Ahmed Ragab is a consultant and a professor of reproductive health and sexual health at the International Islamic Centre for Population Studies and Research, Al-Azhar University. He is a member of Ethical Committee of the International Islamic Centre for Population Studies and Research, Al-Azhar University, a member for the Advisory Committees for African Network for Social Accountability (ANSA) 2006-2010 for North Africa and the International Advisory Group for Polio with WHO, a member of Africa Faith Based Organization, Durban, South Africa and the vice-chair person of the global network of faith based organizations, the Faith to Action Network.

Prof. Ragab has an extensive track record in designing strategies and programmes which employ faith-based approaches to tackle maternal and newborn mortality, gender-based violence, female genital mutilation/cutting and improve reproductive health outcomes in Africa and Asia including Egypt, Somalia, Kenya, Chad, Nigeria, Senegal, Gambia, South Africa, Jordan, Lebanon, Syria, Sudan, Oman, Yemen, Qatar, Kyrgyzstan and Indonesia. His experience covers capacity development, advocacy, research and service delivery in diverse aspects of reproductive and sexual health. Prof. Ragab carried out assignments for IICPSR, UNFPA, UNICEF and Agha Khan Foundation, amongst others, and was named as a Leader on Behalf of Children by State of the World’s Children 2002- UNICEF report in recognition of his work on the eradication of female genital mutilation/cutting in Somalia and achieving a significant breakthrough in the country.

Prof. Ragab holds a PhD and Master’s degree in Applied Population and Reproductive Health Research from the University of Exeter, UK, a Master’s in Gynecology and Obstetrics from Al-Azhar University, Egypt and a European Master’s degree in Bioethics from the Catholic University of Leuven, Belgium.

How would you assess the level of acceptance of family planning within Muslim communities?

Initially Muslims were ambiguous about family planning due to the issues of language. When the first family planning programmes started the language of birth limitations or family limitations was frequently used which had negative connotations for Muslims. However, when the term birth spacing was introduced, family planning became more acceptable within a large number of Muslim communities provided the contraceptive method was safe and temporary.

What does the Quran and Hadith say about family planning?

In order to understand the concept of family planning in textual sources of Muslim traditions and beliefs, it is crucial to introduce the notion of analogy. In case of the lack of direct reference in the Quran or Hadith to any contemporary issue, making judgments based on analogy and similarity is permissible. As such the Quran says nothing directly about birth spacing except for breastfeeding. It is stated that a mother should breastfeed her child about 2 years which is an equivalent to birth-to-birth intervals of 33 months taking into consideration both the period of pregnancy and breastfeeding.
According to the hadith literature, Muslims practiced a traditional form of family planning known as ‘azl’ which refers to withdrawing the penis before ejaculation. During the time of the Prophet, his companions used to practice ‘azl’. Although initially without Prophet’s consensus, they later decided to seek his approval and he permitted doing so, saying that ‘azl’ would not stop the creation of a child, should Allah’s will that the child be born.

Based on the analogy of what Quran says about breastfeeding and the teachings of the Prophet, modern temporary family planning methods were approved by the vast majority of Muslim religious leaders.

**What is the stand of Muslim religious leaders on permanent family planning methods?**

There has been a strong objection towards permanent methods until recently. First of all it was seen as altering the creation of Allah. Secondly, it has been disapproved through analogy. During the time of the Prophet men who had a desire to indulge in sexual behavior but feared God asked the Prophet whether they could castrate themselves and he forbade them from doing so.

However, there is an emerging voice which says that sterilization is not like castration. First of all, castration involves virility and fertility, in other words both the quality of having a sex drive and ability to reproduce, while sterilization involves only fertility. Secondly, sterilization is no longer a permanent method with the progress of IVF reproductive techniques and micro surgical techniques we can now reverse the tube enabling conception and pregnancy with around 40% probability.

**What is the position of classical Islamic jurisprudence on abortion?**

Different schools of Muslim law hold different views whether abortion is permitted, and at what stage of pregnancy if so. However, a considerable number of early Islamic theologians permitted it up to the 40th or even 120th day.

According to the majority of scholars of the Imam Abu Hanifa’s school it is permissible to perform abortion before completing the four months of the pregnancy. The idea is that the termination of pregnancy should take place before the embryo becomes a human in the fourth month since conception. However, some legists of this school say that it is reprehensible, even before the 120th day, because once sperm reaches the uterus it should be considered a human. Overall, it is believed that the legitimacy of pregnancy termination depends on the reason behind such a choice, in other words under specific circumstances abortion is not considered sinful. Similarly, for scholars of the Zahiri school, abortion is regarded as a sin only after 120 days of pregnancy in which case, the expiation (Kaffarah) is required. According to the Imam Ahmad Ibn Hanbal’s school abortion by means of licit medication is permissible up to 40 days of pregnancy.

Scholars of the Shafei school of law differ in their opinion on aborting the embryo that is less than 40 days old. They are also divided in their opinion in regards to aborting a non-viable fetus that has been less than 120 days in the womb. They are however unanimous that abortion after the fourth month of pregnancy is sinful.

According to the Maliki School of Law the semen settling in the womb should not be removed, even before 40 days had elapsed and once the fetus is viable, the practice is entirely prohibited. Similarly, according to scholars from the Abadi School of Law, a pregnant woman must not do anything that is likely to have an adverse effect on her pregnancy. If she does so, she is considered sinful.

**Why are some Muslim communities reluctant towards any methods of family planning?**

In the last two decades conspiracy theories started to emerge that the West is trying to control Muslim fertility which was followed by the sense
of hostility toward the concept of family planning. Some Muslims disagree that family planning, female genital mutilation/cutting should be on the development agenda while there are other pressing issues such as water and food security or education. Due to this belief, the contraceptive prevalence rate in Cairo started to decrease and fertility rate is on the rise. Unless we combat this conspiracy theory, it will be difficult to reverse the current trend.

**Why do you believe we should take steps to change this trend?**

We at Al-Azhar are convinced that family planning methods contribute to the improved health outcomes for children and women. To quote the works of Prof. Fathalla who is the founder of reproductive health definition, we believe that the higher contraceptive prevalence rate, the lower maternal and newborn mortality. Prof. Fathalla examined the level of maternal and child mortality against family planning uptake and found there are causal linkages between the two variables.

**What steps has Al-Azhar taken to combating misconceptions about family planning amongst Muslims?**

We engage with religious leaders who have the knowledge of holy texts but they lack scientific, medical knowledge. As a trusted institution that held FIGO presidency until recently and is regularly featured on TV, we provide Islamic religious leaders with knowledge on family planning and turn them into family planning champions. Our opinions are quickly accepted within the Muslim community without much debate and if a debate emerges we provide clarification.

**What have been some of the highlights of Al-Azhar work in family planning?**

We produced many rich and well-researched publications. With Prof. Abdel-Rahim Omran we wrote the book *Family Planning in the Legacy of Islam* published by UNFPA and available in English and French. In collaboration with the Government of Indonesia we convened a congress in Aceh, Indonesia in 1990 where we developed the Aceh Declaration signed by Muslim religious leaders. In this declaration religious leaders came to a consensus on accepting the temporary family planning methods. As a result of the Aceh congress, we have also developed a manual on family planning from Sayyid Tantawy, a former Grand Mufti of Egypt and the Grand Imam of Al-Azhar.

We have a fatwa on family planning from the former Grand Sheik of Al-Azhar Gad al-Haq with whom I co-authored a book *Religious Aspects of some Gynecological Problems*. The Sheik wrote the theological part and I wrote the medical part. There were already four editions of the book published in Arabic, and a rough English translation is also available.

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**The Faith to Action Network’s interview series** aims to provide a multiplicity of perspectives on family health and wellbeing, presented in a non-partisan manner that invites open and thorough exploration. It intends to promote knowledge exchange and conceptual debate on diverse faith approaches to family health and wellbeing, recognizing diversity of opinions and promoting productive engagement across the differences. The opinions expressed in the interviews might not necessarily reflect the views of the Faith to Action Network, its Members or its Secretariat.

**Credits**

This interview was conducted by Dominika Jajkowicz

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1. Our operational definition of family health and wellbeing includes: birth spacing, fertility awareness, safe motherhood, prevention of mother to child transmission, maternal and child health, age appropriate sexuality education, gender equity and prevention of female genital cutting, early marriage and all forms of gender based violence.