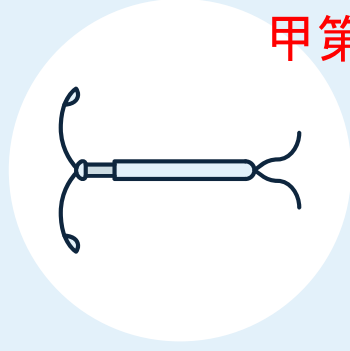
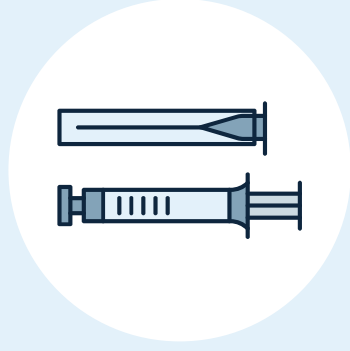
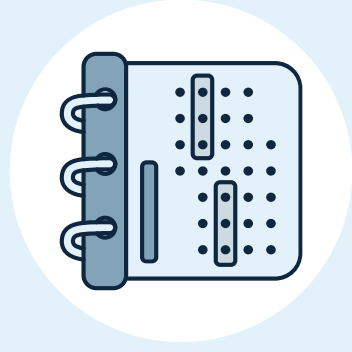
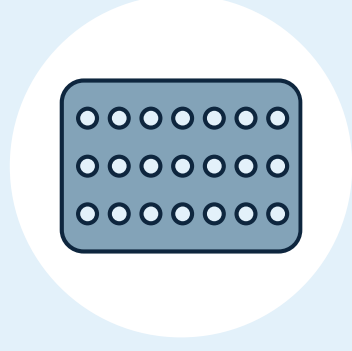


# Contraceptive Use by Method 2019

Data Booklet



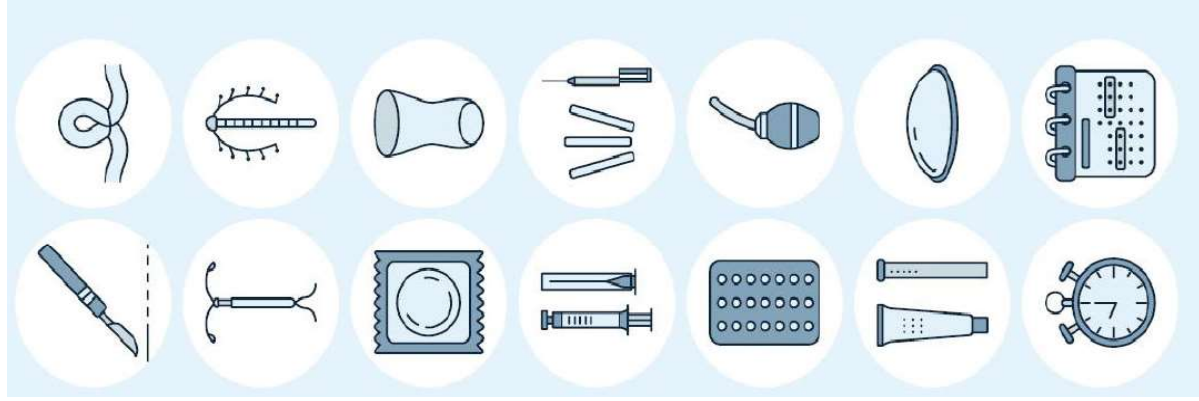
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# Introduction



The Programme of Action of the International Conference on Population and Development (ICPD) includes a clear commitment to ensure that women and men have access to the widest possible range of safe and effective family planning methods in order to enable them to exercise free and informed choice, while recognizing that appropriate methods for couples and individuals vary according to their age, parity, family-size preference and other factors (United Nations, 1995, para 7.23). In the Sustainable Development Goals (SDGs), target 3.7 calls on countries “by 2030, to ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes”. The assessment of progress towards this target requires monitoring of key family planning indicators, including the range and types of contraceptive methods used.

Some contraceptive methods such as male condom, withdrawal and rhythm methods have been used for millennia while methods such as the pill and intrauterine device (IUD) started to be used in the 1960s. Some decades later, the vaginal ring, emergency contraception, subcutaneous injections or implants became available. Different pregnancy prevention needs, for either stopping childbearing altogether or delaying pregnancy, should be met with appropriate and effective methods. Family planning needs also evolve over the life-course, depending on personal circumstances and changing childbearing preferences (on the number of children and the timing and spacing of births). At the population level, contraceptive prevalence and method mix will change with changes in childbearing desires, fertility trends, marriage and union formation patterns and the age structure of women of reproductive age. All available contraceptive methods have both strengths and weaknesses. Women who are only sometimes sexually active and who want to delay pregnancy for a few months or a couple of years, may prefer a short-acting method, one that they can start and stop on their own, over an IUD or an implant, both of which usually require a visit to a service provider to obtain and remove the device, or a permanent method such as sterilisation. The experience, or awareness, of side effects and inconveniences of using specific contraceptive methods as well as their effectiveness at preventing pregnancy play a role in the choice of the method used. However, the range of choices available to women and their partners depends on the local availability and accessibility of different methods.

The prevalence of specific contraceptive methods varies widely across the world. Method mix has shifted over time due to changes in related policies, changes in health-care system, development of new technologies, and changes in access to the various methods. Governments at all levels have played a strong and visible role in promoting and legitimizing the provision and use of family planning and reproductive health-care services and the use of specific methods.

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Contraceptive Use by Method 2019

# Worldwide, 922 million women of reproductive age (or their partners) are contraceptive users

Among the 1.9 billion women of reproductive age (15–49 years) living in the world in 2019, 1.1 billion have a need for family planning, that is, they are either current users of contraceptives—842 million use modern methods of contraception and 80 million use traditional methods—or have an unmet need for family planning—190 million women want to avoid pregnancy and do not use any contraceptive method.<sup>1</sup> The proportion of women who have their need for family planning satisfied by modern methods (Sustainable Development Goals indicator 3.7.1) is 76 per cent in 2019.<sup>2</sup>

<sup>1</sup> Women who want to avoid pregnancy and do not use any contraceptive method are considered to have an unmet need for family planning, which is defined as the number of women that want to stop or delay childbearing but are not using any method of contraception to prevent pregnancy, including also pregnant women whose pregnancies were unwanted or mistimed at the time of conception, and postpartum amenorrhoeic women who are not using family planning and whose last birth was unwanted or mistimed.

<sup>2</sup> The indicator is defined as the number of women who are currently using, or whose sexual partner is currently using, at least one modern contraceptive method as a proportion of the number of women of reproductive age who are either using any method of contraception or having an unmet need for family planning.

**Figure 1. Estimated numbers of women of reproductive age (15–49 years) using modern and traditional contraceptive methods, having an unmet need for family planning and no need for family planning, worldwide, 2019**

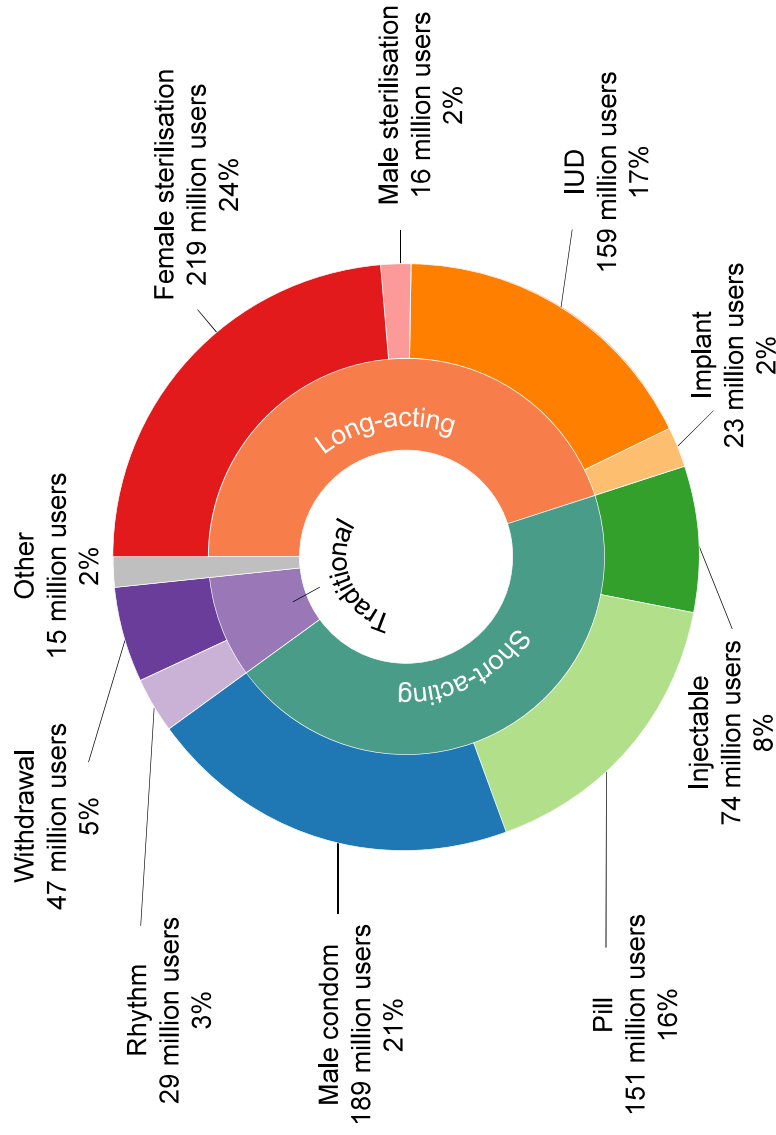
Category	Number (million)	Percentage
Modern methods	842	44%
Traditional methods	80	4%
Unmet Need	190	10%
No Need	790	42%

Data source: Estimates and Projections of Family Planning Indicators 2019.

# Female sterilisation and male condom are the two most common methods used worldwide

Female sterilisation is the most common contraceptive method used worldwide. In 2019, 23.7 per cent of women who are currently using contraception—that is 219 million women—rely on female sterilisation. Three other methods have more than 100 million users worldwide, male condom (189 million), IUD (159 million) and the pill (151 million). Overall, 45.2 per cent of contraceptive users rely on permanent or long-acting methods (female and male sterilisation, IUD, implant), 46.1 per cent on a short-acting method (such as male condom, the pill, injectable and other modern methods) and 8.7 per cent on traditional methods (withdrawal, rhythm methods and other traditional methods).

Figure 2. Estimated numbers of women of reproductive age (15–49 years) using various contraceptive methods, worldwide, 2019



Data source: Calculations are based on the data compilation *World Contraceptive Use 2019*, additional tabulations derived from microdata sets and survey reports and estimates of contraceptive prevalence for 2019 from *Estimates and Projections of Family Planning Indicators 2019*, Population-weighted aggregates.

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Contraceptive Use by Method 2019

## Contraceptive methods most commonly used vary widely by region

In Eastern and South-Eastern Asia, IUD is the most common contraceptive method used (18.6 per cent of women rely on this method), followed closely by male condom (17.0 per cent). In Europe and Northern America, the pill and male condom are the most commonly used methods (17.8 and 14.6 per cent of women, respectively), while in Latin America and the Caribbean it is female sterilisation and the pill (16.0 and 14.9 per cent, respectively). In Oceania, the dominant method is the pill (16.9 per cent) and in Central and Southern Asia it is female sterilisation (21.8 per cent of women rely on this method). In Northern Africa and Western Asia, the two most common methods are the pill (10.5 per cent) and IUD (9.5 per cent). Sub-Saharan Africa is the only region in which injectables are the dominant method with a prevalence of 9.6 per cent among women of reproductive age.

**Figure 3. Contraceptive prevalence by method among women of reproductive age (15–49 years), by region, 2019**

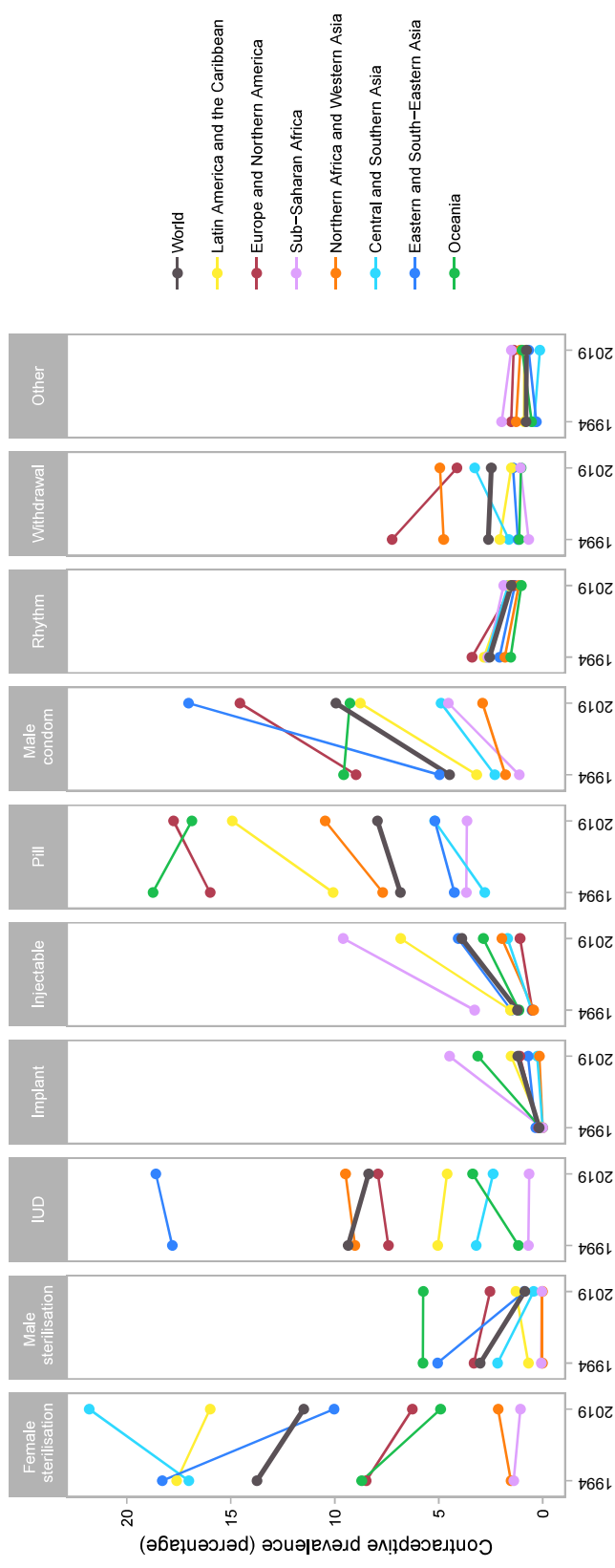
Region	Female sterilisation	Male sterilisation	IUD	Implant	Injectable	Pill	Male condom	Rhythm	Withdrawal	Other
Eastern and South-Eastern Asia	18.6	17.0	18.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Europe and Northern America	0.0	0.0	0.0	0.0	0.0	17.8	14.6	0.0	0.0	0.0
Latin America and the Caribbean	16.0	14.9	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Oceania	0.0	0.0	0.0	0.0	16.9	0.0	0.0	0.0	0.0	0.0
Central and Southern Asia	21.8	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Northern Africa and Western Asia	0.0	0.0	9.5	0.0	0.0	10.5	0.0	0.0	0.0	0.0
Sub-Saharan Africa	0.0	0.0	0.0	0.0	9.6	0.0	0.0	0.0	0.0	0.0

Data source: Calculations are based on the data compilation *World Contraceptive Use 2019*, additional tabulations derived from microdata sets and survey reports and estimates of contraceptive prevalence for 2019 from *Estimates and Projections of Family Planning Indicators 2019*, Population-weighted aggregates.

# The prevalence of sterilisation, IUD and traditional methods has declined worldwide since 1994

The prevalence of particular methods has changed slowly at the global and regional levels. The prevalence of female sterilisation worldwide has declined from 13.7 per cent in 1994 to 11.5 per cent in 2019. Central and Southern Asia is the only region where the prevalence of female sterilisation has increased from 17.0 per cent in 1994 to 21.8 per cent in 2019. The prevalence of male sterilisation worldwide has declined from 3.0 to 0.8 per cent during that same period. Globally, as well as in most regions, the prevalence of the pill, IUD, rhythm methods and withdrawal has remained relatively stable over the past 25 years. The prevalence of male condoms has more than doubled worldwide from 4.5 per cent in 1994 to 10.0 per cent in 2019, with the largest increase in Eastern and South-Eastern Asia from 5.0 to 17.0 per cent. As contraceptive use has taken off in sub-Saharan African countries, the prevalence of implants, injectables and male condoms has increased. In Latin America and the Caribbean, the continued increase in contraceptive prevalence is due to the rapid increase in the use of injectables, the pill and male condoms. The prevalence of rhythm methods and withdrawal has been declining since 1994 with the sharpest declines in Europe and Northern America.

Figure 4. Trends in contraceptive prevalence by method among women of reproductive age (15–49 years), by region, 1994 and 2019



Data source: Calculations are based on the data compilation *World Contraceptive Use 2019*, additional tabulations derived from microdata sets and survey reports and estimates of contraceptive prevalence for 2019 from *Estimates and Projections of Family Planning Indicators 2019*. Population-weighted aggregates.

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Contraceptive Use by Method 2019

## Numbers of users of all methods (apart from male sterilisation and rhythm) have increased

Even though the prevalence of some methods, such as female sterilisation and IUD, have decreased on a global level since 1994, the overall number of women using these methods has grown due to population growth. The number of women relying on female sterilisation has increased between 1994 and 2019 from 195 million to 219 million and the number of women relying on IUD has risen from 133 million to 159 million. Only two methods have seen declines in the number of users over the same period—male sterilisation from 43 million to 16 million users and rhythm methods from 36 million to 29 million. The largest increases have been recorded in the numbers of women relying on male condoms (from 64 million to 189 million) or on injectables (from 17 million to 74 million). It is important that population growth amongst women of reproductive age is taken into account in order to adequately plan for the provision of family planning services, including contraceptive methods.

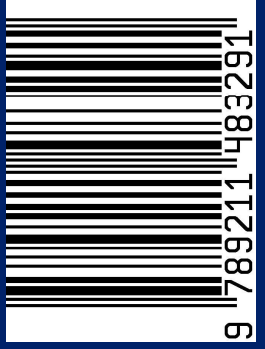
**Figure 5. Estimated numbers of women of reproductive age (15–49 years) using various contraceptive methods, 1994 and 2019**

Contraceptive Method	1994 (millions)	2019 (millions)
Female sterilisation	195m	219m
Male sterilisation	43m	16m
IUD	133m	159m
Implant	2m	23m
Injectable	17m	74m
Pill	97m	151m
Male condom	64m	189m
Rhythm	36m	29m
Withdrawal	37m	47m
Other	11m	15m

Data source: Calculations are based on the data compilation *World Contraceptive Use 2019*, additional tabulations derived from microdata sets and survey reports and estimates of contraceptive prevalence for 2019 from *Estimates and Projections of Family Planning Indicators 2019*. Population-weighted aggregates.



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