

# Malawi

## Reproductive Transitions: Unmet Need for Family Planning

### WHAT IS UNMET NEED FOR FAMILY PLANNING?

Women with unmet need are broadly defined as those who want to postpone their next birth for two years or more, or not have any more children, but they are not using contraception.<sup>1</sup>

### WHY LOOK AT UNMET NEED?

Today, more than 220 million women in developing countries have an unmet need for family planning. In reality, the number of women experiencing unmet need is likely much higher. Contraceptive needs can fluctuate due to shifts in fertility desires that occur in response to changing life circumstances such as entering a serious relationship or changes in household finances.<sup>2</sup> Accordingly, women may pass in and out of unmet need, rather than experiencing it as a one-time event. The more we understand life's reproductive transitions, the characteristics of women with need, and their reasons for not using family planning, the more we can improve family planning services and better meet the needs of women and men globally.

### WHAT IS THE SITUATION IN MALAWI?\*

- According to the latest national survey, about one-quarter of married women of reproductive age in Malawi reported having an unmet need for family planning at the time of the survey, which translates into more than 550,000 women.<sup>3</sup> Among those women, about half wanted to space their next birth, and the other half did not want to have any more children.
- The magnitude of the problem may also be greater than that captured at the time of the survey. A recent analysis shows that among married women, about 50 percent—or more than 1 million women—experienced an episode of unmet need at some point during the previous five years. Among those women, 200,000 experienced two or more episodes of need in the same time period.<sup>4</sup>

- Between 2000 and 2010, unmet need among younger women (ages 15-19) decreased from 29 percent to 25 percent. However, for older women ages 35-49 who want no more children, unmet need has not changed since 2000.
- Women who want to avoid pregnancy, but are not using an effective method of contraception, account for a large majority of unplanned pregnancies. In Malawi, 45 percent of pregnancies are unplanned.
- About one-quarter of adolescents (15-19) and young adults (20-29) have an unmet need for family planning, compared to 28 percent among 30-to-39-year-olds. The age group with the lowest level of unmet need is 45-to-49-year-olds (20 percent).

### General Reproductive Health Data

- Maternal mortality – 675 deaths/100,000 live births
- Infant mortality – 66 deaths/1,000 live births
- Under-5 mortality – 112 deaths/1,000 live births
- Total fertility rate – 5.7 children per woman
- Mean ideal number of children: 4.0 children
- Median birth interval – 36 months
- Median age at first childbearing – 18.9 years
- Unplanned pregnancies – 45%
- Contraceptive prevalence rate (all methods) – 46%
  - Traditional methods – 4%
  - Modern methods – 42%
    - Pill – 2.5%
    - Injectables – 26%
    - Male condom – 2.4%
    - IUD – 0.3%
    - Implants – 1.3%
    - Female sterilization – 10%

Unmet need for family planning among currently married women:

- Total unmet need – 26%
  - Unmet need for spacing – 14%
  - Unmet need for limiting – 12%

*Malawi Demographic and Health Survey, 2010*

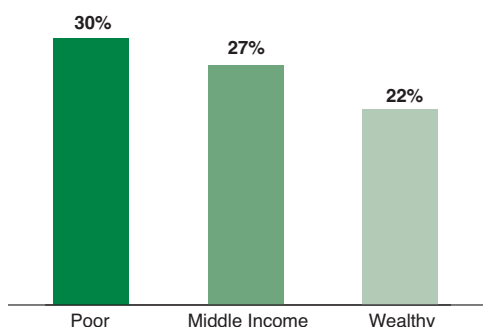
\* Unless otherwise noted, all data used in this fact sheet are from the *Malawi Demographic and Health Survey, 2010* (Calverton, MD: National Statistical Office (NSO) and ICF Macro, 2011).

- There is no significant variation between urban and rural areas, or among Central, Southern, and Northern regions with about one-quarter of women experiencing unmet need across the country.

## WHY ARE WOMEN IN MALAWI NOT USING CONTRACEPTION?

- A recent analysis revealed the top four reasons why women who say they want to avoid a pregnancy are not using family planning.<sup>5</sup> Method-related reasons—especially fear of side effects and health concerns—were the most commonly cited reasons for not using (31 percent). The second top reason was that women were postpartum (24 percent), although many women are not sure how long they are safe from getting pregnant after giving birth. The third top reason for not using family planning is having sex infrequently (22 percent); many wrongly believe that if they only have sex occasionally, they are not at risk, and therefore don't need to use family planning. The fourth most frequently cited reason was opposition to use, either by the husband or partner or owing to perceived religious prohibition (13 percent).
- While lack of contraceptive supplies—and logistic problems in getting the contraceptives to the provider—continue to be a challenge in some districts, only a small proportion of women (2 percent) stated that lack of access (distance or costs) was the reason for not using.

### Poor women have the highest level of unmet need, but 1 out of 5 wealthy women also experience an unmet need for family planning



## WHAT ARE THE POLICY AND PROGRAM IMPLICATIONS?

The evidence indicates several priority action areas requiring attention including the need to:

- Reach out to women and their partners at multiple stages in their reproductive lives to better satisfy changing needs—from adolescents and young women and men, to middle-aged and older couples.
- Focus on reducing the top barriers to family planning uptake, especially improving counseling services to reduce health concerns and fear of side effects, and ensuring that women are counseled on risk of pregnancy and family planning options when they are postpartum.
- Ensure that women and men have access to a full range of contraceptive methods (short-term, long-term, and permanent) to satisfy their reproductive needs at different life stages.
- Take advantage of all opportunities! With so many women experiencing unplanned pregnancies, providers need to integrate family planning counseling, services, and follow-up into postpartum programs as well as other services that provide an opportunity to reach women—postabortion care, child survival programs, community health programs, and HIV services, among others.

Recognizing reproductive transitions is an important step toward satisfying the family planning needs of the nation. Ultimately, this goal calls for renewed efforts to address women's and men's needs at different stages of their reproductive lives, and tailor family planning services to better meet life's changing circumstances.

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