



**Christian Perspectives on
Reproductive Health
&
Family Planning
in Nigeria**

NURHI 2
Nigerian Urban Reproductive
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- AIDS - Acquired Immune Deficiency Syndrome
- ANC - Antenatal Care
- BCC - Behavioural Change Communication
- BOM - Billings Ovulation Method
- CAN - Christian Association of Nigeria
- CCPN - Center for Communications Programs Nigeria
- FOMH - Federal Ministry of Health
- FP - Family Planning
- HCT - HIV Counselling and Testing
- HIV - Human Immunodeficiency Virus
- HIV+ve - Human Immunodeficiency Virus positive
- IEC - Information, Education and Communication
- IUD - Intra Uterine Device
- NKJV - New King James Version
- NURHI - Nigerian Urban Reproductive Health Initiative
- RAPAC - Redeemed AIDS Programme Action Committee
- RCCG - Redeemed Christian Church of God
- RH - Reproductive Health
- RH/FP - Reproductive Health/Family Planning
- SDM - Standard Days Method
- STIs - Sexually Transmitted Infections
- STM - Sympto-Thermal Method
- WHO - World Health Organisation



CHRISTIAN PERSPECTIVES ON REPRODUCTIVE HEALTH AND FAMILY PLANNING IN NIGERIA

FOREWORD

The Church has played substantial roles in the delivery of health care to Nigerians since the pre-colonial era. Churches and Christian organizations have helped to strengthen the Nigerian health system by providing equitable and quality services to underserved, poor and hard-to-reach communities across the country in many instances, where the public sector health services are inadequate or unavailable. These churches and Christian organizations possess unique opportunity to organize and positively effect changes in the health promotion and health-seeking behaviours of people, because they have community-based structures.

As the Body of Christ, we believe that every member “*is the temple of the Holy Spirit and we are not ours*”. (1 Corinthians. 6:19). The bible enjoins Christians to flee every form of sexual sin and perversion, which defile their bodies which is the temple of God (1Corinthians 6:18 and Deuteronomy 22:22-29). As Christians we know that, “*the unrighteous shall not inherit the kingdom of God, neither shall fornicators, nor idolaters, nor adulterers, nor effeminate, nor abusers of themselves*”. Thus, every member of the Church of Christ should be informed, educated and encouraged to access quality health services to maintain healthy and fulfilling lives from birth to death for this is the desire of the Lord for His people. By inference, promoting reproductive health among people of the faith is very important and should be institutionalised and sustained by every Christian leader, denomination and organization.

The wellbeing of the Christian family is central and foremost to the church community in ensuring continuity of the faith and family life. The Christian man is the leader and provider of the home, and the woman the nurturer of the family. Children are a supreme gift from our Lord, and like every gift they should be cherished, nurtured and loved and their upbringing should be

well thought out and planned for. The Bible in Luke 14:28 says “*For which of you, intending to build a tower, does not sit down first and count the cost, whether he has enough to finish it-*” Thus it is desirable that all Christian families are properly informed about family planning, its benefits and how to have access to quality family planning services.

This handbook serves as a guide that represents the viewpoints of the different Christian denominations in Nigeria. It is to be used by Christian leaders, members of the Faith and organizations for providing information, education and service delivery on reproductive health and family planning.

I gladly encourage all church leaders, denominations and organizations to adopt and/or adapt this guide in promoting the wellbeing of Christian families.

His Eminence, Pastor Ayo Oritsejafor
President
Christian Association of Nigeria (CAN)

June, 2016



The completion of this handbook gives us much pleasure. On behalf of the Nigerian Urban Reproductive Health Initiative NURHI 2 Project, I would like to thank the Department of Family Health, Federal Ministry of Health (FMOH) for its support and leadership in improving the health of Nigerian families, as well as the Christian Association of Nigeria (CAN) led by its President, for the collaboration and support towards the development of this handbook.

This handbook is the result of the collective efforts of representatives of different Christian denominations in Nigeria. I would like to express our heartfelt gratitude to the following persons whose intellectual contributions, ideas, discourse and commitment made this handbook a reality:

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Our sincere prayer is that God will reward you all immensely.

Dr. Mojisola Odeku
Project Director
NURHI 2



The Christian faith moulds the belief system of about half of the total population of Nigeria. Whilst it may not be very easy to define an individual only by his/her Christian belief or denomination, we can conclude, with some level of confidence, that the beliefs, behaviours, attitudes and life styles are immensely influenced by one's faith. To the Christian, life and healthy living are strongly linked to the faith, which is enshrined in the Holy Bible.

Christians believe that, life begins at conception and continues, even after death. In effect, great importance is attached to the spiritual life which is strongly determined and influenced by the way the physical life is lived. Human health and wellbeing, therefore, is very vital for every individual from procreation till death. However, attitudes towards some vital aspects of human health, can sometimes become very contentious. For example, reproductive health issues, particularly those bordering on fertility, family planning, sex and sexuality, gender relations, etc., are highly influenced by religious beliefs and doctrinal injunctions. In this regard, believers often look up to their religious leaders for approvals before they access certain health interventions that could be beneficial to their reproductive health needs.

The Government of Nigeria, despite its efforts to promote essential health services for the populace, is highly challenged by weak political will and inadequate funding. The challenging national health profile makes it increasingly necessary for the Christian religious leaders to further re-define their role beyond the routine mission of spreading the Gospel. Accordingly, religious leaders are now compelled to also become active partners in health promotion and services delivery (far beyond what it used to be a couple of decades ago). They are increasingly challenged to consider, in special ways, the need to ensure that their faith communities remain in good reproductive health. This is because many people, especially women, children and adolescents are facing the challenges of not only poverty, but also are suffering from avoidable diseases, malnutrition, ill health, neglect and abuse.

Over the years, religious leaders have become a very strong voice in maternal health issues, particularly in family planning (FP) discourse in Nigeria.



Christian religious leaders alongside their other counterparts have continued to express and declare their positions and reservations on such reproductive health issues as family planning, abortion, gender relations and sexuality education. In particular, religious opposition to the family planning programme in Nigeria not only delayed the necessary scale up and realization of the positive impact of the strategy to improving maternal health and survival, but may have also served as a barrier to access, particularly by women who need the services most.

The government of Nigeria is committed to reducing the high maternal deaths from complications of high risk pregnancies and childbirth. One proven way of achieving this goal is by expanding access of couples and women of reproductive age (ages 15 to 49) to quality modern family planning services in the communities. Women are encouraged to use modern family planning methods to space pregnancies, at minimum of three year intervals, to save their lives and those of their children. It is a scientific fact that family planning reduces maternal deaths by 33 percent and child mortality by 25 percent.

The Nigerian Urban Reproductive Health Initiative (NURHI 2) project as a family planning focused project is working in close collaboration with the Nigerian government, through the Federal Ministry of Health to bring about the catalytic changes that not only change the health indicators at the state level, but that spur changes in the communities. The vision of the NURHI 2 Project is a Nigeria where supply and demand barriers to contraceptive use are eliminated and family planning becomes a social norm. A key factor to achieving this vision is the ability of the project to engage, gain and sustain the support of the religious leaders for family planning. Great milestones were achieved under NURHI 1 Project in the work with the religious leaders through the Interfaith Forums.

The development of this advocacy handbook is a focused response to the faith-based questions around reproductive health and family planning by the Christian communities. The handbook also serves as a useful guide for churches, organizations and groups that may need to establish services for their members in the area of reproductive health and family planning.



This advocacy handbook seeks to:

- ♦ Achieve more productive dialogues and engagements with the Christian religious leaders and their communities on reproductive health and family planning;
- ♦ Gain the support and endorsement of Christian religious leaders on family planning and other key components of reproductive health;
- ♦ Increase commitment to using their sermons to promote reproductive health and family planning information;
- ♦ Enhance access and use of modern FP methods and other reproductive health information and services by the Christian communities.

The first part of the handbook defines health and wellbeing in relation to God's plan for man and His creation. Drawing from the National Reproductive Health Policy (2010) document, the next chapter gives an overview of Reproductive Health, its components and key strategies for achieving, maintaining and promoting desired health in every individual across all age groups. The Christian perspectives of the components of reproductive health are also explained to inform and guide readers based on the authority of the Holy Bible. This handbook further discusses the Christian perspectives and expectations from the national health care delivery system in serving the Christian client/patient. In addition, the document offers useful guides for Church and Christian organization leaders on how to implement reproductive health/family planning programming and interventions. The Guide on RH/FP messaging will be very useful for integrating RH/FP into sermons.

It is hoped that with an elaborate and very extensive use of the handbook, Nigeria will see a widespread emergence of Christian leaders who will champion and lead reproductive health and family planning advocacy among their communities and at broader levels.



Christian Approaches to Ensuring Physical, Mental, Social and Spiritual Wellbeing

Definition of Wellbeing

Man is made of a body, soul and spirit. The body is of value to God; He cares not only about the soul and spirit but also for the body. When God created man, He made him a physical and spiritual being, gave him food and labor for his physical wellbeing. Genesis 1:28-31 says *“Then God blessed them, and God said to them, be fruitful, and multiply; fill the earth and subdue it; have dominion over the fish of the sea, over the birds of the air, and over every living thing that moves on the earth.”*

Our Lord Jesus Christ provided food and physical healing to the people (Luke 9:10-17, Mark :1-8; Matthew 4:24 Acts 10:38) showing the emphasis he places on health. The fact that Jesus came into the earth in bodily form further demonstrates God's regard for our physical nature. Apostle Paul in encouraging young Timothy in 1 Timothy 4:8 acknowledges the importance of both the physical (bodily) training and the spiritual (godly). The Christian faith puts a lot of emphasis on health. 3 John 2 says: *“Beloved, I pray that you may prosper in all things and be in health, just as your soul prospers.”* In the Bible, health is viewed as completeness and wholeness. It is only when individuals are in good physical, mental, emotional, social and spiritual conditions that they can be said to be balanced and healthy, thereby attaining optimal quality of life and fulfilling God's purpose for creation.

Complete health is spiritual, physical, mental and social wellbeing. *“When Jesus heard it he said unto them, they that are whole have no need of the physician but they that are sick”* (Mark 2:17, Luke 5:31).

Ensuring Wellbeing in the Christian Family

It is imperative that Christians know that in the beginning our forefathers took good care of their offsprings. Apostle John also links our overall wellbeing to our spiritual vitality, which means God, is the number one propagator of good health. As Christians who believe the scriptures, we are expected to adopt a healthy lifestyle and practices that help to sustain and keep our families in a state of general wellbeing.



The Christian perspective of a family is one that is made up of a man (husband), a woman (wife) and children (if any). The general family wellbeing comprises that of the man, the woman, children and community as a whole. The role of the man as the head of his household includes his knowledge of basic health information and provision of same for his family. This includes providing access to shelter, clothing, feeding, education and financial empowerment. Today, there is an increasing need for the man to take charge of the health of his household.

The woman is a home maker. She is the center of peace, nourishment and nurture as well as an important contributor to the security of the family (Proverbs 31:10-31). Her contributions to ensuring complete wholeness in the health of the family cannot be over emphasized; ensuring optimal physical health through adequate nutrition, avoidance of domestic accidents and providing first aid care in emergencies. Within this context, she also provides relevant health-related information to her children, husband and community.

The roles of the father and mother in a family are very important. The first contact of socialization for children is the family. So, it is the duty of the parents to guide children to imbibe the fear of God, teachings of the Christian faith, making healthy lifestyle choices and avoiding perverted sexual lifestyles (sodomy) that prevail in present times. (Leviticus 18:22-23). It is upon the foundation already established in the family that the church builds, deliberately teaching its congregation about family life, general health and wellbeing. The church, therefore, should engage health professionals within or outside the congregation to provide factual and expert information, counselling and services to members towards promoting health care as an essential part of spiritual responsibility as taught in the scriptures. To make it easier for the congregation, the Church can establish health centers, schools, vocational training centers and social rehabilitation centers.



Reproductive Health, Components and Christian Perspectives

In the beginning, “*God created man in His own image; in the image of God He created him; male and female He created them. Then God blessed them, and God said to them, Be fruitful and multiply; fill the earth and subdue it; have dominion over the fish of the sea, over the birds of the air, and over every living thing that moves on the earth*” (Genesis 1:28).

The World Health Organization (WHO) defines reproductive health as “*A state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes*”.

As Christians, reproductive health is an element of good stewardship of our sexuality and a critical process towards responsible parenthood. Psalm 139:13-14 says: “*For You have formed my inward parts; You have covered me in my mother's womb. I will praise You, for I am fearfully and wonderfully made; Marvelous are Your Works, And that my soul knows very well.*”

God is at the centre of procreation and conception and He is mindful of every human life from the womb. Every life is unique and well planned for by God. He cherishes good planning in every human endeavor including the way we 'replenish the earth'. Therefore, families should be formed in a responsible manner.

Reproductive health is a very crucial part of general health and is a central feature of human development. It is a reflection of health at birth, during childbirth and at crucial stages of adolescence and adulthood. In guiding the members on reproductive health and making of healthy lifestyle choices, the Church should emphasize age-specific and appropriate sexuality education among children, pre-teens, teenagers and young adults, beginning from the home. This should also form part of the pre- and post-marital counselling curriculum. Those preparing for marriage should be encouraged to undertake certain tests such as HIV, genotype, hepatitis, etc.

Reproductive health issues present challenges and conflicts. To mitigate against these, the Church should set up platforms for families to freely address reproductive health and family planning matters.



Safe Motherhood

Safe motherhood is defined as a situation in which no woman going through the normal physiological processes of pregnancy and child birth suffers any injury or loses her life or that of the baby. Safe motherhood encompasses a series of initiatives, practices, protocols and service delivery guidelines designed to ensure that women receive high quality gynaecological, family planning, pre-natal, delivery and postpartum care, in order to achieve optimal health for the mother, foetus (during pregnancy), child birth and post natal care. It is therefore an essential strategy for achieving maternal health.

Maternal health services include:

- Prenatal care including referral of high risk pregnancies
- Safe delivery under skilled care
- Essential obstetrics care including emergency care of complications of pregnancy, labour and puerperium (the first 6 weeks after delivery)
- Perinatal and neonatal care (referring to the care of the baby in the first few weeks of birth)
- Postnatal care
- Breastfeeding especially exclusive breastfeeding in which a newborn is given only breast milk for the first 4 – 6 months.
- Immunization
- Growth monitoring
- Oral rehydration therapy
- Infection prevention

Christian Perspective on Safe Motherhood

Christians view children as a heritage from the Lord and the fruit of the womb; His reward (Psalm 127:3). At conception and all through pregnancy, men should support their wives and provide for their wellbeing. This implies that adequate nutrition should be provided for the pregnant woman and her unborn baby. It is the will of God that everyone be in health at all times (3 John 2): “*Beloved, I pray that you may prosper in all things*



and be in health, just as your soul prospers". The husband (man) should encourage the wife (woman) to visit the hospital and accompany her to the ante natal clinic, providing the requisite financial and emotional support. Safe motherhood embodies social equity for women; maternity care for all pregnant women; essential obstetrics care for those at risk; and family planning for all couples. For the purposes of safe motherhood, the following are expected:

➤ **Skilled birth attendance**

The Church should encourage every pregnant woman and her husband to seek competent medical care from qualified health workers and institutions. The Book of Genesis 38:28 records the use of midwives – *'And so it was, when she was giving birth, that the one put out his hand; and the midwife took a scarlet thread and bound it on his hand, saying "This one came out first."*' Attendance at antenatal clinics and use of skilled medical services reduce maternal, newborn and child morbidity and mortality.

Strategies for increasing use of skilled birth attendants

- Increase attendance to antenatal clinic by all expectant mothers
- Ensure education of all women attending antenatal clinic
- Encourage male involvement during pregnancy and child birth
- Recognize early warning signs and take appropriate action for all obstetric complications, including emergencies.
- Establish functional referral linkages.

➤ **Healthy offspring**

God wants us to have good health and this includes safe pregnancy and childbirth as well as healthy children; *"Behold children are a heritage from the LORD, The fruit of the womb is His reward.* (Psalm 127:3).

Strategies for bringing up healthy offspring

- Good and adequate nutrition for pregnant mothers and children
- Ensure the practice of exclusive breast feeding of the newborn for the first six months of life



- Immunize all children against all preventable diseases
- Expand appropriate services such as HCT to pregnant women at ANC registration and at the point of delivery
- Provide appropriate treatment to neonates born to HIV positive mothers; and
- Counseling on infant feeding options to all HIV+ve mothers.

➤ **Emergency treatment of complications of pregnancy and childbirth**

Healing the sick is a priority of our Lord Jesus Christ which He practised and commanded (Luke 10: 8 – 9). In emergency situations, Christians are admonished to ensure that those that need urgent care receive appropriate care from qualified health workers and facilities at the right time (faith and good work). *"What does it profit, my brethren, if someone says he has faith but does not have works? Can faith save him?"* (James 2:14).

"Whatever city you enter, and they receive you, eat such things as are set before you. And heal the sick who are there, and say to them, 'The kingdom of God has come near to you'" (Luke 10: 8 & 9).

Our Lord also emphasized on the care of the sick in the story of the Good Samaritan. *"But a certain Samaritan, as he journeyed, came where he was. And when he saw him, he had compassion on him and bandaged his wounds, pouring on oil and wine, and he set him to his own animal, brought him to an inn, and took care of him..."* (Luke 10:30-35).

Strategies for emergency treatment of complications

- Prompt identification of an emergency situation
- Promptly taking the person to the appropriate health facility
- Encouraging male involvement and support.
- Awareness creation and health education.
- Empowering women to take charge of their health.



Post Abortion Care

Spontaneous abortion (miscarriage) can happen as a result of different causes. Christianity does not support criminal abortion (deliberate interruption of pregnancy). It is important to note that, every seed planted in the womb of a woman is a blessing from God waiting for the time and place of manifestation. This seed refers to a new life that begins at conception. Since every abortion ends (kills) the life of innocent human being, criminal abortion is therefore unacceptable. *“You shall not murder”* Ex. 20:13. This is also reiterated in Matthew 5:21 *“You have heard that it was said to those of old, ‘you shall not murder’, and whoever murders will be in danger of the judgment”*. Even if somebody has brought a problem on himself, Christians are bound to take care of such a person; because our Lord Jesus Christ asks us to *“love your neighbour as yourself”* (Luke 10:27).

In any case, if a woman arrives a health facility with complication(s) arising from abortion, she should be taken care of. Post abortion complication is an emergency and should be attended to promptly. Post abortion care is a life-saving care offered to a person with complication(s) after induced or spontaneous abortion. Such care should also include spiritual care (prayers, counseling and psycho-social support).

Strategies for encouraging post abortion care

- The church should educate members on the dangers of abortion and the necessity of caring for those who have post abortion complications.
- Show compassion and support for the victims. Jesus showed compassion throughout his life and ministry here on earth and expects us to do likewise; *“Then Jesus called His disciples to Him and said - I have compassion on the multitude, because they have now continued with Me three days and have nothing to eat. And I do not want to send them away hungry, lest they faint on the way.”*(Matthew 15:32).



Family Planning

God is the first family planner. He gave the first man three children. God also blessed and commanded Abraham to be the father of nations and that he will make his children *‘as many as the dust of the earth’* (Genesis 13:16,), he did not expect Abraham to do this all alone. God began by giving him Isaac, thereby fulfilling his promise to Abraham.

The World Health Organization defines family planning as *“A way of thinking and living that is adopted voluntarily upon the basis of knowledge, attitudes and responsible decisions by individuals and couples in order to promote health and welfare of the family group and thus contribute effectively to the social development of the country”*.

Planning is very critical to every human endeavour, more so the family. It is important that the Church advises and guides intending couples as well as married couples to discuss and plan for the size of the family they hope to have putting into consideration their available resources and capacity to bring up children. Luke 14: 28- 30 teaches on the need for effective planning *“For which of you intending to build a tower, does not sit down first and count the cost, whether he has enough to finish it, lest, after he has laid the foundation, and is not able to finish it, all who see it begin to mock him, saying, This man began to build and was not able to finish.”*

Family planning is an assurance of family wellbeing especially in promoting the survival of the mother, child as well as the husband. Family planning is a key pillar for promoting maternal and child survival thereby reducing the painful task of raising motherless children in our communities. It will be a colossal loss if the death of women during pregnancy and childbirth is not averted. The church, therefore, should promote programmes and seize opportunities during sermons/homilies, group meetings, seminars, regional meetings, retreats and conferences to educate their members on reproductive health and family planning matters. The church can also establish health centres, partner with existing health structures and provide information on where to access appropriate services.



Methods of Family Planning

Family Planning methods are divided into Traditional and Modern Methods

Traditional Methods: These are practices, beliefs or customs that have been used for birth control purposes for many years and have been handed down from one generation to the next. Traditional methods include:

- **Abstinence:** Avoidance of sexual intercourse by personal choice, or in observance of cultural and/or religious norms.
- **Douching:** Application of hot water with or without concentrated solutions of salt, alum, vinegar, lemon etc., into the vagina immediately after sex to prevent conception. This is a very dangerous method, because it can create an environment for reproductive tract infections and cause disruption of the natural vaginal conditions/climate/ecosystem.
- **Withdrawal (*Coitus interruptus*):** This involves the man withdrawing his penis from the vagina during intercourse just before ejaculation so that sperm is prevented from being discharged into the vagina.
- **Rhythm and Calendar method:** Couples use the calendar to determine their fertile period and abstain from sexual intercourse during this period.

Modern Family Planning Methods:

- **Safe period:** A natural method of birth control that involves the couple abstaining from sexual intercourse during the fertile period of the monthly cycle of the woman. A number of techniques are commonly used:
- **The Cycle Bead Method also referred to as Standard Days Methods (SDM) –** A woman knows how to tell when the fertile time of her menstrual cycle starts and ends. (The fertile time is when she can become pregnant). This requires the cooperation of her husband.



The couple can use the Cycle Beads, a colour-coded string of beads that indicates fertile and non-fertile days of a cycle.*

- **Billings Ovulation Method (BOM):** This method is based on the accurate observation, charting, interpretation and use of the cervical mucus discharge to recognise the presumptive period of a woman's fertility (ovulation). Around the period of ovulation, the hormone (chemical messenger) oestrogen which is produced by the developing eggs in the woman's ovary causes the cervical crypts to produce the mucus which discharges at the opening of the vagina (vulva).*
- **Sympto-Thermal Method (STM):** This method is based on the daily checking, recording and application of the waking (basal) temperature of the woman before she gets out of bed. The changes of the pre-and post- ovulation temperatures are due to the effects of the hormone progesterone. *
- **Creighton Model System/NaProTechnology –** is a new women health science which works cooperatively with the natural physiological and endocrine events in the woman's reproductive biology. This method has the added advantage of being able to identify the causes of many reproductive system conditions which cause diseases and infertility. Such conditions include regular and irregular (short or long) menstrual cycles, miscarriages, premenstrual syndrome, endometriosis and childlessness. These can be managed through the techniques of medical and surgical natural procreative technology (NaProTechnology). *

**[These Family Planning methods are promoted by the Catholic Church in Nigeria for their members].*



Other Modern Methods:

- **Barrier Methods:** These are mechanical barriers that are placed to prevent the sperm from entering the cervix. They include the condoms and diaphragms.
- **Spermicides:** Chemical substances deposited into the vaginal cavity before sexual intercourse to block the cervix and kill the sperm. Examples include the foaming tablets, creams and jellies.
- **Intra uterine Device (IUD):** A plastic or stainless steel object inserted into the uterus by a trained health worker to prevent pregnancy. Types include the Lippes' Loop (coil), the Copper-T, etc.
- **Hormonal Methods:** These methods involve administering the hormones either estrogen or progesterone or both into the woman so as to temporarily alter her hormonal constitution and prevent pregnancy in various ways. They include the following:
 1. **Oral Pills:** One tablet is taken daily by the woman throughout the month to prevent pregnancy within that month.
 2. **Injectable:** Short-acting hormones given by injection to prevent pregnancy over one, two or three month(s) depending on the type given.
 3. **Implant:** A long-acting preparation of progesterone in the form of an elastic capsule implanted in the inner aspect of the upper arm of a woman to prevent pregnancy for a long duration.
- **Surgical Methods (Sterilization):** These are minor surgical procedures performed on either the woman or the man to permanently prevent pregnancy. They include tubal ligation for the woman and vasectomy for the man.



Christian Perspective on Family Planning

Family planning allows married couples (man and woman) to anticipate and attain their desired number of children and the spacing and timing of their births. *“Then God blessed them, and God said to them, Be fruitful and multiply; fill the earth and subdue it...”* (Genesis 1:28). Planning of the family is very important. The Bible says as such; *“but if anyone does not provide for his own, and especially for those of his household, he has denied the faith and is worse than an unbeliever”* (1 Timothy 5:8). A Christian therefore who has children that he cannot cater for, is referred to as being worse than an unbeliever in this context. In exercising the free will that God gave us, all Christians must exercise control over the family size within the context of responsible parenthood.

Strategies for promoting family planning and responsible parenthood

- Raise awareness on sexual abstinence among the unmarried
- Increase access to family planning information and services
- Train all FP providers on current trends in FP technologies
- Create awareness on modern contraceptive use, including modern natural methods among intending and married couples

Prevention and Management of Infertility and Sexual Dysfunction in both Men and Women

God is never happy with fruitlessness because it is against His wish and command; *“Then God blessed them, and God said to them be fruitful and multiply; fill the earth and subdue it”* (Genesis 1:28). When a couple is unable to achieve conception after two years of regular unprotected sexual intercourse, this could be primary or secondary infertility. Primary infertility means the person has never been pregnant. Secondary infertility is when the person has been pregnant before but now unable to achieve fertility. This may be due to structural and/or functional defects in the male and/or female reproductive organs. Both share the responsibility equally!

The Bible is very clear about God's promises that His children should be fruitful. Having children is God's mandate to man to fulfill His purpose



(Psalm 127:3-5). It is therefore important that couples with issues of infertility ought to seek both divine help (prayer) and medical intervention. Many women in the Bible who were regarded as barren, for example, Sarah, Hannah, Rachael, Elizabeth, waited for God's intervention to have children. They prayed to the LORD for help and He answered their prayers. Sarah had Isaac, Hannah had Samuel and five other children, Rachael had Jacob & Esau and Elizabeth had John the Baptist. It is therefore important for every Christian to focus on God, while seeking medical care. Couples should learn to live a healthy sexual lifestyle; Exodus 23: 25–26 says “*So you shall serve the LORD your God, and He will bless your bread and your water. And I will take sickness away from the midst of you. No one shall suffer miscarriage or be barren in your land; I will fulfill the number of your days*”.

Sexual dysfunction refers to conditions that result to the inability of couples to enjoy optimal sexual intercourse. These include:

In Men:

- Inability to achieve erection
- Inability to sustain erection
- Premature or retarded ejaculation
- Loss of sexual drive (libido)

In Women:

- Dryness of the vagina
- Painful sexual intercourse
- Failure to achieve orgasm
- Frigidity (inability to respond to sexual stimulation)

Although, sexual dysfunction is a major and critical issue in reproductive health, its magnitude in Nigeria is not known. Most cases are either unreported or presented within other reproductive health components, especially infertility.



Strategies for preventing and managing infertility and sexual dysfunction

- Prevent sexually transmitted infections through responsible sexual life style and choices.
- Promote male support for utilization of reproductive health and family planning services by women
- Increase male involvement in the promotion and upholding of the reproductive rights of women (excluding abortion)
- Increase male utilization of reproductive health and family planning services
- Promote early detection and management of life style conditions such as diabetes, hypertension, obesity, etc.

Christian couples with sexual dysfunction should trust in God, seek counselling and medical assistance and also pray to be able to enjoy sexual intercourse, because it is God's will that His children should enjoy sexual relationship (1 Corinthians 7:3-5, Song of Solomon 1:2; 4:15, 8:2); for God strengthens us to do all things; “*I can do all things through Christ who strengthens me*” (Philippians 4:13).

Prevention and Management of Reproductive Tract Infections (STIs, HIV and AIDS):

The Bible enjoins us to flee from sexual immorality, “*Flee sexual immorality. Every sin that a man does is outside the body, but he who commits sexual immorality sins against his own body. Or do you not know that your body is the temple of the Holy Spirit who is in you, whom you have from God, and you are not your own?*” (1 Corinthians 6: 18–19).

Limited access to effective reproductive health (RH) programmes and friendly services are major contributory factors to the poor reproductive health knowledge and behaviors especially among young people. The Church attracts a lot of people, especially the young, who are the largest population of church members. This provides a huge opportunity to



address the issues of reproductive health. Whilst ensuring their spiritual growth, young people and adults should be provided with age-appropriate information and services that will ensure their health and development into responsible parents; *“Train up a child in the way he should go, and when he is old he will not depart from it”* (Proverbs 22:6). *“Therefore you shall lay up these words of mine in your heart and in your soul and bind them as a sign on your hand, and they shall be as frontlets between your eyes. You shall teach them to your children, speaking of them when you sit in your house, when you walk by the way, when you lie down and when you rise up”* (Deuteronomy 11: 18–19).

Strategies for prevention and management of reproductive health conditions (STIs, HIV and AIDs)

- Increase the proportion of people, including adolescents, who have access to accurate, comprehensive and age-appropriate reproductive and family health information and services
- Reduce prevalence of STIs by promoting sexual abstinence among the unmarried and mutual fidelity among the married.
- Ensure that all blood and blood products as well as other biological products are properly screened for HIV and Hepatitis B and C prior to transfusion.
- Ensure optimal infection prevention and control in all health care facilities including sanitary disposal of health care waste.



Prevention and Management of Non-infectious Conditions of the Reproductive System

Non-infectious diseases also known as chronic non-communicable diseases are often related to people's lifestyle. The church has to address those lifestyle choices and actions that predispose members to adverse health conditions such as diabetes, high blood pressure, obesity and cancers of the reproductive system. It also includes the conditions associated with andropause (men) and menopause (women).

Strategies for prevention and management of non-communicable diseases of the reproductive system

- Health education and health promotion
- Lifestyle modification (regular exercise, healthy diets – avoidance of processed food, low salt, low sugar, low fat, high fibre food, fruits and vegetables and regular medical checkups)
- Prompt access to early diagnosis and treatment
- Research to update knowledge, information and skill
- Establishment of acceptable channels of communication between adolescents and adults especially their parents.

Elimination of Harmful Practices

A number of cultural and traditional practices are harmful to the health and dignity of people. The church should preach against such norms and practices. This will reduce all forms of gender-based violence and practices that are harmful to the health of the family, in particular women and children. All forms of sexual perversions such as pornography, homosexuality, lesbianism, incest, necrophilia, bestiality, pedophilia, etc., should be discouraged by the Church. Acquaintance sexual abuse of minors should be guarded against by families and church communities. Appropriate care and support should be given to widows and orphans during their time of grief.

In addition, the widows should be protected from all harmful widowhood rites that demean their dignity as God's creation; *“Pure and undefiled religion before God and the Father is this: to visit orphans and widows in*



their trouble...” (James 1: 27). *“If any believing man or woman has widows, let them relieve them, and do not let the church be burdened, that it may relieve those who are really widows”*(1Timothy 5:16). *“And you shall not afflict any widow or fatherless child. “If you afflict them in any way, and they cry at all to Me, I will surely hear their cry and my wrath will become hot, and I will kill you with the sword; your wives shall be widows”*(Exodus 22:22–24).

Strategies for the elimination of harmful practices

- Create awareness on what constitutes domestic and sexual violence
- Provide appropriate care, support and counseling for victims of violence including sexual violence
- Promote awareness and understanding of laws and biblical teachings to eliminate gender based violence, rape, domestic violence, assault and battery
- Prevent sexual exploitation of minors especially by close relatives and acquaintances
- Abolish harmful widowhood rites and wife inheritance that demean the dignity of the woman
- Abolish harmful cultural practices such as incest, and the use of wife for hospitality.

Adolescent Sexual and Reproductive Health and Promotion of Healthy Sexual Maturation

The National Reproductive Health Policy emphasizes the need for adolescents and young people to be well informed about their sexuality. The increasing high risk behaviours by adolescents which lead to early sexual debut, teenage marriage, unintended pregnancies, abortions, STIs and HIV/AIDs and their attendant social consequences such as school dropout, low educational and career attainments have been of great concern to the Body of Christ. This is further aggravated by exposure to the Internet and other media.



By definition, adolescents are persons between 10 and 19 years and the sexual and reproductive health status of Nigerian adolescents and other young persons is poor. Many of them lack information and life planning skills to make well informed lifestyle choices such as delay in the onset of sexual activities. During the adolescence period, many individuals are faced with pressures (peers and societal) to indulge in harmful behaviours such as early sexual relationships thus, putting them at risk of unintentional injuries, unwanted pregnancies, and sexually transmitted infections (STIs) including HIV and AIDS.

It is important that the family which is the basic unit of the society and the first environment of the child exerts the strongest initial impact on the development of the child. Christians are therefore enjoined to train their children in the way of the Lord and when they grow old, they will not depart from it (Proverbs 22:6). Information given to children particularly on their sexuality should be age-specific and appropriate. Many parents want to know about the appropriate age to start teaching their children about sexuality issues. However, they are not able to do so due to inadequate knowledge and skill. Bold steps should be taken to ensure that children are well brought up as they represent Christ in the community.

Training of a child goes beyond the family altar; it includes the totality of a child's being. Every Christian parent must be involved in the physical and emotional development of their children, making it a point of duty to listen to them and respond truthfully to questions they may have relating to their sexuality and personality. Parents should be in charge of their homes and must be able to guide their children appropriately. Apostle Paul in 1 Timothy 3: 4 describes a Christian leader (in this case the husband as the head of the house) as *“One who rules his own house well, having his children in submission with all reverence”*. Correcting in love is the responsibility of parents *“He who spares his rod hates his son, but he who loves him disciplines him promptly”* Proverbs 13:24.

To be able to successfully nurture their offspring, parents should have the number of children they can adequately cater for. This also would help to reduce children's exposure to social vulnerabilities. Most children causing



unrest in the society, in most cases, are lacking in good home upbringing. Young people must be taught about the values of chastity, for God forbids pre-marital sex and abortion. “*God will judge fornicators and murderers*” (Hebrews 13:4; 1 Thessalonians 4:3).

Strategies for promoting Adolescent Sexual and Reproductive Health and Promotion of Healthy Sexual Maturation

- Improve access to effective reproductive health education programmes and appropriate youth-friendly services.
- Promote parent-child communication and friendship; “*And you father, do not provoke your children to wrath, but bring them up in the training and admonition of the LORD*” (Ephesians 6:1 – 4; particularly 4).
- Promote responsible parenting and guidance which refers to the process of raising and educating a child from infancy into responsible adulthood. Parenting involves parent-child relationship. The Bible has a great deal to say about the way we can successfully raise our children to be great men and women. It is easier to train a child than to repair an adult.



Provision of RH/FP Information and Services within the National Health System

What is acceptable and beneficial to the Christian faith?

The dignity of the Christian male, female and child is of utmost importance where RH/FP information and services are concerned. Age appropriate information should be supplied in schools, Sunday schools, and public and private health facilities. Government should ensure that quality RH/FP services are provided, according dignity and respect to prospective RH/FP clients, by health workers putting into consideration gender sensitivities. Information on RH/FP issues should be disseminated to all members and communities as an important part of pastoral duties to enable them take greater responsibility for their health. Churches should have trained RH/FP desk officers for the purpose of advocacy, enlightenment, education and coordination.

Scope of family planning information provision

The Christian community believes that there are age-appropriate information for different age groups. The groups include: Children (0-5 years); Pre-teens (6-12 years); Teens (13-19 years); Young adults (20-27 years); and Adults (28 years and above). All health information, including the RH/FP promotion materials/ messages, should be designed and disseminated to cater for these categories. Government and the church should intensify efforts to disseminate these information to the grassroots and hard-to-reach areas; from house-to house and among the vulnerable and under-served groups.

Level of family planning services

Family planning services should be made available and easily accessible at all levels of health care (primary, secondary, tertiary). Government should pay equal attention to the private health care system especially those that are faith-based, and effectively collaborate with them.

Gender issues to be addressed

1. A male doctor should not examine a female client without a female chaperon, and vice versa as obtained in the global standards of medical practice.



2. Examination should be case-specific [addressing the actual/specific client's complaint (s)].
3. A minor, up until 18 years of age, should only be attended to and or examined in the presence of a parent/ guardian/ chaperon.

Attending to the Christian Family Planning Client

1. The FP provider should have the fear of God.
2. The provider should be trained and possess adequate FP knowledge and skills
3. He/ she should have basic knowledge of what the Bible teaches about FP.
4. He/ she should be sensitive to local and cultural preferences of where he/she works
5. The provider should be self-reliant.
6. The FP provider should be friendly and passionate about his/her job.
7. The provider should be courteous and patient for the client to choose their preferred method.
8. The FP provider should maintain utmost confidentiality with his/her client.



Organizational Framework for RH/FP in Pastoral Services

Churches and Christian-based organizations in furthering the faith of their members can engage different groups within the church. It is important that these groups are empowered to enable them function effectively especially as it relates to reproductive health (RH) and family planning.

Engaging the married couples for RH/FP

In many churches there are existing groups or committees which focus on the physical and spiritual welfare of members. Some of them include: Marriage counselling committee and Support groups/welfare committees etc. Some of these committees already exist within churches but need to be strengthened. Where they are non-existent, there may be need to establish them. They should be supported to:

- Strengthen their capacity to provide RH/FP counselling, information and referral services
- Build human resource capacity: Ensure availability of medical and para-medical personnel, psychologists, lawyers and sociologists to be able to provide holistic and professional psycho-social support.
- Integrate FP/RH counselling into pre-marriage and marriage counselling sessions and wedding ceremonies
- Give RH/FP talks during special events such as family week, mother's day, family harvest, etc.
- Build the capacity of women groups (e.g. Mother's union, Guilds of married women, Women committee etc.) on RH/FP
- Organize special seminars and workshops that focus on RH/FP
- During special programmes invite RH/FP professionals to deliver talks
- Integrate RH/FP into medical outreaches
- Develop RH/FP IEC/BCC materials (covering different areas of RH e.g. FP, cervical cancer and prostatic cancer screening, breast self-examination, menopause, andropause, diabetes care) and other reading materials and make them available to members



Engaging the Women

In the church, there are several women groups that should be engaged to integrate RH/FP services in their various programs.

These women - single, (single mothers inclusive), married, nursing mothers, women groups, widows' groups should be supported:

- Provide counselling and social welfare services
- Provide information on family planning, HIV, STIs and Integrate maternal and child health/FP care services as part of services to be provided in the churches' clinic/maternity center (or mission hospital, where available)
- Include yearly budgets for medical outreaches with special focus on FP/RH activities
- Build human resource capacity: Ensure availability of medical and para-medical personnel, psychologists, lawyers and sociologists to be able to provide holistic and professional psycho-social support.
- Give RH/FP talks during special events such as family week, mother's day, family harvest etc.
- Build the capacity of women groups (e.g. Mother's union, Guilds of married women, Women committee etc.) on RH/FP
- Organize special seminars and workshops that focus on RH/FP
- During special programs invite RH/FP professionals to deliver talks
- Integrate RH/FP into medical outreaches

Engaging Men:

Men occupy leadership positions in many churches and have good followership whom they influence. It is therefore important to latch on this unique opportunity to enable them influence their members on issues relating to RH/FP.



- Use the various male committee's/groups/ platforms to disseminate information on RH/FP
- Organize special seminars and workshops on RH/FP and also integrate it into existing programs
- Church leaders and pastors should encourage male members to support women during pregnancy and after pregnancy to take FP methods
- Organize regular seminars or workshops for men on STI/HIV/AIDS and the consequences of infidelity
- Develop male-specific IEC/BCC materials that promote male RH e.g. prostate cancer screening, diabetes, sexual dysfunctions and hypertension management.

Engaging the Youths

The youth form more than 50% of the congregation in many churches, therefore, it is important to secure their future for the church to maintain its position as the light of the world.

- Emphasize the importance of girl child education during sermons.
- Ensure that members integrate sexuality education by having open discussions with their children on issues relating to sexuality and adolescent life challenges
- Organize capacity building and skills development workshops for the youths to empower them
- Organize regular seminars or workshops for youths on life skills, STI/HIV/AIDS, courtship and the consequences of pre-marital sex using friendly mode of communication (ICT)
- Encourage youth groups to organize regular special medical programs that focus on youth health issues
- Develop youth-focused RH and friendly IEC/BCC materials
- Encourage pastors/spiritual leaders to promote gender



equality and to oppose gender- based violence including sexual violence

- Encourage youth pastors to integrate messages on child spacing/FP into youth ministrations
- Organize career counselling programmes
- Use technology such as social media to communicate with the youth on RH/FP
- Identify and provide referrals to youth-friendly services that recognize the unique reproductive health needs of young people

Engaging children:

- Train the children's' Sunday School teachers on RH matters to provide appropriate information to the children
- Promote age-specific, appropriate and faith-based sexuality education for children
- Integrate RH information during training of children at special children's events
- Encourage Sunday School teachers to provide easily-understandable information on reproductive health
- Use culturally-sensitive and appropriate cartoon characters to provide information on reproductive health
- Provide IEC/BCC materials on RH for children using comics



Basic Guide to Family Planning Messaging and Discourse from the Pulpit

God is the first family planner and had put a plan in place from creation. Firstly, He created Adam and Eve and he commanded them to be fruitful. Naturally, a woman is not fertile throughout her entire menstrual circle. God created a fertile window which lasts for an average of 36 hours. For conception to be achieved, millions of sperms are released during intercourse, however, only one sperm eventually fertilizes an egg and that results in procreation. Also, exclusive breastfeeding, in the first 6 months provides natural contraception by the effect of ovulation-suppression by the hormone Prolactin (which controls lactation).

It is therefore imperative for Christians to follow God's example in procreation by planning. Accordingly, the Christian leader is obligated to guide the flock under him according to the precepts of God.

For the Christian leader to talk about family planning, the following is required:

- Capacity building of the Christian leader to be knowledgeable and confident in discussing reproductive health and family planning. However, for effectiveness, the ***FP champion*** should be a philosophical acceptor of the goodness of family planning and its practical witness.
- Messages should be contextually aligned to the realities of the audience in time and space.
- Being sensitive to the sensibilities of the local audience
- Apply age-appropriate information delivery techniques.
- Be factual – even though he is a religious leader, he must be able to say the truth both from the scientific point and the moral view point.
- Use appropriate scriptural quote(s) to reinforce the message.



Audience Specific Messaging

- *Peer-to-peer Advocacy among Christian Leaders:* During meetings, conferences, workshops or retreats, the FP champion should explore opportunities to introduce, interject or discuss appropriate family planning information, and to encourage his peers to disseminate same messages to their congregation. The Christian leader should also advocate for the provision of resources for the promotion of reproductive health and family planning education and services;(Hosea 4: 6a; John 8:31-32).
- *Parents:* Christian leaders should encourage parents to avail themselves of opportunities to learn about health education, reproductive health and family planning. In addition, they are to learn how and when to initiate reproductive health information to their children, using teachable moments in their daily family life experiences. (Psalm 127: 3)
- *Women:* The Christian leader should empower women to take charge of their lives (to love themselves) especially in the area of reproductive health and family planning. This means that they should take personal responsibility to ensure that they are healthy to be able to take care of their families. The woman should acquire basic knowledge and skills for maintaining personal health and managing her reproductive functions including knowing early warning signs and where to seek help early.
- *Men:* Men are to be encouraged to be educated on issues pertaining to reproductive health, safe motherhood and family planning. In this regard, men are advised to take care of their health needs as well as that of their families. They are to accompany their pregnant wives in the perinatal care processes including adequate provision of resources and plans for any emergency thereof; “*So husbands ought to love their own wives as their own bodies*” (Ephesians 5:28a).“*He who loves his wife loves himself*”(Proverbs 25:28).



- *Unmarried Adults:* The Christian leader should support and affirm the unmarried to live out chaste sexuality. In addition, they should be encouraged to learn and know about their reproductive health issues. The youth and the unmarried are encouraged; “*Or do you not know that your body is the temple of the holy spirit who is in you whom you have from God and you are not your own?* (1 Corinthians 6:19 – 20). “*For you were bought at a price; therefore, glorify God in your body and your spirit, which are God's*” (Ephesians 5: 1 -3 specially verse 3). “*...but fornication, and all uncleanness, or covetousness, let it not be once named among you as becometh saints*”
- *Young people and children:* The young people are to be given age-appropriate information on reproductive health, to develop refusal skills to avoid peer pressure and risky behaviours; and to grow in spirituality. Proverbs 4: 20 – 22; 2 Timothy 2: 22; and 1 Corinthians 6: 18–20.



The Christian Religious Leader as a Champion of RH/FP

As a Family Planning champion, a Christian religious leader, should as a principle arm himself or herself with adequate knowledge and encourage his peers, as well as the congregation, to seek competent assistance for reproductive health, safe motherhood and family planning. Christians should be helped to:

1. Seek help from qualified health care workers and skilled attendants
2. Adopt healthy lifestyle and behaviours during pregnancy
3. Seek appropriate medical checks and follow-ups after birth (for both the mother and child)
4. Ensure that husbands take responsibility for the health of the family members, including family planning
5. Advocate against practices that harm women, children, families and communities:

God is a planner

- Before creating man, God first created all that man would need in life and all that He created for man was good. “*So God created man in His own image; in the image of God He created him; male and female He created them*” (Genesis 1:27). God's plan for man is to always have what they need in life and be content. He did not create them to be put in a place where they could not be sustained. So also Christians should do the same with their families – planning for their wellbeing even before children are born and ensuring that everyone in the family is taken good care of and brought up in the fear of God; echoing the theme of responsible parenthood. This is the plan of God.

Call to Action

Leaders should search the Scriptures for appropriate verses to support health-seeking knowledge, attitude and practices.



To achieve this, the leader would necessarily:

- Preach that family planning is good and not sinful
- Integrate messages on family planning in sermons drawing on broader areas that are important to men, such as
 - economic well-being of the family, the importance of children and the responsibility to take good care of their upbringing
 - emphasize the benefits of health for mothers and children including FP.
- Affirm religious leaders by building their capacity to deliver correct messages, which should focus on:
 - benefits for educating people about the goodness of using FP, as well as
 - benefits for children, mother's health and increased couple communication.
- Addressing gender issues and bringing couples together for educational sessions, using lessons/texts from the Scriptures.
- Encourage men to provide for their families. “*But if any does not provide for his own, and especially for those of his household, he has denied the faith and is worse than an unbeliever*” (1 Timothy 5, 8).
- Support the education of the flock under them in providing age-appropriate information and messages on:
 - the value of children;
 - importance of spacing pregnancies and child births;
 - values and benefits of family planning; and
 - responsible parenthood

Christian religious leaders as members of faith-based organizations should:

- Understand local sensitivities, terminologies, nuances, etc.
- Conduct educational sessions to build capacities
- Foster male support for family planning



- Seek global and local evidences, and conduct research
- Seek factual and correct information on RH / FP
- Organize seminars, workshops and orientation sessions on topical issues from specialists to enhance knowledge/ understanding on FP/RH
- Disseminate best practices and views of renowned international and national scholars on RH/ FP issues
- Dispel misconceptions about RH / FP issues among the religious leaders to the general public
- Promote RH / FP practices using appropriate life events



ANNEXURE:

APPENDIX 1: CHRISTIAN SERMON NOTE ON FAMILY PLANNING / CHILDBIRTH SPACING

Preamble

Christian Sermon Note on Childbirth Spacing/Family Planning (CBS/FP) is to assist faith leaders in the task of helping their congregations to understand the benefits of childbirth spacing/family planning; to become philosophical acceptors of the goodness of Childbirth Spacing/Family Planning (CBS/FP) as well as users/witness of one or some of the methods thereof.

Definition

God is the first family planner. Although he asked the first man to multiply and replenish the earth, he did not expect him to do it alone. Consequently, He gave the first man three children. God also blessed and promised Abraham to be the father of nations and, that He will make his children '*as many as the dust of the earth*' (Genesis 13: 16). God began by giving him Isaac. He gave Isaac two children and so on; thereby fulfilling his promise.

According to Christian Connections for International Health (CCHC), family planning means enabling couples to determine the number and timing of pregnancies, including the voluntary use of methods for preventing pregnancy, which is harmonious with their values and religious beliefs. This excludes abortion which is not a family planning method.

The World Health Organization defines family planning as "*A way of thinking and living that is adopted voluntarily upon the basis of knowledge, attitudes and responsible decisions by individuals and couples in order to promote health and welfare of the family and thus contribute effectively to the social development of the country.*"

Basis for healthy timing and spacing of pregnancies in Christianity

Childbirth Spacing/Family Planning allows married couples (Husband and wife) to anticipate and attain their desired number of children and the spacing and timing of their births. This does not contradict the word of God that says, "*Then*



God blessed them, and God said to them, be fruitful and multiply, fill the earth and subdue it ...” (Genesis 1 :28). This strengthens it because the Bible says as such; “but if anyone does not provide for his own, and especially for those of his household, he has denied the faith and is worse than an unbeliever” (1 Tim. 5:8). A Christian therefore who has children that he cannot cater for, is referred to as being worse than an unbeliever in this context. Planning for the family is therefore very important for responsible parenthood.

Planning is very critical to every human endeavour, more so to the family. It is important that the church advises and guides intending and married couples to discuss and plan for the size of the family they hope to have taking into consideration their available resources and capacity to bring up children. Luke 14: 28-30 teaches on the need for effective planning: *“For which of you intending to build a tower; does not sit down first and count the cost, whether he has enough to finish it, lest, after he has laid the foundation, and is not able to finish it, all who see it begin to mock him, saying, This man began to build and was not able to finish. “This corroborates with St. Paul’s advice: “Let all things be done decently and in order” (1 Cor. 14:40).*

Benefits of Spacing Pregnancies

1. Childbirth Spacing/Family Planning promotes the survival of the mother, child and the husband.
2. God wants us to have good health; and this includes safe pregnancy, childbirth and healthy children. “Behold children are a heritage from the Lord, the fruit of the womb is his reward” (Psalm 127:3; Gen. 33:5).
3. It saves lives; for when a mother in pregnancy or childbirth dies, the family literally dies as well.
4. It reduces the painful task of raising motherless children in our communities.
5. Childbirth Spacing/Family Planning helps the domestic economy as resources are deployed more equitably amongst family members.
6. It promotes discipline and mutual respect which strengthen marriages and uphold human dignity and growth in spirituality.
7. The health and wellbeing of the husband is assured as he is not overwhelmed by the unmet needs of his household.
8. It prevents unplanned pregnancies.



9. It reduces abortions, which significantly account for maternal deaths in Nigeria.
10. Childbirth Spacing/Family Planning can be integrated with preventing mother-to-child transmission of HIV.

Consequences and Adverse Effects of Not Spacing Pregnancies and Childbirths

- Frequent deaths of wives and mothers during high risk pregnancies.
- Poor health and sub-optimal quality of life for the family members.
- Reduced child survival, poor educability and compromised competitiveness amongst their peers.
- The man suffers avoidable physical and spiritual health challenges due to heavy family burden which can lead to high blood pressure and low self-esteem.
- The family may be trapped in intergenerational poverty.

Acceptable Methods of CBS/FP

- A. *The Scientific Natural Family Planning (NFP) methods:*
 1. Billings Ovulation Method: This method is based on the accurate observation tracking, interpretation and use of the cervical mucus to recognize the presumptive period of a woman’s fertility (Ovulation).
 2. Sympto-thermal Method: This method is based on the daily checking, recording and application of the waking (basal temperature of the woman before she gets out of bed). The changes of the pre and post ovulation temperatures are due to the effects of the hormone progesterone.
 3. Creighton Model System/NaPro Technology: This is a new women health science which works cooperatively with the natural physiological and endocrine events in the woman’s reproductive biology
 4. Lactational Amenorrhoeal Method (during exclusive breastfeeding).



B. *Other Modern Contraceptive Methods*

1. **Barrier Methods:** These are mechanical barriers that are placed to prevent the sperm from entering the cervix. They include the condoms (male and female) and diaphragms.
2. **Spermicides:** Chemical substances used to block the cervix and prevent penetration of the sperm. Examples include the foaming tables, creams and jellies.
3. **Intra-uterine Device (IUD):** A plastic and copper object inserted into the uterus by a trained health worker to prevent pregnancy. Types include the Lippers' Loop (coil), the Copper-T, etc.
4. **Hormonal methods:** These methods involve administering the hormones estrogen or progesterone or both, to the woman and to temporarily prevent pregnancy in various ways. They include the following:
 - **Oral Pills:** One tablet is taken daily by the woman throughout the month to prevent pregnancy within that month
 - **Injectable:** Short-acting hormones given by injection to prevent pregnancy over two or three months depending on the type given.
 - **Implants:** A long-acting preparation of progesterone in the form of an elastic capsule implanted in the inner aspect of the upper arm of a woman to prevent pregnancy for 2-5years.
 - **Surgical methods (permanent):** These are minor surgical procedures performed on either the woman or the man to permanently prevent pregnancy. They include tubal ligation for the woman and vasectomy for the man.

Targeted Call to Action for Different Groups

1. **Parents:** Avail every opportunity to learn about your health, including reproductive health and Childbirth Spacing/Family planning.
 - Know how and when to initiate reproductive health information to your children, using teachable moments in their daily family life experience. (Proverbs 22:6)
2. **Husbands:** Show leadership, and take charge of the health and wellbeing of your wives and children including their sexual/ reproductive health and CBSIFP issues. (Eph. 5:25, 28; Prov. 25:28).



- Become educated on issues pertaining to reproductive health, safe motherhood and Childbirth Spacing/Family Planning.
 - Accompany your wives to the clinic for ante natal, childbirth and post-delivery care and services; including adequate provision of resources and plans for any emergency thereof; *“So husbands ought to love their own wives as their own bodies”* (Ephesians 5:28a). *“He who loves his wife loves himself”* (Proverbs 25:28).
 - Live out exemplary chaste lifestyle in the family (Malachi 2: 10-14; 1Cor. 6: 18-20; 1 Cor. 3:16-20).
3. **Wives:** Take care of your life and health by embracing CBS/FP as a virtuous woman.
 - This means that you should take personal responsibility to ensure you are healthy to be able to take care of the family.
 - Acquire basic knowledge and skills to maintain personal health and manage your reproductive functions including knowing early warning signs and where to seek help (Prov. 31: 10-31).
 - Live out exemplary chaste lifestyle in the family (Malachi 2: 10-14; 1Cor. 6: 18-20; 1 Cor. 3: 16-20).
 4. **Youth & Unmarried Adults:** Learn about your sexuality; and adopt chaste, healthy and holy lifestyle.
 - Know that your body is the temple of the Holy Spirit (1 Cor. 6: 18-20);
 - Marriage is honourable and bed undefiled (Heb. 13:4; Eph. 5: 1-3).
 5. **Children & Teenagers:** Learn age-appropriate messages on reproductive health and chaste lifestyle;
 - Develop refusal skills to avoid peer pressure and risky sexual, social behaviours; and
 - Grow in spirituality. Prov 4:20-22; 2 Timothy 2:22; and 1 Cor. 6: 18-20.

Conclusion

God is the master family planner from creation. It is thus imperative for husband and wife to follow God's example in procreation by prayerfully planning the timing and spacing of the children they want. (1 Tim. 3:4; 1Cor. 14:40). Every member of the family stands to benefit from Childbirth Spacing/Family Planning based on faith and factual information. Choose life, choose health. Visit your health care provider for family planning needs.



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