination of Pregnancy. These guidelines establish the standards for the safe provision of abortion services in Malaysia. However, the effective implementation of these guidelines largely relies on healthcare professionals. Unfortunately, research suggests that healthcare professionals have limited knowledge of abortion laws, leading to misconceptions that abortion is illegal. Consequently, they may offer uninformed advice to continue with pregnancies.

A 2013 study conducted by UNFPA, and the University of Malaya reported that around 70% of medical students knew about safe abortion procedures, but fewer than 25% were aware of Malaysia's low contraceptive prevalence rate (CPR) for modern methods, which is less than 40% ([Low et al 2013](#)). Among doctors in the survey, over 80% had some understanding of abortion, especially safe procedures, but had limited knowledge about abortion methods and the risks involved ([Low et al 2013](#)). Slightly over one-third of the doctors correctly identified the preferred methods for first and second-trimester abortions ([Low et al 2013](#)). Additionally, more than 80% of doctors knew that abortion is legally permitted in specific situations ([Low et al 2013](#)). However, most were uncertain or unaware of whether abortion is allowed in cases of rape or fetal abnormalities ([Low et al 2013](#)). Most medical doctors held conservative and "pro-life" views when it came to matters of sexuality and abortion ([Low et al 2013](#)).

# 05



## Beyond Malaysia - The International Context

### **30. What about fatwas and religious opinions (*fiqh*) on family planning in other countries?**

According to the website of Mufti of Federal Territory's Office (2016), there are a few religious opinions that are in support of family planning to an extent.

Imam al-Ghazali holds the belief that abortion is completely forbidden, regardless of the stage of pregnancy, as it involves ending the fundamental essence of human life. However, he allows for the practice of coitus interruptus (withdrawal method) under certain permissible circumstances, which include economic factors, the health of the wife, and the desire to maintain the wife's beauty to foster enduring love and care within the marriage and prevent divorce. However, Imam al-Ghazali condemns family planning as motivated by the fear of having a daughter. It is unacceptable and goes against Islamic principles [*Ihya' Ulum al-Din* (2/52)].

Fatwa was issued by Syeikh 'Atiyah Saqr through Dar al-Ifta' al-Misriyyah in Egypt, addressing the issue of sterilisation as a means of family planning for health reasons or other valid justifications for a specific period. It is allowed under the condition that the individual's reproductive capacity remains intact, and they can regain the ability to reproduce after the specified duration. However, if the sterilisation is irreversible, it is prohibited unless there is severe and imminent danger or threat to a woman's life. [*Fatawa Dar al-Ifta' al-Misriyyah* (47/10)]

The National Ulama Conference on Population, Health, and Development which was held in 1983, Indonesian Ulema Council (MUI) issued a fatwa that aligned with the concept of *Tanzim al-nasl*, i.e. allowing family planning. However, it is crucial to exercise caution and consider specific types and mechanisms of contraception despite the existence of various fatwas that endorse its permissibility (*Hermanto et al 2020*).

Overall, legal scholars opined that contraception is permissible if it is used safely and for valid reasons. Islam prohibits contraception to avoid having female offspring. While most theologians believe that contraception is allowed in Islam, they generally restrict its practice to temporary methods. However, when it comes to permanent methods such as female and male sterilisation, a significant number of theologians have expressed reservations. These theologians who oppose sterilisation view it as an interference with God's will and an attempt to alter what God has created. Some scholars who disapproved of male sterilization believed it was a castration which was prohibited in hadith. (*Roudi-Fahimi 2004*).

### 31. What are some of the laws and policies affecting family planning in other Muslim countries?

As per the legislation of the Republic of Indonesia, specifically Law Number 10 of 1992, in Article 1, Paragraph 12, pertaining to population growth and the promotion of thriving families, family planning is defined as a proactive initiative



aimed at enhancing consciousness and engagement within the community. In Indonesia, this is achieved through various means such as encouraging individuals to marry at an appropriate age, implementing effective birth control methods, fostering resilience within families, and improving overall family well-being. The ultimate objective is to attain smaller, more content, and prosperous families (*Hermanto et al 2020*).

In Bangladesh, husbands' reluctance is a barrier to women's control over their fertility due to structural factors. Myths and misconceptions about contraceptive pills are common, and limited access to trained family planning providers and religious norms also hinder the use of oral contraceptives. Despite this, the government has acted, engaging Islamic scholars to promote maternal and child health, including family planning efforts (*Shaikh et al 2013*).

In Iran, policymakers, including government officials and religious figures, came together with experts and realised that the country couldn't meet the needs of its people due to rapid population growth. To address this, they created a population policy as part of the national development plan. Family planning became a crucial strategy to reduce poverty and achieve development goals. Religious leaders also played a key role in dispelling community concerns about contraceptives. This approach was distinctive in Iran's family planning efforts. Efforts were also made to combat social stigmas, involving non-governmental actors like religious scholars, to change men's negative attitudes towards permanent contraception. Political figures strongly supported and promoted these efforts (*Shaikh et al 2013*).

In Egypt, the Grand Mufti Shaykh `Abd al-Majid Salim, a prominent authority on Islamic law, allowed contraception in the 1930s, leading to the establishment of birth control clinics. He stated that early followers of the Prophet saw practised contraception, and the Prophet did not prohibit it. In 1964, Sheikh Hasan Ma'mun promoted contraception to address evolving needs. Since 1980, religious leaders have actively participated in public education campaigns, affirming the acceptability of birth control in Islam. In the 1990s, the National Population Commission incorporated population issues, including religious education, into the curriculum (*Shaikh et al 2013*).

In Jordan, the lack of awareness and acceptance of contraceptives is influenced by social constructs and adherence to traditional practices, often with religious implications. Islamic teachings have been interpreted as opposing family planning methods, but this may not be entirely accurate, as Muslim leaders may not be more opposed than others in society. Cultural, familial, and religious pressures on Jordanian women limit their ability to space births. Son preferences and religious norms also affect contraceptive behaviours among

them. In rural areas, involving religious leaders in family planning programs has positively impacted women. Family planning initiatives supported by fatwas have encouraged contraceptive use within Muslim communities (*Shaikh et al 2013*).

For effective family planning policies, it is essential to consider elements such as family dynamics, culture, and religion. These factors play a significant role in shaping attitudes and behaviours towards family planning, and their inclusion is crucial for achieving positive outcomes.

### 32. Are the concepts of Reproductive Rights articulated at the International Conference on Population and Development in Cairo, in 1994, compatible with Islam?

The concepts of reproductive health and rights recognise four basic principles:

- a** the right to freely decide the number and spacing of children, and the right to have the information and means to do so.
- b** the right to attain the highest standard of sexual and reproductive health.
- c** the right to make decisions concerning reproduction free of coercion, discrimination, or violence; and
- d** the right to have satisfying and safe sexual relations.

Dr Omran said in the SIS workshop that these rights are all compatible with Islamic principles and the objectives of Islamic law (*maqasid al-Shari'ah*). The rights are encompassed by the five basic objectives of Shari'ah which are meant to benefit the individual and the community:

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li><b>1</b> To preserve life</li> <li><b>2</b> To preserve intellect</li> <li><b>3</b> To preserve faith</li> </ul> | <ul style="list-style-type: none"> <li><b>3</b> To preserve lineage</li> <li><b>4</b> To preserve property</li> </ul> |
|---|---|

In Islamic jurisprudence, laws and policies that serve the goals of Shari'ah are considered valid in Islam. The four basic principles of reproductive health and rights do not violate the five objectives of Shari'ah, nor the Islamic principles of justice, equality, freedom and dignity.

### **33. Is the concept of equality between women and men in matters of sexual relations and reproduction as underlined by the Platform for Action of the Women's Conference in Beijing, 1995, compatible with Islam?**

The Beijing Conference placed the concept of reproductive rights firmly within an overall framework of gender equality and women's human rights. Does this contradict the teachings of Islam? Muslim reformists and women activists contend that the principles of equality and justice do not contradict the teachings of Islam. Rather, these principles are insistently and repeatedly enjoined by the Quran.

Several Quranic verses talk about mutuality in the relationship between women and men. In **Surah al-Imran 3:195**, **Surah an-Nisa 4:124**, **Surah al-Tawbah 9:71-72**, **Surah an-Nahl 16:97**, **Surah al-Ahzab 33:35-36**, **Surah Ghafir 40:40**, Allah swt specifically addresses both women and men, giving them equal roles and responsibilities in spiritual life and in the Islamic struggle, as well as equal rewards and punishment for their actions.

Other verses in the Quran talk about their mutual relationship. In **Surah al-Baqarah, 2:187**, the Quran describes Muslim men and women as each other's garments; they are for mutual support, mutual comfort and mutual protection, fitting into each other as a garment fits the body (commentary by Abdullah Yusuf Ali).

In **Verse 195 of Surah al-Imran**, the Quran states: *And their Lord hath accepted of them and answered them: "Never will I suffer to be lost the work of any of you be he male or female: ye are members one of another..."* (Translation by Abdullah Yusuf Ali).

In **Surah al-Tawbah, 9:71**, the final verse on male-female relationships, the Quran talks about women and men being each other's *awliyya* – protecting friends and guardians. Such values imbedded in the message of the Quran therefore cannot justify inequality of women and men as demonstrated in acts

of discrimination against women, or, indeed, domestic and sexual violence against a wife.

Based on this understanding of the ethical message of the Quran, many Islamic scholars believe that the concept of equality between women and men, justice, and the rights of women are all compatible with Islam. They believe that the concepts of equality, justice, mutual consent and consultation can be developed within marriage in Islam so that a more stable, safe and satisfying family relationship can evolve.

### **34. What do international women and human rights conventions, and treaties say on family planning?**

Apart from the conferences mentioned earlier, various international women and human rights conventions and treaties also address the topic of family planning. International frameworks have long acknowledged the crucial significance of family planning, emphasising its accessibility as a key factor in achieving gender equality and empowering women (*UNU-IIGH 2020*).

In the past four decades, the global Muslim population has been consulted in addressing reproductive health and family planning. Conferences like the Rabat conference in 1971 and the Indonesian Congress in 1990 have led Muslim nations such as Egypt, Morocco, Bangladesh, and Indonesia to actively seek effective approaches for implementing family planning initiatives to improve the well-being of mothers and children in their countries (*El Hamri 2010*).

#### **i. Beijing Platform for Action**

The Beijing Declaration and the Platform for Action, which received unanimous adoption by 189 countries at the Fourth World Conference on Women in 1995, is widely regarded as the most comprehensive global policy framework for the advancement of women's rights. It upholds the rights of both men and women to be fully informed and have access to safe, effective, affordable, and socially acceptable methods of Family Planning (FP) for fertility regulation.

It also recognises the right to access appropriate healthcare services that ensure the well-being of women throughout pregnancy and childbirth, while maximising the chances of healthy infant outcomes for couples. The promotion of these rights, responsibly exercised by all individuals, should form the fundamental basis for government and community-supported policies and programs in the realm of reproductive health, which includes FP.

This commitment entails ensuring the promotion of respectful and egalitarian

gender relations, as well as equal access to and equitable treatment of women and men in education and healthcare, along with the improvement of women's sexual and reproductive health and education (*UNU-IIGH 2020*).

## ii. International Conference on Population and Development (ICPD) or the Cairo Agreement

The pivotal occurred during the 1994 International Conference on Population and Development (ICPD), also known as the 'Cairo Agreement'. This historic gathering involved 179 nations, including Islamic states, and resulted in the adoption of a comprehensive plan of action aimed at guaranteeing the widespread availability of reproductive health services. The all-encompassing plan envisions a healthcare system and societal framework that facilitates access to reproductive health choices for everyone. The ultimate objective is to ensure that by 2015, all individuals have voluntary and unrestricted access to a complete range of reproductive healthcare services and information, which will be integrated into primary healthcare systems. Numerous Muslim countries embraced the Programme of Action proposed by the ICPD, acknowledging its compliance with their Islamic stance and domestic laws (*El Hamri 2010*).

The ICPD's Programme of Action called for universal access to comprehensive reproductive healthcare services, encompassing voluntary FP, safe pregnancy and childbirth care, and the prevention and treatment of sexually transmitted infections (STIs). It also acknowledged the interconnection between reproductive health and women's empowerment, highlighting the importance of both for societal progress. It affirmed that all individuals and couples have the inherent right to determine the timing and spacing of their children, along freely and responsibly with access to the necessary information, education, and resources to exercise this right. According to the ICPD's Programme of Action, governments should define their family planning objectives based on the information and services needed by individuals who currently lack access.

## iii. United Nations

In 2015, the United Nations General Assembly adopted a comprehensive global development agenda known as the Sustainable Development Goals (SDGs). This agenda comprises 17 interconnected goals and 169 strategic targets that aim to be accomplished by 2030. The achievement of the SDGs requires the involvement of all sectors of society and encompasses various dimensions, driving the allocation of global financial and human resources to support nations' policy priorities. One crucial target for realizing specific SDG Goals is to ensure universal access to Sexual and Reproductive Health (SRH) and Family Planning (FP) services by 2030. This target holds significant importance as it is among the most cost-effective aims within the SDGs. Investing in FP

yields benefits across multiple areas and plays a crucial role in driving progress toward the attainment of the remaining SDGs (*UNU-IIGH 2020*).

#### iv. CEDAW

During the 2019 review of the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), it was observed that women in Malaysia continue to face challenges related to the 'availability, accessibility, and affordability of high-quality services' (*UNU-IIGH 2020: 9*). Often, a religious viewpoint takes precedence over a rights-based approach to sexual and reproductive health (*UNU-IIGH 2020: 9*). Such a position marginalises vulnerable woman and girls including but not limited to unmarried youth, refugees, indigenous, migrants, and prisoners (*UNU-IIGH 2020: 9*).

Despite the inclusion of a Family Planning (FP) program into primary health care, Malaysia exhibited the lowest Contraceptive Prevalence Rate (CPR) and the highest unmet need among the selected countries (*UNU-IIGH 2020*).



# Conclusion

Many women have limited authority over their sexual and reproductive lives and involvement in decision-making processes, which negatively impact their well-being. While scholars generally forbid tahdid al-nasal, which means reducing the number of children, they do allow tanzim al-nasal i.e. spacing children for family stability. This means family planning is permissible. Temporary contraception to prevent pregnancy and focus on caring for young children after childbirth are allowed.

However, it truly takes a village for the practice to take root in our community. Steps towards such a route must go beyond the focus of population dynamics to a comprehensive agenda centred around sexual and reproductive health and rights (SRHR). This approach prioritises individual needs, choices, and rights, with a special focus on women and adolescents. It advocates for upholding rights and choices, promoting gender equality, and empowering women in the pursuit of betterment in society.



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