

During the RDHS-III, men and women were asked to name any means of contraception they knew about. They were then asked questions concerning their own past and/or current use of contraception, and their intended use in the future. Finally, men and women were asked if they knew where to procure the various methods of contraception.

5.1 KNOWLEDGE OF CONTRACEPTION

The use of contraception presupposes prior knowledge of at least one contraceptive method, as well as a source of contraceptive supply. The different methods covered by the questionnaire fall into two categories:

- **Modern methods.** These include female sterilization, male sterilization, the pill, the IUD (intrauterine device), injectables, implants (Norplant), the male condom, the female condom, the diaphragm, vaginal methods (spermicides, foams and jellies), emergency contraception, the lactational amenorrhea method (LAM), and the standard days method (SDM)/beads.
- **Traditional methods.** These include the rhythm or periodic abstinence method, withdrawal, and so-called “folk” methods such as herbs, etc.

As previously indicated, information concerning knowledge of contraceptive methods was gathered in two ways: first, each respondent was asked to spontaneously name the contraceptive methods he or she knew about. If a respondent failed to mention a particular method covered by the questionnaire, the interviewer briefly described the method and recorded whether or not the respondent had heard of it. A method was considered to be known by a respondent if he or she mentioned it spontaneously or recognized it after it was described.

The results show that knowledge of family planning is nearly universal in Rwanda: 95 percent of women age 15-49 reported having knowledge of at least one method of contraception (Table 5.1.1). In general, women are more familiar with modern methods than with traditional or folk methods: 95 percent of women have heard of at least one modern method; 67 percent have heard of at least one traditional method; and 0.2 percent know of a folk method.

Table 5.1.1 Knowledge of contraceptive methods: women

Percentage of all women, of currently married women, and of sexually active unmarried women who know any contraceptive method, by specific method, Rwanda 2005

Method	All women	Currently married women	Sexually active unmarried women
Any method	94.9	97.9	94.6
Any modern method	94.5	97.5	94.6
Female sterilization	62.7	71.1	68.8
Male sterilization	23.4	30.1	20.0
Pill	77.9	89.4	84.8
IUD	31.3	39.7	27.1
Injectables	80.2	92.0	82.7
Implants	38.2	49.7	34.8
Male condom	88.7	91.0	92.0
Female condom	37.7	40.6	36.4
Diaphragm	3.8	5.0	2.2
Foam/jelly	5.6	6.3	5.6
Lactational amenorrhea method (LAM)	35.4	47.2	34.2
Emergency contraception	7.7	9.3	7.5
Standard days method/beads	33.7	42.9	35.4
Any traditional method	67.0	79.7	75.0
Rhythm or periodic abstinence	58.8	68.9	62.9
Withdrawal	47.1	63.3	58.7
Local traditional method	0.2	0.3	0.0
Mean number of methods known	6.3	7.5	6.5
Number of women	11,321	5,510	136

Knowledge of contraceptive methods among sexually active unmarried women is very high (95 percent for any method), although it has declined since 2000, when it was 100 percent. Knowledge of any contraceptive method among married women has increased slightly, from 97 percent in 2000 to 98 percent in 2005.

With respect to specific methods, Table 5.1.1 indicates that male condoms constitute the method best known by all women (89 percent), followed by injectables (80 percent), and the pill (78 percent). Diaphragms constitute the least known method for all categories of women (4 percent). With respect to traditional methods, 69 percent of married women reported knowing about the rhythm or periodic abstinence method, and 63 percent had heard of withdrawal. The mean number of methods known is highest among married women (7.5).

Table 5.1.2 shows knowledge of contraception among men. As with women, knowledge of contraceptive methods is high: 98 percent of men reported having knowledge of at least one modern method, compared with 77 percent for traditional methods.

With respect to specific methods, Table 5.1.2 shows that, like women, men are most familiar with the male condom (97 percent), followed by injectables among all men and currently married men (at least 75 percent). The pill is the second most commonly known method among sexually active unmarried men (85 percent). Like women, few men have heard of the diaphragm (6 percent). With respect to traditional methods, rhythm or periodic abstinence and withdrawal methods are known in roughly the same percentages (65 percent and 63 percent).

5.2 USE OF CONTRACEPTION

Increasing the use of contraception is the ultimate aim of family planning programs, and contraceptive prevalence serves as a key measure for assessing the success of such programs. RDHS-III data have been used to estimate “ever use” of contraception and the current level of use, that is, at the time of the survey.

5.2.1 Ever Use of Contraception

Women who said that they had heard of a contraceptive method were asked if they had ever used that method. This information was used to measure the level of contraceptive use at any time in the woman’s reproductive life (ever use), according to specific method. Table 5.2 presents the results for all women, married women, and sexually active unmarried women.

Method	All men	Currently married men	Sexually active unmarried men
Any method	98.1	99.5	100.0
Any modern method	98.0	99.5	100.0
Female sterilization	71.3	82.4	79.5
Male sterilization	34.3	43.2	38.3
Pill	70.7	83.4	84.5
IUD	36.6	47.1	43.4
Injectables	75.1	87.8	80.9
Implants	34.1	46.6	39.8
Male condom	96.6	98.0	100.0
Female condom	51.9	56.5	67.1
Diaphragm	5.6	7.2	5.3
Foam/jelly	10.7	12.6	16.3
Lactational amenorrhea method (LAM)	27.1	37.3	22.8
Emergency contraception	13.2	16.4	21.3
Standard days method/beads	39.6	50.3	41.6
Any traditional method	76.6	92.1	92.0
Rhythm or periodic abstinence	65.4	79.9	81.3
Withdrawal	63.3	81.9	70.5
Mean number of methods known	7.0	8.3	7.9
Number of men	4,820	2,500	57

Table 5.2. Ever use of contraception

Percentage of all women, currently married women, and sexually active unmarried women who have ever used any contraceptive method, by specific method and age, Rwanda 2005

Age group	Modern method						Traditional method				Number of women					
	Any method	Any modern method	Female sterilization	Male sterilization	Pill	Injectables	Male condom	LAM	Emergency contraception	Standard days method/beads		Other modern methods	Any traditional method	Periodic abstinence	Withdrawal	Other
ALL WOMEN																
15-19	1.3	1.2	0.0	0.0	0.1	0.0	1.2	0.1	0.0	0.0	0.0	0.3	0.3	0.1	0.0	2,585
20-24	12.3	7.8	0.0	0.0	2.3	2.6	3.3	0.9	0.1	0.3	0.0	6.7	3.6	4.1	0.0	2,354
25-29	27.3	19.3	0.2	0.0	6.4	8.8	4.5	2.9	0.1	1.6	0.7	14.3	8.3	9.5	0.0	1,738
30-34	33.1	22.3	0.4	0.1	7.9	12.6	3.4	3.6	0.0	2.0	1.1	17.9	11.6	9.6	0.1	1,466
35-39	36.6	25.7	0.6	0.0	9.8	14.3	3.8	4.1	0.2	1.8	1.5	17.9	11.6	10.0	0.3	1,134
40-44	36.3	27.5	0.6	0.0	12.3	17.0	1.5	2.3	0.0	1.4	1.7	14.8	9.9	8.1	0.0	1,135
45-49	34.2	25.8	1.2	0.2	10.7	17.1	0.3	2.2	0.0	1.4	1.6	15.6	9.9	9.4	0.3	910
Total	21.4	15.2	0.3	0.0	5.6	8.0	2.6	1.9	0.1	1.0	0.7	10.5	6.5	6.1	0.1	11,321
CURRENTLY MARRIED WOMEN																
15-19	7.9	7.9	0.0	0.0	2.9	0.8	6.0	1.9	1.9	1.9	0.0	1.9	1.9	1.9	0.0	65
20-24	22.7	12.9	0.0	0.0	4.7	6.1	2.9	2.1	0.1	0.7	0.1	13.5	7.1	8.2	0.0	980
25-29	32.4	22.3	0.3	0.0	7.8	11.0	4.0	3.4	0.1	2.1	0.9	17.8	10.0	12.1	0.0	1,254
30-34	37.0	24.3	0.5	0.1	8.6	14.1	2.8	3.8	0.0	2.4	1.3	20.1	12.8	11.2	0.2	1,112
35-39	40.8	28.1	0.8	0.0	10.9	15.5	3.0	5.2	0.0	2.1	1.7	21.4	13.7	11.9	0.4	807
40-44	41.6	31.1	0.8	0.0	12.8	19.8	1.8	2.6	0.0	2.2	1.8	18.7	12.4	10.7	0.0	739
45-49	40.2	29.8	1.5	0.3	12.3	19.8	0.2	2.5	0.0	2.3	1.5	19.4	12.8	11.6	0.4	554
Total	34.6	23.7	0.5	0.0	8.9	13.4	2.8	3.3	0.1	1.9	1.1	18.1	11.1	10.8	0.1	5,510
SEXUALLY ACTIVE UNMARRIED WOMEN ¹																
Total	28.0	22.3	0.4	0.0	6.3	9.0	14.9	1.6	0.9	0.0	0.6	17.4	10.6	11.2	0.0	136

LAM = Lactational amenorrhea method

¹ Women who had sexual intercourse in the month preceding the survey

The results show that 21 percent of women have used a method of contraception at some time. Modern methods were used more frequently than traditional methods (15 percent for modern; 11 percent for traditional) and, among the modern methods, injectables and the pill were used more frequently than other methods (8 percent for injectables, 6 percent for the pill; 3 percent for male condoms). Among the traditional methods, withdrawal and periodic abstinence were used in the same proportions (6 percent).

Ever use of contraception is considerably higher among married women than all women: 35 percent of married women have used a method at some time, 24 percent a modern method, and 18 percent a traditional or folk method. For all women, the percentages are 21 percent, 15 percent, and 11 percent, respectively. Sexually active unmarried women have higher levels of ever use of contraception than all women, but lower levels of ever use than married women. The male condom was the method most frequently used by sexually active unmarried women (15 percent), followed by injectables (9 percent), and the pill (6 percent). Among traditional methods, these women opted for periodic abstinence and withdrawal in the same proportions as married women (11 percent for both methods).

5.2.2 Current Use of Contraception

Table 5.3 shows current contraceptive prevalence. Women who were not pregnant and had heard of at least one contraceptive method were asked whether they were currently using any method of contraception to avoid pregnancy. The responses to this question were used to assess current contraceptive prevalence, that is, the proportion of women who were using a method of contraception at the time of the survey.

Table 5.3 shows that, among all women age 15-49 who were not pregnant at the time of the survey, 10 percent were using at least one method of contraception, 6 percent were using a modern method, and 4 percent were using a traditional method. Results according to age show that prevalence is lowest among the youngest women, age 15 to 24 (7 percent at most), and the oldest women, age 45 to 49 (10 percent). The most frequently used modern method is injectables (2 percent). The rate of use for other methods remains very low. Periodic abstinence and withdrawal are the most frequently used traditional methods (2 percent each).

Contraceptive prevalence among married women at the time of the survey was 17 percent for any method and 10 percent for any modern method. Seven percent of married women reported using a traditional method at the time of the survey. The most frequently used modern methods were injectables (5 percent) and the pill (2 percent) (Figure 5.1). Periodic abstinence (4 percent) and withdrawal (3 percent) were the most frequently used traditional methods. The variation in contraceptive prevalence by age found among all women is also found among married women: prevalence is lowest for younger women (3 percent for age 15 to 19) and older women (14 percent for age 45 to 49).

Table 5.3 Current use of contraception

Percent distribution of all women, currently married women, and sexually active unmarried women by contraceptive method currently used, according to age, Rwanda 2005

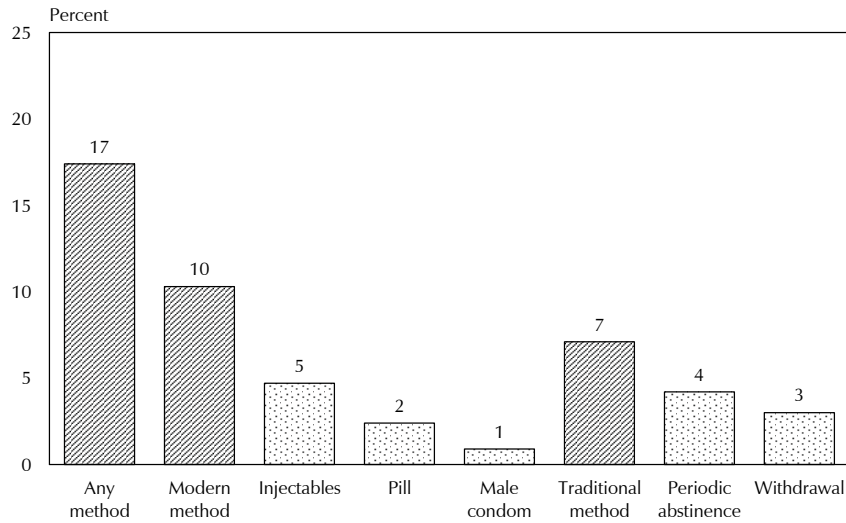
Age group	Modern method						Traditional method				Number of women				
	Any method	Any modern method	Female sterilization	Pill	Injectables	Male condom	LAM	Standard days method/beads	Other modern methods	Any traditional method		Periodic abstinence	Withdrawal	Not currently using	Total
ALL WOMEN															
15-19	0.4	0.3	0.0	0.1	0.0	0.2	0.0	0.0	0.0	0.1	0.1	0.0	99.6	100.0	2,585
20-24	6.5	4.1	0.0	1.1	1.4	1.3	0.2	0.1	0.0	2.4	1.4	1.0	93.5	100.0	2,354
25-29	13.9	8.6	0.2	2.0	3.9	1.1	0.7	0.4	0.3	5.3	2.7	2.6	86.1	100.0	1,738
30-34	17.0	10.5	0.4	2.3	4.8	1.2	0.9	0.4	0.4	6.5	4.2	2.4	83.0	100.0	1,466
35-39	16.2	10.3	0.6	2.2	3.9	1.0	1.3	0.2	1.0	5.9	3.5	2.4	83.8	100.0	1,134
40-44	14.2	7.1	0.6	1.7	3.3	0.7	0.1	0.6	0.1	7.1	5.2	1.9	85.8	100.0	1,135
45-49	9.7	4.0	1.2	0.4	1.7	0.0	0.1	0.2	0.2	5.7	3.7	2.0	90.3	100.0	910
Total	9.6	5.6	0.3	1.3	2.4	0.8	0.4	0.2	0.2	3.9	2.4	1.5	90.4	100.0	11,321
CURRENTLY MARRIED WOMEN															
15-19	3.2	3.2	0.0	2.9	0.0	0.3	0.0	0.0	0.0	0.0	0.0	0.0	96.8	100.0	65
20-24	12.7	7.6	0.0	2.4	3.4	1.3	0.3	0.1	0.0	5.1	2.7	2.4	87.3	100.0	980
25-29	17.3	10.9	0.3	2.6	5.2	0.8	1.0	0.6	0.5	6.5	3.0	3.4	82.7	100.0	1,254
30-34	20.3	12.7	0.5	2.8	6.2	1.1	1.1	0.5	0.6	7.7	4.7	3.0	79.7	100.0	1,112
35-39	20.4	13.1	0.8	2.9	5.1	0.8	1.9	0.3	1.2	7.3	4.4	3.0	79.6	100.0	807
40-44	19.7	10.0	0.8	2.3	4.7	0.9	0.1	1.0	0.1	9.7	6.7	3.0	80.3	100.0	739
45-49	14.1	5.8	1.5	0.7	2.7	0.1	0.2	0.4	0.3	8.2	4.9	3.3	85.9	100.0	554
Total	17.4	10.3	0.5	2.4	4.7	0.9	0.8	0.5	0.4	7.1	4.2	3.0	82.6	100.0	5,510
SEXUALLY ACTIVE UNMARRIED WOMEN ¹															
Total	11.6	6.2	0.4	0.5	1.5	3.8	0.0	0.0	0.0	5.4	3.3	2.1	88.4	100.0	136

Note: If more than one method is used, only the most effective method is considered in this tabulation.

LAM = Lactational amenorrhea method

¹ Women who have had sexual intercourse in the month preceding the survey

Figure 5.1 Contraceptive Use among Currently Married Women Age 15-49



RDHS 2005

Current use of contraception among sexually active unmarried women falls between the two other categories: 12 percent for any method, 6 percent for any modern method, and 5 percent for any traditional method. This represents a decline compared with 2000, when contraceptive prevalence among sexually active unmarried women was 22 percent for any method, 15 percent for any modern method, and 7 percent for any traditional method. Male condoms (4 percent) constitute the modern method used most frequently by these women. Periodic abstinence (3 percent) is the most frequently used traditional method.

Comparison of the current survey results with those of the previous two surveys reveals an overall decline in contraceptive prevalence¹ (Figure 5.2). Among married women, current use of modern methods dropped significantly from 13 percent to 4 percent between 1992 and 2000. Although it has increased since the 2000 survey (10 percent in 2005), current use of contraception nevertheless remains lower than the level observed in 1992 (13 percent). Among sexually active unmarried women, the rate of condom use was 11 percent in 2000; it has dropped to 4 percent in the current survey.

¹ During the two previous surveys, LAM and SDM/beads were not included among modern contraceptive methods. If these were not included among modern methods in the RDHS-III, modern contraceptive prevalence among currently married women drops to 9 percent.

Figure 5.2 Trends in Use of Modern Methods among Currently Married Women

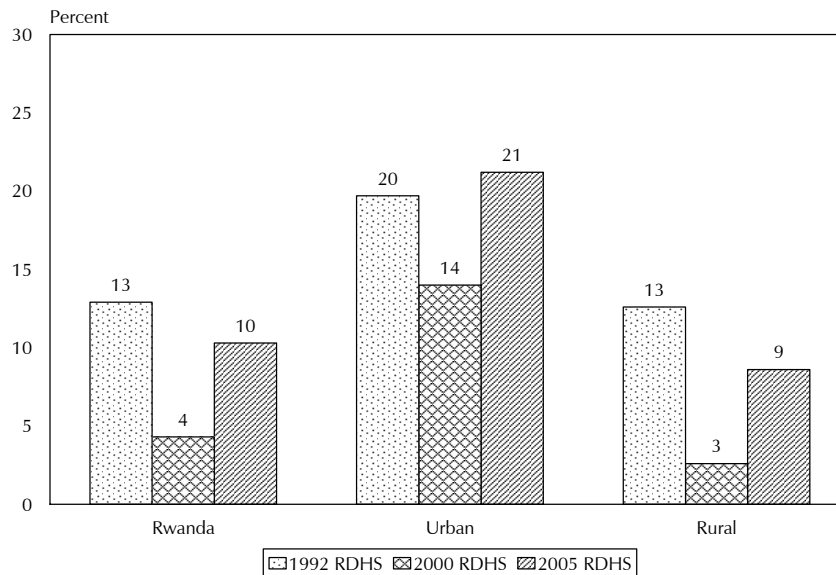


Table 5.4 shows the distribution of currently married women by method of contraception currently used, according to background characteristics. Contraceptive prevalence is noticeably higher in urban areas (32 percent) than in rural ones (15 percent). It is considerably higher in the City of Kigali (36 percent) than in the other provinces (19 percent at most in the East province). Percentages in the South and West (15 percent each) and North (16 percent) provinces are lower than the national average (17 percent). The prevalence of modern contraceptive methods also varies by province, being highest in the City of Kigali (23 percent), and ranging between 8 percent and 10 percent in the other provinces.

Contraceptive prevalence varies by level of education. Married women with no education have a lower level of contraceptive use—11 percent for any method, 6 percent for any modern method, and 5 percent for any traditional method—than educated women. The use of contraception increases with the number of children, from 3 percent among nulliparous women, to 14 percent among women with 1 or 2 children, to 21 percent among women with 3 children or more. Similarly, women in the poorest wealth quintile use contraception less frequently (11 percent) than women in the other quintiles, particularly the richest quintile (32 percent).

Table 5.4 Current use of contraception by background characteristics

Percent distribution of currently married women by contraceptive method currently used, according to background characteristics, Rwanda 2005

Background characteristic	Modern method						Traditional method				Number of women			
	Any method	Any modern method	Female sterilization	Pill	Injectables	Male condom	LAM	Standard days method/beads	Other modern methods	Any traditional method		Periodic abstinence	Withdrawal	Not currently using
Residence														
Urban	31.6	21.2	1.1	4.2	7.3	4.0	1.5	1.4	1.9	10.4	6.9	3.5	68.4	100.0
Rural	15.2	8.6	0.5	2.2	4.3	0.4	0.7	0.3	0.2	6.6	3.7	2.9	84.8	100.0
Province														
Kigali City	35.5	23.2	1.3	4.2	6.6	5.2	2.2	1.4	2.2	12.3	7.9	4.4	64.5	100.0
South	14.8	8.4	0.4	1.7	3.9	0.7	0.6	0.7	0.3	6.5	3.4	3.1	85.2	100.0
West	14.5	10.3	1.0	2.2	4.7	0.4	1.3	0.5	0.2	4.2	2.3	1.9	85.5	100.0
North	16.0	9.8	0.2	2.8	5.5	0.7	0.1	0.3	0.3	6.1	3.5	2.6	84.0	100.0
East	18.9	8.5	0.2	2.7	4.1	0.4	0.7	0.1	0.4	10.4	6.5	3.9	81.1	100.0
Education														
No education	10.8	5.9	0.4	1.4	3.1	0.3	0.4	0.2	0.1	5.0	3.0	1.9	89.2	100.0
Primary	17.3	9.7	0.4	2.2	4.9	0.7	1.0	0.3	0.2	7.6	4.1	3.4	82.7	100.0
Secondary or higher	40.4	29.1	1.7	7.9	8.5	4.0	0.9	2.6	3.5	11.2	8.1	3.2	59.6	100.0
Number of living children														
0	2.6	1.1	0.0	0.0	0.7	0.3	0.0	0.0	0.0	1.5	0.5	0.9	97.4	100.0
1-2	13.9	8.0	0.3	2.5	2.9	1.1	0.6	0.4	0.2	5.9	3.4	2.4	86.1	100.0
3-4	21.1	13.0	0.7	2.8	6.2	1.0	1.0	0.4	0.7	8.1	4.4	3.7	78.9	100.0
5+	20.7	12.0	0.8	2.5	5.9	0.6	1.0	0.7	0.5	8.7	5.5	3.2	79.3	100.0
Wealth quintile														
Lowest	11.0	6.0	0.4	1.1	3.3	0.2	0.8	0.1	0.1	5.0	3.3	1.7	89.0	100.0
Second	15.2	7.4	0.5	1.7	3.8	0.4	0.7	0.2	0.1	7.8	4.4	3.3	84.8	100.0
Middle	15.7	8.5	0.2	2.2	4.2	0.2	1.1	0.4	0.1	7.3	4.4	2.8	84.3	100.0
Fourth	14.8	8.5	0.4	1.8	4.9	0.5	0.4	0.3	0.2	6.4	2.7	3.7	85.2	100.0
Highest	31.8	22.4	1.2	5.9	7.4	3.4	1.2	1.4	1.8	9.4	6.2	3.2	68.2	100.0
Total	17.4	10.3	0.5	2.4	4.7	0.9	0.8	0.5	0.4	7.1	4.2	3.0	82.6	100.0

Note: If more than one method is used, only the most effective method is considered in this tabulation.
LAM = Lactational amenorrhea method

5.3 NUMBER OF CHILDREN AT FIRST USE OF CONTRACEPTION

The use of contraception for the first time meets different needs depending primarily on the number of living children:

- **Delaying first birth** - contraceptive use begins before the woman has any children.
- **Birth spacing** - contraceptive use begins when the number of living children is low.
- **Limiting cumulative fertility** - contraceptive use begins after the desired number of children has been reached.

Table 5.5 shows the distribution of women who have ever used contraception by number of living children at the time of first use of contraception, according to age.

Overall, 5 percent of women who have used contraception began use before they gave birth, i.e., to delay the first birth (compared with only 1 percent in 2000); 26 percent began using contraception after having one child (12 percent in 2000); 25 percent began using contraception after having two children (9 percent in 2000); 17 percent began using after having 3 children (5 percent in 2000); and 26 percent began using at higher parities (4 children or more) (8 percent in 2000), almost certainly to limit cumulative fertility.

The proportion of women using contraception for the first time before having any children has risen from previous generations: only 2 percent of women between the ages of 30 and 34 began using contraception before having children; for women age 25 to 29, this proportion is 4 percent, and for women age 20 to 24, it is 20 percent.

Table 5.5 Number of children at first use of contraception							
Percent distribution of women who have ever used contraception by number of living children at the time of first use of contraception, according to age, Rwanda 2005							
Age group	Number of living children at time of first use of contraception					Total ¹	Number
	0	1	2	3	4+		
15-19	(78.2)	(16.4)	(3.7)	(0.0)	(0.0)	(100.0)	34
20-24	19.8	48.6	26.2	4.0	0.2	100.0	289
25-29	4.3	38.1	32.1	17.5	7.4	100.0	475
30-34	1.6	26.8	31.8	21.3	18.5	100.0	485
35-39	0.7	24.0	26.4	21.2	27.6	100.0	415
40-44	0.1	12.7	19.8	18.6	48.5	100.0	411
45-49	0.0	8.3	13.1	16.7	61.8	100.0	311
Total	4.8	26.2	25.4	17.1	26.1	100.0	2,421

Note: Figures in parentheses are based on 25-49 unweighted cases.
¹ Includes those with missing information

5.4 KNOWLEDGE OF FERTILE PERIOD

Table 5.3 shows that among currently married women, injectables (5 percent) and periodic abstinence (4 percent), are the most frequently used methods of contraception in Rwanda. However, the effective use of periodic abstinence depends largely on an understanding of when during the menstrual cycle a woman is most likely to conceive. To assess this understanding, the survey asked all women if

there were certain days during the menstrual cycle when they were more likely to become pregnant if they had sexual intercourse. Those who answered yes were asked when those days occurred during the cycle. The question provided four explicit responses: “just before her period begins,” “right after her period has ended,” “during her period,” and “halfway between two periods.” Respondents could also give a different response or state that they did not know when this occurred. These responses can be grouped into three categories of decreasing knowledge:

- **Correct knowledge:** “halfway between two periods;” the middle of the cycle.
- **Possibly correct knowledge:** “just before her period begins,” “right after her period has ended.” These responses are too vague to be considered accurate but, depending on how a woman views “right after her period has ended” or “just before her period begins,” these answers could indicate the fertile period.
- **Incorrect knowledge:** “during her period,” “no specific time,” “other,” and “don’t know.”

Table 5.6 indicates that only 13 percent of women have correct knowledge about when the fertile period occurs; 15 percent have possibly correct knowledge; and 72 percent have incorrect knowledge or don’t know that there is a time during the menstrual cycle when a woman is more likely to conceive. Knowledge of the fertile period among users of periodic abstinence as a family planning method is considerably higher (33 percent) than for nonusers (13 percent). However, four in ten users of periodic abstinence (41 percent) have only possibly correct knowledge of the fertile period, and 26 percent do not know when a woman should stop having sexual intercourse in order to avoid becoming pregnant, or do not know that such a time exists. These results show that, in 2005, as in 2000, nearly seven in ten users of periodic abstinence (67 percent) do not know how to use the method correctly because they have only possibly correct knowledge of the fertile period. This has major implications for family planning, especially given that contraceptive prevalence is so low in Rwanda (17 percent) and periodic abstinence is the most frequently used method after injectables.

Perceived fertile period	Users of rhythm or periodic abstinence	Nonusers of rhythm or periodic abstinence	All women
Halfway between two periods	32.7	12.7	13.1
Just before her period begins	3.0	2.0	2.0
Right after her period has ended	37.9	12.6	13.2
During her period	3.0	1.1	1.1
No specific time	21.2	62.9	61.9
Don't know	2.1	8.8	8.6
Total	100.0	100.0	100.0
Number of women	276	11,045	11,321

5.5 SOURCE OF CONTRACEPTION

To assess the contribution of public and private medical service providers to the sale or distribution of the various modern methods of contraception, the women surveyed were asked where they obtained the method they use. The RDHS-III also asked where they had most recently obtained the contraceptive methods they were using at the time of the survey.

Table 5.7 shows that in Rwanda, the majority of women obtain modern methods of contraception from the public sector (73 percent, compared with 69 percent in 2000); 13 percent of women obtain their method from a government hospital; 58 percent from a health facility; and 1 percent from another public entity. In addition, 14 percent of contraceptive users obtain their method from the private medical sector, particularly pharmacies and other private medical sources (6 percent each). The nonmedical private sector (shops, kiosks, friends, relatives) supplies 8 percent of contraceptive needs, and other sources provide 5 percent.

Table 5.7 Source of contraception

Percent distribution of current users of modern contraceptive methods by most recent source of method, according to specific method, Rwanda 2005

Source	Female sterilization	Pill	Injectables	Male condom	Standard days method/beads	Other modern methods	Total
Public sector	(92.1)	80.9	86.2	19.0	(54.5)	(69.4)	72.6
Government hospital	(67.6)	7.9	9.2	4.1	(3.0)	(53.0)	13.0
Government health centre	(22.0)	71.3	76.7	14.2	(42.2)	(16.4)	58.3
Other public	(2.5)	1.7	0.3	0.7	(9.4)	(0.0)	1.2
Private medical sector	(2.4)	14.5	8.8	29.6	(11.9)	(26.4)	14.0
Private hospital or clinic	(2.4)	1.9	0.6	6.5	(0.0)	(10.1)	2.3
Pharmacy	(0.0)	7.8	1.7	20.4	(0.0)	(0.0)	5.9
Other private medical	(0.0)	4.8	6.5	2.7	(11.9)	(16.3)	5.8
Other source	(5.5)	4.6	4.9	51.4	(33.5)	(4.2)	13.4
Shop/kiosk	(0.0)	0.6	0.1	41.1	(4.8)	(4.2)	7.0
Friends, relatives	(0.0)	0.0	0.0	4.0	(8.5)	(0.0)	1.0
Other	(5.5)	4.0	4.8	6.3	(20.2)	(0.0)	5.4
Total	(100.0)	100.0	100.0	100.0	(100.0)	(100.0)	100.0
Number of women	34	144	269	93	27	26	592

Note: Table excludes lactational amenorrhea method (LAM). Figures in parentheses are based on 25-49 unweighted cases.

For methods designed to be used directly by women and requiring procurement, the great majority of women who use modern methods turn to the public sector (81 percent for the pill, and 86 percent for injectables), while condoms, designed to be used by the partner, are most often obtained from the private sector. Women obtain condoms either from the private medical sector (30 percent) or from other sources such as shops and kiosks (45 percent). Because the number of women using female sterilization is so low, a discussion of the variations would not be meaningful. This is also the case for the standard days, or beads method, which was only recently introduced in Rwanda and is therefore used by relatively few women.

5.6 FUTURE USE OF CONTRACEPTION

Married women who were not using a contraceptive method at the time of the survey were asked whether they planned to use one in the future. The reason given by those who do not plan to use contraception in the future is useful in developing family planning marketing strategies. Also, the methods preferred by those who do plan to use contraception in the future is useful in assessing the demand for family planning.

Overall, nearly six in ten women (59 percent) reported that they plan to use a contraceptive method in the future, 7 percent were not sure, and 34 percent reported that they did not intend to use contraception (Table 5.8). The number of children a woman has affects her decision on whether to use contraception in the future. Nearly half (46 percent) of women who do not have any children reported intending to use a family planning method in the future. Among women with one or two children, the proportion is 65 percent; among those with three children and with four or more children, the proportions are lower (61 percent for three children; 54 percent for four or more children).

Table 5.8 Future use of contraception

Percent distribution of currently married women who are not using a contraceptive method by intention to use in the future, according to number of living children, Rwanda 2005

Intention	Number of living children ¹					Total
	0	1	2	3	4+	
Intends to use	45.8	64.6	65.1	60.7	53.6	58.5
Unsure	12.7	10.4	6.5	7.5	5.3	7.0
Does not intend to use	41.5	25.0	28.2	31.6	40.8	34.3
Total ²	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	186	715	880	789	1,982	4,552

¹ Includes current pregnancy
² Includes those with missing information

Women who were not using contraception and do not plan to use it in the future were asked to give their reason. Table 5.9 shows the variety of reasons given. Forty-four percent of women gave reasons relating to fertility, in particular, infrequent sex/no sex (8 percent), menopause/hysterectomy (14 percent), the desire to have as many children as possible (10 percent), and low fertility/infertility (12 percent). A little more than one in five women (22 percent) said they were opposed to the use of contraception, this opposition being motivated by religious prohibitions (10 percent), opposition of the husband/partner (4 percent), or opposition of the respondent herself (7 percent). Twenty-two percent of women gave health concerns and fear of side effects as reasons for not intending to use contraception. The proportion of women who gave reasons related to lack of knowledge is negligible (2 percent).

The frequency with which reasons were reported by women varies according to age group. Women age 15 to 29 were less likely to give fertility related reasons (19 percent) than women age 30 to 49 (51 percent). Women age 15 to 29 gave reasons more frequently related to opposition to contraception (34 percent) or to the method of contraception (31 percent) than older women age 30 to 49 (18 percent and 19 percent, respectively).

Table 5.9 Reason for not intending to use contraception

Percent distribution of currently married women who are not using a contraceptive method and who do not intend to use in the future by main reason for not intending to use, according to age, Rwanda 2005

Reason	Age		Total
	15-29	30-49	
Fertility-related reasons	19.0	51.1	43.6
Infrequent sex/no sex	3.9	8.7	7.6
Menopausal/had hysterectomy	0.0	18.0	13.8
Subfecund/infecund	3.4	15.0	12.3
Wants as many children as possible	11.6	9.4	9.9
Opposition to use	33.6	18.0	21.7
Respondent opposed	9.9	5.8	6.7
Husband/partner opposed	7.6	3.3	4.3
Others opposed	1.5	0.5	0.7
Religious prohibition	14.7	8.4	9.9
Lack of knowledge	3.3	2.0	2.3
Knows no method	2.8	1.0	1.4
Knows no source	0.5	1.0	0.9
Method-related reasons	30.9	19.3	22.0
Health concerns	3.7	3.9	3.8
Fear of side effects	20.9	12.2	14.2
Lack of access/too far	0.0	0.1	0.1
Costs too much	2.3	0.4	0.9
Inconvenient to use	1.7	0.7	1.0
Interfere with body's normal processes	2.3	2.0	2.1
Other	11.4	7.6	8.5
Don't know/missing	1.8	2.0	1.9
Total	100.0	100.0	100.0
Number of women	366	1,198	1,563

To assess the potential demand for specific contraceptive methods, married women who reported intending to use contraception in the future were asked to state their preferred method.

Table 5.10 indicates that most women prefer modern methods regardless of their age; in particular, injectables (36 percent) and the pill (20 percent). Male condoms and female sterilization were mentioned by only 4 percent of women. Among traditional methods, periodic abstinence was cited most frequently (13 percent).

Table 5.10 Preferred method of contraception for future use

Percent distribution of currently married women who are not using a contraceptive method but who intend to use in the future by preferred method, according to age, Rwanda 2005

Method	Age		Total
	15-29	30-49	
Female sterilization	1.8	7.2	4.3
Male sterilization	0.1	0.0	0.1
Pill	21.4	17.7	19.7
IUD	2.7	2.0	2.4
Injectables	37.0	35.7	36.4
Implants	2.5	4.1	3.2
Male condom	4.6	3.5	4.1
Female condom	0.1	0.1	0.1
Diaphragm	0.0	0.1	0.1
Foam/jelly	0.0	0.1	0.1
LAM	0.2	0.2	0.2
Standard days/beads	2.3	2.8	2.5
Rhythm/periodic abstinence	13.9	12.3	13.2
Withdrawal	1.4	2.7	2.0
Other	3.0	3.1	3.1
Unsure	8.9	8.2	8.6
Missing	0.0	0.1	0.0
Total	100.0	100.0	100.0
Number of women	1,433	1,230	2,663

5.7 EXPOSURE TO FAMILY PLANNING MESSAGES

Information on the level of exposure to sources of information about family planning can be very important to those developing family planning programs. This information allows them to design strategies to reach specific target populations and to effectively disseminate information about contraceptive use. For this reason, the survey asked women age 15 to 49 and men age 15 to 59 whether they had heard or seen anything about family planning on the radio or on television, or from newspapers/magazines, or posters/ brochures, during the past few months.

Table 5.11.1 shows that 59 percent of women did not see or hear a family planning message in newspapers/magazines, or on radio or television. However, 41 percent of women did hear a family planning message on the radio, and 4 percent did see one on television. Only 5 percent of women saw a family planning message in a newspaper or magazine in the past few months.

Table 5.11.1 Exposure to family planning messages: women

Percentage of women who heard or saw a family planning message on the radio or television, or in a newspaper/magazine in the past few months, according to background characteristics, Rwanda 2005

Background characteristic	Radio	Television	Newspaper/ magazine	None of these three media sources	Number of women
Age					
15-19	32.4	3.1	3.8	67.4	2,585
20-24	42.2	4.2	5.1	57.3	2,354
25-29	46.9	4.0	5.9	52.6	1,738
30-34	44.1	4.1	5.6	55.6	1,466
35-39	42.5	3.3	3.9	57.3	1,134
40-44	41.9	2.9	3.9	58.1	1,135
45-49	40.4	2.5	3.1	59.4	910
Residence					
Urban	56.5	12.7	12.1	42.7	1,921
Rural	37.6	1.7	3.1	62.3	9,400
Province					
Kigali city	56.1	16.0	14.2	43.0	1,127
South	37.5	2.6	4.9	62.3	2,958
West	32.3	3.0	4.4	67.4	2,824
North	47.5	1.6	2.7	52.4	2,063
East	41.9	1.1	1.6	58.0	2,348
Education					
No education	32.6	1.2	1.2	67.3	2,646
Primary	39.3	2.3	3.3	60.5	7,591
Secondary or higher	71.3	17.8	22.0	27.3	1,084
Wealth quintile					
Lowest	22.9	1.0	1.6	77.1	2,421
Second	38.0	0.7	1.7	61.9	2,325
Middle	39.5	1.5	2.6	60.5	2,099
Fourth	46.0	1.9	4.1	53.6	2,133
Highest	58.4	12.4	12.8	40.8	2,342
Total	40.8	3.5	4.6	58.9	11,321

Exposure to family planning messages in the media varies by background characteristics. Women age 15 to 19 and 45 to 49 had the highest levels of nonexposure to family planning messages in the media during the 12 months preceding the survey (67 percent and 59 percent, respectively). The results also show disparities by residence, with women in rural areas having higher rates of nonexposure than women in urban areas (62 percent for rural, 43 percent for urban). Similarly, women with no education were less exposed (67 percent with no exposure) than those with a secondary education or higher (27 percent with no exposure); and women in the poorest households were less exposed (77 percent with no exposure) than women in the wealthiest households (41 percent with no exposure). In the provinces, the West (67 percent) and South (62 percent) provinces had the highest levels of nonexposure to family planning messages.

Radio is by far the most frequent source of family planning messages (41 percent). Only a small percentage of women reported seeing a family planning message on television (4 percent) or in a newspaper (5 percent).

With respect to men, Table 5.11.2 shows that nearly four in ten men (39 percent)—a smaller proportion than for women (59 percent)—had no exposure to a family planning message in the past few

months through any of the various media (radio, television, newspapers/magazines). However, 61 percent of men reported having heard a family planning message on the radio; at least 6 percent had seen one on television; and at least 12 percent had seen one in a newspaper or magazine.

Younger men were the least exposed to family planning messages—age 15 to 19, 52 percent had no exposure—regardless of the media source. Like women, men in rural areas were more likely to report not having been exposed to family planning messages, regardless of the source (41 percent for rural areas compared with 28 percent for urban areas). Similarly, men with no education (45 percent) were more likely to have had no exposure than those with a secondary education or higher (23 percent); and men in the poorest households (53 percent) were more likely to have had no exposure to family planning messages than those in the richest households (28 percent). Results by province show that 76 percent of men in the City of Kigali have heard or seen a family planning message, compared with 51 percent in the West province.

Background characteristic	Radio	Television	Newspaper/ magazine	None of these three media sources	Number of men
Age					
15-19	48.1	5.3	8.2	51.7	1,102
20-24	61.0	6.7	12.2	38.3	946
25-29	65.4	7.6	15.2	33.5	632
30-34	70.5	9.2	14.4	28.9	509
35-39	64.6	6.0	16.1	34.6	442
40-44	62.3	6.0	14.1	37.5	404
45-49	65.7	4.9	13.2	33.9	378
50-54	66.4	6.6	11.7	33.6	260
55-59	60.9	3.3	6.7	39.1	147
Residence					
Urban	70.4	21.1	25.2	28.2	840
Rural	58.7	3.3	9.6	41.0	3,980
Province					
Kigali city	75.7	26.7	28.7	22.6	523
South	62.0	4.9	11.6	37.7	1,250
West	51.2	2.8	9.7	48.2	1,185
North	62.9	3.9	10.8	37.0	845
East	60.9	4.1	9.2	38.8	1,017
Education					
No education	55.2	2.4	6.8	44.7	942
Primary	58.4	3.9	9.1	41.2	2,955
Secondary or higher	75.2	19.8	30.5	23.3	850
Wealth quintile					
Lowest	47.1	1.9	6.2	52.5	928
Second	56.9	2.4	7.4	43.0	970
Middle	59.7	3.5	10.6	40.1	940
Fourth	68.0	4.1	11.6	31.7	958
Highest	70.9	19.0	24.8	27.7	1,024
Total	60.7	6.4	12.3	38.8	4,820

5.8 CONTACT OF NONUSERS WITH FAMILY PLANNING PROVIDERS

Information on contact of women who do not use contraception with family planning service providers is important for determining effective family planning outreach activities. For this reason, the RDHS-III asked women whether they had been visited in the past 12 months by a health fieldworker who spoke to them about family planning. Women who had visited a health facility in the past 12 months were also asked whether medical personnel had spoken to them about family planning methods.

Table 5.12 shows that in the 12 months preceding the survey, nine out of ten women who were nonusers of contraception (91 percent) had not discussed family planning with a fieldworker or at a health facility. Nearly one in five women (19 percent) had visited a health facility but had not discussed family planning issues. Only 3 percent had been visited by a fieldworker who discussed family planning with them, and only 7 percent had discussed family planning at a health facility. There are no significant differences by residence: 92 percent of women in urban areas and 90 percent in rural areas had not discussed family planning with a fieldworker or at a health facility. The results show no significant differentials by level of education.

Background characteristic	Women visited by fieldworker who discussed family planning	Women visited health facility and discussed family planning	Women visited health facility but did not discuss family planning	Did not discuss family planning with fieldworker or at a health facility	Number of women
Age					
15-19	1.3	0.6	8.3	98.2	2,576
20-24	3.9	6.5	20.0	90.7	2,201
25-29	4.2	12.9	25.3	84.7	1,497
30-34	4.8	13.2	24.9	84.5	1,216
35-39	3.5	11.4	24.7	87.0	951
40-44	4.5	10.0	20.8	87.5	974
45-49	4.0	4.4	16.1	92.8	822
Residence					
Urban	2.6	5.6	24.9	92.4	1,637
Rural	3.6	7.7	17.4	90.1	8,599
Education					
No education	4.4	7.6	18.0	89.7	2,448
Primary	3.0	7.4	17.8	90.8	6,931
Secondary or higher	4.0	6.9	27.0	90.3	857
Total	3.4	7.4	18.6	90.5	10,237

5.9 OPINIONS AND ATTITUDES OF COUPLES TOWARD FAMILY PLANNING

5.9.1 Discussion of Family Planning with Husband

The RDHS-III asked married women how many times they had discussed family planning with their husband/partner in the 12 months preceding the survey.

Overall, 30 percent of women said they had not discussed contraception with their husband during the 12 months preceding the survey (Table 5.13); 27 percent had discussed it at least once or twice; and 41 percent had discussed it at least three times. The proportion of women who discussed family planning with their husband has grown considerably since the RDHS-II survey, from 57 percent in 2000 to 68 percent in 2005.

Results by age show that older women (age 45-49) were the most likely to have never discussed family planning with their husband/partner (47 percent). Women age 25-29 were the most likely to have discussed family planning at least three times (48 percent).

Table 5.13 Discussion of family planning with husband

Percent distribution of currently married women who know a contraceptive method by the number of times they discussed family planning with their husband in the past year, according to age, Rwanda 2005

Age group	Number of times family planning discussed with husband in the past 12 months				Total	Number of women
	Never	One or two	Three or more	Missing		
15-19	33.3	23.0	43.3	0.3	100.0	57
20-24	26.8	32.6	39.3	1.3	100.0	953
25-29	24.3	26.1	47.6	2.0	100.0	1,232
30-34	25.4	27.1	45.3	2.2	100.0	1,095
35-39	32.2	25.6	39.3	3.0	100.0	799
40-44	33.7	21.3	40.1	4.8	100.0	722
45-49	46.6	23.7	25.8	3.9	100.0	537
Total	29.7	26.5	41.2	2.6	100.0	5,394

5.9.2 Attitudes of Couples toward Family Planning

In general, contraceptive use by women is influenced by the attitude of the couple. In Rwandan society, decisionmaking power with respect to family size rests most often with the husband. Depending on the society, other family members may also influence this decision. However, joint decisionmaking by both spouses/partners can result in changes in men's behavior and a more favorable attitude toward contraception. For this reason, the RDHS-III examined couples' attitudes toward family planning.

Women were asked whether they approved or disapproved of couples who use a family planning method. They were then asked if they thought their husband approved or disapproved of family planning. The combined responses to these two questions were used to reveal differences in attitudes between the spouses. The results are presented in Table 5.14.

Table 5.14 shows that, overall, 87 percent of women approve of family planning, 10 percent do not approve, and approximately 4 percent are not sure. In addition, spouses in 59 percent of couples have the same opinion and approve of family planning; 10 percent of women approve but their husband does not; and among those who do approve, nearly 18 percent of women do not know their husband's opinion. The proportion of couples in which both spouses approve of family planning varies according to the woman's age. It is lowest among couples in which the woman is age 45 to 49 (49 percent) or 15 to 19 (51 percent). In addition, the proportion of couples in which both spouses approve is lower in rural areas (58 percent) than in urban areas (67 percent), and lower among couples in which the woman has no education (47 percent) than among those with at least a secondary education (77 percent). By wealth

quintile, the proportion of couples in which both spouses approve is lowest in the poorest quintile (53 percent) and highest in the richest quintile (69 percent).

Couples whose opinions diverge represent 11 percent of all couples. In 10 percent of couples, women approve of contraception but their husbands do not, but the reverse is true in only 1 percent of couples. This shows the role of the man in decisionmaking: when the man is favorable to family planning, the woman is too, while the reverse is not always true. The proportion of couples with diverging opinions varies only slightly by women's background characteristics. Finally, in 21 percent of couples, the woman has no idea of her husband's opinion, which shows a lack of dialogue on the subject between some spouses.

Table 5.14 Attitudes towards family planning

Percent distribution of currently married women who know of a method of family planning, by approval of family planning and their perception of their husband's attitude towards family planning, according to background characteristics, Rwanda 2005

Background characteristic	Respondent approves of family planning			Respondent disapproves of family planning			Respondent unsure	Total	Number of women
	Husband approves	Husband disapproves	Husband's attitude unknown/missing	Husband approves	Husband disapproves	Husband's attitude unknown/missing			
Age									
15-19	51.2	12.0	30.9	0.0	4.7	0.0	1.2	100.0	57
20-24	62.2	9.0	15.8	1.6	5.5	1.7	4.2	100.0	953
25-29	64.3	8.9	14.2	0.9	4.6	3.7	3.3	100.0	1,232
30-34	62.0	10.1	14.5	1.7	5.5	3.7	2.6	100.0	1,095
35-39	55.9	11.6	19.5	1.1	5.8	2.0	4.2	100.0	799
40-44	55.9	8.4	22.1	0.6	6.1	3.2	3.7	100.0	722
45-49	49.0	10.7	24.7	0.7	5.3	4.7	4.9	100.0	537
Residence									
Urban	66.6	9.3	11.6	2.0	5.9	3.1	1.6	100.0	738
Rural	58.3	9.8	18.5	1.0	5.3	3.1	4.0	100.0	4,656
Education									
No education	47.4	11.4	23.4	1.5	6.3	4.4	5.6	100.0	1,572
Primary	62.5	9.3	16.4	0.9	5.2	2.6	3.2	100.0	3,343
Secondary or higher	77.4	7.1	6.9	1.7	3.9	2.2	0.8	100.0	479
Wealth quintile									
Lowest	52.9	11.4	21.4	1.2	5.1	2.6	5.4	100.0	1,104
Second	59.8	8.9	19.2	0.7	5.2	3.0	3.2	100.0	1,097
Middle	58.5	9.7	18.4	0.9	5.9	3.4	3.4	100.0	1,093
Fourth	57.8	10.7	18.2	1.2	5.4	3.3	3.5	100.0	1,116
Highest	69.2	7.6	10.1	1.8	5.4	3.3	2.6	100.0	984
Total	59.4	9.7	17.6	1.1	5.4	3.1	3.6	100.0	5,394