

## To submit to Session 301 Emerging Patterns and Determinants of Contraceptive Use

Extended abstract (2-4 pages, including tables) to upload

ABSTRACT TITLE: Recent trends in contraceptive use and method mix in Africa and implications for the future

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Short (144 of 150 word limit); abstract to be entered online

This paper describes trends in Africa in contraceptive prevalence, unmet need for family planning and the mix of contraceptive methods used among married or in-union women over the past 20 years and examines projections to 2030. Estimates and projections are based on a new family planning data set of 1,059 household-based survey observations for married or in-union women of reproductive age between 1950 and 2014 from 195 countries or areas. Results show that contraceptive prevalence in Africa increased rapidly among married or in-union women from 21 per cent in 1994 to 33 per cent in 2015. Modern methods accounted for the majority of contraceptive methods used, especially injectables and pills. Yet most countries in Africa are projected to have less than 60 percent of demand met by modern contraceptives by 2030 as larger cohorts of women will continue to enter the reproductive ages.

Extended abstract

### **Introduction**

The landmark Programme of Action of the International Conference on Population and Development (ICPD) in 1994 recommended that all countries seek to provide universal access to a full range of safe and reliable family-planning methods by the year 2015 (United Nations, 1994: paragraph 7.16). The Key Actions for the Further Implementation of the Programme of Action of the ICPD in 1999 set aspirational benchmarks to reduce the gap between childbearing desires and contraceptive use. Governments further committed themselves to achieve, by 2015, universal access to reproductive health as part of Millennium Development Goal (MDG) 5 to improve maternal health. Two family planning indicators—contraceptive prevalence and unmet need for family planning—were monitored annually to assess progress towards this MDG target. With the expiration of the MDGs and the formation of a new development agenda in 2015, it is timely to assess the degree to which these internationally-agreed commitments to family planning have been realized for countries in Africa.

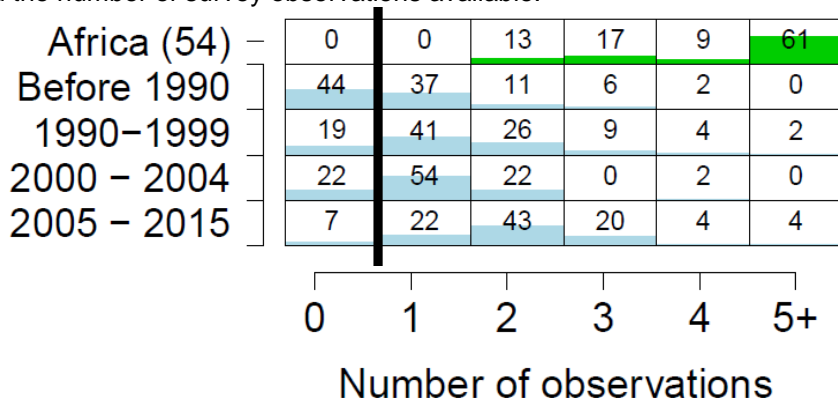
We describe the extent to which people have been able to exercise their basic right to plan their families, how much this has improved over the past 20 years and what the pace of change implies for future trends in Africa. We focus on trends in contraceptive prevalence, unmet need for family planning and the mix of contraceptive methods used among married or in-union women over the past 20 years. We also examine projections to 2030 and how probable is it for individual countries to reach benchmarks that have been set at the national or international level.

### **Data and methods**

Data are from a newly-released global data set of 1,059 household-based survey observations of contraceptive prevalence for married or in-union women of reproductive age between 1950 and 2014 from 195 countries or areas (United Nations, 2015a). We used a Bayesian hierarchical model to generate the estimates and projections of family planning indicators, taking into account existing survey data, differences by data source, sample population, and contraceptive methods included in measures of use. Detailed methodological information is available elsewhere (Alkema, et al., 2013). Given sparse data over time for many countries (e.g., 20 per cent of countries with data had just one data point from 1990 to 2014), the model-based approach enables annual estimates for all countries and regions for standardized comparisons across time (United Nations, 2015b). Among African countries the availability of data on

contraceptive use has increased – while in the 1990s, 20 per cent of countries had no information on contraceptive prevalence, in the past decade only 7 per cent had no information on contraceptive use and more than 70 per cent had 2 or more survey observations (Figure 1, United Nations, 2015a).

Figure 1: Percentage of countries among 54 countries in Africa with data on contraceptive use by period and the number of survey observations available.



Source: United Nations, 2015a

To produce estimates of prevalence of specific methods, we applied survey-based observations on the distribution of contraceptive users by method for two time points, 1994 and 2015, to the model-based estimates of contraceptive prevalence for those two reference years.

### Preliminary results

Contraceptive prevalence in Africa increased rapidly among married or in-union women from 21 per cent in 1994, when the ICPD Programme of Action was adopted, to 33 per cent in 2015. Modern methods accounted for the majority of contraceptive methods used in Africa (29 per cent prevalence in 2015, or 88 per cent of all use among married or in-union women). Injectables (10 per cent prevalence) and pills (9 per cent prevalence) were the most common methods used in 2015. Methods that required male participation or cooperation (condom, male sterilization, rhythm or withdrawal) were used by just 6 per cent of married or in-union women.

Despite trends of increasing contraceptive prevalence, in 2015 an estimated 38 million married or in-union women in Africa had an unmet need for family planning (i.e., they wanted to delay or stop childbearing but were not using any method of contraception). More than one in five married or in-union women had an unmet need for family planning in Eastern Africa, Middle Africa and Western Africa. Unmet need in 2015 was lower in Northern Africa (15 per cent) and Southern Africa (13 per cent). Most countries in sub-Saharan Africa have experienced small reductions in unmet need for family planning (15 per cent or less of a decline from 1994 levels).

As larger cohorts of women will continue to enter the reproductive ages and desired family size and total fertility will decline, future growth in the total demand for family planning (contraceptive prevalence plus unmet need for family planning) is projected to continue among countries in Africa. By 2030, the number of married or in-union women with demand for family planning is projected to increase by more than half – from 95 million in 2015 to 143 million in 2030. Despite the increased use of modern contraceptives, most countries in Africa are projected to have less than 60 percent of demand met by modern contraceptives by 2030 (exceptions are countries in Northern Africa and Southern Africa).

### Conclusion

This study provides a concise assessment of major family planning trends in Africa, including contraceptive prevalence, unmet need for family planning and method mix among married or in-union women of reproductive age. The historically-grounded and country- and region-specific projections to

2030 -- the time period for the new international development agenda highlight where significant family planning investments will still be needed in the region.

### **References**

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