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Research Article

PRACTICE OF FAMILY PLANNING METHOD AMONG RELIGIOUS GROUP OF INDIA

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ABSTRACT

Family planning and population control have been a central national issue for many decades. Family planning means that the family is small and there is a great difference between the children. At the national level, its impact is due to population control. Family planning people do as they wish but the population control depends on the planner's will. After the emergency, the family planning name was changed to family welfare in 1976.

Key Words:

Fertility, Contraception, Sterilization,
Vasectomy etc

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INTRODUCTION

It is true that India is a poor country and has diverse religious population. But poverty is not a direct result of the population. Rather, the opposite often leads to poverty and the population increases. So if we study about the problems of population, then poverty will have to be overcome first. It is said that development is the best contraception. This has been proven in many countries of the world. In many countries except China, the birth rate decreased without any national program of population control. And now many of them are worried about increasing the birth rate. India was the first country to start family planning program in 1950, yet our population continued to grow. This is because of poverty. After the social revolution in China, birth control began very strictly. Initially, the birth rate decreased. But a family could not work for a child's policy. It happened that the second child was kept hidden in the census. This forced a whole generation in China to live without a brother and sister. Population control has failed in both democracy like India and China, the only reason for this in both countries was poverty and different behaviour existed in different religion.

India's Muslim population is the third highest in the world, and is the most Muslim minority population worldwide. Most Muslims in India belong to the Indian ethnic group, which includes some of the Muslims from outside India, main forms From Persia and Central Asia.

Objectives of the Study

The main objective of the study is to know the family planning method among the different religions of India. Thus the specific objective are as follows:

- To know the level of awareness and the use of contraception
- To know the barriers of family planning methods
- To know the consequences of none use of family planning method

Family Planning Methods

Today, how much do the Indian couples use contraceptive measures, the Indian young couple, whether from a single income family or from the double income family, are completely involved in their thinking about the use of contraceptives. These young couples wear the clothes of the international brand, but they feel ashamed to embrace the safe and effective methods of contraception and talk about them. The information related to contraceptives of most couples is limited and sometimes it is wrong.

Vasectomy (tubectomy): In this process, the ovum tubes of the woman are bitten by cutting it, so that the egg/sperm cannot move forward from the fallopian tube. This operation has no effect on femininity.

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Condoms: This is the way by which the male contributes to contraception. If a man does not use a condom properly, then it can also fail to stop the pregnancy. The condom failure rate is 12%, due to the absence of air in the condom or its hole due to heat.

Jelly: It is a type of chemical cream that kills male sperm before it is inserted in the female vagina and does not allow them to reach the uterus. The tablet, which is given in contraceptive for women, is kept in the vagina, now a days it is known as "Today". If the newlyweds have to avoid pregnancy, mixed consumption of condoms and jellies acts as the best contraception and its failure rate is only 3%.

Diaphragm: Keeping the diaphragm in the vagina, the sperm is covered over the entrance of vagina and it prevents the entry of the sperm in the vagina. It is inserted in the vagina of the woman before using it and after sexual intercourse it must be kept for 6 to 8 hours, it prevents sperm from going into the uterus. Since the physical size of women is different, therefore a slight investigation is required. Diaphragm is available in 3 sizes - Small, medium and large. Its looseness causes its failure.

Copper T Women: The misunderstanding is that Copper T climbs up. This is a completely misconception. Before applying copper tea, you should check with your gynecologist and follow the advice. There are many types of copper t available in the market at this time.

200-B: It is set free in government hospitals and its period is for 3 years.

380-A: Its period is for 10 years.

Multiload: It lasts for 5 years. It is foreign.

Silver Lilly: Its duration is for 7 years.

Copper-7: This contraceptive period is also for 7 years.

Contraceptive Vaccines: Now in the Indian markets, there are two types of contraceptive vaccines. D.M.P.A. (Depmedermyoxy progesterone acetate): This contraceptive vaccine is applied to the woman's hip and its success rate is 99 percent. This vaccine is applied every 3 months. Doctors believe that it is very effective and safe.

Narplant: This contraceptive vaccine is available in the market and big hospitals. There are 6 sylastic sticks in the hormones, which are injected under subcutaneous skin by the subcutaneous trekker and cannula, the upper part of the woman's left arm. Harmonic medicine goes into the body lightly.

Contraceptive pills: The history of the contraceptive pillar is 40 years old, but even today the contraceptive pill is considered as hawva. The contraceptive pill is taken daily for 21 days, after which it is stopped for 7 days, during which menstrual discharge occurs. According to a study in the United States, the contraceptive pill protects the woman from the inner lining of the uterus and the cancer of the ovaries and this defense continues until after the bullets are consumed. According to the data provided by doctors in India, 29 percent of women are instructed to take birth control pills but only 2 percent of women who come under the age of conceiving, use oral contraceptives. Today's all modern contraceptive pills are of "low dose" in variety, in which the amount of Harmon is kept at a minimum, which can control the reliability, safety and

menstrual cycle. The pregnancy of the tablets only prevails when the woman shoots one or more times or they do not consume them at the right time.

Non-scalpel Vasectomy: This is the new method of sterilization of men. It is done by doing a small hole instead of one or two incisions in the scrotum. No soldering is made in this. Thus the pain is less. It saves operation time. There is no adverse effect on sexual process or ejaculation in any manner. For ejaculation at the time of intercourse, enough semen comes out as before but sperms. According to the gynecologist, the most sad thing is that, despite being so contraceptive, abortion is used only as a contraceptive. Women forget to eat pills. Condom husbands do not like. There are so many fears among women about other methods that they are not afraid of using abortion as a contraceptive. Women using Abortion as contraceptive could not even remember how many miscarriages, how long they had been done.

Even the mother of a 40-day-old child is seen coming to abortion. After infant birth, women are careless for contraceptive measures for some time. It is also a misconception that pregnancy does not occur after breastfeeding the infant. Only after giving birth to a baby, if the woman adopts a miscarriage, then it is more dangerous because the uterus can rupture due to weakness and it can be completely removed. So do not be ashamed of contraception, adopt them.

RESULT & DISCUSSION

According to the 2011 census, the highest concentration of Muslims in India is 47 per cent. The Muslim users are more pronounced in three states of India such as Uttar Pradesh (3.07 crores, 19.3 per cent), West Bengal (2.02 crores 25 per cent) and Bihar (1.37 Crore 16.9 per cent). Muslim in Lakshadweep (93 per cent in 2001) and Jammu and Kashmir (67 per cent in 2001) represent the majority of the local population in which family planning method users are very less. In India, third largest population of Muslims are residing, that is why India is being considered as a secular country in all over world, not only Muslims but other religion's followers are also residing in India.

Muslims belongs to a very high fertility rate (TFR) as compared to the other religious communities in India, Hindu stand second as per TFR is concerned. Because of the high birth rate and low death rate, the Muslim populations are increasing day by day, and the other reason is to increase population is the migrant, who is coming from neighbour country Bangladesh, Pakistan and Afghanistan. The percentage of Muslims in India was 10 per cent in 1991 and increased to 13per cent in 2001. In the total growth rate, the Muslim population growth rate is more than 10per cent compared to the growth rate of Hindus. The use of family planning method is very low among Muslims; it could be one of the reasons to rapid increase in total population. However, since 1991, the biggest decline in IMR rates is also occurred among Muslims.

Table 1 Religion wise Population of India

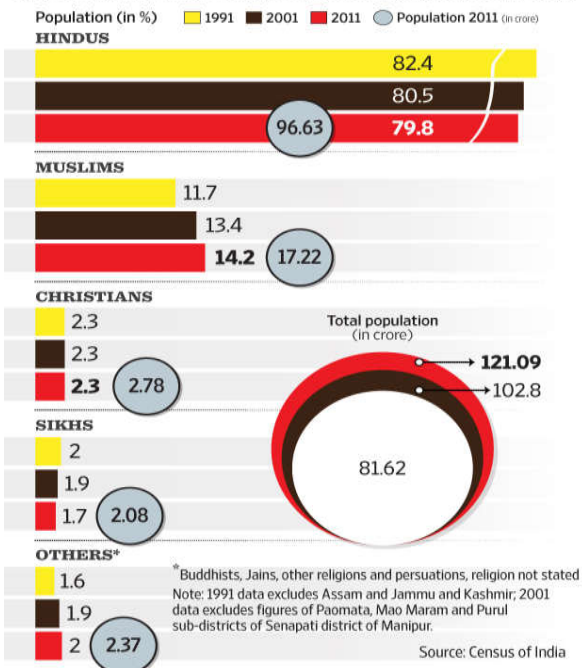
Religion	Percentage	Estimated Crore/ Lakhs	Total
All Religion	100.00	121	1,210,854,977
Hindu	79.80	96.62	966,257,353
Muslim	14.23	17.22	172,245,158
Christian	2.30	2.78	27,819,588
Sikh	1.72	2.08	20,833,116
Buddhist	0.70	84.43	8,442,972
Jain	0.37	44.52	4,451,753
Other Religion	0.66	79.38	7,937,734
Not Stated	0.24	28.67	2,867,303

Source: Census of India

Data shows in the table no. 1 stated that overall population grew at the rate of 17.7 per cent between 2001 and 2011 and its became 121 crore of India's population. The growth rate was high among Muslims as 24.6 per cent population was increases during 2001 to 2011 and among Hindus, the growth rate was 16.8 per cent during 2001 to 2011. The growth rate comparatively low among Christian, Sikh, Buddhist and Jain it was 15.5, 8.4, 6.1, 5.4 per cent respectively.

INDIA'S NEW RELIGIOUS MOSAIC

The Population by Religious Communities of Census 2011 released on Tuesday reveals that Islam is the fastest growing faith in India.

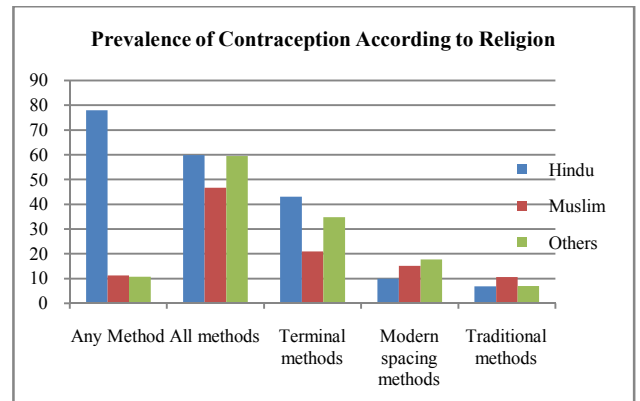


“Even the recent Pew Research Centre study showed Islam is the fastest growing religion (in the world). Muslim infant mortality is lower than other religions—this effect can be seen in the number of births per woman, which means Muslims have a higher total fertility rate than that for Hindus and Christians”. As per as age specific fertility rate is concerned, it is varies from Muslim, Hindu and Christians, generally age at marriage is very low among Muslims women they get married in early age which result fertility in early age. The span of reproduction and fertility is also very high among Muslim women, they start delivered child when the puberty starts and fertility end with menopause. So, the Muslim women have more chances to conceived pregnancy in early age than Hindu and Christians women.

Table 2 Prevalence of contraception in different religion aged 15–49 years in India

Particulars	Proportion of women (per cent)	Prevalence (per cent)			
		All methods	Terminal methods	Modern spacing methods	Traditional methods
Religion					
Hindu	78.0	59.9	43.0	10.0	6.9
Muslim	11.3	46.7	21.0	15.1	10.6
Others	10.7	59.5	34.8	17.7	7.0
Surviving children					
0	8.5	8.2	0.7	4.2	3.3
1	14.9	35.9	6.3	19.3	10.2
2	27.4	69.2	46.5	15.2	7.5
>2	36.4	62.2	47.3	7.2	7.7
Total	100.0	58.3	39.6	11.4	7.3

Data presented in table no. 2 is about contraceptive prevalence among Hindu, Muslim and other religion in India. Data reveals that 78 per cent Hindu women are using contraception while only 11 per cent of Muslim women are using contraception. However, 60 per cent Hindu women are protected by any contraceptive whereas only 46.7 per cent Muslim women are protected by contraception. The variation is more pronounce among Hindu and Muslim and other religion women while they are practicing terminal, modern and traditional family planning methods.



Recent reports of Pew Research Centre (April 2, 2015) have given some forecasts regarding the population of India in the coming years. According to the report, by 2050, the population of Hindus in India will decrease from current 79.5 per cent to 76.7 per cent, while the population of Muslims will close to 18 per cent. In 2050, the number of Indian Muslims will be more than their population in Pakistan and Indonesia.

After all, what is the reason that the Muslim population of the country is growing faster than the Hindus. Let us look at the regional differences in the growth rate of the population of Hindus. In those southern states, where literacy rates are high, such as Tamil Nadu, Karnataka and Kerala, the rate of increase in the Hindu population is far less than the northern states like Uttar Pradesh, Bihar and Madhya Pradesh. In India, a large number of Muslims live in their communities and their income is less than the average. As it is clear from the report of the Sachar Committee, discrimination is done in the matter of employment and business opportunities with the Muslims. The result is that their economic condition is either stable or falling. While the whole country is becoming financially prosperous on one hand, situation in the case of Muslims is reversed.

CONCLUSION

Family planning methods is not so pronounced among Muslims of India, but interest rate towards adoption of contraception is increasing day by day. Muslims do not adopt the means of family planning due to lack of knowledge not due to their religion. According to a literature 'Family Planning and Legacy of Islam' (Family Planning and the Legacy of Islam), Islamic scholar AR Omaran of Cairo strongly denies the myth that Islam is against family planning. According to that, there is no restriction on prevention of pregnancy in the holy literature 'Quran'. In Islamic countries like Turkey and Indonesia, different methods of family planning are quite popular.

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