

Adolescent contraceptive use

DATA FROM THE LESOTHO DEMOGRAPHIC AND HEALTH SURVEY (LDHS), 2014

Adolescent population: who are they?

In the Kingdom of Lesotho, there are **493 000** adolescents aged 10–19 years – **23.2%** of the country's total population.ⁱ About three quarters of adolescents live in rural areas, **74.3%** of adolescent girls and **77.5%** of adolescent boys.ⁱ

By age 19, the mean number of years of schooling attended by adolescent girls is **8.5**, while for adolescent boys it is **7.1**.ⁱⁱ Among adolescents who become parents before age 20, the average age at which Basotho adolescent girls have their first baby is **17.8** years, while the average age at which adolescent boys first become fathers is **18.2**.ⁱⁱ

Sexual activity and marital status

Analysis of data from the LDHSⁱⁱ shows that over **84 000** Basotho aged 15–19 are currently sexually active – they are either unmarried and have had sex in the last three months or they are in a union (i.e. married or living together). On average, among adolescents who had sex before age 20, adolescent girls first have sexual intercourse at age **16.4** years and adolescent boys at **15.9** years.

Among unmarried adolescents, **34.2%** of adolescent girls report ever having sex and **15.3%** are currently sexually active; among adolescent boys, **59.2%** report ever having sex, while **33.1%** are currently sexually active.

Among all Basotho adolescents, **17.7%** of adolescent girls and **1.0%** of adolescent boys are in a union. Among these adolescents, the mean age of the first union is **17.5** years for adolescent girls and **18.3** for adolescent boys.

What can be done to support Basotho adolescents to prevent unintended pregnancy?

Plan for how, when and where different groups of sexually active adolescents (married and unmarried, boys and girls, rural and urban) use and do not use contraception.

Learn the reasons why adolescents are not using contraception, and develop policies and programmes to better address their needs.

Understand that adolescents may get contraception from a variety of sources and ensure that each of these sources can provide high quality services for adolescents.

Contraceptive use and non-use among adolescent girls

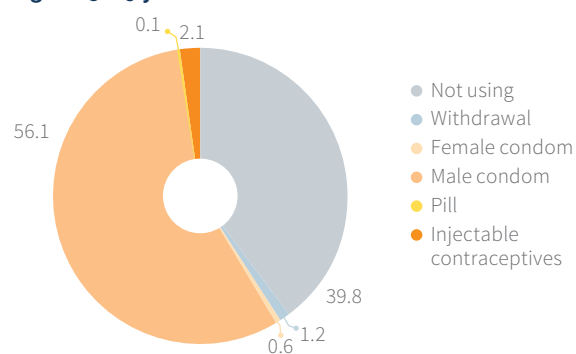
Unmarried, sexually active

According to LDHSⁱⁱ analyses, **84.1%** of unmarried, sexually active adolescent girls report not wanting a child in the next two years, and **68.5%** of them are currently using any method to prevent pregnancy. The main reasons these adolescents report for not using a contraceptive method include:

- **not married (49.1%)**
- **infrequent sex (24.4%)**
- **not having sex (7.1%)**

Among all unmarried, sexually active adolescent girls aged 15–19, **39.8%** are not using a method of contraception. Male condoms are the most common modern method used (**56.1%** of these adolescent girls), while **2.1%** are using injectable contraceptives. Fewer than 1% are using female condoms or pills. Withdrawal, a traditional method, is used by **1.2%** (see Figure 1).

FIGURE 1. Use and non-use of contraception: unmarried sexually active adolescent girls, aged 15–19 years (%)



Source: analysis of LDHS 2014ⁱⁱ

LISTED FROM LEAST EFFECTIVE TO MOST EFFECTIVE

Unmarried, sexually active adolescents who are using a modern method most often get it from a **shop (37.1%)** or from **friends (34.0%)**.

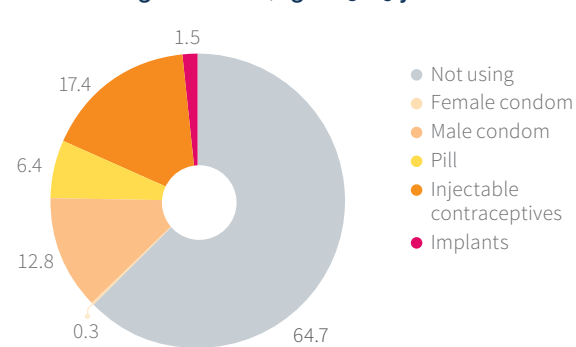
In union

According to LDHSⁱⁱ analyses, **58.9%** of adolescent girls in a union report not wanting a child in the next two years, yet only **40.2%** of them are currently using any method to prevent pregnancy. The main reasons these adolescents report for not using a contraceptive method include:

- **not having sex (32.8%)**
- **infrequent sex (24.5%)**
- **breastfeeding (17.9%)**

Among all adolescent girls in a union aged 15–19, **64.7%** are not using a method of contraception. Injectable contraceptives and male condoms are the most common modern methods used (**17.4%** and **12.8%** of these adolescent girls, respectively), while **1.5%** are using implants, one of the most effective methods (see Figure 2).

FIGURE 2. Use and non-use of contraception: adolescent girls in union, aged 15–19 years (%)



Source: analysis of LDHS 2014ⁱⁱ

LISTED FROM LEAST EFFECTIVE TO MOST EFFECTIVE

Adolescents in a union who are using a modern method most often get it from a **government facility (62.3%)** or a **private facility (17.9%)**.

LEARN MORE AT who.int/reproductivehealth/adol-contraceptive-use

ⁱ Urban and rural population by age and sex, 1980–2015 [online database]. New York (USA): United Nations Department of Economic and Social Affairs, Population Division; 2014 (<https://esa.un.org/unpd/popdev/urpas/urpas2014.aspx>, accessed 4 November 2016).

ⁱⁱ Ministry of Health [Lesotho], ICF International. Lesotho Demographic and Health Survey 2014 [Datasets]. LSIR71.DTA and LSMR71.DTA. Calverton (MD): ICF International; 2016 (http://dhsprogram.com/data/dataset/Lesotho_Standard-DHS_2014.cfm?flag=0, accessed 4 November 2016).

Adolescent contraceptive use

ANALYSIS OF THE LESOTHO DEMOGRAPHIC AND HEALTH SURVEY, 2014



Among adolescents who had sex before age 20, the average age at first sex is



16.4 years
for adolescent girls



15.9 years
for adolescent boys

KINGDOM OF LESOTHO



0.5

million
adolescents
ages 10-19

Among adolescents who become parents before age 20, the average age at first birth is

17.8

for adolescent girls

18.2

for adolescent boys

What can be done to support Basotho adolescents to prevent unintended pregnancy?

Plan for how, when, and where different groups of adolescents use or don't use contraception.

Use and non-use of contraception adolescent girls, aged 15-19

Method	Sexually active, unmarried	In union
Not using	39.8%	64.7%
Withdrawal	1.2%	--
Female condom	0.6%	0.3%
Male condom	56.1%	12.8%
Pill	0.1%	3.3%
Injectable contraceptives	2.1%	17.4%
Implants	--	1.5%

Learn the reasons why adolescents are not using contraception.

Report not wanting a child in the next two years

84.1%

sexually active, unmarried adolescent girls

58.9%

adolescent girls in union

Main reasons for not using contraception

Sexually active, unmarried



49.1% not married



24.4% infrequent sex



7.1% not having sex

In union



32.8% not having sex



24.5% infrequent sex



17.9% breastfeeding

Understand that adolescents may get modern contraception from a variety of sources.



37.1%

from a shop



34.0%

from friends



62.3%

from a government facility



In union

17.9%

from a private facility















LEARN MORE AT who.int/reproductivehealth/adol-contraceptive-use

Ministry of Health [Lesotho], ICF International. Lesotho Demographic and Health Survey 2014 [Datasets]. LSIR71.DTA and LSMR71.DTA. Calverton (MD): ICF International; 2016 (http://dhsprogram.com/data/dataset/Lesotho_Standard-DHS_2014.cfm?flag=0, accessed 4 November 2016).
















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METHODS:

-  Not using
-  Withdrawal
-  Periodic abstinence
-  Rhythm/calendar
-  Female condom
-  Male condom
-  Standard days/cycle beads
-  Pill
-  Injectable contraceptives
-  Lactational amenorrhea (LAM)
-  Implants
-  IUD
-  Male sterilization
-  Female sterilization

REASONS FOR NON-USE:

-  Not married
-  Not having sex
-  Infrequent sex
-  Menses has not returned after birth
-  Breastfeeding
-  Fatalistic (up to god)
-  She is opposed
-  Husband/partner is opposed
-  Religious prohibition
-  Knows no method
-  Knows no source
-  Fear of side effects/health concerns
-  Inconvenient to use
-  Others opposed
-  Lack of access/too far

SOURCE OF METHOD:

-  Government facility
-  Private facility
-  Pharmacy
-  Shop
-  Friends or parents
-  Other
-  Community Health Worker