Adolescent Fertility Trends

Reducing adolescent fertility is essential for improving the sexual and reproductive health and, ultimately, the social and economic well-being of adolescents. These highlights are based on estimates of the trends in adolescent fertility worldwide from 1990-1995 to 2005-2010. These trends coincide with assessments of progress in implementing the 1994 Programme of Action of the International Conference on Population and Development and the unfinished agenda of the Millennium Development Goals, both of which include a focus on reducing early childbearing, expanding access to reproductive health and investing in the human capital of youth, especially girls.

1. The decline in the adolescent birth rate has been almost universal.

- Adolescent fertility, measured by the annual number of births per 1,000 women aged 15-19 years, declined in almost all 196 countries or areas with populations of at least 90,000 (figure 1). The reduction in adolescent birth rates (ABR) from 1990-1995 to 2005-2010 occurred amidst an increase in school participation, an increase in the demand for contraception and a decrease in adolescent marriage.

2. Adolescent fertility is still high in many countries.

- Although adolescent childbearing has declined overall since 1990, progress has slowed since 2000. In many countries adolescent birth rates declined at a slower pace than total fertility. Traditionally, high levels of adolescent fertility were associated with a pattern of continued childbearing throughout women’s reproductive period. By contrast, in Latin America, adolescent fertility is still high despite declines in total fertility because fertility among older women has declined faster than among adolescents.

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Note: The boundaries on this map do not imply official endorsement or acceptance by the United Nations.

3. Early marriage is a key factor underlying adolescent fertility.

- Adolescent fertility is high in countries where the proportion of ever-married adolescents is high. Whereas sexual activity before marriage is more common than sexual initiation within marriage in 22 out of 36 countries with available data, a larger proportion of young women who have their first birth during adolescence do so within marriage rather than outside marriage in all 36 countries, except in Namibia and Swaziland. Some of these births occur among young women whose marriages are preceded by pregnancy. In only six of 31 countries where adoles-
cent fertility is high is the proportion of ever-married adolescent females less than 20 per cent, suggesting that in these countries many births occur among unmarried adolescents. The decline in adolescent marriage is a driving force in the decline of adolescent childbearing, particularly in settings where the majority of first births occur within marriage.

Figure 3: Distribution of countries by adolescent birth rate and percentage of ever-married females aged 15-19, 2005-2010

4. Many births during adolescence are unintended.

- The proportion of unintended births is higher in high-ABR countries (median of 30 per cent) than in medium-ABR countries (median of 16 per cent). Births are classified as unintended if mothers report that the births occurred sooner than wanted or were not wanted at all. The high levels of unintended childbearing among adolescents are due, in part, to barriers to accessing and using contraception and a lack of adequate information about pregnancy prevention.

5. High levels of adolescent fertility are associated with a high proportion of demand for family planning that is unsatisfied.

- In 23 out of 41 countries—18 of which are in sub-Saharan Africa—the proportion of demand that is unsatisfied is more than 50 per cent among adolescents. Unsatisfied demand for family planning represents those who want to avoid or postpone childbearing but are not using any method of contraception. High levels of unsatisfied demand indicate that adolescents face more obstacles in accessing and consistently using contraception compared to older or married women.

6. School participation is linked to lower levels of childbearing in adolescence.

- Countries that score worse on three different indicators of schooling tend to have much higher rates of adolescent childbearing. The majority of countries where adolescent fertility is high and school life expectancy is low (i.e., years of schooling that a beginning pupil can expect to spend from the start of primary through secondary levels of education) are in sub-Saharan Africa (figure 4). Out-of-school rates for girls of lower secondary school age are also highest in Africa. However, in some countries, good performance on education indicators for girls is not linked with lower adolescent childbearing. Several countries in Africa (Cabo Verde, Kenya and Namibia) and Latin America and the Caribbean (Bolivia, Colombia, Dominican Republic and Venezuela) have high adolescent birth rates despite low out-of-school rates for girls of lower secondary school age.

Figure 4: Distribution of countries by level of ABR and school life expectancy for females from primary to secondary school, 2005-2010

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