

# **Couple Unmet Need for Family Planning and Application to Three West African Countries**

Erin Pearson<sup>1</sup> and Stan Becker<sup>2</sup>

<sup>1</sup> PhD Student, Department of Population, Family and Reproductive Health, Johns Hopkins Bloomberg School of Public Health

<sup>2</sup> Professor, Department of Population, Family and Reproductive Health, Johns Hopkins Bloomberg School of Public Health

## **Abstract**

Unmet need is typically calculated for currently married women, but considering husbands' unmet need may provide additional information to family planning programs. This study calculates unmet need based on spouses' fertility intentions among fecund nonusers of contraception: wife-only, husband-only, and concordant unmet need. Demographic and Health Survey data from Benin, Burkina Faso and Mali are used. Each estimate of unmet need is compared to the wife's unmet need to assess the proportion due to differing fertility intentions. Across the three countries, approximately half of the wife's unmet need is concordant and half is wife-only unmet need. Comparing the husband's unmet need to the wife's, 21-27% of husbands have an unmet need when their wives do not. Clearly, using only women's fertility intentions overestimates couples' unmet need for family planning. Additionally, the proportion of husband-only unmet need suggests that men could be an entry point for contraceptive use for some couples.

## **Background**

In West Africa, contraceptive use remains low and fertility remains high. In Benin, the total fertility rate (TFR) was 5.7, while only 17% of currently married women were using any contraceptive method (INSAE and Macro International Inc., 2007). Similarly, the TFR was 5.9 and only 13.8% were currently using contraception in Burkina Faso (INSD and ORC Macro, 2004). In Mali, the TFR was 6.8, and only 8.1% of currently married women were currently using any contraceptive method (CPS/MS, DNSI and ORC Macro, 2002). At the same time, unmet need for family planning ranges from 27.3% among currently married women in Benin (INSAE and Macro International Inc., 2007) to 29.8% in Burkina Faso (INSD and ORC Macro, 2004). Addressing unmet need for family planning is an important step in initiating the fertility transition in these countries.

Unmet need for family planning is an important indicator of demand for family planning services (Westoff, 1988; Casterline and Sinding, 2000). Unmet need is typically calculated only for currently married women, but considering unmet need among husbands may provide additional information to family planning programs (Ngom, 1997). Previous studies have focused on the extent to which discordance in husbands' and wives' fertility intentions accounts for unmet need, but evidence is mixed. While Casterline et al. (1997) found that the husband's pronatalism was associated with contraceptive non-use in the Philippines, a study of five Asian countries demonstrated that considering husband's fertility preferences accounted for less than 10% of women's unmet need (Mason and Smith, 2000). However, Mason and Smith (2000) looked only at intention to limit childbearing and found that few couples had differing intentions on

limiting in these countries. They suggest that in countries where there is greater discordance between husbands' and wives' fertility intentions, the effect of male pronatalism may have a greater effect on wives' unmet need (Mason and Smith, 2000).

The present study calculates unmet need based on spouses' joint reports of fertility intentions and yields: wife-only unmet need, husband-only unmet need and couple (concordant) unmet need. Each measure of unmet need is then compared to the wife's unmet need to assess the proportion of unmet need due to differing fertility intentions.

## **Methodology**

### *Data*

Demographic and Health Survey (DHS) couple data from three West African countries, Benin, Burkina Faso and Mali, were used for this analysis. The DHS is a household survey that provides a nationally representative sample of males and females of reproductive age. The Benin survey was conducted in 2006 (n=3,345 couples), Burkina Faso in 2003 (n=2,340 couples) and Mali in 2001 (n=2,191 couples).

### *Calculation of unmet need*

We use the revised definition of unmet need for family planning as described by Bradley et al. (2012). The definition formalized and simplified the calculation based on consistently collected DHS data to facilitate cross-country comparisons (Bradley et al., 2012). As in the original definition, unmet need is defined separately for pregnant and postpartum amenorrheic women and for women who are not pregnant or postpartum

amenorrheic. Postpartum amenorrheic women were defined as women whose period has not returned since the birth of their last child, among those whose last child was born in the previous 23 months. Among pregnant and postpartum amenorrheic women who are not currently using contraception, unmet need was defined as reporting that their current (for pregnant women) or last pregnancy (for postpartum amenorrheic women) was mistimed or unwanted.

For women who are not pregnant or postpartum amenorrheic, unmet need was defined as reporting that they want to wait at least two years before their next pregnancy, are undecided, or do not want any more children, among those who are fecund and not currently using contraception. The revised definition of unmet need defined infecundity as meeting any of the following criteria: 1) first married five or more years ago, had no children in past five years and never used contraception; 2) when asked if she wants to have another child, said she can't get pregnant; 3) said she was menopausal or had a hysterectomy when asked when the last period was or when asked the reason she does not use contraception; 4) said she never menstruated when asked when last period was; 5) said last period was six or more months ago and are not currently postpartum amenorrheic, excluding women whose periods have not returned since the birth of their child in the last five years (Bradley et al., 2012).

Building on this revised definition of unmet need, the current study defines unmet need separately for women, men and couples based on individual fertility intentions. The Bradley et al. (2012) definitions of infecundity and post-partum amenorrhea based on the

wife's report were used in all three calculations, but the definition of current contraceptive use was revised in this study to include the husband's report of male-controlled contraceptive methods. Thus, couples were classified as currently using contraception if the wife reported any contraceptive use or if the husband reported current use of condoms or withdrawal, whether or not the wife gave a concordant response. Apart from the definition of current contraceptive use, the wife's unmet need was calculated using the Bradley definition, as described above. The husband's unmet need was calculated similarly, except the husband's fertility intentions rather than the wife's were used.

Couple unmet need for family planning was classified into four mutually exclusive categories based on individual fertility intentions of the husband and wife: 1) both husband and wife have unmet need; 2) wife only has unmet need; 3) husband only has unmet need; and 4) neither husband nor wife has unmet need (Figure 1).

### *Analysis*

For each survey, husband and wife unmet need estimates were compared to the DHS estimates of unmet need, which included all currently married women. The DHS estimates that are reported here have been revised from the published reports, based on the Bradley et al. (2012) definition. The percent of currently married women, wives and husbands with unmet need for spacing, limiting and total unmet need are reported. In addition, ratios were calculated to compare each type of couple unmet need, including wife-only, husband-only, and concordant unmet need, to the wife's unmet need.

Since the DHS does not create couple weights, the unmet need analysis was run using both the standard DHS women's weights and the men's weights and compared to the DHS estimates of unmet need. As could be expected, the women's weights provided unmet need estimates closest to the DHS estimates, and as a result, all analyses were conducted using the standard DHS women's weights for each country. All analyses were performed using Stata version 11.2.

## **Results**

Compared to DHS estimates of unmet need based on all currently married women, estimates of unmet need among wives in the couple's sample is lower in Benin and Burkina Faso but not in Mali. In Benin, wife total unmet need is 20.6%, compared to the DHS estimate of 27.3% for all women (Table 1). Husband unmet need is consistently lower than the DHS estimates and the wife estimates, across all three countries and types of unmet need. Husband and wife total unmet need is most similar in Benin where there is a difference of 3.8 percentage points and greatest in Mali where there is a difference of 9.4 percentage points (Table 1). Across the three countries and among both husbands and wives, there is a greater unmet need for spacing than for limiting (Table 1).

Table 2 presents the distribution of couple unmet need by the unmet need classification of the husband and wife. Among all couples, 6.8-11.9% of wives had unmet need for spacing while husbands had no unmet need (Table 2). Similarly, 4.3-5.8% of husbands had an unmet need for spacing while their wives had no unmet need (Table 2). Similar

proportions of couples had concordant unmet need. Among all couples, 5.8-9.0% both had unmet need for spacing, and 1.5-3.0% both had unmet need for limiting (Table 2).

The ratio of wife-only unmet need to all wife unmet need ranged from 0.45 in Benin to 0.52 in Mali (Table 3), indicating that approximately half of the wife's unmet need is in couples with discordant fertility preferences. Similarly, the ratio of concordant unmet need to any wife unmet need ranged from 0.48 in Mali to 0.55 in Benin (Table 3). The ratio of husband-only unmet need to any wife unmet need was lower, ranging from 0.21 in Mali to 0.27 in Benin (Table 3). This indicates that considering husbands' unmet need identifies an additional 21-27% of couples in which at least one partner has an unmet need.

## **Discussion**

Using only women's fertility intentions to calculate unmet need overestimates couples' (concordant) unmet need for family planning. In addition, the finding that 21-27% of couples with any unmet need have husband-only unmet need suggests that men may be a potential entry point for contraceptive use. A study in Uganda found that couples typically use indirect forms of communication, which lead both husbands and wives to overestimate their partner's desire for more children (Wolff, Blanc and Ssekamatte-Ssebuliba, 2000). If women's reported fertility desires are influenced by their perception of their husbands' desires, family planning programs could engage husbands to increase contraceptive uptake by women. Contraceptive counseling and IEC activities should



encourage couple communication so that couples can make informed decisions about contraceptive use based on shared fertility intentions.

## **Acknowledgements**

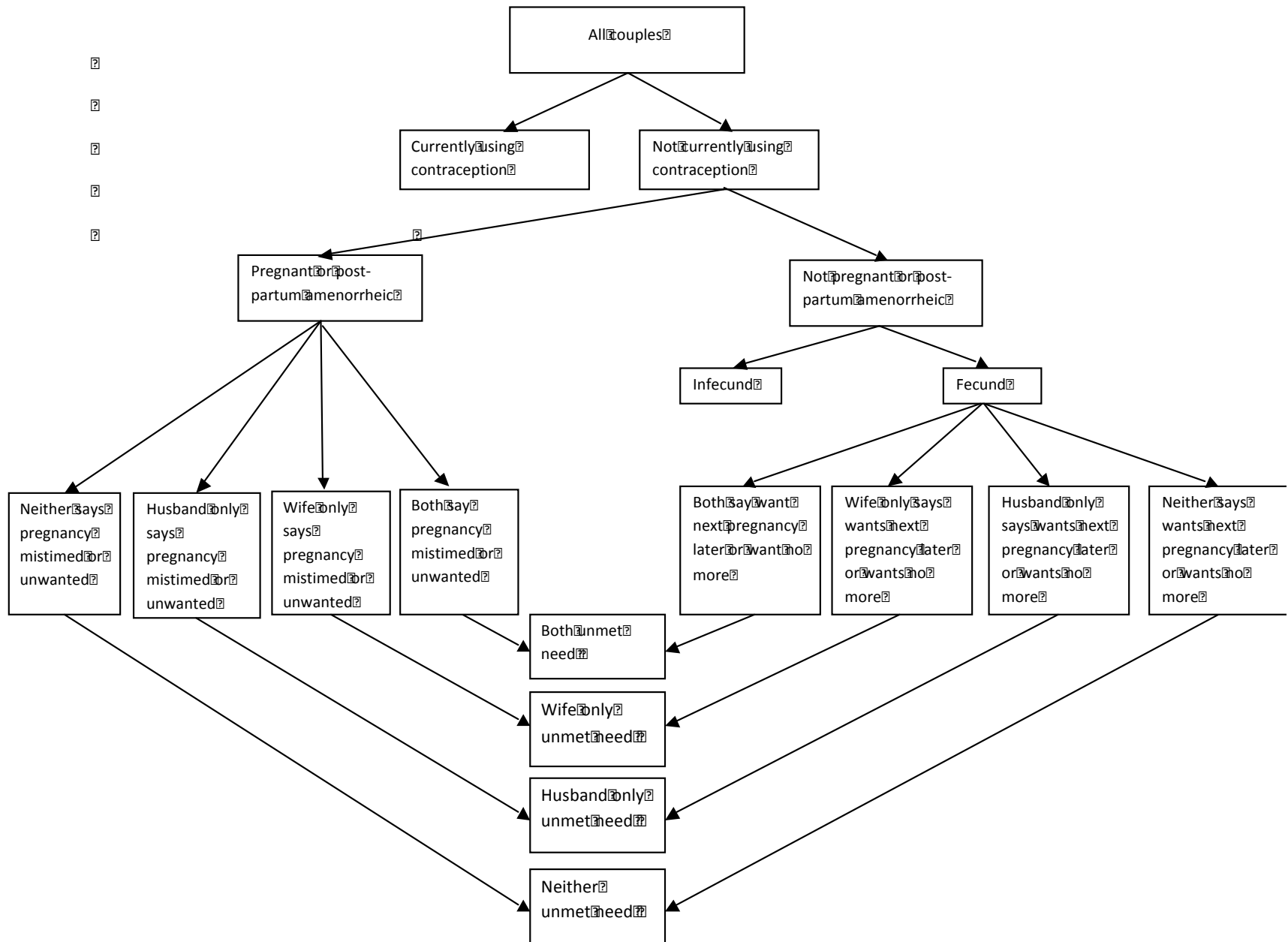
We would like to acknowledge Sarah Bradley who shared detailed information on the revised definition of unmet need and helped ensure that we were able to match the revised DHS definition in our analyses.

## References

1. Bradley, Sarah E.K., Trevor N. Croft, Joy D. Fishel, and Charles F. Westoff. 2012. Revising Unmet Need for Family Planning. DHS Analytical Studies No. 25. Calverton, Maryland, USA: ICF International.
2. Casterline, J.B., A.E. Perez, and A.E. Biddlecom. 1997. "Factors Underlying Unmet Need for Family Planning in the Philippines." *Studies in Family Planning* 28:173-91.
3. Casterline, J.B. and Sinding, S.W. 2000. "Unmet Need for Family Planning in Developing Countries and Implications for Population Policy." *Population and Development Review* 26:691-723.
4. Cellule de Planification et de Statistique de Ministere de la Sante (CPS/MS), Direction Nationale de la Statistique et de l'Informatique (DNSI) and ORC Macro. 2002. *Mali Demographic and Health Survey 2001*. Calverton, MD: CPS/MS, DNSI and ORC Macro.
5. Institut National de la Statistique et de l'Analyse Economique (INSAE) and Macro International Inc. 2007. *Benin Demographic and Health Survey 2006*. Calverton, MD: Institut National de la Statistique et de l'Analyse Economique (INSAE) and Macro International Inc.
6. Institut National de la Statistique et de la Demographie (INSD) and ORC Macro. 2004. *Burkina Faso Demographic and Health Survey 2003*. Calverton, MD: INSD and ORC Macro.
7. Mason, K.O., and H.L. Smith. 2000. "Husbands' versus Wives' Fertility Goals and Use of Contraception: The Influence of Gender Context in Five Asian Countries." *Demography* 37(3):299-311.

8. Ngom, P. 1997. "Men's Unmet Need for Family Planning: Implications for African Fertility Transitions." *Studies in Family Planning* 28:192-202.
9. Westoff, C. 1988. "The Potential Demand for Family Planning: A New Measure of Unmet Need and Estimates for Five Latin American Countries." *International Family Planning Perspectives* 14:45-53.
10. Wolff, B., A.K. Blanc, and J. Ssekamatte-Ssebuliba. 2000. "The role of couple negotiation in unmet need for contraception and the decision to stop childbearing in Uganda." *Studies in Family Planning* 31:124-137.

**Figure 1. Classification of couple unmet need for family planning based on individual fertility intentions of the husband and wife**



**Table 1. Percent of all currently married women, wives and husbands with unmet need for family planning, by type of unmet need and country**

Spouse and unmet need category	Country		
	Benin 2006	Burkina Faso 2003	Mali 2001
Number of currently married women	(n=12,343)	(n=8,437)	(n=10,522)
All currently married women (DHS estimate)*	100	100	100
No unmet need	72.7	70.2	70.3
Spacing	17.4	22.3	21.5
Limiting	9.9	7.5	8.2
Number of couples	(n=3,345)	(n=2,340)	(n=2,191)
Wives	100	100	100
No unmet need	79.4	73.2	70.4
Spacing	13.8	20.4	21.5
Limiting	6.8	6.4	8.1
Husbands	100	100	100
No unmet need	83.2	80.4	79.8
Spacing	11.5	16.9	17.8
Limiting	5.3	2.7	2.4

Note: Weighted percentages are reported

\*Revised percentages from STATcompiler, based on the definition of unmet need developed by Bradley et al. (2012)

**Table 2. Percent distribution of couple unmet need for family planning, by country**

		Country		
		Benin 2006 (n=3,345)	Faso 2003 (n=2,340)	Mali 2001 (n=2,191)
Unmet need of				
Husband	Wife			
All Couples		100	100	100
Neither with unmet need				
None	None	73.9	67.1	64.3
One only with unmet need				
None	Spacing	6.8	10.9	11.9
None	Limiting	2.5	2.4	3.6
Spacing	None	4.3	5.8	5.8
Limiting	None	1.2	0.3	0.3
Both with unmet need				
Spacing	Spacing	5.8	8.6	9.0
Limiting	Limiting	2.9	1.5	1.5
Spacing	Limiting	1.4	2.5	3.0
Limiting	Spacing	1.2	0.8	0.6

Note: Weighted percentages are reported

**Table 3. Ratio of wife-only, husband-only or both spouses' unmet need to wife's unmet need, by country**

Ratio	Country		
	Benin 2006 (n=3,345)	Burkina Faso 2003 (n=2,340)	Mali 2001 (n=2,191)
All wife unmet need	1.00	1.00	1.00
Both unmet need/Wife unmet need	0.55	0.50	0.48
Wife-only unmet need/Wife unmet need	0.45	0.50	0.52
Husband-only unmet need/Wife unmet need	0.27	0.23	0.21