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ETHICAL EVALUATION OF BIRTH CONTROL AMONG SEVENTH-DAY ADVENTIST COUPLES IN BAYELSA STATE

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ABSTRACT

This study examined birth control among Seventh - Day Adventist (SDA) couples in Bayelsa State. Whereas this has garnered significant attention within the realm of religious communities especially among Christians, among the SDA community in Bayelsa state, the subject remains un/under explored. The study examined the ethical perspectives and decision-making processes around birth control among SDA couples in Bayelsa State. Findings indicate that while the SDA church officially accepts non-abortifacient contraception, a significant proportion of its members within Bayelsa are largely challenged by social and cultural factors leading to a pronatalist stance on the birth control. This, in turn projects significant ethical dilemmas with bio-medical and socio-economic effects on the family and society as well as reproductive and maternal health. This underscores the importance of tailored educational efforts and counseling to help SDA couples navigate these ethical dilemmas and make informed choices about family planning that align with their values and circumstances.

Keywords: Birth Control, Couples, Ethical Evaluation.

Introduction

The ethical considerations surrounding birth control have garnered significant attention within the realm of religious communities especially among Christians, often reflecting the interplay between theological teachings, cultural norms, and individual beliefs. Birth control is a pivotal aspect of reproductive health that offers couples/parents the option of choosing the

number and pacing of their children. It has a rich history intertwined with societal, cultural, and scientific developments. Historically, The concept of birth control dates back to ancient civilizations. Methods such as the use of herbal concoctions and physical barriers were employed in early societies to prevent pregnancies. The 19th century witnessed significant advancements in birth control methods. The introduction of the diaphragm and the condom marked a turning point in contraceptive practices. In the early 20th century Margaret Sanger's activism played a pivotal role in promoting birth control awareness. Her efforts led to the establishment of organizations like the American Birth Control League, a precursor to Planned Parenthood (Williams, 2007). Till date, birth control has witnessed evident growth traceable to recent scientific and technological discoveries especially within the biomedical field.

Christianity over the years has face major advancements in systematic theology, which according to Johnson (2021) has sidelined dogmatic theology, giving rise to disagreement on ethic theological matters in Christianity. On this basis that Fasiku (2020) observed that divergent interpretations of scripture and moral convictions have led to a spectrum of viewpoints on the permissibility and appropriateness of contraceptive practices. While some denominations accept and promote birth control practices, some reject it entirely, whereas, some accept a few methods. The Seventh-day Adventist Church, a Christian denomination founded on distinctive theological tenets and health-oriented principles, presents an intriguing case study for exploring the ethical dimensions of birth control.

Founded in the mid-19th century, the Seventh-day Adventist Church emerged as a distinctive branch of Christianity with a strong emphasis on the imminence of the Second Coming, observance of the seventh-day Sabbath, and the integration of health principles into faith-based living (Zavada, 2019). Rooted in the belief in holistic health, Seventh-day Adventists have historically embraced a lifestyle that promotes physical well-being, mental clarity, and spiritual growth (Adventist.org, 2023). Birth control decisions are viewed as collaborative choices made by couples in consultation with God and informed by biblical principles. The church supports mutual decision-making between spouses and encourages open communication regarding birth control (Seventh-day Adventist Church, n.d.). As a Christian faith, she encourages collaborative birth control, while upholding the sanctity of life.

Among Seventh-day Adventists in Bayelsa State, the intersection of theological perspectives and birth control ethics has often been overshadowed by broader topics such as diet, exercise, and lifestyle choices. While the Seventh-day Adventist leadership has offered guidance on health-related issues, the exploration of birth control ethics within this context has received comparatively limited attention. Hence, the members have been left indecisive and unclear on the issue of birth control. The intersection of Seventh-day Adventist theology, the Adventist Health Message, and the broader discourse on birth control ethics within Christianity provides a fertile ground for exploration, with implications that reach beyond the boundaries of this specific denomination. This dissertation therefore aims to address this gap by conducting an in-depth analysis of the ethical evaluation of birth control among Christian couples within the Seventh-day Adventist Church in Bayelsa State. By examining the nuances of theological writings, sermons, official statements, and lived experiences, this study intends to illuminate the diverse ethical considerations that shape birth control decisions within this faith community. Additionally, the

research seeks to uncover any potential tensions or reconciliations between Seventh-day Adventist teachings on holistic health and the utilization of birth control methods as presented by recent biomedical and technological advancements.

Conceptual Framework

The concept of birth control is the practical use of medical and social activities that offers couples and individuals to select the number and spacing of their children. Fasiku (2016) posited that birth control is simply a way of maintaining reasonable interval limitation in child bearing process; it is a way of preventing unwanted pregnancy and a means of sexual gratification.

Adaka (1982), described birth control as part of planned parenthood, fertility control, or contraception in limiting or spacing out pregnancies either for socio-economic, health or population control purposes. In the light of this work, Adaka's view seems to give very comprehensive meaning, seeing that it covers virtually all aspects of birth control, ranging from what it is, the aim and purpose, as well as the benefits. According to the World Health Organization (WHO) (2015) birth control is 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 contributing effectively to the social development of the country. This definition of WHO is in agreement with Adaka's definition.

On the other hand, Nwabude and Nwagwugwu (2006) defined birth control as having the number of children at interval, that is suitable for the couples in order to ensure adequate care, as well as using birth control and contraceptive for controlling the number and spacing of children. This definition seems to have paid more attention to the number of children, their welfare and care-taking, while that of Adaka was more concerned with the societal and health implications.

Delano (2010) further added that birth control is a means by which individuals or couples space the process of conception and child birth at interval, mutually determined by both partners, in order to have the desired number of children that they can conveniently maintain. Again, this definition looks at the ability of the family to maintain or take care of the number of children they give birth to. Fasiku (2020) further added this covers many aspects such as when and why to get pregnant, the number of children wanted, how to deal with fertility issues, how to avoid unwanted pregnancy, whether to consider an abortion, if an unwanted pregnancy occurs. It also concerns issues of having children that are planned for, and not children conceived by accident or chance.

It is safe at this point to conclude that the entire idea of birth control centers on health, survivals, and developments of the children, family and progress of the entire society.

Theoretical Framework

The theoretical framework of this research study offers a structured approach to understanding how Christian couples navigate the ethical considerations surrounding birth control decisions. It draws upon ethical theories and religious perspectives to provide a comprehensive analysis of the factors that shape their decision-making process. The theoretical framework of this research combines the Deontological, Divine command and Consequentialist theories.

Deontological Theory

Deontological ethics, represented by the works of Immanuel Kant, emphasizes the importance of adhering to moral principles and duties regardless of outcomes (Kant, 1785). This theory will be applied to explore how Christian couples evaluate birth control methods based on their alignment with absolute moral norms, such as the sanctity of life and marital fidelity.

Immanuel Kant's theory of ethics is considered deontological for several different reasons. First, Kant argues that in order to act in the morally right way, people must act from duty. That is, people must do good, because it is the obligation of everyone to do so. Thus, he begins his argument with the premise that the highest good must be both good in itself and good without qualification. Something is "good in itself" when it is intrinsically good; and is "good without qualification" when the addition of that thing never makes a situation ethically worse. Secondly, Kant argued that it was not the consequences of actions that make them right or wrong, but the motives of the person who carries out the action. He further posited that good consequences could arise by accident from an action that was motivated by a desire to cause harm to an innocent person, and bad consequences could arise from an action that was well-motivated. Instead, he claims, a person has a good will when he "acts out of respect for the moral law."

Divine Command Theory

Divine command theory (also known as theological voluntarism) is a meta-ethical theory which proposes that an action's status as morally good is equivalent to whether it is commanded by God. The theory asserts that what is moral is determined by God's commands and that for a person to be moral he is to follow God's commands. Followers of both monotheistic and polytheistic religions in ancient and modern times have often accepted the importance of God's commands in establishing morality (Stanford Encyclopedia of Philosophy, 2019).

Numerous variants of the theory have been presented: historically, figures including Saint Augustine, Duns Scotus, William of Ockham and Søren Kierkegaard have presented various versions of divine command theory; more recently, Robert Merrihew Adams has proposed a "modified divine command theory" based on the omnibenevolence of God in which morality is linked to human conceptions of right and wrong. Paul Copan has argued in favour of the theory from a Christian viewpoint, and Linda Trinkaus Zagzebski's divine motivation theory proposes that God's motivations, rather than commands, are the source of morality (Hare 2015).

The theoretical framework, including deontological ethics and divine command theories, offers a comprehensive lens to analyze how Christian couples ethically evaluate birth control methods. By integrating these theories and concepts, this study aims to gain a deeper understanding of the ethical considerations that guide their decision-making process.

Consequentialist Theory

Consequentialist ethical theory also known as utilitarianism was propounded by the works of Jeremy Bentham and John Stuart Mill. This theory holds that the consequences of one's actions are the ultimate basis for judgement about the morality and profound quality of those actions (Sinnott-Armstrong, 2019). This is in contrast to deontological ethical theory, which passes judgment on the morality of an actions in view of the action’s adherence to the rule or rules, irrespective of the outcome (Alexander and Moore, 2016). The central thought of consequentialism is that the right action is that which produces the best overall consequences (Shafer-Landau, 2018).

Utilitarianism judges the morality of an action based on its ability to maximize overall human (or sentient) happiness and well-being (Carlson, 1997). Other consequentialist views, like egoism and ethical egoism, rather center on maximizing the consequences of those actions for the individual agent over the overall good of the society (Mackie, 1977).

Critics of consequentialism argue that it fails to adequately account for the inherent rights and duties of moral agents, instead reducing ethics to a crude calculation of costs and benefits (Alexander & Moore, 2016). Defenders counter that consequences are the only thing that truly matter from an impartial, ethical point of view (Sinnott-Armstrong, 2019). The debate between consequentialist and deontological ethics remains one of the central disputes in moral philosophy.

Seventh-day Adventists' Standpoints on Birth Control Practices

The Seventh-day Adventist Church is a Christian denomination that emerged in the mid-19th century in the United States. It emphasizes the imminent return of Jesus Christ, the importance of observing the Sabbath on Saturday, and the significance of holistic health and well-being. Adventists believe in the authority of the Bible, the practice of baptism by immersion, and the prophetic ministry of Ellen G. White, one of the church's founders. Their teachings stress the importance of grace, faith, and community service, as well as a commitment to a healthy lifestyle, which often includes vegetarianism and abstinence from alcohol and other harmful substances. One area of considerable interest is the Church's stance on birth control.

The Adventist Health Ministries has provided some insights into the Church's position on family planning and birth control (Adventist Health Ministries, 2012). From a theological perspective, SDAs believe that human life is sacred and begins at conception (General Conference of Seventh-day Adventists, 2015). This belief underpins their cautious approach to birth control methods that may prevent implantation of a fertilized egg. Methods considered abortifacients are generally discouraged (Adventist Health Ministries, 2012). Ethically, the SDA Church emphasizes responsible parenthood. Couples are encouraged to prayerfully consider the number of children they can adequately care for, balancing the health of the mother and the well-being of existing children (Knight, 2000). The use of non-abortifacient contraceptives is viewed as a responsible choice for family planning, provided it is done with mutual consent and in the context of a loving marital relationship (Adventist Health Ministries, 2012).

Practical Implications

The Church's approach to birth control also reflects its commitment to individual conscience and personal decision-making. While providing guidelines, the SDA Church recognizes that decisions regarding birth control are ultimately personal and should be made by the couple, considering their circumstances and in consultation with medical professionals if needed (Knight, 2000).

The Seventh-day Adventist Church's perspective on birth control is nuanced, balancing theological convictions with ethical considerations and practical implications. The Church promotes responsible parenthood and the sanctity of life while allowing for individual conscience in decision-making. This approach underscores the SDA belief in the importance of health, family, and moral responsibility.

Relationship Between SDA Standpoints and Biblical Standpoints on Birth Control

The Seventh-day Adventist (SDA) Church, while basing its doctrines on the Bible, interprets various contemporary issues through its theological framework. One such issue is birth control, a topic of significant ethical and theological debate. This work examines the relationship between the SDA Church's standpoint on birth control and the biblical standpoint, highlighting areas of convergence and divergence.

Biblical Standpoints on Birth Control

The Bible does not provide explicit instructions on birth control, leading to varied interpretations among different Christian denominations. However, several biblical principles can be inferred regarding procreation and family life. The command to "be fruitful and multiply" (Genesis 1:28, New International Version) is often cited as a divine mandate for procreation. Additionally, the sanctity of life is a recurrent theme in Scripture, underscoring the belief that human life is sacred and created in the image of God (Genesis 1:27). However, the Bible also emphasizes wisdom and stewardship in managing one's resources, suggesting that responsible family planning can be aligned with Biblical principles. Couples are encouraged to seek God's guidance in their decisions, considering their capacity to nurture and support children. Additionally, the Bible promotes the importance of love, care, and responsibility within the family unit. For instance, 1 Timothy 5:8 stress the necessity of providing for one's family, stating, "Anyone who does not provide for their relatives, and especially for their own household, has denied the faith and is worse than an unbeliever." This underscores the idea that thoughtful family planning can lead to better outcomes for both parents and children, as it allows for a focus on the quality of care provided. The emphasis on the well-being of the family unit suggests that decisions around birth control should be approached with prayer, seeking a balance between fulfilling the divine command to procreate and the practical realities of raising children. Thus, while the Bible encourages procreation, it allows for individual interpretation and the responsible consideration of family size and circumstances.

Convergence of SDA and Biblical Standpoints

Both the SDA standpoint and the biblical standpoint underscore the importance of procreation within the confines of marriage and the sanctity of human life. The SDA Church's emphasis on responsible parenthood and family planning is reflective of the biblical principle of stewardship, which extends to managing family size and resources prudently (Proverbs 22:6). The Church's position that decisions regarding birth control should be made prayerfully and with mutual consent between spouses aligns with the biblical ideals of marital unity and mutual respect (Ephesians 5:21-33). They both emphasize stewardship, holistic health, informed decision-making, and the importance of community. Both perspectives encourage couples to make thoughtful, prayerful choices that align with their beliefs and circumstances.

Divergence and Interpretative Flexibility

While the Bible does not explicitly address modern contraceptive methods, the SDA Church provides interpretative guidance that seeks to reconcile biblical principles with contemporary realities. This interpretative flexibility allows for the use of non-abortifacient contraceptives, provided they are used responsibly and in the context of a loving marital relationship (Knight, 2000). The SDA Church's stance acknowledges that the biblical command to "be fruitful and multiply" does not necessarily preclude the use of birth control, particularly when considering the health of the mother and the welfare of existing children (Genesis 1:28; Adventist Health Ministries, 2012).

Attitudes and Beliefs of Bayelsa Adventists towards Birth Control

The theological perspectives of the broader Adventist community on birth control, influences the lives of Bayelsa Adventists as a religious community and are major determinants to shaping how they think and practice family planning. Living in the culture of large families, many couples look at many children and large family as a blessing and there is a cultural pressure to reproduce, thereby leading to a pro-natalist attitude towards birth control. However, the use of some forms of birth control is fairly practiced among middle-class and educated urban Adventists, specifically natural family planning techniques and barrier method in bid to balance religious teaching with their desire for practical family planning needs.

The issue of contraception still remains a sensitive topic and for many even in this more progressive rural community, it remains difficult to discuss openly. For many Adventist women, especially those without adequate information and access to reasonable healthcare services there is the pressure to bear more children than they can accommodate in a healthy manner or as per their personal goals. Moreover, among the most spread prejudices, hormonal or intrauterine contraceptives are still viewed as unnatural and immoral. This is premised on several factors as discussed below.

Personal Beliefs and Values

Personal beliefs and values play a significant role in couples' decisions about birth control. Religious beliefs, in particular, can heavily influence attitudes towards contraception. For instance, couples who adhere to the teachings of the Seventh-day Adventist (SDA) Church may consider the Church's guidelines on birth control, which emphasize the sanctity of life and responsible parenthood (Adventist Health Ministries, 2012). Similarly, personal moral values about the beginning of life and the use of contraceptives also impact decision-making (Knight, 2000).

Religious and Ethical Considerations

Religious and ethical considerations are among the foremost factors influencing decisions on birth control. Many religious doctrines provide specific teachings on contraception, which adherents strive to follow. For example, the SDA Church discourages methods that may act as abortifacients and encourages methods that align with responsible parenthood and marital consent (General Conference of Seventh-day Adventists, 2015). Ethical considerations regarding the sanctity of life and the moral implications of different contraceptive methods also play a critical role.

Socio-Economic Factors

Socio-economic status is a major determinant in the choice of birth control methods. Couples with higher socio-economic status may have better access to a variety of contraceptive options and healthcare services. Conversely, those with lower socio-economic status might face financial constraints that limit their access to preferred methods of contraception (Guttmacher Institute, 2018). Education and income levels significantly affect the awareness and usage of different birth control practices. A relatively high cost of effective family planning methods and technologies may hinder some couples to purchase and utilize family planning services. Poverty especially among the rural poor who do not have access to free family planning services may mitigate the acceptance and use of family planning methods and technologies.

Cultural Influences

Cultural norms and values shape attitudes towards family planning and contraception. In many cultures, the number of children and family size are closely linked to social status and community expectations (Kaufman, 2000). Cultural attitudes towards gender roles can also influence decisions, with some cultures placing the responsibility of contraception primarily on women, while others encourage shared decision-making between partners. According to Lawrence-Hart (2013) in Lawrence-Hart (2019) tradition and religion are synonymous in Africa; and the cultural values of the people are closely linked to their belief system. This is the case of the typical Bayelsan whose culture sees children as blessing and are willing to receive them.

Health Considerations

Health considerations, including the physical and mental well-being of the woman, are critical factors in birth control decision-making. Couples must consider the health risks and benefits associated with different contraceptive methods. For example, hormonal contraceptives may pose risks for women with certain health conditions, leading them to opt for alternative methods (Centers for Disease Control and Prevention, 2016). Additionally, the desire to space pregnancies for optimal maternal and child health is a significant consideration.

Access to Information and Healthcare Services

Access to accurate information and quality healthcare services greatly influences contraceptive choices. Couples who have access to comprehensive family planning services are more likely to make informed decisions about birth control. Healthcare providers play a pivotal role in educating couples about the various options available and their respective advantages and disadvantages (World Health Organization, 2018). Accessing family planning services may be difficult for spouse who are living far away from health centers that are providing family planning services. Spouse who stays faraway from health facility and source of family planning services in rural low and middle-income countries like Nigeria may have challenges in accepting and using family planning methods. The absence of functional and effective primary health care systems with family planning services based on current methods and technologies has hinder the acceptance and uptake of family planning services.

Communication and Relationship Dynamics

The quality of communication and dynamics within the relationship significantly affect birth control decisions. Open and honest discussions between partners about family planning goals, preferences, and concerns are essential for making mutually agreeable decisions. Relationship dynamics, including the level of trust, mutual respect, and decision-making power balance, can either facilitate or hinder effective contraceptive use (Becker, 1996).

Ethical Evaluation of Bsayelsa SDA Couples Viewpoints toward Birth Control Pro-natalist Viewpoint

Pronatalism is a policy paradigm or personal value that promotes the reproduction of human life as an important objective of humanity and therefore advocates high birthrate (McKeown, 2014). Whereas this position aligns with the deontological theory that emphasizes universal duties irrespective of the consequences. With emphasis on the divine command theory, a branch of the deontological theory that stresses on Divine commandments. the pronatalist

viewpoint will find anchor on the commandment of Genesis 1:28, "be fruitful, and multiply, and fill the earth…" However, this alone does not represent the entire biblical stand on childbirth and responsible parenting. According to divine order; "But if any provide not for his own, and especially for those of his own house, he hath denied the faith, and is worse than an infidel" (1 Timothy 5:8, KJV).

This pronatalist stand fails to acknowledge the divine command on responsible parenting that takes into cognizance the welfare of members of the family, consequently giving freedom for low-income families to subject numerous children into hardship, inadequate care, nutrition, education and opportunities. This again, according to the consequentialists is deficient, as it has resulted to negative consequences for another.

i. Impact on Women's Health and Empowerment

The prohibitive approach towards birth control could restrict women's access to safe and effective contraceptive choices, possibly prompting adverse consequences for their physical and mental well-being, as well as their capacity to practice reproductive independence. Diminished access to birth control might expand the gamble of accidental pregnancies, which could adversely influence women's educational and economic opportunities.

ii. Socioeconomic Challenges

Large families without proper family planning might face financial difficulty, which could adversely influence the general wellbeing of the children and the society. Increased growth in population without corresponding social and economic development could strain public services and infrastructure, prompting more societal challenges.

iii. Potential Positive Consequences

The pro-natalist position could be seen as promoting the positive consequence of valuing the sanctity of life and the importance of family, which may contribute to a sense of community and social cohesion within the Bayelsa SDA population. Additionally, a larger population could provide a greater labor force and economic potential for the region, if accompanied by appropriate social and economic development.

Acceptance of Non-abortifacient Birth Control Methods

The Bayelsa SDA stand on non-abortifacient methods of birth control presents an ethical situation that corresponds with the deontological and consequentialists ethical theories. While the use of abortifacient methods can be seen as an expression of individual autonomy and a means of addressing certain health and social needs, it also raises significant ethical concerns related to the sanctity of life and the moral status of the fetus. Although some scholars have propounded theories recommending abortifacients as acceptable means of birth control (Lotha, 2023), the SDA stand still remains unambiguously deviant.

It could be concluded that one's position on the abortion debate colours the way they define it. For some people, abortion is the termination of pregnancy which leads to the death of an unborn child in the womb. According to Helm (1987) for those who would not accord the fetus a human status, abortion is viewed as the expulsion from the womb of an embryo or a fetus, not yet able to sustain life. Commenting on this Robert (1988) opines that the moral issue of abortion revolves principally around the value and rights accorded to the fetus; whether the value of human dignity, sacredness of life and inalienable rights are possessed by the unborn. This position is further buttressed by the attitude of couples towards a pregnancy. If a couple wants a child, they will go to any length to preserve and care for the unborn child, but if the child is not wanted, the story is different. They would ensure that it is aborted.

Quoting Exodus 21:22-23;

> When men fight and hurt a pregnant woman, so that she suffers a miscarriage but no further injury, the guilty one shall be fined as much as the woman's husband demands of him. But if injury ensues, you shall give life for life.

Donatus et al (2023) contends that the unborn child is fully human in active potency and therefore, has the same right to life as the mother. The fetus should not be treated as an unjust aggressor and consequently terminated. Thus, induced abortion that is directly willed either as an end or a means, is gravely contrary to the natural moral law. It is on this basis that the SDA position on the use of non-abortifacient methods of birth control is justified. From a deontological view, the SDA's position regards the sanctity of life, is consistent with her religious beliefs, and maintains the principles of individuality. This correspondence with core moral principles is a strength to their position.

A consequentialist evaluation suggests that the use of non-abortifacient family planning methods can have positive results to women's health, the promotion of family planning, and environmental impact. It also provides a greater degree of reproductive autonomy compared to a total rejection of all birth control methods.

Ethical Dilemmas and Impact of Bayelsa Adventists' Attitude towards Birth Control

Incorporating the socioeconomic impact, here are five key impacts of the Seventh-day Adventist (SDA) attitude towards birth control in Bayelsa State:

Elevated Maternal and Child Mortality Risks:

Due to the pronatalist attitude among couples and, there is often a strong emphasis on large families and limited acceptance of family planning practices. This can lead to higher fertility rates, shorter birth intervals, and increased risks of pregnancy complications and maternal deaths. Additionally, larger families may struggle to provide adequate nutrition, healthcare, and support for children, leading to higher child mortality rates.

Barriers to Accessing Family Planning Services:

The cultural and religious stigma surrounding birth control within the SDA community can create significant barriers to accessing family planning services and resources. Individuals may feel discouraged or even ostracized for seeking out contraception, leading to unmet need for family planning and limited utilization of available services.

Socioeconomic Impacts

Reducing the number of children allows families to make greater investments in health and education, resulting in a future workforce that is healthier and better educated. According to Yasukawa (2017) "No country has emerged from poverty in the past 50 years without expanding access to contraceptives." On the other hand, larger family sizes resulting from the pro-natalist attitudes can put significant strain on household finances and resources. Families may struggle to provide for their children's basic needs, such as food, education, and healthcare, leading to increased poverty and limited opportunities for family members, especially women and children. This can perpetuate the cycle of socioeconomic disadvantage within the SDA community. While it can promote population growth and potentially bolster labor supply within the larger community,

it may also strain resources such as healthcare, education, and social services, particularly in a region like Bayelsa state where economic development is lagging. Increased birth rates can lead to higher dependency ratios, where a smaller working-age population must support a growing number of dependents, thereby placing economic pressures on families and governments.

Challenges in Empowering Women and Promoting Gender Equality:

The traditional gender roles and expectations within the SDA community, combined with the emphasis on large families, can perpetuate gender inequality and limit women's autonomy and decision-making power, especially regarding reproductive choices. This can have far-reaching consequences for women's educational and economic opportunities, as well as their overall wellbeing and social status, further exacerbating socioeconomic disparities. Family planning promises to recast women from the status of merely a child bearer to an economically enfranchised agent. This is particularly important in the case of adolescent mothers. As they are unable to complete their education, their lifelong earning potential is reduced and could snare the entire family into intergenerational poverty. This goal becomes difficult to achieve with the viewpoints of the Bayelsa SDAs on birth control.

Conclusion

Within the Seventh-day Adventist community, there is a general acceptance of birth control methods, indicating a pragmatic approach to family planning. This aligns with the denomination's official position, which acknowledges the moral legitimacy of birth control for the purposes of responsible parenthood. This again corresponds with the biblical position on parenting. Contrarily, a strong pronatalist sentiment among some Bayelsa SDA couples is observed, who view large families and high fertility as a social and religious ideal. This tension between the acceptance of birth control and the desire for large families suggests a gap in knowledge and attention given by the larger Adventist community to the practice of birth control at local level. The conflict in SDA beliefs on birth control and its practice with the Bayelsa Adventist community raises an ethical tension. As the pronatalist stance aligns with deontological principles of divine command, but fails to fully consider the potential negative consequences for individual families and society. The SDA's acceptance of non-abortifacient contraception, however, corresponds with both deontological ethics, by upholding the sanctity of life, and consequentialist ethics, by promoting positive outcomes for women's health and reproductive autonomy.

Recommendations

Following the outcome of this study, this work recommends as follow;

1. Promote open and informed dialogue: Encourage SDA church leaders and members to engage in respectful, non-judgmental discussions about the ethical considerations surrounding birth control.

2. Emphasize reproductive autonomy and informed consent: Ensure that SDA couples have access to comprehensive, unbiased information about the available birth control options and their potential benefits and risks. Respect the right of SDA couples to make informed choices about family planning, without coercion or stigma.

3. Align ethical guidelines with SDA moral teachings: Engage SDA theologians, ethicists, and medical professionals to develop a clear, nuanced understanding of the church's moral teachings on birth control. Reconcile any potential conflicts between SDA teachings and the ethical principles of autonomy, beneficence, non-maleficence, and justice. Provide guidance to SDA couples on how

to navigate the ethical considerations of birth control within the framework of their religious beliefs.

4. Promote a holistic approach to reproductive health: Encourage SDA couples to consider the broader implications of their reproductive choices, including the physical, emotional, and spiritual well-being of themselves and their families. Provide guidance on the ethical use of natural family planning methods, as well as the responsible use of contraceptive technologies. Support SDA couples in navigating the complex intersections of their religious beliefs, personal values, and reproductive health needs.

5. Collaboration: Collaborate with local SDA communities, healthcare providers, and policymakers to ensure that the research priorities and methodologies are aligned with the needs and concerns of the target population. Disseminate the research findings to a wide range of stakeholders, including SDA church leaders, healthcare professionals, and policymakers, to inform and influence ethical decision-making and policy development.

6. Further Studies: Conduct a comparative study to examine the ethical perspectives and practices around birth control among SDA couples in Bayelsa State and other regions or countries with significant SDA populations. Compare the ethical evaluation of birth control among SDA couples with that of other religious or cultural groups within Bayelsa State or Nigeria.

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