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## Contraceptive Beliefs and Practices of Sikh Women in 3 Southern California Religious Centers

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## **Abstract**

**BACKGROUND:** Sikh American women are part of an underserved community and historically have not been given adequate attention by researchers. It is important for physicians treating Sikh women to be aware of the contraceptive beliefs and attitudes that exist in this community to better serve their reproductive healthcare needs and provide culturally appropriate care. However, there are no prior studies that describe the beliefs and practices in this population. This study evaluates the contraceptive beliefs and practices of Sikh women in Southern California.

**METHODS:** Permission to conduct this research on an exempt basis was obtained from the Human Subjects Committee at Western University and from the Gurdwara Committees at 3 religious sites. A 23 question survey was developed and beta tested. Subjects were non-pregnant Sikh women age > 18 who responded to a personal invitation. Study participants showed support after a group invitation conducted on a platform usually catered to male leadership associated with the religious institutions. Eligible potential subjects were told that participation was voluntary and anonymous. Only data about nonidentifying demographic information, about prior contraceptive use and beliefs about what methods were collected along with answers to questions about attitudes towards menstruation and the medical care system.

**RESULTS:** The interview response rate was 78%; 84 Sikh women aged 18 to 55 years and older were interviewed. Most were Indian born (85%), married (74.6%), and Sehajdhari Sikhs, who were not initiated and fully conformed to the religion (56.5%). Half (50.5%) reported household income > \$50,000, but 32.9% did not know their family income. Nearly half (48.6%) believed that Sikhism does not permit contraceptive use. The most commonly listed method was breastfeeding (40.5%), followed by condoms (22.9%); 29.7% said they engage in sexual relations primarily to reproduce. Most (57.8%) did not know about menstruation before menarche, 57.8% preferred a female Sikh caregiver or at least a South Asian one.

**DISCUSSION/CONCLUSION:** While all women deserve counseling about all contraceptive methods, clinicians should be aware that the majority of Sikhs, especially those who have migrated from India, do not believe in or need birth control. There needs to be awareness in the healthcare field about the lack of education that exists around menstruation in the Sikh community, reflecting on cultural attitudes and traditions. Further expansion of the study to groups of women across all age groups, especially younger women, in larger numbers will allow for better exploration of Sikh women's contraceptive beliefs and practices.