

CONTRACEPTIVE PREVALENCE

DEFINITION AND COMPUTATION

Contraceptive prevalence is the percentage of women who are currently using, or whose sexual partner is currently using, at least one method of contraception, regardless of the method used. It is usually reported for married or in-union women aged 15 to 49.

$$\text{Contraceptive prevalence} = \frac{\text{Women of reproductive age (15-49) who are married or in a union and who are currently using any method of contraception}}{\text{Total number of women of reproductive age (15-49) who are married or in a union}} \times 100$$

For analytical convenience, contraceptive methods are often classified as either modern or traditional. Modern methods of contraception include female and male sterilization, oral hormonal pills, the intra-uterine device (IUD), the male condom, injectables, the implant (including Norplant), vaginal barrier methods, the female condom and emergency contraception. Traditional methods of contraception include rhythm (periodic abstinence), withdrawal, prolonged abstinence, breastfeeding, douching, lactational amenorrhea method (LAM) and folk methods.

SOURCES OF THE DATA

The indicator is calculated from nationally representative household surveys with questions on current use of contraception. Surveys that commonly include this information are: Demographic and Health Surveys (DHS), Fertility and Family Surveys (FFS), Reproductive Health Surveys (RHS), Multiple Indicator Cluster Surveys (MICS), Contraceptive Prevalence Surveys (CPS) and other nationally sponsored surveys. On average, surveys are undertaken every three to five years.

World Fertility Report 2012 provides information on the source of each data point (usually denoted by an acronym). A description of each acronym is given in the table labelled "Sources". For surveys, the full name is provided in the field "Survey name".

COMMENTS AND LIMITATIONS

Differences in the survey design and implementation, as well as differences in the way survey questionnaires are formulated and administered can affect the comparability of data over time and between countries. One of the most common differences relates to the range of contraceptive methods included and the existence or not of probe questions regarding the types of methods used. The lack of probe questions, asked to ensure that

the respondent understands the meaning of the different contraceptive methods, can result in an underestimation of contraceptive prevalence.

The characteristics (age, sex, marital or union status) of the persons for whom contraceptive prevalence is measured (base population) can also affect the comparability of data on contraceptive prevalence. Illustrations of alternative base populations that are sometimes used are: sexually active women (irrespective of marital status), ever-married women, or men and women who are married or in union.

The time frame used to assess contraceptive prevalence can also vary. Often it is left to the respondent to determine what is meant by “currently using” a method of contraception. Some surveys ask about use within the past month. Occasionally, when information on current use is not collected, data on use of contraceptive methods at last sexual intercourse or during the previous year are utilized. Notes are used to indicate any differences between the data presented in *World Fertility Report 2012* and the standard definition of contraceptive prevalence given above.

Discrepancies between estimates presented in *World Fertility Report 2012* and other estimates

Generally, there is no discrepancy between estimates presented in *World Fertility Report 2012* and contraceptive prevalence published in national survey reports. However, some published national estimates of contraceptive prevalence have been adjusted by the United Nations Population Division to improve comparability.

DATA COVERAGE AND REFERENCE YEARS FOR THE DATA REPORTED

In *World Fertility Report 2012* data are provided, when available, for three reference dates: the closest years to 1970 (period 1965 to 1989), 1995 (period 1990 to 1999) and the most recent available year after 1999. Detailed distributions for each indicator by number of observations by reference dates are presented in the table labelled “Data availability”.

Data on contraceptive prevalence are provided for 183 countries or areas for of the world with a total population of 100,000 or more inhabitants in 2011. For all three reference dates, data on percentage using any contraceptive method are available for 74 countries or areas and on percentage using a modern contraceptive method for 72 countries.

Suggested citation:

United Nations, Department of Economic and Social Affairs, Population Division (2013). *World Fertility Report 2012* (United Nations publication).