



# COMPARATIVE STUDIES

CROSS NATIONAL SUMMARIES

NUMBER 10 – MAY 1980

## Urban-Rural Differentials in Contraceptive use

ROBERT E. LIGHTBOURNE

INTERNATIONAL STATISTICAL INSTITUTE  
Permanent Office. Director: E. Lunenberg  
428 Prinses Beatrixlaan  
Voorburg, The Hague  
Netherlands

WORLD FERTILITY SURVEY  
Project Director:  
Sir Maurice Kendall, Sc. D., F.B.A.  
35–37 Grosvenor Gardens  
London SW1W 0BS, U.K.

The World Fertility Survey (WFS) is an international research programme whose purpose is to assess the current state of human fertility throughout the world. This is being done principally through promoting and supporting nationally representative, internationally comparable, and scientifically designed and conducted sample surveys of fertility behaviour in as many countries as possible.

The WFS is being undertaken, with the collaboration of the United Nations, by the International Statistical Institute in co-operation with the International Union for the Scientific Study of Population. Financial support is provided principally by the United Nations Fund for Population Activities and the United States Agency for International Development. Substantial support is also provided by the UK Overseas Development Administration.

For information on Country Reports, WFS publications, and WFS depository libraries, write to the Publications Office, International Statistical Institute, 428 Prinses Beatrixlaan, PO Box 950, 2270 AZ Voorburg, Netherlands. For information on the WFS generally, write to the Information Office, World Fertility Survey, International Statistical Institute, 35-37 Grosvenor Gardens, London SW1W 0BS, UK.

L'Enquête Mondiale sur la Fécondité (EMF) est un programme international de recherche dont le but est d'évaluer l'état actuel de la fécondité humaine dans le monde. Afin d'atteindre cet objectif, des enquêtes par sondage sur la fécondité sont mises en oeuvre et financées dans le plus grand nombre de pays possible. Ces études, élaborées et réalisées de façon scientifique, fournissent des données représentatives au niveau national et comparables au niveau international.

L'EMF est entreprise, en collaboration avec les Nations Unies, par l'Institut International de Statistique, qui coopère avec l'Union internationale pour l'étude scientifique de la population. Le financement de ce programme est essentiellement assuré par le Fonds des Nations Unies pour les activités en matière de population et par l'Agence des Etats-Unis pour le développement international. Une contribution importante est aussi faite par le Département pour le développement des pays d'outre-mer du Royaume-Uni.

Pour toute information concernant les rapports d'enquêtes nationaux, les publications de l'EMF ou les bibliothèques dépositaires, écrire au Bureau des publications, Institut International de Statistique, 428 Prinses Beatrixlaan, BP 950, 2270 AZ Voorburg, Pays-Bas. Pour tous renseignements complémentaires sur l'EMF en général, écrire au Bureau d'information, Enquête Mondiale sur la Fécondité, Institut International de Statistique, 35-37 Grosvenor Gardens, Londres SW1W 0BS, Royaume-Uni.

La Encuesta Mundial de Fecundidad (EMF) es un programa internacional de investigación cuyo propósito es determinar el estado actual de la fecundidad humana en el mundo. Para lograr este objetivo, se están promoviendo y financiando encuestas de fecundidad por muestreo en el mayor número posible de países. Estas encuestas son diseñadas y realizadas científicamente, nacionalmente representativas y comparables a nivel internacional.

El proyecto está a cargo del Instituto Internacional de Estadística, contando con la colaboración de las Naciones Unidas y en cooperación con la Unión Internacional para el Estudio Científico de la Población. Es financiado principalmente por el Fondo de las Naciones Unidas para Actividades de Población y por la Agencia para el Desarrollo Internacional de los Estados Unidos. La Oficina Británica para el Desarrollo de Países Extranjeros proporciona también un gran apoyo financiero.

Puede obtenerse información sobre Informes de Países como otras publicaciones de la EMF y las bibliotecas depositarias, escribiendo a la Oficina de Publicaciones, Instituto Internacional de Estadística, Prinses Beatrixlaan 428, Casilla Postal 950, 2270 AZ Voorburg, Países Bajos. Si desea información de carácter general sobre la EMF, escriba a la Oficina de Información, Encuesta Mundial de Fecundidad, Instituto Internacional de Estadística, 35-37 Grosvenor Gardens, Londres SW1W 0BS, Reino Unido.

# **COMPARATIVE STUDIES**

**CROSS NATIONAL SUMMARIES**

## **Urban-Rural Differentials in Contraceptive use**

ROBERT E. LIGHTBOURNE  
WFS Central Staff  
International Statistical Institute  
35-37 Grosvenor Gardens  
London SW1W 0BS, U.K.

ERRATA

COMPARATIVE STUDIES NO. 10  
Urban-Rural Differentials in Contraceptive Use

p. 4, line 35, should read:

"America, and Europe and U.S.A."

p. 11, L.H. Column, footnotes 1 and 2 should appear at the foot of  
of the page, and footnote 1 should read:

"Carrasco, E. 'Contraceptive Practice'. *WFS Comparative Studies series*  
*No. 9.* 1980."

p. 12, L.H. Column, text table, third heading should read:

"Percent Ever Using Contraception"

p. 12, R.H. Column, line 18 should read:

"women who believe themselves to be at risk of pregnancy"

p. 13, Please replace with the attached revised p. 13.

p. 16, L.H. Column, penultimate line should read:

"especially when small towns or cities are distinguished"

p. 18, R.H. Column, line 8 should read:

".....When the 57 regions<sup>1</sup> are"

and the footnote should read:

"<sup>1</sup> 19 principal cities, 19 other urban areas, 19 rural areas"

p. 19, last four figures should be entitled:

" JAMAICA MEXICO PANAMA PERU "

p. 20, R.H. Column, Table 4, sub-heading should read:

Place of Residence	0	Number of Living Children (Parity)				
		1	2	3	4	

p. 21, L.H. Column, 1st line following Table 5 should read:

"American and Caribbean group of countries."

p. 24 is meant to be a blank page.

p. 26, R.H. Column, Table 7, heading should read:

"Age Standardized Percentages Never Using Contraception among  
Currently Married, Fecund Women"

p. 27, R.H. Column, 13th line from end, should read:

".... These results clearly suggest that once women"

p. 30, R.H. Column, 7th line from end, should read:

"These findings strongly suggest that rurality is not an absolute"

pp. 36-67, Tables 14-29; There are footnotes to all these tables but  
no corresponding footnote indicators. In the table headings footnote  
indicators should be as follows:

ASIA AND PACIFIC<sup>1</sup>  
STANDARDIZED<sup>2</sup>  
TOTAL N<sup>3</sup>  
PAKISTAN<sup>5</sup>  
METHOD<sup>6</sup>  
COSTA RICA<sup>7</sup> and PANAMA<sup>7</sup>

p. 71, L.H. Column, lines 18, 19 and 20 from end should read:  
"Colombia: The standard recode variable identifies Bogota.  
Costa Rica: The standard recode variable V701 distinguishes 'Metropolitan Area', which corresponds to the city of San Jose's metropolitan region."

p. 71, L.H. Column, 4th line from end, should read:  
"Panama: The standard recode variable V701 identifies 'Metropolitan Urban' and 'rest urban'. Metropolitan urban includes Panama City and Colon."

p. 71, R.H. Column, line 6 should read:  
"countries oversampled some regions."

p. 71, R.H. Column, line 40 should read:  
"adjacent cells to the empty cell (i.e. if cell i is empty, assign"

p. 74, in Table 32, fifth column (regression coefficients), section two (percent using, ever married women), the number 1.1941 should read 1.194.

# Contents

PREFACE	7
ACKNOWLEDGEMENTS	9
1 INTRODUCTION	11
1.1 Overview of Limitations	
2 ISSUES OF MEASUREMENT AND DEFINITION	
2.1 Definitions of the Four Subpopulations	12
2.2 Place of Residence	12
2.3 Measuring Contraceptive Use	13
2.4 Efficiency of Contraceptive Methods	14
2.5 Standardization	14
2.6 Age Range	14
2.7 Survey Dates	14
2.8 Survey Coverage	14
3 COMMENTARY ON THE DATA	15
3.1 Current Use of Contraception	
3.2 Ever Use of Contraception	26
3.3 Rural Versus Urban Use of Inefficient Methods	29
3.4 A Comparison with Europe and U. S. A.	30
3.5 Some Conclusions	30

## TABLES (TEXT)

1	Percentage of 'Exposed' Women Currently Using Contraception, by Place of Residence---Standardized by Age: Asia and Pacific and Caribbean and Latin America	16
2	Average Percentage of 'Exposed' Women Currently Using Contraception, by Age and by Place of Residence: All Countries, Asia and Pacific, and Caribbean and Latin America	17
3	Average Percentage of 'Exposed' Women Currently Using Contraception, by Number of Living Children and by Residence: All Countries	20
4	Ratio of Percentage of 'Exposed' Women Currently Using Contraception at Parity <i>i</i> to Maximum Percentage Using Contraception at Any Parity, by Number of Living Children and by Place of Residence: All Countries	20
5	Ratio of Percentage of 'Exposed' Women Currently Using Contraception at Parity <i>i</i> to Maximum Percentage Using Contraception at Any Parity: All Countries	21
6	Average Percentage of 'Exposed' Women Currently Using Contraception, by Number of Living Children and by Place of Residence: All Countries, Asia and Pacific, and Caribbean and Latin America	21

- 7 Percentage of Currently Married, Fecund Women 26  
Never Using Contraception, by Place of Residence--  
Standardized by Age: Asia and Pacific, and Caribbean  
and Latin America
- 8 Percentage of Currently Married, Fecund Women 27  
Ever Using Contraception Compared with Percentage  
of 'Exposed' Women Currently Using Contraception,  
by Number of Living Children (Parities Zero and One)  
and by Place of Residence: All Countries
- 9 Ratio of Percentage of Currently Married, Fecund 27  
Women Currently Using Contraception to Percentage  
of Similar Women Ever Using Contraception, by Place  
of Residence--Standardized on Number of Living  
Children: Asia and Pacific, and Caribbean and Latin  
America
- 10 Ratio of Percentage of Currently Married, Fecund 28  
Women Currently Using Contraception to Percentage  
of Similar Women Ever Using Contraception, by  
Parity: All Countries, Asia and Pacific, and Caribbean  
and Latin America
- 11 Ratio of Percentage of 'Exposed' Women Who Ever 28  
Used Contraception to Percentage of Similar Women  
Currently Using Contraception, by Place of Residence  
and by Parity: All Countries, Asia and Pacific, and  
Caribbean and Latin America
- 12 Percentage of Currently Married, Fecund Women 29  
Currently Using Inefficient and Efficient Contra-  
ception, by Principal Cities and Rural Areas--Stand-  
ardized by Age: Asia and Pacific, and Caribbean and  
Latin America
- 13 Percentage of 'Exposed' Women in WFS Countries 30  
and Percentage of Women 'At Risk' in Industrialized  
Countries Currently Using Contraception, by Urban  
and Rural: Asia and Pacific, Caribbean and Latin  
America, and Europe and Asia

## FIGURES

- 1 Average Percentage of 'Exposed' Women Currently 17  
Using Any Method of Contraception, by Age: All  
Countries, Asia and Pacific, and Caribbean and Latin  
America
- 2 Percentage of 'Exposed' Women Currently Using Any 18  
Method of Contraception, by Age
- 3 Percentage of 'Exposed' Women Currently Using Any 22  
Method of Contraception, by Number of Living  
Children, Parities Zero to Nine
- 4 Percentage of 'Exposed' Women Currently Using Any 25  
Method of Contraception, by Number of Living  
Children, Parities Zero to Five

<b>APPENDIX I</b>		<b>DETAILED TABLES (See Guide p.35)</b>	<b>33</b>
14	Per Cent Distribution of Ever-Married Women According to Type of Contraceptive Method Ever Used, by Current Age and by Place of Residence		36
15	Per Cent Distribution of Ever-Married Women According to Type of Contraceptive Method Ever Used, by Number of Living Children and by Place of Residence		38
16	Per Cent Distribution of Ever-Married Women According to Type of Contraceptive Method Curr- ently Used, by Current Age and by Place of Residence		40
17	Per Cent Distribution of Ever-Married Women According to Type of Contraceptive Method Currently Used, by Number of Living Children and by Place of Residence		42
18	Per Cent Distribution of Currently Married Women According to Type of Contraceptive Method Ever Used, by Current Age and by Place of Residence		44
19	Per Cent Distribution of Currently Married Women According to Type of Contraceptive Method Ever Used, by Number of Living Children and by Place of Residence		46
20	Per Cent Distribution of Currently Married Women According to Type of Contraceptive Method Curr- ently Used, by Current Age and by Place of Residence		48
21	Per Cent Distribution of Currently Married Women According to Type of Contraceptive Method Curr- ently Used, by Number of Living Children and by Place of Residence		50
22	Per Cent Distribution of Currently Married and Fecund Women According to Type of Contraceptive Method Ever Used, by Current Age and by Place of Residence		52
23	Per Cent Distribution of Currently Married and Fecund Women According to Type of Contraceptive Method Currently Used, by Number of Living Child- ren and by Place of Residence		54
24	Per Cent Distribution of Currently Married and Fecund Women According to Type of Contraceptive Method Currently Used, by Current Age and by Place of Residence		56
25	Per Cent Distribution of Currently Married and Fecund Women According to Type of Contraceptive Method Currently Used, by Number of Living Child- ren and by Place of Residence		58



26	Per Cent Distribution of 'Exposed' Women According to Type of Contraceptive Method Ever Used, by Current Age and by Place of Residence	60
27	Per Cent Distribution of 'Exposed' Women According to Type of Contraceptive Method Ever Used, by Number of Living Children and by Place of Residence	62
28	Per Cent Distribution of 'Exposed' Women According to Type of Contraceptive Method Currently Used, by Current Age and by Place of Residence	64
29	Per Cent Distribution of 'Exposed' Women According to Type of Contraceptive Method Currently Used, by Number of Living Children and by Place of Residence	66
30	The Effects of Standardizing for Age upon Percent-ages of Currently Exposed Women Using Any Method of Contraception	72
31	Standardization Weights Used in WFS Comparative Tables	73
32	Predicting Total Percentages of Women Currently Using Any Contraception in one Subpopulation from Total Percentages Currently Using Contraception in Another Subpopulation	74
33	Predicting Total Percentages of Women Currently Using Contraception from Total Percentages Ever Using Contraception	75

<b>APPENDIX II</b>	<b>TECHNICAL NOTES</b>	<b>69</b>
II.1	Distinguishing Principal City from Other Urban	71
II.2	Sample Weighting	71
II.3	Further Notes on Standardization	71
II.4	Predicting Contraceptive Use Between Subpopulations	74

## Preface

The first issues of the Cross National Summaries in the Comparative Studies series provide basic information, documentation and results of the World Fertility Survey for the nineteen countries which had their First Country Reports and Standard Recode Tapes available at the beginning of 1980.

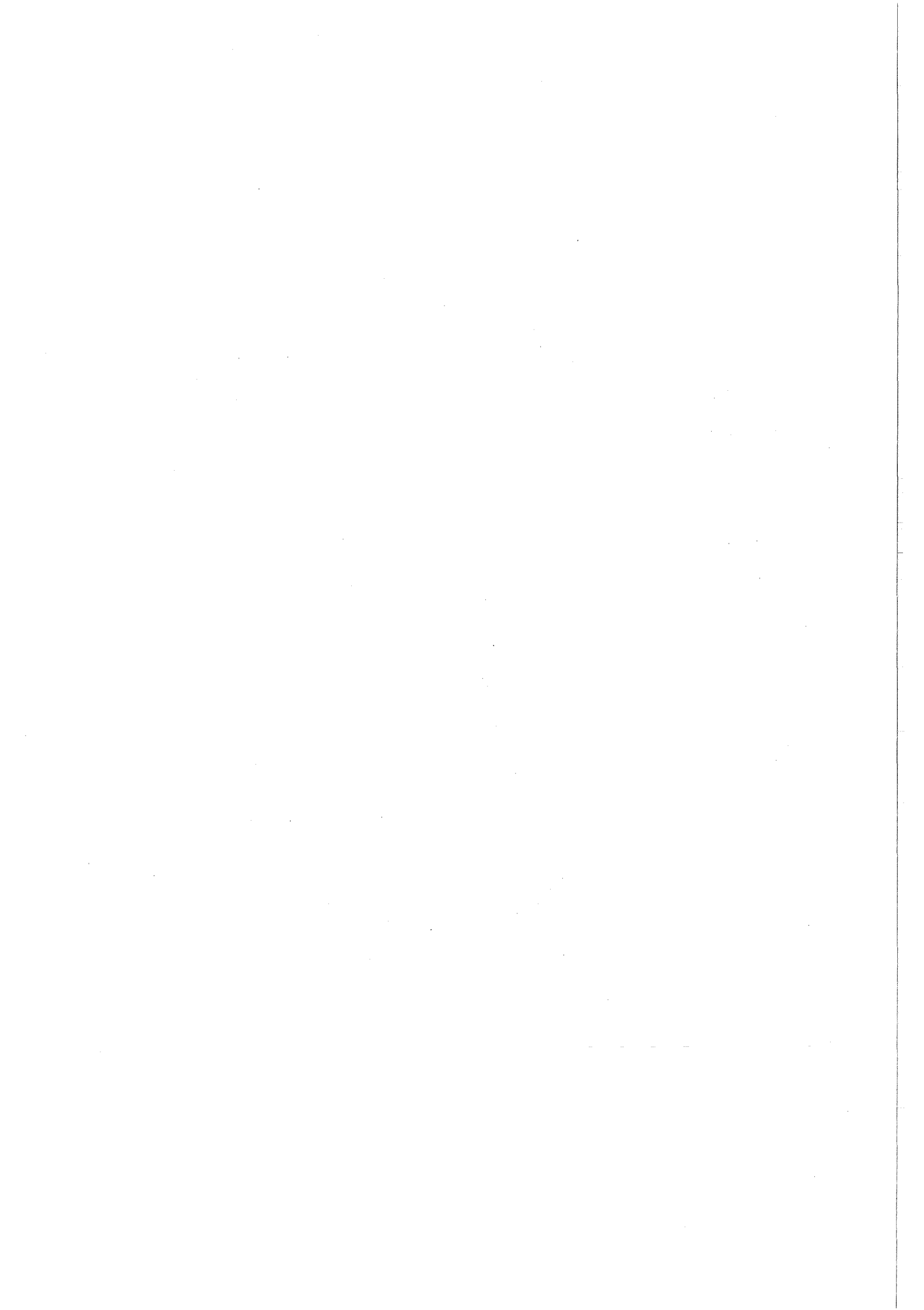
Despite the efforts made by WFS to maintain comparability of question wording and content, field procedures and specifications of the tabulations and analysis included in the First Country Reports, it was inevitable that differences would arise as a result of the importance attached to meeting specific requirements of the countries themselves. A major attempt to enhance and facilitate comparability has been the production of Standard Recode Tapes for each country, with all the core information coded and stored in a consistent order, together with the dictionaries which provide detailed specifications for all variables.

Several of the Cross National Summaries will be concerned solely with providing detailed and systematized information on the comparability (or lack thereof) of the field procedures, survey characteristics, questionnaire content and wording and content of the First Country Reports. Such detailed appraisals constitute an essential reference base for anyone using WFS data for comparative analysis.

Other volumes of the Cross National Summaries will present comparable results from as many surveys as possible. These volumes will present the basic data from the surveys over a wide range of specific topics. In addition to the tabular material, there will be a brief accompanying text, which will draw attention primarily to any non-comparability of the data and to any obvious interpretational pitfalls to which the tables may be subject: for example many summary indices are subject to compositional differences, which are often reduced by standardization. Finally, although these volumes are not intended to be analytic in their orientation, some brief highlighting of the major noteworthy differences and similarities is included.

We hope that these Cross National Summaries will be widely used, especially by persons in the international community who are making cross national comparisons. We also hope that the sub-series will help users to avoid assuming too much comparability when this is not the case and to avoid interpretational mistakes which can easily arise when data are presented without qualification.

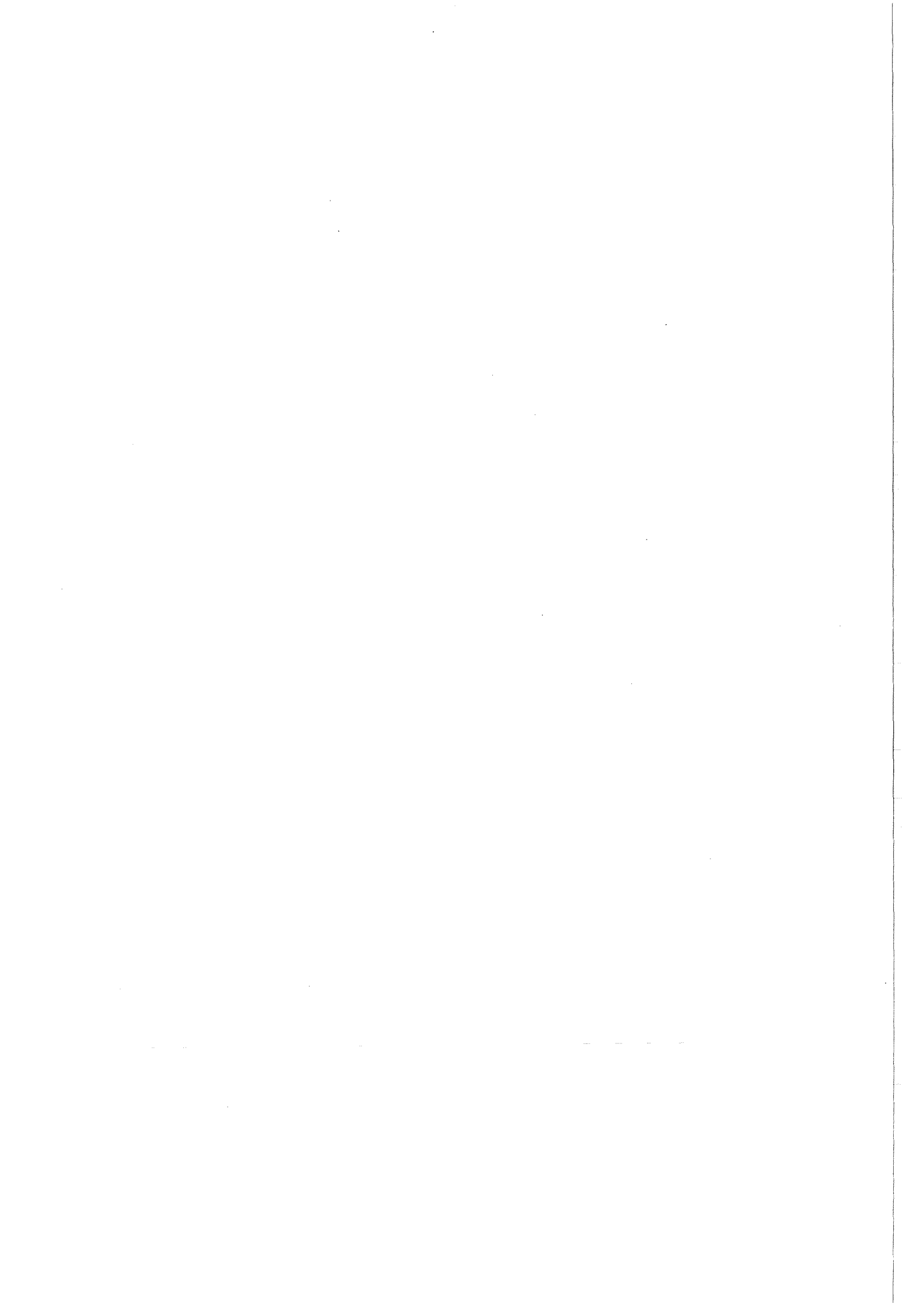
Sir Maurice Kendall



## Acknowledgements

Although authorship is attributed to the person(s) taking primary responsibility for the production of each of the Cross National Summaries, the work has been a co-operative effort involving many staff members of WFS. In particular, the production of the tables would often have been impossible without the substantial assistance of staff in the Data Processing Division.

The overall planning and co-ordination of the Cross National Summaries has been the responsibility of an editorial committee consisting of V. C. Chidambaram, John Cleland, John Hobcraft, Judith Rattenbury, German Rodriguez, Vijay Verma, and Waller Wynne.



# 1 Introduction

This report presents detailed international comparisons of contraceptive use in rural and urban areas for nineteen countries in which WFS surveys have been conducted. Data are presented not only for each country's total urban area, but also for its principal city and "other urban" sector, in order to help show how size of place is related to level of contraceptive use.

Other reports in the Cross National Summary series describe the use of specific contraceptive methods<sup>1</sup>, and knowledge of contraception<sup>2</sup>, across the same set of countries, and special efforts have been made to present the data in a similar format, so that the reports provide complementary information when considered together.

The main purpose of the present report is to disseminate the rural-urban contraceptive use data more widely for further analysis, while pointing out sources of non-comparability between countries, clarifying where necessary the definitions of the variables employed, and indicating any obvious interpretational problems. A commentary on the data in Section 3 of this report presents summaries abstracted from some of the detailed tables, and remarks upon the major regularities and divergences observed.

---

1. Carrasco, E. 'Contraceptive Practice'. *WFS Comparative Studies* series, No. 6. 1980.

2. Vaessen, M. 'Knowledge of Contraceptive Methods'. *WFS Comparative Studies* series, No. 8. 1980.

While it is not possible to envisage all the possible future analyses to which the data presented here may contribute, detailed international comparisons of contraceptive use by place of residence, age and family size are important for several reasons:

- Since most of the world's people still reside in rural areas, it is especially crucial to improve comprehension of the factors that affect rural contraceptive use. If contraceptive use varies greatly between rural areas that are at a similar stage of development, the analyst is compelled to look for other factors that will explain the observed variation, and this search for explanations may well yield clearer specification of the conditions that determine contraceptive use.
- Rural and urban patterns of contraceptive use by age and number of living children are of some significance. Use of contraception in the early stages of family building is likely to have an especially important effect on fertility, both because of age structures in which young women are numerically more abundant, and because younger women are more fertile.

- When contraceptive use data are tabulated separately for urban and rural areas, and when variables of interest are available at the same level of aggregation from censuses and other sources, the number of areal units available for cross national correlation analysis is effectively doubled. In instances where data from censuses and other sources are available for principal cities, "other urban" areas and rural areas, the number of units for further analysis is effectively trebled.
- If rural contraceptive practise is much lower than urban, the national proportion using contraception will be heavily affected by the national proportion urban, rendering national comparisons less meaningful, purely because of compositional differences. The information provided in this document allows the analyst to correct for such deficiencies.

## 1.1 Overview of Limitations

One of the chief limitations of the contraceptive use data presented in this document is that of time referents. The data on current use apply to current use at time of survey, and can yield no direct statements concerning continuity of contraceptive use, or concerning the efficacy with which user-dependent methods are used. Similarly, the data on contraceptive ever-use have the limitation of saying nothing about the time period of use, and a respondent who has used contraception for a long period of time is classified exactly like a respondent who used contraception only very briefly (analyses of birth interval data could help to clarify the degree to which contraception has been successful).

A more general limitation is that the data under consideration shed no direct light on use of a means of fertility control that is frequently of major demographic importance, namely the use of abortion,<sup>3</sup> though the present data may, when analysed in conjunction with information on current and past fertility levels, be helpful in inferring levels of abortion.

Despite the several limitations noted here and elsewhere, the available data nonetheless afford a unique and tightly defined comparison of contraceptive use across the growing number of countries for which highly comparable surveys have been conducted and analysed with WFS participation.

---

<sup>3</sup>Thirteen of the nineteen countries included questions on abortion.

## 2 Issues of Measurement and Definition

### 2.1 Definitions of the Four Subpopulations

This document presents data on ever use and current use of contraception in four different subpopulations, consisting of (1) ever-married women, (2) currently married women, (3) currently married and fecund women, (4) women "exposed" - in a special sense -- to the risk of pregnancy.

Choosing a particular subpopulation sharply affects the level of contraceptive use, as can be seen by averaging the standardized percentages using any method across all nineteen countries:

Subpopulation	Percent Currently Using Contraception	Percent Ever Using Contraception
Ever-married	29.4	48.4
Currently married	32.3	49.9
Currently married and fecund	35.5	52.4
"Exposed"	41.1	54.7

Several definitional points should be made concerning the subpopulations. Included among "exposed" women are those who simultaneously fulfill the three conditions of (a) being currently married and not separated (b) believing themselves to be fecund (c) believing themselves to be non-pregnant. Also included in the "exposed" group are women who have been sterilised for contraceptive purposes, under the rationale that such women are deliberately using 100 per cent effective contraception. The object of this rather special definition is to state correctly the true percentage using contraception, since the exclusion of contraceptively sterilised women would understate the percentage using contraception.

The definition of "currently married and fecund" women is similar to "exposed", except that the currently married and fecund group includes pregnant women, since pregnant women are by definition fecund.

Thus, the subpopulation of "exposed" women are those who believe themselves to be at risk of conception, while the subpopulation of "currently married and fecund" women are those who believe themselves to be at risk of childbearing.

The term "currently married" is reserved for women married and living with husband, while the term "ever married" includes women who are widowed, divorced or separated. The term "married", however, is used in a rather special sense in the text and tables of this document. In ten out of the eleven Asian and Pacific countries, the term "married" has its usual interpretation, and the tables include only women who have been formally married, with the additional stipulation in Bangladesh that the marriage must have been actually consummated.<sup>1</sup>

In Fiji and in all eight countries of the Latin American and Caribbean group women who have never married but have lived with a partner in a "common-law" or "consensual" union are treated as *de facto* married. Jamaica and Guyana go one step further, and include women who have ever been in any kind of sexual union. The reason for including women in non-formalised sexual relationships is that such women contribute substantially to fertility.

The objective of presenting tabulations for the four subpopulations described above is to allow future analysts to make more exact comparisons with other surveys, since many surveys tend to report their data for only one subpopulation, most typically for currently married women. Another objective is to allow clearer interpretations of the data. For example, the percentage currently using contraception among "exposed" women provides a far more exact picture of the extent of contraceptive coverage among women who believe themselves to be at risk of pregnancy, by excluding women with no reason to use contraception. Bivariate regressions between percentages using contraception in different subpopulations are presented in Appendix II.4 and indicate that the percentage using contraception in one subpopulation is not generally a particularly exact predictor of the percentage using in another subpopulation.

### 2.2 Place of Residence

The detailed tables in Appendix I classify respondents according to usual place of residence -- whether living in the principal city, in an "other urban" area, or in a rural area, except in Malaysia and in Panama, where the distinction is between "metropolitan" and "other urban". The term "principal city" is applied to the country's largest city, and, where available, to the urbanised area surrounding it. Specific details on how this coding was performed in each country are supplied in Appendix II.1.

It is emphasised that while this classification distinguishes between larger and smaller urban areas in each country, it is by no means comparable across countries. Size of principal cities at time of survey ranges between less than 100,000 for Fiji to about 9 million for Mexico City, and the size and nature of "other urban" areas undoubtedly also varies greatly between countries.

It is also emphasised that the surveys employed no uniform criteria for distinguishing between rural and urban. Each country employed its own particular set of criteria, usually based on either census definitions or modified census definitions, and the criteria are far from identical. Comparisons of the explicit decision rules used by the nineteen countries reveal five major types of criterion by which a place is judged to be urban rather than rural. These include

<sup>1</sup>In Bangladesh the marriage ceremony often occurs many months before the act of consummation.

(1) the presence of some minimum number of facilities, such as libraries, streets, water supply, electricity, hospitals, secondary schools, public plazas, cemeteries, parks (explicitly used in six countries), (2) the proportion employed in non-agricultural occupations (used in three countries), (3) population size exceeding some threshold (used in twelve countries), (4) the presence of administrative centers (used in eleven countries), and (5) the inclusion or exclusion of specifically named localities (used in three countries). Despite this singular lack of definitional uniformity, it nevertheless remains possible that if applied uniformly across all nineteen countries, any one of the sets of definitions would, when actually put into practice, have classified nearly all respondents in the same way. Indeed, inter-country differences in the nature of rural and urban areas may be a far greater source of non-comparability than definitional differences between countries. In some countries, "rural" may mean more highly mechanised agriculture, high prevalence of wage labour, and a well developed infrastructure, while in others it may mean subsistence agriculture and a low level of integration within the national economy. Similarly, not all urban areas are alike. Some will be much larger in average size, more industrialised, with higher ratios of capital to labour. In using the terms "principal city", "other urban" and "rural" we are in effect imposing a trichotomy on what is in truth a more complex set of dimensions.

### 2.3 Measuring Contraceptive Use

The questions used for ascertaining ever use and current use of contraception were, with two exceptions noted below for Fiji and Pakistan, uniform in structure, though not in detailed content.

*Structure:* The interviewer began by briefly describing contraception as being a means by which couples could prevent or delay childbearing, and then asked the respondent to name all the methods she could recall. Subsequently, the interviewer read out the names of methods that the respondent had left unmentioned, and asked if the respondent had heard of each such method. For every method reported as "heard of", the respondent was asked whether she had ever used the method, and it was in this manner that ever use was ascertained.

Later in the questionnaire the interviewer ascertained whether the respondent was currently using contraception, by asking eligible respondents whether they or their husbands were currently doing anything to prevent pregnancy. Eligibility for this question on current use was restricted to "exposed" women who reported ever using contraception (i.e. women who were currently in a union and who believed themselves to be fecund and non-pregnant, including contraceptively sterilised women).

Only Pakistan and Fiji varied from this procedure. In Fiji, respondents were not asked to recall any methods and, instead, each method was described by the interviewer, followed by a question on whether the respondent had ever heard of the method, and, if yes, had ever used it. In Pakistan, on the other hand, reliance was placed entirely on asking the respondent to name all the methods she could remember, and there was no probing to see whether she had

heard of methods that she had not mentioned, since past experience in Pakistan had indicated a strong tendency for respondents to say "yes" out of politeness when confronted with a list of unmentioned methods. The Pakistan questionnaire, therefore, restricted questions on ever use and current use to respondents who had mentioned at least one contraceptive without prompting, and thus may have produced relatively downward biased estimates of ever use and current use.<sup>1</sup>

*Content:* While seventeen countries followed a similar sequence of questions for ascertaining contraceptive knowledge, then ever use, then current use, some countries did not probe for knowledge or ever-use of certain methods. The following schema summarises the list of omissions:

Factors Affecting Comparability of Contraceptive Use Information		
Country	No Probe on Knowledge	Use Question Not Asked
ASIA AND PACIFIC*		
Bangladesh	Injection	Injection
Fiji	Douche	Douche <sup>1</sup>
Indonesia	-	-
Jordan	Injection	Injection
Korea, Republic of	-	-
Malaysia	Douche	Douche
Nepal	Injection, Rhythm, Other Female Scientific, Douche, Withdrawal	Same
Pakistan	All Methods	Douche <sup>2</sup>
Philippines	Injection	Injection
Sri Lanka	-	-
Thailand	-	-
CARIBBEAN AND LATIN AMERICA		
Colombia	-	-
Costa Rica	-	-
Dominican Republic	Abstinence	Abstinence
Guyana	-	-
Jamaica	-	-
Mexico	Abstinence	Abstinence
Panama	-	-
Peru	-	-

\* Including West Asia.

1. Including in "Other Female Scientific".

2. Not coded as specific method.

It is beyond the scope of the present document to evaluate the validity of the data on current use and ever use of contraception, but since both current use and ever use relate consistently and in the expected direction with such background variables as education, family size, place of residence, and with intervening variables, such as family size preferences, there is considerable evidence of consistency.

<sup>1</sup> See Vaessen, M. 'Knowledge of Contraceptive Methods', *WFS Comparative studies series*, No. 8. 1980.



## 2.4 Efficiency of Contraceptive Methods

The "efficiency of contraceptive use" variable is coded consistently across all nineteen countries. Seven method categories are coded as efficient -- namely the pill, the IUD, condom, injection, female or male sterilisation for contraceptive purposes, and "other female scientific methods". The term "other female scientific methods" applies to spermicidal foams, gels and suppositories, diaphragms, and cervical caps. Seven categories are coded as inefficient, including the douche, rhythm, withdrawal, abstention, all "country specific methods", <sup>1</sup> and any other methods, including instances where the respondent was coded as "currently using but method not stated". (While complete abstention is an efficient method, partial abstention is inefficient).

## 2.5 Standardization

Substantial differences in the percentage at each age between rural and urban areas can be expected in any country with heavy immigration of young women to cities, producing a city population whose age distribution would be relatively young when compared to the rural distribution. If use of contraception were to increase steadily with age, this would downwardly bias the total city percentages using contraception, and upwardly bias the total rural percentages. In order to remove this kind of possible bias, standardization by age was carried out, using the age distribution from the WFS survey of Fiji as the standard, with a separate age distribution for each of the four subpopulations, using the weights shown in Appendix II.3. Similarly, substantial rural-urban differences in the distribution of women by number of living children might be expected, in instances where rural fertility is higher or the urban age at marriage is higher. To substantially remove the majority of such effects, standardization by number of living children was carried out, using the distributions between 0 and 9+ children obtained from the 1974 Fiji Fertility Survey for the four subpopulations as the standard schedules (the Fijian distributions are shown in Appendix II.3).

Standardization not only reduces compositional effects in rural-urban comparisons, but also reduces compositional effects in international comparisons. The actual effects of standardization and the handling of missing categories in the number of living children distribution (occurring in Nepal and the Republic of Korea) are discussed in Appendix II.3.

## 2.6 Age Range

With two exceptions, the age range for all nineteen countries is from age 15 to age 49. The exceptions are Costa Rica and Panama, which excluded women younger than 20 from their surveys. It is emphasised that the exclusion of the 15-19 age group introduces some element of non-comparability when levels of contraceptive use in Panama or Costa Rica are compared with contraceptive use levels in other countries. To the extent that 15-19 year olds have fewer children and lower contraceptive use levels, their exclusion from the sample will upwardly bias the total proportions using contraception, and may also upwardly bias the pro-

portion using contraception among women with few children. It is noted that respondents younger than 15 or older than 49 occurred in 7 countries, but were excluded from all tabulations in the present monograph.

## 2.7 Survey Dates

The nineteen surveys reported here occurred within the four-year period between 1974 and 1978. In a period of apparently rapid shifts in contraceptive practice, this difference in dates is a source of non-comparability between countries, because a country surveyed at the start of the period may by the end of the period have contained substantially higher proportions using contraception. The survey dates are as follows: Bangladesh, 1975-1976; Fiji, 1974; Indonesia, 1976; Jordan, 1976; Republic of Korea, 1974; Malaysia, 1974; Nepal, 1976; Pakistan, 1975; Philippines, 1978; Sri Lanka, 1975; Thailand, 1975; Colombia, 1977; Costa Rica, 1976; Dominican Republic, 1975; Guyana, 1975; Jamaica, 1975-1976; Mexico, 1976-1977; Panama, 1975-1976; and Peru, 1977-1978.

## 2.8 Survey Coverage

Nine out of nineteen countries employed sampling frames that included 100 per cent of their geographical territory, and the survey samples are complete national samples without any territorial exclusions in the cases of Bangladesh, Jordan, the Philippines, Sri Lanka, Thailand, Jamaica, Dominican Republic, Mexico and Peru. In the remaining countries, it was decided to exclude certain areas for reasons of remoteness or other practical considerations. In eight of these countries, the sampling frame included 90 to 99 percent of the national population, as follows: Fiji (96 percent), Republic of Korea (99 percent), Nepal (88 percent), Pakistan (93 percent, excluding certain restricted areas and tribal areas), Colombia (99 percent), Guyana (92 percent), Costa Rica (97 percent), and Panama (96 percent). Two countries sampled areas containing less than 90 percent of the national population, namely, Indonesia (67 percent coverage, including only Java and Bali), and Malaysia (85 percent coverage, excluding Sabah and Sarawak).

---

<sup>1</sup> Only Indonesia, Korea, and Thailand asked questions on country specific methods, including massage, uterine inversion, and herbal medicines.

### 3 Commentary on the Data

This section discusses outstanding regularities and divergences in rural and urban proportions using contraception that emerge from a preliminary exploration of the detailed tables presented in Appendix I. The method of exploration relies on examination of international averages based on all nineteen countries, on regional averages comparing the eleven Asian and Pacific countries with the eight countries of Latin America and the Caribbean, and on summary tables and graphs for the individual countries.

Differentials in current use of any method of contraception are summarised in Section 3.1.

While many researchers tend to focus exclusively on current use data, Section 3.2 surveys the differentials observed in the ever-use data, and pays particular attention to topics for which ever-use data are especially useful, including patterns of contraceptive never use, patterns of spacing behaviour, and patterns of contraceptive continuation.

Section 3.3 is devoted to examining use of inefficient methods, which was remarkably high in both rural and urban areas, with the differentials running in an unexpected direction in several of the countries.

Section 3.4 places the findings from the present sample of nineteen countries in a wider international perspective by introducing data on rural urban differentials in contraceptive use from seven highly industrialised countries.

Section 3.5 presents a summary of major findings.

Every country included in the Comparative Studies series has already published or will soon publish the respective First Country Report. Any difference in the figures between these reports and the present one should be attributed to further editing of the data-files at the WFS headquarters.

#### 3.1 Current Use of Contraception

The discussion in this section is focused entirely on current use of any contraceptive method among "exposed" women. Before approaching the data, mention should be made of certain biases that, taken together, probably lead to understating the level of contraceptive use among exposed women. On the one hand, there is one bias in the direction of overstating the level of contraceptive use, which comes from including contraceptively sterilised women as "fecund and using contraception", since some of these women would have become sterile in the absence of sterilisation, and would not have reported themselves as fecund. On the other hand, there are three identifiable biases in the direction of understating the level of contraceptive coverage. Firstly, the omission of questions on coital frequency means that the group of exposed women includes women who are not truly exposed, since they are abstaining from intercourse for non-contraceptive reasons, such as post-

partum abstinence, decline in sexual interest, or marital difficulties. Secondly, women who reported themselves uncertain whether they could have further children are included as "exposed", which may mean inclusion of some women who considered themselves as highly subfecund. Thirdly, post partum amenorrhoea introduces a substantial reduction in exposure to risk of conception, particularly in respondents who breastfeed for prolonged periods. The net effect of these biases is that the estimates of contraceptive use among exposed women are probably somewhat downwardly biased.

#### Total Percentages Currently Using Contraception

Averaging across nineteen countries, giving each country equal weight, current use of any method of contraception was reported by 55 percent of exposed women in principal cities, 47 percent of those in "other urban" areas, and among 33 percent in rural areas, so that at this highly aggregate level, increasing size of place is seen to be associated with a higher percentage using contraception, with exposed women in principal cities using contraception 1.68 times as often as their rural counterparts, and 1.17 times as often as "other urban" women. Thus, the national percentage currently using any method is substantially affected by the national proportions in each residential category. The fact that 33 percent of rural exposed women are current users suggests that rurality is far from being an absolute barrier to widespread contraceptive use.

The average percentage currently using contraception is substantially higher in the Latin America and Caribbean group than in the Asia and Pacific group.

While these aggregated comparisons firmly suggest an orderly increase in contraceptive use with increasing size of place, Table 1 indicates a far less orderly situation. Indonesia stands out, having very slightly lower contraceptive use in its large principal city, Jakarta, than in either its rural or "other urban" sector. Fiji also stands out, with contraceptive use somewhat higher in the "other urban" category than in the Suva and Peri-urban area. And in Guyana, rural contraceptive use is higher than in the "other urban" sector, probably because of an interaction between ethnicity, place of residence, and contraceptive use.<sup>1</sup>

The absolute gap between rural and principal city percentages using contraception varies greatly in size, being less than 10 percent for five countries (Fiji, Indonesia, Korea, Costa Rica and Guyana) and being 36 percent or more for four other countries, Jordan, Nepal, Mexico and Peru. The other ten countries have a gap ranging between 11 and 34 percent.

<sup>1</sup>The rural areas of Guyana are predominantly populated by an ethnic group that uses contraception more often in all residence categories than the other major ethnic group. Such interactions may occur in other multi-ethnic countries.

The ratio obtained through dividing the principal city proportion using contraception by the rural proportion conveys directly the relative frequency of contraceptive use in each type of area. Such ratios are presented in the final column of Table 1. On this basis, we see that the eleven Asian and Pacific countries are sharply divided. Principal city women use contraception more than three times as frequently as rural women in Bangladesh (relative frequency of 4.10), Jordan (3.79), Nepal (13.00), and Pakistan (6.50), but the relative frequency is much lower in the remaining seven countries of the Asia and Pacific region, ranging between 1.64 in Malaysia to a low of 0.95 in Indonesia.

The Caribbean and Latin American ratios are somewhat less extreme than those in the Asian and Pacific group, and are highest in Peru (3.71), Mexico (2.95), and Colombia (1.94), and are lowest in Costa Rica (1.11).

**Table 1 Percentage Currently Using Any Method of Contraception Exposed Women, Standardized by Age**

Country	Principal City (1)	Other Urban (2)	Rural (3)	Principal City v Rural	
				Gap (1) - (3)	Ratio (1) / (3)
<b>ASIA AND PACIFIC*</b>					
Bangladesh	41	21	10	31	4.10
Fiji	57	61	49	8	1.16
Indonesia	40	42	42	-2	0.95
Jordan	53	42	14	39	3.79
Korea, Republic of	46	42	37	9	1.24
Malaysia	59	52	36	23	1.64
Nepal	39	16	3	36	13.00
Pakistan	26	17	4	22	6.50
Philippines	61	58	42	19	1.45
Sri Lanka	52	39	35	17	1.49
Thailand	62	59	44	18	1.41
<i>GROUP AVERAGE</i>	<i>49</i>	<i>41</i>	<i>29</i>	<i>20</i>	<i>1.67</i>
<b>CARIBBEAN AND LATIN AMERICA</b>					
Colombia	70	61	36	34	1.94
Costa Rica	83	79	75	8	1.11
Dominican Republic	57	51	33	24	1.73
Guyana	45	32	37	8	1.22
Jamaica	56	46	43	13	1.30
Mexico	62	53	21	41	2.95
Panama	72	75	56	16	1.29
Peru	63	49	17	46	3.71
<i>GROUP AVERAGE</i>	<i>64</i>	<i>56</i>	<i>40</i>	<i>24</i>	<i>1.60</i>
<i>ALL COUNTRIES</i>	<i>55</i>	<i>47</i>	<i>33</i>	<i>22</i>	<i>1.67</i>

\* Including West Asia.

The rather more detailed data on city size available from Mexico and Peru suggest that choice of a different set of cutting points according to city size results in a more clear-cut difference in percentages currently using any method, especially when small towns or cities are distinguished from the larger urban areas. Age standardized total percent-

ages currently using any method of contraception among exposed women are as follows for these two countries:

	Percentage using
<b>Mexico</b>	
Large city (500,000+)	62
City (20,000-499,999)	59
Town (2,500-19,999)	34
Rural (0-2,499)	21
<b>Peru</b>	
Urbanised Lima/Callao	62
Other-large city	59
Small city	45
Rural	16

#### Current Use By Age

Averaging all countries giving each equal weight yields the age profile of current use graphed in panel A of Figure 1 and tabulated in the top three rows of Table 2. These data give rise to several observations:

- At all ages, current use is systematically greater in principal cities than in "other urban" areas, and use in other urban areas is systematically greater than in rural areas.
- Percentages currently using contraception in all three residence categories share approximately the same pattern by age, an inverted J-shaped curve that rises substantially from an absolute minimum at age 15-19 - which is about 45 percent of the maximum in all three residence categories - to a plateau like maximum at ages 30-39, then falling to a relative minimum at age 45-49, that is nonetheless higher than the minimum. These cross-sectional results suggest a falling off in contraceptive use past age 40, but of course, the age pattern of contraceptive use in each cohort may bear little resemblance to the cross-sectional pattern observed in a single survey, especially in periods of rapid increase in contraceptive use.

Moving to the regional level comparisons in Table 2, it is noteworthy that use of contraception remains systematically higher in principal cities than in other urban areas, and higher in the other urban areas than in rural areas, and that the pattern of a plateau at age 30-39 is repeated. The percentages using contraception in the Latin America and Caribbean bloc are higher in every age and residence category than in the comparable categories for the Asia and Pacific group of countries. The regional differences are most pronounced between the urban sectors of the two regional groupings within the 15-24 age range and then steadily grow narrower as age increases. Comparing rural areas of the two groupings, one finds that current use of contraception is similar in the 15-19 age range, and then diverges sharply in the 20-34 age range, and then begins to converge to rather similar levels at age 45-49, where 29 percent are using contraception in the Asia and Pacific group, and 33 percent are using in the Latin American and Caribbean group.

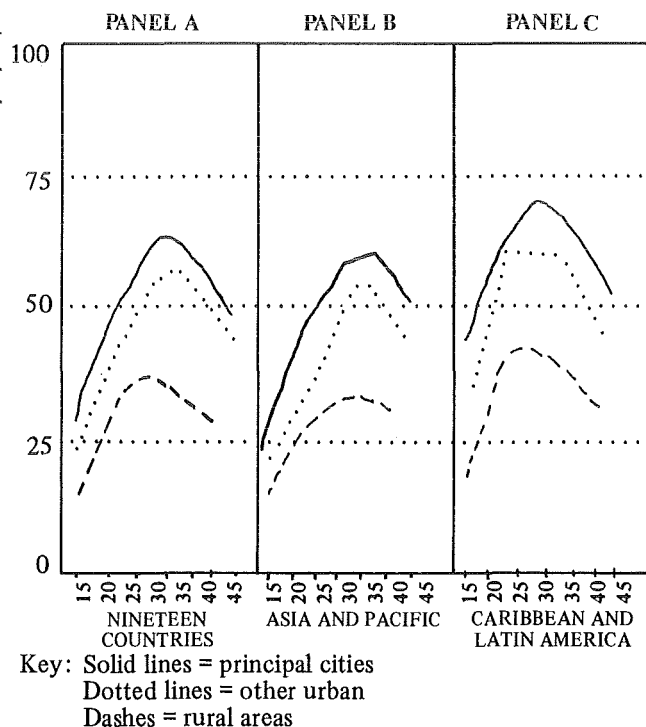
**Table 2 Average Percentage Currently Using Any Contraceptive Method, by Age and by Place of Residence, Exposed Women in All 19 Countries and in the Two Regional Groupings<sup>1</sup>.**

Region and Residence Type	Age						
	15-19	20-24	25-29	30-34	35-39	40-44	45-49
<b>19 COUNTRIES</b>							
Principal Cities	28.8	45.8	56.9	62.2	61.3	54.6	45.6
Other Urban	23.7	38.8	47.7	53.5	55.2	48.1	41.5
Rural	14.5	27.2	34.4	37.6	37.0	33.1	30.5
<b>ASIA AND PACIFIC*</b>							
Principal Cities	20.9	36.5	51.0	56.9	57.1	49.5	41.8
Other Urban	18.1	29.9	38.4	48.5	52.0	46.2	39.8
Rural	13.5	21.5	28.1	32.4	34.0	31.4	28.6
<b>CARIBBEAN AND LATIN AMERICA</b>							
Principal Cities	43.3	58.8	65.0	69.5	67.0	61.6	50.8
Other Urban	34.0	51.0	60.5	60.3	59.5	50.8	43.9
Rural	16.3	34.9	43.1	44.9	41.1	35.4	33.0

\* Including West Asia

<sup>1</sup>Costa Rica and Panama had no respondents in the 15-19 age group, so the Latin America and Caribbean average for age 15 to 19 is based on 6 cases instead of 8.

**Figure 1 Average Percentage Currently Using Contraception Among Exposed Women, by Age, by Place of Residence, and by Regional Groupings**



Shifting to comparisons of the individual nineteen countries and comparing the country graphs in Figure 2, it becomes apparent that the generalisation of an inverted J shaped curve of current contraceptive use by age is maintained only in some instances. In many cases, the curve becomes approximately an inverted U shape, meaning that the percentage of current users at age 45-49 is no higher – and sometimes slightly lower -- than the percentage using at age 15-19. This is especially true of the countries in the Latin American and Caribbean group, where in 11 out of the possible 24 regional comparisons contraceptive use is no higher at age 45-49 than it is at age 15-19, but in the Asian and Pacific group it is only in the case of Bangladesh and Nepal that the proportion of users at age 45-49 is not discernibly greater than at age 15-19.

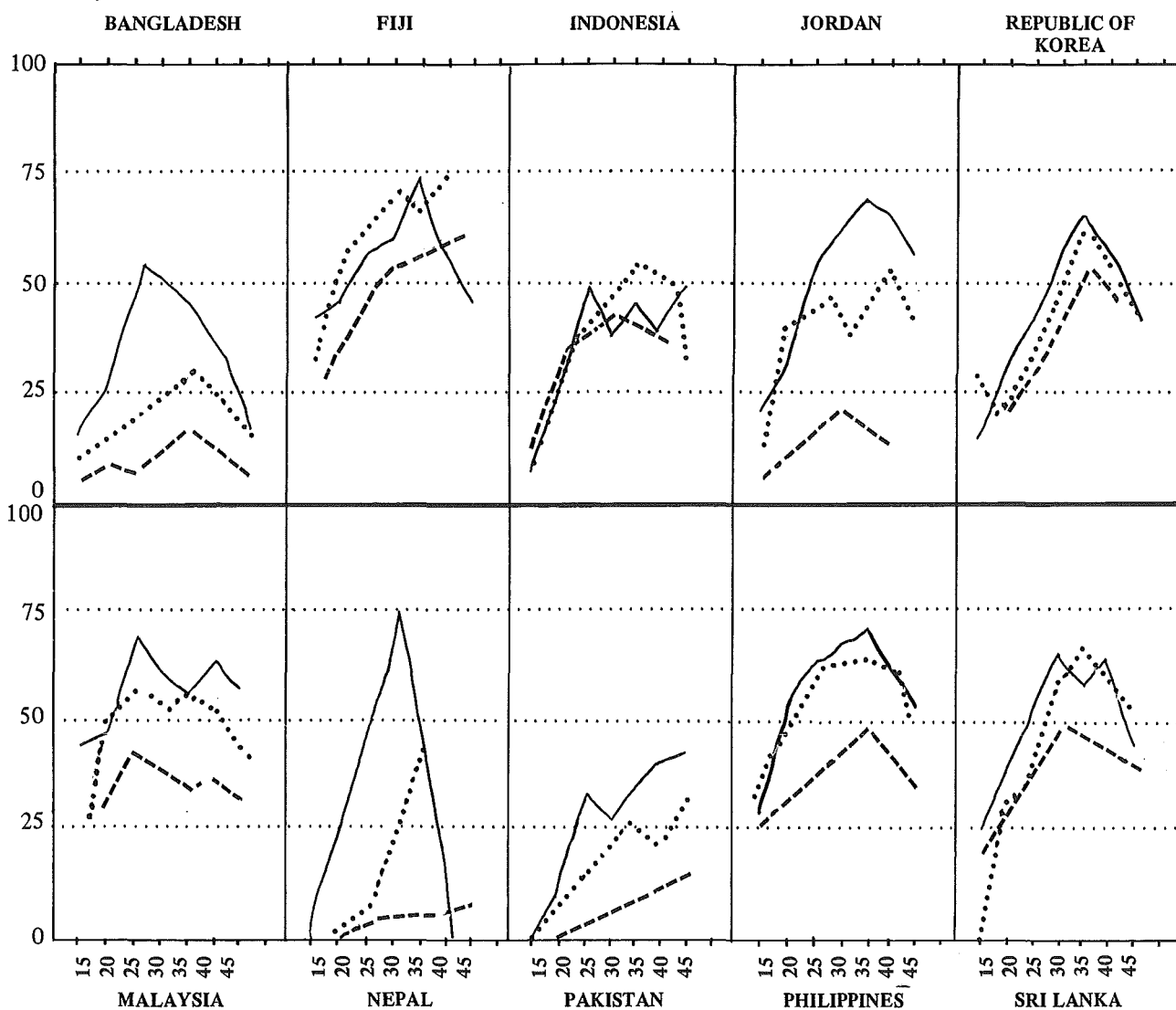
The curve of contraceptive use by age is seen to be highly compressed within a narrow range in Costa Rica and Jamaica, revealing relatively little difference in percentages using contraception at the different ages, and is least compressed in Korea, Sri Lanka and in Nepal's principal city

sector, though interpretations concerning Nepal's dramatic looking pattern must be qualified by the knowledge of excessively small sample size in Kathmandu, (27 exposed respondents aged 15-49), and relatively few women in the "other urban" sector, (70 exposed respondents.)

Figure 2 also shows that the generalisation of a plateau in current contraceptive use at ages 30-39 is often contradicted at the individual country level. When the 57 regions are classified by peak, two of them peak at age 20-24, eleven peak at 25-29, fourteen peak at 30-34, seventeen peak at 35-39, four peak at 40-44, and five peak at age 45-49. The four remaining areas are classified as having multiple peaks, namely Thailand's principal city, Thailand's "other urban" category, Malaysia "other urban", and Sri Lanka's principal city.

The occurrence of multiple peaks and of jagged patterns of contraceptive use by age most probably reflect small denominators on which each percentage is based. This is most likely the case for Thailand's principal city, which

**Figure 2 Percentage Currently Using Any Method of Contraception, by Age and by Place of Residence Exposed Women in 19 Countries**



in Table 28 is shown to have an unweighted total N of 237 respondents, and denominator warning indicators attached to six out of seven age groups.

The generalisation that the percentage currently using any method of contraception is greater at all ages in the principal cities than in "other urban" areas does not stand up at the individual country level. Even the less stringent statement that the principal city percentage is "greater than or equal to" the "other urban" percentage is contradicted in at least one age group in eleven out of nineteen countries, though the number of consistent results greatly outweigh the number of contradictory comparisons.

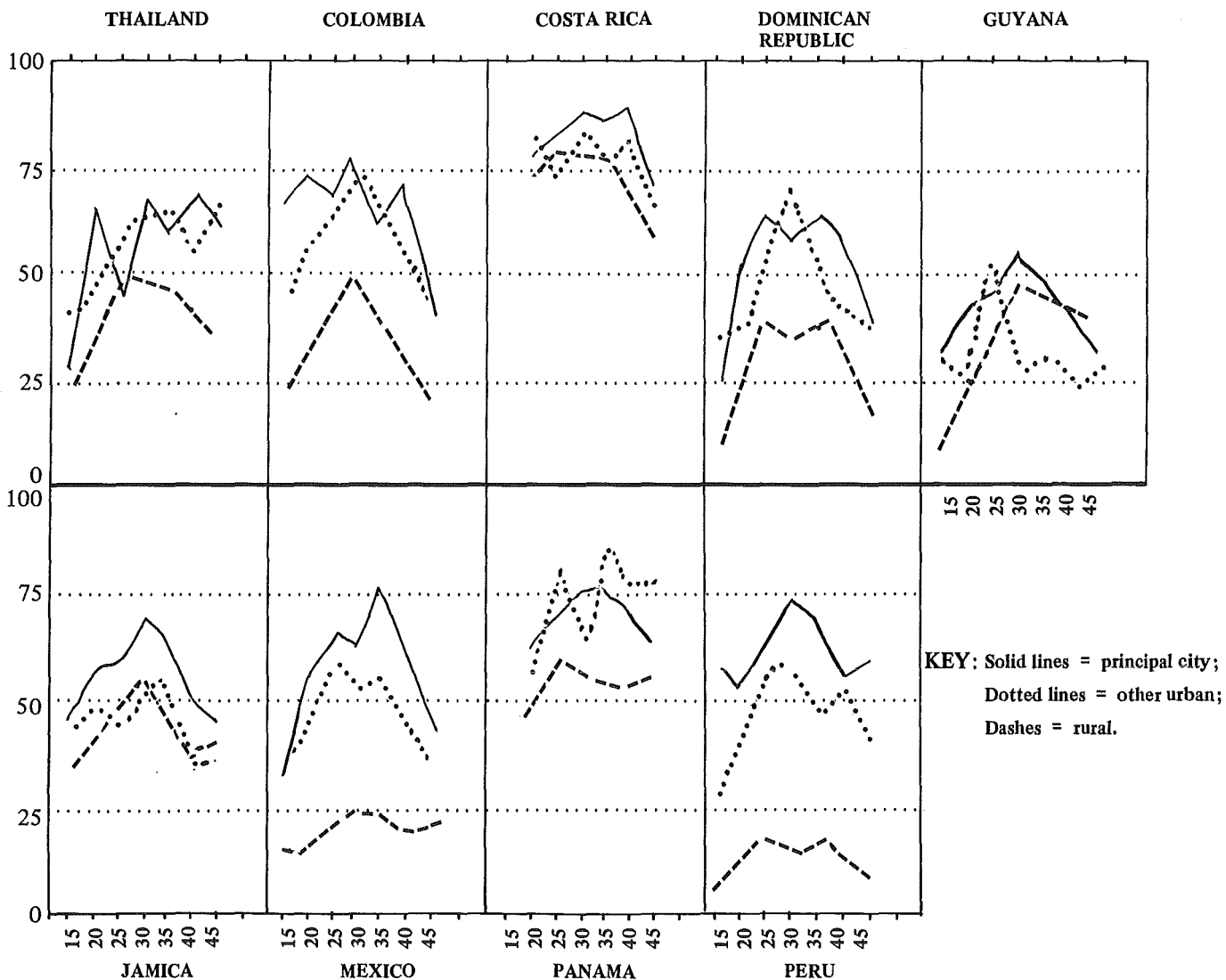
The generalisation that the percentage currently using contraception is greater or equal at all ages in principal cities than in rural areas is sustained in all but four cases, these being Fiji, Nepal, Indonesia, and Guyana. Except for these contradictions -- which may all be the result of small sample size -- it is clear that with the exception of Indonesia, rural percentages currently using contraception are at all ages somewhat lower than the corresponding percentages for

principal cities.

Current Use By Number of Living Children

For the sake of brevity and variety in the discussion that follows, the term "parity" will be used interchangeably with the term "number of living children". Before describing the data on current use of contraception by parity, mention should be made of several considerations that affect our interpretation of cross-sectional proportions using contraception at each parity in the subpopulation of "exposed" women.

First, it is noted that the percentages using contraception by number of living children are cross-sectional aggregates based on all age groups, and do not necessarily resemble the patterns of use for each individual age group. Indeed "exposed" older women aged 40-49 were shown in the preceding section to use contraception substantially less often than women aged 30-39, so that current use at the higher parities would be substantially higher if older women were excluded.



Secondly, it is noted that the effectiveness with which couples use contraception will exert a powerful selection effect on the percentage using contraception at each parity. Women using contraception highly effectively with the goal of terminating childbearing will accumulate at certain parities and these accumulations of successful contraceptors will cause cross-sectional observations of percentages using contraceptives at these parities to be appreciably higher than the percentages that would be observed longitudinally in a cohort. On the other hand, women who do not use contraception at all are more likely to be pregnant and more likely to reach high parities quickly, which will tend to inflate the proportions using contraception at low parities and deflate the proportions at high parities. For example, suppose that 30 out of every 100 women elected to be contraceptively sterilised immediately after their second birth, while the remaining 70 women did not use contraception at parity 2 and proceeded to higher parities after waiting an average of one year at parity 2. Under these admittedly simplistic conditions, a period of 10 years experience would produce a cross-sectional proportion of 81 percent currently using contraception among parity 2 women, as contrasted to 30 percent in the cohort.<sup>1</sup> Knowledge of this bias should warn the analyst against interpreting cross-sectional proportions using contraception as though they necessarily reflect cohort behaviour. Despite these interpretational pitfalls, however, this type of selection effect should not prevent comparisons of contraceptive use between countries and between rural and urban areas.

With these considerations in mind, we now turn to the data itself. Averaging groups of countries and giving each equal weight yields the profile of current use of any contraceptive method by number of living children for "exposed" women that is presented in Table 3.

**Table 3 Average Percentage Currently Using Any Contraceptive Method, by Number of Living Children and by Residence, "Exposed" Women in All 19 Countries**

Place of Residence	Number of Living Children (Parity)					
	0	1	2	3	4	5+
Principal Cities	19.3	45.4	55.8	59.2	62.0	59.6
Other Urban	14.6	34.5	48.1	52.5	54.4	54.6
Rural	9.7	23.7	32.2	34.6	37.0	37.9

These data suggest several generalisations:

First, that at every parity, use is greater in principal cities than in "other urban" areas, and is greater in other urban areas than in rural areas. Secondly, there is clear evidence of contraceptive use for spacing purposes. In principal cities, current use of contraception occurred among nearly 2 out of 10 women at parity zero, and among over 4 out of 10 among women at parity 1. These dramatically high levels of use are followed at subsequent parities by a failure to increase very much further; while 45 percent of parity 1 women are current users, the percentage rises relatively slightly to 56 percent at parity 2, and then very sluggishly climbs to a maximum of 62 percent at parity 4, then declines very slightly to 60 percent at parity 5 and over. While these rises in contraceptive use subsequent to parity 1

are of substantial demographic significance, they seem inconsistently slow when compared to the meteoric rise in the percentage using contraception between parity zero and parity 1. Possibly the cohort at parity 1 at survey time will display a substantially sharper upward trajectory in contraceptive use at higher parities than have the cohorts which were at higher parities at survey time, and perhaps the surveys caught many of the populations during a period of especially rapid increase in the proportions using contraception among the youngest women.

As to spacing motivation in rural areas, one out of 10 parity zero women was currently using contraception at time of survey, and nearly 2½ out of 10 were using contraception at parity 1. While perhaps less numerically dramatic than the levels observed in principal cities, this is nevertheless a very significant development.

While it is reasonably safe to presume that current use at parities zero and 1 is almost purely a reflection of a desire to postpone pregnancy, it is not possible from the data at hand to evaluate how much of the contraceptive use at subsequent parities is due to spacing motivation, and how much is due to a desire to cease childbearing, though future analyses will probably explore this question. Regardless of motivation, however, it is clear that in all three residence categories, contraceptive use rises most rapidly at parities zero and 1 and then increases more gradually.

If we take the maximum percentage using contraception at any parity as the "norm" for comparison, we find that rural contraceptive use at parity zero was 25 percent of the rural maximum of 37.9 observed at parity 5+ ( $25=9.7/37.9$ ), at parity 1 was 63 percent of the maximum, at parity 2 was 85 percent, at parity 3 was 91 percent, and parity 4 was 98 percent. When such ratios are constructed for all three residential categories, we find a substantial regularity emerging, presented in Table 4.

**Table 4 Ratios of (Percent Currently Using Contraception at Parity i) to (Maximum Percent Using at Any Parity)**

Place of Residence	Number of Living Children (Parity)					
	0	1	2	3	4	5
Principal Cities	31	73	90	95	100	96
Other Urban	26	63	88	96	100	100
Rural	25	63	85	91	98	100

Taken together, these data clearly indicate relatively high proportions using contraception at parities zero and one in all three residential categories, and also clearly show a "parity 3+ plateau", a pattern of very little increase in the percentage using contraception beyond parity 3.

Similarly constructed ratios for the Asia and Pacific and Latin America and Caribbean regions are presented in Table 5, and serve as a convenient device for describing differences between the regional groupings. At parity zero, the Asia and Pacific region has much lower levels of contraceptive use in all three residential categories, ranging between 13 to 16 percent of the norming maximum, as compared to between 39 and 49 percent in the Latin

<sup>1</sup>.81 =  $(30 \times 10) / ((30 \times 10) + 70)$ .

**Table 5 Ratios to Percentage Currently Using Contraception at Parity i to Maximum Percentage at Any Parity, Two Regional Groups**

Region and Residence	Number of Living Children (Parity)					
	0	1	2	3	4	5+
<b>ASIA AND PACIFIC*</b>						
Principal Cities	16	65	83	92	100	95
Other Urban	15	51	75	87	97	100
Rural	41	74	91	93	99	100
<b>CARIBBEAN AND LATIN AMERICA</b>						
Principal Cities	49	83	98	99	100	97
Other Urban	39	73	97	100	96	94
Rural	41	74	91	93	99	100

\* Including West Asia.

America and Caribbean group of countries. At parity 1, current contraceptive use in the principal cities of the Asia and Pacific group are 65 percent of the maximum level of use, and in rural areas are 53 percent of the rural maximum. The comparable Latin America and Caribbean figures at parity 1 are 83 and 74 percent. There is thus very much greater use of contraception for spacing purposes in the Latin America and Caribbean grouping, especially among childless women at parity zero. At parities 2 and above, the regional differences in these ratios narrow substantially, and at parities three and above the generalisation of a "parity 3+ plateau" is supported in all residential categories of both regional groups, with ratios close to the norming maxima.

The actual percentages currently using contraception for both regions are presented in Table 6 and show that the Latin American and Caribbean countries have higher percentages using contraception at all parities than do the Asia and Pacific countries, but also demonstrate that the gap is much narrower above parity 4 than it is at lower parities. At parity zero it is apparent that in the Asia and Pacific group, contraceptive use occurs among only one in 20 women, as against one in 4 in the Caribbean and Latin American group.

**Table 6 Average Percentage Currently Using Any Contraceptive Method, by Number of Living Children and by Residence, "Exposed" Women in Two Regional Groups, All 19 Countries**

Region and Residence	Number of Living Children					
	0	1	2	3	4	5+
<b>ASIA AND PACIFIC*</b>						
Principal Cities	9.1	37.2	47.7	52.9	57.4	54.5
Other Urban	7.7	26.8	39.3	45.6	50.5	52.2
Rural	4.4	18.3	27.7	31.3	33.6	34.8
<b>CARIBBEAN AND LATIN AMERICA</b>						
Principal Cities	33.3	56.6	66.9	67.8	68.4	66.5
Other Urban	24.0	45.1	60.3	62.0	59.8	58.0
Rural	17.1	31.3	38.3	39.1	41.6	42.1

\* Including West Asia.



Moving to the individual country level of comparison, percentages currently using contraception broken down by number of living children are graphed up to parity 9+ in Figure 3 for only two residential categories, *urban total* and rural. The reason for graphing only two residential categories in Figure 3 is that for many countries, inadequate denominator size above parity 5 prevented the graphing of all three residence categories. The reason for graphing up to parity 9+ in Figure 3 is that the contraceptive use pattern observed up to parity 5+ is potentially misleading if taken on its own. For readers interested in seeing graphs of all three residential categories, Figure 4 presents patterns of contraceptive use up to parity 5+. The following discussion, however, will be based on the graphs in Figure 3.

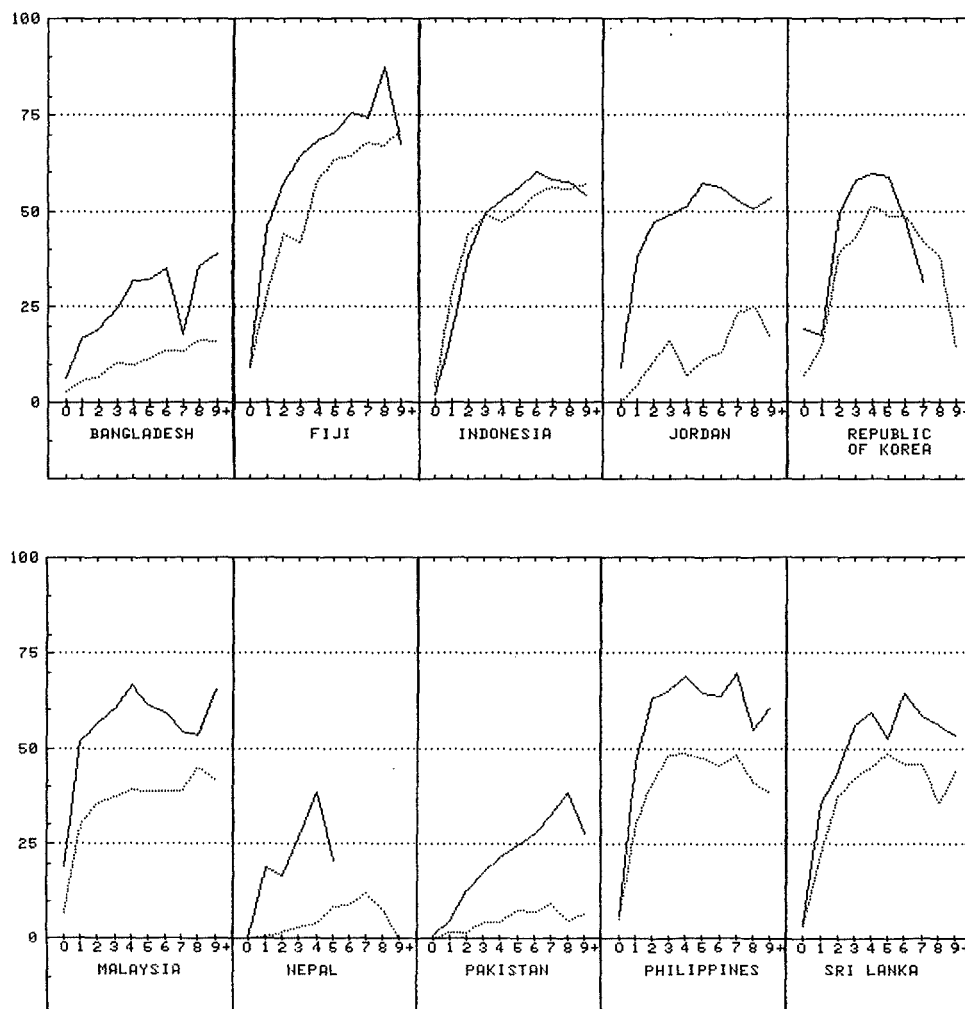
While few unqualified generalisations can be made from the graphs in Figure 3, certain features stand out:

- Figure 3 shows that between parities 0 and 9+, there are very few straight line relationships whereby con-

traceptive use increases linearly with parity, serving as a caution to users of linear models.

- In nearly all cases, both rural and urban, Figure 3 shows that the strongest gains in contraceptive use occur between parities zero and 3, with relatively little further increase at higher parities, supporting the observation of a “parity 3+ plateau” in contraceptive use. This is of course based on cross-sectional observation, and the relation between contraceptive use and parity may well be substantially different within each cohort.
- Notable exceptions to the “negligible increase in contraceptive use beyond parity 3” generalisation are found in Bangladesh, Fiji, Pakistan, Thailand, and (debatably) Guyana, and Jamaica.
- Comparisons with use in earlier surveys would allow assemblage of partial time series and will very probably show sharp rises in contraceptive use at all parities.
- Current contraceptive use among childless women is a highly significant indicator of movement in the

**Figure 3 Country Graphs of Percentage Currently Using Any Contraceptive Method, Exposed Women, by Number of Living Children (Parities 0 to 9+)**



direction of lowered fertility, and is seen to vary remarkably between the principal cities of Latin America and the Caribbean, with a high of 44 percent in Jamaica and a low of 21 percent in Mexico; it is noteworthy that Jamaica's principal city is about 20 times smaller than Mexico's. Use of contraception in the principal cities of Asia and the Pacific among childless women is usually much lower, falling below 20 percent in all cases except for Malaysia (23 percent) and the Republic of Korea (26 percent).

Current use among childless women in rural areas varies very substantially in the Caribbean and Latin American group, between 2 percent in Mexico and 43 percent in Costa Rica. Rural variation is much less in the Asian and Pacific grouping, between zero percent (rural Nepal and Pakistan) and 10 percent (rural Thailand).

- Current contraceptive use among parity one women is an equally significant indication of movement toward lowered fertility. In rural areas, contraceptive use at parity one in the Asian and Pacific group is sharply bifurcated; four countries fall below 7 percent, while the remaining seven range between 15 and 35 percent. In the rural areas of Latin America, contraceptive use at parity one varies by a massive amount, between 11 percent in Peru and 73 percent in Costa Rica.
- The case of Indonesia, with negligible differences in contraceptive use at most parities between rural and urban areas, is especially arresting, particularly in view of the long history of dense rural settlement and highly developed rural infrastructure, and in view also of recent governmental efforts aimed at encouraging contraceptive adoption.

Figure 3 Continued

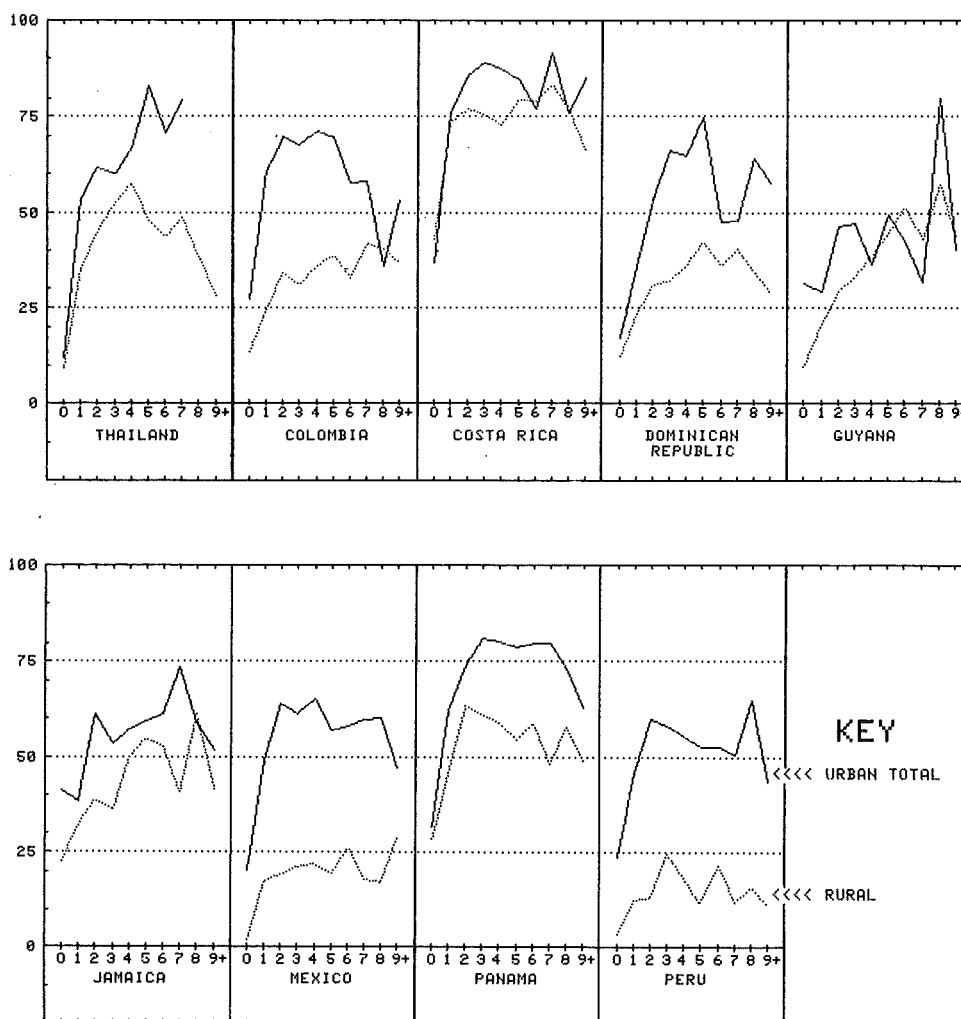
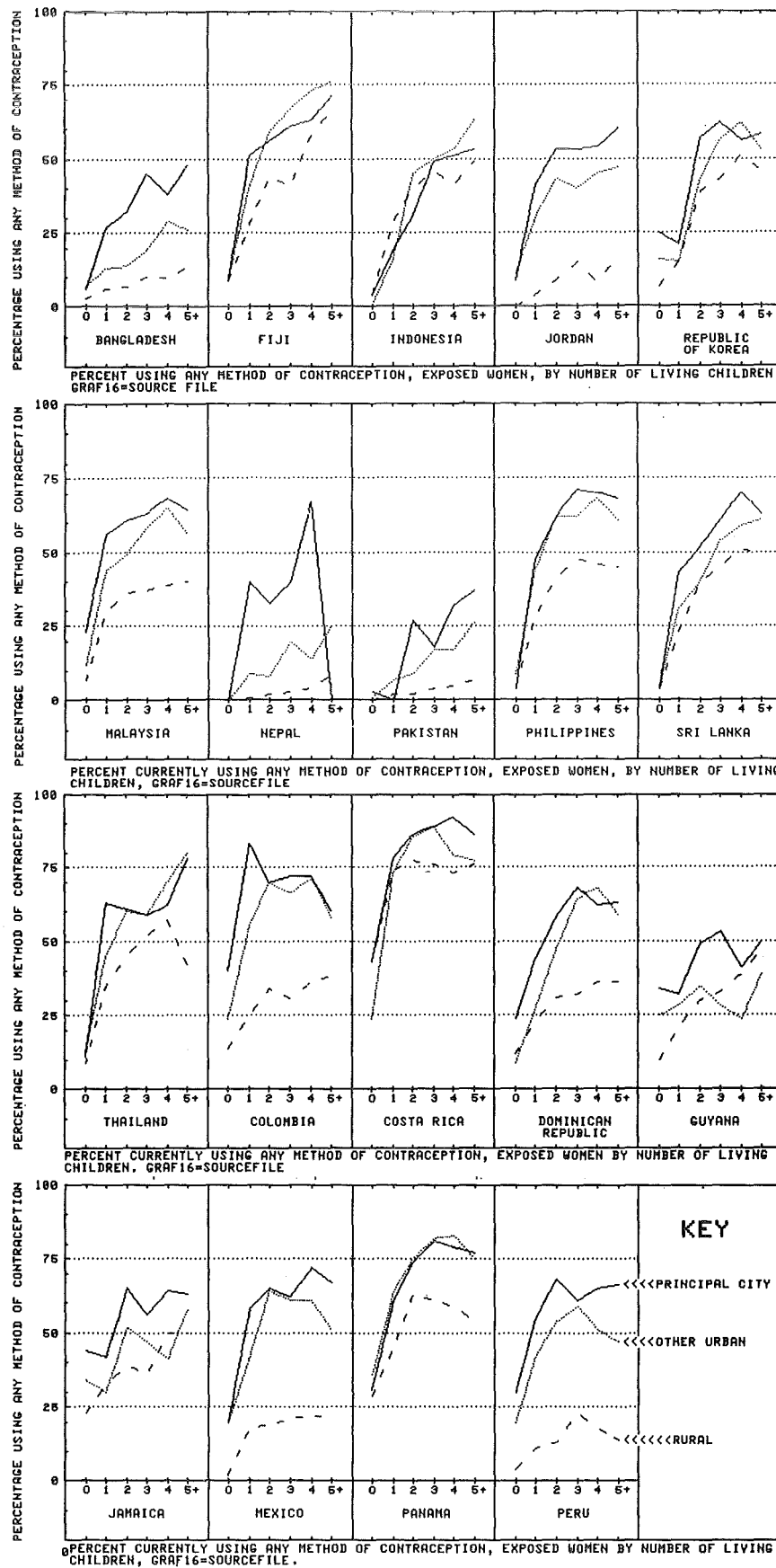




Figure 4 Percent Currently Using Any Method of Contraception by Number of Living Children and Place of Residence, Exposed Women in 19 Countries



### 3.2 Ever Use of Contraception

Compared to information on current use of contraception, information on contraceptive ever use fulfills several rather different purposes. First, and perhaps most important, data on ever use yield direct information on the percentages never using any method, a type of information which data on current use of contraception is incapable of providing.

Second, when tabulated by number of living children among currently married fecund women, information on ever use of contraception by women at parities zero and one provides somewhat better data on spacing behaviour than will data on current use of contraception. This is because the ever use data prevents us from ignoring past contraceptive use among women who are currently pregnant, whose previous spacing behaviour would remain concealed if we relied solely on the current contraceptive use variable.

A third function fulfilled by ever-use data is that when the percent ever using at a given age or parity is compared with the percent currently using at that age or parity, the analyst is provided with a ready indication of proportions ceasing to use contraception, and a somewhat crude approximation of "contraceptive dropout". Such an exercise is best conducted by tabulating current use and ever use for the currently married and fecund subpopulation, which allows us to examine persistence in use of contraception among women still at risk of childbearing, while excluding women who have stopped using contraceptives because they perceive themselves as no longer at risk of childbearing.

#### Never Use of Contraception

Currently married and fecund women are conceptually the most appropriate population for examining never use of contraception. Never use of contraception among the ever married or currently married subsamples is less informative, because never use will then be inflated by the inclusion of women who have no reason to have recently adopted contraception, namely those who have long been infertile, divorced, widowed or separated. This will apply especially strongly in populations where contraceptive use has recently undergone a rapid increase, since in such populations, women who have long been sterile or without a spouse are much less likely to have ever used contraceptives. Examining never use of contraception among exposed women would of course have the disadvantage of excluding pregnant women, who should be included if we wish to secure unbiased proportions never using contraception for the group capable of childbearing.

Table 7 shows that the rural percentage never using any method of contraception averages 56 percent across all countries, ranging between a low of 15 percent in Costa Rica to a high of 95 percent in Nepal. In six countries, more than 70 percent of rural women had never used any method of contraception, namely Bangladesh, Jordan, Nepal, Pakistan, Mexico, and Peru. The rural percentage never using contraception averages 49 percent in the Latin American and Caribbean group, as compared to 62 percent in the Asia and Pacific group.

Table 7 Age Standardized Percentage Never Using Contraception Among Currently Married, Fecund Women

Country	Principal City (1)	Other Urban (2)	Rural (3)	Ratio (3)/(1)
<b>ASIA AND PACIFIC*</b>				
Bangladesh	50	69	83	1.66
Fiji	26	21	29	1.12
Indonesia	53	50	54	1.02
Jordan	34	43	77	2.26
Korea, Republic of	40	43	45	1.13
Malaysia	30	37	53	1.77
Nepal	50	75	95	1.90
Pakistan	66	75	92	1.24
Philippines	24	28	45	1.88
Sri Lanka	40	47	55	1.38
Thailand	28	31	49	1.75
<i>GROUP AVERAGE</i>	36	47	62	1.72
<b>CARIBBEAN AND LATIN AMERICA</b>				
Colombia	16	25	55	3.44
Costa Rica	7	13	15	2.14
Dominican Republic	30	37	58	1.93
Guyana	29	32	48	1.66
Jamaica	19	30	35	1.84
Mexico	26	35	72	2.77
Panama	14	17	34	2.43
Peru	21	38	77	3.67
<i>GROUP AVERAGE</i>	20	28	49	2.45
<i>OVERALL AVERAGE</i>	29	39	56	1.93

\* Including West Asia.

In principal cities, an average of 3 out of 10 women had never used contraception, ranging between a low of 7 percent in Costa Rica to a high of 66 percent in Pakistan. The percentage never using contraception in principal cities averages 20 percent in the Latin America and Caribbean group of countries, and is highest in the Dominican Republic at 30 percent and lowest in Costa Rica at 7 percent. The average is 36 percent in the Asia and Pacific group, and is in excess of 49 percent in several very large cities, namely those of Bangladesh, Indonesia, and Pakistan, indicating that large city size by itself is insufficient to induce high levels of contraceptive use.

Except for Fiji and Indonesia, never use is consistently higher in other urban areas than in principal cities, and in all countries, never use is consistently higher in rural areas than in other urban areas.

Ever Use of Contraception by Number of Living Children: Evidence of Spacing

As noted above, ever use of contraception among currently married and fecund women classified by parity will more clearly reveal the extent to which contraception is used for spacing purposes at low parities. Table 8 supports this assertion, presenting average percentages across all countries, showing that the percentage ever using contraception at parities zero and one are much higher in all three residence categories than the percentage currently using contraception at these parities. This comparison reveals that the extent of contraceptive use for spacing purposes is severely underestimated if we rely purely on current contraceptive use data.

**Table 8 Percentage Ever Using Any Method<sup>1</sup> Compared with Percentage Currently Using Any Method, at Parities Zero and One: All Countries**

Place of Residence	Parity (Number of Living Children)			
	0		1	
	Ever Using	Currently Using	Ever Using	Currently Using
Principal Cities	31	19	59	45
Other Urban	28	15	50	35
Rural	16	10	33	24

1. Percentages ever using are based on currently married fecund women; percentages currently using are based on "exposed" women; percentages currently using would be somewhat smaller if based on currently married fecund women.

Contraceptive use within marriage at parities zero and one is of importance because delay at such an early stage in the family building process can have a number of significant consequences. Delaying the first birth by a year is equivalent to raising the age of marriage by one year. Moreover, the formation of contraceptive habits at such an early point in marriage suggests substantial increases in contraceptive use in the future, both for spacing and stopping purposes. Spacing behaviour at parity 1, directly after the first birth, has similar consequences.

**Indications of Contraceptive Continuance**

As noted above, comparisons between ever use and current use of contraception give an approximate indication of levels of contraceptive continuation. Such comparisons tell us the degree to which, once having tried contraception, an ever-user is likely to be a current user at the time of interview. For such a comparison to be meaningful, it is evidently necessary to exclude women who have ceased using because they believe themselves to be no longer fecund, or because they do not currently have a spouse. On the other hand, while pregnant women are by definition not current users of contraception, their exclusion would result in upwardly biased continuation figures, so that it is necessary to include them, and to conduct the comparisons within the subpopulation of currently married and fecund women.

**Table 9 Contraceptive Continuation Ratios<sup>1</sup>**

Country	Principal City	Other Urban	Rural
<b>ASIA AND PACIFIC*</b>			
Bangladesh	.712	.579	.536
Fiji	.691	.674	.588
Indonesia	.730	.736	.734
Jordan	.621	.553	.398
Korea, Republic of	.616	.615	.574
Malaysia	.751	.707	.652
Nepal	.585	.513	.559
Pakistan	.667	.542	.375
Philippines	.702	.674	.613
Sri Lanka	.790	.737	.745
Thailand	.812	.726	.724
<i>GROUP AVERAGE</i>	.699	.640	.594
<b>CARIBBEAN AND LATIN AMERICA</b>			
Colombia	.738	.725	.628
Costa Rica	.827	.801	.785
Dominican Republic	.700	.680	.622
Guyana	.592	.410	.617
Jamaica	.664	.598	.583
Mexico	.729	.688	.588
Panama	.758	.803	.727
Peru	.689	.677	.563
<i>GROUP AVERAGE</i>	.712	.673	.639
<i>OVERALL AVERAGE</i>	.705	.654	.613

\* Including West Asia.

1 Ratios of percent currently using any method to percent ever using any method, currently married and fecund women, standardized on number of living children

Table 9 presents contraceptive continuation ratios for currently married and fecund women. The ratios are derived through dividing the percentage of currently married fecund women currently using any method of contraception by the percentage of currently married fecund women ever using any method. Table 9 shows that in principal cities, continuation ratios average .705 across all countries, meaning that for every 100 ever-users there are 70.5 current users; this ratio varies comparatively little, between .592 in Guyana, which is 84 percent of the mean of .705, to .827 in Costa Rica, which is 117 percent of the mean. These results clearly suggest that once women have tried contraception, they are highly likely to go on using it. The average rural continuation ratio across all countries is somewhat lower than the principal city ratio, being .613, implying 61.3 current users for every 100 ever-users. The rural ratio varies somewhat more than does the principal city ratio, from 37.5 in Pakistan (62 per cent of the mean) to 78.5 in Costa Rica (128 percent of the mean). The data in Table 9 also show that in sixteen out of nineteen countries, the principal city ratio is greater than the corresponding rural ratio, the exceptions being Indonesia, Nepal, and Guyana. For most countries the principal city ratio is not more than 20 percent higher than the rural

ratio, except for Bangladesh (33 percent higher), Jordan (56 percent), Pakistan (79 percent), Mexico (23 percent), and Peru (22 percent).

Contraceptive continuation ratios as discussed above are influenced by at least five factors. Discontinuation will to some extent occur because of the desire to have another child, and will presumably occur more often in populations where spacing occurs more often. Discontinuation may also reflect a dislike of available methods, or their non-availability. It may also reflect cessation of intercourse, or a belief in subfecundity among women approaching menopause.

Since we do not know the parity at which the respondent first used contraception, nor the date at which contraception first began, data on continuation ratios by parity tell us very little about contraceptive efficacy<sup>1</sup>, and instead tell us how likely it is that an ever-user who is presently at parity *i* will be a current user. Ratios by parity are not entirely devoid of interest, however. Table 10 shows us that among currently married, fecund women, the continuation ratios averaged across all countries are at all parities between 10 to 25 percent higher in principal cities than in rural areas. The table also shows that ratios at parity zero are much lower than at all other parities, and that the ratios steadily increase up to parity 2 in all three residence categories, and then increase somewhat erratically and at a lower rate to maxima of .72 and .66 at parity 5+ in rural areas and other urban areas and to a maximum of .74 in principal cities. While rural ratios are somewhat lower than urban ratios at all parities, a major point that stands out is that among rural currently married fecund women at all parities, very substantial proportions of ever-users are persisting in using contraception.

**Table 10 Average Continuation Ratios for Currently Married, Fecund Women, by Parity**

Region and Residence	Parity					
	0	1	2	3	4	5+
<b>NINETEEN COUNTRIES</b>						
Principal City	.39	.61	.69	.72	.74	.73
Other Urban	.31	.58	.68	.67	.68	.72
Rural	.34	.54	.59	.63	.63	.66
<b>ASIA AND PACIFIC</b>						
Principal City	.37	.59	.68	.71	.74	.71
Other Urban	.26	.58	.68	.64	.68	.71
Rural	.29	.52	.59	.62	.59	.64
<b>CARIBBEAN AND LATIN AMERICA</b>						
Principal City	.46	.65	.71	.74	.74	.76
Other Urban	.37	.59	.68	.71	.69	.74
Rural	.41	.56	.60	.65	.68	.70

Table 10 also shows that the Latin America and Caribbean group has higher continuation ratios at most parities than does the Asian and Pacific group of countries. The ratios are substantially higher in the Latin America and Caribbean group at parity zero in all three residence categories, are higher at all parities in the rural sector, but are quite close at parities 1 to 5+ in the "other urban" category. The patterns at the individual country level show a great deal of variation, but are not discussed here.

**Table 11 Average Continuation Ratios by Parity, "Exposed" Women, † for All Countries**

	Parity					
	0	1	2	3	4	5+
Principal City	.54	.72	.77	.77	.78	.77
Other Urban	.44	.71	.76	.74	.74	.77
Rural	.54	.65	.68	.71	.70	.72

† Excluding pregnant women.

Table 11 removes pregnant women from calculation of the ratios, and shows that at all parities except zero, between 65 and 78 percent of exposed ever-users are currently using contraception, in all three residence categories; there is remarkably little variation by parity in these ratios, increasing from .72 at parity 1 to .77 at parity 5+ among principal city women, and from .65 to .72 among rural women.

<sup>1</sup>If the ratios among currently married, fecund women who want no more children are above a certain level - say 95 percent - certain inferences may be possible.

### 3.3 Rural Versus Urban Use of Inefficient Methods

Since inefficient contraceptives – withdrawal, abstinence, rhythm, and the douche – are generally harder to use than the efficient methods, it is perhaps surprising to note their relatively widespread use in both the rural areas and the principal cities of most of the nineteen countries. Because of the inconvenience of the methods, their use would seem to indicate a strong commitment to postpone or to cease childbearing coupled with either an absence of access to more efficient methods or reservations concerning their use. Absence of access may be a matter of money cost, or travel distance, or general unavailability, while reservations may include fears about safety, or objections on religious grounds. In contexts where religious objections are not a factor, the percentage using inefficient methods may be taken as a minimum estimate of unmet need for provision of modern contraceptive services.

Table 12 (bottom row) indicates that in principal cities the average percentage of currently fecund women who were

currently using inefficient methods was 10.9 percent, while the average percentage using efficient methods was 35.4 percent, so that 235 per thousand current users of contraception in principal cities were using inefficient methods.<sup>1</sup> The comparable averages for rural areas, also in Table 12, show that 6.9 percent of currently married, fecund women were using inefficient methods, while 21.9 percent were using efficient methods, so that among current contraceptors in rural areas, 242 per thousand were using inefficient methods. Table 12 also shows that these cross national averages conceal a great deal of inter-country variation. Column 1 indicates that in the principal cities, the percentage using inefficient methods averages 10.9 percent, but ranges between 0 percent in Nepal to 31 percent in Peru, while column 4 indicates that in the rural areas, the percentages using inefficient methods is lowest in Nepal at 0 percent, and highest in the Philippines at 20 percent.

$$^1 \cdot 235 = 1000 (10.9 / (35.4 + 10.9))$$

**Table 12 Current Use of Inefficient and Efficient Contraceptive Methods in Rural Areas and Principal Cities of 19 Countries, Among Currently Married and Fecund Women, Standardized for Age**

Country	Principal Cities			Rural Areas			Difference Between Urban and Rural Ratios (6) - (3)
	Percent Using Inefficient Methods (1)	Percent Using Efficient Methods (2)	Ratio of Inefficient to Total Users = (1)/(1)+(2) (3)	Percent Using Inefficient Methods (4)	Percent Using Efficient Methods (5)	Ratio of Inefficient to Total Users = (4)/(4)+(5) (6)	
<b>ASIA AND PACIFIC*</b>							
Bangladesh	4	32	11	4	5	44	+33
Fiji	8	42	16	6	37	14	-2
Indonesia	11	24	31	3	30	9	-22
Jordan	12	29	29	3	6	33	+4
Republic of Korea	10	31	32	6	26	19	-13
Malaysia	13	38	25	9	23	28	+3
Nepal	0	36	0	0	3	0	0
Pakistan	6	16	27	1	3	25	-2
Philippines	24	28	46	20	13	61	+15
Sri Lanka	15	31	33	13	20	39	+6
Thailand	3	54	6	3	34	9	+3
<b>CARIBBEAN AND LATIN AMERICA</b>							
Colombia	17	45	27	11	19	37	+10
Costa Rica	12	64	16	12	56	18	+2
Dominican Republic	8	41	16	6	21	22	+6
Guyana	12	29	29	6	27	18	-11
Jamaica	3	50	6	2	36	5	-1
Mexico	12	43	22	6	11	35	+13
Panama	7	58	11	10	38	21	+10
Peru	31	24	56	11	2	85	+29
<b>AVERAGE</b>	<b>10.9</b>	<b>35.4</b>	<b>23.5</b>	<b>6.9</b>	<b>21.6</b>	<b>24.2</b>	

\* Including West Asia.



To highlight how many women are currently using inefficient methods relative to the total number using any method at all, the number of inefficient users per 100 total users is presented in column 3 for principal cities and in column 6 for rural areas.

This exercise shows that in the principal cities, the ratio of inefficient to total users exceeds 10 percent in sixteen out of nineteen countries, including all but Nepal, Thailand, and Jamaica. In the rural areas, the ratio exceeds 10 percent in fifteen countries, including seven out of the eight Latin American and Caribbean countries, and including eight of the eleven Asian and Pacific countries. In a few countries, notably Indonesia, Korea, and Guyana, the ratio of inefficient users to total users is substantially higher in the principal city than in the rural sector.

The direction of the rural-urban differential in use of inefficient methods could reasonably go either way. On the one hand, if rural pressures to use contraception are lower, rural women might only very rarely resort to inefficient methods. On the other hand, if efficient contraception is unavailable in some rural areas, then inefficient methods may be the only ones used. In any event, the data in column 7 of Table 12 indicate that in three countries, Indonesia, Republic of Korea, and Guyana the proportion of total contraceptors who are using inefficient methods is substantially lower, by at least 10 percent, in rural areas than in urban. In five other countries, however, the proportion of total users who are employing inefficient methods is substantially higher in rural than in urban areas by at least 10 percent.

In the remaining eleven countries, differences in rural and urban proportions using inefficient methods as a proportion of total users are negligible.

### 3.4 A Comparison With Europe and U.S.A.

A somewhat wider perspective on rural-urban differentials in current use of contraception is afforded by including seven highly industrialised countries in the comparison. Table 13 includes six European countries and the United States of America, and shows that in four of these seven countries, the difference between rural and urban percentages currently using contraception is 4 percent or below, while in all seven cases, the urban-rural ratio of contraceptive use falls below 116 urban users per 100 rural users. By contrast, the Asia and Pacific and the Latin America and Caribbean groups together contain only four countries that have ratios below 1.16, namely Indonesia (1.00), Costa Rica (1.08), Korea (1.14), and Guyana (1.14).

It is emphasised that the data on the Europe and U.S.A. group are presented in Table 13 only for approximate comparison of rural-urban differentials in contraceptive use, and that these data do not allow valid comparisons of absolute levels of contraceptive use between Europe and U.S.A. and the two other regional groupings. This to a considerable degree is because the Europe and U.S.A. group excludes voluntarily sterilised respondents in calculating percentages currently using contraception.

**Table 13 Current Use of Contraception Among "Exposed" Women in Nineteen WFS Countries and Among "At Risk" Women in Seven Industrialised Countries**

Country	Total		Absolute Urban- Percentage Rural Difference Ratio	
	Urban	Rural		
<b>ASIA AND PACIFIC</b>				
Bangladesh	23	9	14	2.56
Fiji	58	49	9	1.18
Indonesia	40	40	0	1.00
Jordan	48	13	35	3.69
Republic of Korea	48	42	6	1.14
Malaysia	57	36	21	1.58
Nepal	21	2	19	10.50
Pakistan	18	4	14	4.50
Philippines	60	42	18	1.43
Sri Lanka	49	35	14	1.40
Thailand	60	44	16	1.36
<i>GROUP AVERAGE</i>	<i>44</i>	<i>29</i>	<i>15</i>	<i>1.52</i>
<b>EUROPE AND UNITED STATES</b>				
Belgium	84	80	4	1.05
Czechoslovakia	82	74	8	1.11
Denmark	85	82	3	1.03
Finland	83	84	-1	0.99
France	73	63	10	1.16
Hungary	71	70	1	1.01
United States of America	68	61	7	1.11
<i>GROUP AVERAGE</i>	<i>78</i>	<i>73</i>	<i>5</i>	<i>1.07</i>
<b>CARIBBEAN AND LATIN AMERICA</b>				
Colombia	62	34	28	1.82
Costa Rica	81	75	6	1.08
Dominican Republic	52	31	21	1.67
Guyana	40	35	5	1.14
Jamaica	52	41	11	1.26
Mexico	57	20	37	2.85
Panama	72	55	17	1.31
Peru	54	16	38	3.38
<i>GROUP AVERAGE</i>	<i>59</i>	<i>38</i>	<i>21</i>	<i>1.55</i>

Source: United Nations. 1976. *Fertility and Family Planning in Europe*. Department of Social and Economic Affairs. Population Studies No. 58 ST/ESA/SER A/58. Figures for Europe and the United States of America exclude the contraceptively sterilised from numerators and denominators and were termed "at risk" in the source publication.

### 3.5 Some Conclusions

These finds strongly suggest that rurality is not an absolute obstacle to widespread adoption of contraception. Indeed, many countries had substantial proportions of their rural women currently using contraception, averaging 33 percent across all nineteen countries. On the other hand, levels of current use were appreciably higher in principal cities (55 percent) and in other urban areas (47 percent).

While "principal city" and "other urban" areas usually had higher percentages ever using contraception at every parity and in every age group, there were some cases in which this did not obtain, or where the percentages were very close.

In all categories of residence, there is a marked tendency for contraceptive use to rise sharply between parities zero and 3, and then to increase very little further, and in some cases even to begin declining after parity 5.

There is substantial evidence of contraceptive use for purposes of spacing at parities zero and 1.

Use of inefficient contraceptive methods is surprisingly widespread, with about 24 percent of all rural and urban current users of contraception utilising inefficient methods.

Never use of contraception was seen to be more common in rural areas (averaging 56 percent) than in principal cities (averaging 30 percent).

Calculation of "contraceptive continuation ratios" indicated that 7 out of 10 principal city ever-users are current users, while 6 out of every 10 rural ever-users are current users. With a few notable exceptions the average ratios are surprisingly uniform among countries.

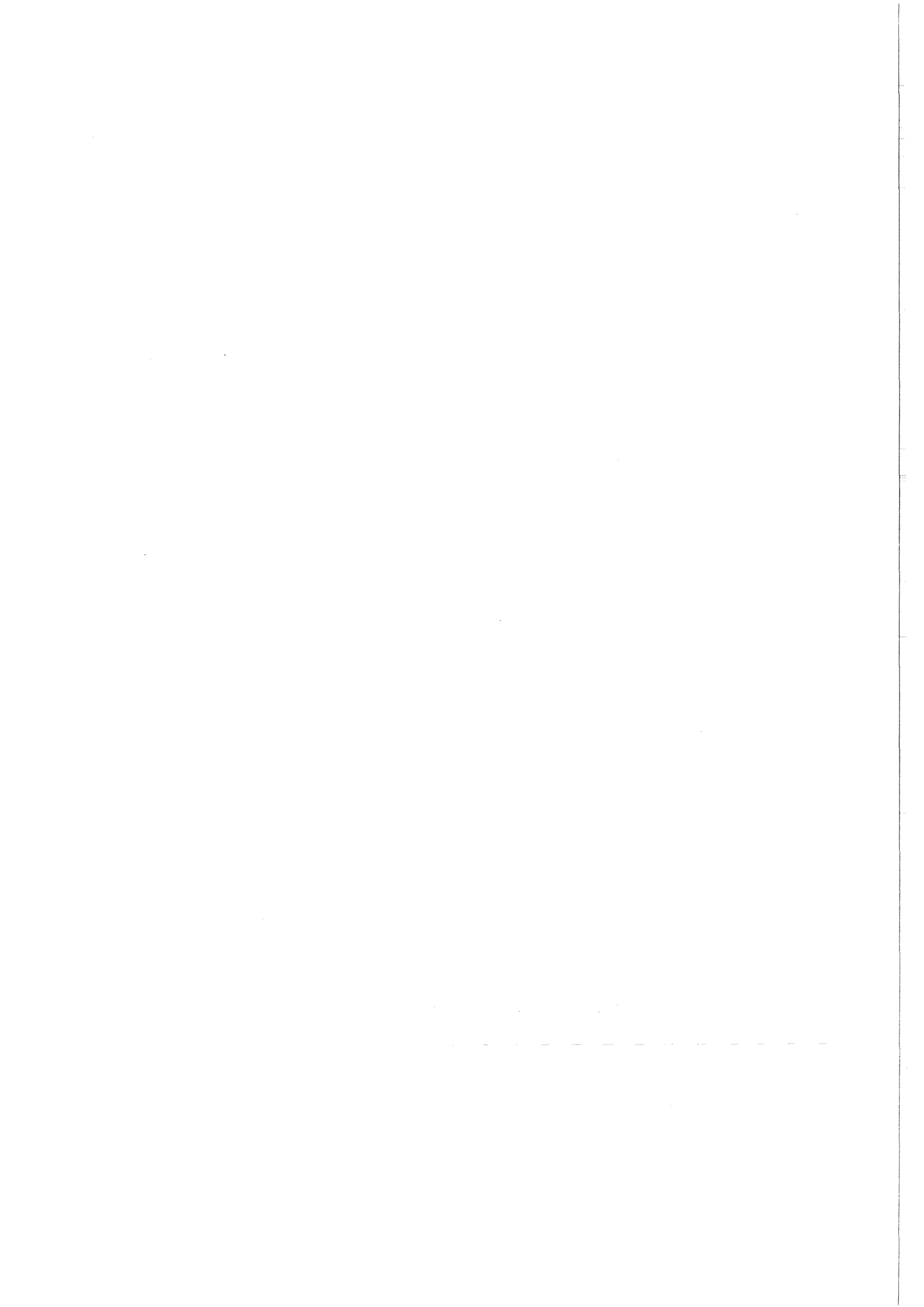
Comparisons with seven industrialised nations revealed that these had virtually lost any sharp urban rural differential in current contraceptive use, with an average ratio of 1.07, as compared to the average ratio of 1.55 observed in the group of nineteen WFS countries.

Countries in the Latin American and Caribbean group had substantially higher rates both of rural and urban contraceptive use than those in the Asian and Pacific group. The predominantly Moslem countries of Bangladesh, Jordan, and Pakistan all had relatively low rural percentages currently using contraception, all three being below 20 percent, but the total urban percentage using contraception in Jordan was 48 percent, which was very much higher than the corresponding percentages in Bangladesh (23 percent) or Pakistan (18 percent). Several countries with Catholic majorities showed surprisingly high proportions using efficient methods of contraception, though in Peru and Colombia very high percentages were using inefficient methods.

These findings pose several questions beyond the scope of the present summary. In particular, questions arise as to why the rural-urban differential in contraceptive use varies so widely among countries and why use of inefficient methods is sometimes greater in urban than in rural areas.



APPENDIX I—DETAILED TABLES



**GUIDE TO DETAILED TABLES**

SUBPOPULATION	Ever Use of Contraception		Current Use of Contraception	
	Age	Number of Living Children	Age	Number of Living Children
Ever Married Women	Table 14	Table 15	Table 16	Table 17
Currently Married Women	Table 18	Table 19	Table 20	Table 21
Currently Married and Fecund Women	Table 22	Table 23	Table 24	Table 25
Exposed Women	Table 26	Table 27	Table 28	Table 29









TABLE 15 CONTINUED

COUNTRY	Number of Living Children and Type of Method Ever Used						T O T A L		TOTAL N (W) (U)	
	0	1	2	3	4	5+	OBSERVED	STANDARDISED		
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.		
LATIN AMERICA AND CARIBBEAN										
COLOMBIA	66 10 24	45 11 44	33 13 54	35 10 54	33 14 53	42 12 46	41 12 47	42 12 46	3299	3299
Bogota	(51 20 29)	21 15 64	11 13 76	20 13 68	14 12 75	24 13 63	21 14 65	24 14 62	416	416
Other urban	64 6 30	38 10 53	25 12 62	24 11 65	22 15 63	33 12 55	33 11 56	34 11 55	1707	1707
Urban total	61 8 30	35 11 55	21 13 66	23 11 65	20 15 65	32 12 56	31 12 58	32 12 57	2123	2123
Rural	79 14 7	67 13 19	60 13 26	61 9 30	58 13 29	53 12 35	59 12 28	61 12 26	1176	1176
COSTA RICA	54 5 41	16 7 77	11 7 81	11 10 78	14 9 77	21 10 69	18 9 73	20 8 71	3037	3037
San Jose'	47 5 48	13 7 80	6 6 88	7 8 85	7 10 83	15 10 76	13 8 79	15 8 77	955	955
Other urban	(61 0 39)	20 4 76	12 8 80	10 11 78	11 10 79	20 9 72	19 8 73	21 7 72	620	620
Urban total	52 3 45	16 6 78	8 7 85	8 9 82	8 10 81	17 9 74	15 8 77	18 8 75	1575	1575
Rural	57 9 34	17 9 74	16 8 76	16 11 73	20 7 73	24 11 65	22 10 68	23 10 67	1462	1462
DOMINICAN REP	75 11 14	62 10 28	42 13 45	42 12 46	41 10 49	50 10 39	52 11 37	51 11 38	2257	2257
Santo Domingo	69 10 21	46 12 42	27 12 61	24 11 66	23 9 68	34 13 53	37 11 52	36 11 52	572	572
Other urban	73 11 16	67 8 25	31 11 58	29 13 58	37 9 54	36 7 57	45 10 46	43 9 47	572	572
Urban total	71 11 18	55 10 34	29 11 59	26 12 62	30 9 61	35 10 55	41 10 49	40 10 50	1144	1144
Rural	82 11 8	70 9 21	61 15 24	63 12 25	54 11 35	60 11 29	64 11 25	63 11 25	1113	1113
GUYANA	63 10 27	56 11 33	43 9 48	42 11 48	40 9 51	40 8 52	46 9 44	46 9 45	3616	3616
Georgetown&Sub.	44 10 46	48 13 40	27 8 65	22 13 66	31 9 60	32 11 57	35 11 54	33 11 56	1030	1030
Other urban	(59 12 29)	(48 18 34)	(42 6 53)	(31 15 54)	(31 14 55)	26 11 63	38 13 50	37 13 51	277	277
Urban total	47 11 43	48 14 39	29 8 63	24 13 63	31 10 59	30 11 59	36 11 53	34 11 55	1307	1307
Rural	79 10 11	62 10 29	53 10 37	53 9 38	45 8 47	43 7 50	52 8 39	53 9 38	2309	2309
JAMAICA	51 11 38	42 11 47	28 10 62	30 8 63	27 12 61	29 9 63	34 10 56	33 10 57	2766	2766
Kingston & Sub.	40 13 47	32 11 57	16 8 75	19 10 71	15 13 71	17 9 74	24 11 65	22 10 68	907	907
Other urban	53 11 37	42 9 49	31 6 63	18 5 77	(29 8 63)	25 7 68	33 8 60	31 8 61	413	413
Urban total	44 12 44	35 10 55	21 8 72	19 9 72	19 12 69	20 8 72	27 10 64	25 9 66	1320	1320
Rural	62 9 30	49 11 39	37 12 50	42 7 51	35 12 53	33 9 58	41 10 49	41 10 50	1446	1446
MEXICO	81 6 14	58 9 33	44 11 45	48 9 43	50 11 39	56 11 34	55 10 35	56 10 35	6255	6255
Mexico City	65 8 27	42 11 47	26 12 63	33 7 60	27 14 58	32 14 54	35 11 54	36 11 53	1360	1360
Other urban	76 6 18	51 10 39	32 11 57	31 11 57	37 13 51	42 12 46	43 11 46	44 11 46	2290	2290
Urban total	72 7 21	48 10 42	29 11 59	32 9 59	33 13 54	39 12 49	40 11 49	41 11 48	3650	3650
Rural	94 4 2	79 6 15	74 11 16	73 7 19	73 8 18	74 9 18	76 8 16	77 8 15	2605	2605
PANAMA	57 9 34	32 8 60	21 10 68	21 9 70	20 11 70	29 12 59	27 10 63	29 10 60	3203	3203
Metro/Urban	50 11 38	25 7 68	16 7 77	11 5 84	10 7 82	15 7 77	19 7 74	20 7 72	1459	1459
Other urban	(43 13 43)	37 4 59	13 9 78	17 7 76	15 6 79	22 11 67	23 8 69	23 9 68	401	401
Urban total	49 12 39	28 6 66	15 8 77	13 5 82	12 7 81	17 8 75	20 7 73	21 8 71	1860	1860
Rural	77 4 20	44 15 42	33 15 52	34 15 51	30 15 55	38 15 47	38 14 48	41 14 45	1343	1343
PERU	78 14 9	55 28 17	43 27 30	43 26 30	48 26 25	55 25 20	51 26 23	54 25 22	5640	5640
Urbanised Lina	66 15 19	29 38 33	22 27 52	21 28 51	21 28 52	20 30 49	24 29 46	28 29 44	1472	1321
Other urban	68 20 12	52 32 16	37 32 31	37 29 34	36 34 30	45 33 22	43 32 25	45 31 24	2160	2286
Urban total	67 18 14	42 35 23	30 30 40	29 29 42	30 31 39	37 32 31	36 31 33	38 30 32	3631	3607
Rural	94 6 0	84 13 3	79 19 2	71 22 7	79 17 4	80 15 5	80 16 4	81 15 4	2009	2033

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by number of living children.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that the percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Percentages standardised for number of living children display a caret warning indicator ^ whenever one or more percent-ages between 5 and 9+ living children were based on a denominator of zero. The adjustment procedure used in such a case is described in the section on standardisation.



TABLE 16 CONTINUED

COUNTRY	Current Age and Type of Method Currently Used							T O T A L		TOTAL N (W) (U)	
	15-19	20-24	25-29	30-34	35-39	40-44	45-49	OBSERVED	STANDARDISED		
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.		
<b>LATIN AMERICA AND CARIBBEAN</b>											
COLOMBIA	78 5 17	63 11 26	59 10 32	50 13 37	59 9 32	67 14 19	83 8 9	63 10 26	62 11 28	3299	3299
Bogota	(50 12 38)	44 14 42	45 11 44	39 16 45	51 16 33	45 16 39	(82 13 5)	49 14 37	48 14 38	416	416
Other Urban	75 3 22	59 11 30	53 8 39	43 14 43	52 8 41	64 16 20	79 11 11	58 10 32	57 11 33	1707	1707
Urban total	69 5 26	56 12 33	52 8 40	43 14 43	51 9 39	59 16 25	79 11 10	56 11 33	55 11 34	2123	2123
Rural	88 5 6	78 8 14	71 12 17	64 11 25	74 8 18	80 11 9	90 2 8	76 9 15	75 9 16	1176	1176
COSTA RICA	NA NA NA	41 8 50	38 10 52	37 9 54	35 11 53	43 13 44	64 7 29	42 10 48	41 10 49	3037	3037
San Jose'	NA NA NA	44 4 52	34 8 58	35 12 53	31 11 58	35 17 48	58 8 33	39 10 51	38 10 52	955	955
Other Urban	NA NA NA	40 10 50	43 7 50	36 7 57	38 14 48	44 13 43	59 6 35	42 9 48	42 9 49	620	620
Urban total	NA NA NA	42 7 51	38 8 55	35 10 55	34 12 54	38 15 46	58 8 34	40 10 50	40 10 51	1575	1575
Rural	NA NA NA	40 10 49	38 12 49	39 7 53	37 10 53	48 10 43	70 7 23	44 10 47	43 10 47	1462	1462
DOMINICAN REP	90 4 6	78 4 18	65 5 29	65 5 30	64 5 31	75 6 19	83 2 15	73 5 22	71 5 24	2257	2257
Santo Domingo	86 8 6	74 6 20	55 7 38	59 5 36	53 7 40	63 4 33	(69 0 31)	64 6 30	63 6 32	572	572
Other Urban	86 5 8	74 2 25	65 3 33	58 5 38	59 5 36	76 6 18	81 2 17	70 4 27	68 4 28	572	572
Urban total	86 6 7	74 4 22	60 5 35	58 5 37	56 6 38	70 5 25	76 1 23	67 5 28	65 5 30	1144	1144
Rural	93 2 5	83 4 14	72 6 22	74 4 22	71 5 24	80 7 13	89 3 8	79 4 16	78 5 18	1113	1113
GUYANA	84 7 9	77 7 16	69 6 25	60 8 32	63 9 28	68 5 27	78 4 18	71 6 23	69 7 24	3616	3616
Georgetown & Sub.	73 12 15	69 11 20	64 10 26	54 12 34	62 12 26	67 9 24	77 5 18	66 10 23	65 10 25	1030	1030
Other Urban	(75 14 11)	84 6 10	(60 5 35)	(82 3 15)	(71 9 20)	(83 0 17)	(79 6 15)	77 6 17	76 5 19	277	277
Urban total	74 13 14	73 10 17	63 9 27	61 10 30	64 12 25	71 7 22	78 5 17	69 9 22	67 9 23	1307	1307
Rural	91 3 6	80 6 15	73 4 24	60 7 33	63 7 30	67 4 29	78 3 19	72 5 23	71 5 24	2309	2309
JAMAICA	75 1 24	67 2 32	62 2 36	55 3 42	58 3 39	68 1 31	75 2 24	65 2 33	64 2 34	2766	2766
Kingston & Sub.	67 2 31	57 2 41	54 1 45	47 5 48	50 3 46	60 4 37	69 1 30	57 2 41	55 3 42	907	907
Other Urban	71 0 29	62 1 37	68 3 29	60 0 40	(57 7 36)	(70 0 30)	(84 0 16)	67 2 32	66 2 33	413	413
Urban total	68 1 31	59 2 40	59 1 39	51 3 46	52 4 43	63 2 34	73 1 26	60 2 38	59 2 39	1320	1320
Rural	81 0 19	74 2 24	67 2 31	60 3 38	63 1 36	71 1 28	76 2 22	70 2 28	68 2 30	1446	1446
MEXICO	87 3 10	75 5 20	64 7 29	65 7 28	66 9 24	78 7 15	90 3 7	73 6 21	72 7 22	6255	6255
Mexico City	82 4 14	61 7 32	50 7 43	49 10 41	43 16 40	66 11 23	88 3 9	58 9 33	58 9 34	1360	1360
Other Urban	82 1 17	66 6 29	53 10 37	58 8 34	59 10 32	73 7 20	89 3 8	65 7 28	64 7 28	2290	2290
Urban total	82 2 16	64 6 30	52 9 40	55 9 37	53 12 35	70 9 21	89 3 8	63 8 30	62 8 30	3650	3650
Rural	91 3 6	92 3 5	83 6 12	81 6 13	83 6 11	90 3 6	93 3 5	87 4 9	86 5 9	2605	2605
PANAMA	NA NA NA	62 8 30	48 7 45	49 6 45	47 7 46	48 7 45	57 6 37	52 7 42	52 7 41	3203	3203
Metro/Urban	NA NA NA	58 6 36	45 5 51	45 6 50	42 5 53	46 5 49	52 4 44	48 5 47	48 5 47	1459	1459
Other Urban	NA NA NA	58 4 38	45 7 48	47 8 45	33 12 55	(36 6 57)	45 6 49	45 7 48	45 7 48	401	401
Urban total	NA NA NA	58 6 37	45 5 50	45 6 48	40 6 54	44 6 51	50 4 45	47 6 47	47 6 47	1860	1860
Rural	NA NA NA	69 10 21	53 9 38	54 7 39	55 8 37	55 8 37	67 9 24	58 8 33	58 8 33	1343	1343
PERU	85 10 5	73 19 8	66 22 12	62 22 16	68 19 13	74 19 7	86 10 4	72 18 10	71 19 11	5640	5640
Urbanised Lima	(62 23 15)	64 20 16	53 26 21	41 32 28	47 29 24	61 23 16	69 21 9	55 26 20	55 26 20	1472	1321
Other Urban	84 10 6	68 24 9	58 28 13	58 25 17	63 21 16	64 27 8	88 8 4	66 22 12	65 23 12	2160	2286
Urban total	78 14 8	66 22 12	56 27 17	51 28 22	56 25 19	63 25 12	80 13 6	62 24 15	61 24 15	3631	3607
Rural	96 3 0	88 11 1	86 12 2	89 8 3	88 9 3	91 8 1	94 5 1	90 8 2	89 9 2	2009	2033

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by age.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Costa Rica and Panama age range is 20-49. Women aged 15-19 not interviewed.



TABLE 17 CONTINUED

COUNTRY	Number of Living Children and Type of Method Currently Used						T O T A L		TOTAL N (W) (U)	
	0	1	2	3	4	5+	OBSERVED	STANDARDISED		
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.		
<b>LATIN AMERICA AND CARIBBEAN</b>										
COLOMBIA	88 3 9	68 9 23	57 13 30	58 9 33	55 12 33	63 11 26	63 10 26	64 10 26	3299	3299
Bogota	(80 5 15)	41 18 41	43 19 39	44 15 41	45 12 43	54 10 35	49 14 37	51 13 36	416	416
Other urban	87 2 11	65 8 26	50 13 36	49 9 42	46 12 42	57 13 30	58 10 32	58 10 31	1707	1707
Urban total	86 2 12	61 10 29	48 15 37	48 10 42	46 12 42	57 12 31	56 11 33	57 11 32	2123	2123
Rural	94 5 1	85 6 10	78 9 13	79 6 15	72 13 15	70 10 20	76 9 15	78 8 14	1176	1176
COSTA RICA	81 3 16	45 10 46	34 11 55	36 10 54	37 10 53	42 9 49	42 10 48	44 9 47	3037	3037
San Jose'	76 4 20	43 8 49	35 11 55	31 10 59	32 10 57	34 13 54	39 10 51	40 10 50	955	955
Other urban	(90 0 10)	48 7 45	29 13 57	31 12 57	37 13 50	44 7 49	42 9 48	45 8 47	620	620
Urban total	81 2 16	45 7 47	33 12 56	31 11 58	34 11 54	38 10 51	40 10 50	42 9 48	1575	1575
Rural	81 4 14	44 13 43	36 11 53	42 10 49	41 9 50	44 9 48	44 10 47	46 10 44	1462	1462
DOMINICAN REP	92 2 6	85 3 12	71 4 25	63 7 30	64 6 29	68 5 27	73 5 22	72 5 23	2257	2257
Santo Domingo	85 5 10	79 5 15	59 7 34	49 7 44	54 4 42	60 6 35	64 6 30	63 6 31	572	572
Other urban	97 1 2	85 2 13	69 1 30	57 7 36	57 7 35	58 4 38	70 4 27	68 4 28	572	572
Urban total	91 3 6	82 4 14	64 4 32	53 7 40	56 6 39	59 5 37	67 5 28	66 5 30	1144	1144
Rural	93 1 6	88 2 10	81 4 14	77 7 16	74 7 19	74 5 21	79 4 16	79 5 16	1113	1113
GUYANA	85 7 8	82 4 14	72 7 21	68 9 23	68 8 24	61 6 33	71 6 23	71 7 23	3616	3616
Georgetown&Sub.	76 12 13	76 5 20	60 14 27	57 12 31	66 14 20	60 9 31	66 10 23	64 10 25	1030	1030
Other urban	(80 10 10)	(84 5 11)	(78 3 19)	(77 5 18)	(79 3 17)	70 7 23	77 6 17	77 5 17	277	277
Urban total	77 11 12	77 5 18	63 12 25	61 10 28	69 12 19	63 8 29	69 9 22	67 9 24	1307	1307
Rural	94 2 4	86 4 10	78 3 19	73 7 20	68 6 26	61 5 34	72 5 23	74 5 22	2309	2309
JAMAICA	77 2 21	74 1 25	62 1 37	65 2 33	60 3 36	58 2 40	65 2 33	64 2 34	2766	2766
Kingston & Sub.	69 3 28	66 0 34	49 1 49	52 4 44	54 4 42	48 4 48	57 2 41	54 3 43	907	907
Other urban	75 2 23	78 1 21	63 1 36	64 2 34	(66 0 34)	58 3 40	67 2 32	66 2 33	413	413
Urban total	71 2 27	70 0 30	53 1 46	56 3 41	57 3 40	52 4 45	60 2 38	58 2 40	1320	1320
Rural	85 1 14	78 1 20	73 1 26	75 1 24	64 4 32	61 2 38	70 2 28	70 2 28	1446	1446
MEXICO	94 1 4	78 6 17	65 7 28	66 7 27	67 8 25	73 7 20	73 6 21	73 6 20	6255	6255
Mexico City	90 1 9	65 9 26	55 7 39	51 11 37	48 12 40	55 10 36	58 9 33	59 9 32	1360	1360
Other urban	92 1 7	76 4 20	54 8 38	54 9 37	58 7 34	65 9 26	65 7 28	66 7 27	2290	2290
Urban total	91 1 7	72 6 22	54 7 38	53 10 37	55 9 36	62 9 29	63 8 30	63 8 29	3650	3650
Rural	99 1 0	89 5 6	87 5 8	85 3 12	84 6 11	86 5 9	87 4 9	88 4 8	2605	2605
PANAMA	84 4 12	63 5 32	51 8 42	45 6 49	43 7 50	48 8 44	52 7 42	54 7 39	3203	3203
Metro/Urban	83 6 11	60 4 36	50 7 44	40 5 55	34 5 61	36 5 59	48 5 47	48 5 47	1459	1459
Other urban	(83 4 13)	64 5 30	42 8 50	36 7 57	31 8 62	38 9 53	45 7 48	46 7 47	401	401
Urban total	83 5 12	61 4 34	49 7 45	39 5 56	33 5 62	36 6 57	47 6 47	48 6 47	1860	1860
Rural	86 2 13	71 6 23	54 10 36	56 8 37	54 9 37	57 9 34	58 8 33	61 8 31	1343	1343
PERU	94 4 3	78 16 6	65 23 13	66 20 14	68 21 11	73 17 10	72 18 10	73 17 10	5640	5640
Urbanised Lima	90 6 4	63 22 15	48 29 23	56 24 20	52 29 20	49 28 23	55 26 20	57 24 19	1472	1321
Other urban	92 4 4	76 19 5	60 27 13	58 24 18	60 25 15	67 22 11	66 22 12	68 21 11	2160	2286
Urban total	91 5 4	71 21 9	55 28 17	57 24 19	57 27 17	61 24 15	62 24 15	64 22 14	3631	3607
Rural	98 2 0	94 6 1	91 8 1	83 12 5	88 11 1	90 8 2	90 8 2	91 8 2	2009	2033

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by number of living children.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that the percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Percentages standardised for number of living children display a caret warning indicator ^ whenever one or more percent-ages between 5 and 9+ living children were based on a denominator of zero. The adjustment procedure used in such a case is described in the section on standardisation.



TABLE 18 CONTINUED

COUNTRY	Current Age and Type of Method Ever Used								T O T A L		TOTAL N (W) (U)	
	15-19	20-24	25-29	30-34	35-39	40-44	45-49	OBSERVED	STANDARDISED			
LATIN AMERICA AND CARIBBEAN	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.			
COLOMBIA	55 9 35	36 14 50	33 10 57	25 11 63	36 10 55	43 16 41	57 17 25	38 12 50	37 12 51	2826	2826	
Bogota	(33 13 54)	15 15 70	15 11 74	6 10 85	27 10 63	13 16 71	(40 28 32)	18 13 68	18 13 69	364	364	
Other Urban	49 6 44	28 12 61	22 7 71	19 11 70	24 9 67	35 18 47	51 20 29	29 11 60	28 11 60	1423	1423	
Urban total	46 8 47	25 12 63	21 8 72	17 11 72	25 9 66	29 18 53	49 21 30	27 12 61	26 12 62	1787	1787	
Rural	68 11 21	57 16 26	53 15 32	42 12 46	56 10 34	65 13 22	71 11 18	57 13 30	56 13 31	1039	1039	
COSTA RICA	NA NA NA	14 6 80	10 7 83	12 8 80	16 9 75	18 12 70	37 14 49	16 9 75	16 9 76	2684	2684	
San Jose'	NA NA NA	11 6 83	6 5 89	6 8 85	8 8 83	11 12 78	31 13 57	11 8 81	10 8 82	825	825	
Other Urban	NA NA NA	13 3 85	14 7 79	13 3 84	14 12 74	17 14 69	23 15 62	15 8 77	15 8 77	525	525	
Urban total	NA NA NA	12 5 84	9 6 85	9 6 85	11 10 79	13 12 75	28 13 59	13 8 79	12 8 80	1350	1350	
Rural	NA NA NA	16 8 76	11 9 80	16 10 74	20 8 72	22 12 66	48 14 38	20 10 70	19 10 71	1334	1334	
DOMINICAN REP	69 12 18	51 14 36	39 9 52	41 11 48	46 9 44	55 10 34	70 9 22	50 11 39	49 11 41	1808	1808	
Santo Domingo	(53 20 27)	35 13 52	26 9 65	26 11 64	32 10 57	(30 6 64)	(54 11 36)	34 11 55	33 11 57	426	426	
Other Urban	(65 10 25)	44 12 44	25 8 67	36 10 54	35 6 59	(51 9 40)	(52 7 41)	40 9 51	40 9 52	426	426	
Urban total	59 15 26	40 12 48	26 8 66	31 10 59	34 8 58	41 7 51	53 9 39	37 10 53	36 10 54	852	852	
Rural	79 10 11	61 15 24	52 10 38	52 12 35	57 10 33	65 12 23	79 9 13	62 12 27	60 12 29	956	956	
GUYANA	62 12 27	48 10 42	38 9 53	32 7 61	41 8 51	50 8 42	54 12 34	45 9 46	43 9 48	3216	3216	
Georgetown&Sub.	49 11 40	32 12 56	22 10 68	21 10 69	32 8 59	41 11 48	46 13 41	33 11 57	31 10 59	905	905	
Other Urban	(52 20 28)	39 14 46	(21 14 64)	(22 14 64)	(38 3 59)	(43 11 46)	(50 7 43)	36 12 51	34 12 54	247	247	
Urban total	49 13 38	34 12 54	22 11 68	22 11 68	33 7 59	41 11 48	47 11 42	34 11 55	32 11 58	1152	1152	
Rural	70 11 19	57 8 36	47 9 45	37 5 58	45 8 47	55 6 39	59 12 30	51 8 41	49 8 43	2064	2064	
JAMAICA	38 9 53	28 11 61	22 8 70	22 9 69	33 9 58	46 8 47	52 13 35	33 9 58	31 9 60	2283	2283	
Kingston & Sub.	30 8 62	22 10 68	14 7 80	13 9 79	26 8 67	25 11 64	35 19 46	21 9 69	21 9 70	752	752	
Other Urban	(36 11 53)	23 9 68	24 6 70	(25 6 69)	(33 6 61)	(47 15 38)	(74 4 22)	33 8 59	33 8 59	350	350	
Urban total	33 9 59	22 10 68	17 6 76	16 8 76	28 7 65	33 12 55	46 15 39	25 9 66	25 9 66	1102	1102	
Rural	44 8 48	35 13 52	28 11 61	29 10 61	37 10 53	53 5 42	56 11 33	40 10 50	37 10 53	1181	1181	
MEXICO	74 7 19	55 9 36	43 11 46	44 10 46	49 11 39	60 10 30	71 10 19	53 10 37	52 10 38	5640	5640	
Mexico City	49 19 32	34 9 57	22 10 68	23 10 67	22 14 64	37 17 46	64 11 25	31 12 57	31 12 57	1189	1189	
Other Urban	65 8 27	40 11 50	29 12 59	33 11 56	34 12 54	48 11 41	63 12 25	40 11 49	39 11 49	2036	2036	
Urban total	60 12 29	38 10 52	26 11 63	29 11 60	29 13 58	44 13 43	63 12 25	37 11 52	36 11 52	3225	3225	
Rural	86 4 10	79 8 12	69 10 21	67 9 24	74 9 17	80 6 13	80 8 11	75 8 16	74 9 17	2415	2415	
PANAMA	NA NA NA	28 12 60	20 9 72	23 8 68	24 11 65	29 10 61	35 15 50	25 10 64	25 10 64	2723	2723	
Metro/Urban	NA NA NA	20 7 74	13 6 81	13 6 81	14 7 79	20 8 72	24 14 61	16 7 76	16 7 76	1186	1186	
Other Urban	NA NA NA	23 8 69	17 4 79	24 8 68	(16 8 76)	(23 8 70)	(23 8 70)	21 7 72	20 7 72	335	335	
Urban total	NA NA NA	20 7 73	14 5 81	15 7 78	14 7 78	20 8 72	24 13 64	17 7 76	17 7 76	1521	1521	
Rural	NA NA NA	40 18 43	28 14 58	33 11 56	34 15 51	39 14 47	49 18 33	36 14 50	36 14 50	1202	1202	
PERU	65 23 11	51 29 20	42 29 29	40 27 34	49 24 27	55 27 19	66 20 14	50 26 24	49 26 25	5061	5061	
Urbanised Lima	(24 44 31)	34 30 36	20 29 51	11 27 62	19 27 54	27 33 40	34 29 37	23 30 47	23 30 47	1335	1198	
Other Urban	59 28 13	43 36 22	31 36 33	34 32 34	40 29 31	42 36 22	60 26 14	41 33 26	40 33 27	1891	2000	
Urban total	49 33 18	39 33 28	26 33 40	24 30 46	31 28 41	36 35 30	49 27 23	34 31 35	33 31 35	3226	3198	
Rural	90 9 1	75 21 4	75 20 5	75 19 6	77 16 6	83 15 2	87 11 2	79 16 4	78 17 4	1835	1863	

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by age.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Costa Rica and Panama age range is 20-49. Women aged 15-19 not interviewed.





TABLE 19 CONTINUED

COUNTRY	Number of Living Children and Type of Method Ever Used						T O T A L		TOTAL N	
	0	1	2	3	4	5+	OBSERVED	STANDARDISED		
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	(W)	(U)
LATIN AMERICA AND CARIBBEAN										
COLOMBIA	65 10 24	41 11 48	28 14 59	33 11 56	30 14 56	39 13 49	38 12 50	39 12 49	2826	2826
Bogota	(53 18 29)	15 15 70	11 13 76	16 15 69	( 7 9 84)	21 12 67	18 13 68	21 14 66	364	364
Other urban	62 6 32	33 8 58	18 13 69	22 11 68	18 15 67	29 13 58	29 11 60	30 11 59	1423	1423
Urban total	60 8 31	30 10 61	16 13 71	21 11 68	15 14 71	28 13 59	27 12 61	28 12 60	1787	1787
Rural	77 16 7	65 14 21	55 15 30	60 10 30	58 13 29	51 12 36	57 13 30	59 13 28	1039	1039
COSTA RICA	55 5 39	12 7 81	9 8 83	10 10 80	12 9 79	19 10 71	16 9 75	18 9 73	2684	2684
San Jose'	50 6 44	8 7 85	5 7 88	4 7 89	5 12 83	13 10 76	11 8 81	14 8 78	825	825
Other urban	(61 0 39)	14 4 82	9 9 82	7 11 82	7 9 84	14 10 75	15 8 77	17 8 76	525	525
Urban total	54 3 42	10 6 84	7 8 86	5 9 86	6 11 83	14 10 76	13 8 79	15 8 77	1350	1350
Rural	58 9 33	15 9 76	12 9 79	16 11 73	19 7 74	22 10 68	20 10 70	21 10 69	1334	1334
DOMINICAN REP	77 9 15	62 10 28	39 14 47	37 13 50	39 10 51	49 10 41	50 11 39	49 11 40	1808	1808
Santo Domingo	70 10 20	43 10 46	25 13 61	14 12 74	(19 10 71)	32 11 57	34 11 55	33 11 56	426	426
Other urban	72 8 20	68 8 25	28 12 60	19 14 67	(31 8 61)	30 6 64	40 9 51	39 9 53	426	426
Urban total	71 9 20	55 9 36	26 13 61	17 13 70	25 9 66	31 8 61	37 10 53	36 10 54	852	852
Rural	84 8 8	69 11 20	57 15 28	60 13 27	52 11 37	58 11 30	62 12 27	61 12 27	956	956
GUYANA	61 10 29	55 11 34	41 9 50	40 11 49	40 8 52	39 7 53	45 9 46	44 9 47	3216	3216
Georgetown&Sub.	41 10 49	44 13 43	26 8 66	18 13 69	31 9 60	30 10 60	33 11 57	31 10 58	905	905
Other urban	(59 14 27)	(47 19 33)	(38 3 59)	(29 16 55)	(33 11 56)	25 10 65	36 12 51	35 12 53	247	247
Urban total	44 11 45	45 14 41	28 7 65	21 14 65	32 9 59	29 10 61	34 11 55	32 11 57	1152	1152
Rural	79 9 12	62 9 29	51 10 39	52 9 39	43 8 49	43 7 51	51 8 41	52 8 40	2064	2064
JAMAICA	50 11 39	41 10 49	25 9 66	29 8 63	26 13 61	28 8 64	33 9 58	31 9 59	2283	2283
Kingston & Sub.	38 12 50	28 11 61	14 6 80	17 10 72	14 14 73	14 6 79	21 9 69	19 9 72	752	752
Other urban	(47 10 43)	44 10 46	30 7 63	20 6 75	(29 9 63)	26 7 67	33 8 59	31 8 61	350	350
Urban total	40 12 48	33 11 56	19 6 75	18 9 73	19 12 69	19 7 75	25 9 66	23 9 68	1102	1102
Rural	63 10 27	49 10 41	33 12 55	42 8 50	34 14 52	32 9 59	40 10 50	39 10 51	1181	1181
MEXICO	80 6 14	56 9 35	43 11 46	47 9 44	49 12 39	54 11 35	53 10 37	54 10 36	5640	5640
Mexico City	63 8 29	35 12 53	23 11 66	29 7 64	23 16 60	29 14 57	31 12 57	33 12 56	1189	1189
Other urban	75 7 18	48 10 43	29 11 60	29 12 59	35 13 52	40 12 49	40 11 49	41 11 48	2036	2036
Urban total	71 7 22	43 10 47	27 11 62	29 10 61	31 14 55	36 13 51	37 11 52	38 11 51	3225	3225
Rural	94 4 3	79 6 14	73 11 16	74 7 19	72 9 19	73 9 18	75 8 16	76 8 15	2415	2415
PANAMA	53 11 36	26 7 66	21 9 70	20 9 71	20 10 70	27 13 60	25 10 64	27 10 62	2723	2723
Metro/Urban	47 13 40	18 6 75	14 6 79	10 5 85	10 7 84	13 9 79	16 7 76	17 8 75	1186	1186
Other urban	(40 15 45)	29 2 70	12 8 80	17 5 78	(14 6 80)	22 10 69	21 7 72	22 8 71	335	335
Urban total	46 13 41	21 5 74	14 6 80	12 5 83	11 7 83	15 9 76	17 7 76	19 8 74	1521	1521
Rural	(71 4 24)	42 13 44	32 14 54	32 15 53	30 14 56	36 15 49	36 14 50	39 13 48	1202	1202
PERU	78 13 9	51 30 19	42 28 30	42 26 31	46 27 27	55 25 20	50 26 24	52 25 22	5061	5061
Urbanised Lima	67 15 18	24 41 34	21 27 53	19 28 53	18 29 54	21 30 50	23 30 47	26 29 45	1335	1198
Other urban	67 21 12	46 36 18	35 34 31	35 29 36	34 34 32	44 33 23	41 33 26	43 32 25	1891	2000
Urban total	67 19 15	36 38 26	29 31 41	27 29 44	27 32 41	36 32 32	34 31 35	36 31 33	3226	3198
Rural	95 5 0	85 12 4	78 20 2	71 22 7	77 19 4	80 15 5	79 16 4	81 16 4	1835	1863

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by number of living children.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that the percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Percentages standardised for number of living children display a caret warning indicator ^ whenever one or more percent -ages between 5 and 9+ living children were based on a denominator of zero. The adjustment procedure used in such a case is described in the section on standardisation.



TABLE 20 CONTINUED

COUNTRY	Current Age and Type of Method Currently Used								T O T A L		TOTAL N (W) (U)		
	15-19	20-24	25-29	30-34	35-39	40-44	45-49	OBSERVED	STANDARDISED				
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.				
LATIN AMERICA AND CARIBBEAN													
COLOMBIA	73 6 20	59 12 29	54 11 35	44 15 42	53 11 37	60 17 23	78 11 11	57 12 30	57 12 31	2826	2826		
Bogota	(46 13 42)	41 15 45	41 12 47	35 17 48	45 18 37	35 20 45	(72 20 8)	42 16 42	42 16 41	364	364		
Other Urban	69 4 27	53 13 34	47 9 44	35 16 49	43 10 47	54 20 26	73 14 13	50 13 38	49 13 38	1423	1423		
Urban total	63 6 31	50 13 36	46 9 45	35 16 49	43 11 45	49 20 31	73 15 12	48 13 38	48 13 39	1787	1787		
Rural	86 6 8	76 9 15	68 13 19	60 12 28	70 9 20	77 13 10	88 3 10	73 10 17	72 10 18	1039	1039		
COSTA RICA	NA NA NA	37 9 54	32 11 57	31 10 59	29 13 58	36 14 49	57 9 34	36 11 54	35 11 54	2684	2684		
San Jose'	NA NA NA	37 5 58	27 9 64	27 13 59	22 13 65	27 19 54	50 11 39	31 11 58	30 11 59	825	825		
Other Urban	NA NA NA	36 11 54	37 8 55	29 8 63	33 16 51	29 17 53	50 8 42	35 11 54	35 11 54	525	525		
Urban total	NA NA NA	36 7 56	31 8 61	28 11 61	26 14 59	28 19 54	50 10 40	32 11 56	32 11 57	1350	1350		
Rural	NA NA NA	37 11 52	33 14 54	35 8 57	32 11 56	44 11 46	64 8 27	39 11 51	38 11 51	1334	1334		
DOMINICAN REP	87 5 8	73 5 22	59 7 34	59 6 35	60 6 34	72 8 20	82 3 15	68 6 26	67 6 27	1808	1808		
Santo Domingo	(83 10 8)	64 9 28	45 9 46	49 7 45	47 9 44	(52 6 42)	(71 0 29)	56 8 36	54 7 38	426	426		
Other Urban	(80 8 13)	69 2 29	56 3 41	51 6 43	51 6 43	(66 11 23)	(76 3 21)	62 5 33	61 5 34	426	426		
Urban total	81 9 10	66 5 28	51 6 43	50 6 44	49 7 43	59 9 32	74 2 25	59 6 35	58 6 36	852	852		
Rural	92 2 6	79 4 16	69 7 24	70 5 25	69 6 26	80 8 12	87 4 10	77 5 18	75 5 19	956	956		
GUYANA	83 8 10	75 8 17	66 6 28	57 8 35	60 10 30	66 6 28	74 5 21	68 7 25	66 7 26	3216	3216		
Georgetown&Sub.	71 13 16	66 12 22	60 11 29	51 13 36	55 15 30	65 10 25	72 6 22	62 12 26	61 12 27	905	905		
Other Urban	(72 16 12)	82 7 11	(60 5 36)	(81 3 17)	(69 9 22)	(82 0 18)	(75 7 18)	74 6 19	74 6 20	247	247		
Urban total	71 14 15	70 11 19	60 10 30	58 11 32	58 14 28	69 8 23	73 6 21	65 11 24	64 11 26	1152	1152		
Rural	90 4 6	78 6 16	70 4 26	57 7 36	61 8 32	65 4 31	75 4 22	70 5 25	68 6 26	2064	2064		
JAMAICA	69 1 30	61 2 37	56 2 42	48 4 48	55 3 42	66 2 32	69 2 29	60 2 38	58 2 39	2283	2283		
Kingston & Sub.	61 3 37	51 2 46	49 1 50	39 6 56	41 4 55	55 5 41	62 1 37	50 3 47	49 3 48	752	752		
Other Urban	(68 0 32)	59 1 40	61 4 35	(56 0 44)	(53 8 39)	(71 0 29)	(78 0 22)	62 2 36	61 2 36	350	350		
Urban total	63 2 35	54 2 44	53 2 45	43 4 53	44 5 50	60 3 37	66 1 33	54 3 44	53 3 45	1102	1102		
Rural	75 0 25	68 2 30	60 2 37	54 3 43	62 2 37	69 1 30	71 3 26	65 2 33	63 2 34	1181	1181		
MEXICO	86 3 11	73 5 22	61 8 31	62 8 30	62 11 27	75 8 17	88 3 8	70 7 23	69 7 24	5640	5640		
Mexico City	79 4 16	57 8 35	45 8 47	43 11 46	35 19 47	58 14 29	84 4 12	52 10 38	52 10 38	1189	1189		
Other Urban	80 2 18	62 6 31	50 10 40	54 9 38	52 11 37	68 9 23	86 4 10	61 8 31	60 8 32	2036	2036		
Urban total	80 3 18	60 7 33	48 9 43	50 9 41	46 14 40	64 11 25	86 4 11	58 9 34	57 9 34	3225	3225		
Rural	91 3 6	91 3 6	82 6 12	80 6 14	82 7 12	89 4 7	92 3 5	86 5 9	85 5 10	2415	2415		
PANAMA	NA NA NA	57 9 35	41 8 51	43 8 49	42 8 50	44 8 48	52 8 40	46 8 46	46 8 46	2723	2723		
Metro/Urban	NA NA NA	50 7 43	37 6 57	36 7 56	32 6 62	41 7 53	44 5 50	40 6 54	40 6 54	1186	1186		
Other Urban	NA NA NA	52 5 44	35 8 57	40 10 50	(29 14 57)	(35 8 58)	(38 8 55)	39 9 53	38 9 53	335	335		
Urban total	NA NA NA	51 7 43	36 6 57	37 8 55	31 8 61	39 7 54	42 6 52	40 7 54	39 7 54	1521	1521		
Rural	NA NA NA	65 12 23	48 10 42	51 7 42	52 9 39	51 9 40	63 11 26	54 9 36	54 9 36	1202	1202		
PERU	83 11 6	71 20 9	63 24 13	59 23 18	65 21 14	71 21 8	84 12 4	69 20 11	68 21 12	5061	5061		
Urbanised Lima	(60 24 16)	61 22 17	50 28 22	36 34 30	42 32 26	56 27 17	65 25 10	51 28 21	50 28 21	1335	1198		
Other Urban	81 12 7	64 26 10	54 31 15	53 27 19	58 24 18	59 31 10	85 10 5	62 25 13	61 26 13	1891	2000		
Urban total	75 16 9	63 24 13	52 30 18	46 30 24	51 28 21	58 29 13	76 16 7	57 26 16	57 27 17	3226	3198		
Rural	96 4 0	87 12 1	85 13 2	88 8 4	87 10 3	90 9 1	94 5 1	89 9 2	88 10 2	1835	1863		

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by age.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Costa Rica and Panama age range is 20-49. Women aged 15-19 not interviewed.



TABLE 21 CONTINUED

COUNTRY	Number of Living Children and Type of Method Currently Used						T O T A L		TOTAL N (W) (U)	
	0	1	2	3	4	5+	OBSERVED	STANDARDISED		
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.		
LATIN AMERICA AND CARIBBEAN										
COLOMBIA	87 4 10	61 11 28	50 15 35	51 10 38	49 14 37	58 13 29	57 12 30	58 12 30	2826	2826
Bogota	(79 5 16)	26 23 51	38 20 42	36 18 46	(38 13 49)	48 12 40	42 16 42	44 15 41	364	364
Other urban	86 2 12	56 11 33	40 16 44	40 11 49	38 14 48	50 15 35	50 13 38	51 12 37	1423	1423
Urban total	84 3 13	50 13 36	39 17 43	39 12 49	38 14 48	50 15 36	48 13 38	49 13 38	1787	1787
Rural	93 6 1	82 7 11	74 11 15	76 7 17	69 14 17	67 11 21	73 10 17	75 10 16	1039	1039
COSTA RICA	80 3 17	37 11 52	27 13 60	28 12 60	32 11 57	35 11 54	36 11 54	38 10 52	2684	2684
San Jose'	73 4 23	32 9 58	26 12 62	22 12 66	24 12 64	28 14 57	31 11 58	33 11 56	825	825
Other urban	(89 0 11)	40 8 52	22 15 63	21 14 64	31 15 55	35 10 56	35 11 54	37 10 53	525	525
Urban total	79 3 18	35 9 56	25 13 62	22 13 66	27 13 60	31 12 57	32 11 56	35 11 54	1350	1350
Rural	80 5 15	39 14 46	31 12 57	36 11 53	37 10 54	38 10 52	39 11 51	41 10 49	1334	1334
DOMINICAN REP	91 3 6	79 4 17	65 5 29	57 9 35	59 8 33	64 6 30	68 6 26	68 6 27	1808	1808
Santo Domingo	84 7 10	67 9 24	54 8 37	38 9 54	(46 6 48)	50 7 43	56 8 36	55 7 38	426	426
Other urban	95 2 3	80 3 17	60 2 38	44 10 46	(47 10 43)	50 5 45	62 5 33	60 5 35	426	426
Urban total	90 4 6	73 6 20	57 5 38	41 9 50	46 8 45	50 6 44	59 6 35	58 6 36	852	852
Rural	93 1 6	85 2 13	77 5 18	75 8 18	71 8 21	72 6 22	77 5 18	77 5 18	956	956
GUYANA	83 8 9	79 5 16	68 8 24	66 9 25	66 9 25	59 7 34	68 7 25	68 7 25	3216	3216
Georgetown&Sub.	72 13 15	71 5 23	56 15 29	53 13 34	64 16 20	56 10 34	62 12 26	61 12 28	905	905
Other urban	(78 11 11)	(81 6 14)	(75 3 22)	(76 5 18)	(78 4 19)	68 8 25	74 6 19	75 6 19	247	247
Urban total	73 13 14	73 5 22	59 13 28	58 11 30	67 13 20	59 10 31	65 11 24	64 11 26	1152	1152
Rural	93 3 4	83 4 12	75 4 21	71 8 21	65 7 28	59 6 35	70 5 25	71 5 23	2064	2064
JAMAICA	73 2 25	69 1 30	55 2 44	60 3 37	54 4 42	53 3 45	60 2 38	59 2 39	2283	2283
Kingston & Sub.	63 3 34	62 0 38	41 1 58	48 4 48	41 5 53	40 5 55	50 3 47	47 3 49	752	752
Other urban	(71 2 27)	75 1 24	57 2 42	61 2 37	(66 0 34)	51 3 46	62 2 36	61 2 37	350	350
Urban total	65 3 32	66 0 34	45 1 53	52 4 45	49 4 47	44 4 51	54 3 44	52 3 45	1102	1102
Rural	82 2 16	73 2 26	67 2 32	70 2 28	59 5 37	57 2 41	65 2 33	65 2 32	1181	1181
MEXICO	94 1 5	73 7 20	61 7 31	63 8 30	63 8 28	71 8 21	70 7 23	70 7 23	5640	5640
Mexico City	90 1 9	57 11 32	48 8 44	45 13 42	41 13 45	49 11 40	52 10 38	54 10 37	1189	1189
Other urban	91 2 8	71 5 24	48 9 43	50 10 41	53 8 39	62 10 28	61 8 31	62 8 31	2036	2036
Urban total	90 1 8	65 7 27	48 8 43	48 11 41	48 10 41	58 10 32	58 9 34	59 9 33	3225	3225
Rural	99 1 0	88 5 7	85 6 9	84 3 12	83 6 11	85 5 10	86 5 9	87 5 9	2415	2415
PANAMA	82 5 13	54 6 40	41 10 49	40 7 53	40 8 53	45 9 46	46 8 46	49 8 44	2723	2723
Metro/Urban	81 6 12	48 6 46	38 8 53	34 5 61	29 5 65	30 6 64	40 6 54	40 7 53	1186	1186
Other urban	(80 5 15)	52 7 41	34 10 56	28 9 64	(29 8 63)	36 10 54	39 9 53	41 9 51	335	335
Urban total	81 6 13	49 6 45	38 9 54	33 6 61	29 6 65	31 7 61	40 7 54	41 7 52	1521	1521
Rural	(82 2 16)	67 7 27	47 11 42	52 9 40	51 9 39	54 10 36	54 9 36	57 9 34	1202	1202
PERU	93 4 3	73 20 8	61 25 14	62 22 16	65 23 12	71 19 10	69 20 11	71 19 10	5061	5061
Urbanised Lima	89 6 5	59 25 16	43 32 25	51 27 22	47 32 21	46 30 24	51 28 21	53 27 20	1335	1198
Other urban	90 5 5	68 26 6	56 30 14	52 27 20	56 27 16	64 24 12	62 25 13	64 24 12	1891	2000
Urban total	90 5 5	64 25 11	50 31 19	52 27 21	53 29 18	58 26 16	57 26 16	60 25 15	3226	3198
Rural	98 2 0	92 7 1	90 9 1	82 13 5	86 13 1	89 8 2	89 9 2	90 9 2	1835	1863

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by number of living children.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that the percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Percentages standardised for number of living children display a caret warning indicator ^ whenever one or more percent-ages between 5 and 9+ living children were based on a denominator of zero. The adjustment procedure used in such a case is described in the section on standardisation.









TABLE 23 CONTINUED

COUNTRY	Number of Living Children and Type of Method Ever Used						T O T A L		TOTAL N (W) (U)		
	0	1	2	3	4	5+	OBSERVED	STANDARDISED			
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.		
LATIN AMERICA AND CARIBBEAN											
COLOMBIA	64 9 27	40 11 49	27 14 60	32 11 57	28 13 59	37 13 51	36 12 52	37 12 51	2666	2666	
Bogota	(53 17 31)	14 16 71	10 13 77	12 16 72	(7 9 84)	19 12 69	17 14 70	18 14 68	344	344	
Other urban	59 5 36	30 9 61	17 13 70	21 9 69	15 14 71	25 13 61	26 11 63	27 11 62	1328	1328	
Urban total	58 8 35	27 10 63	15 13 72	19 11 70	13 13 74	25 13 62	24 12 64	25 12 63	1672	1672	
Rural	78 14 8	65 14 21	54 15 31	59 10 31	56 14 30	50 12 38	56 13 31	58 13 29	994	994	
COSTA RICA	48 7 45	10 7 83	8 7 85	8 9 83	10 9 81	14 9 77	13 8 79	14 8 78	2446	2446	
San Jose'	42 7 51	6 7 87	4 5 91	2 7 91	2 11 86	5 12 83	7 8 85	9 8 83	746	746	
Other urban	(57 0 43)	12 4 84	7 9 83	5 11 84	6 8 87	11 6 83	13 7 80	14 6 80	487	487	
Urban total	49 4 48	8 6 86	6 7 88	3 9 89	4 10 86	8 10 83	9 8 83	11 7 82	1233	1233	
Rural	(48 13 40)	12 9 79	11 8 81	14 9 77	16 8 76	17 9 74	16 9 75	18 9 73	1213	1213	
DOMINICAN REP	76 9 15	61 10 29	38 14 48	35 12 53	38 11 51	45 10 44	48 11 41	47 11 42	1673	1673	
Santo Domingo	71 10 19	42 9 48	24 13 62	13 10 76	(20 11 69)	26 12 63	32 11 57	31 11 58	403	403	
Other urban	72 7 22	64 8 27	27 13 60	17 14 69	(25 9 66)	29 5 66	38 9 53	37 8 55	394	394	
Urban total	71 8 20	53 9 38	26 13 61	15 12 73	22 10 67	28 8 65	35 10 55	34 9 57	797	797	
Rural	82 9 9	69 11 20	55 16 29	58 13 29	51 12 37	55 12 33	60 12 28	60 12 28	876	876	
GUYANA	61 10 29	54 11 35	41 8 50	40 11 50	39 8 53	36 7 57	44 9 48	43 9 48	3063	3044	
Georgetown&Sub.	42 10 48	44 13 44	26 8 66	18 12 70	28 10 62	27 10 63	32 10 57	30 10 60	872	861	
Other urban	(58 14 28)	(45 16 39)	(33 3 63)	(30 16 54)	(33 11 56)	25 8 67	36 11 53	35 11 54	233	231	
Urban total	44 11 45	44 13 43	28 7 65	21 13 66	29 10 61	27 9 64	33 11 57	31 10 59	1105	1092	
Rural	78 10 12	61 9 29	51 9 40	51 9 40	43 7 50	39 6 55	50 8 43	51 8 41	1958	1952	
JAMAICA	47 11 42	39 10 50	23 9 68	28 8 64	24 12 64	26 8 66	31 9 60	29 9 61	2172	2172	
Kingston & Sub.	37 12 52	26 11 63	14 6 80	17 10 72	11 14 74	13 6 81	20 9 70	18 9 73	731	731	
Other urban	(43 11 46)	42 11 47	29 7 64	(21 4 75)	(25 6 69)	24 6 70	31 8 61	29 8 63	327	327	
Urban total	39 11 50	31 11 58	18 6 76	18 9 73	16 12 73	17 6 77	23 9 68	22 8 70	1058	1058	
Rural	59 10 31	48 10 42	30 12 57	40 8 52	32 12 56	30 9 61	38 10 52	37 10 53	1114	1114	
MEXICO	77 6 16	53 10 38	41 11 48	44 9 47	45 12 43	49 11 40	49 10 40	50 10 40	4932	4932	
Mexico City	59 8 33	32 13 55	20 11 69	27 7 66	17 16 67	18 16 66	26 12 62	26 12 61	1048	1048	
Other urban	71 7 22	43 10 46	27 12 62	25 12 63	30 12 57	35 12 53	36 11 53	37 11 52	1793	1793	
Urban total	66 8 26	39 11 50	24 11 65	26 10 64	26 13 61	30 13 57	32 12 56	33 12 55	2841	2841	
Rural	93 4 3	78 7 15	72 11 17	72 8 21	70 9 20	69 9 21	73 9 18	74 9 17	2091	2091	
PANAMA	49 13 38	25 7 68	19 9 72	18 8 75	17 10 72	26 11 63	23 10 67	25 10 65	2525	2525	
Metro/Urban	45 15 40	17 6 77	12 5 83	8 5 87	7 7 87	11 6 83	14 6 80	15 7 78	1097	1097	
Other urban	* * *	22 2 76	(9 9 83)	13 4 83	(11 7 82)	19 9 72	17 7 76	18 7 75	303	303	
Urban total	43 15 42	18 5 77	11 6 83	9 4 86	8 7 86	13 7 80	15 7 79	16 7 77	1400	1400	
Rural	(66 5 29)	41 14 45	31 13 55	30 13 57	28 14 57	35 15 51	34 14 52	37 13 50	1125	1125	
PERU	75 16 9	49 31 20	40 29 31	41 27 33	45 27 28	52 26 22	48 27 25	50 26 24	4512	4530	
Urbanised Lima	64 18 18	24 41 35	17 27 56	18 28 55	15 28 57	17 31 52	21 30 49	23 30 47	1194	1072	
Other urban	63 24 13	43 38 19	34 35 32	32 29 38	33 35 32	40 35 25	38 34 28	40 33 27	1699	1809	
Urban total	63 22 15	34 39 26	27 31 42	26 28 46	26 32 42	32 34 34	31 32 37	33 32 35	2893	2881	
Rural	94 6 0	83 13 4	77 21 2	70 23 7	76 20 4	78 16 5	78 17 5	79 17 4	1620	1649	

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by number of living children.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that the percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Percentages standardised for number of living children display a caret warning indicator ^ whenever one or more percentages between 5 and 9+ living children were based on a denominator of zero. The adjustment procedure used in such a case is described in the section on standardisation.
- (8). "Currently married and fecund" women are currently married and believe themselves physiologically capable of having children, or are pregnant, or are sterilised for contraceptive purposes.



TABLE 24 CONTINUED

COUNTRY	Current Age and Type of Method Currently Used							T O T A L		TOTAL N (N) (U)		
	15-19	20-24	25-29	30-34	35-39	40-44	45-49	OBSERVED	STANDARDISED			
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.			
LATIN AMERICA AND CARIBBEAN												
COLOMBIA	73 6 21	59 12 29	53 11 36	42 15 43	50 11 38	56 19 25	69 15 16	55 13 32	54 13 33	2666	2666	
Bogota	(46 13 42)	40 15 45	38 13 49	33 18 49	42 19 39	28 22 50	* * *	39 17 44	38 17 45	344	344	
Other Urban	69 4 27	53 13 34	46 9 45	33 16 51	39 10 51	48 22 29	60 21 19	46 13 40	46 13 41	1328	1328	
Urban total	63 6 31	50 13 37	44 10 46	33 17 51	40 12 48	43 22 35	60 22 18	45 14 41	44 14 42	1672	1672	
Rural	86 6 8	76 9 15	68 13 19	60 12 28	69 10 21	76 14 11	82 4 14	72 10 18	71 11 19	994	994	
COSTA RICA	NA NA NA	36 9 55	30 11 59	27 10 63	23 14 63	26 17 57	36 13 50	29 12 59	29 12 59	2446	2446	
San Jose'	NA NA NA	36 5 60	26 9 65	21 14 64	15 14 71	13 23 64	28 15 57	23 12 64	24 12 64	746	746	
Other Urban	NA NA NA	35 11 54	34 8 57	26 9 66	26 18 56	21 19 60	(35 11 54)	30 12 58	30 12 58	487	487	
Urban total	NA NA NA	35 7 57	29 9 62	23 12 65	20 16 65	16 22 63	31 14 56	26 12 62	26 12 62	1233	1233	
Rural	NA NA NA	36 11 53	31 14 55	31 8 61	27 12 61	35 12 53	44 13 43	33 12 56	32 12 56	1213	1213	
DOMINICAN REP	87 5 8	72 5 23	58 7 35	58 6 36	57 7 36	66 10 24	73 5 22	66 6 28	64 6 30	1673	1673	
Santo Domingo	(83 10 8)	62 9 29	44 9 47	47 7 46	44 9 47	(45 7 48)	(62 0 38)	53 8 38	51 8 41	403	403	
Other Urban	(80 8 13)	68 2 30	55 3 42	48 6 46	48 6 46	(59 14 28)	* * *	59 5 36	57 6 38	394	394	
Urban total	81 9 10	65 6 29	49 6 45	47 7 46	46 8 46	52 10 38	(62 3 36)	56 7 37	54 7 39	797	797	
Rural	92 2 6	79 5 17	68 7 24	70 5 25	66 6 28	76 9 15	79 6 15	75 6 20	73 6 21	876	876	
GUYANA	83 8 10	75 8 17	66 6 28	56 8 36	58 10 31	61 6 32	65 6 29	67 8 26	65 8 27	3063	3044	
Georgetown&Sub.	72 13 16	65 12 22	59 12 29	50 13 37	54 15 30	61 11 28	66 7 27	61 12 27	59 12 29	872	861	
Other Urban	(71 17 13)	81 8 11	(60 5 36)	(79 3 18)	(69 9 22)	(77 0 23)	(73 8 19)	73 7 20	72 6 22	233	231	
Urban total	71 14 15	69 11 20	59 10 30	56 11 33	58 14 28	64 9 27	68 7 25	64 11 25	62 11 27	1105	1092	
Rural	90 4 6	78 6 16	70 4 26	56 7 37	59 8 33	60 5 35	63 5 32	68 6 26	67 6 27	1958	1952	
JAMAICA	70 1 30	61 2 37	56 2 42	47 3 49	52 3 44	62 2 36	59 3 38	58 2 40	56 2 41	2172	2172	
Kingston & Sub.	61 3 37	51 2 47	49 1 51	39 5 56	40 4 55	52 5 43	54 2 45	48 3 49	47 3 50	731	731	
Other Urban	(68 0 32)	58 1 41	61 4 35	(52 0 48)	(50 9 41)	(67 0 33)	* * *	60 2 38	58 2 40	327	327	
Urban total	63 2 35	53 2 45	53 2 45	42 4 54	43 6 52	57 3 40	56 1 42	52 3 46	50 3 47	1058	1058	
Rural	76 0 24	69 2 29	60 2 37	53 3 44	59 2 39	65 1 34	61 4 35	63 2 35	62 2 36	1114	1114	
MEXICO	86 3 11	73 5 22	60 8 32	60 9 32	59 12 30	63 11 25	68 9 22	65 8 27	65 8 27	4932	4932	
Mexico City	79 4 16	57 8 36	43 8 49	40 11 48	28 21 52	42 19 40	(56 10 33)	46 11 43	45 12 43	1048	1048	
Other Urban	80 2 18	62 6 32	48 11 41	51 9 40	48 12 40	55 12 33	67 9 24	55 9 35	55 9 36	1793	1793	
Urban total	80 3 18	60 7 33	46 10 44	47 10 43	41 15 44	50 15 35	63 10 27	52 10 38	51 10 39	2841	2841	
Rural	91 3 6	91 3 6	81 6 13	79 6 14	80 7 13	83 6 11	76 9 16	84 5 11	83 6 11	2091	2091	
PANAMA	NA NA NA	56 9 35	40 8 52	39 8 52	36 9 54	37 9 54	36 11 53	42 9 50	42 9 49	2525	2525	
Metro/Urban	NA NA NA	50 7 43	36 6 59	31 8 61	26 6 67	28 8 63	30 7 63	35 7 58	35 7 58	1097	1097	
Other Urban	NA NA NA	52 5 44	30 9 61	34 11 55	(17 17 67)	(24 9 68)	(24 9 67)	32 10 58	32 10 58	303	303	
Urban total	NA NA NA	50 7 43	34 6 59	32 9 60	24 9 67	27 8 64	29 7 64	34 8 58	35 8 58	1400	1400	
Rural	NA NA NA	65 12 23	48 10 42	49 7 44	48 10 42	48 9 43	46 15 38	51 10 39	52 10 38	1125	1125	
PERU	83 11 6	70 20 9	62 25 13	57 25 18	63 22 15	63 27 10	70 22 8	65 23 13	64 23 13	4512	4530	
Urbanised Lima	(59 25 16)	61 22 18	49 28 23	33 36 32	36 35 28	43 35 22	39 43 18	45 31 24	45 31 24	1194	1072	
Other Urban	81 12 7	64 26 10	53 32 15	52 28 20	55 26 19	50 38 12	65 24 12	57 28 15	57 28 15	1699	1809	
Urban total	74 16 10	62 25 13	51 30 18	44 31 25	47 30 23	47 37 16	52 33 15	52 30 18	52 29 18	2893	2881	
Rural	96 4 0	87 12 1	85 13 2	87 9 4	86 10 3	87 12 1	89 10 1	87 10 2	87 11 2	1620	1649	

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by age.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "N" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Costa Rica and Panama age range is 20-49. Women aged 15-19 not interviewed.
- (8). "Currently married and fecund" women are currently married and believe themselves physiologically capable of having children, or are pregnant, or are sterilised for contraceptive purposes.







TABLE 26 CONTINUED

COUNTRY	Current Age and Type of Method Ever Used							T O T A L		TOTAL N (W) (U)		
	15-19	20-24	25-29	30-34	35-39	40-44	45-49	OBSERVED	STANDARDISED			
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.			
LATIN AMERICA AND CARIBBEAN												
COLOMBIA	47 10 43	34 14 52	30 9 61	22 11 67	33 9 58	41 16 43	52 17 31	34 12 54	33 12 56	2322	2322	
Bogota	* * *	12 12 77	11 8 80	( 7 9 84)	24 11 65	8 18 74	* * *	15 13 72	14 12 74	307	307	
Other Urban	43 9 48	27 13 61	18 6 76	15 11 74	20 7 73	32 17 51	41 22 37	24 11 65	23 11 66	1186	1186	
Urban total	38 10 52	23 13 64	17 6 77	14 11 76	21 8 71	26 17 57	41 24 36	22 12 66	21 11 68	1493	1493	
Rural	62 10 28	57 16 27	53 13 34	38 13 50	55 11 34	65 14 22	70 7 23	55 12 32	53 13 34	829	829	
COSTA RICA	NA NA NA	10 6 84	6 7 87	8 6 85	12 9 79	12 11 77	28 12 60	11 8 81	10 8 82	2222	2222	
San Jose'	NA NA NA	7 5 88	4 4 91	4 6 90	7 8 85	5 9 86	21 14 65	7 7 86	6 7 87	688	688	
Other Urban	NA NA NA	8 3 90	8 7 84	10 3 86	11 13 76	12 12 76	(15 11 74)	10 8 82	10 7 83	437	437	
Urban total	NA NA NA	7 4 89	6 5 89	7 5 88	9 10 81	7 10 82	19 13 69	8 7 85	8 7 86	1125	1125	
Rural	NA NA NA	12 8 80	7 8 86	11 8 82	15 8 77	17 11 72	40 11 49	14 9 77	13 8 79	1097	1097	
DOMINICAN REP	63 14 23	45 12 43	33 9 58	37 10 53	42 9 49	50 10 40	63 10 27	44 10 46	42 10 48	1381	1381	
Santo Domingo	(50 14 36)	29 8 63	20 8 72	25 10 65	28 10 62	(28 3 69)	(48 10 43)	29 9 62	28 8 64	340	340	
Other Urban	(52 13 35)	38 13 49	26 4 70	27 8 65	32 5 63	(45 7 48)	* * *	35 8 58	34 8 59	330	330	
Urban total	51 14 35	34 11 55	23 6 71	26 9 65	30 8 63	36 5 59	(46 8 46)	32 8 60	31 8 61	670	670	
Rural	74 14 12	55 13 31	45 12 43	50 11 39	53 9 37	60 14 26	72 12 16	56 12 32	54 12 34	711	711	
GUYANA	56 13 31	47 9 44	37 9 54	30 7 63	40 7 53	46 7 47	51 10 39	42 9 49	40 8 51	2735	2716	
Georgetown&Sub.	42 13 45	32 12 56	22 9 69	19 10 71	33 8 59	38 11 51	46 11 42	31 11 58	29 10 61	792	781	
Other Urban	(54 17 29)	(32 18 50)	(23 14 63)	(19 12 69)	(37 3 60)	(36 5 59)	(54 8 38)	35 11 53	30 11 58	201	199	
Urban total	45 14 41	32 13 55	22 10 68	19 11 70	34 7 59	37 10 53	48 10 41	32 11 57	29 10 60	993	980	
Rural	66 12 22	56 7 37	46 8 46	35 5 60	42 8 50	51 5 44	52 10 38	48 7 44	47 7 46	1742	1736	
JAMAICA	36 8 56	27 11 62	21 8 71	20 9 71	32 8 60	40 8 52	47 14 40	30 9 61	28 9 63	1970	1970	
Kingston & Sub.	25 9 66	20 10 69	14 6 81	12 9 79	25 8 67	22 12 67	31 20 49	20 10 71	19 9 72	685	685	
Other Urban	(34 8 58)	25 9 66	26 6 68	(23 5 73)	(34 6 59)	(40 17 43)	* * *	31 7 61	31 7 62	294	294	
Urban total	29 9 63	22 10 68	18 6 76	15 8 77	27 7 65	28 13 59	40 15 44	23 9 68	22 9 69	979	979	
Rural	44 7 49	32 13 55	26 12 62	27 9 64	36 9 55	47 5 48	51 12 36	37 10 54	34 10 57	991	991	
MEXICO	70 6 24	52 8 40	39 11 50	40 10 50	45 12 44	49 12 40	52 11 37	46 10 43	46 10 44	4107	4107	
Mexico City	(43 18 39)	31 8 61	18 9 72	20 11 69	18 13 70	23 19 58	(37 16 47)	23 12 65	23 12 65	913	913	
Other Urban	54 6 40	33 10 57	25 12 63	26 11 62	29 13 58	38 11 50	46 11 43	32 11 57	31 11 57	1501	1501	
Urban total	50 10 40	32 9 58	22 11 67	24 11 65	25 13 62	32 14 53	43 13 45	28 11 60	28 11 60	2414	2414	
Rural	85 4 12	80 7 13	65 11 24	66 9 25	70 10 20	74 8 18	64 9 27	72 9 20	71 9 20	1693	1693	
PANAMA	NA NA NA	28 9 63	16 8 76	20 8 72	20 10 69	26 8 66	26 13 61	22 9 69	22 9 70	2257	2257	
Metro/Urban	NA NA NA	18 5 77	11 5 84	10 4 86	11 7 82	14 5 81	17 13 70	13 6 81	13 6 81	994	994	
Other Urban	NA NA NA	20 8 72	9 2 89	17 10 73	(10 5 85)	(15 9 76)	(18 6 76)	15 6 79	14 6 79	277	277	
Urban total	NA NA NA	19 6 76	10 4 85	12 6 83	11 7 82	14 6 80	17 11 71	13 6 81	13 6 81	1271	1271	
Rural	NA NA NA	41 14 45	24 14 62	29 10 61	31 14 55	39 11 50	39 16 45	33 13 55	32 13 55	986	986	
PERU	62 23 15	47 31 22	39 30 31	38 26 36	46 25 30	49 29 22	60 22 18	46 27 27	45 28 28	3854	3851	
Urbanised Lima	(16 44 41)	29 32 39	16 32 52	8 26 65	14 28 58	20 35 44	27 32 41	18 31 51	17 31 52	1049	942	
Other Urban	57 25 18	41 36 23	28 36 36	32 32 36	37 31 32	37 38 25	50 31 19	37 34 30	36 34 30	1469	1562	
Urban total	44 31 25	36 35 29	23 34 43	22 30 49	27 29 43	30 37 33	39 32 29	29 33 39	28 33 39	2518	2504	
Rural	88 11 1	74 22 5	74 21 5	75 17 7	75 17 8	81 17 2	85 11 4	77 17 5	76 18 6	1336	1347	

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by age.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Costa Rica and Panama age range is 20-49. Women aged 15-19 not interviewed.
- (8). "Exposed" women are currently married, not pregnant, and either (a) believe themselves physiologically capable of bearing children, or (b) are sterilised for contraceptive purposes.





TABLE 27 CONTINUED

COUNTRY	Number of Living Children and Type of Method Ever Used						T O T A L		TOTAL N	
	0	1	2	3	4	5+	OBSERVED	STANDARDISED	(W)	(U)
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.		
LATIN AMERICA AND CARIBBEAN										
COLOMBIA	62 7 31	37 12 51	27 14 60	29 10 61	28 13 59	36 12 52	34 12 54	35 12 53	2322	2322
Bogota	(45 10 45)	(11 17 72)	11 12 76	13 15 72	( 8 10 82)	19 12 69	15 13 72	17 13 70	307	307
Other urban	56 5 39	30 10 60	17 14 69	19 9 72	15 13 72	24 13 63	24 11 65	25 11 64	1186	1186
Urban total	54 6 40	26 11 63	15 13 72	18 10 72	14 13 74	24 13 64	22 12 66	23 11 65	1493	1493
Rural	(84 11 5)	62 14 24	57 14 29	57 10 33	54 14 32	50 12 38	55 12 32	58 12 30	829	829
COSTA RICA	46 3 51	9 7 84	7 7 86	7 9 84	8 8 84	13 9 78	11 8 81	12 8 80	2222	2222
San Jose'	(41 2 57)	7 6 87	5 4 91	2 7 91	3 9 88	6 12 83	7 7 86	8 8 84	688	688
Other urban	(57 0 43)	11 4 85	6 10 84	5 11 84	( 4 8 88)	11 7 82	10 8 82	13 6 81	437	437
Urban total	46 2 52	8 5 86	5 6 89	3 9 88	3 9 88	8 10 82	8 7 85	10 7 83	1125	1125
Rural	(47 7 47)	9 9 81	10 8 82	14 8 78	14 7 80	15 9 75	14 9 77	15 8 76	1097	1097
DOMINICAN REP	74 8 18	59 8 33	34 12 54	32 12 56	37 8 55	43 10 47	44 10 46	43 10 47	1381	1381
Santo Domingo	(69 7 24)	42 6 52	22 8 71	11 11 78	(19 10 71)	24 10 65	29 9 62	28 9 64	340	340
Other urban	(73 9 18)	(65 8 27)	25 11 64	16 11 73	(24 8 68)	27 4 69	35 8 58	34 7 58	330	330
Urban total	71 8 21	53 7 40	23 9 68	14 11 75	21 9 70	26 7 68	32 8 60	31 8 61	670	670
Rural	79 9 13	66 9 24	49 17 35	56 13 31	51 8 41	53 13 35	56 12 32	55 12 32	711	711
GUYANA	58 11 31	53 11 36	40 9 51	39 11 50	38 8 54	36 6 58	42 9 49	41 9 50	2735	2716
Georgetown&Sub.	39 10 51	45 13 43	24 9 67	19 12 69	27 10 63	28 10 62	31 11 58	29 10 60	792	781
Other urban	(59 16 25)	(40 16 44)	(39 4 57)	(25 19 56)	(36 8 56)	25 8 67	35 11 53	34 11 55	201	199
Urban total	42 11 46	44 13 43	26 8 66	20 14 66	29 10 61	27 9 63	32 11 57	30 10 60	993	980
Rural	75 10 14	61 9 30	50 9 40	50 9 41	43 7 50	39 6 56	48 7 44	49 8 43	1742	1736
JAMAICA	47 12 41	39 9 52	23 9 68	27 9 64	23 12 65	25 8 67	30 9 61	28 9 63	1970	1970
Kingston & Sub.	35 13 51	27 10 63	12 7 82	19 10 71	10 15 75	13 6 81	20 10 71	17 9 74	685	685
Other urban	(41 12 46)	47 11 42	28 6 66	(21 5 74)	(24 3 72)	24 7 69	31 7 61	28 7 64	294	294
Urban total	37 13 50	33 10 57	16 6 77	19 9 72	15 11 74	17 6 77	23 9 68	21 8 71	979	979
Rural	61 11 28	46 8 45	31 13 56	37 9 54	32 12 57	29 8 62	37 10 54	36 10 54	991	991
MEXICO	76 5 19	51 9 40	37 11 52	42 9 50	44 11 45	47 11 42	46 10 43	47 10 43	4107	4107
Mexico City	56 7 37	32 12 57	17 11 72	25 7 68	17 14 69	18 16 66	23 12 65	24 12 64	913	913
Other urban	65 8 27	40 9 51	22 11 67	25 12 64	28 11 61	32 12 56	32 11 57	33 11 56	1501	1501
Urban total	61 8 31	36 10 53	20 11 69	25 10 65	24 12 64	28 13 59	28 11 60	30 11 59	2414	2414
Rural	98 0 2	77 8 15	71 11 18	70 7 23	69 10 21	69 9 22	72 9 20	73 8 19	1693	1693
PANAMA	50 13 38	25 6 70	19 8 73	16 7 78	15 10 76	24 11 65	22 9 69	23 9 68	2257	2257
Metro/Urban	46 15 38	17 4 78	12 5 83	7 4 89	5 7 89	11 6 83	13 6 81	14 6 80	994	994
Other urban	* * *	(21 0 79)	( 7 9 84)	12 4 84	(10 7 83)	18 8 74	15 6 79	15 7 77	277	277
Urban total	43 16 41	18 3 78	11 6 83	8 4 88	6 7 87	13 6 81	13 6 81	14 7 79	1271	1271
Rural	(68 4 29)	44 14 42	31 12 57	28 11 61	25 13 62	33 14 53	33 13 55	35 12 52	986	986
PERU	75 11 14	49 31 21	37 29 33	39 27 34	43 28 30	51 26 23	46 27 27	48 26 26	3854	3851
Urbanised Lima	(48 17 35)	23 41 36	16 28 56	17 29 54	13 29 58	16 31 53	18 31 51	20 31 50	1049	942
Other urban	69 12 18	42 37 21	33 35 32	30 30 41	31 36 34	39 35 25	37 34 30	39 33 29	1469	1562
Urban total	62 14 24	33 39 28	25 32 43	24 29 47	23 33 44	31 34 35	29 33 39	31 32 37	2518	2504
Rural	93 7 0	83 12 4	75 22 3	70 22 9	77 19 4	78 16 6	77 17 5	78 17 5	1336	1347

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by number of living children.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that the percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Percentages standardised for number of living children display a caret warning indicator ^ whenever one or more percent-ages between 5 and 9+ living children were based on a denominator of zero. The adjustment procedure used in such a case is described in the section on standardisation.
- (8). "Exposed" women are currently married, not pregnant, and either (a) believe themselves physiologically capable of bearing children, or (b) are sterilised for contraceptive purposes.



TABLE 28 CONTINUED

COUNTRY	Current Age and Type of Method Currently Used								T O T A L		TOTAL N (W) (U)	
	15-19	20-24	25-29	30-34	35-39	40-44	45-49	OBSERVED	STANDARDISED			
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.			
LATIN AMERICA AND CARIBBEAN												
COLOMBIA	62 9 29	48 15 37	44 13 43	35 17 48	47 12 41	55 19 26	69 15 16	48 15 37	47 15 39	2322	2322	
Bogota	* * *	27 10 55	28 15 57	(23 20 57)	40 20 40	28 22 50	* * *	31 19 50	30 19 51	307	307	
Other Urban	59 5 36	43 16 41	37 10 53	26 18 56	36 11 54	48 23 30	60 21 19	40 15 45	39 15 47	1186	1186	
Urban total	52 8 40	40 16 44	35 11 54	25 18 56	37 13 51	42 23 35	60 22 18	38 16 46	37 16 47	1493	1493	
Rural	78 10 12	66 13 21	61 16 23	53 14 33	67 11 23	74 14 11	82 4 14	66 13 21	64 13 23	829	829	
COSTA RICA	NA NA NA	23 11 66	21 13 67	18 12 70	20 14 66	23 17 60	36 13 50	22 13 65	21 13 65	2222	2222	
San Jose'	NA NA NA	22 6 72	18 10 73	13 16 71	14 14 71	11 24 66	28 15 57	17 14 69	17 13 70	688	688	
Other Urban	NA NA NA	16 14 70	26 9 65	19 9 72	22 19 59	18 20 62	(35 11 54)	22 13 65	21 13 66	437	437	
Urban total	NA NA NA	20 9 71	21 10 70	15 13 71	17 16 67	13 22 64	31 14 56	19 13 68	18 13 68	1125	1125	
Rural	NA NA NA	26 13 62	20 16 63	22 10 69	22 13 65	32 13 55	43 13 43	26 13 62	25 13 63	1097	1097	
DOMINICAN REP	80 8 12	63 7 30	49 8 43	49 7 44	53 7 40	65 10 25	73 5 22	58 8 34	57 8 36	1381	1381	
Santo Domingo	(75 14 11)	48 12 40	36 11 54	40 8 52	38 10 52	(45 7 48)	(62 0 38)	45 10 46	43 9 47	340	340	
Other Urban	(65 13 22)	62 3 36	45 4 51	33 8 59	45 7 48	(59 14 28)	* * *	51 6 43	49 7 45	330	330	
Urban total	71 14 16	55 7 38	40 7 52	37 8 55	42 8 50	52 10 38	(62 3 36)	48 8 44	46 8 46	670	670	
Rural	88 3 9	70 6 23	59 9 31	63 6 31	63 7 31	74 10 16	79 6 15	69 7 24	67 7 26	711	711	
GUYANA	77 10 13	70 10 21	61 7 32	52 9 39	56 11 33	61 6 33	65 6 29	62 9 29	61 9 31	2735	2716	
Georgetown&Sub.	66 15 18	58 15 27	55 13 32	48 14 38	52 16 32	60 11 28	66 7 27	57 13 30	55 14 31	792	781	
Other Urban	(71 17 13)	(74 11 16)	(51 6 43)	(73 4 23)	(67 10 23)	(77 0 23)	(73 8 19)	69 8 23	68 7 26	201	199	
Urban total	67 16 17	61 14 25	54 12 34	53 12 35	55 15 30	64 9 27	68 7 25	59 12 28	58 12 30	993	980	
Rural	86 5 9	74 7 19	65 5 30	52 8 40	57 9 35	59 5 36	63 5 32	64 6 29	63 7 31	1742	1736	
JAMAICA	63 1 36	54 2 43	51 2 47	43 4 54	50 3 46	61 2 37	59 3 38	53 3 44	52 3 46	1970	1970	
Kingston & Sub.	55 3 42	46 3 52	44 1 55	35 5 60	40 4 55	52 5 43	53 2 45	45 3 52	44 3 53	685	685	
Other Urban	(61 0 39)	52 2 46	56 4 40	(48 0 53)	(47 9 44)	(67 0 33)	* * *	55 2 43	54 3 44	294	294	
Urban total	57 2 41	48 2 50	48 2 50	38 4 58	42 6 52	57 3 40	56 1 43	48 3 49	47 3 50	979	979	
Rural	69 0 31	62 3 35	54 3 43	48 4 49	57 2 41	64 1 35	61 4 35	59 2 39	57 3 41	991	991	
MEXICO	79 4 17	64 7 29	52 10 38	53 10 37	54 13 33	61 12 27	67 9 23	58 10 32	58 10 32	4107	4107	
Mexico City	(68 7 25)	45 10 45	33 9 57	35 13 53	24 22 54	41 19 40	(55 11 34)	38 13 49	38 13 49	913	913	
Other Urban	68 2 29	49 8 43	39 13 48	44 10 46	43 13 44	52 13 35	66 9 24	47 11 42	47 11 42	1501	1501	
Urban total	68 4 28	47 9 44	37 11 52	40 11 49	36 16 48	47 15 37	63 10 28	43 12 45	43 12 45	2414	2414	
Rural	87 5 8	88 4 8	77 8 16	75 8 17	77 9 15	82 7 12	74 9 17	80 7 13	79 7 14	1693	1693	
PANAMA	NA NA NA	44 11 45	30 9 61	34 9 58	33 10 57	36 9 55	35 11 54	35 10 55	35 10 55	2257	2257	
Metro/Urban	NA NA NA	36 9 55	27 6 67	24 9 67	25 7 68	28 8 64	30 7 63	28 8 64	28 8 64	994	994	
Other Urban	NA NA NA	40 6 54	18 11 72	32 11 57	(13 18 70)	(24 9 68)	(24 9 67)	26 10 64	25 11 64	277	277	
Urban total	NA NA NA	37 8 55	25 7 68	26 9 65	23 9 68	27 8 65	29 7 64	28 8 64	28 8 64	1271	1271	
Rural	NA NA NA	54 15 30	38 12 50	43 8 49	44 11 46	46 10 44	45 16 39	44 11 44	44 12 44	986	986	
PERU	76 16 8	62 27 12	54 30 16	50 28 21	58 25 17	61 28 11	69 22 8	59 27 15	58 27 15	3854	3851	
Urbanised Lima	(44 34 22)	48 29 23	39 34 27	26 39 35	31 38 31	42 35 23	39 43 18	37 36 27	37 35 27	1049	942	
Other Urban	72 18 10	56 32 12	44 38 18	43 33 24	51 28 21	49 39 12	65 24 12	50 33 17	50 33 17	1469	1562	
Urban total	64 23 14	53 31 16	42 36 22	36 36 28	43 32 25	46 38 16	52 33 15	45 34 21	45 34 21	2518	2504	
Rural	94 5 0	81 17 2	81 16 3	85 10 5	84 12 4	86 13 1	89 10 2	85 13 3	84 13 3	1336	1347	

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by age.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Costa Rica and Panama age range is 20-49. Women aged 15-19 not interviewed.
- (8). "Exposed" women are currently married, not pregnant, and either (a) believe themselves physiologically capable of bearing children, or (b) are sterilised for contraceptive purposes.



TABLE 29 CONTINUED

COUNTRY	Number of Living Children and Type of Method Currently Used						T O T A L		TOTAL N (W) (U)		
	0	1	2	3	4	5+	OBSERVED	STANDARDISED			
	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.	N. I. E.			
<b>LATIN AMERICA AND CARIBBEAN</b>											
<b>COLOMBIA</b>	76 6 17	50 14 36	40 18 42	43 12 45	41 16 43	51 15 34	48 15 37	49 14 37	2322	2322	
Bogota	(60 10 30)	(17 26 57)	30 22 47	28 20 52	(28 15 56)	40 14 47	31 19 50	34 18 49	307	307	
Other urban	76 4 21	45 14 41	30 19 51	34 12 55	29 16 55	42 17 40	40 15 45	41 15 45	1186	1186	
Urban total	73 5 23	39 16 45	30 20 50	33 13 54	29 16 55	42 17 41	38 16 46	39 16 45	1493	1493	
Rural	(86 11 3)	75 9 15	66 14 20	69 9 22	64 16 20	62 13 25	66 13 21	68 12 20	829	829	
<b>COSTA RICA</b>	61 6 33	25 13 62	18 15 68	17 14 70	20 13 67	22 13 65	22 13 65	24 13 64	2222	2222	
San Jose'	(57 7 36)	22 11 68	14 14 71	11 13 76	8 14 78	14 17 69	17 14 69	18 14 69	688	688	
Other urban	(76 0 24)	27 10 63	15 17 69	11 16 73	(21 17 63)	23 11 66	22 13 65	24 12 64	437	437	
Urban total	63 5 32	24 10 66	14 15 70	11 14 75	13 15 72	18 15 68	19 13 68	20 13 67	1125	1125	
Rural	(57 10 33)	26 17 56	23 14 63	24 13 63	27 11 62	24 12 64	26 13 62	27 13 60	1097	1097	
<b>DOMINICAN REP</b>	85 5 11	70 6 24	56 7 37	49 10 41	50 10 40	55 7 38	58 8 34	58 8 35	1381	1381	
Santo Domingo	(76 10 14)	56 12 32	42 11 48	32 10 59	(38 7 55)	37 9 54	45 10 46	43 9 47	340	340	
Other urban	(91 3 6)	(73 4 23)	53 2 45	36 11 53	(32 13 55)	41 6 53	51 6 43	50 6 44	330	330	
Urban total	83 7 11	64 8 28	47 7 47	34 10 56	35 10 55	39 7 54	48 8 44	47 8 45	670	670	
Rural	88 2 11	77 3 20	69 7 24	68 10 22	64 10 26	64 7 28	69 7 24	69 7 24	711	711	
<b>GUYANA</b>	78 10 12	74 6 20	63 9 28	61 11 28	62 10 29	53 8 40	62 9 29	62 9 30	2735	2716	
Georgetown&Sub.	66 16 18	68 6 26	51 17 32	47 15 38	59 18 23	50 12 38	57 13 30	55 13 32	792	781	
Other urban	(75 13 13)	(72 8 20)	(65 4 30)	(72 6 22)	(76 4 20)	61 9 30	69 8 23	68 7 24	201	199	
Urban total	68 16 17	69 6 25	53 15 32	53 13 35	63 15 22	53 11 36	59 12 28	58 12 30	993	980	
Rural	90 4 6	79 6 15	70 5 25	67 9 24	61 8 32	53 7 41	64 6 29	65 6 28	1742	1736	
<b>JAMAICA</b>	66 3 31	64 1 35	48 2 50	54 3 43	46 5 49	46 3 51	53 3 44	52 3 46	1970	1970	
Kingston & Sub.	56 4 40	58 0 42	35 1 63	44 5 51	36 6 58	37 5 58	45 3 52	42 4 54	685	685	
Other urban	(66 2 32)	70 2 28	48 2 50	(53 2 44)	(59 0 41)	42 4 54	55 2 43	53 2 45	294	294	
Urban total	59 3 38	62 1 38	39 2 60	47 4 49	43 4 53	39 4 57	48 3 49	45 3 51	979	979	
Rural	77 2 21	67 2 31	61 2 37	64 2 34	50 5 45	50 2 48	59 2 39	58 3 39	991	991	
<b>MEXICO</b>	87 3 10	62 9 28	51 9 40	53 10 37	54 11 36	60 11 30	58 10 32	59 9 31	4107	4107	
Mexico City	80 2 19	42 15 42	35 9 55	38 14 48	28 17 56	33 15 53	38 13 49	39 13 48	913	913	
Other urban	80 4 16	58 7 36	36 11 53	39 12 49	39 11 50	49 13 38	47 11 42	48 10 42	1501	1501	
Urban total	80 3 17	51 10 39	36 10 54	39 13 49	35 13 52	44 13 43	43 12 45	45 11 44	2414	2414	
Rural	98 2 0	82 7 10	81 7 12	79 4 17	78 8 14	78 8 15	80 7 13	81 7 12	1693	1693	
<b>PANAMA</b>	69 9 22	42 8 50	30 11 58	27 9 65	29 9 62	37 10 53	35 10 55	37 10 54	2257	2257	
Metro/Urban	69 11 20	39 7 55	26 10 64	19 7 74	21 6 73	23 7 70	28 8 64	29 8 63	994	994	
Other urban	* * *	(36 10 55)	(25 11 64)	18 10 73	(17 10 74)	25 11 63	26 10 64	27 11 62	277	277	
Urban total	68 11 21	38 7 55	26 10 64	19 7 74	20 7 73	23 8 68	28 8 64	29 8 63	1271	1271	
Rural	(71 4 25)	55 9 36	37 14 50	39 11 50	41 11 48	46 12 42	44 11 44	46 11 43	986	986	
<b>PERU</b>	84 9 7	64 26 10	51 31 18	52 28 20	57 29 15	62 24 13	59 27 15	61 25 14	3854	3851	
Urbanised Lima	(70 17 13)	45 33 21	32 39 30	39 34 27	35 39 26	34 36 29	37 36 27	39 35 26	1049	942	
Other urban	80 10 10	58 34 8	46 36 17	41 34 25	49 32 19	53 32 16	50 33 17	52 31 16	1469	1562	
Urban total	76 13 11	52 34 14	40 37 23	40 34 26	43 35 22	46 33 21	45 34 21	47 33 20	2518	2504	
Rural	96 4 0	89 10 1	87 13 1	77 17 6	82 17 1	86 11 3	85 13 3	85 12 2	1336	1347	

## NOTES:

- (1). Including West Asia.
- (2). Standardised according to Fiji distribution by number of living children.
- (3). "Total N" refers to number of respondents. The column headed "U" indicates the unweighted number of respondents, and the column headed "W" indicates the weighted number.
- (4). Asterisks \* \* \* indicate that the percentage is suppressed because the denominator is less than 20. Parentheses ( ) indicate that percentage is calculated on a denominator of at least 20 but less than 50.
- (5). Pakistan percentages may be non-comparable. See text.
- (6). Contraceptive methods are grouped into two types: efficient (male and female sterilisation, pill, IUD, injection, condom, and 'other female scientific') and inefficient (withdrawal, rhythm, douche, country specific methods, and 'method not stated'). Figures are given for three groups: No method used (N), Inefficient only (I), and one or more Efficient (E).
- (7). Percentages standardised for number of living children display a caret warning indicator ^ whenever one or more percent-ages between 5 and 9+ living children were based on a denominator of zero. The adjustment procedure used in such a case is described in the section on standardisation.
- (8). "Exposed" women are currently married, not pregnant, and either (a) believe themselves physiologically capable of bearing children, or (b) are sterilised for contraceptive purposes.

APPENDIX II—TECHNICAL NOTES

## APPENDIX II - - - TECHNICAL NOTES

### 1 Distinguishing Principal City from "Other Urban"

For readers with standard recode tapes interested in performing other analyses using the "principal city", "other urban" distinction, specifications are provided below. Standard recode variable V702, type of place of residence, is only occasionally sufficient for distinguishing largest city from other urban, and usually other variables must be combined with V702 to select principal city. Specifications are as follows:

**Bangladesh:** Standard recode variable S067 specifically identifies Dacca City with codes 38 and 39. Used in conjunction with the standard recode variable V702 ("urban"/"rural"), this allows coding of "Dacca City" and "Other urban".

**Fiji:** Standard recode variable V702 already distinguishes "Suva and Peri-Urban" from "other urban".

**Indonesia:** The standard recode region of residence variable V701 specifically identifies D.K.I. Jakarta, an area that contains Jakarta proper and no other urban area, and no rural area, while V702 distinguishes urban from rural.

**Jordan:** The standard recode variable V701 specifically identifies Amman.

**Korea:** The standard recode variable V701 specifically identifies Seoul.

**Malaysia:** Standard recode variable V702 already distinguishes "Metro/Town" from "other urban", but no code for selecting Kuala Lumpur is currently available.

**Nepal:** Standard recode variable V702 specifically identifies Kathmandu.

**Pakistan:** Columns 8-13 on the standard recode tape can be read as a single variable, in which case Karachi has the codes 12001 to 12026.

**Philippines:** The standard recode regional variable V701 identifies metropolitan Manila.

**Sri Lanka:** The standard recode variable V701 identifies Zones I to VII, and Colombo occupies all of Zone I, though Colombo's fringes extend into Zone II, but cannot be separated from other urban entities in Zone II.

**Thailand:** Standard recode variable V701 identifies the Bangkok-Thonburi metropolis.

**Colombia:** The standard recode variable V701 distinguishes "Metropolitan Area", which corresponds to the city of San Jose's metropolitan region.

**Dominican Republic:** Values of 13 to 50 of the standard recode stratum variable V003 correspond to Santo Domingo.

**Guyana:** Variable V701 identifies Georgetown and suburbs.

**Jamaica:** Variable V701 identifies Kingston and St. Andrew. Kingston and suburbs effectively consist of Kingston and urban St. Andrew.

**Mexico:** The standard recode V701 variable includes the code 5 = Central, while the V702 variable includes the code 1 = cities of 500,000+. By taking these in conjunction, Mexico City is identified as cases where V702=1 and V701=5.

**Panama:** The standard recode variable V701 identifies "Metropolitan urban" and "rest urban". It has not been established whether metropolitan urban exactly coincides with Panama City, or includes other areas.

**Peru:** The standard recode variable V702 distinguishes "urbanised Lima".

### 2 Sample Weighting

In order to permit more intensive analysis of fertility in particular regions, especially urban areas, six of the 19 counties oversampled some regions. To obtain unbiased national estimates, respondents from oversampled areas are assigned proportionally less weight. In the detailed tables (14 to 29), percentages using contraception are based on weighted data, but the warning indicators which signal denominators less than 50 are based on the unweighted denominators for each category. For example, if there were 40 weighted principal city cases aged 15-19, but 100 unweighted cases, no warning indicator would be issued.

It is noted that the final two columns of each of the detailed tables present both the weighted number of respondents (W) and the unweighted number (U). There are minor differences between the weighted and unweighted totals at the national level in several countries, including Bangladesh, Indonesia, Jordan, and Pakistan. This occurs because while weights for WFS surveys are chosen to reproduce the unweighted national total whenever all respondents are included, the exclusion of any group of respondents is apt to produce differences between the weighted and unweighted national total, whenever the exclusion disproportionately omits respondents from a particular weight class. For example, if all rural respondents were to receive a weight of 1.5 and all urban respondents a weight of 0.5, the exclusion of all urban respondents would result in a national weighted total that would be 1.5 times as great as the unweighted total.

### 3 Notes on Standardization

(a) **Adjustment for empty cells:** In a few instances, standardization on number of living children procedures had to be adjusted, in cases where one of the categories of living children between 5 and 9+ proved to be empty. Such cases are flagged in the detailed tables with a caret symbol "Λ" placed beside the standardized percentage, and are adjusted through ascribing the averaged percentages of adjacent cells to the empty cell (i.e. if cell is empty, assign to it the averaged percentages from cells  $i+1$  and  $i-1$ ; in the contingency of  $i=9+$ , or cells  $i$  and  $i+1$  are empty, percentages are assigned from cell  $i-1$ )<sup>1</sup>. Such adjustments were needed only for Seoul, Republic of Korea, and for Nepal's two urban categories.

(b) **Effects of standardization:** Standardizing can affect both inter-country comparisons and also the size of the rural urban gap in the percentages currently using contraception. Table 30 summarises the effects of standardizing by age, both on the rural urban gap and on the inter-country comparisons, based on current use among the sub-population of exposed women.

<sup>1</sup>An alternative procedure was tried that took the total percentage using contraception in the group with 5 to 9+ children and multiplied this by the combined weight for the 5 to 9+ category, but the results were less consistent.



Column 1 displays the rural-urban gap before standardization (the data in column 1 are obtained through subtracting the rural percentage using any contraception from the principal city percentage using any contraception).

Column 2 displays the rural-urban gap after standardization and column 3 shows the difference between Column 1 and Column 2. It is evident that in five cases the rural-urban contraceptive use gap increased somewhat, between 4 percent in Bangladesh and 1 percent in Fiji, that in 11 cases the gap decreased in size by 1 or 2 percent, and that in three cases the gap remained unchanged.

Columns 4-6 summarise the effect of standardizing on national percentages using any method of contraception. In eight cases, national percentages rose slightly, by between 1 and 2 percent, while in 3 cases the percentages fell, with the most extreme case being that of Korea, where the national percentage using any method of contraception was 45 percent before standardization and 41 percent afterwards.

It is thus seen that standardizing had relatively minor effects on these comparisons but the availability of standardized comparisons has the advantage of positively assuring against differences that are due only to compositional effects by age or number of living children.

(c) **Standardization weights:** Table 31 presents the weights used to standardize by age and those used to standardize by number of living children, for each of the four subpopulations. These weights were obtained through cross tabulations by age and number of living children for the appropriate subpopulations of the island of Fiji.

**Table 30 The Effects of Standardizing for Age upon Percentages of Currently Exposed Women Using Any Method of Contraception**

Country	Effect on Rural-Urban Gap <sup>1</sup>			Effect on National Percentages Using Contraception		
	Size of the rural-urban gap in percentages currently using contraception, before and after standardization			National percentages using any method of contraception, before and after standardization		
	Gap Before (1)	Gap After (2)	Difference (2)-(1) (3)	Before (4)	After (5)	Difference (5)-(4) (6)
<b>ASIA AND PACIFIC</b>						
Bangladesh	26	31	+5	10	11	+1
Fiji	7	8	+1	52	52	0
Indonesia	1	3	+2	37	39	+2
Jordan	41	40	-1	38	38	0
Korea, Rep	9	9	0	45	41	-4
Malaysia	24	23	-1	42	43	+1
Nepal	34	36	+2	3	4	+1
Pakistan	19	22	+3	7	8	+1
Philippines	20	20	0	47	47	0
Sri Lanka	30	29	-1	42	40	-2
Thailand	17	17	0	46	46	0
<b>LATIN AMERICA AND CARIBBEAN</b>						
Colombia	35	34	-1	52	54	+2
Costa Rica	8	7	-1	83	83	0
Dominican Rep	25	23	-2	42	44	+2
Guyana	8	7	-1	38	40	+2
Jamaica	14	12	-2	47	49	+2
Mexico	42	41	-1	42	42	0
Panama	17	16	-1	65	65	0
Peru	47	46	-1	42	42	0

1. The gap referred to is the absolute difference between (Principal city percentage using any method of contraception) (Rural percentage using any method). For example, before standardization, 35 percent of Dacca women were currently using, while 9 percent of rural women were using, giving a gap of 26 percent.

Table 31 Standardization Weights Used in WFS Comparative Tables 1.

SUBPOPULATION	<u>Age Weights</u>						
	15-19	20-24	25-29	30-34	35-39	40-44	45-49
Ever Married	.04627	.18344	.21347	.19359	.14976	.12378	.08969
Currently Married	.04796	.18430	.21613	.19656	.14989	.11935	.08581
Currently Married Fecund	.05374	.20561	.23848	.20849	.15043	.09837	.04487
“Exposed”	.04402	.18349	.22751	.21706	.16616	.11032	.05144

SUBPOPULATION	<u>Parity Weights</u>									
	0	1	2	3	4	5	6	7	8	9+
Ever Married	.12277	.14002	.15381	.14042	.11607	.09761	.08259	.05763	.03896	.05012
Currently Married	.12043	.13699	.15333	.13978	.11935	.10022	.08194	.05806	.03914	.05075
Currently Married Fecund	.11396	.14299	.15979	.14755	.12428	.10077	.08061	.05422	.03527	.04055
“Exposed”	.08996	.13618	.15131	.15048	.13012	.10977	.08968	.05777	.03934	.04539

1. Based on tabulations of the 1974 Fiji Fertility Survey.

#### 4 Predicting the Percentage Using Contraception Between Different Subpopulations

If the percentage using contraception in one subpopulation could be predicted exactly or very closely from the percentage using in another subpopulation, it would be unnecessary and redundant to present data on contraceptive use in all four subpopulations. In Tables 32 and 33, this section presents the results of bivariate regressions which examine how well one can predict the total percentage using contraception in each of the subpopulations when given knowledge of the total percentage using contraception in each of the other subpopulations. These regressions are based on age standardised percentages using any method of contraception in the 57 regions of our sample of 19 countries.

Table 32 shows the degree to which information on current use in any one of the subpopulations can be used to predict current use in the other three, which may be of some utility to analysts interested in translating other survey data from one subpopulation to another, giving them some indication of how accurate such predictions are likely to be.

Table 33 provides regression results describing how well information on contraceptive ever use can be used to predict current use. As can be seen, the predictive fit is rather poor, with standard errors ranging between 5.163 and 5.953.

These regressions establish that for more precise applications, tabulations of all four subpopulations are of some utility.

**Table 32 Predicting Total Percentage of Women Currently Using Contraception in One Subpopulation from Total Percentage Currently Using Contraception in Another Subpopulation <sup>1</sup>.**

Predictor Variable	Predicted Variable	Correlation	Constant	Regression Coefficient	Standard Error of Estimate
Percent Using, Ever Married Women	Percent Using, Currently Married Women	.995	-0.189	1.108	1.640
Percent Using, Ever Married Women	Percent Using, Currently Married Fecund Women	.993	0.488	1.1941	2.029
Percent Using, Ever Married Women	Percent Using, "Exposed" Women	.991	2.499	1.310	2.449
Percent Using, Currently Married Women	Percent Using, Currently Married Fecund	.996	0.773	1.075	1.482
Percent Using, Currently Married Women	Percent Using, "Exposed" Women	.992	2.900	1.178	2.264
Percent Using, Currently Married Fecund Women	Percent Using, "Exposed" Women	.996	2.082	1.095	1.719

1. The data refer to age standardized percentages using any method of contraception in the 57 regions (19 principal cities, 19 "other urban", 19 rural areas).

**Table 33 Predicting Total Percentages of Women Currently Using Contraception from Total Percentages Ever Using Contraception, in 57 Regions<sup>1</sup>.**

Predictor Variable	Predicted Variable	Correlation	Constant	Regression Coefficient	Standard Error of Estimate
Percent Ever Using, Ever Married Women	Percent Currently Using, Exposed Women	.948	-1.097	0.871	5.953
Percent Ever Using, Ever Married Women	Percent Currently Using, Currently Married and Fecund Women	.946	-2.627	0.791	5.525
Percent Ever Using, Currently Married Women	Percent Currently Using, Exposed Women	.955	-2.491	0.869	5.531
Percent Ever Using, Currently Married Women	Percent Currently Using, Currently Married and Fecund Women	.953	-3.884	0.788	5.163

1. The data refer to age standardized percentages using any method of contraception in the 57 regions (19 principal cities, 19 "other urban", 19 rural areas).