# Family Planning, Islam and Women's Human Rights in Iran

Roksana Bahramitash*

## Introduction

Iran's family program is considered a world success story by the United Nations, yet rarely, if ever, has this been brought to the attention of the public outside Iran, as the country is often maligned in world press. Even more interesting is how this success came about. How could Iran, a country that suffered a war and economic sanctions throughout the 1980s, manage to reduce a fertility rate of 6.5 in 1970 to just 2 in 2002 The story of this miracle can best be understood if one examines how women became engaged in public policies, and the role women played as volunteer workers from the time of the Islamic Revolution. Surprisingly, high female involvement in the family planning project has paved the way for understanding Iran through women's rights and equality discourse as found in international human rights. Today

* Roksana Bahramitash, is Visiting Professor in Montreal University and Research Associate in Mc Gill University (bahrmithash@gmail.com)

ISJ, Vol. 4, No. 1, Summer 2007, pp. 33-50.

after a number of decades of campaigns and advocacy for access to reproductive health, Iran's largest NGO the Family Planning Association staffed primarily by volunteer women, regards their work as a matter of women's human rights.

**The Revolution**

The Iranian Revolution of 1979 which led to the abdication of the Shah was heavily supported by women. This massive support for the revolution was in spite of the fact that the Shah had brought changes to improve the status of women in the 1960s and 70s. These improvements were in important domains such as education, employment and family rights regarding divorce and child custody. However, these changes effected mainly if not primarily the urban middle classes and the elites. The vast majority of women, those from low-income urban and rural areas, many of whom did not identify themselves with the secular Western ideologies of the state, remained on the margins. This explains to some extent why Ayatollah Khomeini enjoyed such massive support from women in general, but those of low income backgrounds in particular (Poya 1999, Kian 2002, Bahramitash 2004).

The revolution mobilized the Iranian masses because of its commitment to the idea of justice. Therefore once Ayatollah Khomeini came into power it was extremely important to deliver policies which would guarantee social justice, and especially economic justice. A new

constitution was drawn up in which universal health and education along with various other social welfare measures were recognized as the people's right. The first decade of the revolution witnessed state commitments to improving health and education. However, implementing this commitment proved to be difficult for several reasons, one of them being the invasion of Iran by Saddam Hussein. Further, Iran's economy was significantly weakened by sanctions and freezing of its assets in the United States. These events made it difficult for the state to fulfill its promises of social and economic justice. In order to follow through however the Ayatollah drew support from women to work as volunteer workers in many state programmes such as in Iran's universal education initiative.

Women were mobilized through initiatives organized by Ayatollah Khomeini and inspired by the revolution. The bulk of these efforts was carried out by women of low income and peasant backgrounds and those from traditional families. These initiatives ranged from establishing mass mosque-based literacy campaigns, to founding an army of civilians to defend national sovereignty, to mobilizing rural development and reconstruction programmes. Millions of women volunteered for state initiatives in different spheres of post-revolutionary Iran. Their participation was particularly marked by political support lent through joining a civilian brigade, the people's mobilization corps (basij). This brigade was aimed at protecting Iran

against a military coup, and defending the country in case of guerrilla warfare if the Iraqi army was able to penetrate the borders. Many women particularly in small cities were engaged in providing food and clothes for the war. Moreover, as an influx of war casualties such as victims of chemical bombing became a burden on the health system, many women took over responsibility to provide care for victims. Unfortunately, such efforts have remained largely undocumented.[1] During and after the war, many young women married war veterans who had severe injuries and handicaps and who needed intensive care. These marriages were meant to provide veterans with a lifetime of health care support. This volunteerism whereby women take over the public service responsibilities of the state, further stretched beyond the universal literacy and veteran marriage schemes in Iran, encompassing women's participation in the national project of family planning.

**Islam and Women's Rights**

The period following the revolution witnessed setbacks in women's legal rights. What few improvements had been achieved in women's right during the time of the Shah were reversed and legal discrimination against women became more pronounced. This was an extremely contradictory situation because on the one hand the state relied heavily on women's support and their volunteer work,

while on the other it failed to provide them with legal rights and took away what gains had been made (Mir-Hosseini 1999). This major contradiction coupled with the fact that women realized their vital role in constructing post-revolutionary Iran, led to rising discontent among women many of whom asked themselves and the regime why the idea of social and economic justice was not being applied to women. Thus since the mid-1980s there has been a growing force towards reinterpretation of women's legal rights in the context of Shari'a law, which like all law lends itself to different interpretations. The trend has continued to grow and recently, an international Islamic feminist conference was held in Barcelona in 2005.[2]

Efforts to reinterpret Shari'a law in the decade following the revolution were amplified by improved literacy rates among women. Interestingly, it was Ayatollah Khomeini who made literacy a religious duty and contributed to the rising literacy rate among low-income and practicing Muslim women. In terms of basic literacy rates, while prior to the revolution it hovered at 52 percent for women, by 2002 it had reached 91 percent ( World Development Indicator) International data on educational attainment indicates that improvement in education has been impressive, and the United Nations has praised Iran for its successes. Not only basic literacy but primary and secondary education have improved and the number of female students in secondary education has also increased from 18% to 79% during the

same period. Furthermore, twenty-seven years after the revolution, the number of women entering universities is much higher than that of men. Currently 68 percent of those who enter universities are women.

This improvement in girls' and women's education has led to rising support for reinterpretation of Shari'a law, and this reinterpretation has thus become a battleground for women's equality and equity. As an example, in 1993 a law was passed according to which women were entitled to wage for housework. This legal battle was won in the parliament because it was based on Shari'a law. Women pressed for change through the Islamic legal system rather than outside it (Hoodfar 1996). While the battle has been won to recognize this right in law (de jure), its implementation (de facto) remains elusive as men can still find multiple socially-sanctioned and accepted ways of avoiding responsibility. Threat of violence, as well as placing properties in the name of other family members, curbs the ability of courts to implement women's rights. Moreover, conservative judges do not find in favour of women, and thus women's legal rights remain a major challenge in present-day Iran.

**Family Planning (1980s and 1990s): Reinterpretation of Shari'a Law**

In the aftermath of the revolution family planning was abandoned because of pressures from two different sources. One was the traditionalist Islamists who saw the role of women as

primarily mothers and who favoured large families. The other was the revolutionary forces with leftist ideology, both Islamists and non-Islamists, who consistently rejected anything advocated by international organizations (interview with Mehryar 2005). The socialist faction inspired by Ali Shariati, adopted many of the critiques originating in the anti-colonial literature from newly-independent states including the work of Frantz Fanon. They challenged the mainstream development perspective that focused on population growth rather than unequal distribution of world resources, thus also opposing family planning. Initiatives in family planning were early on perceived as Western and imperialist.

Moreover when Saddam Hussein invaded Iran and the country suffered disabling economic sanctions, many believed the only way Iran could win the war was through its human resources. They believed that in the absence of support for Iran, ground forces and a strongly populated army would be the country's only means to defend its sovereignty. In order to win the war and to prevent attempts at a military coup, the country prepared a guerrilla resistance movement. Ayatollah Khomeini called to form a 20 million strong army (arteshe bist million). During this time, not only were family planning programmes abandoned, but women were also actively encouraged to have more children. This was supported by policies such as a comprehensive food subsidy program which aimed at combating poverty but also provided

incentive for families of low-income groups to have a large family.

Soon however, the risks of a rise in population became glaringly apparent. By the mid-1980s the population had increased massively. From 25.7 million in 1966, at an annual rate of growth of 3.1 percent, the population had risen to 50 million by 1989, with an elevated growth rate of 3.4 percent (United Nations Demographic Yearbook, 1966-1986). In addition to this, Iran became host to a tremendous influx of Afghan refugees. In fact the UN has called Iran one of the most generous countries in the world as, except Pakistan that received 5 to 6 million refugees, it has received the highest number of Afghan refugees in the world, estimated at 3 million ( Country Report 2005:22).

During the early 1980s, The state Budget and Planning Organization (sazaman-e barnameh va budjeh) warned that this rate of population growth would produce a disaster in terms of the country's development. This was particularly critical considering that the constitution had emphasized public education and healthcare to meet the revolution's goals of social and economic justice. As a new generation of children entered Iranian schools, the country faced a crisis of school-building and staff, which stretched education resources to their limits. (In fact today in many areas, schools have double-shifts with half of neighborhood children attending in the morning block, and others in the afternoon.) In an estimate from the 1980s, the Budget and Planning Organization indicated that under the circumstances, 45

% of Iran's population would soon be below the age of 14, creating a major crisis for the country even though the percentage of state expenditure on health and education continued to rise (Hoodfar and Assadpour 2000).

This significant and sudden increase in population started to attract the attention of policy-makers and scholars from major universities as well as more progressive religious forces such as the Muslim Doctor's Association (MDA) who attempted to influence religious authorities. When Dr. Marandy a member of the MDA became the Minister of Health, his close association with Ayatollah Khomeini resulted in the leader's religious edict, or fatwa, concluding that family planning was consonant with Islam. This move then provided a context for changes in the dominant discourse on fertility.

Interestingly, prior to the revolution, Dr. Sarem a progressive Muslim had also pressed for a fatwa from Ayatollah Mahallati[3] indicating that contraception was not haram (anti-religion). In both cases, the decision remained at the elite level of the Muslim clerics and did not immediately filter through to the general public. With the second fatwa Ayatollah Khomeini gave his consent to reverse the dominant rejection of family planning policies by clerics and the general public in the 1980s, but the issue had first to become a matter of public debate before being accepted. Debates about family planning next found their way into women's magazines such as Payam-e Hajar

one of the first Islamic feminist magazines, and from there family planning programmes started to gain popular support.

**Women's Role in Implementation of Family Planning**

Once the issue of family planning became a matter of public debate, and the need to curb population growth was recognized, the state was left to determine how best to implement and formulate policies given the financial deficit due to war and economic sanctions. The answer was found in a programme initiated prior to the revolution under the auspices of the International Research Council of Canada in the early 1970s in collaboration with Pahlavi University (the name changed today it is called Shiraz University after the revolution). The project was called kavar (name of a village close to Shiraz) and was based in primary health care of the Department of Community Medicine (interview with Dr. Mehryar Tehan 2007). Prior to the revolution, a community medical program was established at Shiraz University focusing on a nearby village where girls of 15 to 16 were educated about family planning. They were responsible for distributing information in their community. Such programs were not taken up by the Shah as the state budget did not require community support at the time. However, the post-revolution budget deficit of the 1980s led the Ministry of Health to follow-up on health worker programs such as the one at Shiraz University. Dr. Marandy who became the head

of the Ministry of Health relied on such rural health programmes for family planning. Health houses (khane behdasht) were set up in rural areas to train young women paid by the Ministry of Health as health workers (behvarz). They were trained for the period necessary to provide basic health care information for the rural population. In the cities, health workers were recruited by the Ministry of Health from volunteer women in low-income neighborhoods. The program was supported by the religious authorities and many religious women joined the campaign for family planning. Throughout the 1990s, the Ministry of Health successfully implemented family planning through volunteers in the cities, and through health workers in the rural areas, and was thereby able to reduce the country's fertility rate. Programmes were administered in rural areas in health houses and networked throughout the country. In addition, a programme still in effect today was introduced requiring couples intending to marry to attend sex education and reproductive care classes. This is particularly interesting since through this programme men were and are taught various forms of birth control, thus including men as actors in reproductive health.

In a recent country report by the United Nations, it is indicated that Iran participated in the International Conference on Population and Development (ICPD) in Cairo in 1994. Ten years after ICPD, Iran is considered a "graduating" country according to United Nations

Population Fund (UNFPA) standards, having achieved the required ICPD thresholds in terms of maternal mortality, infant mortality, family planning coverage and contraceptive prevalence rate (Country Report of the Islamic Republic of Iran 2005: 3). The non-governmental Family Planning Association (FPA) run largely by volunteer women, participated in this process locally and internationally.

The FPA is a member of the International Planned Parenthood Federation (IPPE), the largest non-governmental global network on reproductive health. FPA's activities are coordinated with other members of IPPE worldwide such that it finds itself in accordance with their priorities of adolescent reproductive health, AIDS prevention, access to safe abortion, providing information for couples prior to marriage and prevention of unwanted pregnancy. FPA has thus adopted the human rights framework and has called upon members to develop innovative approaches to deliver services in areas where the government may be unable or unwilling to engage. Their 2000-2005 strategic plan focuses on reproductive health awareness and promotion of health and reproductive rights, including the prevention of unsafe abortion and unwanted pregnancies in addition to increasing men's participation. FPA has been active in international seminars and conferences and has collaborated with the United Nations Population Fund (UNFPA) and the World Health Organisation (WHO), additionally taking part in Cairo follow-up activities known

as ICPD + 10 held regionally and globally (Interview with Dr. Mehryar Tehran 2007). Iran's success in family planning is highly indebted to the important role of women have played particularly as volunteers and reproductive health providers. These women, many of whom hail from low-income and rural backgrounds have been the backbone of the reproductive health information dissemination and care in Iran for two decades. Although it was the economically-strapped post-revolutionary government of Iran that initiated measures to address the country's elevated fertility rates, it was only due to women's active support and massive voluntary participation that state measures ultimately succeeded. This high involvement in reproductive health has recently brought a new dimension to the Islamic discourse on the topic. While initially transformations in family planning and women's reproductive health policy may appear driven by a local service-oriented domestic agenda, the existence and aims of organizations such as the Family Planning Association indicate ties to common international policy and agendas on women's human rights.

## Conclusion

It is undoubtedly true that fertility control first became an issue of concern in Iran because of its impact on social and economic policy at a national level. Yet, women's presence and involvement in policy implementation has accompanied a shift in the nature of Islamic

discourse, one which has become more open to gender equality. Now that fertility rates have dropped dramatically, and the general population has taken on some of the responsibilities for reproductive health, the pressing state issue has morphed into a civil society issue. Thus it is possible today in Iran to view reproductive health matters as a human rights issue; the Family Planning Association engages in activities based on an understanding of reproductive health as a concern for women's well-being rather than as part of a national economic or development strategy.

Earlier state policy included family planning as a measure to deliver on rights guaranteed by the Constitution to basic health and to education. Family planning measures managed however to curb fertility rates which had previously led to such economic challenges in contravention to the Constitution. Health and reproductive services then shifted to civil society, partially through public debate and partially through volunteerism. The success of the project is clearly strongly entrenched in Iranian women's abilities and strategies to press for change through multiple channels. Mass mobilization by women during the revolution and in the aftermath of the revolution has become the motor for social change in Iran. Further, this vociferous movement attests to women's rights as an internal, rather than a donor-led or Western foreign policy agenda priority, which resounds with the priorities of the population of Iran. If it had not been for the

way women had and have been involved as volunteers, the fertility program would not have become successful, and civil society may not have turned to various other issues in reproductive and sexual health. This rich conjunction of factors is currently contributing to the state meeting commitments to social and economic justice for women and men, as found both in the Constitution and in international obligations. ❐

**Selected Bibliography**

Bahramitash, Roksana, 2006. "Myth and Realities of the Impact of Islam on Women: Women's Changing Marital Status in Iran," *Critique: Journal of Middle Eastern Studies*, Vol. 15. No. 2, 111-128, Summer 2006. With Shahla Kazemipour.

Bahramitash, Roksana.2004. "Market Fundamentalism versus Religious Fundamentalism," *Critique: Journal of Middle Eastern Studies*, Vol. 13, No. 1, pp. 33-46, Spring 2004.

Farjadi, G., Mehryar, H. Amir, & Tabibian, M. 2002. "Labor Force Participation of Women in Iran: Trends and Covariates," Tehran: Population Studies and Research Center for Asia and the Pacific. Working Papers in English, Number 3, Spring 2002.

Hoodfar, 1995, "Population policy and gender equity in post revolutionary Iran, in Family , Gender and Population," in *The Middle East: Policy in Context*. Ed y Carla Makhlouf Obermeyer, Cairo: The American University in Cairo Press.

Hoodfar 1996. "Bargaining with fundamentalism: Women and the politics of population control in Iran." Reproductive Health Matters 8:3041.

Hoodfar Homa and Samad Assadpour.200. Where Religion Is No Obstacle: The Politics of Making a Successful Population Policy in the Islamic Republic of Iran in Studies in Family Planning, Vol.31:1(1-17)

Kian-Thiebaut, A. 2002. *Women and the Making of Civil Society in Post-*

*Islamist Iran. Twenty years of Islamic Revolution*. E. Hooglund. New York, Syracuse University Press.

Mehryar, H. Amir, et al. 2005 "Continuing use of a traditional method (withdrawal) in a high contraceptive prevalence country, Iran: correlates and consequences," Tehran: Regional Center for Population Studies and Research in Asia & the Pacific. Working Papers in English, Number 16, September 2005.

Mehryar, H. Amir, et al. 2006. "Rapid Fertility Decline and Age-Structural Transition in Iran: Causes and Consequences," Tehran: Regional Center for Population Studies and Research in Asia & the Pacific. Working Papers in English, Number 20, 2006.

Mehryar, H. Amir, et al. 2004. "Migration and Reproductive Health in Iran," Tehran: Regional Center for Population Studies and Research in Asia & the Pacific. Working Papers in English, Number 11, 2004.

Mehryar, H. Amir, et al. 2005. "Sterilization in Iran: Prevalence and Correlates," Tehran: Regional Center for Population Studies Research in Asia & the Pacific. Working Papers in English, Number 6, September 2005.

Piran, Parviz. Socio-cultural Factors & Reproductive health: The Case of Rural Communities. Center for Women's Participation. Tehran, Iran. 2005.

Poya, Maryam (1999) *Women, Work and Islamism*. London: Zed Books.

Mir-Hosseini, Ziba, 1999. *Islam and Gender: The Religious Debate in*

*Contemporary Iran*. Princeton: Princeton University Press.

Paidar, Parvin .1995. *Women and the Political Process in Twentieth-Century Iran*. Cambridge: Cambridge University Press.

Country Report of the Islamic Republic of Iran, 2005, Tehran: Ministry of Health.

*United Nations Demographic Yearbook, 1966-1986,* New York: the United Nation.

UNFPA.2005. UNFPA Annual Report. www.unfpa.org/abou/repor/2005/pdf/annual-repor-2005-eng.pdf

**Footnotes**

1. Recently however the feature film Gilaneh has captured this story. Gilaneh is a fictional account of a village woman with a son who survives chemical bombing. It is a composite of numerous actual testimonies culled by filmmaker Bani-Etemad, describing the realities of women-headed households and the burden of care women take on during and after war. This story has deep roots in recent Iranian history.
2. Throughout Muslim communities of the world, including the Western world, many women are engaged in organized gender rights advocacy relying in interpretations of Islam. In recent years, numerous collectives of Muslim women have appeared which fight discrimination and claim rights from within the framework of Islam. This is happening in Malaysia, Lebanon, and Palestine, to mention only a few examples. All these movements have had something in common, which we may designate, even though the movements themselves may not accept the term, Islamic feminism.
3. In a regional conference in 1970 Iranians joined the International Planned Parenthood Federation (IPPF). From Iran, Ayatollah Beheshti attended as a representative of Shi'a religious scholars and he accepted IPPF views on family planning. While there were some reservations among Sunni scholars, the Iranian elite religious community was generally supportive of this move. Thus, prior to the revolution, mainstream Muslim clerics had supported international programmes for population control.