

Youth Reproductive Health: Satisfying 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 are not using a family planning method.¹

WHY LOOK AT UNMET NEED IN YOUTH?

Although countries are making progress in addressing the family planning needs of youth ages 15 to 24 globally, challenges persist. Inadequate availability of services, lack of knowledge, legal barriers, and negative provider attitudes all prevent young people from obtaining services. But youth have a right to sexual and reproductive health care—including family planning services. In addition to benefitting the health and well-being of young people themselves, increased investment in family planning for youth contributes to broader development goals such as improvements in the overall status of women and reductions in poverty among families. The more we understand the characteristics of young women with unmet need, and the reasons they are not using family planning, the more we can improve services and better meet the needs of young women and men around the world.

WHAT IS THE SITUATION IN THE DEMOCRATIC REPUBLIC OF THE CONGO (DRC)?

- According to the latest national survey, about 30 percent of young married women in the DRC reported having an unmet need for family planning, and 45 percent of sexually active unmarried women reported having an unmet need.² This proportion of women translates into more than 1,332,000 women—an estimated 934,000 married and 398,000 unmarried women.³
- Between 2007 and 2013, unmet need for family planning among young married women decreased slightly from 32 percent to 30 percent. However, among sexually active unmarried women, unmet need increased dramatically from 38 percent to 45 percent.⁴
- One outcome of high unmet need is unplanned pregnancies. In the DRC, 30 percent of pregnancies among married women ages 15 to 24 are unplanned.
- Among married women, use of contraception is low, with only 7 percent using a modern method of family planning and 10 percent using a traditional method.⁵
- Total demand for family planning—women currently using plus those with unmet need—is almost half the population of young married women (47 percent) and 91 percent for unmarried women.⁶

- An estimated 26 percent of young married women with no education, and 28 percent with only a primary education, experience unmet need, compared to 33 percent of women with secondary education. However, 69 percent of sexually active unmarried women with no education have an unmet need, compared to 60 percent with primary education and 45 percent with secondary education.⁷
- According to a study by the Population Reference Bureau, more than half (58 percent) of young married women with demand for contraception who have experienced intimate partner violence (IPV) in the last 12 months have an unmet need for family planning.⁸

Youth Reproductive Health Data (Ages 15-24)

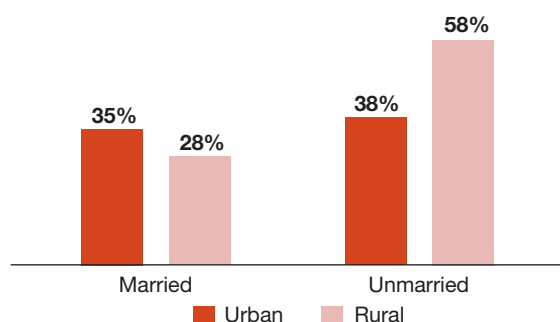
- Marital status for young women
 - 15-19 – 21%
 - 20-24 – 60%
- Median age of marriage – 19
- Sexually active by age 15
 - Women – 20%
 - Men – 19%
- Median age at first childbearing – 19.9 years
- Infant mortality
 - <20 – 74 deaths/1,000 live births
 - 20-29 – 63 deaths/1,000 live births
- Under-5 mortality
 - < 20 – 124 deaths/1,000 live births
 - 20-29 – 108 deaths/1,000 live births
- Modern contraceptive use among married women
 - 15-19 – 5%
 - 20-24 – 8%
- Modern contraceptive use among unmarried sexually active women
 - 15-19 – 20%
 - 20-24 – 25%
- Unmet need for family planning
 - Married – 30%
 - Unmarried – 45%
- Total demand for family planning (currently using contraceptive + unmet need)
 - Married – 47%
 - Unmarried – 91%
- Unplanned pregnancies – 30%
- Difficulties accessing health care (all women) – 76%
- Ever experienced intimate partner violence – 58%

Source: Democratic Republic of the Congo Demographic and Health Survey 2013-2014.

WHY ARE YOUNG WOMEN IN THE DEMOCRATIC REPUBLIC OF THE CONGO NOT USING CONTRACEPTION?

- A recent analysis revealed the top four reasons why women ages 15 to 24 who say they want to avoid a pregnancy are not using family planning.⁹ About half of women with unmet need cited postpartum/breastfeeding as the number one reason for not using family planning (48 percent), although many young women are not sure how long they are safe from getting pregnant after giving birth. Opposition to use, either by the respondent, their husband or partner, or owing to perceived religious prohibition was the second most commonly cited reason for not using (23 percent). Method-related reasons—especially fear of side effects and health concerns—were the third most commonly cited reasons for not using family planning (13 percent). The same proportion (13 percent) cited “infrequent sex” as the reason for not using contraceptives; many wrongly believe that if they only have sex occasionally, they are not at risk, and therefore do not need to use family planning.
- While lack of contraceptive supplies—and logistical problems in getting the contraceptives to the provider—continue to be a challenge in some areas, only a small proportion of women (6 percent) stated that lack of access (distance or costs) was the reason for not using.

While unmet need for married and unmarried women is about the same in urban areas, more than half of sexually active unmarried women in rural areas experience unmet need



Source: Democratic Republic of the Congo Demographic and Health Survey 2013-2014.

REFERENCES

- 1 Sarah E.K. Bradley et al., *Revising Unmet Need for Family Planning* (Calverton, MD: ICF International, 2012).
- 2 Unless otherwise noted, all data for this fact sheet come from the Democratic Republic of the Congo (DRC), Demographic and Health Survey (DHS) 2013-2014 (Rockville, MD: Ministry of Monitoring, Planning, and Implementation of the Modern Revolution and Ministry of Public Health, DRC and ICF International, 2014).
- 3 Population Reference Bureau (PRB) analysis of data from the DRC DHS 2013, calculated in the manner of Kerry L.D. MacQuarrie, *Unmet Need for Family Planning Among Young Women: Levels and Trends* (Rockville, MD: ICF International, 2014).
- 4 PRB analysis of data from the DRC DHS 2013-14.
- 5 PRB analysis of data from the DRC DHS 2013-14.
- 6 PRB analysis of data from the DRC DHS 2013-14.
- 7 PRB analysis of data from the DRC DHS 2013-14.
- 8 Toshiko Kaneda, *Intimate Partner Violence and Unmet Need for Family Planning*, research brief (Washington, DC: Population Reference Bureau, 2015), available at www.prb.org/Publications/Reports/2015/unmet-need-research-brief.aspx.
- 9 PRB analysis of data from the DRC DHS 2013-14.

WHAT ARE THE POLICY AND PROGRAM IMPLICATIONS FOR YOUTH?

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

- Be responsive to the special needs of adolescents and young women and men, ensuring that services are provided in a respectful and confidential manner that does not stigmatize sexually active youth and that enables access to a full range of contraceptive methods.
- Improve and expand the provision of reproductive health information to young people using a variety of methods—including providing sexual and reproductive health education to adolescents and young people in schools and through community programs for those who are not attending school.
- Focus on reducing the leading barriers to family planning uptake—improving counseling services to reduce health concerns and fear of side effects, educating women about their bodies and when they are most at risk of getting pregnant, and breaking down cultural and social barriers to contraceptive use.
- Take advantage of all opportunities! With so many young 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—services for postabortion care, IPV, child survival, community health, and HIV, among others.

Recognizing the reproductive health rights of young people is an important step toward satisfying the family planning needs of the nation's youth. Ultimately, this goal calls for renewed efforts to address unmet need—tailoring educational programs and family planning services to better reach and respond to youth, especially during this vulnerable stage of their reproductive lives.

ACKNOWLEDGMENTS

This fact sheet was produced by the Population Reference Bureau (PRB). Funding for this publication was provided by the David and Lucile Packard Foundation.

© September 2015 Population Reference Bureau. All Rights Reserved.

PRB

INFORM
EMPOWER
ADVANCE

1875 Connecticut Ave., NW,
Washington, DC 20009 USA
(202) 483-1100 | fax 202-328-3937
popref@prb.org | www.prb.org