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# Countering Conventional Wisdom: New Evidence on Religion and Contraceptive Use

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# Background

The debate over contraception has long been settled in real-life America. At some point in her life, virtually every woman in the United States uses at least one contraceptive method. Likewise, contraceptive services are recognized by government bodies, professional health care organizations and a wide range of other experts as a vital component of preventive and public health care.

Even so—and despite the strong body of evidence demonstrating that contraceptive use and the prevention of unintended pregnancy improves the health and social and economic well-being of women and their families—contraception continues to be perceived as controversial among some policymakers and is opposed by the Catholic hierarchy and some other socially conservative organizations. Among recent actions, the U.S. Conference of Catholic Bishops (USCCB) has led the charge against the Department of Health and Human Services designating contraceptive services and supplies as a women’s preventive health service that must be covered in all health insurance plans without cost-sharing (such as co-pays or deductibles) under the new health care reform legislation. Likewise, the USCCB and other socially conservative groups have long opposed publicly funded family planning programs for young and low-income women and continue to advocate for special exemptions so broad as to allow entire institutions, including insurance plans and hospital networks, to refuse to provide contraceptive services and supplies.

The Catholic hierarchy also opposes the use of contraceptive methods other than natural family planning (i.e., periodic abstinence, temperature rhythm and cervical mucus tests). In contrast, although no single entity claims to speak on behalf of U.S. Evangelicals on the issue of contraception, there is evidence that most Evangelical leaders and church members are open to the use of contraception, including hormonal methods and sterilization, for married women as a matter of personal conscience.<sup>1</sup> However, most Evangelical leaders strongly oppose sexual activity—and contraceptive use—among unmarried women of all ages. Mainline Protestant denominations and their leaders, meanwhile, have historically supported contraceptive use, often for all women, or at the very least for married women.<sup>2</sup>

This report provides important context to this ongoing policy debate by examining religion and contraceptive use among U.S. women: the extent to which women of various religious affiliations practice contraception and the methods they use. Data for the report come from the 2006–2008 National Survey of Family Growth (NSFG), which gathered information on contraceptive use from a nationally representative sample of women. Our analysis focuses on women who identify as Catholic, Mainline Protestant and Evangelical Protestant and includes information about attendance at religious services and religiosity. Our measures of contraception focus on highly effective methods because access to these methods would be directly affected by recently proposed legislation. All differences presented are statistically significant at the  $p < .05$  level. (More information about the data set and measures is available in the Appendix on page 8.)

1 Barrick A, Most Evangelical leaders ok with birth control, 2010, <<http://www.christianpost.com/news/most-evangelical-leaders-ok-with-birth-control-45493/>>, accessed Mar. 1, 2011.

2 Religious Coalition for Reproductive Choice, Access to contraception, no date, <<http://rcrc.org/issues/contra.cfm>>, accessed Mar. 24, 2011.

# Findings

## Religion among women of reproductive age

While much has been made about the increasingly secular nature of contemporary U.S. society, the majority of women of reproductive age (15–44) have a religious affiliation, attend religious services at least once a month and indicate that religion is very important in their daily lives.

- Eighty-three percent report a religious affiliation:
  - 48% identify as Protestant, among whom 53% are Evangelical and 47% are Mainline Protestant (including Methodists, Presbyterians and other groups);
  - 25% are Catholic; and
  - 11% identify with another religion (e.g., Buddhism, Islam, Judaism).
- Some 33% of reproductive-age women report attending religious services at least once a week, 20% attend monthly, 26% attend less than once a month and 20% never attend religious services.
- Evangelical Protestants are more likely than Catholics or Mainline Protestants to attend religious services on a weekly basis (55% vs. 30% and 24%, respectively; Figure 1).
- Catholic women are equally likely to attend church weekly, monthly or less frequently (29–30%).
- The majority of women with a religious affiliation, 57%, indicate that religion is very important in their daily life, and an additional 38% characterize it as somewhat important. Evangelicals are more likely than Catholics or Mainline Protestants to indicate that religion is very important to their daily life (77% vs. 46% and 44%, respectively).

## Religion and sexual experience

Sexual experience among never-married women of all religious affiliations is common: It is reported by four in 10 adolescents aged 15–19 and eight in 10 young adults aged 20–24. Among those aged 20–24, Evangelicals are slightly less likely to have had sex than are Catholics or Mainline Protestants.

- Among never-married adolescent women, 42% have ever had sex. While levels of sexual experience vary somewhat across the three main religious groups,

these differences are not statistically significant (Figure 2, page 6).

- Among never-married young adult women, 79% are sexually experienced. Evangelicals are less likely than Catholics or Mainline Protestants to have ever had sex (75% vs. 89% and 86%, respectively).
- Among all women of reproductive age who have never had sex, Evangelicals are more likely than Catholics or Mainline Protestants to cite religious or moral reasons as their main motivation for remaining abstinent (63% vs. 31% and 36%, respectively).
- Never-married women of reproductive age who attend religious services every week are less likely to have ever had sex than are those who attend less frequently (48% vs. 74–80%), and this association applies to both adolescents and young adult women.
- Similarly, never-married women with a religious affiliation who indicate that religion is very important in their daily lives are less likely to be sexually experienced than are those who indicate religion is less important (59% vs. 74–80%), and this association applies to both adolescents and young adult women.

## Religion and contraceptive use among all women

Most sexually active women who do not want to become pregnant—whether unmarried, currently married or previously married—practice contraception. The large majority use highly effective methods. This is true for women of all religious denominations, including Catholics, despite the Church's formal opposition to contraceptive methods other than natural family planning.

- Among all women who have had sex, 99% have ever used a contraceptive method other than natural family planning. This figure is virtually the same, 98%, among sexually experienced Catholic women.
- The overwhelming majority of sexually active women of all denominations who do not want to become pregnant are using a contraceptive method (Figure 3, page 6). Moreover, 69% are using highly effective methods: sterilization (33%), the pill or another hormonal method (31%), or the IUD (5%).

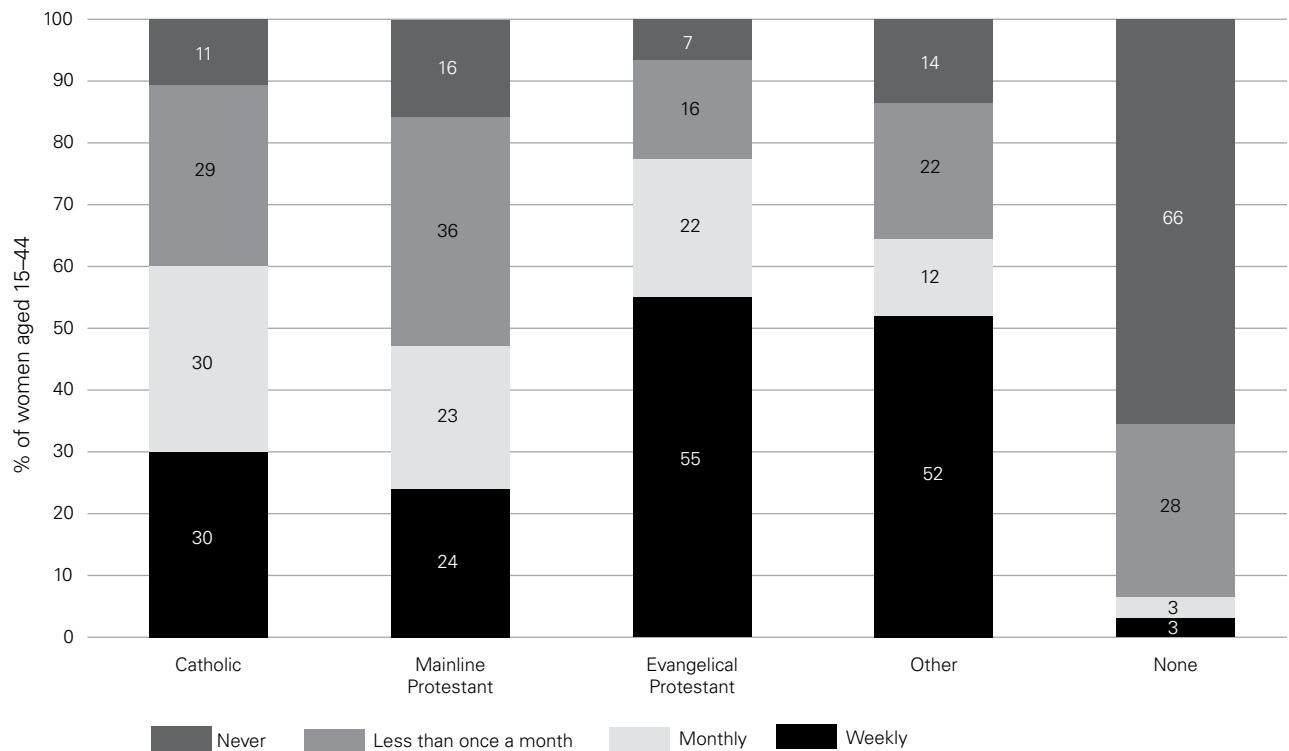
- Only 2% of Catholic women rely on natural family planning; even among Catholic women who attend church once a month or more, only 2% rely on this method (not shown). Sixty-eight percent of Catholic women use highly effective methods: sterilization (32%, including 24% using female sterilization,) the pill or another hormonal method (31%) and the IUD (5%).
- Protestant women are more likely than Catholics to use highly effective contraceptive methods, with 73% of Mainline Protestants and 74% of Evangelicals currently using sterilization, hormonal methods or IUDs.\*
- More than four in 10 Evangelicals rely on male or female sterilization, a figure that is higher than among the other religious groups.
- Attendance at religious services and importance of religion to daily life are largely unrelated to use of highly effective contraceptive methods.
- On average, 11% of women at risk for unintended pregnancy are not using contraceptives, and levels of nonuse do not differ by religious affiliations, frequency of attendance or importance of religion.

## Religion and contraceptive use among married women

While Catholic and Evangelical women are slightly more likely than Mainline Protestants to be married, patterns of contraceptive use do not differ by religious affiliation among married women. Similarly, proportions of married women who are pregnant or desiring pregnancy do not differ by religious affiliation.

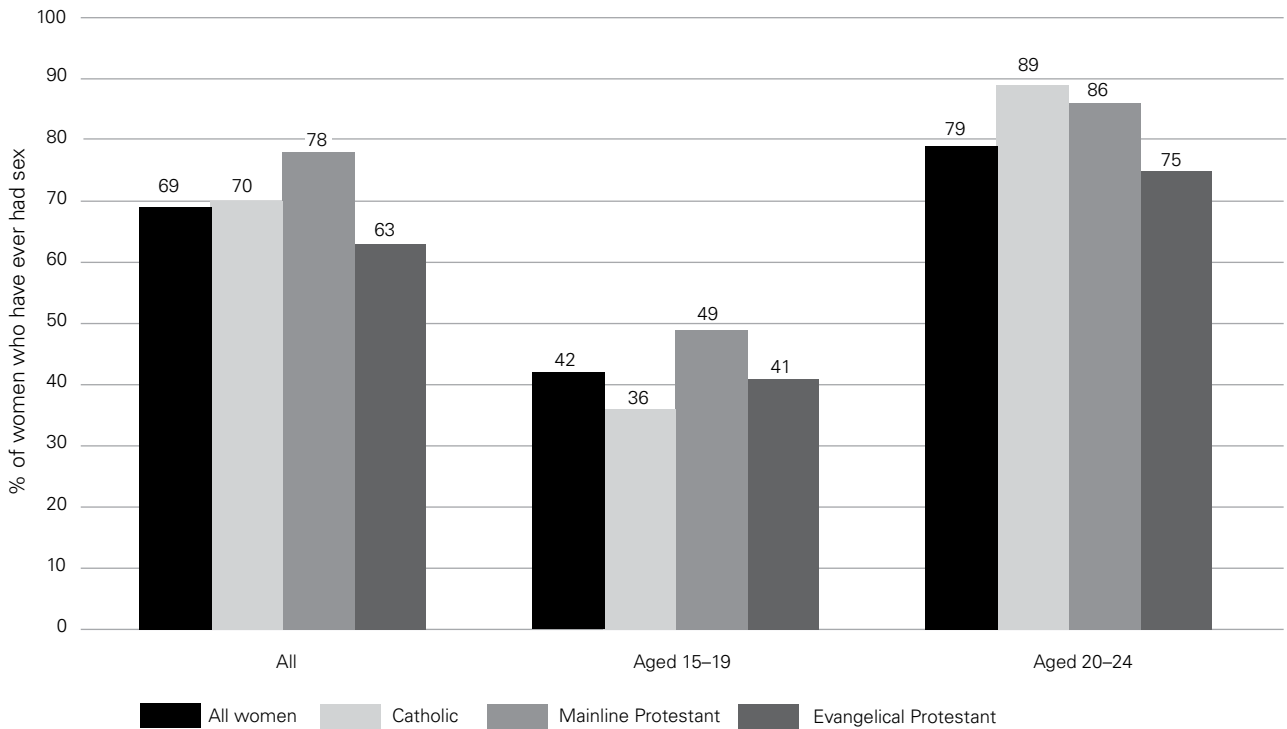
- About half of women who identify as Catholic (47%) or Evangelical Protestant (48%) are married, a higher proportion than is found among Mainline Protestant women (41%).
- Only 3% of married Catholic women who do not want to become pregnant rely on natural family planning; 72% use highly effective methods, including 40% who rely on sterilization.
- Reliance on highly effective methods is also common among Mainline Protestant (76%) and Evangelical (78%) married women.
- At any given point in time, 14% of married women are pregnant, postpartum or trying to get pregnant, and there are no variations by religious affiliation.

**FIGURE 1. The majority of Catholic and Evangelical Protestant women attend religious services at least once a month**



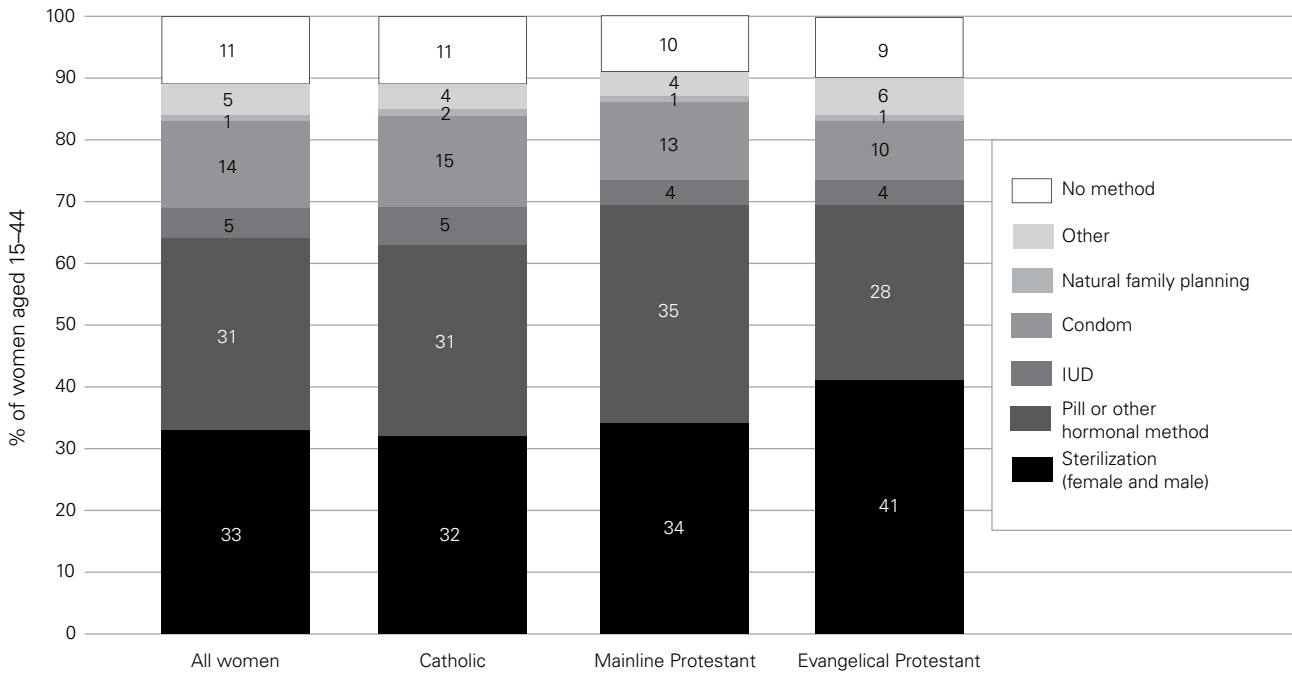
\*Totalled figures for Evangelicals differ slightly from those in Figure 3 because of rounding.

**FIGURE 2. Regardless of religious affiliation, at least three-quarters of never-married women are sexually experienced by their early 20s.**



Note: Supplementary tables, which include ever had sex among women affiliated with an Other religion or with no religious affiliation are on page 8.

**FIGURE 3. Evangelical Protestant women are more likely than Catholic or Mainline Protestant women to rely on sterilization.\***



\*Restricted to sexually active women who are not pregnant, post-partum or trying to get pregnant. Notes: Supplementary tables, which include contraceptive use among women affiliated with an Other religion and with no religious affiliation are on page 8.

# Discussion

There are approximately 62 million women of reproductive age in the United States, and virtually all of them will use a contraceptive method other than natural family planning at some point in their lives. Even among married Catholic women, only 3% practice natural family planning, while a majority uses contraceptives that the Church hierarchy routinely denounces.

This research suggests that the perception that strongly held religious beliefs and contraceptive use are antithetical is wrong—in fact, the two may be highly compatible. Contraceptive use by Catholics and Evangelicals, including those who frequently attend religious services, is the widespread norm, not the exception. Add to this Mainline Protestant denominations' historic support for contraception, and the implications for policymakers are clear: Policies that make contraceptives more affordable and easier to use are not just sound public health policy—they also reflect the needs and desires of the vast majority of American women and their partners, regardless of their religious affiliation.

# Appendix: Methodology

This report was based on data from the 2006–2008 National Survey of Family Growth (NSFG). Designed and administered by the National Center for Health Statistics (NCHS), the NSFG produces national estimates of factors affecting pregnancy, including sexual activity and contraceptive use. Data were gathered using in-person interviews with 7,356 women aged 15–44 between June 2006 and December 2008. All data used for this analysis were weighted, and the findings are nationally representative. The following measures were used:

**Religious a Religious affiliation** is based on an item that asked women for their current affiliation, and the final NSFG data set provides four broad categories: Catholic, Protestant, other and none. Our analysis focuses on Catholic and Protestant women. For purposes of this analysis, we consider Protestant women who indicated in a follow-up question that they were “a born-again Christian,” “charismatic,” “evangelical” or “fundamentalist” to be Evangelical Protestants, and they are examined

separately from Mainline Protestants. Women affiliated with other religions or with no religious affiliation constitute a substantial minority of women, but both groups are too diverse to allow for meaningful analysis.

**Current contraceptive use** was measured only among women who had had sex in the three months prior to the survey and refers to the method used in the most recent month she had sex. Among women who reported using multiple methods in the survey month, priority was given to the most effective method. The category of “other” methods mainly consists of withdrawal but also includes less common methods, such as suppositories, sponges and foams. Natural family planning includes periodic abstinence, temperature rhythm and cervical mucus tests.

Contraceptive use was restricted to **women at risk for unintended pregnancy**, whom we define as those who had had sex in the three months prior to the survey and were not pregnant, postpartum or trying to get pregnant.

**Supplementary table to Figure 2. Sexual experience among never married women by religious affiliation**

	Catholic	Protestant		Other	None	All women
		Mainline	Evangelical			
Aged 15–44	70	78	63	40	80	69
Aged 15–19	36	49	41	26	51	42
Aged 20–24	89	86	75	40	89	79

**Supplementary table to Figure 3. Current contraceptive use among women at risk of unintended pregnancy,\* by religious affiliation, 2006–2008 NSFG**

	All women	Catholic	Protestant		Other	None
			Mainline	Evangelical		
Highly effective methods	69	68	73	74	60	62
Sterilization	33	32	34	41	23	26
Pill or other hormonal	31	31	35	28	31	30
IUD	5	5	4	4	6	6
Condom	14	15	13	10	25	17
Natural family planning	1	2	1	1	1	1
Other	5	4	4	6	5	7
No method	11	11	10	9	9	14

\*Refers to sexually active women who are not pregnant, postpartum or trying to get pregnant.