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## Choosing a Contraceptive Method: Why Does It Matter?

**T**HROUGHOUT Asia, there are striking differences in the popularity of various contraceptive methods. The leading contraceptive methods today are sterilization, the IUD, the pill, and the condom. The particular methods people use to limit their family's size or space the births of their children vary from country to country and change over time.

During the past several decades, the use of contraceptives has risen dramatically in many Asian countries. In South Korea, for example, the proportion of married women in their childbearing years who use contraception rose from about 20 percent to 70 percent between 1965 and

1985. But other countries still have relatively low contraceptive prevalence rates. In 1985, for example, the rate in Bangladesh was only 25 percent. In India, the nation with the oldest national family planning program, only about one-third of all couples used contraception in 1980.

Before the use of contraceptives rose so dramatically in parts of Asia during the past two decades, few policymakers were concerned with which contraceptive method people preferred. The challenge was to promote the use of contraception itself, no matter what the method, because national populations were growing rapidly. Family planning

program officials often imposed the methods they thought were best.

Now, as some countries have achieved relatively high levels of contraceptive use, emphasis is shifting to matching contraceptive methods to people's preferences. In other countries where there is still much room for growth of contraceptive use, policymakers can also benefit from more attention to the choice of methods, because people are more likely to practice contraception if they have access to the methods they prefer. Throughout Asia, the goal for family planning is not only to encourage contraception, but also to provide the choices that meet people's needs.



**W**HAT factors affect the choice of a contraceptive method? To what extent do national family planning programs that promote the use of particular methods lead to preference for those methods? How do people's contraceptive preferences affect the potential success of national family planning programs? Understanding trends in the choice of contraceptive methods can help policymakers meet demand for family planning services, devise better

TABLE 1

### Contraceptive Practice in Asia

Percentage of married women aged 15-44 currently practicing contraception, by country; latest available data.

| Country               | Year   | % using contraceptive |
|-----------------------|--------|-----------------------|
| <i>East Asia</i>      |        |                       |
| China                 | 1982   | 72                    |
| Japan                 | 1984   | 57                    |
| Korea                 | 1985   | 70                    |
| Taiwan                | 1985   | 78                    |
| <i>Southeast Asia</i> |        |                       |
| Indonesia             | 1985   | 40                    |
| Malaysia              | 1984-5 | 51                    |
| Philippines           | 1983   | 32                    |
| Singapore             | 1982   | 74                    |
| Thailand              | 1984   | 65                    |
| <i>South Asia</i>     |        |                       |
| Bangladesh            | 1985   | 25                    |
| India                 | 1980   | 35                    |
| Nepal                 | 1981   | 7                     |
| Pakistan              | 1975   | 5                     |
| Sri Lanka             | 1982   | 55                    |

Source: James A. Palmore and Rodolfo A. Bulatao, "The Contraceptive Method Mix: An Overview," in *Choosing a Contraceptive: Factors in Method Choice in Asia and the United States*, edited by Rodolfo A. Bulatao and James A. Palmore. Boulder: Westview Press, 1988 (forthcoming).

programs, and improve communication about contraceptive methods.

The use of contraceptives varies widely among Asian countries. Based on the most recent survey data available, the rate varies from nearly eight of every ten married women aged 15 to 44 in Taiwan to fewer than one in ten in Pakistan and Nepal. Women in East Asian countries are most likely to practice contraception, followed by those in Southeast Asia, with lower contraceptive prevalence rates found in South Asia. The rates of some East Asian nations now match those of the United States and other developed nations, while in most South Asian nations contraception is spreading slowly.

Contraceptive methods in use vary widely by country. The leading method in the greatest number of countries is sterilization, but in most countries several methods are nearly equal in popularity. Only in India is sterilization used by a majority of those people who practice contraception. Japan is the only country in which a majority of contraceptors use condoms, and only in China do half use IUDs.

The choice of a particular contraceptive method is strongly influenced by the methods available through family planning programs, or promoted through the use of target systems, but it is not solely dictated by them. Religious and cultural factors play important roles in the acceptance of certain contraceptive methods. Concerns about side effects and safety affect many people's choices. Ease of access to particular methods is also a key factor. The medical profession is another important influence. One reason condoms are the most widely used contraceptive in Japan is that the pill is illegal.

In most countries the type of contraceptive that people prefer has changed since the introduction and promotion of modern methods of

contraception. In general, there has been a shift to more effective methods. An increase in female sterilization at the expense of other methods such as the IUD or pill is the most common pattern. In countries where female sterilization is unpopular, use of such modern methods as the pill, IUD, or condom has increased at the expense of traditional methods.

## Choosing a Contraceptive

**W**HAT accounts for the trends in contraceptive use? Part of the shift in methods reflects changes in people's objectives. The choice of sterilization may be most appropriate for women who want to stop childbearing altogether after they have achieved their desired family size. Such methods as the pill, condom, or IUD, are more suitable for spacing births. Some methods carry more risk than others, while some are more effective or convenient.

The mass marketing of contraceptive methods is another important factor in Asia. Family planning officials select certain methods to promote, and these methods become more widely used than others. The adoption of methods that are more effective and simpler to use has been a goal of many policymakers. International donor agencies have promoted particular methods at various times—for example, the Population Council promoted the IUD at the beginning of the family planning programs in Korea and Taiwan. Many family planning programs claim to offer a "cafeteria" approach to contraceptive method choice, but until recently few have actually delivered the broad range of contraceptives necessary to employ such a strategy.



TABLE 2

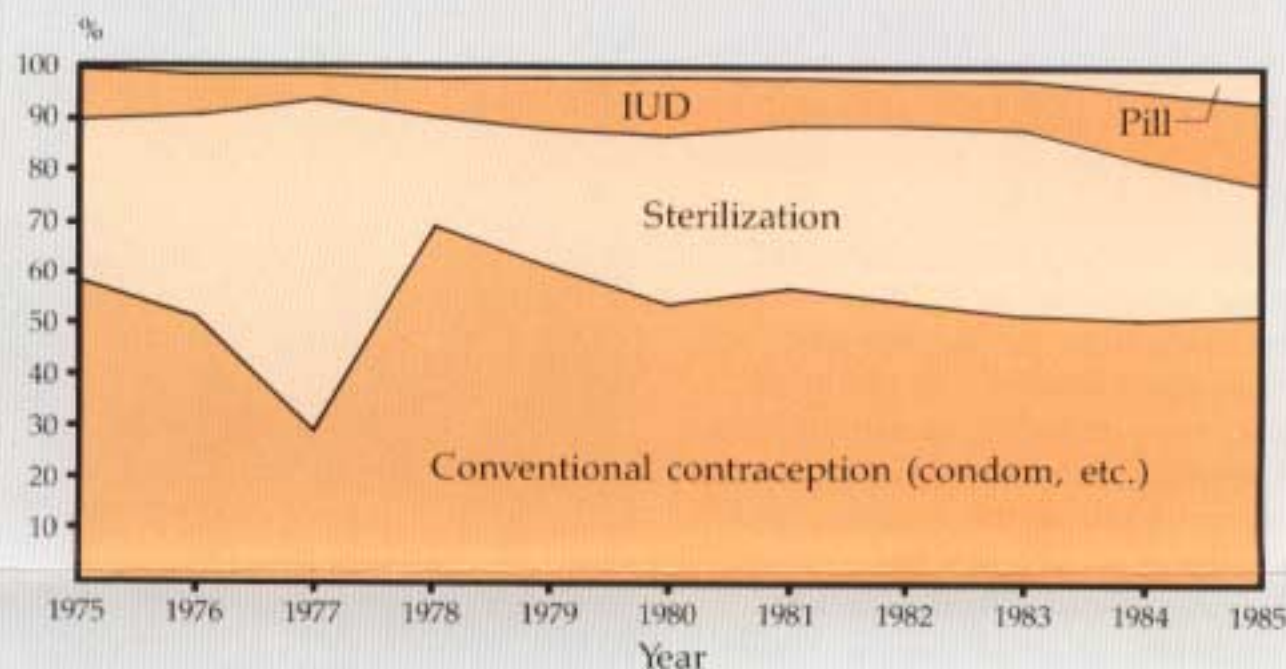
### Leading Contraceptive Methods, by Country

| <i>Female Sterilization</i> | <i>Male Sterilization</i> |
|-----------------------------|---------------------------|
| Hong Kong                   | Nepal                     |
| Korea                       |                           |
| The Philippines             | <i>Pill</i>               |
| Singapore                   | Hong Kong                 |
| Thailand                    | Indonesia                 |
| Bangladesh                  | Malaysia                  |
| India                       | Pakistan                  |
| Sri Lanka                   | <i>Condom</i>             |
| <i>IUD</i>                  | Japan                     |
| China                       | Singapore                 |
| Taiwan                      | Pakistan                  |

Source: Same as for table 1.

### Contraceptive Acceptance Trends in India, 1975-1985

Share of all acceptors, by method used



Source: Department of Family Welfare, 1984. Family Welfare Programme in India; Year Book for 1983-84, New Delhi, 1984.

The strategies of national family planning programs have an important influence on the choice of contraceptive method. India's experience is a particular example; emphasis shifted first from traditional methods to the IUD, then to male sterilization, and later to female sterilization. A sharp set-back occurred in the mid-1970s as people reacted against the sterilization program's excessive zeal. Currently, the Indian program is stressing a more balanced "cafeteria" approach, making available more IUDs as well as sterilization. Policymakers are also discussing a new social marketing strategy.

The accessibility of specific methods of contraception is a major factor in the use of that method. Accessibility includes not only the availability of a method, or people's distance from contraceptive supplies, but also its cost, people's awareness of it, knowledge of how to use it, and an evaluation of its effectiveness and drawbacks. Such factors as age, rural or urban residence, religion, language, and labor

force status also affect contraceptive method choice. A study in Thailand, for example, found that women without any education resisted using modern methods of contraception, even though supplies were plentiful.

## Delivery Systems and Personal Preferences

CHOOSING a contraceptive is an individual choice. From the different contraceptive methods available, people must decide which is appropriate. If none of those accessible appears appropriate, the decision may be not to use contraceptives at all. Some people choose a contraceptive because they have a strong motivation to avoid pregnancy. Others are uncertain about childbearing and desire to protect themselves until they can decide. Individuals may hold inaccurate beliefs about the

effectiveness or consequences of using different methods. In some families, husbands make the decision about contraception, in others, the wives do. Physicians, family planning workers, suppliers of contraceptives, and the media all influence people's ideas about contraception and their preferences.

Family planning policymakers can benefit from a better understanding of the reasons people prefer particular contraceptive methods. Such information can help in developing better communication and education programs that will improve people's understanding of contraception and their ability to evaluate specific methods. Family planning programs that are concerned with the quality of service and with people's satisfaction are likely to be more effective. Achieving the ideal goal of making all contraceptive methods available to everyone is not a realistic objective for most national family planning programs, but providing people with more choices is likely to increase their use of contraceptives.



## Summary

**A**S levels of contraceptive use have risen in many Asian countries, more attention is being paid to the choice of contraceptive methods. Many different factors influence contraceptive choice. These include individual goals in limiting or spacing births, understanding of the different methods available, and ability to use them. Access to contraceptives is another influence, as is the information available about them. People also have a variety of preferences that stem from religious beliefs, education, or social values. Family planning programs in countries where high levels of contraception have been achieved, and also in those where the levels are still relatively low, can benefit by better understanding of the factors that result in use of particular contraceptive methods.

Deborah Booker



*Throughout Asia, the goal for family planning is not only to encourage contraception, but also to provide the choices that meet people's needs.*

### Asia-Pacific

## POPULATION & POLICY

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