

CHAPTER 4



Family Planning

This chapter presents information on knowledge, use, and source of contraceptive methods in the four surveyed countries. Desire to use contraceptive methods among non-users and preferred method is also examined.

Knowledge of Contraceptives

According to the most recent survey, nearly all women surveyed in El Salvador, Honduras, and Nicaragua have heard of at least some method of contraception (Table 4.1). Knowledge of at least one method is lower among Guatemalan women in union (93.3 percent). A relatively high percentage of men in union aged 15–59 also have knowledge of at least one contraceptive method. Knowledge ranges from 95.3 percent in Guatemala to 99.9 percent in Honduras. Men's knowledge of condoms was not investigated in El Salvador. No data are available for men in Nicaragua.

In each country, condoms, oral contraceptives, injections, and female sterilization are the most widely recognized methods among both women and men (Table 4.1). With the exception of Guatemala and Honduras, knowledge of these methods is above 90 percent. Among women, knowledge of the IUD ranges from a low of 57.7 percent in Guatemala to a high of 95.7 percent in Honduras. Knowledge of rhythm ranges from

a low of 46.8 percent in Guatemala to a high of 58.5 percent in Honduras, while knowledge of withdrawal ranges from 26.7 percent in Guatemala to 53.9 percent in Nicaragua. Among men, knowledge of male sterilization or vasectomy ranges from a low of 57.0 percent in Honduras to a high of 85.1 percent in El Salvador.

Table 4.1
Knowledge of Specific Contraceptive Methods: Married Women of Fertile Age and Married Men Aged 15–59 (Most Recent Survey)

Contraceptive	El Salvador 2002/03		Guatemala 2002		Honduras 2001		Nicaragua 2001	
	Women*	Men	Women†	Men	Women*	Men	Women†	Men
At least one	98.9	99.3	93.3	95.3	99.9	99.9	99.2	
Condoms	97.9	na	68.4	85.1	98.8	99.3	94.7	na
Orals	96.2	93.0	87.9	86.6	99.0	93.1	98.2	na
Injection	97.4	92.4	86.9	83.2	98.3	87.3	96.9	na
Fem. Sterilization	94.6	96.7	82.9	83.8	98.5	94.2	90.5	na
IUD	78.7	58.9	57.7	47.9	95.7	79.1	89.7	na
Male Sterilization	58.1	85.1	62.7	73.9	58.8	57.0	64.7	na
Rhythm	56.8	63.0	46.8	55.2	58.5	59.5	55.4	na
Vaginals	41.0	51.2	37.8	39.9	45.7	43.3	38.1	na
Withdrawal	29.0	48.5	26.7	28.9	53.3	69.8	53.9	na
Norplant	21.7	13.6	16.8	11.7	5.7	6.0	7.5	na
MELA	18.6	11.6	31.5	29.5	na	na	69.6	na
Billings	14.4	10.4	inc	inc	17.9	10.2	inc	na
EOC	11.8	22.7	na	na	3.3	13.5	19.4	na

* Married women aged 15–44.
 † Married women aged 15–49.
 EOC: Emergency oral contraceptives.
 na: Not available.
 inc: Included with rhythm.

Current Use of Contraceptives

This section focuses on women in legal or consensual marriages, because they represent the majority of sexually active women, have greater frequency of intercourse, and have higher fertility and risk of unintended pregnancies. Data are not presented for married men since their use is very similar to that of married women.

According to the most recent survey, El

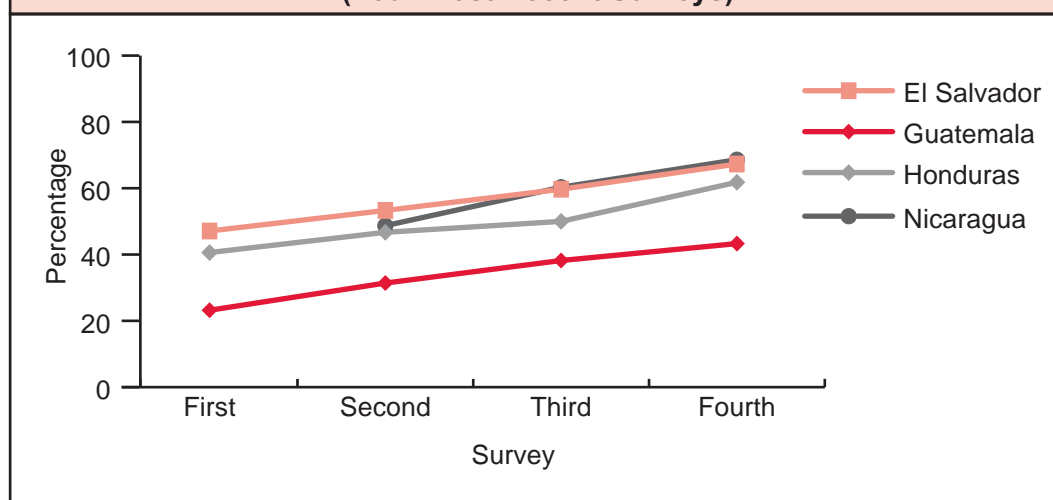
Salvador, Honduras, and Nicaragua each exhibit a relatively high prevalence of contraceptive use (over 60 percent of currently married women), while use in Guatemala is relatively low (43.3 percent) (Table 4.2). Contraceptive use is highest in Nicaragua (68.6 percent), followed closely by El Salvador (67.3 percent), while use in Honduras is 61.8 percent. As expected, urban women are more likely than their rural counterparts to be current users of contraceptives in all of the countries. The difference between urban and rural use is highest in Guatemala (22

Table 4.2
Trends in Contraceptive Use, by Area of Residence: Married Women of Fertile Age (Most Recent Survey)

Country	Year of Survey	Total	Urban	Rural
El Salvador	1988*	47.1	59.9	34.2
El Salvador	1993*	53.3	61.3	45.6
El Salvador	1998*	59.7	67.8	51.2
El Salvador	2002/03*	67.3	73.4	60.1
Guatemala	1987†	23.2	43.0	13.8
Guatemala	1995†	31.4	48.9	19.8
Guatemala	1998/99†	38.2	52.3	27.7
Guatemala	2002†	43.3	56.7	34.7
Honduras	1987*	40.6	59.3	29.9
Honduras	1991/92*	46.7	60.7	36.1
Honduras	1996*	50.0	61.7	40.4
Honduras	2001*	61.8	70.4	54.6
Nicaragua	1992/93†	48.7	61.2	33.2
Nicaragua	1998†	60.3	66.3	51.4
Nicaragua	2001†	68.6	73.3	62.3

* Married women aged 15–44.
† Married women aged 15–49.

Graph 4.1
Trends in the Use of Contraceptives, According to Last Four Surveys: Married Women of Fertile age (Four Most Recent Surveys)



percentage points) and lowest in Nicaragua (11 percentage points), indicating that rural women in Nicaragua may have greater access to family planning counseling and services than rural women living in Guatemala.

Use of contraceptive methods has been increasing steadily over the past decade in each of the countries (Graph 4.1 and Table 4.2). Since the early 1990s, use has increased by almost 20

percentage points in Nicaragua, 15 percentage points in Honduras, 14 percentage points in El Salvador, and by almost 12 percentage points in Guatemala. In all of the countries, the increase in contraceptive use has been greater in the rural area, primarily because use back in the early 1990s in the rural areas of each country was relatively low. Rural Nicaragua stands out in that use has increased by a spectacular 29 percentage points since 1992/93. In rural Honduras, use increased by almost 19 percentage points, while in rural El Salvador and rural Guatemala use increased by almost 15 percentage points. It should be pointed out that urban use in El Salvador, Honduras, and Nicaragua is over 70 percent, according to the last survey conducted in these countries. Only 56.7 percent of urban women in Guatemala were using a contraceptive method at the time of the last survey.

All of the countries profiled in this report exhibit a high reliance on contraceptive methods of high efficacy, such as female sterilization, injections, oral contraceptives, and the IUD (Table 4.3).

In Nicaragua and El Salvador these methods account for 88.3 percent and 86.3 percent of total use, respectively. In Honduras and Guatemala these methods account for 77.0 percent and 71.8 percent of total use, respectively, as use of rhythm/Billings and withdrawal is higher in these countries than in Nicaragua and El Salvador.

In all of the countries, female sterilization is the most used method of contraception, ranging from 16.8 percent in Guatemala to 32.7 percent in El Salvador. Since sterilization facilities are generally found in urban areas, use of this method is higher in urban areas than in rural areas (Table 4.4). In El Salvador and Guatemala, the injection is the second most used method, while in Honduras and Nicaragua it is the pill. It should be noted that in El Salvador, Honduras, and Nicaragua, the injection is used more in the rural area than in the urban area. With the exception of Honduras, the use of the IUD is relatively low, and in all of the countries, the use of the IUD is higher in urban areas than in

Table 4.3
Trends in the Use of Contraceptive Methods, by Method and Type of Method:
Married Women of Fertile Age

Country	Year of Survey	Female Total	Type of Method									
			Steril.	Injection	Orales	IUD	Con- doms	Rhythm/ Billings	With- drawal	Other	Modern [‡]	Traditional [§]
El Salvador*	1993	53.3	31.5	3.6	8.7	2.1	2.1	3.0	2.0	0.4	48.0	5.4
	1998	59.7	32.4	8.9	8.1	1.5	2.5	3.1	2.6	0.7	53.4	6.4
	2002/03	67.3	32.7	18.3	5.8	1.3	2.9	2.9	2.6	0.9	61.0	6.4
Guatemala [†]	1995	31.4	14.3	2.5	3.8	2.6	2.2	3.6	0.9	1.5	26.9	4.5
	1998/99	38.2	16.7	3.9	5.0	2.2	2.3	5.7	1.5	0.8	30.9	7.3
	2002	43.3	16.8	9.0	3.4	1.9	2.3	6.3	2.3	1.4	34.6	8.7
Honduras*	1991/92	46.7	15.6	0.5	10.1	5.1	2.9	6.7	5.0	0.3	34.7	12.0
	1996	50.0	18.1	1.1	9.9	8.5	3.2	3.7	5.3	1.3	40.8	10.3
	2001	61.8	18.0	9.6	10.4	9.6	3.2	4.4	6.4	0.2	51.0	10.8
Nicaragua [†]	1992/93	48.7	18.5	1.2	12.9	9.3	2.6	2.6	1.1	0.4	44.9	3.8
	1998	60.3	26.1	5.2	13.9	9.1	2.6	1.6	1.0	0.5	57.4	2.9
	2001	68.6	25.3	14.3	14.6	6.4	3.3	1.5	1.0	2.3	64.4	4.2

* Married women aged 15–44.

† Married women aged 15–49.

‡ Includes female sterilization, vasectomy, injectables, orals, IUDs, condoms, vaginal methods, and Norplant.

§ Includes rhythm, Billings, withdrawal, MELA, and folkloric methods.

rural areas. As the table shows, use of condoms as a family planning method is relatively low in each of the countries.

As mentioned earlier, the use of contraceptive methods has been increasing steadily over the past decade in each of the countries. The

increase in use is principally due to an increase in the use of temporary methods, notably the injection (see Graph 4.2 and Table 4.3). Since the early 1990s, the use of female sterilization has not changed substantially in any of the countries.

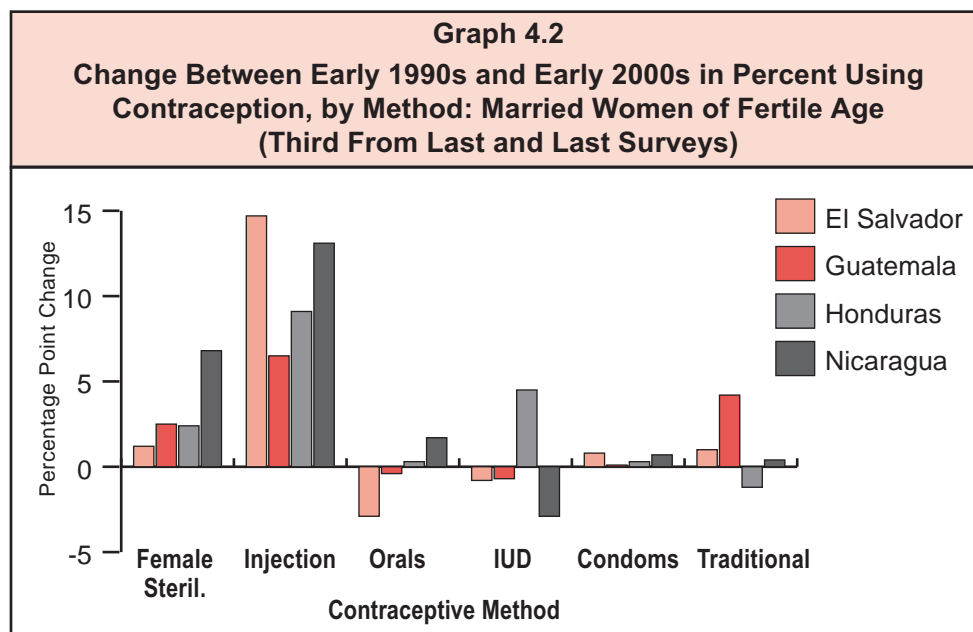


Table 4.4
Current Use of Contraceptive Methods, According to Area of Residence: Married Women of Fertile Age (Most Recent Survey)

Country/ Area	Year of Survey	Total	Orals	IUD	Condoms	Injection	Female Steril.	Rhythm/ Billings	With- drawal	Other
El Salvador	2002/03*									
Total		67.3	5.8	1.3	2.9	18.3	32.7	2.9	2.6	0.9
Urban		73.4	5.3	2.0	3.5	17.2	37.5	3.1	3.4	1.4
Rural		60.1	6.2	0.5	2.3	19.5	27.1	2.6	1.5	0.4
Guatemala	2002†									
Total		43.3	3.4	1.9	2.3	9.0	16.8	6.3	2.3	1.3
Urban		56.7	4.3	3.4	3.6	10.7	23.1	6.6	2.6	2.4
Rural		34.7	2.8	0.9	1.5	7.9	12.8	6.2	2.1	0.4
Honduras	2001*									
Total		61.8	10.4	9.6	3.2	9.6	18.0	4.4	6.4	0.2
Urban		70.4	11.5	14.7	4.1	8.8	20.3	5.3	5.6	0.1
Rural		54.6	9.4	5.3	2.5	10.3	16.0	3.7	7.1	0.2
Nicaragua	2001†									
Total		68.6	14.6	6.4	3.3	14.3	25.3	1.5	1.0	2.3
Urban		73.3	15.6	8.8	4.3	11.4	28.7	1.5	1.1	1.9
Rural		62.3	13.3	3.1	2.0	18.1	20.7	1.4	0.8	2.7

* Married women aged 15–44.

† Married women aged 15–49.

Table 4.5 and Graph 4.3 show contraceptive use by age of the woman, illustrating that in all four countries use rises steadily with age until the late 30's or early 40's at which age it levels off. Graph 4.4 shows the increase in use by age between the early 1990's and the early 2000's. El Salvador exhibits a distinctive pattern with the increase in use being especially pronounced for married women ages 15–24 and 40–44. In Nicaragua, the increase in use was high among married women aged 15–24, moderately high among married women aged 25–44, and uniform,

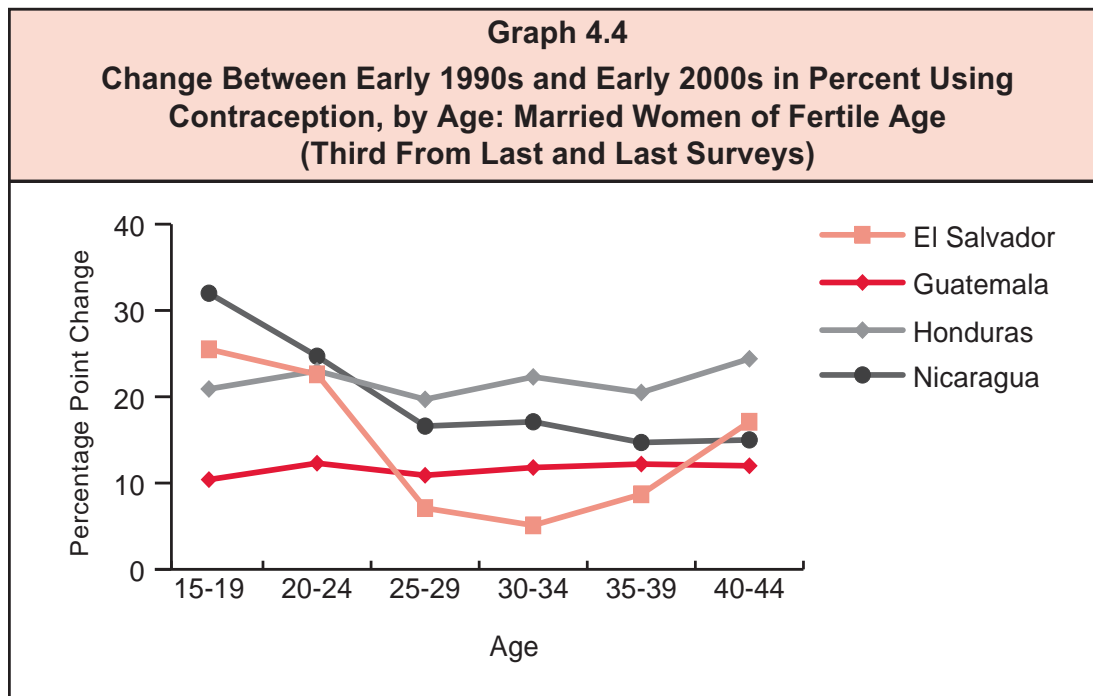
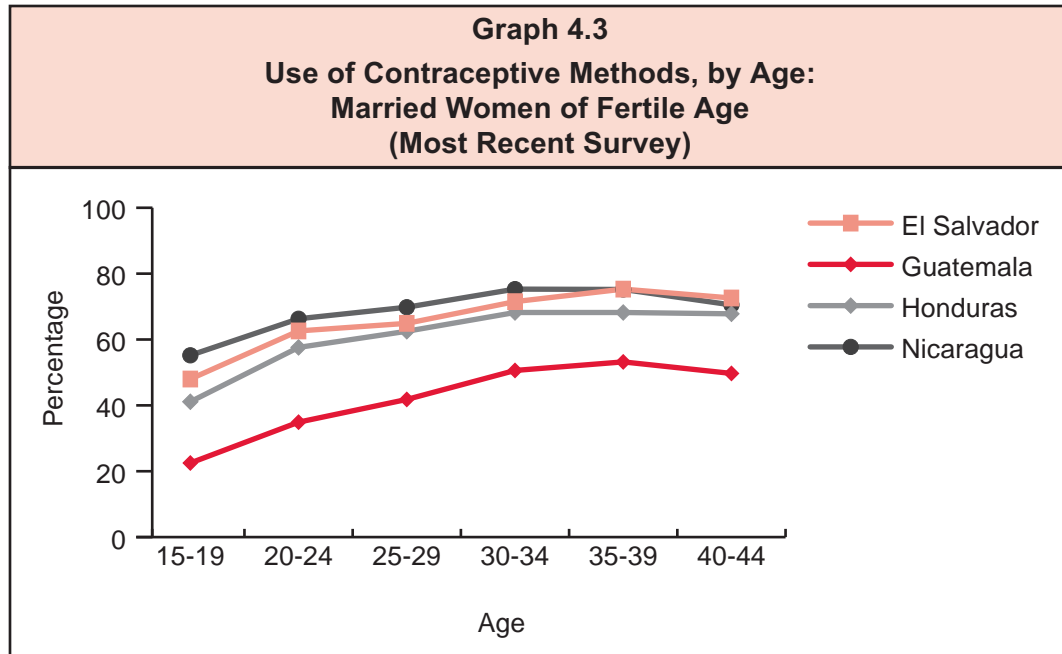
at a moderate level, for remaining age groups. In both Honduras and Guatemala the increase in use was fairly uniform across all age groups, but in Honduras it hovers around a 20 to 25 percentage point increase, while in Guatemala it is in the range of 10 to 15 percentage points.

The information on use by age is encouraging in that it demonstrates that women are initiating the use of contraception at younger ages, rather than waiting until they have reached or exceeded their desired family in their mid- to late-20s.

Table 4.5
Trends in the Use of Contraceptive Methods, by Age:
Married Women of Fertile Age

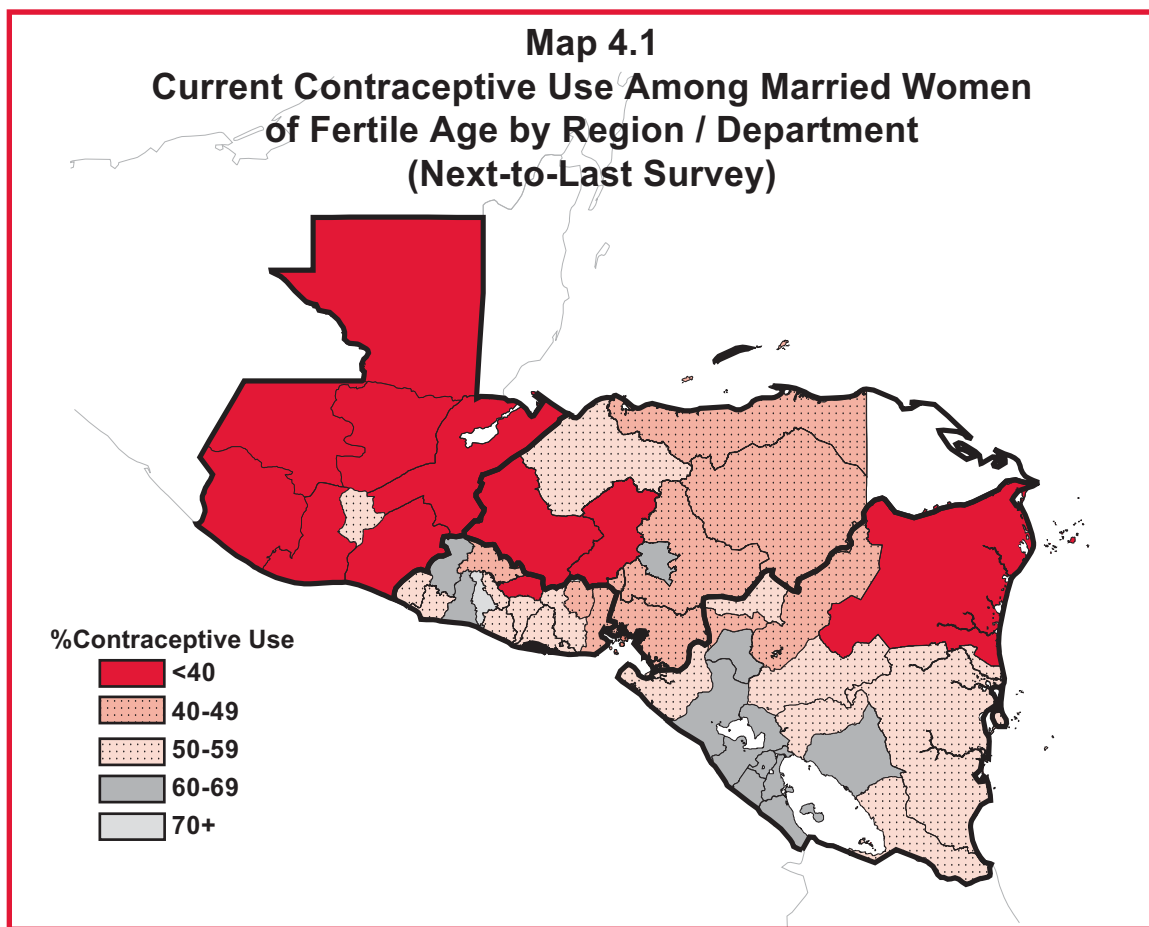
Country	Year of Survey	15–19	20–24	25–29	30–34	35–39	40–44	45–49
El Salvador*	1993	22.5	40.0	57.8	66.4	66.6	55.5	na
	1998	33.4	48.4	58.7	68.5	70.5	69.6	na
	2002/03	48.0	62.6	64.9	71.5	75.3	72.6	na
Guatemala†	1995	12.1	22.6	30.9	38.8	41.0	37.7	25.8
	1998/99	14.6	25.7	39.2	50.5	51.0	44.1	31.2
	2002	22.5	34.9	41.8	50.6	53.2	49.7	40.0
Honduras*	1987	20.2	34.6	42.8	45.9	47.7	43.4	na
	1996	27.6	39.4	54.2	57.8	58.0	55.5	na
	2001	41.1	57.6	62.5	68.2	68.2	67.8	na
Nicaragua†	1992/93	23.2	41.6	53.2	58.2	60.5	55.5	38.9
	1998	39.8	53.8	64.6	69.4	70.0	63.7	48.1
	2001	55.2	66.3	69.8	75.3	75.2	70.5	58.6

* Married women aged 15–44.
† Married women aged 15–49.
na: Not available.

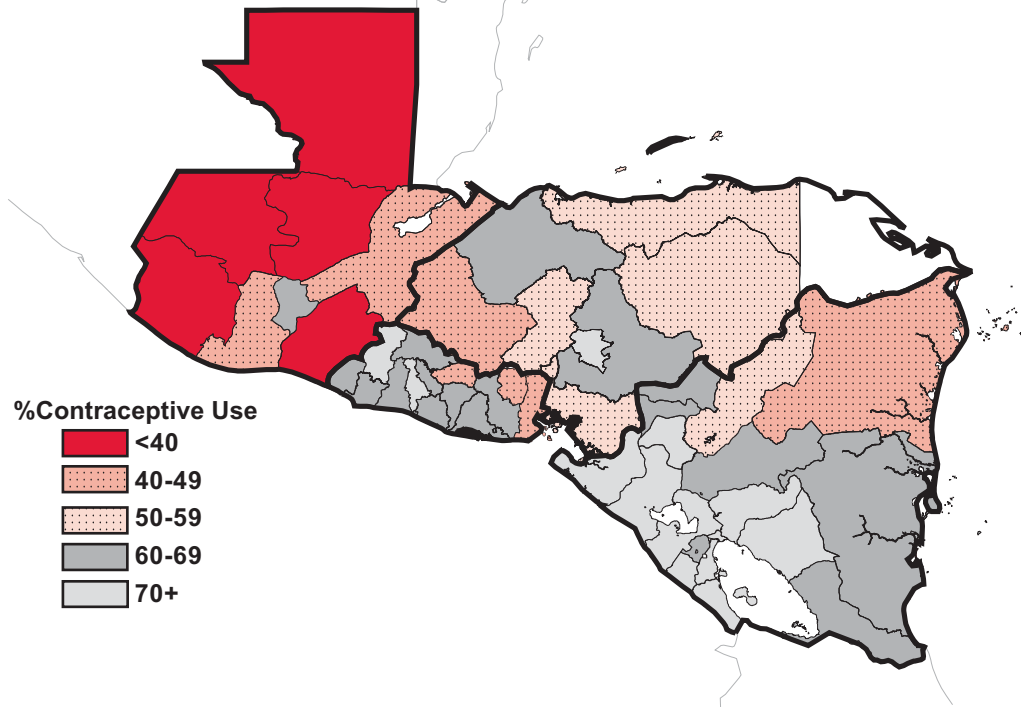


Maps 4.1 and 4.2 show contraceptive prevalence for subnational regions according to the next to last and last surveys in each of the four countries. As expected from information on fertility levels, the areas of lowest contraceptive use are in Guatemala and Honduras. The increase in prevalence between the two surveys is very

widespread for both El Salvador and Nicaragua. All but three departments in El Salvador and two departments in Nicaragua had sixty percent or more of women in union using a method at the time of the most recent survey. Only one region in Guatemala and three in Honduras had prevalence above 60 percent at the last survey.



Map 4.2
Current Contraceptive Use Among Married Women
of Fertile Age by Region / Department
(Last Survey)



Source of Contraceptives

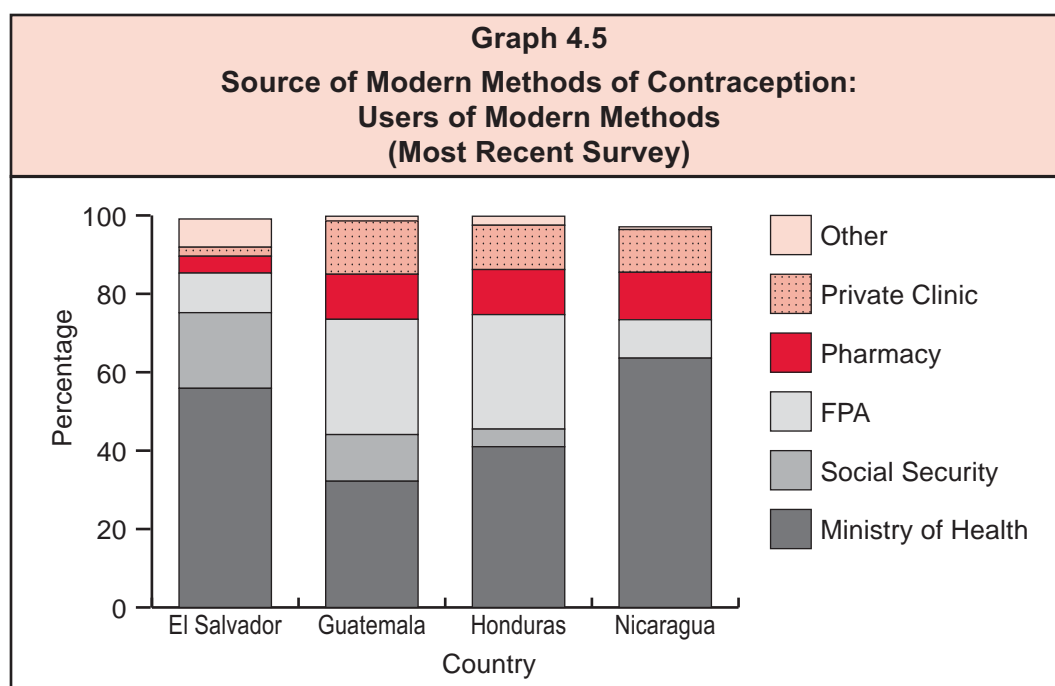
Table 4.6 and Graph 4.5 present the percentage of currently married users of modern contraception who obtained their method from each type of source shown in the table (data for El Salvador include source of modern as well as traditional methods). Focusing on the last survey conducted in each country, source of contraceptives

varies from one country to another. However, all countries have one thing in common: the Ministry of Health is the principal source of contraceptive methods in each country, ranging from 32.2 percent in Guatemala to 63.6 percent in Nicaragua. As shown in the table, the relative participation of the Ministry of Health has been increasing in each country over the past decade.

Table 4.6
Trends in the Source of Modern Contraceptive Methods:
Married Women of Fertile Age

Country	Year of Survey	Ministry of Health	Social Security	FPA [‡]	Pharmacy	Private Clinic	Other
El Salvador*	1993	48.9	14.5	15.3	9.3	4.2	7.5
	1998	47.1	18.2	15.6	5.8	4.4	8.5
	2002/03	55.9	19.3	10.1	4.3	2.3	7.2
Guatemala [†]	1995	18.9	8.2	41.5	11.6	17.0	2.1
	1998/99	20.6	4.6	37.5	11.8	14.8	9.4
	2002	32.2	11.9	29.4	11.5	13.6	1.2
Honduras*	1991/92	30.8	7.9	24.2	14.2	20.7	2.2
	1996	27.0	7.8	37.0	13.0	11.8	2.6
	2001	41.0	4.5	29.2	11.5	11.3	2.3
Nicaragua [†]	1992/93	58.6	na	6.0	18.0	11.8	3.6
	1998	62.0	na	11.9	11.4	11.2	2.1
	2001	63.6	na	9.8	12.1	10.9	0.7

* Married women aged 15–44. For El Salvador, modern as well as traditional methods are included.
[†] Married women aged 15–49.
[‡] Family planning association.
 NA: Not available.



The second most important source of contraception in El Salvador is the Social Security Institute, while the private family planning association is the second most important source in Guatemala and Honduras. In Nicaragua, pharmacies are in second place.

While the family planning association is the third most important source of contraception in El Salvador, it is private clinics or physicians in Guatemala, and private pharmacies in Honduras and Nicaragua.

In general, the relative participation of the

family planning association and private clinics in each country has been declining over the past decade. This is probably due to the fact that users of family planning services can obtain services and supplies at a lower price (or at no cost) from the public sector than they can from the private sector. Cost is particularly important for women who have traditionally been non-users of contraception, such as the rural, poor, and less educated women. However, the question is how much longer can the public sector afford to provide highly subsidized family planning services?

Intention to Use Contraception Among Non-Users

Married, fecund women who were not using any contraceptive method at the time of the last survey conducted in each country were asked if they planned to use any method now or in the future. Intention to use in the future among non-users has to be taken into account when forecasting contraceptive needs of the family planning providers. Overall, between 43.0 percent (Guatemala) and 72.5 percent (Honduras) intended to use a contraceptive method now or in the future (Table 4.7). It should be noted that the percentage of women who desire to use a contraceptive method does not vary substantially according to area of residence.

Of the married women who desire to use a method now or in the future, the most preferred method in all of the countries is the injection, ranging from 31.9 percent in Honduras to 43.4 percent in El Salvador (Table 4.8 and Graph 4.6). In El Salvador, Guatemala, and Honduras the second most preferred method is female sterilization, while it is the pill in Nicaragua. Oral contraceptives are in third place in El Salvador, Guatemala, and Honduras, while female sterilization is in third place in Nicaragua. The percentage of women who desire to use rhythm/Billings or withdrawal is relatively small in each country. These preferences contrast with actual current use in which female sterilization is most common in all four countries and oral contraceptives is second in Honduras and Nicaragua. It should be noted that a significant percentage of non-users in El Salvador, Guatemala, and Honduras are undecided about the method they would prefer to use.

Table 4.7
Desire to Use Contraceptive Methods Now or
in the Future, by Area of Residence: Married Women of
Fertile Age, Non-Users of Contraception
(Most Recent Survey)

Country	Year of Survey	Total	Urban	Rural
El Salvador	2002/03*	52.1	55.5	49.4
Guatemala	2002†	43.0	46.1	40.9
Honduras	2001*	72.5	75.3	71.0
Nicaragua	2001†	61.7	62.7	60.8

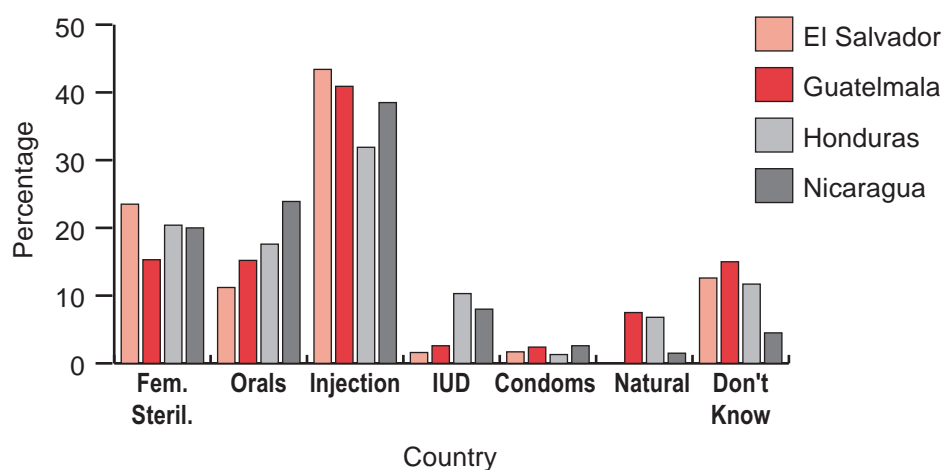
* Married women aged 15–44.
† Married women aged 15–49.

Table 4.8
Preferred Contraceptive Method Among Married Women of Fertile Age, Non-Users of Contraception, Who Desire to Use Contraceptives Now or in the Future (Most Recent Survey)

Contraceptive Method	El Salvador 2002/03*	Guatemala 2002†	Honduras 2001*	Nicaragua 2001†
Injection	43.4	40.9	31.9	38.5
Fem. Sterilization	23.5	15.3	20.4	20.0
Orals	11.2	15.2	17.6	23.9
IUD	1.6	2.6	10.3	8.0
Condom	1.7	2.4	1.3	2.6
Rhythm/Billings	2.9	6.6	4.8	0.9
Withdrawal	0.3	0.9	2.0	0.6
Other	2.7	0.6	0.1	1.0
Don't Know	12.6	15.0	11.7	4.5

* Married women aged 15–44.
† Married women aged 15–49.

Graph 4.6
Preferred Contraceptive Method:
Married, Non-Users of Contraception
(Most Recent Survey)



Summary of Findings

- Awareness of contraceptive methods is high; at least 91 percent of women and 95 percent of men of reproductive age in each country indicated that they have heard of at least one method. The four most known methods among women in each country include condoms, oral contraceptives, the injection, and female sterilization.
- Current use of contraceptives is also relatively high in El Salvador, Honduras, and Nicaragua as more than 61 percent of married women of reproductive age were using a method at the time that the last survey was conducted in each country. Only 43 percent of married women were found to be using contraceptives in Guatemala. Important differentials in the use of contraceptives exist according to area of residence and education, with higher use found among urban and more educated women. In all of the countries there is a high reliance on contraceptive methods of high efficacy, such as female sterilization, injections, oral contraceptives, and the IUD.
- Use of contraceptive methods has been increasing steadily over the past decade in each of the countries. In all of the countries, the increase in contraceptive use has been greater in the rural area than in the urban area. The increase in use is principally due to an increase in the use of temporary methods, notably the injection.
- In all of the countries, the principal source of contraception is the Ministry of Health, whose relative participation has been increasing over the past decade. The role of the private family planning associations as a source of contraception has been declining since the early 1990s. Pharmacies and other private sources are important suppliers in Guatemala, Honduras, and Nicaragua.
- A substantial proportion (43 to 72 percent) of fecund, married women not currently using a contraceptive method want to use contraceptives sometime in the future. The three methods most preferred by these women are the injection, female sterilization, and the pill.