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Family planning: what are we talking about?

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Abstract

The present study addresses the issue of family planning in the context of bioethics, considering its different perspectives. We understand that some expressions apply a broader view of the problem studied, while others reflect a fragmented view of reality, and that as a result some difficulties arise in advancing this important area of health in Brazil. We propose that the term "planning of parenting" represents a more open agenda, intrinsic to a pluralistic society, by understanding that today it has become necessary to think of children who are wanted and parents who are prepared. This involves dealing with conflicts inherent to this dual approach: the best interests of the child and the mother. We discussed the congruence of these interests based on the belief that usually the mother wants the best for her children, and that no society wants abortion in itself. Therefore, we conclude by identifying eight points that are indicative of responsible planning of parenting and which is consistent with the common interest.

Keywords: Family planning (public health). Sexuality. Bioethics.

Resumo

Planejamento familiar: do que estamos falando?

Abordamos a temática do planejamento familiar no contexto da bioética, considerando suas diversas perspectivas. Compreendemos que algumas expressões implicam uma visão mais ampla da problemática estudada, enquanto outras refletem uma concepção fragmentada da realidade, e que disso decorrem algumas dificuldades de avançar nessa importante área da saúde no Brasil. Defendemos que a expressão "planejamento da parentalidade" representa uma agenda mais aberta, própria de uma sociedade pluralista, por compreender que em nossos dias tornou-se necessário pensar filhos que nasçam desejados e pais que estejam preparados. Isso implica lidar com conflitos inerentes a esse duplo enfoque: o melhor interesse da mãe e da criança. Discutimos sobre a congruência desses interesses, por acreditar que usualmente a mãe quer o melhor para seu filho e que nenhuma sociedade deseja o aborto por si mesmo. Assim, concluímos identificando oito pontos indicativos de um planejamento da parentalidade mais responsável e condizente com o interesse mútuo.

Palavras-chave: Planejamento familiar. Sexualidade. Bioética.

Resumen

Planificación familiar: ¿de qué estamos hablando?

Abordamos el tema de la planificación familiar, en el contexto de la bioética, teniendo en cuenta sus diferentes perspectivas. Entendemos que algunas expresiones implican una visión más amplia del problema estudiado, mientras que otros reflejan una visión fragmentada de la realidad, de esto se derivan algunas dificultades para avanzar en esta importante área de la salud en Brasil. Proponemos que el término "planificación de la paternidad" representa una agenda más abierta, propia de una sociedad pluralista, para comprender que en nuestros días se hace necesario pensar en hijos que nazcan deseados y padres que estén preparados. Esto implica lidiar con los conflictos inherentes a este doble enfoque: el mayor bien de la madre y del niño. Discutimos acerca de la congruencia de estos bienes por la creencia de que, en general, la madre quiere lo mejor para su hijo y que ninguna sociedad desea el aborto en sí, por lo tanto, se concluye identificando ocho puntos indicativos de una planificación de paternidad responsable y coherente con el interés común.

Palabras-clave: Planificación familiar. Sexualidad. Bioética.

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Declaram não haver conflito de interesse.

As we advance in the study of family planning in a bioethical context [1] we notice that the theme takes on different connotations depending on the environment in which the matter is studied and the actors who explain it. For this reason we want to approach it in search of clarification of the expressions used, aiming at contributing for a better understanding of such a sensitive, complex and relevant area for our society. Without underrating the advances of the last decades in Brazil and aware that *family planning is currently the focus of the Programa de Saúde da Família (Family Health Program - PSF)*, we agree that *the limitations of its application may have important consequences for family development* [2].

The theme is brought forth in an interdisciplinary approach and may be analyzed from several perspectives: it is possible to speak about planning for marriage and family; planning to have children; plannning to become a father or mother; thinking about sexuality; planning pregnancy, or populational planning. Certainly these are all correlated themes with different emphases and nuances, but what we want to defend in this paper is that some expressions imply a broader view of the issue under study, while others reflect a fragmented conception of reality, so that difficulties arise in the advance in this health area which is so important in Brazil.

Since this work lies in the context of bioethics, it is important to point out that although there may be countless ethical conflicts related to family planning it is fundamental to consider the possibility of putting this planning into effect. This happens because however small the advancements, better family planning brings about huge benefits to the two poles of parenthood: a) avoiding the conception of unwanted children and/or allowing for the birth of the child in more prepared environments; b) promoting conditions for people to responsibly carry out their parental projects in a responsible way, with emphasis on the improvement of health conditions for women by avoiding unwanted pregnancy and/or programming pregnancy in more adequate personal, sanitary and social situations.

Planning the marriage

It may seem strange to some that we initiate the approach of the issue under study with the theme of "marriage" - a term that is more often used in the context of social sciences - or "matrimony". We start by proposing a definition: marriage is the effective and real union of two people, a social and legal contract with rules well defined by the social and cultural contexts at issue. Thus, we notice that whoever plans a marriage normally also plans, as part of it: a family, having children, becoming parents, being spouses, sexuality and reproduction. Maybe for this reason traditional societies value marriage so much, since many of the elements related to family and parenthood are integral parts of most planned marriages. To this day, when someone says they are getting married, they are usually thinking about many of these issues.

However, studies about the structures of parenthood give little attention to the theme of parenthood, children and reproduction. The focus is on marriage and its rules. Classical theses, questioned today because of their androcentric view, present marriage as an alliance and women as elements of barter with the *givers and takers of women* [3]; however, would children equally not be "absent, but present" elements as motivators of these exchanges? References to children are present when one speaks of matri- or patrilineality, but without a clear mention to their importance. It is as if children simply occurred in this process, without being planned, desired, or expected. As if their presence or absence did not at all change the whole parenting structure at issue. Or maybe the imperative of reproduction is so strong that it may not be deemed necessary to explain it well.

Sex has an important role in marriage, to the point of being one of its defining elements, according to Murdock, quoted by Vidal: *Matrimony is a set of social customs institutionalized around a sexually associated couple of aduls* [4]. However, in traditional societies and also in western societies, marriage has not erotic but economic importance [3]. This is a characteristic of societies in which the *satisfaction of economic needs lies entirely on the conjugal society and on the division of work between the sexes* [5]. Thus, the planning of the marriage includes thinking about family relationships, the establishment of alliances which weave the social fabric, the economic issues involved and the conjugality of the couple. In this context, being single is one of the worst calamities in many societies [6].

Authors who have developed the notion of family life cycle have observed that in a general way, in our society, *the passage from the first stage* [single young adults] *to the second* [the new couple] *tends to be marked by a ritual of wedlock, commonly a civil or religious wedding* [7]. In marriage, therefore, the new roles to be taken on are marked and, with them, *the beginning of a new family nucleus, the*

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passage into adulthood and the potential transition to parenthood [8].

We could say that when planning a marriage - even in homosexual relationships - there is an implicit family planning, since *the presence of the wedlock ritual for the couples means an implicit choice of the future father or mother of one's children* [9]. But without a doubt the concern panorama is quite wide at the moment of marriage, and for this reason there is a need to define a more specific terminology, or rather, to emphasize family planning per se. We therefore understand that it is not enough or possible to condition the specificities of family planning to the context of marriage planning.

On the other hand, in our societies it is possible to dissociate "getting married" from "having children". This goes both ways, since there are couples who plan not to have children and there are people who plan to have children outside of marriage. This way, what was for traditional societies a desirable and almost compulsory nexus has today become two almost independent realities, as stated by Lopes et alii: (...) *in the past couples were more aware of the imminence of parenthood, since pregnancy occurred right after marriage and the beginning of sexual life. However, nowadays, as a result of birth control, many couples have the possibility of dissociating parenthood from the beginning of sexual activity in the marriage* [8].

Marrying and having children are no longer necessarily related realities, even if they remain so in the symbolic reference of certain groups nowadays. Therefore we need to understand the role of the rituals related to matrimony and its relevance in starting a family and in the exercise of sexuality, but it is necessary to point out that planning a marriage does not compulsorily imply planning to "have children", "becoming parents", or "getting pregnant".

Planning a family

Although it is difficult to define a family due to the diversity of models found in different societies, we can understand it as a social group which performs, at least, sexual, procreative, educational and economic functions. Therefore having children, performing the procreative function, is something to be planned, which in our day and age may even be thought about in a negative way: not to have children.

As a changing human creation, a family corresponds to multiple models which vary in an accentuated gradation, and its performance may show similarities with countless societies without becoming standardized as a pattern to be followed. The draft of the model depends on each culture. Circumstances change and, with them, so do families [10]. In western societies it s noticeable that some phenomena have been changing the traditional structure of the families:

- An increase in the proportion of households made up of "non families" not only among the elderly (the widowed) but also among young adults who express the new "individualism".
- A reduction in family size;
- A weakening of matrimonial ties with the growth of separation and divorce;
- An increment in the proportion of mature couples with no children;
- A multiplication of arrangments which detach themselves from the standards of typical nuclear families, especially those made up of only one of the parents, notably families headed by women with no spouse [11].

These modifications show the diversity of the model, which does not imply that the family is an unnecessary institution or one about to become extinct in contemporary societies, insofar as *a more accurate reading* [of the institution] *reveals its plasticity and its enormous capacity for change and adaptation to the wider economic, social and cultural changes* [12]. Effectively, *the family, regardless of the configuration it may have, will continue to exist, since it is the assurance for children to the new subjects that are presented to the world, to the right to love, to a welcome to the human world and to the word* [13].

We therefore understand tha the so-called "family crisis" consists more on a crisis of certain family models, referring to the difficulty of coexistence of the advocates of the dominant models with the emerging models. And when we think about the creation of conditions for the family to promote the welfare of its members there is no doubt that the institutional model is not enough. *There is no ideal form of family organization that could guarantee the necessary conditions for the constitution of the subject* [14].

In the perspective of authors such as Santos and Freitas who work with the family life cycle, planning a family would be something more complex since it would imply thinking about the whole family cycle which, according to them, was divided

by Duval *into eight stages regarding the paths followed by the family members, such as marriage, birth and education of the children, the time when children leave home, retirement and death* [15]. So, *what should be planned?*, ask the authors. In this wider view, the focus on having children alone is not enough because planning the family is not limited to planning children.

If "family planning" is exclusively aimed at "planning children", it is not unusual that our families start having difficulties in hosting the elderly, after all they were not part of the plan. It is as if they were a real part of the family, but one that was not planned. Strictly speaking, starting and planning a family means opening oneself up to a quite wide network of relationships, of which the offspring is but one of the possibilities.

Thus, we can agree that *family planning is a method of prevention and intervention in the health of the family, and therefore must consider the family unit and not only women. The stage of the family life cycle must be evaluated, as well as its beliefs, values and traditions. Planning must be conducted in the form of a step-by-step program, with tasks to make the process active for the users* [16].

In the context of this paper, therefore, we point out that "family planning" is not the best expression to describe the complexity of the terms herein studied, since in western societies the family, even in the position of social legitimizer of sexuality, may, strictly speaking, be dissociated from "marriage", from "having children", "pregnancy" and "becoming parents". And thus, the theme expresses planning only in its negative form: "not having children", "not getting pregnant", "not becoming parents". Certainly when "family planning" is emphatic in its negative aspect it becomes close to what is understood as "birth control", with many ethical issues to be evaluated.

Planning to have children

We can say that having children is a natural human dynamics when it meets the demand for preservation and continuity of the species and of the elements that make up the family reality in the several social contexts. Therefore, when planning to have children it is inherent to think about how many, and the conditions for their adequate education and care. We may say that much of what is written and even legislated under the name of "Family planning" refers to planning on having or not having children, that is, *it remains a view focused only on women's health and on the control of the number of children* [17].

Bearing children, "being fruitful and increasing in number" remains either counsciously or uncounsciously a divine mandate in the western culture. Certainly the valorization of reproduction makes up a cultural element that is previous to the bible tradition itself and present in several other societies, since in many cultures "marrying and having children" is a point of honor, *and it is a shame to die with no posterity* [18].

In the past, if a family did not have children means were sought to solve the problem. In ancient Rome children were adopted aiming at controlling assets, or "substitute mothers" were sought when a sterile wife conceced that her husband had a child with another woman and then raised it as her own [19], a practice that was present in many cultures.

If "having children" is usually seen as desirable, it does not mean that people today, or even yesteryear, agree that having many children is desirable. The work of Angus McLaren [19] depicts the history of peoples from ancient times to the present through the effort of controlling the number of children. This is something that was only accomplished in an effective way in the second quarter of the 20th century, based on the more precise knowledge of the human reproductive process from the studies by Knaus and Ogino in 1929 [20].

Gregory Pincus found out in 1951 that progesterone inhibits ovulation and started the research for the production of synthetic female hormones. John Rock was the first to experiment the new drugs on women in the same decade. In 1960 the Food and Drug Administration (FDA) approved a synthetic anovulatory, the so-called "contraceptive pill". This way the descovery of the pill, along with the development of several other contraceptive methods, now with proven, although not absolute efficacy, marked a unique possibility in the history of families: planning to have children. Adherence to the new methods was immediate, as indicated by McLaren: *In the early 1980s, about 90% of the couples in most western countries used contraceptives. An international user survey revealed that 33% of them had been sterilized, 20% used oral contraceptives, about 15% used IUDs and about 10% used condoms* [21].

On the other hand, planning to "have children" has also suffered the impact of the new reproductive technologies. Assisted human reproduction has developed quickly and progressively,

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with growing innovative proposals since the late 1970s. Therefore, in our societies, not only have the contraceptive possibilities but also the new reproductive technologies impacted the planning of "having or not having children", with multiple alternatives associated or not to the other aspects of family planning discussed herein.

Usually, having children implies starting a family, even if it is a single parent family. However, even so, there is the possibility of someone having a child and giving them up for adoption, or bearing a child for a third party, as in the case of surrogate pregnancy. Normally, "having a child" would also imply sexual act, pregnancy and "becoming parents", but these realities are no longer necessarily associated because, in the realm of assisted reproduction, for example, "having children" may be dissociated both from the sexual act and pregnancy.

The ethical consideration on having children considers the legitimate autonomy of the people who make the decision, but it certainly cannot cease to raise the question regarding the interest of the children to be born. This brings the issue under study to the following question: parenthood.

Planning to be a father and mother

As we have seen, "having children" means, most of the times, being a mother or a father, but more and more it is understood that this is not an automatic process. Commenting on Lacan's perspective, Teperman states that *the birth of a child does not automatically determine the start of parental functions, as these require a delicate process of symbolic rearrangement* [22]. For this reason we propose that "being a father and being a mother" - by natural reproductions, assisted reproduction or adoption - means putting oneself in a condition of generating and sharing alterity. Parts of this condition are: establishing a definitive and irrevocable relationship with the child; being the founding element in the construction of the identity of the child; taking on care and provision functions related to the integrity and survival of the child; performing roles regarding the social and cultural insertion of the child.

Becoming a father and mother, taking on parenthood, means creating an irrevocable love relationship with the children, in a generous attitude and not competing with them. *It is expected that parents/caretakers facilitate the development of their descendants on the physical, psychological and social levels. The set of necessary tasks for this effect has been given the name of parenthood* [23].

The meaning of parenthood or its way to perform the roles regarding the social and cultural insertion of the child certainly depends on historical and cultural factors, but it also suffers the impact of scientific discourse and practices [24]. However, some authors defend that *the structural dimensions and tasks that come out of the parent-child relationship tend to remain similar* [25]. This is because although the way of taking on parenthood may be culturally distint, the fathers/mothers-sons/daughters relationships will always be at stake.

In our day and age this diversity must contemplate new ways of experiencing parenthood, such as homosexual parenthood, for example. This means that there are new parental structures in course. *Although we may find reactions, breaks, inequalities in rhythm here and there, this is probably an irreversible process. We may position ourselves for or against it. However, the future of our children will depend on the positions that will be adopted* [26].

Here we see an aspect which we consider as central: the need for "parenthood planning" implies putting emphasis on the welfare of the offspring. And so "planning to have children" is not enough: it is necessary to plan for "being a father/mother". By thinking about the welfare of the children we can find the motivation to overcome discrimination in face of the different modes of parenthood. Amazonas and Braga are thinking of the children when they state that: *This is exactly the reason why we must include them as* "one of us" (humans)*, abolishing discrimination regarding the "minimal differences", recognizing that they do exist, accepting them as they are and giving them the same rights* [27].

We therefore understand that "parenthood planning" better expresses the complex nature of the issues discussed herein, since planning parenthood includes "family", with its different configurations, and also includes "having children" and "planning for pregnancy", except in cases when parenthood happens by adoption or by heterologous assisted reproduction. The importance of embracing this perspective lies on the emphasis given to the welfare of the children. Evidently, parenthood planning also includes people's autonomy, since it arises from the personal options of all involved.

In this respect it is necessary to observe that "planning a non parenthood", or the legitimate option for not having children, does not include the ethical issues implied in "not planning a parenthood",

which means having children without a clear decision of wanting to become parents and without preparing to receive them.

Planning for pregnancy

Planning for pregnancy makes planning for maternity effectively different from planning for paternity. It is the moment when a woman takes on the central role, since pregnancy is evidently an integral human condition which only women can go through at its fullest. And, as with all human conditions, it is rich in possibilities, from being in a priviledged position of generating and sharing life - when this is part of the woman's free and personal life project, one that can be enriched and shared in harmony with others - up to situations of extreme torture when pregnancy is imposed violently and with no consent.

Therefore, planning for pregnancy is the most concrete and sensitive part of the many elements which make up the family planning agenda. In the realm of health pregnancy has always evoked special interest because although it usually elapses as a healthy stage in the life of a woman it is, without a doubt, a time for more risks and problems. This perception of the risks present during pregnancy is ancient, as can be seen in MacLaren quoting a statement by Sorano, a greek physician who worked in Rome: *Both menstruation and pregnancy are useful for the perpetuation of the human species, however they are certainly not healthy for the mother* [28]. For this reason, it is indispensable that a parenthood project also takes into account the issue of the risks related to maternity.

When it comes to planning, maybe we can say that there are explicitly planned pregnancies and those in which the planning is implicit, that is, when it is the result of a healthy and stable relationship and characterized by the joy of its announcement. But the issues of planning become dramatic when the number of unplanned pregnancies is considered. It is interesting to notice that "unwanted pregnancy" opens up a wide array of possibilities and situations. Considering the psychic health of women, it is relevant to contemplate if this unwanted pregnancy is a result of: a) a consensual and pleasant relationship; b) an institutionalized but not pleasant relationship; c) sexual violence.

From the point of view of the physical health of women there are certainly other elements at play when the absence of planning, usually followed by the absence of mother-infant care, turns pregnancy into a great maternal mortality factor, defined by Marston and Cleland as *the death of a woman during pregnancy or up to 42 days after the end of pregnancy* [29]. Risks during pregnancy must be duly evaluated, for many of them may be present even when pregnancy is the result of a healthy relationship. *It is a given that mother and child health are adversely affected when pregnancies are too early, too late, too numerous and too close from one another* [29].

In Brazil authors such as Citeli, quoted by Moreira and Araújo, deem that *the failure of public policies for reproductive health in general, and for contraception in particular,* (...) *cannot be overshadowed because Brazilian women still have to deal with reproduction in a scenario characterized* (...) *by the irregular use, with no adequate assistance, of oral contraceptives, by the exaggerated resource to sterilization and clandestine abortion, by the low availability of contraceptive methods at the public services, in addition to the maternal mortality rates* [30].

Statistical data are complex but show that the maternal mortality incidence varies according to the regions of the world: larger in Africa than in Latin America, and much lower in Europe, for example. This way, a pregnancy in Africa has 35 times more probability of killing a woman than if it happened in Europe. The fact that maternal mortality in rich countries is so low indicates that most maternal deaths in poor countries could be avoided, not only with the increase in wealth but mainly with the improvement of prenatal, natal and postnatal services [29].

From the point of view of bioethics, it is understood that the planning of a pregnancy, although dissociated from other elements which make up the issue of parenthood planning, must be valued because if a planned pregnancy may not incorporate all necessary elements for the accomodation of a child, then what of unplanned pregnancies which present a higher risk potential for the lives of children and mothers. Adequate pregnancy planning may lead those involved to several positions which must be respected: seeking a natural pregnancy; using legitimately constructed reproductive technologies; postponing pregnancy; not getting pregnant.

Planning for sexuality and reproduction

The approach of the family planning issue also refers to sexuality. The relationship between

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sexuality and reproduction has been widely discussed in recent years, and we agree in this debate that this relationship must be revisited and evaluated. Therefore, we propose some questions about such a delicate subject: would approaching the issue of human reproduction apart from sexuality not mean setting aside one of the main points for its due evaluation? Need we insist in the connection between sexuality and reproduction at all times?

The procreating force is, by the way, proper of sexuality, and families deal with this reality attentively on a daily basis. Even assisted reproduction - which allows for procreation without the sexual act - is a health service which deals predominantly with cases of impossibility of natural reproduction by means of sexual relationships. This way, it is necessary to relate reproduction and sexuality, even if in our day and age sexuality may often be totally dissociated from reproduction, which also implies planning. *It is true that non reproduction lies in the horizon of the reproductive possibilities of individuals and couples. However, if a child must be an option, its absence must also be an option* [31].

Planning is an exercise of human rationality, of bringing several elements to the foreground of analysis, evaluating each of them and making a decision based on certain assumptions. Hence, an intriguing question may be posed: can humans in fact "plan" their own reproduction? That is a relevant question, given the connection between reproduction and sexuality. Can we "fully" plan sexuality? We may here be approaching the most complex and most frail aspect of this wide edifice called "family planning".

Sexuality may be understood as the most radical expression and manifestation of someone's identity: a revealing dynamism of one's own intimacy and, simultaneously, the search for the other. If experienced in a healthy conjugality, it is at the same time a possession of the other and a deliverance of oneself. In the western literature it is presented as Eros and Agape, as the search for one's own happiness and the happiness of the partner.

The planning of sexuality, as difficult as it may be, may and must be proposed. For this reason we may think of an ethics of sexuality or of minimal aspects for a healthy sexuality in the context of family planning: the consent of the partner and the issues related to parenthood. Evidently, sexuality is unhealthy if the sexual act is imposed on one of the partners, and becomes irresponsible if performed without due attention to its procreative force. *From the ethical point of view, sexual freedom is founded on the principle of autonomy, or in other words, on the right to freely choose an option without paternalistic or authoritarian pressure and with the limitation that the chosen option does not affect third parties* [32].

Reproductive rights refer, in sum, to the right to decide in a free and responsible way on the number, the spacing and the opportunity to have children, as well as the right to access to information and to the means for making that decision. Sexual rights, on the other hand, have to do with the right to exercise sexuality and reproduction free from discrimination, coercion or violence. Certainly it is up to people to decide on having children or not: however, from the ethical point of view, the right to have children also has to do with the reflection on the search for the best interest of the child, since the child is one of the constituent elements of the parenthood project.

Desirable parenthood planning encompasses several aspects, but we cannot belittle sexuality since its force involves the globality of the person. Therefore this theme requires specific attention of those who work in the family planning area, given that the lack of extensive social education is responsible for countless adverse situations in this area. Sexual education, in the context of family planning, may allow for the adequate means for those who do not want to have children but wish to maintain an active sexual life.

Planning the population of a region

There is a well known quote by a philosopher that says that human beings are, by *nature, a political animal* [33]. Therefore, even if we argue that there are good reasons for the preservation of freedom in the creative realm, ensuring to parents a wide discretion to determine how to act on behalf of the best interest of their children, *we must recognize that the way how a child is brought into this world is always an issue of social interest* [34]. This way, it is also up to governments to think about public policies for this sector. In the political sphere, however, it is necessary to pay attention to the distinction between family planning policies and birth control policies.

The Ministry of Health, in its manual called "Assistance for family planning", published in 2002, defines important elements for the execution of these policies: *The performance of health professionals in regard to Family Planning must conform to Article 266, paragraph 7, of the Brazilian*

Constitution, therefore the principle of responsible paternity and the right to a free choice by individuals/couples [31]. In fact the manual takes into account the decison by individuals and/or couples when it equally introduces the different "contraceptive methods", adding that *the services must guarantee access to the means for avoiding or allowing for pregnancy, the gynecological clinical follow up and educational actions so that the choices are made counsciously* [35].

However, this proposal cannot be undermined by a practice that emphasizes contraception, *allowing for the development of a controlling stance in which women perform the role of the object rather than the subject of their sexual and reproductive story* [36]. When this occurs, we cease to speak of the legitimate action of the State in the area of family planning and we move on to the questionable position of the public administration promoting "birth control". We can say that in Brazil public policies do not have "birth control" as a goal, and what in fact occurs is inneficient "family planning", as stated by researchers in the area: *Our results have confirmed that the attention to family planning in Brazil remains marked by the lack of availability of contraceptive methods at the public health services and by the unequal training of the professionals for acting in this area* [37].

For other authors *the focus of family planning has started contemplating elements of women's health, but the main focus is still on birth control* [2]. As we have said, the emphasis on birth control may warp the whole family planning effort. We deem that such deviations could be corrected if the issue were geared towards the planning of a parenthood which fosters responsible parenthood.

Final Considerations

The themes discussed herein are all related, and the use of one or another expression represents an emphasis to which attention is to be given.

There are religious groups which would put forth the issue in the realm of matrimony, which as we have seen contemplates a good part of the matters involved in family planning. However, many authors [38-40] have declared that the structure of traditional marriage brings about patriarchal biases in which the exercise of sexuality, given its institutionalization, is not always really free. In addition, there is no guarantee that the children born out of the matrimony will be effectively welcomed.

On the other hand, international agencies as well as the public policies for the sector in Brazil have proposed the theme of family planning as a matter clearly regarding reproductive rights, the freedom of reproductive choice, with emphasis on contraceptive methods and on the care with women's health, which are elements we consider indispensable. However, this perspective is almost silent in respect to "the best interest of the child".

Also noteworthy is the difference between birth control and parenthood planning: the former intends to reduce the number of births by means which are not consensual even in a secular society; the latter intends to create better conditions for the birth of children and, responsibly, avoid bearing unplanned children.

We understand that the expression "parenthood planning" may bring about an open agenda that is characteristic of a pluralistic society but with emphases which have become necessary nowadays: children that are desired and parents that are prepared. This requires dealing with the conflicts which are inherent to this double view: the best interest of the mother and of the child. We believe in the possibility of this double view since we understand that the mother usually wants the best for her child, and when this does not occur it is because she was led to a situation of exploitation and vulnerability in which often times the pregnancy itself was imposed on her by countless types of violence.

To conclude, we deem that responsible parenthood planning depends on the following conditions: 1) the pregnancy is carefully planned; 2) the awareness that the birth of a child implies starting a family; 3) an adequate evaluation of the risk issues related to maternity; 4) the decision of having children is shared if there are partners in the project; 5) an evaluation of the economic conditions to care for the children; 6) caring for the children is a previous concern; 7) children are conceived without violence; the announcement of a pregnancy happens in a happy atmosphere. All these factors demand the responsible exercise of sexuality, since the emphasis of the ethical judgment in our society is not geared towards those who do not want to have children, but to those who bear children without being preared to become parents.

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