

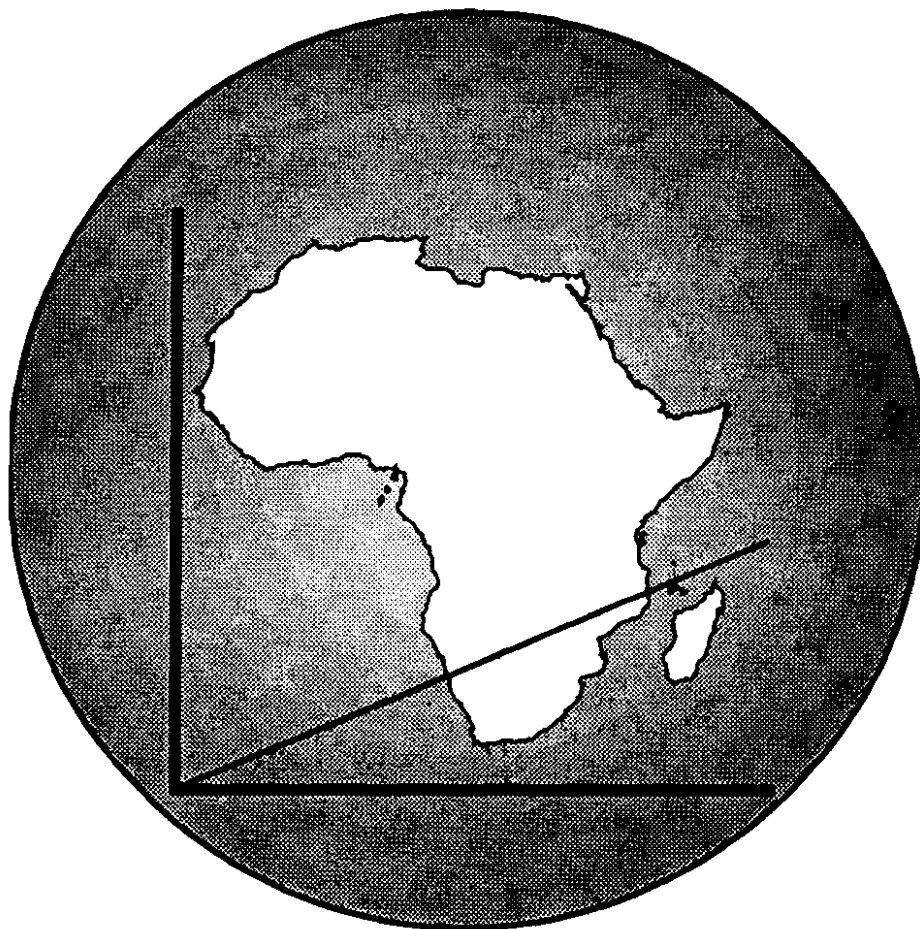
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United Nations  
Economic Commission  
for Africa

ECA/POP/TP/95/3(b)/1

# STATISTICAL COMPENDIUM ON CONTRACEPTIVE PREVALENCE AND PRACTICE IN ECA MEMBER STATES



Addis Ababa  
November 1995



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## **PREFACE**

Since the acceptance of family planning by African governments in 1984 as reflected in the Kilimanjaro Programme of Action (KPA) for African Population and Self-Reliant Development in 1984, the Economic Commission has continued to prepare publications related to family planning programmes for use by member states. The Dakar/Ngor Declaration on Population, Family and Sustainable Development in 1992 has reinforced the need to prepare studies related to family planning programmes.

Some of the studies and publications prepared since 1984 include the following: the Demographic, Health and Social Impact of Family Planning in Selected African Countries, ECA/PD/1985, March 1985 (this was later revised and published under the title of Some Aspects of Family Planning Programmes and Fertility in Selected Member States, E/ECA/SER/A7; Report on integrated Maternal and Child Health and Family Planning Programmes in Africa, 1987; Social, Cultural and Legislative Factors Affecting Family Formation and Fertility in Selected African Countries, 1988; The Impact of Maternal and Child Health and Family Planning (MCH/FP) Programmes on Fertility, Infant and Childhood Mortality and Maternal Health, 1989; Statistical Compendium on Contraceptive Prevalence and Practice in African Countries, 1990; Guidelines on Improving Delivery and Evaluation of Population and Family Planning Programmes in African Countries, 1991; Strategies to Improve Contraceptive Use to Influence Demographic Trends in African Countries, 1992; Alternatives to Traditional Approaches in the Formulation and Implementation of Family Planning Programmes in African Countries, 1993; Comparative Study on Family Planning and Birth Spacing Programmes in ECA Member States, 1993; and Family Planning Targets in Relation to Fertility Reduction and Reproductive Health Care in ECA Member States, 1994.

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The present publication presents statistical data on contraceptive knowledge and use as an update on the 1990 edition of the Statistical Compendium on Contraceptive Prevalence and Practice in African Countries. This update has been made possible due to an increased number of countries which have conducted surveys and collected relevant data since 1990. Other countries have conducted similar surveys that collected data on family planning. However, the results were not available yet for inclusion in this publication. It is important to bear in mind that the data presented in this publication reflect the situation as at the time of the survey in each country. Thus, in most countries, the actual situation on contraceptive prevalence has since changed. It is hoped that further changes will be reflected in the next edition of the compendium.

The Economic Commission for Africa is grateful to (a) all African governments whose country survey reports provided the data used in this report; (b) institutions and organizations and governments which assisted African governments to conduct surveys to collect data on family planning; and (c) the co-operation and assistance of the Demographic and Health Surveys (DHS) Programme of the Institute for Resource Development/Macro Systems for making available country survey reports.

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## EXECUTIVE SUMMARY

It will be recalled that most African countries consider their population growth, fertility, infant and child and maternal mortality rates as very high. This was reflected in both the Kilimanjaro Programme of Action (KPA) for African Population and Self-Reliant Development in 1984 and the Dakar/Ngor Declaration on Population, Family and Sustainable Development in 1992. Both the KPA and Dakar/Ngor Declaration have called for the need to reduce population growth, fertility, infant, child and maternal mortality rates so that population growth rates are compatible with desired socio-economic and development goals. The United Nations Programme of Action adopted at the International Conference on Population and Development in 1994 expressed similar concerns.

The Dakar/Ngor Declaration has set up specific regional targets to be achieved on population growth, infant and child and maternal mortality rates and on contraceptive use. This compendium presents statistical data on contraceptive use and practice for those African countries with relevant data. This data will be useful in monitoring and evaluating efforts by African countries in implementing their family planning and reproductive health programmes towards achievement of targets set in the Dakar/Ngor Declaration. This is the second edition of the compendium, the first edition was compiled in 1990 and it was well received by end users.

The statistics presented in this publication clearly indicate policy implications that need special attention by all concerned with the improvements in contraceptive use and reproductive health. Some of these are highlighted below.

There seem to be wide knowledge of contraceptive methods among women and men. In some countries with relevant data, it appears that men know more about contraceptive methods than women.

Knowledge of the pill, IUD, injection, condom and female sterilization is generally highest in the following countries: Algeria, Botswana, Egypt, Kenya, Mauritius, Morocco, Rwanda, Tunisia and Zimbabwe. Knowledge of modern contraceptive methods is lowest in countries like Burundi, Ethiopia, Guinea, Mali, Niger and Nigeria. In about two-thirds of the countries with relevant data, 50 percent to over 90 percent of married women indicated that they knew of a source of modern contraceptive method.

Knowledge of contraceptive methods increases with age of a woman and peaks at age group 25-29 years. Knowledge is higher in urban than in rural areas. However, where family planning programmes are strong, the differentials in knowledge between urban and rural areas are minimal. Contraceptive knowledge increases with the level of education in general.

Married women who reported having ever used a modern method of contraception in their life ranged from 50 percent to 69 percent in six countries and from 2 percent to 43 percent in nineteen countries. However, with regard to actual use of contraception at the time of the survey, in sixteen countries, 15 percent to 75 percent of married women were using contraception while in thirteen countries, 2 percent to 13 percent of married women reported using contraception.

The pill is the most widely used modern method in most countries except in Egypt and Tunisia where the IUD is used by more married women than the pill. The countries which have a wider modern method mix are Botswana, Kenya, Mauritius, Morocco, Namibia, South Africa and Tunisia. Female sterilization is used by 3 percent to 12 percent of the married women in Tunisia, South Africa, Mauritius, Kenya, Botswana and Morocco. Injectables are used by 4 percent to 8 percent of the women in Botswana, Kenya, Mauritius, Namibia and Rwanda. In about twenty countries, less than 1 percent of married women use injectables. Vaginal methods are hardly used

(use is less than 1 percent in nearly all countries with relevant data). Surprisingly, the condom is not used by most people as a contraceptive method. Highest use of the condom was reported among married women in Mauritius - 13 percent, this was followed by Ghana - 2.2 percent and Egypt - 2 percent. In nineteen countries, use of the condom among married women was less than 1 percent.

Although overall contraceptive knowledge was reported to be high, actual use of contraceptive was low in most countries. One of the main reasons for this is that large family sizes are still desired in many countries. Contraceptive use increases with the number of living children. Most women use contraception after reaching their wanted total fertility which is generally above five children in most countries.

Contraceptive use is higher in urban than rural areas and this reflects differentials in availability and access to contraceptive methods between the two areas. The data shows clearly that there is positive relationship between the education of a woman and contraceptive use especially where contraceptive prevalence is low or moderate. In many countries, the government is the main source of supply of contraceptive methods while in some few countries, the private sector is the main source of supply. It has been observed that there has been a general increase in trend in contraceptive use in many countries from one period to the next or overtime.

Among the married women who were not using contraception at the time of the survey, 50 percent to 84 percent did not intend to use contraception in the future in seventeen countries while in eight countries, 34 percent to 47 percent stated they did not intend to use contraception in the future. The most common stated reason for non-use in the future in most countries was desire for more children. Other reasons were lack of knowledge, religion, difficult to get pregnant, side effects, etc.

There is limited communication between wives and husbands on family planning as most of them do not even discuss such issues. For example, 10 percent to nearly 30 percent of the women who approve of family planning in some countries reported that they did not know their husbands attitudes on family planning. In some countries, Egypt, Ghana, Malawi, Madagascar, Rwanda and Kenya, over 50 percent to 76 percent, of both wives and husbands approve of family planning. Lowest rates where both wife and husband approve of family planning were reported in Guinea 25 percent, Burkina Faso 29 percent and Senegal 26 percent. Many married women who knew a contraceptive method at the time of the survey approved of family planning (for example, 66 percent to 92 percent in Burkina Faso, Egypt, Ghana, Kenya, Madagascar, Malawi, Namibia, Niger, Nigeria, Rwanda, Senegal, Tanzania and Zimbabwe). However, few of them practice family planning.

There is unmet need for family planning ranging from 19 percent to 40 percent in seventeen countries. This unmet need is for both spacing and for limiting of births. However, total demand for family planning ranges from 26 percent in Guinea to 69 percent in Egypt. About 7 percent to 71 percent of the total demand for family planning is met in the various countries.

Considering the objectives and targets of the Dakar/Ngor Declaration and the United Nations Programme of Action on Population to: improve family planning and reproductive health; reduce demographic trends; reduce maternal, infant and child mortality and in view of the findings of the statistics on contraceptive knowledge, use and attitudes towards large family size, governments should take policy decisions and measures that would help improve contraceptive use and reproductive health in combination with other efforts which aim at improving socio-economic development in general. Some specific actions to be done are listed below.



♦ There is need for governments where contraceptive knowledge and use is low to design and implement relevant information, education and communication (IEC) programmes to promote knowledge and use of contraception to respond to the needs of the population who need to regulate their fertility. IEC should address adolescents, women and men. Both formal and non-formal IEC activities should be used. It is important that IEC activities should be geared at changing attitudes of the people to accept and use family planning methods. Improved knowledge of contraceptive methods and access to various methods should be seen as a key element that would enable couples and individuals to freely choose particular methods to regulate their fertility. Increased use of family planning services to space or limit births has a positive impact on reducing infant, child and maternal mortality in relation to unwanted pregnancies and births in addition to moderation of demographic trends.

♦ Governments should involve Non-Governmental Organizations (NGOs) and the private sector more in the provision and delivery of family planning services. Emphasis should be put on provision of quality services. Both government and the private sector should make available reversible and permanent methods of contraception in their family planning programmes. However, it is important that clients are fully made aware of the implications of the various methods especially non-reversible methods before actually using them. Both government and the private sector should avoid co-ercion in their programmes.

♦ Governments, NGOs and the private sector programmes on family planning should be directed at meeting existing unmet needs for family planning and expand programmes and services as needs increase.

♦ There is great need to encourage better communication between wives and husbands on family planning and joint responsibility for

caring of children as well as on other household responsibilities as advocated in the Dakar/Ngor Declaration and the Programme of Action on Population and Development.

♦ In view of the low use of the condom and the high incidence of the HIV/AIDS and STDs, more effective efforts should be made to appeal to the population to take necessary precautions to reduce the spread of HIV/AIDS and STDs. The condom provides one of the best means so far as a contraceptive as well as a protection against AIDS and STDs.

♦ Women should be used as an agent of change in all various spheres of life. One of the best ways to ensure that they can contribute effectively as an agent of change is to improve their education first and then give them an equal opportunity to participate in decision making that affect their lives and overall socio-economic development.

## INTRODUCTION

The Dakar/Ngor Declaration on Population, Family and Sustainable Development expressed the need to create a conducive socio-economic climate and sustained political will for the pursuit of such effective fertility policies that, among other things, make for (a) setting fertility and family planning target for all people of reproductive age and take measures to reduce fertility; (b) implementing legal measures to improve the status of women and their reproductive health; (c) establishing strong maternal and child health (MCH) programmes; (d) ensuring strong management and close collaboration between private and public sectors and communities in the implementation of Maternal and Child Health (MCH) and family planning programmes; (e) strengthening of information, education and communication (IEC) in MCH and family planning programmes; (f) addressing unmet family planning needs of adolescents and others; (g) promoting of the education of men and women on joint responsibility parenthood. Furthermore, the Dakar/Ngor Declaration called for the need to ensure the availability and promote the use of all tested available contraceptive and fertility regulation methods including traditional and natural family planning methods ensuring choice of methods with a view to increase the regional contraceptive rate to 20 percent by the year 2000 and 40 percent by 2010. The United Nations Programme of Action on Population and Development has emphasized similar concerns on reproductive health and family planning programmes as those in the Dakar/Ngor Declaration.

Implementation of the Dakar/Ngor Declaration and the Programme of Action requires relevant data to ensure proper evaluation and monitoring regarding assessment in achievement of targets set. In the case of targets related to contraceptive prevalence, periodic statistical data on contraceptive use in the various countries is a must for the assessment towards attainment of targets. Thus, this second edition of the compendium is an attempt towards continued efforts to develop a statistical data base on contraceptive use

over time. This publication has been prepared as part of the approved work programme of the 1994/1995 programme budget. The first edition of the statistical compendium on contraceptive prevalence and practice in African countries was published by the United Nations Economic Commission for Africa in 1990. This second edition was inspired by the encouragement of the good reception of the first issue by end users. Since then, many more African countries have conducted surveys which have collected data on contraceptive knowledge and use. Thus, this edition is an update on the one published in 1990. Unlike the first edition, this edition focuses only on national comparative data. The first edition gave national comparative data but in addition it also gave details on each country data. This has not been repeated in this issue.

Data used in this publication is from various country survey data reports. The specific sources are shown in the Annex. For countries which have had more than one survey, the latest survey data is the one that has been presented in this publication. The survey data focused on women. However, in some few countries, some data was collected on men as well but the subsamples on men were very small. Only three tables have been included from the results of male surveys.

Some analysis has been made on most tables, especially on data related to married women. The statistical data is presented after the analysis. Interested researchers can do further analysis that suits their needs.

## **KNOWLEDGE OF CONTRACEPTIVE METHODS AND SOURCE**

Data on knowledge of contraceptive methods was collected by asking respondents to name ways or methods by which a couple could delay or avoid pregnancy. Some methods were mentioned spontaneously while others were recognized only after an interviewer had described a given method. The data used in this publication does not make any distinction between spontaneous knowledge and knowledge after probing. Thus, a respondent is classified as knowing a method irrespective of whether the method was mentioned spontaneously or the method was recognized only after probing. Knowledge of contraceptive method as used in the DHS is simply defined as having heard of a method to delay or avoid pregnancy; it does not necessarily mean that a women knows how to use it properly or where to obtain a particular method.

Contraceptive methods are classified as modern or traditional. Among the modern methods include: the pill, intrauterine devices (IUDs), injection, vaginal methods (diaphragm, foam tables, jelly) condom, male sterilization (vasectomy), female sterilization and norplant. Traditional methods were classified as: periodic abstinence( also called the rhythm method or calendar method), withdrawal and other methods which included herbs, douche, "gris-gris" (amulets, charms, etc.).

### **Knowledge of any contraceptive method**

Among all women, knowledge of any contraceptive method is above 90 percent in ten of the twenty-five countries for which data is available as shown in Table 1. These countries are Botswana, Egypt, Ghana, Kenya, Malawi, Morocco, Rwanda, Togo, Tunisia and Zimbabwe. Lowest knowledge of contraceptive methods are registered in Guinea 28.3 percent in 1992, Mali 42.5 percent in 1987 and Nigeria 45.7 percent. In the other countries, knowledge of any contraceptive method ranges from 61 percent to 89 percent. A

similar trend is observed if one looks at the data on married women regarding knowledge of any contraceptive method.

#### **Knowledge of any modern contraceptive method**

There are eight countries where over 90 percent of all women or married women have knowledge of any modern contraceptive method, these are: Algeria, Egypt, Ghana, Kenya, Morocco, Rwanda, Tunisia and Zimbabwe. In six countries, Burundi, Guinea, Madagascar, Mali, Niger and Nigeria, 28 percent to 58 percent of all women had indicated knowledge of a modern contraceptive method, while in twelve countries, 60 percent to 89 percent of all women knew a modern contraceptive method at the time of the survey. A similar trend is observed for married women.

#### **Knowledge of any traditional contraceptive method**

It is observed that in eleven countries, knowledge of any traditional contraceptive method among all women and married women ranges from 60 percent to 93 percent. Lowest knowledge ranging from 8 percent to 50 percent among all women and married women were reported in Botswana, Burkina Faso, Guinea, Liberia, Madagascar, Mali, Nigeria, Senegal, Sudan and Tanzania. Comparing knowledge of any modern and any traditional contraceptive method, it is observed that more women ~~she~~ ~~to~~ know a modern contraceptive method than a traditional method.

#### **Knowledge of specific modern contraceptive methods among currently married women**

Of all the specific modern contraceptive methods, the pill is known by most married women. In nine of the twenty-nine countries in Table 2 (Algeria, Botswana, Egypt, Kenya, Mauritius, Morocco, Rwanda, Tunisia and Zimbabwe), 93 percent to 99 percent of married women indicated knowledge of the pill. Countries where less than

half of the married women indicated knowledge of the pill are Burundi 42 percent, Cameroon 46 percent, Guinea 23 percent, Madagascar 41 percent, Mali 22 percent, Niger 45 percent, Nigeria 34 percent and Togo 47 percent. In the remaining 12 countries, 50 percent to 85 percent of married women indicated having knowledge of the pill as a contraceptive.

Knowledge of the IUD ranks second to the pill. In nine countries, 60 percent to 99 percent of the married women indicated that they knew of the IUD. In the remaining countries, knowledge of the IUD ranged from 7 percent in Guinea to 59 percent in Zimbabwe. With regard to the injection, in fifteen countries over 50 percent to 97 percent of married women knew of it as a contraceptive method. In the other fourteen countries, such knowledge ranged from 17 percent to 48 percent.

Fewer women knew of the diaphragm, foam, and jelly (vaginal methods) than the pill, IUD and injection. In all the countries, 3 percent to 61 percent of married women indicate having knowledge of vaginal methods. The condom, on the other hand, was better known among married women than the vaginal methods. In more than half of the countries, 50 percent to 90 percent of the married women knew of the condom as a contraceptive method. Less than 30 percent of married women knew of the condom in nine countries: Burundi 15 percent, Ethiopia 12 percent, Guinea 14 percent, Liberia 26 percent, Madagascar 29 percent, Mali 8 percent, Niger 23 percent, Nigeria 22 percent and Sudan 18 percent.

More married women have knowledge of female sterilization than male sterilization. For example, in seventeen countries, 50 percent to 96 percent of married women knew of female sterilization as a contraceptive method while in no single country data showed more than 50 percent of married women who knew male sterilization as a contraceptive method (the range was from 3 percent in Guinea to 45 percent in Kenya).

## **Knowledge of source of modern methods of contraception among married women**

Table 3 shows percentage distribution of currently married women by knowledge of source of a modern method of contraception on twenty three countries. In seven countries (Botswana, Egypt, Morocco, Rwanda, Tunisia and Zimbabwe), over 90 percent of married women knew a source of a modern contraceptive method at the time of the survey. Less than half of married women knew a source of contraceptive method in the following eight countries: Burkina Faso 28 percent, Cameroon 48 percent, Guinea 11 percent, Liberia 44 percent, Madagascar 45 percent, Niger 33 percent, Nigeria 31 percent and Senegal 41 percent. In another eight countries, over 50 percent to 87 percent of married women knew a source of a modern contraceptive method.

It is observed that in fourteen countries, over 50 percent to 95 percent of married women know where to obtain a pill. In the other nine countries, 6 percent to 39 percent of married women know where to obtain a pill. Fewer married women know the source of IUD as compared to the pill. In seven countries, knowledge of the source of the IUD ranged from over 50 percent to 89 percent. In the other sixteen countries, 3 percent to 44 percent of married women know the source of the IUD. The pattern on knowledge of the source of injection is similar to that of the IUD with some minor variations. There is limited knowledge on the source of vaginal methods (diaphragm, foam and jelly). In Tunisia, 55 percent of married women knew of the source of vaginal contraceptive methods while the corresponding figure for Botswana is 51 percent. In the remaining twenty one countries such knowledge ranges from almost 1 percent to 41 percent. As for the condom, it is observed that in ten countries, over 50 percent to 86 percent of married women know where to obtain a condom. In thirteen countries, knowledge of the source of the condom among married women ranges from 5 percent to 48 percent. In more than half of the countries (fourteen) 50



percent to 89 percent of married women have heard of where female sterilization can be performed while knowledge of where male sterilization can be performed in all the countries (twenty three) ranged from 1 percent to 32 percent among married women.

#### **Knowledge of modern contraceptive methods by age among married women**

Table 4 presents the distribution of married women who know a modern contraceptive method by age in five year-groups (data on Botswana - refers to all women). There is a general trend in two-third of the twenty four countries that knowledge increases with age and reaches the highest point at age group 25-29 and declines upto age group 45-49. In six countries, the highest point is reached at age group 30-34 while in Tunisia, this is reached at age group 15-19 where all married women in that group have knowledge of modern contraceptive methods. In Sudan, the highest point is at age group 20-24. Knowledge of modern contraceptive methods among married women is above 80 percent for each age group in the following ten countries: Botswana, Egypt, Ghana, Kenya, Malawi, Morocco, Namibia, Rwanda, Tunisia, Zambia and Zimbabwe. Lowest percentages below 50 percent in the successive age groups are observed in Mali and Nigeria.

#### **Knowledge of modern contraceptive methods by residence among married women**

According to data in Table 5, knowledge of modern contraceptive methods is higher in urban areas than in rural areas. In countries with strong family planning programmes like Botswana, Egypt, Kenya, Morocco, Rwanda, Tunisia and Zimbabwe, there is not much differential in knowledge of modern contraceptive methods among married women in rural and urban areas. In other countries like Mali, Niger and Nigeria, differentials in knowledge of modern contraceptive methods are quite great. This reflects the fact that

awareness activities on contraceptive methods are more likely to be better in urban areas than in rural areas.

#### **Knowledge of modern contraceptive methods by level of education among married women**

Knowledge of modern contraceptive methods is lowest among those married women with no education (see Table 5). It then increases among those with some primary education and increases further to those who have completed primary education and is highest among those who have secondary or higher education. This shows the importance of education on knowledge of modern contraceptive methods. However, in countries like Botswana, Egypt, Kenya, Rwanda, Tunisia and Zimbabwe, where over all contraceptive knowledge is over 90 percent, there is minimal differentials in knowledge among women with no education, some primary, primary and even secondary and higher.

#### **Summary on knowledge of contraceptive and source of modern contraceptive methods**

In general, knowledge of the pill, IUD, injection, condom and female sterilization is highest in the following countries: Algeria, Botswana, Egypt, Kenya, Mauritius, Morocco, Rwanda, Tunisia and Zimbabwe. These are countries where family planning programmes are strong. Rwanda's efforts on family planning programmes had started to show good progress but effects of internal civil conflicts have hindered further progress. Knowledge of various modern contraceptive methods is lowest in countries like Burundi, Ethiopia, Guinea, Mali, Niger and Nigeria.

In about a third of the countries for which relevant data is available, knowledge of source of modern method of contraceptive is very high - over 90 percent of married women knew of the source. In another one third of the countries, over 50 percent to 87 percent

of married women knew of the source of a modern contraceptive method. In another one-third of the countries, less than 50 percent of married women knew of the source of a modern contraceptive method. Most married women knew of the source of the pill, followed by the IUD and the injection. Knowledge of vaginal methods is rather limited. In about two-thirds of the countries, knowledge of a source of the condom ranged from 5 percent to 48 percent. Knowledge on where to obtain female sterilization is much higher than that on male sterilization.

It has been observed that knowledge of modern contraceptive methods increases with age of a woman and reaches a peak at the age group of 25-29 years in most cases while in a few cases, the peak is reached at the age group 30-34 years. Contraceptive knowledge is generally higher in urban than in rural areas. Where family planning programme efforts are strong, there is not much differentials in the knowledge of modern contraceptive methods between urban and rural areas. However, differentials between urban and rural areas are much greater where programmes are either weak or new. In such cases, knowledge is higher in urban areas than in rural areas. There is a positive relationship between education and knowledge of modern contraceptive methods. Knowledge increases with the level of education.

In view of the objectives and targets of the Dakar/Ngor Declaration and United Nations Programme of Action on population to improve family planning and reproductive health; moderate demographic trends; reduce maternal, infant and child mortality, it is essential that all African governments, especially where knowledge on contraceptive methods and sources of methods is low, to improve information, education and communication (IEC) activities as well as formal and non-formal education so as to improve knowledge on contraceptive methods and sources among its various population groups (men included). This will enable couples and individuals to freely choose, if need be, particular methods to

regulate their desired fertility. Increased use of contraception to space and or limit birth has a positive impact on reducing maternal, infant and child mortality in relation to unwanted pregnancies and births in addition to moderation of demographic trends.

## **USE OF CONTRACEPTION**

### **Ever use of contraception**

Ever use of contraceptive refers to contraceptive practice at any time. Tables 6 and 7 present data on ever use of contraception among all women and married women respectively by method. However, attention is focused on commenting on the data on married women.

In nine countries (Algeria, Botswana, Egypt, Kenya, Morocco, Namibia, Togo, Tunisia and Zimbabwe) out of twenty-five countries shown in Table 7, 50 percent to 79 percent of married women indicated that they had ever used any method of contraception. In the other sixteen countries, ever use of any contraceptive method ranged from 5 percent in Guinea to 49 percent in Zambia. The trend on ever use of any modern contraceptive method was similar to that of any contraceptive method. However, only in seven countries (Algeria, Botswana, Egypt, Morocco, Namibia, Tunisia and Zimbabwe) data shows that about 50 percent to 69 percent of married women had reported ever use of any modern method of contraception. Ever use of modern contraceptive methods in the remaining nineteen countries ranged from 2 percent in Burundi to 43 percent in Kenya.

The pill is the most ever used method by over 30 percent to 66 percent of married women in six countries: Algeria, Botswana, Egypt, Morocco, Tunisia and Zimbabwe. Ever use of the pill ranges between 15 percent and 30 percent in Ghana, Kenya, Namibia, Sudan and Zambia. In fourteen countries, this ranges from almost 1 percent to 13 percent. Egypt shows the highest ever use of the IUD

among married women, 42 percent. This is followed by Tunisia 37 percent and Botswana 17 percent. In the remaining 22 countries, the rates range from less than 1 percent to almost 10 percent. Regarding ever use of injection among married women, the rates were 14 percent or higher in Botswana 15 percent, Kenya 14 percent, Namibia 30 percent, Rwanda 17 percent and Zimbabwe 15 percent. The remaining 20 countries had rates ranging from almost 1 percent to 5 percent. Ever use of the condom among married women was highest in Zimbabwe 17 percent, Zambia 11 percent and Botswana 10 percent. The rates in the other twenty two countries were below 10 percent. Ever use of vaginal methods was highest in Tunisia at 12 percent among married women followed by Ghana 10 percent. The rates were below 5 percent in all the remaining countries. Countries where married women reported ever use of female sterilization of 5 percent or more were: Kenya 6 percent, Namibia 7 percent and Tunisia 12 percent. In twenty two countries, the rates range between less than 1 percent and 4 percent. Countries where married women reported ever use of traditional methods greater than 30 percent were: Togo 71 percent, Zimbabwe 48 percent, Cameroon 37 percent, Zambia 35 percent, Tunisia 32 percent, Ghana and Malawi 31 percent each. In seventeen countries, 2 percent to 25 percent of married women reported ever use of any traditional method.

### **Current use of contraception**

Current use is defined as use of a contraceptive method around the time of the survey. Tables 8 and 9 present data on current use of contraceptive methods by method among all women and married women respectively at the time of the survey. Some analysis is presented below on married women.

Over all current contraceptive prevalence among married women for any method ranges from over 30 percent to 75 percent in ten countries: Algeria 51 percent, Botswana 33 percent, Egypt 47 percent, Kenya 33 percent, Mauritius 75 percent, Morocco 42

percent, South Africa 50 percent, Togo 34 percent, Tunisia 50 percent and Zimbabwe 43 percent (see Table 9). In six countries, Cameroon, Ghana, Madagascar, Namibia, Rwanda and Zambia, the rates are between 15 percent and 30 percent. In the remaining thirteen countries, rates range from about 2 percent in Guinea to 13 percent in Malawi.

With regard to current use of any modern contraceptive method, rates are above 30 percent in eight countries, namely: Algeria 43 percent, Botswana 32 percent, Egypt 45 percent, Mauritius 49 percent, Morocco 36 percent, South Africa 48 percent, Tunisia 40 percent and Zimbabwe 36 percent. These are followed by Kenya 27 percent and Namibia 26 percent. In the remaining countries, the rates are between 10 percent and 13 percent in two countries; between 5 percent and 9 percent in six countries; and below 5 percent in ten countries.

Among the modern methods, the pill is the dominant method used among married women in most countries except in Egypt and Tunisia where the IUD is used by more women than the pill. There is a wider use of various modern methods (better method mix) in Botswana (pill, IUD, injection, condom and female sterilization); Kenya (pill, IUD, injection and sterilization); Mauritius (pill, IUD, injection, condom and female sterilization); Morocco (pill, IUD and female sterilization); Namibia (pill, IUD, injection and female sterilization); South Africa (pill, IUD, other supply methods excluding the condom, female sterilization) and Tunisia (pill, IUD and female sterilization).

Use of the pill among married women ranges from 20 percent to 39 percent in four countries: Algeria, mauritius, Morocco and Zimbabwe; it is between 10 percent and 19 percent in three countries: Botswana, Egypt and South Africa; it is below 10 percent in twenty-one countries. Use of the IUD is highest in Egypt 28 percent followed by Tunisia 17 percent and Botswana 6 percent. In

the remaining countries, use of the IUD is below 5 percent. Countries where 5 percent to 8 percent of married women use injection are: Botswana 5 percent, Kenya 7 percent, Namibia 8 percent and Rwanda 8 percent. In the majority of the remaining countries, rates are less than 1 percent. Data on vaginal methods show that these methods are hardly used in nearly all the countries - rates are less than 1 percent in nearly all countries. It is surprising, in view of the AIDS pandemic, that use of condoms among married women is extremely low, below 1 percent in twenty of the twenty-nine countries in Table 9. The highest rate is for Mauritius, 13 percent followed by Egypt and Ghana with a rate of 2 percent each. Use of sterilization among married women is high in Tunisia 12 percent, South Africa 8 percent, Namibia and Mauritius 7 percent each, Kenya 6 percent, Botswana 4 percent and Morocco 3 percent. In the other countries, rates are much lower. Current use of traditional methods are highest in Togo 31 percent, followed by Mauritius, 26 percent, Cameroon and Madagascar 12 percent each. In twenty-five countries, current use of traditional methods ranged from 1 percent to 10 percent.

In most of the countries, the majority of married women who use contraceptive methods use modern methods. However, it is observed that although contraceptive knowledge was generally high as seen earlier, knowledge is not commensurate with the current use of contraception. This might imply that perhaps the knowledge reported did not reflect concrete knowledge or methods are not easily available or most women do not want to use contraception.

#### **Current use of contraceptive methods by age among married women**

Table 11 presents data on twenty eight countries on current use of any contraceptive method among married women by age. It is observed that contraceptive use generally increases with age up to age group 30-34. Thereafter, such increase continues in some countries or declines in others. As an illustration of this, it is

noted that in eight countries, contraceptive use peaked at age group 30-34; in eleven countries, the peak age was 35-39; while in five countries, the peak was at age group 40-44. Data on current use of modern contraceptive methods by married women according to age is shown in Table 13 on twenty five countries. Similar observations as those derived from Table 11 are obtained. Two countries peak contraceptive use at age 20-25, four at age 30-34, fourteen at age 35-39 and five at age 40-44.

It is hard to explain the observed differentials on contraceptive use by age in the different countries. However, explanations need to be sought in the context of the following factors: availability of family planning services and the method mix; general acceptability to use contraceptive methods; length of period family planning services have been available and the strength of these programmes. In most African countries with low contraceptive use, there might be little relationship between contraceptive use and the age of a women. Thus, those who practice contraception in such cases must be those who have strong motivation to regulate their fertility and have the means or access to contraceptive methods.

#### **Current use of contraception among married women by residence**

Table 14 presents data on contraceptive use among married women by residence. In countries where over all contraceptive use is high, it is high in both urban and rural areas (Algeria, Botswana, Egypt, Kenya, Mauritius, Morocco, Tunisia and Zimbabwe). In these eight countries, contraceptive use among married women for any method in urban areas ranges from 39 percent in Botswana to 75 percent in Mauritius; and in rural areas, from 26 percent in Botswana to 72 percent in Mauritius. In all twenty seven countries in Table 14, except Togo, contraceptive use is higher in urban areas than in rural areas. In these twenty six countries, the percentage differences between urban and rural areas range from 4



percent in Mauritius to 31 percent in Namibia.

Contraceptive use of modern methods by residence shows similar patterns to use of any method - use is higher in urban areas than in rural areas in twenty five countries with data except in Mauritius. In most countries, the percentage differences between urban and rural areas is smaller than that for any method.

When use of traditional methods is considered, it is observed that in Botswana, Namibia, Togo, Zambia and Zimbabwe, the proportions of women using traditional methods of contraception in rural areas is higher than that of women in urban areas. In the other countries with data, the reverse is true. The differences between urban and rural areas is below 10 percentage points in most of the countries. Thus, differentials between urban and rural areas for traditional contraceptive methods is least compared to use of any method and any modern method.

#### **Current contraceptive use by education among married women**

Tables 15, 16 and 17 present data on current use of any method, modern and traditional methods of contraception respectively among married women by level of education. All these tables show that contraceptive use is highest among women with secondary or higher education followed by women with primary education and some primary education, and the least contraceptive prevalence are among women with no education. The only exception is Togo in Tables 15 and 17 where women with no education have the highest contraceptive use than those with other levels of education. The overall conclusion from Tables 15, 16 and 17 is that the level of education greatly influences contraceptive use among women.

### **Contraceptive use by number of living children**

Table 18 presents data on married women according to number of living children. Data on use of any method and use of any modern method show similar findings. Generally, contraceptive use increases with increase in number of living children - in nine countries, whether for any method or any modern method, contraceptive use peaks at three living children while in thirteen countries, the peak is at four or more living children. Given that wanted fertility in most countries as well as ideal family size is greater than five, most women would use contraception when they have reached their wanted family size.

### **First use of contraception among ever married women by number of living children**

Table 19 shows data on first use of contraception among ever married women by number of living children. In thirteen of the twenty-one countries, it is observed that first use of contraception peaks when a woman has had one living child. In fourteen countries, of the women who have ever used contraception, the proportion of those who first used contraception after having one living child ranged from almost one-third in Tunisia to three-fifths in Zimbabwe. A sizeable proportion of ever-users have first used contraception before having any living child in: Botswana 21 percent, Cameroon 34 percent, Ghana 39 percent, Kenya 15 percent, Madagascar 22 percent, Namibia 25 percent, Nigeria 21 percent, Togo 15 percent and Uganda 27 percent.

### **Current users of modern contraceptive methods by most recent source of supply**

In countries like Burkina Faso, Guinea, Kenya, Malawi, Morocco, Namibia, Niger, Rwanda, Senegal, Tanzania and Zambia, more than 50 percent to 96 percent of current users of modern

contraceptive methods obtained their most recent supply from public sources, i.e. government hospitals, health centres and dispensaries (see Table 20). Medical private source (religious, mission/church, hospitals or health centres, private hospital/clinic, private doctors) is the major source of modern contraceptive methods in: Algeria 53 percent, Cameroon 61 percent, Egypt 63 percent, Ghana 52 percent, Madagascar 58 percent and Nigeria 47 percent. Other private sources such as shops, friends/relatives as a source of modern contraceptive methods account for less than 1 percent to 9 percent in the various countries for which data is available.

### **General trends in contraceptive use among married women**

To obtain a meaningful picture on trends in contraceptive use, one needs a series of data for a period of time. However, such data is not available for many African countries. Table 21 shows data on trends for countries with data for at least two points in time or more. In all the fourteen countries in Table 21, except for Senegal, there has been an increase in contraceptive use over time. The trends have been strongest in Mauritius where the levels seem to have stabilized at 75 percent. The trends have been weakest in Nigeria, where contraceptive use among married women increased from 5 percent in 1981/1982 to 6 percent in 1990. In Senegal, however, contraceptive use among married women increased from 4 percent in 1978 to 11 percent in 1986 but declined to 7 percent in 1992/1993. It was not possible to find a reasonable explanation for the decline between 1986 and 1992/1993. With continued efforts to make family planning services more effective and accessible to more people who need them, countries will continue to register increases in contraceptive use.

## **Summary on contraceptive use**

### **Ever use of contraception**

In nine countries, ever use of any contraceptive method among married women ranged from 50 percent to 79 percent while in sixteen countries, it ranged from 5 percent to 49 percent. As for ever use of any modern method, it ranged from 50 percent to 69 percent in six countries and from 2 percent to 43 percent in nineteen countries. The pill was the most popularly ever used modern method. It was ever used by about one-third to two-thirds of ever married women in six countries; by 15 percent to 30 percent in five countries; and by 1 percent to 13 percent in fourteen countries. Ever use of the IUD among married women ranged from less than 1 percent to 42 percent; the injection from almost 1 percent to 30 percent; the condom ranged from less than 1 percent to 17 percent (ever use was below 10 percent in twenty-one countries); ever use of vaginal methods and female sterilization ranged from less than 1 percent to 12 percent among married women. Ever use of any traditional method among married women ranged from 7 percent to 48 percent.

### **Current contraceptive use**

Current contraceptive use for any method among married women ranges from almost one-third to three quarters in ten countries: Algeria, Botswana, Egypt, Kenya, Mauritius, Morocco, South Africa, Togo, Tunisia and Zimbabwe. In six countries, Cameroon, Ghana, Madagascar, Namibia, Rwanda and Zambia, 15 to 30 percent of married women use any contraceptive method; and in fourteen countries, current use of any method varied from 2 to 13 percent.

With regard to current use of any modern contraceptive methods among married women, rates vary from 32 to 48 percent in eight countries: Algeria, Botswana, Egypt, Mauritius, Morocco, South

Africa, Tunisia and Zimbabwe. These are followed by Kenya 27 percent, Namibia 26 percent and Rwanda 13 percent. Current use of any modern contraceptive method is below 10 percent in sixteen countries. Current use of any traditional method varies from 1 percent to 31 percent.

The pill is the most widely used modern method among married women in most countries except in Egypt and Tunisia where the IUD is used by more married women than the pill. Countries which have a wider method mix are: Botswana, Kenya, Mauritius, Morocco, Namibia, South Africa and Tunisia. Vaginal methods are hardly used (use is less than 1 percent in nearly all the countries for which data is available). The highest use of the condom is in Mauritius 13 percent, followed by Ghana 2.2 percent, and Egypt 2 percent. In eighteen countries, use of the condom is below 1 percent. Female sterilization is used by 3 to 12 percent of the married women in Tunisia, South Africa, Mauritius, Kenya, Botswana and Morocco. Use of injectables among married women is between 4 and 8 percent in Botswana, Kenya, Mauritius, Namibia and Rwanda. In about twenty countries, use of injectables is less than 1 percent.

Most of the women who reported current use of contraception were using a modern contraceptive method. Although knowledge of contraception was relatively high, it was not commensurate with the low levels of use of contraception. This seem to imply that the data on knowledge may not reflect concrete knowledge or there may be problems related to actual use - accessibility and availability of contraceptive methods or lack of interest to use methods. It will be shown later that most of the women not using contraception at the time of the survey did not intend to use because they want more children.

It has been observed that:

- a) current use of contraception is highest in the age ranges of 30-39;
- b) contraceptive use is higher in urban than rural areas, this reflects differentials in availability of contraceptive methods between the two areas;
- c) there is a positive relationship between education of a woman and contraceptive use, especially where contraceptive prevalence is low or moderate;
- d) contraceptive use increases with the number of living children. Since in most countries wanted total fertility or ideal family size is greater than five, most women use contraception after reaching their desired total fertility;
- e) in many countries, eg. Burkina Faso, Morocco, Guinea, Kenya, Malawi, Tanzania and Zambia, government is the main public source of contraceptive supplies while in some countries like Algeria, Cameroon, Egypt, Ghana, Madagascar and Nigeria, the major source of supplies is the private sector. Thus, there is need to ensure that the private sector plays a greater role in supply of contraceptive supplies;
- f) for those countries with data for at least two points in time, there has been general increase in contraceptive use except for Senegal. The trends have been weakest in Nigeria where contraceptive use among married women increased from 5 percent in 1981/1982 to 6 percent in 1990.

## WOMEN NOT USING CONTRACEPTION

### Current married women not using contraception by future intention to use contraception

Table 22 presents data on twenty five countries on current married women who were not using contraception by future intention to use contraception. Over one-third to nearly half of the women stated that they intended to use contraception within the next twelve months after the survey in ten countries: Algeria, Botswana, Kenya, Madagascar, Malawi, Morocco, Rwanda, Tunisia, Zambia and Zimbabwe. In the remaining fifteen countries, the women who indicated intention to use in the next twelve months ranged from 8 percent in Cameroon to 32 percent in Ghana. In ten countries: Algeria, Burundi, Cameroon, Egypt, Ghana, Kenya, Malawi, Rwanda, Togo and Zambia, over 10 percent to 17 percent of married women indicated intention to use contraception later while in the other fifteen countries the percentages ranged from 1 percent to 10 percent. Proportions of the married women who were unsure of the timing as to when to use contraception were below 6 percent in all the countries.

Those married women who were unsure about intention on future use of contraception ranged from 2 percent to 17 percent. In sixteen countries (Algeria, Burkina Faso, Burundi, Cameroon, Guinea, Madagascar, Mali, Morocco, Namibia, Niger, Nigeria, Senegal, Sudan, Tanzania, Togo and Uganda), that is about two-third of the countries in Table 22, 50 percent to 84 percent of the married women who were not using contraception at the time of the survey indicated that they did not intend to use contraception in the future. In the remaining nine countries, those who stated that they did not intend to use contraception in the future ranged from 34 percent to 47 percent. Given the overall high proportions of married women who were not using contraception and who did not intend to use contraception in the future, this should be cause for

policy measures to influence these women to change their attitudes in favour of adoption of family planning.

**Women who were not using a contraceptive method and who did not intend to use in the future by reason for not using**

Table 23 presents data on seventeen countries on women who were not using a contraceptive method and who did not intend to use in the future by reason for not using. The major reason for non-use of contraception is desire for more children, stated by 50 percent to 66 percent of the non-users in Cameroon, Guinea, Madagascar, Namibia and Niger. In the other countries, 27 percent to 47 percent of non-users stated the reason for non-use as desire for children. Lack of knowledge was an important reason for non-use in: Burkina Faso 17 percent, Ethiopia 16 percent, Madagascar 16 percent, Ghana 13 percent, Namibia 12 percent, Niger 15 percent, Nigeria 12 percent and Zambia 11 percent. Non-use based on religion seems to be important in Guinea 10 percent, Nigeria 12 percent and Senegal 11 percent. In Egypt, Kenya, Malawi and Zambia, 20 percent to 26 percent of the women said they were not using contraception because it was difficult to get pregnant. Reason of menopause/hysterectomy was reported by at least 10 percent of the women in: Egypt 13 percent, Ghana 11 percent, Kenya 12 percent, Morocco 10 percent, Rwanda 21 percent, Tanzania and Zambia 11 percent each. In Ethiopia, a single important reason of fatalistic was reported by 35 percent of the non-users. Fear of side effects was cited by 10 percent of the non-users in Kenya and 7 percent in Ghana, Morocco and Rwanda. The other countries reported percentages ranging from less than 1 to 5 percent. Opposition by partner as a reason for non-use was reported by 1 percent to 7 percent of the women. Other specified reasons such as fears of sterility, cost, opposition by other people, etc., did not seem to account much for non-use of contraception.



## DISCUSSION AND APPROVAL OF FAMILY PLANNING

### Currently married women who know a contraceptive method by discussion with husband

Table 24 shows data on married women who know a contraceptive method by number of times family planning was discussed with husband in the year preceding the survey on twenty countries. In twelve of these countries, over 50 percent to 81 percent of the women indicated that they never discussed family planning with the husbands in the year preceding the survey. In the remaining eight countries, percentages ranged from 29 percent to 43 percent for the women who never discussed family planning with the husband. In Botswana, Kenya, Malawi and Zambia, 30 percent to 43 percent reported having had discussions once or twice while in sixteen countries, the percentages ranged from 7 percent to 29 percent for women who had discussions once or twice. Countries where more than one-third had discussed family planning with the husband three times or more were: Kenya 36 percent, Madagascar 37 percent, Rwanda 52 percent and Zimbabwe 48 percent. In Botswana, Burundi, Cameroon, Ghana, Malawi, Sudan and Zambia, 20 percent to 29 percent of the women reported having discussed family planning three times or more with husbands the year preceding the survey.

The data clearly indicates that there is need to improve communication among wives and husbands. Thus, as advocated in the Dakar/Ngor Declaration and the ICPD Programme of Action, governments should take necessary measures to promote better communication and joint responsibility of women and men on family planning as well as on other matters on household responsibilities. In this context, IEC programmes should address these issues adequately.

## **Approval of family planning among women who know a contraceptive method and perceptions of their husbands approval**

Table 25 (a) shows data on women who know a contraceptive method by approval of family planning and their perceptions of husbands approval. Over all, the percentages of married women who knew a contraceptive method and approved of family planning as derived from Table 25 (a) were as follows: Burkina Faso 69 percent, Egypt 91 percent, Ghana 89 percent, Guinea 46 percent, Kenya 89 percent, Madagascar 80 percent, Malawi 92 percent, Namibia 73 percent, Niger 71 percent, Nigeria 70 percent, Rwanda 93 percent, Senegal 66 percent, Tanzania 84 percent and Zambia 81 percent. For the countries shown in Table 25 (b), the figures shown there for women who approve family planning are: Botswana 90 percent, Burundi 94 percent, Cameroon 60 percent, Liberia 46 percent, Sudan 64 percent, Togo 69 percent and Uganda 71 percent.

It is observed from Table 25 (a) that the proportions of respondents where a wife reported that she and her husband both approved of family planning was highest in Egypt 76 percent, followed by Malawi 71 percent, Rwanda 69 percent, Kenya 63 percent, Ghana 61 percent, Madagascar 56 percent. Lowest proportions were reported in countries such as Guinea 25 percent, Burkina Faso 29 percent and Senegal 26 percent. Unfortunated data in Table 25 (a) covers only fourteen countries.

In Guinea, one-third of respondents reported that they and their husbands both disapproved of family planning while the corresponding figures for other countries range between 2 percent and 16 percent. It is observed that 9 percent to 17 percent of women who approved of family planning reported that their husbands did not approve. Furthermore, in 13 of the 14 countries in Table 25(a), 10 percent to 29 percent of the women who approved of family planning reported that they did not know their husbands attitudes

on family planning. Less than 5 percent of women disapproved of family planning while their husbands approved.

Although the proportions of women who approve of family planning appear high, few women practice family planning. As seen earlier, large proportions of women had indicated they never intended to use contraception in the future. The policy implications are that governments should continue to change attitudes of the population to accept and practice family planning. In addition, governments should make available and accessible family planning services to all those who need them. The health benefits of family planning on women, children and the entire population should be emphasized.

**DESIRE FOR MORE CHILDREN, MET AND UNMET FAMILY PLANNING  
NEEDS, IDEAL NUMBER OF CHILDREN, AND PLANNING  
STATUS OF BIRTHS**

**Married women by desire for more children**

Table 26 shows data on married women by desire for more children on twenty five countries. It is observed that 12 percent to 39 percent of the women reported that they wanted another child within two years while 16 percent to 53 percent indicated that they wanted to delay the next birth for two or more years. The countries where one-third or more married women stated that they wanted no more children were: Botswana 33 percent, Egypt 66 percent, Ghana 33 percent, Kenya 46 percent, Madagascar 40 percent, Morocco 49 percent, Rwanda 36 percent, Tunisia 57 percent and Zimbabwe 33 percent. In the remaining sixteen countries in Table 26, 9 percent to 26 percent of the women reported that they did not want anymore children.

It is essential that governments and non-governmental organizations and the private sector involved in the provision of

family planning services should provide appropriate family planning methods for those who want to space their births and those who want to limit the number of their children. However, it is important that clients fully understand the implication of all methods, especially those for limiting the number of children before actual use.

#### **Married women who want no more children by number of living children**

Table 27 presents data on married women (including those who are sterilized) who want no more children by number of living children. In Egypt, about 60 percent of the married women with two living children want no more children and this increases with an increase of an additional living child to 93 percent for those with at least six children. This is followed by Tunisia and Morocco where 59 percent and 52 percent respectively of married women with three living children want no more children. Then follows Kenya and Madagascar where 65 percent and 52 percent respectively of the married women with four living children want no more children. In some of the countries like Burkina Faso, Cameroon, Ghana, Guinea, Liberia, Malawi, Nigeria, Sudan, Tanzania and Zambia, most married women want to stop child bearing after having six or more living children.

#### **Unmet and met need for family planning**

Table 28 shows data on currently married women with unmet and met need for family planning and total demand for family planning on seventeen countries. Married women who at the time of the survey indicated that they did not want anymore children or that they wanted to delay for two years or more before having another child, and were not using contraception were considered to have unmet need for family planning (see footnote (a) at the bottom of Table 28 for a comprehensive definition of unmet need for family planning).

However, those who were using a family planning method were said to have a met need for family planning. Unmet need and met need constitute the total demand for family planning. The need for family planning can be either for spacing or limiting of births.

The overall unmet need for family planning ranges from 19 percent to 40 percent in the seventeen countries in Table 28. In fourteen countries, Burkina Faso, Cameroon, Ghana, Guinea, Kenya, Malawi, Namibia, Niger, Nigeria, Rwanda, Senegal, Sudan, Tanzania and Zambia, unmet need for spacing is greater than the unmet need for limiting of births. Only in Egypt, Madagascar and Morocco, the unmet need for limiting of births exceeded the unmet need for spacing of births. As indicated earlier, met need refers current use and this has been discussed earlier and there is no need to repeat the discussion.

Total demand for family planning ranges from 26 percent in Guinea to 69 percent in Egypt and Kenya. However, only 7 percent to 71 percent of the total demand for family planning is met in the various countries. Governments, NGOs and the private sector programmes on family planning should be directed at meeting existing unmet needs for family planning and expand programmes as needs increase.

#### **Ideal number of children by age of women**

Table 29 presents data on mean ideal number of children for all women by age on twenty-seven countries. This data was obtained by (a) asking women who had no children to state if they were in a position to choose exactly the number of children to have in the whole of their life, how many that would be; (b) for women who had children, they were asked, if they were to start all over again, to indicate the number of children they would like to have.

It is observed that the ideal number of children increases with the age of a woman. The mean ideal number of children was below five in nine countries: Botswana 4.7, Egypt 2.9, Ghana 4.4, Kenya 3.7, Morocco 3.4, Rwanda 4.2, Swaziland 4.2, Tunisia 3.5 and Zimbabwe 4.9. However, in seventeen countries, the mean ideal number of children was above five while in twelve of these countries the mean ideal number of children was almost six children or over. Niger had the highest mean ideal number of children, i.e. eight children.

This shows that attitudes towards high fertility still persist in many countries although in some of these attitudes have changed considerably.

#### **Fertility planning status of births in the five years preceding the survey**

Data on fertility planning status of births in the five years preceding the survey was obtained by asking each woman if each child in the preceding five years was planned (wanted at that time), was wanted, but at a later time, or was unwanted (wanted no more). Responses are affected by memory lapse of the respondent and rationalization of unwanted children as wanted - thus underestimating the unwanted births. However, the data gives an indication of the extent to which couples are able to regulate their fertility.

Table 30 presents data on planning status of births in the five years preceding the survey on seventeen countries. Apart from Kenya and Rwanda where close to half of the births were reported to have been wanted, in the remaining fifteen countries, over 55 percent to 87 percent of the births were wanted. In half of the countries, 20 percent to 35 percent of the births were wanted but later while in the other half, 8 percent to 16 percent of the

births were wanted at a later time. High proportions of unwanted births were reported in Egypt 30 percent, Rwanda 26 percent, Morocco 19 percent, Kenya 17 percent, Madagascar and Malawi 14 percent each, and Namibia 12 percent. In Burkina Faso, Cameroon, Guinea, Niger and Nigeria, the reported unwanted births were below 5 percent.

**Wanted total fertility and actual fertility the three years preceding the survey by residence**

Table 31 presents data on wanted fertility and actual fertility by residence on eighteen countries. Wanted fertility is calculated in a similar way as total fertility, but unwanted births are excluded from the numerator. In all countries, wanted total fertility is lower than actual total fertility. The difference between wanted total fertility and actual total fertility represents the unwanted fertility. This is another way of looking at unmet need for family planning. In Kenya and Rwanda, wanted total fertility is two children lower than actual total fertility. In Burkina Faso, Malawi, Madagascar and Senegal, women would have one child less if unwanted fertility had been eliminated while in Egypt, Ghana, Morocco and Zambia, women would have 1.1 to 1.3 children lower if unwanted fertility had been controlled.

Wanted total fertility in urban areas is lower than wanted total fertility in rural areas as shown in Table 31. Both wanted total fertility in urban and rural areas are lower than corresponding actual total fertility in urban and rural areas in all the countries.

**SOME RESULTS FROM MALE SURVEYS**

In some countries, data on contraceptive knowledge, use and family planning was collected on men as well but the subsamples on men were much smaller than that of women. While in some countries

the focus was on husbands, in others, data was collected on both married and unmarried men. The age of men covered varied from country to country (15-59, 15-60, 18 years and over, 20 years and over, 20-54, 20-55, 20-70, etc.). There is no need to present many tables on the results of male surveys as the focus of the survey was on women. Thus only three tables on results from male surveys are included in this publication. These are on knowledge of contraceptive methods and use of the condom and male sterilization.

**All men and currently married men by knowledge of contraceptive methods**

Table 32 presents data on knowledge of any method, any modern method and any traditional contraceptive method among men and currently married men for thirteen countries. It is observed that 55 percent to 99 percent of currently married men and all men reported having knowledge of any contraceptive method. Knowledge of any modern contraceptive method among currently married men and all men was of similar magnitude as that for any method. However, knowledge of any traditional contraceptive methods ranged from 25 percent to 94 percent for currently married men and from 27 percent to 89 percent for all men.

Comparing data in Tables 1 and 32 for the same countries reflected in both tables, it is observed that in Burkina Faso, Burundi, Guinea, Kenya, Malawi, Mali, Niger, Senegal and Tanzania, knowledge of any method, any modern and any traditional contraceptive methods is higher among men than women. The differences are very significant in countries like Burkina Faso, Guinea and Niger. In Ghana, Morocco and Rwanda, there appears to be no difference in knowledge of any method and any modern contraceptive methods among men and women. In Egypt, women's knowledge is slightly higher on any method, any modern and traditional contraceptive methods than that of men.



Table 33 shows data on knowledge of specific modern contraceptive method among married men for fourteen countries. Knowledge of the pill ranges from 38 percent to 97 percent; the IUD from 9 percent to 95 percent; the injection from 32 percent to 88 percent; the diaphragm/foam/jelly, from 8 percent to 62 percent; condom from 31 percent to 94 percent; female sterilization from 24 percent to 88 percent; and male sterilization from 9 percent to 58 percent. Thus, men know more of female sterilization than male sterilization.

**Contrast of knowledge and use of condom and male sterilization among married men**

Table 34 contrasts knowledge and use of condom and male sterilization among married men. Although knowledge of condom as a contraceptive method ranges from 31 percent to 94 percent, actual use is very limited - ranging from less than 1 percent to 10 percent in the fourteen countries in Table 34. Male sterilization is hardly used as a contraceptive method. In view of the HIV/AIDS pandemic, there is need for educational programmes to persuade the population to use condoms as a contraceptive method as well as a means for preventing HIV/AIDS and sexually transmitted diseases (STDs). Furthermore, efforts should be initiated or strengthened for men to be more involved in family planning programmes.

## **STATISTICAL TABLES**

Table 1: Percentage distribution of all women and married women knowing contraceptive methods in selected countries from latest survey data

Country	Year of survey	Know any method		Know any modern method		Know any traditional method	
		AW	MW	AW	MW	AW	MW
Algeria	1992	-	99.2	-	98.5	-	-
Botswana	1988	95.4	94.8	95.1	94.4	41.5	45.6
Burkina Faso	1993	66.1	67.4	62.4	63.3	41.3	42.9
Burundi	1987	69.9	78.5	58.0	63.8	-	-
Cameroon	1991	72.5	69.6	66.4	62.9	60.9	58.1
Egypt	1992	99.5 (a)	99.6	99.4 (a)	99.5	77.0 (a)	77.6
Ethiopia	1990	62.7	-	-	-	-	-
Ghana	1993	91.1	91.3	90.6	90.7	67.9	68.6
Guinea	1992	28.3	27.4	28.0	27.2	9.7	8.3
Kenya	1993	95.6	97.2	95.2	96.9	71.9	75.9
Liberia	1986	71.8	69.8	70.4	68.0	30.0	27.8
Madagascar	1992	61.7	66.6	56.9	61.7	45.0	48.5
Malawi	1992	90.4	94.6	87.7	91.8	69.3	76.5
Mali	1987	42.5	43.2	28.3	28.6	36.4	37.1
Mauritius	1991	-	99.7	-	99.7	-	-
Morocco	1992	97.3	99.0	97.3	98.9	63.9	73.1
Namibia	1992	88.6	90.4	88.5	90.4	33.0	40.7
Niger	1992	75.7	77.3	58.0	58.0	65.2	67.4
Nigeria	1990	45.7	43.6	43.5	41.2	25.7	23.6
Rwanda	1992	97.9	99.0	97.7	98.8	72.8	84.4
Senegal	1992/93	74.2	75.0	70.6	70.3	47.6	49.6
Sudan	1989/90	-	71.4	-	70.8	-	38.7
Swaziland	1988	-	-	81.9	-	-	-
Tanzania	1991/92	74.4	80.2	72.2	77.6	44.1	48.9
Togo	1988	93.5	95.8	80.8	81.4	89.5	92.9
Tunisia	1988	99.0 (a)	99.2	98.8 (a)	99.0	91.5 (a)	91.9
Uganda	1988/89	81.9	84.0	76.5	77.9	58.6	62.4
Zambia	1992	89.4	93.7	87.1	90.7	66.4	77.6
Zimbabwe	1988	96.3	98.7	95.4	97.8	75.3	88.8

AW = All women; MW = Married women; (a) Refers to ever married women; - means no data

Source: Compiled from various country survey reports.

Table 2: Percentage distribution of currently married women by knowledge of specific modern contraceptive method

Country	Year of survey	Modern method known						Male sterilization
		Pill	IUD	Injection	Diaphragm/ foam/jelly	Codom	Female sterilization	
Algeria	1992	98.3	86.1	67.5	45.1	49.8	60.5	9.6
Botswana	1988	93.6	89.5	89.4	51.3	87.1	66.6	24.7
Burkina Faso	1993	50.3	34.4	41.2	17.3	48.9	33.9	12.9
Burundi	1987	42.4	23.8	57.4	6.9	14.9	14.6	3.6
Cameroon	1991	45.5	29.9	40.1	15.3	39.7	50.9	7.3
Egypt	1992	99.4	98.9	81.8	37.5	55.0	70.6	12.8
Ethiopia	1990	56.3	13.8	28.4	4.7	11.9	22.6	3.4
Ghana	1993	81.3	47.3	79.4	56.6	78.2	69.1	22.5
Guinea	1992	22.9	6.6	17.1	2.6	14.4	12.6	3.1
Kenya	1993	95.1	80.4	93.1	42.3	85.1	87.4	45.4
Liberia	1986	61.1	31.3	42.4	9.8	26.2	41.7	5.9
Madagascar	1992	41.0	17.3	48.3	8.1	29.1	41.1	6.8
Malawi	1992	82.9	46.3	68.3	47.8	73.2	63.1	18.8
Mali	1987	21.8	14.7	17.0	6.0	8.2	14.4	4.2
Mauritius	1991	99.3	88.2	94.1	32.8	95.0	92.3	23.9
Morocco	1992	98.8	87.3	62.3	31.4	71.8	84.8	6.8
Namibia	1992	82.4	40.5	84.8	15.3	70.6	60.1	27.3
Niger	1992	44.9	24.9	39.3	11.0	22.7	39.9	10.8
Nigeria	1990	33.8	19.8	33.6	16.9	21.6	19.4	6.7
Rwanda	1992	96.7	69.7	97.3	27.0	89.7	75.2	37.6
Senegal	1992/93	63.2	43.0	33.5	12.1	36.9	48.7	4.9
Sudan	1989/90	69.9	39.0	45.6	7.8	17.8	44.1	5.1
Swaziland (1)	1988	79.8	63.0	75.1	19.9	59.2	42.7	9.6
Tanzania	1991/92	74.6	35.0	44.0	22.2	55.0	54.6	11.3
Togo	1988	46.5	47.4	59.9	25.9	35.9	69.0	14.0
Tunisia	1988	95.8	94.7	59.4	61.3	66.3	95.9	16.9
Uganda	1988/89	67.7	21.1	40.8	11.6	31.1	62.6	8.8
Zambia	1992	84.7	49.2	42.9	26.7	73.3	71.0	20.8
Zimbabwe	1988	97.0	59.1	72.4	29.4	80.3	54.6	17.6

(1) Data on Swaziland refers to all women

Source: Compiled from various country survey reports.

Table 3: Percentage distribution of currently married women by knowledge of source of a modern method of contraception

Country	Year of survey	Source of modern contraceptive method known							Female sterilization	Male sterilization
		Any modern method	Pill	IUD	Injection	Diaphragm/foam/jelly	Condom			
Botswana	1988	94.2	93.3	89.2	89.2	51.1	86.1	65.7	24.2	
Burkina Faso	1993	28.4	22.8	16.2	16.1	9.5	17.3	12.0	4.6	
Cameroon	1991	48.4	27.3	20.8	23.5	10.1	25.2	39.6	5.1	
Egypt	1992	92.9	90.4	87.5	60.1	30.0	46.9	60.6	9.7	
Ghana	1993	73.5	58.2	33.8	58.1	41.2	54.5	51.4	17.0	
Guinea	1992	10.6	6.1	2.8	5.4	0.9	5.0	5.2	0.9	
Kenya	1993	93.1	89.7	76.0	87.9	39.8	78.3	80.9	41.4	
Liberia	1986	44.0	24.8	17.6	25.1	6.9	14.2	27.4	4.0	
Madagascar	1992	45.4	29.0	12.2	33.4	5.6	19.6	28.8	4.4	
Malawi	1992	83.3	72.8	39.6	61.1	39.9	61.9	53.5	15.3	
Morocco	1992	93.8	92.4	73.8	39.2	23.8	58.8	69.9	3.3	
Namibia	1992	81.8	72.7	34.9	76.2	12.1	52.2	52.3	23.9	
Niger	1992	32.9	26.1	14.6	22.4	6.9	11.3	17.9	3.3	
Nigeria	1990	31.2	24.1	15.6	24.8	12.8	15.9	14.9	4.9	
Rwanda	1992	91.0	87.7	58.9	87.9	23.1	75.2	61.8	32.0	
Senegal	1992/93	40.8	34.4	27.3	20.4	8.4	21.7	29.0	3.0	
Sudan	1989/90	59.2	54.5	33.0	36.0	5.9	13.4	40.1	4.2	
Tanzania	1991/92	71.1	65.6	32.7	40.7	20.4	48.3	50.8	10.5	
Togo	1988	78.6	38.6	40.8	55.3	23.7	29.9	68.0	13.1	
Tunisia	1988	95.3	86.9	87.2	43.9	55.4	57.8	89.1	10.7	
Uganda	1988/89	72.3	54.4	16.3	35.5	8.7	20.9	59.7	8.2	
Zambia	1992	87.2	79.0	44.0	39.0	24.6	64.4	66.0	19.7	
Zimbabwe	1988	96.0	94.6	52.6	66.2	26.0	72.5	51.3	15.5	

Source: Compiled from various country survey reports.

Table 4: Percentage distribution of women currently married who knew a modern contraceptive method by age group

Country	Year of survey	Age group						
		15-19	20-24	25-29	30-34	35-39	40-44	45-49
Botswana (1)	1988	94.0	96.9	97.9	95.7	95.5	91.9	84.9
Burkina Faso	1993	60.2	66.6	67.3	67.0	59.7	58.0	52.0
Burundi	1987	59.2	62.4	71.3	63.6	64.0	56.8	51.8
Cameroon	1991	60.9	65.7	69.2	62.5	60.9	58.8	52.1
Egypt	1992	97.9	99.6	99.7	99.9	99.6	99.4	99.3
Ghana	1993	85.7	89.8	93.4	93.3	90.7	90.2	83.2
Kenya	1993	97.0	97.5	98.1	97.7	96.9	95.1	91.8
Liberia	1986	53.2	71.2	71.2	73.8	67.1	64.3	64.0
Madagascar	1992	52.1	64.8	71.8	71.1	69.9	65.4	55.0
Malawi	1992	84.2	94.2	95.1	93.8	93.4	88.3	86.3
Mali	1987	32.4	32.6	33.7	30.9	24.0	21.8	13.5
Morocco	1992	98.8	99.0	98.8	99.3	99.1	98.9	98.2
Namibia	1992	88.0	92.7	94.3	92.2	89.7	85.1	86.8
Niger	1992	48.9	58.3	64.1	59.7	59.9	58.2	48.9
Nigeria	1990	30.5	42.1	47.2	41.9	42.1	41.4	30.2
Rwanda	1992	99.1	98.0	99.6	99.2	98.9	98.8	97.3
Senegal	1992/93	59.5	68.9	75.4	73.0	73.7	68.8	63.5
Sudan	1989/90	67.3	75.0	72.5	72.7	69.1	67.2	64.9
Tanzania	1991/92	68.7	79.6	82.6	83.7	76.7	76.6	62.7
Togo	1988	76.6	82.4	83.7	83.6	81.2	80.9	73.8
Tunisia	1988	100.0	98.3	99.4	99.3	99.3	98.7	97.5
Uganda	1988/89	74.4	78.2	83.2	76.9	79.3	76.1	69.1
Zambia	1992	83.6	92.7	94.3	92.7	94.4	86.2	80.1
Zimbabwe	1988	96.7	98.4	98.4	99.0	97.8	94.5	97.0

(1) Data on Botswana refers to all women.

Source: Compiled from various country survey reports.

Table 5: Percentage distribution of currently married women knowing a modern contraceptive method by residence and level of education

Country	Year of survey	Residence		Level of Education				
		Urban	Rural	No education	Some primary	Primary completed	Primary	Secondary or higher
Botswana (1)	1988	98.5	93.7	86.9	95.1	98.6		99.4
Burkina Faso	1993	93.3	57.1	59.3			85.4	98.6
Cameroon	1991	76.2	54.7	35.6			81.7	99.5
Egypt	1992	99.8	99.3	99.1	99.8			100.0 (2)
Ghana	1993	97.7	87.5	81.8			95.5	100.0
Kenya	1993	98.3	96.6	90.3	97.8	99.2		99.8
Liberia	1986	76.8	62.8	60.4			85.1	94.9
Madagascar	1992	91.9	61.4	41.6			64.6	95.9
Malawi	1992	96.3	91.2	88.2			95.6	99.6
Mali	1987	56.7	19.1	23.0			60.5	100.0
Morocco	1992	99.8	98.2	98.6			100.0	100.0
Namibia	1992	95.5	87.1	79.0	89.2	95.6		98.3
Niger	1992	88.6	53.0	56.5			76.7 (3)	
Nigeria	1990	68.5	33.7	26.7	60.2	64.5		85.7
Rwanda	1992	99.8	98.8	98.1			99.4	100.0
Senegal	1992/93	88.4	61.6	65.5			93.7	98.6
Sudan	1989/90	91.3	59.0	54.2	90.8	91.7		98.3
Tanzania	1991/92	92.5	72.5	64.2	83.5	88.3		98.9
Togo	1988	92.6	76.9	75.6			92.2	98.0
Tunisia	1988	99.7	97.9	98.2			99.8	100.0
Uganda	1988/89	94.2	76.3	67.1	83.2	94.1		97.7
Zambia	1992	96.5	85.7	76.9			92.7	99.2
Zimbabwe	1988	98.8	97.4	94.1			98.4	99.5

(1) Data on Botswana refers to all women;

(2) Data refers to those who completed secondary or higher

(3) Data refers to primary or over

Source: Compiled from various country survey reports.

Table 6: Percentage distribution of all women who have ever used a contraceptive by method ever used

Country	Year of survey	Method ever used								Any traditional method
		Any method	Any modern method	Pill	IUD	Injection	Vaginal method	Condom	Female sterilization	
Botswana	1988	56.0	54.1	45.8	13.3	9.9	0.7	9.8	2.2	10.3
Burkina Faso	1993	21.7	9.9	5.2	1.5	0.7	1.3	5.2	0.4	17.0
Burundi	1987	22.0	1.9	0.7	0.5	0.8	0.0	0.2	0.1	-
Cameroon	1991	41.8	15.7	6.3	1.2	1.4	2.1	8.8	1.1	38.8
Egypt (a)	1992	64.6	62.9	44.0	39.7	2.9	3.6	7.5	1.1	9.5
Ethiopia	1990	7.5	-	4.2	1.0	0.2	0.1	0.3	0.2	-
Ghana	1993	43.1	28.5	15.1	2.2	3.7	8.8	13.0	0.8	29.9
Guinea	1992	5.8	4.1	2.4	0.4	0.9	0.1	1.1	0.2	3.2
Kenya	1993	45.6	34.0	21.9	7.2	10.8	2.1	6.8	3.9	19.8
Liberia	1986	21.7	18.6	15.7	2.9	1.6	1.0	2.7	1.0	8.3
Madagascar	1992	23.9	8.3	4.0	0.7	3.3	0.5	3.0	0.6	21.1
Mali	1987	18.1	3.2	2.6	0.4	0.2	0.3	0.4	0.1	3.2
Namibia	1992	40.8	39.0	21.6	4.1	24.8	0.6	5.5	3.9	9.2
Niger	1992	10.8	4.4	3.6	0.4	0.7	0.2	0.4	0.1	7.7
Nigeria	1990	15.2	9.0	4.9	1.6	1.8	0.8	2.5	0.2	9.3
Rwanda	1992	28.7	16.8	7.6	0.6	11.6	0.2	1.2	0.4	16.8
Senegal	1992/93	15.4	10.2	6.1	2.8	0.6	1.0	3.6	0.3	8.8
Sudan (a)	1989/90	24.4	18.1	16.8	1.6	1.1	0.3	1.9	0.8	14.2
Swaziland	1988	30.7	-	19.0	4.6	10.5	1.4 (c)	3.0	2.6	-
Tanzania	1991/92	22.7	14.1	10.8	1.2	0.9	0.3	3.6	1.5	13.6
Togo	1988	66.5	10.7	3.9	1.4	1.1	4.0	3.9	0.6	64.3
Tunisia (a)	1988	67.1	60.6	34.0	36.2	2.5	11.6	9.1	11.2	31.8
Uganda	1988/89	20.9	7.4	5.5	0.5	1.3	0.2	0.8	0.7	16.5
Zambia	1992	39.9	22.9	15.5	2.2	1.5	1.5	9.1	1.5	27.5
Zimbabwe	1988	60.4	48.4	43.4	2.5	11.2	1.5	12.8	1.7	35.6

- means no data; (a) refers to ever married women; (c) refers to foaming tablets only

Source: Compiled from various country survey reports.



Table 7: Percentage distribution of currently married women who have ever used a contraceptive by method ever used

Country	Year of survey	Method ever used								Any traditional method
		Any method	Any modern method	Pill	IUD	Injection	Vaginal method	Condom	Female sterilization	
Algeria	1992	76.8	68.5	66.0	6.6	1.3	2.4	3.5	1.1	-
Botswana	1988	63.0	60.1	49.4	17.4	15.0	1.3	10.1	4.3	13.5
Burkina Faso	1993	22.9	10.0	5.7	1.6	0.8	1.3	4.8	0.4	18.2
Burundi	1987	30.1	2.3	0.8	0.6	0.9	0.1	0.3	0.1	-
Cameroon	1991	40.3	14.8	6.5	1.4	1.4	2.0	7.7	1.2	37.0
Egypt	1992	66.9	65.1	45.2	41.7	3.0	3.7	7.9	1.1	9.8
Ghana	1993	45.8	31.5	17.2	2.5	4.4	9.8	12.6	0.9	31.3
Guinea	1992	4.8	3.5	1.8	0.4	0.8	0.1	0.8	0.2	2.5
Kenya	1993	55.2	42.6	27.6	9.8	14.1	2.6	7.3	5.5	22.3
Liberia	1986	18.8	15.9	13.4	2.8	1.8	1.0	1.7	1.1	6.7
Madagascar	1992	28.5	11.1	5.5	1.1	4.7	0.7	3.8	0.9	24.6
Malawi	1992	40.6	19.1	8.6	1.3	4.4	1.0	8.5	1.7	31.1
Mali	1987	19.0	3.4	2.7	0.5	0.2	0.4	0.4	0.1	17.3
Morocco	1992	66.2	62.8	59.5	9.4	1.6	2.1	5.6	3.0	17.1
Namibia	1992	51.9	49.7	28.8	6.5	29.7	1.0	5.5	7.4	12.4
Niger	1992	11.4	4.4	3.6	0.4	0.8	0.2	0.3	0.1	8.4
Nigeria	1990	14.0	9.4	4.8	1.7	1.9	0.6	2.0	0.3	8.1
Rwanda	1992	42.4	28.8	11.5	1.0	17.3	0.2	1.5	0.7	24.9
Senegal	1992/93	16.8	10.6	6.8	3.2	0.7	1.1	2.9	0.4	9.8
Sudan	1989/90	25.2	18.6	17.3	1.6	1.1	0.4	2.0	0.8	14.9
Tanzania	1991/92	25.7	15.8	12.3	1.5	1.0	0.3	3.6	1.6	15.6
Togo	1988	73.5	10.1	3.8	1.6	1.1	3.7	3.3	0.6	71.3
Tunisia	1988	68.2	61.7	34.6	37.0	2.5	11.7	9.2	11.5	32.4
Uganda	1988/89	21.5	7.0	5.0	0.5	1.3	0.2	0.7	0.8	17.4
Zambia	1992	49.2	27.1	18.8	2.6	1.9	1.8	10.5	2.1	34.9
Zimbabwe	1988	79.0	63.0	57.1	3.4	14.5	2.0	17.0	2.3	48.1

- means no data

Source: Compiled from various country survey reports.

Table 8: Percentage distribution of all women by current use of contraception by method

Country	Year of survey	Method used at time of survey								Any traditional method
		Any method	Any modern method	Pill	IUD	Injection	Vaginal method	Condom	Female sterilization	
Botswana	1988	29.7	28.9	17.7	4.5	3.2	0.0	1.3	2.2	0.7
Burkina Faso	1993	7.7	4.0	2.0	0.7	0.1	0.1	0.9	0.3	3.7
Burundi	1987	6.4	1.0	0.2	0.2	0.5	-	0.1	0.1	5.4
Cameroon	1991	19.7	4.2	1.2	0.3	0.4	0.3	1.0	1.1	15.5
Ghana	1993	18.9	9.3	2.8	0.7	1.2	1.1	2.6	0.8	9.6
Guinea	1992	2.7	1.5	0.8				0.2		1.2
Kenya	1993	25.9	20.7	7.5	2.8	5.5	0.1	0.9	3.9	5.2
Liberia	1986	8.4	7.0	4.7	0.7	0.3	0.1	0.2	1.0	1.4
Madagascar	1992	13.3	3.5	1.0	0.3	1.0	0.1	0.5	0.6	9.9
Malawi	1992	10.5	6.3	1.8	0.3	1.2	0.1	1.4	1.5	4.3
Mali	1987	4.6	1.2	0.8	0.1	0.1	0.1	0.0	0.1	3.3
Namibia	1992	23.3	21.4	7.1	1.3	8.6	0.0	0.5	3.8	1.8
Niger	1992	4.4	2.3	1.5	0.2	0.4	0.0	0.1	0.1	2.1
Nigeria	1990	7.5	3.8	1.4	0.7	0.7	0.2	0.5	0.2	3.8
Rwanda	1992	13.8	8.6	2.0	0.1	5.6	0.0	0.2	0.4	5.3
Senegal	1992/93	7.1	4.5	2.0	1.2	0.1	0.1	0.7	0.3	2.5
Swaziland	1988	16.6	-	4.8	1.5	4.4	0.1	0.6	2.4	2.7
Tanzania	1991/92	9.5	5.9	3.0	0.3	0.3	0.0	0.7	1.5	3.6
Togo	1988	33.0	3.4	0.6	0.6	0.2	0.8	0.6	0.6	29.5
Uganda	1988/89	5.5	2.7	1.4	0.2	0.4	-	0.0	0.7	2.9
Zambia	1992	11.6	7.0	3.5	0.4	0.1	0.1	1.4	1.5	4.6
Zimbabwe	1988	32.2	27.2	23.5	0.7	0.2	0.0	0.9	1.7	5.0

- means no data

Note:- For Guinea, modern methods were classified under pill, condom, and other which was 0.5%.

Source: Compiled from various country survey reports.

Table 9: Percentage distribution of married women by current use of contraception by method used

Country	Year of survey	Method used								Any traditional method
		Any method	Any modern method	Pill	IUD	Injection	Vaginal method	Condom	Female sterilization	
Algeria	1992	50.7	42.8	38.7	2.4	0.1	0.2	0.5	1.1	7.8
Botswana	1988	33.0	31.7	14.8	5.6	5.4	0.0	1.3	4.3	1.3
Burkina Faso	1993	7.9	4.2	2.1	0.7	0.1	0.1	0.8	0.3	3.7
Burundi	1987	8.7	1.2	0.2	0.3	0.5	-	0.1	0.1	7.5
Cameroon	1991	16.1	4.3	1.2	0.3	0.4	0.3	0.9	1.2	11.8
Egypt	1992	47.1	44.8	12.9	27.8	0.5	0.4	2.0	1.1	2.3
Ethiopia	1990	4.8	2.9	2.2	0.3	0.0	0.0	0.1	0.3	1.9
Ghana	1993	20.3	10.1	3.2	0.9	1.6	1.2	2.2	0.9	10.1
Guinea	1992	1.7	1.0	0.5	-	-	-	0.1	-	0.7
Kenya	1993	32.7	27.3	9.5	4.2	7.2	0.1	0.8	5.5	5.5
Liberia	1986	6.4	5.5	3.3	0.6	0.3	0.2	0.0	1.1	0.9
Madagascar	1992	16.7	5.1	1.4	0.5	1.6	0.1	0.5	0.9	11.6
Malawi	1992	13.0	7.4	2.2	0.3	1.5	0.1	1.6	1.7	5.6
Mali	1987	4.7	1.3	0.9	0.1	0.1	0.1	0.0	0.1	3.4
Mauritius	1991	74.7	48.9	20.9	2.8	4.1	0.4 (a)	13.3	7.2	25.7
Morocco	1992	41.5	35.5	26.1	3.2	0.1	0.2	0.9	3.0	6.0
Namibia	1992	28.9	26.0	8.3	2.1	7.7	0.1	0.3	7.4	2.9
Niger	1992	4.4	2.3	1.5	0.2	0.5	0.0	0.0	0.1	2.2
Nigeria	1990	6.0	3.5	1.2	0.8	0.7	0.1 (a)	0.4	0.3	2.5
Rwanda	1992	21.2	12.9	3.0	0.2	8.4	0.0	0.2	0.7	8.3
Senegal	1992/93	7.4	4.8	2.2	1.4	0.2	0.1	0.4	0.4	2.7
South Africa	1998	50.0	48.0	13.0	5.0	20.0 (b)	-	1.0	8.0	1.0
Sudan	1989/90	8.7	5.5	3.9	0.7	0.1	-	0.1	0.8	3.1
Tanzania	1991/92	10.4	6.6	3.4	0.4	0.4	0.0	0.7	1.6	3.9
Togo	1998	33.9	3.1	0.4	0.8	0.2	0.6	0.4	0.6	30.7
Tunisia	1998	49.8	40.4	8.8	17.0	0.8	-	1.3	11.5	9.4
Uganda	1988/89	4.9	2.5	1.1	0.2	0.4	-	0.0	0.8	2.4
Zambia	1992	15.2	8.9	4.3	0.5	0.1	0.1	1.8	2.1	6.3
Zimbabwe	1998	43.1	36.1	31.0	1.1	0.3	0.0	1.2	2.3	7.0

- means no data; (a) refers to vaginal tablets (b) Data refers to injectables, diaphragms, cervical caps and spermicides.

Note:- For Guinea, modern methods were classified under pill, condom and other which was 0.4%.

Source: Compiled from various country survey reports.

Table 10: Percentage distribution of all women who were using any method of contraception at the time of survey by age

Country	Year of survey	Age at time of survey							
		Total	15-19	20-24	25-29	30-34	35-39	40-44	45-49
Botswana	1988	29.7	14.7	31.5	39.7	37.5	36.1	29.7	13.3
Burkina Faso	1993	7.7	4.6	8.9	9.9	10.0	6.1	7.7	5.8
Cameroon	1991	19.7	23.0	25.0	19.2	15.4	17.0	17.0	10.4
Ghana	1993	18.9	11.3	19.2	21.2	20.9	24.3	22.1	13.1
Guinea	1992	2.7	1.0	4.9	2.7	3.4	3.4	1.9	1.1
Kenya	1993	25.9	5.7	23.0	37.5	38.3	34.6	34.2	26.7
Madagascar	1992	13.3	5.8	12.2	17.3	19.5	17.8	14.6	8.9
Malawi	1992	10.5	3.5	11.1	13.5	15.5	15.3	11.5	6.1
Mali	1987	4.6	6.7	5.7	4.8	5.6	3.4	2.1	0.3
Namibia	1992	23.3	10.7	24.8	31.3	28.7	32.0	20.8	20.9
Niger	1992	4.4	1.8	1.8	5.8	5.8	4.7	3.4	1.8
Nigeria	1990	7.5	5.9	9.5	8.6	6.5	8.4	7.9	4.2
Rwanda	1992	13.8	1.5	8.9	15.8	23.0	20.0	25.6	15.6
Senegal	1992/93	7.1	1.7	5.8	9.3	10.0	10.4	10.5	5.7
Swaziland	1988	16.6	5.9	18.9	20.9	23.3	21.2	16.3	16.8
Tanzania	1991/92	9.5	3.4	9.9	10.7	14.9	14.2	10.7	7.2
Togo	1988	33.0	21.5	36.6	36.5	39.7	37.8	36.5	24.3
Uganda	1988/89	5.5	2.6	5.4	5.7	6.7	7.9	8.6	7.1
Zambia	1992	11.6	3.5	11.2	15.0	17.5	20.6	15.7	9.4
Zimbabwe	1988	32.2	8.4	36.1	47.1	48.4	41.2	34.6	19.7

Source: Compiled from various country survey reports.

Table 11: Percentage distribution of current married women who were using any contraceptive method at the time of the survey by age and total fertility rate (TFR)

Country	Year of survey	Age at time of the survey								TFR (b)
		Total	15-19	20-24	25-29	30-34	35-39	40-44	45-49	
Algeria	1992	50.7	26.4	39.2	52.7	56.1	56.4	52.2	38.9	4.2
Botswana	1988	33.0	17.2	25.8	37.1	35.6	38.3	36.1	16.7	5.0
Burkina Faso	1993	7.9	5.9	8.1	9.5	9.9	6.0	7.6	5.3	6.9
Burundi	1987	8.7	4.3	9.1	9.6	10.2	7.1	8.0	6.1	6.8
Cameroon	1991	16.1	18.4	17.0	17.2	13.6	17.1	17.0	8.6	5.8
Egypt	1992	47.1	13.3	29.7	46.0	58.8	59.6	55.5	34.5	3.9
Ethiopia	1990	4.8	2.6	4.3	6.5	6.3	5.0	3.9	1.2	6.4
Ghana	1993	20.3	13.0	16.9	21.1	20.5	26.0	23.2	14.3	5.5
Guinea	1992	1.7	0.7	0.8	1.5	2.3	3.3	1.8	1.0	5.7
Kenya	1993	32.7	10.3	23.6	37.2	39.7	35.9	37.3	30.4	5.4
Liberia	1986	6.4	2.1	5.4	7.7	8.1	5.2	8.3	8.0	6.5
Madagascar	1992	16.7	6.4	13.3	17.5	21.6	20.1	17.6	10.9	6.1
Malawi	1992	13.0	7.3	12.0	14.8	16.2	16.4	13.2	6.4	6.7
Mali	1987	4.7	8.2	5.5	4.8	5.6	3.4	2.0	0.3	6.7
Mauritius (a)	1991	74.7	46.3	65.5	71.5	79.9	81.3	73.2		2.4
Morocco	1992	41.5	23.3	35.2	39.5	45.4	47.8	47.0	35.1	4.0
Namibia	1992	28.9	20.5	30.6	32.3	29.3	32.6	23.7	24.6	5.4
Niger	1992	4.4	2.2	2.2	5.4	5.4	4.7	3.4	2.0	7.4
Nigeria	1990	6.0	1.3	5.1	6.0	6.5	8.6	8.4	4.6	6.0
Rwanda	1992	21.2	10.8	14.4	17.4	25.3	22.1	31.0	20.1	6.2
Senegal	1992/93	7.4	2.0	4.8	8.3	9.0	9.5	9.9	5.8	6.0
Sudan	1989/90	8.7	3.8	7.8	7.1	12.4	9.9	11.4	5.5	5.0
Tanzania	1991/92	10.4	5.2	10.0	9.9	13.8	13.3	10.9	7.1	6.3
Togo	1988	33.9	16.7	33.9	34.9	39.0	37.4	37.3	26.2	6.6
Tunisia	1988	49.8	11.1	34.9	44.0	55.0	59.2	61.2	43.2	4.3
Uganda	1988/89	4.9	1.7	2.8	4.3	5.9	8.1	8.2	7.9	7.3
Zambia	1992	15.2	8.7	13.1	15.3	18.3	22.5	17.4	9.0	6.5
Zimbabwe	1988	43.1	30.0	45.8	50.3	50.5	41.7	37.2	22.8	5.5

(a) Data on Mauritius was collected on women aged 15-44 years.

(b) TFR refers to all women

Source: Compiled from various country survey reports.

Table 12: Percentage distribution of all women who were using a modern method of contraception at the time of the survey by age

Country	Year of survey	Age at time of the survey							
		Total	15-19	20-24	25-29	30-34	35-39	40-44	45-49
Botswana	1988	28.9	14.3	31.2	38.7	36.4	35.1	29.0	11.9
Burkina Faso	1993	4.0	1.8	3.9	5.8	5.8	4.3	4.2	2.0
Cameroon	1991	4.2	1.3	3.7	5.0	4.2	5.8	9.8	4.2
Ghana	1993	9.3	5.0	8.3	10.2	10.5	13.3	11.8	6.8
Guinea	1992	1.5	0.3	2.6	2.1	1.4	1.9	1.5	0.7
Kenya	1993	20.7	2.4	16.2	31.5	32.2	30.4	29.4	22.3
Madagascar	1992	3.5	0.4	2.0	3.0	6.8	7.0	5.5	3.2
Malawi	1992	6.3	1.8	5.8	8.0	8.3	10.1	8.4	4.8
Namibia	1992	21.4	9.8	22.3	28.7	26.6	30.0	20.0	19.8
Niger	1992	2.3	0.7	0.7	3.2	2.9	3.2	1.8	1.6
Nigeria	1990	3.8	1.9	3.8	3.9	3.6	5.3	5.4	3.3
Rwanda	1992	8.6	1.0	4.9	9.7	15.3	13.9	15.2	6.9
Senegal	1992/93	4.5	0.7	3.4	5.7	6.7	7.4	7.8	3.2
Tanzania	1991/92	5.9	1.0	5.7	5.7	10.5	11.1	7.6	5.4
Togo	1988	3.4	3.0	2.7	2.9	4.2	4.6	4.6	3.3
Uganda	1988/89	2.7	1.2	1.8	2.6	3.1	5.6	5.4	2.5
Zambia	1992	7.0	1.5	7.1	9.0	10.7	12.7	10.1	6.4
Zimbabwe	1988	27.2	7.1	32.7	41.5	41.6	31.2	25.5	14.5

Source: Compiled from various country survey reports.

Table 13: Percentage distribution of current married women using a modern method of contraception at the time of the survey by age

Country	Year of survey	Age at time of the survey							
		Total	15-19	20-24	25-29	30-34	35-39	40-44	45-49
Botswana	1988	31.7	14.5	25.2	36.0	33.7	37.5	35.0	14.7
Burkina Faso	1993	4.2	2.2	3.7	5.4	5.6	4.3	3.9	1.6
Burundi	1987	1.2	0.6	0.7	1.4	1.5	1.3	1.0	1.6
Cameroon	1991	4.3	1.5	3.2	4.3	3.4	6.0	10.1	3.3
Egypt	1992	44.8	12.7	28.5	44.2	56.4	57.0	52.4	30.3
Ghana	1993	10.1	8.1	7.5	10.1	10.6	13.9	11.5	6.8
Guinea	1992	1.0	0.0	0.4	1.0	1.3	2.0	1.3	0.5
Kenya	1993	27.3	6.1	18.3	31.5	33.2	31.6	31.9	24.9
Liberia	1986	5.5	2.0	4.9	6.7	6.3	5.1	5.7	7.1
Madagascar	1992	5.1	0.5	2.9	3.1	8.1	8.7	6.9	3.6
Malawi	1992	7.4	3.4	5.3	8.4	8.2	11.3	9.3	4.6
Mauritius (a)	1991	48.9	28.4	41.8	45.9	52.4	56.2	47.3	
Morocco	1992	35.5	22.1	32.1	35.3	38.8	39.4	39.2	28.4
Namibia	1992	26.0	16.5	25.7	28.3	27.0	29.8	22.5	23.1
Niger	1992	2.3	0.8	0.8	2.8	2.6	3.0	1.7	1.7
Nigeria	1990	3.5	0.6	2.7	3.1	3.7	5.4	5.8	3.6
Rwanda	1992	12.9	7.1	7.5	11.1	16.2	15.0	18.8	8.6
Senegal	1992/93	4.8	0.5	2.2	4.9	6.3	7.0	7.2	3.5
Sudan	1989/90	5.5	2.2	4.2	5.0	7.9	5.7	7.7	4.4
Tanzania	1991/92	6.6	1.7	5.9	5.2	9.1	10.5	7.5	4.8
Togo	1988	3.1	2.1	1.9	2.5	3.7	4.7	4.2	3.4
Tunisia	1988	40.4	9.5	28.3	35.0	43.9	48.0	49.7	38.2
Uganda	1988/89	2.5	1.2	1.1	1.9	2.6	6.0	5.2	2.5
Zambia	1992	8.9	3.4	7.7	8.6	10.7	14.1	11.0	6.3
Zimbabwe	1988	36.1	28.3	41.5	43.8	42.9	30.8	26.1	17.2

(a) Data on Mauritius was collected on women aged 15-44.

Source: Compiled from various country survey reports.

Table 14: Percentage distribution of married women using any contraceptive method, any modern method and any traditional method by area of residence

Country	Year of survey	Method and area of residence					
		Any method		Any modern method		Any traditional method	
		Urban	Rural	Urban	Rural	Urban	Rural
Algeria	1992	57.5	44.1	-	-	-	-
Botswana (a)	1988	38.8	25.8	38.2	24.9	0.6	0.9
Burkina Faso	1993	26.0	4.2	17.1	1.5	8.9	2.7
Burundi	1987	25.5	8.1	14.0	0.8	-	-
Cameroon	1991	24.9	10.5	7.1	2.5	17.9	8.0
Egypt	1992	57.0	38.4	54.1	36.6	2.9	1.8
Ethiopia	1990	24.5	2.6	16.7	1.4	7.7	1.2
Ghana	1993	30.6	15.4	15.8	7.4	14.8	7.9
Guinea	1992	6.2	0.3	3.4	0.2	2.8	0.1
Kenya	1993	43.4	30.9	37.9	25.4	5.5	5.4
Liberia	1986	11.6	3.4	9.7	3.1	-	-
Madagascar	1992	39.7	11.9	15.8	2.9	23.9	9.0
Malawi	1992	22.9	11.7	17.2	6.0	5.6	5.6
Mali	1987	11.4	2.3	4.7	0.1	6.6	2.3
Mauritius	1991	75.4	71.6	47.5	50.2	-	-
Morocco	1992	54.5	31.6	45.8	27.7	8.7	3.9
Namibia	1992	47.8	16.9	46.6	13.0	1.2	3.9
Nigeria	1990	14.8	3.6	9.6	1.9	5.2	1.7
Rwanda	1992	28.4	20.8	19.7	12.6	8.7	8.2
Senegal	1992/93	16.1	3.3	11.8	1.4	4.3	1.9
Swaziland (a)	1988	28.1	13.1	-	-	-	-
Sudan	1989/90	17.0	3.9	11.3	2.2	5.7	1.7
Togo	1988	32.3	34.5	6.5	1.7	25.5	32.8
Tunisia	1988	60.5	34.6	47.6	30.1	12.9	4.5
Uganda	1988/89	18.0	3.6	12.2	1.5	5.8	2.0
Zambia	1992	20.8	10.3	15.3	3.2	5.5	7.0
Zimbabwe	1988	51.7	39.5	48.8	30.8	3.0	8.6

(a) Data for Botswana refers to all women; - means no data.

Source: Compiled from various country survey reports.



Table 15: Percentage distribution of married women using any method of contraception at the time of the survey by level of education

Country	Year of survey	Level of education				
		No education	Some primary	Primary	Primary completed	Secondary or higher
Algeria	1992	43.9	59.3	60.4		55.8
Botswana (a)	1988	18.4	26.4		31.7	41.3
Burkina Faso	1993	4.6		19.5		49.4
Burundi	1987	7.7		11.1		29.6
Cameroon	1991	5.0		16.9		42.8
Egypt	1992	37.5	53.5		56.1 (b)	58.0 (c)
Ethiopia	1990	2.7		19.1		94.6 (d)
Ghana	1993	8.2		22.3		48.3
Guinea	1992	0.9		1.8		15.5
Kenya	1993	19.5	27.9		34.9	51.6
Liberia	1986	2.8		7.3		26.8
Madagascar	1992	2.9		11.8		90.2
Malawi	1992	10.0		29.1		43.0
Mali	1987	2.8		12.6		52.7
Morocco	1992	35.7		57.0		64.9
Namibia	1992	16.8	19.2		29.5	48.1
Niger	1992	3.5		16.1 (e)		
Nigeria	1990	2.0	7.8		10.5	45.4
Rwanda	1992	18.0		22.4		37.4
Senegal	1992/93	4.1		19.1		36.5
Swaziland	1988	9.9		13.1		54.6
Sudan	1989/90	3.2	12.7		11.5	45.3
Tanzania	1991/92	3.7	12.9		14.6	42.4
Togo	1988	33.5		32.0		42.1
Tunisia	1988	42.3		56.8		66.5
Uganda	1988/89	1.9	4.8		9.1	46.8
Zambia	1992	8.0		12.8		85.6
Zimbabwe	1988	32.5		42.0		55.5

(a) Data for Botswana refers to all women; (b) Data refers to education of primary through secondary

(c) Data refers to those who actually completed secondary or higher level of education

(d) Consists of: Junior secondary 37.8% and senior secondary and above 56.8%

(e) Data refers to primary or over

Source: Compiled from various country survey reports.

**Table 16: Percentage distribution of married women using any modern contraceptive method at the time of the survey by level of education**

Country	Year of survey	Level of education			
		No education	Some primary	Primary completed	Secondary or higher
Botswana (a)	1988	17.4	25.8	31.7	40.3
Burkina Faso	1993	1.9		12.7	31.6
Burundi	1987	0.6		2.2	16.9
Cameroon	1991	1.2		4.5	11.8
Egypt	1992	36.0	51.0	53.0 (b)	54.5 (c)
Ghana	1993	3.6		12.4	25.0
Guinea	1992	0.6		1.2	6.9
Kenya	1993	15.3	22.7	29.1	44.9
Liberia	1986	2.5		6.6	22.1
Madagascar	1992	1.0		3.6	28.2
Malawi	1992	4.8		16.6	37.9
Mali	1987	0.3		5.5	20.3
Morocco	1992	31.4		47.5	51.3
Namibia	1992	14.2	15.0	27.6	46.4
Niger	1992	1.5		11.0 (d)	
Nigeria	1990	1.3	3.9	6.4	26.4
Rwanda	1992	11.1		13.0	27.5
Senegal	1992/93	2.2		12.8	29.3
Sudan	1989/90	1.9	8.0	7.8	29.6
Tanzania	1991/92	1.8	8.2	9.3	33.1
Togo	1988	1.7		3.9	12.2
Tunisia	1988	37.4		44.1	44.5
Uganda	1988/89	0.9	2.3	4.0	29.9
Zambia	1992	2.7		6.3	70.3
Zimbabwe	1988	24.9		34.0	52.3

(a) Data for Botswana refers to all women; (b) Data refers to education of primary through second

(c) Data refers to those who actually completed secondary or higher level of education

(d) Data refers to primary and over

Source: Compiled from various country survey reports.

Table 17: Percentage distribution of married women using any traditional method of contraception at the time of the survey by level of education

Country	Year of survey	Level of education				
		No education	Some primary	Primary	Primary completed	Secondary or higher
Botswana (a)	1988	1.0	0.5		0.6	1.0
Burkina Faso	1993	2.7		6.8		17.9
Cameroon	1991	3.8		12.4		31.0
Egypt	1992	1.5	2.5		3.2 (b)	3.5 (c)
Ghana	1993	4.6		9.9		23.3
Guinea	1992	0.3		0.6		8.6
Kenya	1993	4.2	5.2		5.8	6.7
Madagascar	1992	1.9		8.2		62.0
Malawi	1992	5.2		12.5		5.1
Mali	1987	2.5		7.1		32.3
Morocco	1992	4.3		9.5		13.7
Namibia	1992	2.6	4.3		1.9	1.7
Niger	1992	1.9		5.1 (d)		
Nigeria	1990	0.7	3.9		4.1	19.0
Rwanda	1992	6.8		9.4		9.8
Senegal	1992/93	1.9		6.3		7.2
Sudan	1989/90	1.3	4.7		3.7	15.7
Tanzania	1991/92	1.9	4.7		5.3	9.3
Togo	1988	31.8		28.0		29.4
Tunisia	1988	4.9		12.6		22.0
Uganda	1988/89	1.0	2.5		5.1	16.9
Zambia	1992	5.3		6.5		15.3
Zimbabwe	1988	7.6		8.1		3.3

(a) Data for Botswana refers to all women; (b) Data refers to education of primary through secondary

(c) Data refers to those who actually completed secondary or higher level of education

(d) Data refers to primary and over

Source: Compiled from various country survey reports.

Table 18: Percentage distribution of married women using any contraceptive method and any modern contraceptive method by number of living children

Country	Year of survey	Method and number of living children									
		Any method					Any modern method				
		Number of living children					Number of living children				
		None	1	2	3	4 or more	None	1	2	3	4 or more
Botswana (a)	1988	14.2	30.6	38.9	41.7	33.0	13.6	30.4	37.2	41.2	32.1
Burkina Faso	1993	7.5	7.6	7.4	8.7	-	3.6	3.7	4.5	4.6	-
Burundi	1987	0.5	6.8	11.3	9.0	9.9	0.2	0.8	0.9	1.6	1.6
Cameroon	1991	15.3	13.8	14.9	15.7	17.8	2.0	2.7	2.7	3.6	6.6
Egypt	1992	0.5	31.6	52.5	59.3	54.3	0.5	30.2	49.5	56.2	51.8
Ghana	1993	9.5	15.6	20.7	26.1	21.7	3.3	7.3	9.4	13.5	11.6
Guinea	1992	0.4	1.0	1.5	2.0	2.5	0.0	0.3	0.8	1.1	1.6
Kenya	1993	5.5	25.9	30.6	37.1	37.7	1.6	19.5	26.1	29.8	32.5
Liberia	1986	2.5	3.8	5.7	6.4	-	2.5	3.6	4.8	5.8	-
Madagascar	1992	7.0	13.4	19.6	20.6	18.2	0.8	3.0	4.6	5.4	7.1
Malawi	1992	3.0	10.9	11.4	14.9	17.5	1.6	5.3	6.3	7.8	10.7
Mali	1987	8.8	4.6	4.2	3.4	4.0	2.5	1.1	0.6	0.8	1.5
Morocco	1992	5.6	39.1	46.9	49.9	47.0	3.6	34.5	42.2	42.6	39.7
Namibia	1992	11.2	29.3	38.4	36.2	25.6	10.9	26.0	34.1	33.0	23.1
Niger	1992	0.2	3.5	5.2	4.9	6.0	0.1	1.4	2.2	3.2	3.1
Nigeria	1990	4.2	3.5	4.1	5.1	-	1.6	1.7	2.6	2.8	-
Rwanda	1992	1.2	11.2	19.5	20.9	28.0	0.0	5.1	11.6	13.6	17.6
Senegal	1992/93	1.5	3.7	7.3	7.1	10.0	1.1	2.6	3.5	4.6	6.7
Swaziland	1988	6.8	14.6	23.3	23.2	-	-	-	-	-	-
Sudan	1989/90	1.2	7.3	9.6	9.4	10.3	0.2	3.9	6.9	6.3	6.6
Tanzania	1991/92	1.8	9.8	11.6	11.3	12.0	0.6	6.3	6.0	7.7	8.0
Togo	1988	6.3	26.8	32.7	37.1	41.4	1.5	2.9	2.2	2.6	4.1
Tunisia	1988	3.5	34.2	58.0	55.7	56.4	1.3	25.2	46.4	43.1	47.6
Uganda	1988/89	0.9	2.7	3.9	4.4	7.4	0.4	1.2	2.7	2.0	3.7
Zambia	1992	0.9	12.2	16.3	15.4	19.7	0.4	7.2	9.6	9.9	11.2
Zimbabwe	1988	3.2	43.5	46.2	49.7	45.9	1.6	40.2	42.1	42.9	36.0

(a) Data for Botswana refers to all women; - no data

Source: Compiled from various country survey reports.

Table 19: Percentage distribution of ever married women by number of living children at the time of the first use of contraception

Country	Year of survey	Never used contra-ception	Number of living children at time of first use of contraception						Total	No. of ever married women
			0	1	2	3	4+	Missing		
Botswana (1)	1988	44.0	11.7	19.2	10.0	6.0	8.7	0.3	100.0	4368
Burkina Faso	1993	76.8	6.1	10.5	2.7	1.4	2.4	0.1	100.0	5499
Cameroon	1991	59.2	13.8	11.8	4.6	2.7	7.6	0.2	100.0	3151
Egypt	1992	35.4	1.1	23.9	14.9	9.0	15.7	0.0	100.0	9864
Ghana (1)	1993	56.9	17.0	8.8	6.5	4.2	6.4	0.1	100.0	4562
Kenya	1993	44.9	7.8	14.1	9.5	6.3	16.9	0.5	100.0	5260
Madagascar	1992	73.1	6.3	5.5	4.3	2.8	8.0	0.1	100.0	4581
Malawi	1992	60.2	3.6	13.5	8.5	4.8	8.8	0.5	100.0	4088
Morocco	1992	36.1	9.1	20.0	9.8	7.0	18.0	0.1	100.0	5639
Namibia	1992	47.7	13.1	18.5	7.6	5.0	7.6	0.5	100.0	2638
Niger	1992	88.4	0.8	3.5	2.8	1.5	2.8	0.2	100.0	5821
Nigeria	1990	85.9	3.4	2.6	1.9	1.7	4.2	0.0	100.0	7268
Rwanda	1992	59.8	1.2	9.7	8.2	5.4	15.5	0.3	100.0	4451
Senegal	1992/93	82.1	1.0	6.0	3.0	2.2	5.6	0.1	100.0	4732
Sudan	1989/90	75.6	2.2	9.4	4.6	2.7	5.2	0.2	100.0	5860
Tanzania	1991/92	73.6	1.7	9.7	4.9	3.4	5.8	1.0	100.0	6977
Togo	1988	26.4	11.4	40.6	10.0	5.2	5.9	0.6	100.0	2621
Tunisia	1988	32.9	3.6	22.8	14.3	7.4	19.0	0.0	100.0	4184
Uganda	1988/89	77.6	6.3	4.4	3.3	2.2	6.1	0.0	100.0	3809
Zambia	1992	51.1	3.7	21.6	9.6	5.5	8.2	0.8	100.0	5269
Zimbabwe	1988	22.0	4.0	46.8	12.1	6.4	8.6	0.2	100.0	3068

(1) Data for Botswana and Ghana refer to all women;

Source: Compiled from various country survey reports.

Table 20: Percentage distribution of current users of modern contraceptive methods by most recent source of supply

Country	Year of survey	Source of supply of method			
		Public (1)	Medical private (2)	Other private (3)	Not stated or do not know
Algeria	1992	45.9	52.9	0.4	0.8
Burkina Faso	1993	64.7	19.3	7.5	8.5
Cameroon	1991	30.5	60.6	5.0	3.9
Egypt	1992	35.0	63.2	1.4	0.4
Ghana	1993	43.3	52.2	3.8	0.7
Guinea	1992	62.0	31.0	1.0	6.0
Kenya	1993	68.2	24.7	5.7	1.4
Madagascar	1992	38.8	58.1	1.8	1.3
Malawi	1992	69.9	22.3	6.6	1.3
Morocco	1992	62.6	36.3	1.0	0.1
Namibia	1992	86.4	11.1	0.9	1.6
Niger	1992	93.3	5.0	1.3	0.4
Nigeria	1990	36.7	47.2	8.8	2.9
Rwanda	1992	96.3	1.8		2.0
Senegal	1992/93	59.1	31.1	6.6	3.1
Tanzania	1991/92	72.9	17.8	4.3	5.0
Zambia	1992	56.1	36.0	7.2	0.7

(1) This includes: government hospitals, health centers and dispensaries

(2) Included under this category are: religious, mission/church hospitals or health centers, private hospital/clinic, private doctors, family planning association, pharmacy, etc.

(3) This group includes: shop, friends/relatives

Source: Compiled from various country survey reports.

Table 21: Trends in contraceptive use (in percentage) among married women in selected African countries

Algeria			Botswana			
1984	1986	1992	1984	1988		
25	33	51	28	33		
Egypt			Ghana			
1980	1984	1988	1992	1979	1988	1993
24	30	38	47	10	13	20
Kenya			Malawi			
1977/78	1984	1989	1993	1984	1992	
7	17	27	33	8	13	
Mauritius			Morocco			
1975	1985	1991	1980	1983/84	1987	1992
46 (a)	75	75	19	26	36	42
Nigeria			Rwanda			
1981/82	1990		1983	1992		
5	6		11	21		
Senegal			Sudan (North)			
1978	1986	1992/93	1978/79	1989/90		
4	11	7	5	9		
Tunisia			Zimbabwe			
1978	1983	1988	1979	1984	1988	
31	41	50	14	38	43	

(a) Refers to ever married women

Source: Various reports on WFS, CPS, DHS and country reports prepared for the Third African Population Conference held in 1992.

Table 22: Percentage distribution of all currently married women not using contraception by future intention to use contraception

Country	Year of survey	Total	Future intention to use contraception					Missing	Number of women
			Intends to use in next 12 months	Intends to use later	unsure as to timing	Unsure as to intention to use	Does not intend to use		
Algeria	1992	100	33.0	17.1	-	3.6	54.6	0.1	2314
Botswana (a)	1988	100	47.3	4.9	3.2	4.7	39.9	0.1	2740
Burkina Faso	1993	100	20.5	5.4	4.4	15.1	54.0	0.6	4001
Burundi	1987	100	11.5	16.8	4.1	11.6	55.9	0.2	2436
Cameroon	1991	100	7.9	15.3	0.0	5.2	71.6	0.0	2408
Egypt	1992	100	28.7	11.2	5.6	8.3	46.2	0.0	4843
Ghana	1993	100	31.7	15.9	3.2	7.4	41.6	0.2	2555
Guinea	1992	100	8.5	5.7	0.3	10.5	74.6	0.4	5004
Kenya	1993	100	44.2	11.0	3.0	7.8	33.7	0.4	3113
Madagascar	1992	100	36.0	4.3	0.9	5.2	53.4	0.0	3111
Malawi	1992	100	42.3	13.4	2.1	8.6	33.4	0.2	3038
Mali	1987	100	11.0	1.2	0.7	3.6	83.3	0.1	2811
Morocco	1992	100	36.5	7.6	1.0	2.9	51.4	0.6	2994
Namibia	1992	100	25.9	4.0	0.5	8.8	60.3	0.4	1606
Niger	1992	100	14.4	4.6	1.3	10.4	69.1	0.2	5314
Nigeria	1990	100	12.2	9.4	0.0	10.2	68.2	0.0	6465
Rwanda	1992	100	49.8	11.6	0.6	1.6	35.9	0.5	2984
Senegal	1992/93	100	18.2	6.3	3.5	9.5	62.2	0.3	4171
Sudan	1989/90	100	13.1	4.0	1.3	4.7	76.8	0.1	4932
Tanzania	1991/92	100	19.0	6.6	1.6	16.5	55.9	0.3	5409
Togo	1988	100	25.6	11.9	2.3	3.5	55.0	1.7	1623
Tunisia	1988	100	36.3	8.8	5.1	5.1	44.7	0.0	2015
Uganda	1988/89	100	11.9	6.9	2.6	7.8	70.8	0.0	3025
Zambia	1992	100	34.5	12.2	1.4	6.9	44.8	0.2	3780
Zimbabwe	1988	100	35.2	9.4	5.9	8.2	40.1	1.2	1504

(a) Data refers to all women who have had sexual intercourse and were not using contraceptive methods at time of survey.

- means no data

Source: Compiled from various country survey reports.



Table 23: Percentage distribution of women who were not using a contraceptive method and who did not intend to use in the future by reason for not using

Reason for not using	Country and year of survey										
	Burkina-Faso (a)	Cameroon	Egypt (a)	Ethiopia	Ghana (a)	Guinea	Kenya	Mada-gascar	Malawi (a)	Morocco	Namibia
	1993	1991	1992	1990	1993	1992	1993	1992	1992	1992	1992
Want children	40.5	64.1	26.9		32.8	65.5	22.1	54.6	30.3	46.2	52.2
Lack of knowledge	17.4	3.6	0.3	15.8	13.0	6.6	5.3	16.1	9.4	3.0	12.2
Partner opposed	2.0	1.1	3.4	3.6	1.8	0.6	3.9	1.1	2.7	7.2	1.4
Side effects	1.2	1.3	2.9	4.3	6.5	0.6	10.0	1.8	4.2	7.0	2.0
Fears sterility	0.0	0.0	0.0				1.5	0.0	0.0	0.0	0.0
Other health concerns	1.2	1.2	8.1		2.6	0.8	4.2	2.0	5.6	9.7	3.6
Hard to get methods	1.1	2.1	0.1	0.8	0.5	0.8	0.2	0.6	0.0	0.2	1.5
Religion	1.6	3.1	1.0	1.4	2.3	9.9	6.6	0.6	0.3	2.6	1.4
Opposed to family planning	1.7	1.4	0.3	2.0	3.7	0.9	3.9	1.3	1.1	0.6	3.4
Fatalistic	2.4	3.7	9.4	35.2	3.2	1.1	1.2	1.0	4.5	0.3	0.4
Other people opposed	0.2	0.2	0.3	0.2	0.7	0.0	0.2	0.4	0.4	0.3	0.0
Infrequent sex	3.7	0.7	7.1		3.2	0.5	1.5	0.9	1.0	4.9	0.2
Difficult to get pregnant	6.8	6.3	23.7		12.5	2.0	22.0	5.4	26.2	5.7	8.2
Menopausal/had hysterectomy	10.0	7.4	12.7	5.2	11.2	4.3	12.0	7.4	9.3	10.3	6.1
Inconvenient	0.8	0.5	0.4	0.3	1.3	3.3	1.8	3.0	0.5	0.3	
Cost too much	1.0	0.6	0.1	0.0	0.3	0.3	0.0	0.9	0.2	0.2	0.1
Other	1.5	0.4	1.8	25.6	0.8	1.0	2.2	0.1	1.2	1.5	2.3
Don't know	7.0	2.3	1.4	5.6	3.7	1.7	1.3	1.1	3.0	0.1	5.0
Missing	0.0	0.0	0.0	0.0	0.0	0.0	0.2	1.8	0.0	0.1	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	2162	1723	2239	2437014 (b)	1063	3736	1049	1660	1016	1538	969

Table 23 (Cont'd.): Percentage distribution of women who were not using a contraceptive method and who did not intend to use in the future by reason for not using

Reason for not using	Country and year of survey					
	Niger 1992	Nigeria 1990	Rwanda 1992	Senegal 1992/93	Tanzania 1991/92	Zambia (a) 1992
Want children	50.8	47.1	35.7	40.7	36.4	36.7
Lack of knowledge	14.9	11.7	3.2	9.4	9.0	10.6
Partner opposed	2.5	2.5	2.6	2.2	3.1	3.7
Side effects	0.2	2.9	7.3	1.8	3.4	4.5
Fears sterility	0.0	0.0	0.0	0.0	0.0	0.0
Other health concerns	1.3	1.1	4.0	1.6	1.4	1.5
Hard to get methods	1.9	0.5	0.2	0.2	2.1	0.8
Religion	2.3	12.2	2.4	10.5	0.5	1.3
Opposed to family planning	0.7	3.9	0.1	3.2	7.7	2.8
Fatalistic	2.8	5.7	5.0	7.8	5.2	0.6
Other people opposed	0.3	0.4	0.4	0.3	0.1	0.3
Infrequent sex	0.8	0.9	2.9	1.9	1.8	0.7
Difficult to get pregnant	7.0	4.2	8.5	7.8	12.0	20.2
Menopausal/had hysterectomy	5.8	3.2	21.0	5.5	11.3	10.7
Inconvenient	3.0	0.8	1.6	2.1	1.2	1.0
Cost too much	0.8	0.4	0.1	0.3	0.1	0.2
Other	4.0	0.5	3.4	0.1	1.1	2.4
Don't know	0.9	2.0	1.3	1.1	3.5	1.9
Missing	0.0	0.0	0.2	3.4	0.1	0.1
Total	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	3673	4408	1072	2593	3025	1693

(a) Data on Burkina Faso, Egypt, Ghana, Kenya, Malawi and Zambia refer to married women

(b) Weighted number

Source: Compiled from various country survey reports.

Table 24: Percentage distribution of currently married women who know a contraceptive method by number of times family planning was discussed with husband in the year preceeding the survey

Country	Year of survey	Number of times family planning discussed				Total	Number of women
		Never	Once or twice	Three times or more	Missing		
Botswana	1988	28.5	43.1	27.2	1.1	100.0	1619
Burkina Faso	1993	75.1	10.4	14.3		100.0	(a) 4359
Burundi	1987	39.5	28.8	28.9	2.7	(b) 100.0	2095
Cameroon	1991	63.0	12.0	25.0	0.0	100.0	1963
Ghana	1993	53.1	20.1	25.9	0.8	100.0	2895
Guinea	1992	77.9	6.5	15.2	0.0	100.0	1387
Kenya	1993	33.9	30.1	35.7	0.1	100.0	4500
Liberia	1986	64.8	18.6	16.3	0.0	100.0	2470
Madagascar	1992	41.0	22.2	36.6	0.2	100.0	2454
Malawi	1992	42.7	32.4	24.1	0.7	100.0	3242
Niger	1992	81.2	10.9	7.8	0.0	100.0	4293
Nigeria	1990	58.1	24.0	17.0	1.0	100.0	2999
Rwanda	1992	30.5	16.9	51.6	1.0	100.0	3722
Senegal	1992/93	70.9	14.1	14.9	0.1	100.0	3359
Sudan	1989/90	52.8	27.0	20.1	0.1	100.0	3856
Tanzania	1991/92	56.0	25.6	18.1	0.3	100.0	4746
Togo	1988	62.9	19.1	17.8	0.1	100.0	2350
Uganda	1988/89	59.6	26.5	13.8	0.0	100.0	2670
Zambia	1992	41.8	31.3	26.6	0.2	100.0	4083
Zimbabwe	1988	30.9	21.6	47.5	0.0	100.0	2609

(a) Includes cases that were not stated; (b) includes 2.4% of women in marriage for less than one year.

Source: Compiled from various country survey reports.

Table 25(a): Percentage distribution of currently married women who know a contraceptive method by approval of family planning and by their perception of their husband's approval

Country	Year of survey	Respondent approves			Respondent disapproves			Both disapprove	Missing	Total	No. of women
		Both approve	Husband disapproves	Husband's attitude is unknown	Husband approves	Husband's attitude is unknown					
Burkina Faso	1993	28.8	10.7	29.3	1.7	17.3		8.7	3.4	100	4359
Egypt (a)	1992	76.3	9.9	5.1	1.2	0.7		3.0	3.9	100	9014
Ghana (a)	1993	61.4	8.8	18.8	2.0	3.5		4.8	0.7	100	2895
Guinea	1992	24.5	9.0	12.1	4.7	14.3		32.5	3.0	100	1367
Kenya	1993	62.9	13.1	13.4	1.2	3.1		4.6	1.9	100	4500
Madagascar	1992	55.5	11.3	13.4	1.9	5.2		11.1	1.6	100	2454
Malawi (a)	1992	70.8	9.4	11.7	1.6	3.6		1.8	1.1	100	3242
Namibia (a)	1992	47.3	10.0	9.6	3.9	5.7		14.9	2.6	100	1870
Niger	1992	36.4	11.4	22.7	2.5	10.6		16.1	0.3	100	4293
Nigeria	1990	43.1	12.0	14.3	-	-		-	-	-	2999
Rwanda	1992	68.7	11.2	12.6	1.4	1.0		3.1	2.0	100	3722
Senegal	1992/93	25.7	15.6	25.0	1.4	8.4		15.7	8.2	100	3359
Tanzania (a)	1991/92	43.6	16.8	24.0	1.3	6.6		7.4	0.3	100	4746
Zambia (a)	1992	49.8	16.5	14.6	2.7	4.9		10.7	0.7	100	4083

(a) Excludes sterilized women; - means no data available

Source: Compiled from various country survey reports.

Table 25(b): Percentage distribution of currently married women who know a contraceptive method who approve of family planning and their knowledge of husband's approval

Country	Year of survey	Woman approves	Woman says husband approves	Woman says husband disapproves	Woman does not know husband's opinion	No. of women
Botswana	1988	90.4	57.1		0.0	1619
Burundi	1987	94.4	69.8		0.0	2059
Cameroon	1991	60.3	28.5	16.4	15.5	1963
Liberia	1986	46.4	28.7			-
Sudan	1989/90	63.6	37.3			3856
Togo	1988	68.9	36.8			2350
Uganda	1988/89	70.5	26.4			2670

- means no data available

Source: Compiled from various country survey reports.

Table 26: Percentage distribution of currently married women by desire for more children

Country	Year of survey	Desire for more children							Sterilized	Declared infecund	Missing	Total	No. of women
		Wants another child soon (a)	Wants another child later (b)	Wants another child but unsure when	Un decided	Wants no more children							
Botswana	1988	23.8	29.2	4.3	3.8	32.7 (c)			5.0	1.2		100.0	1708
Burkina Faso	1983	24.9	44.5	2.2	5.8	18.8	0.3		3.4	0.2		100.0	5326
Burundi	1987	16.3	52.9	3.1	2.1	23.6			2.0	-		100.0	2669
Cameroon	1991	31.7	34.7	6.6	4.5	12.4	1.2		8.9	-		100.0	2868
Egypt	1992	12.0	15.9	0.7	2.2	65.6	1.1		2.3	-		100.0	9153
Ghana	1983	16.3	39.3	0.7	5.4	33.0	0.9		3.7	0.6		100.0	3204
Guinea	1992	33.1	32.7	4.1	8.4	14.2	0.2		6.8	0.5		100.0	5092
Kenya	1993	11.6	26.0	1.0	6.3	46.2	5.5		3.0	0.3		100.0	4629
Liberia	1986	33.0	30.9	11.4	7.5	17.2 (c)			-	-		100.0	3538
Madagascar	1982	24.4	30.0	0.4	2.0	39.6	0.9		2.5	0.1		100.0	3736
Malawi	1992	18.5	37.3	2.6	9.4	23.3	1.7		7.1	0.1		100.0	3492
Mali	1987	32.8	32.4	9.3	9.1	16.5			-	-		100.0	2948
Morocco	1992	18.1	24.2	0.2	3.1	49.0	3.0		2.4	0.1		100.0	5118
Namibia	1992	25.9	29.7	1.5	5.7	25.8	7.7		2.6	1.1		100.0	2259
Niger	1992	34.9	45.2	1.3	6.0	8.9	0.1		3.5	0.0		100.0	5561
Nigeria	1990	31.2	32.8	0.0	13.6	15.1	0.3		4.4	2.6		100.0	6880
Rwanda	1992	15.6	42.4	0.3	1.8	36.0	0.7		2.3	1.0		100.0	3785
Senegal	1992/93	27.8	39.0	3.1	6.6	19.7	0.4		3.2	0.1		100.0	4505
Sudan	1989/90	33.1	31.9	0.9	7.5	24.9			1.7	0.1		100.0	5400
Tanzania	1991/92	26.1	41.7	1.3	2.8	21.4	1.7		4.8	0.3		100.0	6038
Togo	1988	19.2	47.3	4.9	3.7	24.8			-	-		100.0	2454
Tunisia	1988	11.8	21.3	3.3	3.8	57.3			2.5	-		100.0	4012
Uganda	1988/89	38.6	33.4	2.0	3.1	19.4			3.5	-		100.0	3180
Zambia	1992	26.3	40.6	0.9	4.4	22.0	2.1		3.5	0.2		100.0	4457
Zimbabwe	1988	22.6	35.3	1.1	5.9	32.7			2.0	0.3		100.0	2643

(a) Wants next birth within 2 years; (b) wants to delay next birth for 2 or more years

(c) Includes sterilized women

Source: Compiled from various country survey reports.

Table 27: Percentage distribution of currently married women (including those who are sterilized) who want no more children by number of living children

Country	Year of survey	Number of living children (a)							Total
		0	1	2	3	4	5	6+	
Algeria	1992	2.4	11.1	25.1	41.5	64.6	79.1 (c)		53.2
Botswana	1988	1.9	5.1	22.5	26.6	48.5 (b)			32.7
Burkina Faso	1993	0.8	2.2	4.5	12.0	21.7	31.6	56.2	19.1
Burundi	1987	1.2	2.2	5.6	14.9	43.1 (b)			23.6
Cameroon	1991	0.2	1.3	4.5	7.5	11.6	21.4	40.0	13.6
Egypt	1992	1.9	8.8	59.0	80.5	88.9	90.7	93.1	66.8
Ghana	1993	0.6	2.6	16.9	30.7	48.4	54.9	79.0	34.0
Guinea	1992	1.5	2.6	5.6	10.2	17.3	27.6	41.1	14.4
Kenya	1993	0.4	7.5	26.3	46.7	65.3	71.4	83.6	51.8
Liberia	1986	2.4	1.9	5.5	9.8	23.0	33.0	56.5	17.2
Madagascar	1992	0.8	5.5	18.2	40.5	51.9	57.9	78.8	40.6
Malawi	1992	1.6	5.8	12.1	18.2	34.4	44.6	59.6	25.0
Mali	1987	3.6	4.2	7.6	14.6	31.5 (b)			16.5
Morocco	1992	1.3	6.7	28.8	52.1	67.4	79.2	87.8	52.0
Namibia	1992	8.2	14.8	34.6	35.3	38.7	40.5	45.7	33.5
Niger	1992	1.4	2.5	4.2	5.8	8.3	11.8	29.9	9.0
Nigeria	1990	1.4	3.3	5.1	8.8	16.9	24.0	44.3	15.4
Rwanda	1992	1.4	2.2	13.1	24.6	44.9	53.6	74.9	36.7
Senegal	1992/93	1.0	1.4	4.2	9.0	16.6	28.3	52.7	20.2
Sudan	1989/90	0.7	3.3	10.9	16.2	23.3	36.5	49.3	24.9
Tanzania	1991/92	1.7	2.8	8.5	12.0	25.2	34.9	59.6	23.1
Togo	1988	0.7	1.0	4.8	13.1	48.7 (b)			24.8
Tunisia	1988	1.8	9.2	37.0	59.2	81.6 (b)			57.3
Zambia	1992	1.0	3.0	7.7	10.5	24.3	33.6	61.8	24.1
Zimbabwe	1988	2.5	4.4	15.4	19.3	53.9 (b)			32.7

(a) Include current pregnancy; (b) Figure refers to the category 4+; (c) Figure refers to the category 5+

Source: Compiled from various country survey reports.

**Table 28: Percentage distribution of currently married women with unmet need for family planning, met need for family planning, and the total demand for family planning**

Country	Year of survey	Unmet need for family planning (a)			Met need for family planning (currently using) (b)			Total demand for family planning (c)			Percentage of demand satisfied	No. of women
		For spacing	For limiting	Total	For spacing	For limiting	Total	For spacing	For limiting	Total		
Burkina Faso	1993	20.3	8.8	29.1	5.5	2.5	7.9	25.8	11.3	37.0	21.4	5326
Cameroon	1991	12.4	9.6	22.0	11.0	5.0	16.1	23.4	14.6	38.0	42.2	
Egypt	1992	6.8	13.3	20.1	7.8	39.3	47.1	15.1	53.8	69.0	70.9	9153
Guinea	1992	18.3	6.4	24.7	0.9	0.9	1.7	19.2	7.2	26.4	6.5	5092
Ghana	1993	25.3	13.3	38.6	10.5	9.7	20.3	35.8	23.0	58.8	34.4	3204
Kenya	1993	21.6	14.8	36.4	9.9	22.9	32.7	31.5	37.7	69.2	47.3	4629
Madagascar	1992	15.8	18.8	34.6	6.4	10.3	16.7	22.3	29.1	51.4	32.6	3736
Malawi	1992	19.8	16.5	36.3	7.4	5.7	13.0	27.2	22.2	49.3	26.4	3492
Morocco	1992	7.9	11.4	19.3	14.1	27.4	41.5	24.1	40.2	64.3	69.2	5118
Namibia	1992	15.7	7.8	23.5	11.2	17.7	28.9	26.9	25.5	52.4	55.1	2259
Niger	1992	14.1	5.1	19.2	3.8	0.7	4.4	17.9	5.8	23.6	18.8	-
Nigeria	1990	11.5	9.3	20.8	3.4	2.7	6.0	14.9	11.9	26.8	22.5	-
Rwanda	1992	21.0	19.4	40.4	10.2	11.0	21.2	31.2	30.4	61.6	34.4	-
Senegal	1992/93	19.3	8.7	27.9	4.3	3.1	7.4	23.6	11.8	35.4	21.0	4505
Sudan	1989/90	15.5	13.4	28.9	5.0	3.6	8.7	20.5	17.1	37.6	23.0	-
Tanzania	1991/92	18.0	12.1	30.1	5.9	4.5	10.4	23.9	18.6	40.5	25.7	6038
Zambia	1992	21.4	12.1	33.4	9.0	6.2	15.2	30.3	18.3	48.6	31.2	4457

(a) Unmet need for spacing includes pregnant women whose pregnancy was mistimed, amenorrhoeic women whose last birth was mistimed, and women who are neither pregnant nor amenorrhoeic and who are not using any method of family planning and say they want to wait 2 or more years for their next birth. Also included in unmet need for spacing are women who are unsure whether they want another child or who want another child but are unsure when to have the birth. Unmet need for limiting refers to pregnant women whose pregnancy was unwanted, amenorrhoeic women whose last child was unwanted and women who are neither pregnant nor amenorrhoeic and who are not using any method of family planning and who want no more children.

(b) Using for spacing is defined as women who are using some method of family planning and say they want to have another child or are undecided whether to have another. Using for limiting is defined as women who are using and who want no more children. Note that the specific methods used are not taken into account here.

(c) Unmet need and current use.

Data not available

Source: Compiled from various country survey reports



Table 29: Mean ideal number of children for all women by age

Country	Year of survey	Age of women							Total
		15-19	20-24	25-29	30-34	35-39	40-44	45-49	
Algeria	1992	3.5	3.8	3.8	4.1	4.4	4.6	4.7	-
Botswana	1988	3.7	4.2	4.8	5.2	5.7	6.0	6.2	4.7
Burkina Faso	1993	5.4	5.4	5.6	5.8	6.3	6.6	6.6	5.7
Burundi	1987	5.1	5.0	5.2	5.5	5.9	5.7	5.5	5.3
Cameroon	1991	5.9	6.2	6.7	7.5	7.5	8.3	8.5	6.8
Egypt (a)	1992	2.5	2.6	2.7	2.9	3.0	3.0	3.2	2.9
Ghana	1993	3.6	3.9	4.4	4.8	4.8	5.1	5.5	4.4
Guinea	1992	5.5	5.5	5.9	6.3	6.7	7.2	7.2	6.2
Kenya	1993	3.5	3.4	3.6	4.0	4.1	4.1	4.5	3.7
Liberia	1986	5.2	5.5	5.9	6.2	6.9	7.4	7.5	6.0
Madagascar	1992	5.1	4.9	5.4	5.8	5.9	6.5	7.2	5.5
Malawi	1992	4.3	4.4	4.9	5.6	5.6	6.3	6.4	5.1
Mali	1987	6.7	6.3	6.9	7.2	7.2	7.2	7.7	6.9
Morocco	1992	2.9	3.0	3.1	3.6	4.0	4.2	4.6	3.4
Namibia	1992	4.0	4.3	4.8	5.3	6.0	6.8	6.7	5.0
Niger	1992	7.1	7.7	8.3	8.7	9.2	9.0	9.7	8.2
Nigeria	1990	5.3	5.3	5.7	6.5	6.1	7.0	7.0	5.8
Rwanda	1992	4.1	4.0	4.2	4.4	4.5	4.5	4.5	4.2
Senegal	1992/93	5.4	5.6	5.8	6.0	6.3	6.3	6.6	5.9
Sudan (a)	1989/90	5.0	5.2	5.6	5.7	6.4	6.9	7.4	5.8
Swaziland	1988	3.7	3.9	4.1	4.4	4.5	5.1	5.1	4.2
Tanzania	1991/92	5.5	5.4	5.8	6.4	7.0	7.2	7.5	6.1
Togo	1988	4.7	5.0	5.4	5.7	5.7	5.7	5.9	5.3
Tunisia (a)	1988	3.1	3.1	3.3	3.5	3.6	3.6	4.0	3.5
Uganda	1988/89	5.9	5.9	6.3	6.8	7.1	7.5	7.6	6.4
Zambia	1992	5.1	5.3	5.6	6.1	6.7	7.1	8.0	5.8
Zimbabwe	1988	3.9	4.2	4.9	5.4	5.9	6.2	6.9	4.9

(a) Data on Egypt Sudan, and Tunisia refer to ever married women

- means no data

Source: Compiled from various country survey reports.

Table 30: Percentage distribution of births in the five years  
preceding the survey by fertility planning status

Country	Year of survey	Planning status of birth					Number of births
		Wanted then	Wanted later	Not wanted	Missing	Total	
Burkina Faso	1993	74.6	21.0	3.2		100.0	(a) 7058
Cameroon	1991	79.0	16.0	4.8		100.0	(a) 3887
Egypt	1992	65.0	9.0	29.9	0.0	100.0	9638
Ghana (b)	1993	56.6	33.4	9.0	0.9	100.0	2572
Guinea	1992	87.0	7.6	3.2		100.0	(a) 6022
Kenya	1993	47.7	34.2	16.7	1.3	100.0	6732
Madagascar	1992	66.7	9.5	14.0	9.8	100.0	6246
Malawi	1992	58.8	26.6	14.0	0.6	100.0	5168
Morocco	1992	65.2	15.2	19.3	0.3	100.0	5826
Namibia	1992	65.1	21.4	12.3	1.2	100.0	4297
Niger	1992	86.0	11.1	2.0		100.0	(a) 8020
Nigeria	1990	86.6	8.1	2.3	3.1	100.0	9356
Rwanda	1992	49.0	24.1	25.5		100.0	(a) 6213
Senegal	1992/93	70.2	23.4	4.6	0.6	98.8	(a) 6278
Swaziland	1988	65.5	26.0	8.5	0.0	100.0	3207
Tanzania	1991/92	75.5	15.2	8.1	1.2	100.0	9065
Zambia	1992	65.8	26.0	7.4	0.8	100.0	7160

(a) Includes missing cases

(b) Data refers to the period three years preceding the survey

Source: Compiled from various country survey reports.

**Table 31: Total wanted fertility and total fertility for the three years preceeding the survey**

Country	Year of survey	Wanted total fertility			Total fertility rate		
		Urban	Rural	Total	Urban	Rural	Total
Botswana (a)	1988	3.8	5.0	4.7	4.1	5.4	5.0
Burkina Faso (a)	1993	3.9	6.5	6.0	5.0	7.3	6.9
Cameroon	1991	4.5	5.7	5.2	5.2	6.3	5.8
Egypt	1992	2.0	3.4	2.7	2.9	4.9	3.9
Ghana	1993	2.9	4.9	4.2	4.0	6.4	5.5
Guinea	1992	4.5	5.3	5.1	5.2	5.9	5.7
Kenya	1993	2.5	3.7	3.4	3.4	5.8	5.4
Madagascar	1992	3.0	5.8	5.2	3.8	6.7	6.1
Malawi	1992	4.4	5.9	5.7	5.5	6.9	6.7
Morocco	1992	1.7	3.6	2.7	2.5	5.5	4.0
Namibia	1992	3.4	5.8	4.8	4.0	6.3	5.4
Niger	1992	6.3	7.3	7.1	6.7	7.5	7.4
Nigeria	1990	4.8	6.1	5.8	5.0	6.3	6.0
Rwanda	1992	3.3	4.3	4.2	4.5	6.3	6.2
Senegal	1992/93	3.8	5.9	5.1	5.1	6.7	6.0
Tanzania	1991/92	*	5.9	5.6	**	6.6	6.3
Tunisia (a)	1988	2.9	4.8	3.7	3.5	5.6	4.3
Zambia	1992	4.7	6.2	5.4	5.8	7.1	6.5

(a) Data refers to the five year period preceeding the survey

\* Data was given as 3.7 for Dar es Salaam urban and 4.8 for other urban areas on Mainland

\*\* Data was shown as 4.0 for Dar es Salaam urban and 5.6 for other urban areas on Mainland

Source: Compiled from various country survey reports

Table 32: Percentage distribution of all men and currently married men who know contraceptive methods

Country	Year of survey	Know any method		Know any modern method		Know any traditional method	
		All men	Currently married men	All men	Currently married men	All men	Currently married men
Burkina Faso	1993	86.3	84.4	82.7	79.9	65.9	67.2
Burundi	1987	-	91.6	-	75.2	-	85.3
Egypt	1992	-	96.7	-	96.7	-	75.2
Ghana	1993	91.1	94.0	90.2	92.9	71.4	77.7
Guinea	1992	56.5	54.9	55.3	53.3	26.7	25.2
Kenya	1993	98.9	98.8	97.8	97.3	88.7	89.9
Malawi	1992	95.8	97.3	93.7	94.6	78.7	80.7
Mali	1987	65.4	-	54.0	-	53.5	-
Morocco	1992	-	97.7	-	97.4	-	69.4
Niger	1992	-	85.4	-	74.0	-	70.5
Rwanda	1992	-	98.2	-	97.4	-	93.6
Senegal	1992/93	-	79.9	-	73.9	-	54.3
Tanzania	1991/92	78.3	85.8	76.8	84.2	50.7	60.1

- means no data available

Source: Compiled from various country survey reports.

**Table 33: Percentage distribution of currently married men by knowledge of specific modern contraceptive method**

Country	Year of survey	Modern method known						Male sterilization
		Pill	IUD	Injection	Diaphragm/foam/jelly	Codom	Female sterilization	
Burkina Faso	1993	54.1	37.1	53.6	21.9	73.3	49.0	18.9
Burundi	1987	47.8	20.2	60.5	8.3	35.1	23.5	9.7
Egypt	1992	96.2	94.8	65.8	30.0	69.0	64.1	25.1
Ghana	1993	79.6	44.3	74.2	62.1	86.8	70.4	32.4
Guinea	1992	36.8	9.5	36.4	10.7	40.3	30.0	10.1
Kenya	1993	93.9	70.8	87.6	33.4	92.8	87.5	56.2
Malawi	1992	72.1	43.6	59.0	45.6	89.7	66.2	27.7
Mali (a)	1987	38.3	28.1	31.9	17.9	30.5	31.6	16.2
Morocco	1992	97.3	72.7	47.0	14.3	79.9	77.6	8.5
Niger	1992	56.7	36.9	56.7	19.4	50.7	56.0	24.2
Rwanda	1992	90.7	62.0	91.9	29.9	93.5	80.0	58.2
Senegal	1992/93	61.5	39.2	37.8	13.2	53.8	52.0	14.9
Swaziland (a)	1988	70.9	29.6	62.3	16.8 (b)	78.4	45.1	13.0
Tanzania	1991/92	76.0	34.9	38.4	37.1	71.2	60.4	27.7

(a) Data on Mali and Swaziland refers to all men

(b) Data refers to foaming tablets only

Source: Compiled from various country survey reports.

**Table 34: Percentage distribution of married men by contraceptive knowledge of condom and male sterilization and their current use**

Country	Year of survey	Have knowledge of condom	Current use of condom	Have knowledge of male sterilization	Current use of male sterilization
Burkina Faso	1993	73.3	3.7	18.9	0.1
Burundi	1987	35.1	0.7	9.7	0.0
Egypt	1992	69.0	2.3	25.1	0.0
Ghana	1993	86.8	10.4	32.4	-
Guinea	1992	40.3	1.2	10.1	-
Kenya	1993	92.8	8.8	56.2	-
Malawi	1992	89.7	6.3	27.7	0.2
Mali (a)	1987	30.5	0.5	16.2	0.0
Morocco	1992	79.9	0.6	8.5	-
Niger	1992	50.7	0.5	24.2	-
Rwanda	1992	93.5	0.2	58.2	0.0
Senegal	1992/93	53.8	1.5	14.9	-
Swaziland	1988	78.4	7.3	13.0	0.0
Tanzania	1991/92	71.2	4.1	27.7	-

- means no data available

(a) Data on Mali refers to all men

Source: Compiled from various country survey reports.

## ANNEX: SOURCE AND NOTES ON NATIONAL SURVEYS

1. "Algeria 1992 : Results from the PAPCHILD Survey" in Studies in Family Planning, Volume 25 Number 3, May/ June 1994. The original source was the Algeria Maternal and Child Health Survey conducted in the framework of the Pan Arab Project for Child Development(PAPCHILD) of the League of Arab States.

The survey covered 5,019 ever-married women aged 15 to 45 years. Fieldwork was carried out from June to July 1992.

2. Botswana Family Health Survey II 1988. Central Statistics Office, Ministry of Finance and Development Planning; Family Division, Ministry of Health, Gaborone, Botswana; and Demographic and Health Surveys, Institute for Resource Development/Macro Systems, Inc. Columbia, Maryland, USA, August 1989.

The survey covered 4,368 women aged 15-49 years. Enumeration was conducted between August and December 1988.

3. Burkina Faso Enquête Démographique et de Santé 1993. Institut National de la Statistique et de la Démographie, Ougadougou, Burkina Faso; and Demographic and Health Surveys, Macro International Inc. Calverton, Maryland, USA, Juin 1994.

The survey covered 6,354 women aged 15-49 years and 1,845 men aged 18 years and over. Enumeration was undertaken between September and December 1992.

4. Enquête Démographique et de Santé au Burundi 1987. Ministère de l'Intérieur, Département de la Population, Gitega, Burundi; and Demographic and Health Surveys, Institute for Resource Development/Westinghouse, Columbia, Maryland, USA, Octobre 1988.

The survey covered 3,970 women aged 15-49 and 542 husbands. Field work was conducted between April and July 1987.

5. Enquête Démographique et de Santé Cameroun 1991. Direction Nationale du Deuxième Recensement Général de la Population et de l'Habitat, Yaoundé, Cameroun; and Demographic and Health Surveys, Macro International Inc. Columbia, Maryland, USA, Décembre 1992.

The survey covered 4,500 women aged 15-49. Enumeration was carried out between April and September 1991.

6. Egypt Demographic and Health Survey 1992. National Population Council, Cairo, Egypt; and Demographic and Health Surveys, Macro International Inc. Calverton, Maryland, USA, November 1993.

The survey covered 9,864 ever married women aged 15-49 and 2,466 husbands. Field work was carried out from November to December 1992.

7. The 1990 National Family and Fertility Survey Report. Transitional Government of Ethiopia, Central Statistical Authority, Population Analysis and Studies Center, Addis Ababa, June 1993.

The survey was designed to represent the whole nation. However, due to security reasons, the following regions were excluded, Tigray, Assab, Northern Wello and Southern Wello. In addition, nomadic areas and areas that were not covered during the 1984 national population and housing census were also not covered during the national family and fertility survey. Although Eritrea was part of Ethiopia at the time of the survey, it was not included in the survey. The sample size was 14,680 women aged 15-49 (4,300 urban and 10,380 rural) Data was also collected on selected husbands of interviewed women. Enumeration was carried out (from mid-May to August 1990).

8. Ghana Demographic and Health Survey 1993. Ghana Statistical Service, Accra, Ghana; and Demographic and Health Surveys, Macro International Inc. Calverton, Maryland, USA, December 1994.

The survey covered 4,562 women aged 15-49 and of 1,302 men. Enumeration was carried out between September 1993 and February 1994.

9. Enquête Démographique et de Santé Guinée 1992. Direction Nationale de la Statistique et de l'Information, Ministère du Plan et des Finances, Conakry, Guinée et Calverton, Maryland, USA, Novembre 1994

The survey covered 6,065 women aged 15 - 45 years and 1,549 men aged 15-59 years. Enumeration was done in stages as follows: Conakry area 15 February to 15 March, 1992; Haute Guinée and Guinée Forestière 15 May to 31 July 1992; Moyenne Guinée and Basse Guinée 7 December 1992 to 7 March 1993.



10. Kenya Demographic and Health Survey 1993. Republic of Kenya, National Council for Population and Development; Central Bureau of Statistics, Office of the Vice President and Ministry of Planning and National Development, Nairobi, Kenya; and Demographic and Health Surveys, Macro International, Calverton, Maryland, USA, May 1994.

The survey covered 7,540 women aged 15-49 years and 2,336 men aged 20-54. Field work was conducted from mid-February to mid-August 1993.

11. Liberia Demographic and Health Survey 1986. Bureau of Statistics, Ministry of Planning and Economic Affairs, Monrovia, Liberia; and Demographic and Health Surveys, Institute for Resource Development/Westinghouse, Columbia, Maryland, USA, February 1988.

The survey covered 5,239 women aged 15-49 years. Fieldwork was carried out from February to July 1986.

12. Madagascar Enquête Nationale Démographique et Sanitaire 1992. Centre National de Recherches sur l'Environnement, Ministère de la Recherche Appliquée au Développement, Antananarivo, Madagascar; and Demographic and Health Surveys, Macro International Inc. Calverton, Maryland, USA, Février 1994.

The survey covered 6,260 women aged 15-49. Field work was carried out from May to November 1992.

13. Malawi Demographic and Health Survey 1992. National Statistical Office, Zomba, Malawi; and Demographic and Health Surveys, Macro International Inc. Calverton, Maryland, USA, January 1994.

The survey covered 4,849 women aged 15 - 49 and 1,151 men aged 20 - 54. Field work was conducted from September to November 1992.

14. Enquête Démographique et de Santé au Mali 1987. Centre d'Etudes et de Recherches sur la Population pour le Développement, Institut du Sahel, Bamako, Mali; et Demographic and Health Surveys, Institute for Resource Development/Westinghouse, Columbia, Maryland, USA, Janvier 1989.

The survey covered 3,200 women aged 15-49 and 970 men aged 20-55. Field work was conducted from March to August 1987.

15. Mauritius Contraceptive Prevalence Survey 1991. Ministry of Health; University of Mauritius, Port Louis; U.S. Department of Health and Human Services, Public Health Service; and Centers for Disease Control and Prevention, June 1993.

The survey covered 5,262 women aged 15-44 on Mauritius and Rodrigues Islands (4,753 women on Mauritius and 509 on Rodrigues Island. All ever-married women in the sample were selected for enumeration. Enumeration was from April to August 1991.

16. Maroc Enquête Nationale sur la Population et la Santé (ENPS-II) 1992. Ministère de la Santé Publique, Secrétariat Général-DPSI, Service des Etudes et de l'Information Sanitaire, Rabat, Maroc; et Demographic and Health Surveys, Macro International Inc. Columbia, Maryland, USA, Août 1993.

The survey covered 9,256 women aged 15 to 49 years and 1,336 men aged 20-70 years. Field work was from January to April 1992.

17. Namibia Demographic and Health Survey 1992. Ministry of Health and Social Services, Windhoek, Namibia; and Macro International Inc. Columbia, Maryland, USA, May 1993.

The survey covered 5,421 women aged 15-49 years. Enumeration was done from July to November 1992.

18. Niger Enquête Démographique et de Santé 1992. Direction de la Statistique et des Comptes Nationaux, Direction Générale du Plan, Ministère des Finances et du Plan, Niamey, Niger; et Macro International Inc. Columbia, Maryland, USA, Septembre 1993.

The survey covered 6,503 women aged 15-49 years and 1,570 husbands. Field work was carried out from March to June 1992.

19. Nigeria Demographic and Health Survey 1990. Federal Office of Statistics, Lagos, Nigeria; and IRD/Macro International Inc. Columbia, Maryland, USA, April 1992.

The survey covered 8,781 women aged 15-49 years. Enumeration was carried out from April to July 1990 in the southern states and from July to October 1990 in the northern states.

20. Rwanda Enquête Démographique et de Santé 1992. Office National de la Population, Kigali, Rwanda; et Demographic and Health Surveys, Macro International Inc., Calverton, Maryland, USA, Février 1994.

The survey covered 6,551 women aged 15-49 years and 598 husbands. Field work was conducted from June to October 1992.

21. Enquête Démographique et de Santé au Sénégal (EDS-II) 1992/93 Ministère de l'Economie, des Finances et du Plan, Direction de la Prévision et de la Statistique, Division des Statistiques Démographiques, Dakar, Sénégal; et Macro International Inc. Maryland, USA, Avril 1994

The survey covered 6,310 women aged 15-49 years and 1,436 men aged 20 years and over. In some places fieldwork was conducted from November 1992 to March 1993. However, due to the security situation in the south (Ziguinchor region and part of the Kolda region) field work was suspended but was resumed from July to mid-August 1993.

22. South Africa, data compiled from the United Nations Population Division Wall Chart, 1994, New York.

23. Sudan Demographic and Health Survey 1989/1990. Department of Statistics, Ministry of Economic and National Planning, Khartoum, Sudan; and Demographic and Health Surveys, Institute for Resource Development/Macro International Inc., Columbia, Maryland, USA, May 1991.

The survey covered 5,860 ever-married women aged 15-49 years in northern Sudan. The southern Sudan was not covered because of the civil unrest in that part of the country. The survey was conducted in two phases between November 15, 1989 to January 31, 1990 and March 19 to May 21, 1990.

24. Swaziland 1988 Family Health Survey. Swaziland Ministry of Health; and U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control, Atlanta, Georgia, March 1990.

The survey covered 4,263 women aged 15-49 years and 2,273 males aged 15-59 years. Field work was carried out from October 1, 1988 to January 6, 1989.

25. Tanzania Demographic and Health Survey 1991/1992. Bureau of Statistics, Planning Commission, Dar es Salaam, Tanzania, June 1993.

The survey covered 9,238 women aged 15-49 years and 2,114 men aged 15 to 60 years. Field work was carried out from October 1991 to March 1992.

26. Enquête Démographique et de Santé au Togo 1988. Unité de Recherche Démographique, Direction de la Statistique, Direction Générale de la Santé, Lomé, Togo; et Demographic and Health Surveys, Institute for Resource Development/Macro Systems, Inc. Columbia, Maryland, USA, Décembre 1989.

The survey covered 3,360 women aged 15-49 years. Field work was conducted from 22 June to 31 October 1988.

27. Enquête Démographique et de Santé en Tunisie 1988. Ministère de la Santé Publique, Office National de la Famille et de la Population, Direction de la Population et Demographic and Health Surveys, Institute for Resource Development/Macro Systems, Inc. Columbia, Maryland, USA, Octobre 1989.

The survey covered 4,184 ever-married women aged 15-49 years. Field work was conducted from 10 June to 18 October 1988.

28. Uganda Demographic and Health Survey 1988/1989. Ministry of Health, Entebbe, Uganda and Demographic and Health Surveys, Institute for Resource Development/Macro Systems, Inc. Columbia, Maryland, USA, October 1989.

The survey covered 4,730 women aged 15-49 years in 24 Districts. Nine northern districts were not surveyed due to security reasons. Field work was conducted from September 1988 to February 1989.

29. Zambia Demographic and Health Survey 1992. University of Zambia, Central Statistical Office, Lusaka, Zambia; and Demographic and Health Surveys, Macro International Inc. Columbia, Maryland, USA, March 1993.

The survey covered 7,060 women aged 15-49 years. Enumeration was carried out from mid-January to mid-May 1992.

30. Zimbabwe Demographic and Health Survey 1988. Central Statistical Office, Ministry of Finance, Economic Planning, and Development, Harare, Zimbabwe; and Demographic and Health Surveys, Institute for Resource Development/Macro Systems, Inc. Columbia, Maryland, USA, December 1989.

The survey covered 4,201 women aged 15-49 years. Field work was carried out from September 1988 to January 1989.