

A Tale of Two Cultures: Contraception Habits of Czech and Roma People

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Contraception in the realm of sexual and reproductive health is an ever-growing field, particularly in the modern world. As societies modernized and people began living longer, getting married later, and babies were more likely to survive, the need for pregnancy prevention soared. This topic is not without controversy, even today, and each culture has established their own norms surrounding contraception. For the sake of this paper, contraception refers to practices and methods used by people to purposefully prevent the incident of pregnancy. This definition encompasses a majority of birth control methods, though abortion will be excluded from this definition for the scope of this analysis. There are two cultures which, despite living in close proximity to one another, hold pretty contrasting views on contraception use—the Czech Republic population and the Roma population. This paper will look at Czech contraception practices following the separation of Czechoslovakia, as this allows the analysis to be focused on the homogeneous Czech culture without influence from Slovakian or other cultures. The Roma population today is spread across a number of Central and Eastern European countries, including the Czech Republic. Their displacement across Europe is due to their nomadic background, impacts of the Holocaust, and an overall history of discrimination against their people. Thus, despite residing in various countries, the central Roma culture is present across all of these groups and it is these cultural practices that will be analyzed, not the individual groups in each country. Through extensive research and analysis, this paper will argue that the difference in contraception use between the Czech people and Roma people is a direct result of contrasting social and economic circumstances of their respective populations.

The recent history of Czech contraception use was largely influenced by the Communist regime it was under from 1948-1989. During this time, abortion was the most commonly used method of birth control (Hollá et al., 2011). Today, though, the contraception preferences of

Czech women have changed significantly. The most commonly used contraception method is hormonal contraception, with 40% of women surveyed indicating they use this method (Hollá et al., 2011). Following hormonal contraception, barrier methods were the next most common at 13%, withdrawal methods were used by 9%, and intrauterine devices were used by 4% (Hollá et al., 2011). This data shows a preference for modern contraception methods, such as hormonal and barrier methods. Another study that surveyed 2,334 Czech women found that 74.8% of them used a modern method as their primary form of contraception (Kocourková & Fait, 2011). In a different survey of both Czech men and women, 81.6% of men and 82.4% of women indicated that they had used a contraceptive method in their last intercourse event (Agadjanian, 2002). These studies show a widespread use of contraceptives generally during intercourse, and a preference for modern methods, particularly hormonal contraception.

The data for Roma populations tells a very different story. In one study that looked at the Roma population in Serbia, coitus interruptus, or withdrawal, was used by 58% of respondents as their primary contraception method (Sedlecky and Rašević, 2015). Withdrawal, as well as avoiding intercourse on fertile days, are considered to be more traditional methods of contraception. Conversely, only 6% indicated they relied on modern methods (Sedlecky and Rašević, 2015). While Czech women widely favored hormonal contraception, oral contraceptives and IUDs combined only accounted for less than 1% of use by Romani women (Sedlecky and Rašević, 2015). A separate survey of 1,082 Romani women in Serbia revealed that 76.3% use contraception regularly during intercourse, and 23.7% use no contraceptive methods (Nikolic and Djikanovic, 2014). These data indicate that there is also a relatively widespread use of contraceptives in the Roma population, however these methods are typically

more traditional methods like withdrawal, which has a much lower effectiveness rate than modern methods of contraception.

Many factors contribute to the habits of Czech people when it comes to contraception. The total fertility rate of the Czech Republic is well below replacement rate, at 1.6 children per woman (Agadjanian, 2002). This information shows that Czech women are having less children, meaning they likely are relying more on contraceptive methods to achieve this goal. This would explain why they have shifted to modern contraception methods recently, as they want their contraception to be effective long-term. The peak age for childbirth in the Czech Republic is 29, relatively later in a woman's reproductive life (Kocourková and Fait, 2011). That lends insight into why they choose hormonal contraception and barrier methods more regularly than traditional methods, which are typically less effective. Additionally, 9/10 respondents in one survey indicated that contraceptives are much more widely accessible now than they were in communist times (Agadjanian, 2002). This shift in political power likely prompted Czech citizens to make many changes in their lives, and shifting their contraceptive practices was one of these changes. It appears there is very little stigma in Czech culture surrounding the use of contraception, marrying later in life, and having children later. One possible reasoning for this lack of stigma is that Czech people are not very religious. All of these factors offer an explanation as to why Czech people use contraceptives in the manner that they do. Finally, contraception is freely available in the Czech Republic and has been for the last few decades, a likely explanation for why more women have taken to using modern contraception in recent years (Hollá et al., 2011).

Looking at social and cultural factors surrounding Roma populations offers an understanding of their contraceptive practices as well. In Romani culture, women marry early,

with 54% of Romani women married before age 18 (Sedlecky and Rašević, 2015). It is commonly regarded that the most important role of a mother is to give birth, particularly to sons (Sedlecky and Rašević, 2015). In fact, men are often encouraged to leave their wives if she does not bear children shortly after they are married (Kühlbrandt, 2019). These cultural traditions explain why it is so common for Roma families to be so large, and women to have so many children. The total fertility rate of Roma populations is 2.7 births per woman (Sedlecky and Rašević, 2015), though many more is common. The obvious reason, then, for lack of contraceptive use and particularly modern contraceptive use is that many Romani women want to be or are encouraged to be pregnant. 61% of women in these Roma communities cite tradition as the reason they do not use modern contraceptives and continue to get pregnant (Sedlecky and Rašević, 2015). There are also very real social barriers to accessing modern contraceptives. Many Romani women have not been educated about contraception or pregnancy prevention, either because they were forced to leave school to marry upon menarche or because the sex education in schools is lackluster, if not nonexistent (Sedlecky and Rašević, 2015). Additionally, while 70% of Czech women found doctors or psychologists to be the best source for contraception (Hollá et al., 2011), Roma populations are hesitant to access healthcare systems in the countries they reside. They often lack the financial resources to seek healthcare, and on top of that, there are awful biases in healthcare professionals towards Roma people (Kühlbrandt, 2019). It is no secret that the Roma people are one of the most disadvantaged groups of people in Europe (Kühlbrandt, 2019), and largely this is a result of widespread discrimination and stigma surrounding their culture and lifestyles. With all this in mind, it makes sense that Roma people would rely on more traditional contraception, like withdrawal, than seek out medical advice.

The implications of differing contraceptive practices between Czech and Roma people are largely social. The prominent use of modern contraceptive practices by Czech people will likely lead to a continuously declining population. Conversely, the widespread use of traditional contraceptive methods by Roma people will likely lead to a continuously growing population, as these methods are less effective at preventing pregnancy. The actual difference in contraception habits is less important than how these practices are appraised by the wider community. Roma people have been “Othered” for much of their existence. Therefore, their cultural traditions of large families and lack of modern contraceptive use will be viewed as inferior to the majority culture’s practices. The racism and stereotypes that surround Roma populations will lead people, mostly in the Central and Eastern European regions, to regard traditional contraceptive practices that they use as inappropriate sexual behavior. The Roma people are minority groups living in largely homogeneous countries, like the Czech Republic, and are subject to the expectations and beliefs of these majority cultures. Their contraception use makes sense within the larger context of their culture, but they are being held to a different standard. Thus, the implication of these differences between Czech and Roma people is a world that continues to be divided by cultural variances, with contraceptive use just one of many grounds for inflicting inferiority on a group.

As the research shows, contraceptive use in Czech culture is common and modern methods are primarily used. Conversely, contraceptive use in Romani culture is less prevalent and tends towards more traditional contraceptive practices. The drastically different social and economic circumstances of these respective cultures and people are certainly behind these differences in contraception usage. It will be interesting to see how these contraceptive practices may change as the sexual and reproductive health field innovates and matters of social justice are further pursued.

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