Adolescent contraceptive use
DATA FROM THE RWANDA DEMOGRAPHIC AND HEALTH SURVEY (RDHS), 2014-15

Adolescent population: who are they?

In the Republic of Rwanda, there are over 3 million adolescents aged 10–19 years – 24.3% of the country’s total population. About three quarters of adolescents live in rural areas, 73.8% of adolescent girls and 74.4% of adolescent boys.

By age 19, the mean number of years of schooling attended by adolescent girls is 6.5, while for adolescent boys it is 6.3. Among adolescents who become parents before age 20, the average age at which Rwandan adolescent girls have their first baby is 18.0 years, while the average age at which adolescent boys first become fathers is 18.6.

Sexual activity and marital status

Analysis of data from the RDHS shows that over 95 000 Rwandans 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 17.2 years and adolescent boys at 16.2 years.

Among unmarried adolescents, 17.6% of adolescent girls report ever having sex and 4.8% are currently sexually active; among adolescent boys, 23.3% report ever having sex, while 4.3% are currently sexually active.

Among all Rwandan adolescents, 3.1% of adolescent girls and 0.2% of adolescent boys are in a union. Among these adolescents, the mean age of the first union is 17.8 years for adolescent girls and 18.4 for adolescent boys.

What can be done to support Rwandan 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 RDHS\(^i\) analyses, 81.9% of unmarried, sexually active adolescent girls report not wanting a child in the next two years, yet only 20.9% 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 (68.0%)
- infrequent sex (43.6%)
- not having sex (6.2%)

Among all unmarried, sexually active adolescent girls aged 15–19, 87.7% are not using a method of contraception. Injectable contraceptives and male condoms are the most common modern methods used (5.9% and 2.9% of these adolescent girls, respectively). Implants, which are considered to be one of the most effective methods, are used by 2.6% (see Figure 1).

In union

According to RDHS\(^i\) analyses, 78.1% of adolescent girls in a union report not wanting a child in the next two years, yet only 43.3% of them are currently using any method to prevent pregnancy. The main reasons these adolescents report for not using a contraceptive method include:

- menses has not returned after giving birth (79.5%)
- breastfeeding (43.1%)
- fear of side-effects or health concerns (7.7%)

Among all adolescent girls in a union aged 15–19, 64.7% are not using a method of contraception. Injectable contraceptives are the most common modern method used (18.7% of these adolescent girls), while 6.0% are using implants, one of the most effective methods. Traditional methods, withdrawal or periodic abstinence, are used by 2.4% (see Figure 2).


Adolescent contraceptive use
ANALYSIS OF THE RWANDA DEMOGRAPHIC AND HEALTH SURVEY, 2014-15

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

- **17.2 years** for adolescent girls
- **16.2 years** for adolescent boys

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

- **18.0** for adolescent girls
- **18.6** for adolescent boys

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

- **Plan for how, when, and where different groups of adolescents use or don’t use contraception.**
- **Learn the reasons why adolescents are not using contraception.**
- **Report not wanting a child in the next two years.**
- **Main reasons for not using contraception.**
  - **Sexually active, unmarried:**
    - 68.0% not married
    - 43.6% infrequent sex
    - 6.2% not having sex
  - **In union:**
    - 79.5% menses has not returned after giving birth
    - 43.6% breastfeeding
    - 7.7% fear of side-effects or health concerns
- **Understand that adolescents may get modern contraception from a variety of sources.**
  - **Sexually active, unmarried:**
    - 59.8% from a government facility
    - 17.1% from a community health worker
  - **In union:**
    - 65.4% from a government facility
    - 21.7% from a community health worker

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

<table>
<thead>
<tr>
<th>Method</th>
<th>Sexually active, unmarried</th>
<th>In union</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not using</td>
<td>87.7%</td>
<td>64.7%</td>
</tr>
<tr>
<td>Withdrawal</td>
<td>--</td>
<td>1.2%</td>
</tr>
<tr>
<td>Periodic abstinence</td>
<td>--</td>
<td>1.2%</td>
</tr>
<tr>
<td>Male condom</td>
<td>2.9%</td>
<td>3.2%</td>
</tr>
<tr>
<td>Pill</td>
<td>0.9%</td>
<td>4.9%</td>
</tr>
<tr>
<td>Injectable contraceptives</td>
<td>5.9%</td>
<td>18.7%</td>
</tr>
<tr>
<td>Implants</td>
<td>2.6%</td>
<td>6.0%</td>
</tr>
</tbody>
</table>

Learn more at [who.int/reproductivehealth/adol-contraceptive-use](http://who.int/reproductivehealth/adol-contraceptive-use)
### Icon Directory

#### 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

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