

2 The Concept of Unmet Need

In the last few years, the concept of unmet need has encountered various criticisms. Dixon-Mueller and Germain (1992) hold that the concept is too restrictive—that it should also encompass the need for abortion and for better methods of contraception, that it should include men as well as women, and that it should measure the needs of unmarried as well as married women. Pritchett (1994) questions the potential demographic importance of the phenomenon. Various commentators have criticized the term itself, arguing that "potential demand" would be preferable or that "unmet need" has a patronizing quality (Pritchett, 1994).

The concept and the measurement of unmet need are separate, but obviously related, subjects. The concept is the motivation of women who are not currently using birth control to regulate their fertility but, at the same time, express a desire to postpone the next birth or to avoid any further childbearing. This motivation may be very weak or it may be strong; it can include women who are not very sexually active or who do not intend to use any method at all for whatever reason. On the other hand, it can also include women who are ready to use contraception but who are currently pregnant or amenorrheic or who are ignorant of methods or concerned about side effects of a particular method. Many additional, possible subtleties include concern about the husband's attitudes toward contraception or, in the case of young single women, the unpredictability of exposure to the risk of pregnancy.

The implication of all of this complexity is that the measures developed from answers to a few questions in an interview must necessarily be very crude. There is no information on the strength or intensity of the "unmet need"; no knowledge of whether intentions to use contraception will be implemented or not. The only such inference that can be drawn is that the motivation to avoid further childbearing is probably stronger than the wish to control

the timing of the next birth. All that is really known, in effect, is that the women classified as having an unmet need for family planning have indicated some desire to control their fertility, either by postponing the next birth or by avoiding additional childbearing but, for various reasons, are not using contraception.

Women classified as having an unmet need constitute the unrealized component of the total demand for family planning. The other part of that demand consists of women currently practicing contraception. In a certain sense, these two parts are the latent and manifest components of total demand. There probably are better terms than "unmet need" with which to describe the latent component of the concept, but the term has been used for at least a decade (Westoff and Pebley, 1981) and has become part of the technical language.

The concept of unmet need admits separation into spacing and limiting components. The former relates to fecund nonusers who want more children but who wish to postpone the next birth at least two more years. Women with an unmet need for limiting also are fecund and not using but say that they want no more children. The same dichotomy is made for women currently using contraception; consequently, total demand can be disaggregated accordingly.

Although unmet need is a current status measure, there is a typical cycle of change over the fertility transition. In the beginning, when large families are wanted, unmet need will be minimal, since there is little demand for family planning. As the transition develops and accelerates, unmet need can be expected to rise as the demand for family planning increases and outdistances available supply. Toward the end of the transition, unmet need will decline as contraception becomes readily available and acceptable and the small family norm is established.