Adolescent contraceptive use
DATA FROM THE SWAZILAND DEMOGRAPHIC AND HEALTH SURVEY (SDHS), 2006-07

Adolescent population: who are they?

In the Kingdom of Swaziland, there are 295,000 adolescents aged 10–19 years – 22.9% of the country’s total population.1 Most adolescents live in rural areas, 82.4% of adolescent girls and 84.9% of adolescent boys.1

By age 19, the mean number of years of schooling attended by adolescent girls is 8.5, while for adolescent boys it is 8.4.1 Among adolescents who become parents before age 20, the average age at which Swazi adolescent girls have their first baby is 17.2 years, while the average age at which adolescent boys first become fathers is 18.3.a

Sexual activity and marital status

Analysis of data from the SDHSii shows that over 27,500 Swazis 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 and adolescent boys both first have sexual intercourse at age 16.9 years.

Among unmarried adolescents, 37.0% of adolescent girls report ever having sex and 20.3% are currently sexually active; among adolescent boys, 21.0% report ever having sex, while 10.4% are currently sexually active.

Among all Swazi adolescents, 6.9% of adolescent girls and 0.1% 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 17.7 for adolescent boys.

What can be done to support Swazi 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 SDHS\(^i\) analyses, 79.0% of unmarried, sexually active adolescent girls report not wanting a child in the next two years, yet only 58.1% of them are currently using any method to prevent pregnancy. The main reasons these adolescents report for not using a contraceptive method include:

- fear of side-effects or health concerns (40.4%)
- not married (13.8%)
- lack of access or too far (8.4%)

Among all unmarried, sexually active adolescent girls aged 15–19, 50.7% are not using a method of contraception. Male condoms and injectable contraceptives are the most common modern methods used (30.3% and 13.0% of these adolescent girls, respectively). Pills are used by 5.2% (see Figure 1).

In union

According to SDHS\(^i\) analyses, 62.4% of adolescent girls in a union report not wanting a child in the next two years, yet only 45.3% of them are currently using any method to prevent pregnancy. The main reasons these adolescents report for not using a contraceptive method include:

- fear of side-effects or health concerns (29.9%)
- husband or partner is opposed (27.8%)
- breastfeeding (17.0%)

Among all adolescent girls in a union aged 15–19, 57.2% are not using a method of contraception. Injectable contraceptives are the most common modern method used (21.0% of these adolescent girls). Pills are used by 11.2% and male condoms are used by 10.6% of these adolescent girls (see Figure 2).

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Adolescent contraceptive use
ANALYSIS OF THE SWAZILAND DEMOGRAPHIC AND HEALTH SURVEY, 2006-07

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

- 16.9 years for adolescent girls
- 16.9 years for adolescent boys

KINGDOM OF SWAZILAND

0.3 million adolescents ages 10-19

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

- 17.2 years for adolescent girls
- 18.3 years for adolescent boys

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

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

<table>
<thead>
<tr>
<th>Use and non-use of contraception adolescent girls, aged 15-19</th>
<th>Method</th>
<th>Sexually active, unmarried</th>
<th>In union</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not using</td>
<td>50.7%</td>
<td>57.2%</td>
<td></td>
</tr>
<tr>
<td>Female condom</td>
<td>0.8%</td>
<td>--</td>
<td></td>
</tr>
<tr>
<td>Male condom</td>
<td>30.3%</td>
<td>10.6%</td>
<td></td>
</tr>
<tr>
<td>Pill</td>
<td>5.2%</td>
<td>11.2%</td>
<td></td>
</tr>
<tr>
<td>Injectable contraceptives</td>
<td>13.0%</td>
<td>21.0%</td>
<td></td>
</tr>
</tbody>
</table>

Learn the reasons why adolescents are not using contraception.

Report not wanting a child in the next two years

- 79.0% sexually active, unmarried adolescent girls
- 62.4% adolescent girls in union

Main reasons for not using contraception

Sexually active, unmarried

- 40.4% fear of side-effects or health concerns
- 13.8% not married
- 8.4% lack of access or too far

In union

- 29.9% fear of side-effects or health concerns
- 17.0% breastfeeding
- 27.8% husband or partner is opposed

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

Sexually active, unmarried

- 42.0% from a government facility
- 28.8% from a shop

In union

- 54.7% from a government facility
- 34.5% from a private facility

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

## 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

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