



**USAID**  
FROM THE AMERICAN PEOPLE



Strengthening Health Outcomes  
*through the Private Sector*

# Reaching Youth with Modern Contraception





## Reaching Youth with Modern Contraception

Youth represent more than 30 percent of the population in many developing countries. Yet, they often face financial, geographic, and cultural obstacles in accessing modern family planning methods. Each year, more than seven million births occur to girls under age 18, and two million of those births occur to girls under 15. Unplanned pregnancies result in 3.2 million unsafe abortions among adolescents each year.

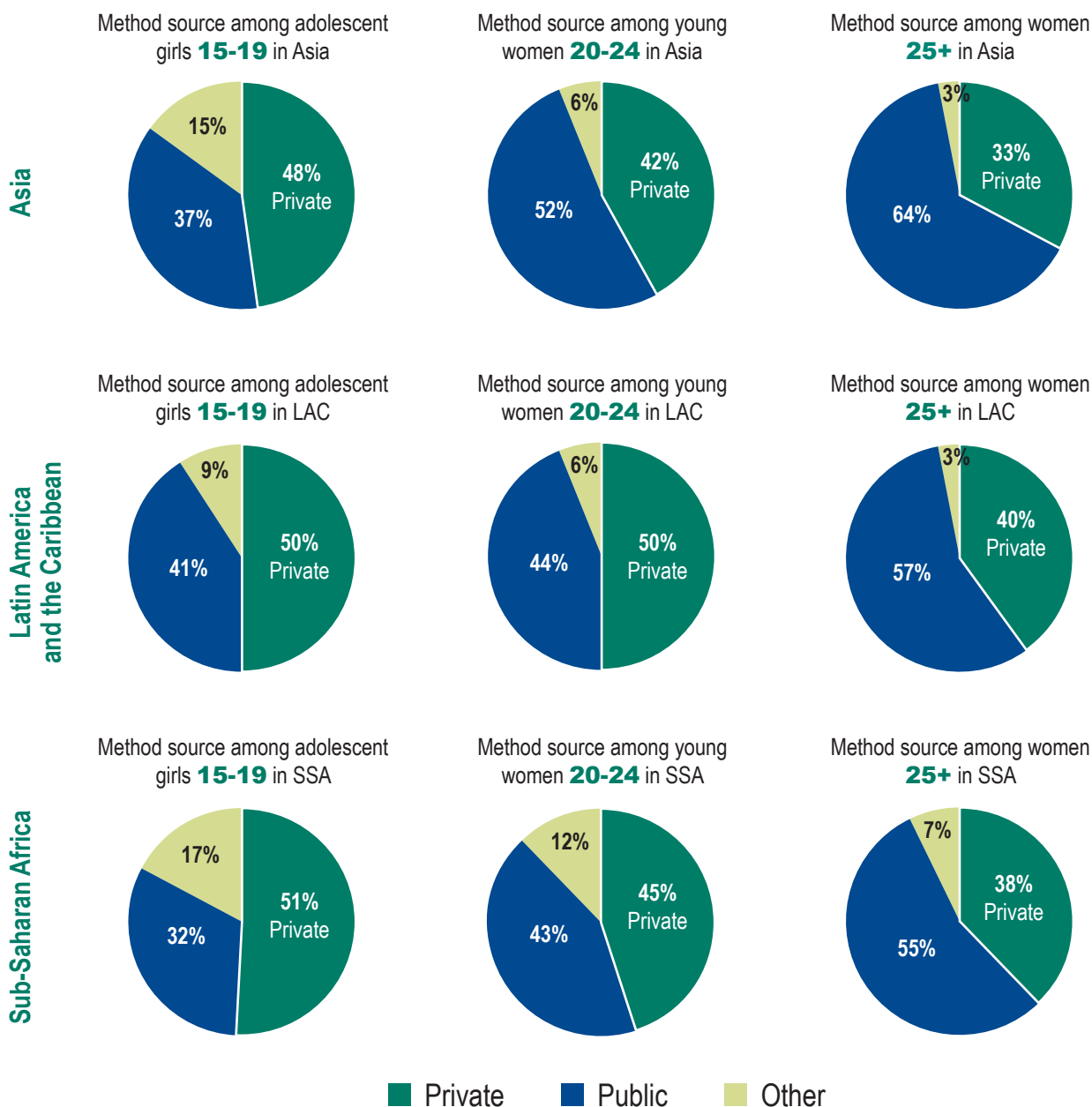
**Improving access to a wide range of family planning methods is critical to improving lives of young people around the world.**

The private sector has a particularly important role to play in meeting the demand for modern contraception among young people. This brief sheds light on the extent that women and girls use the private sector for modern contraception, the type of method they use, and how marriage may influence their options.



# Worldwide, the private sector is a more important source of modern contraception for young women 15-24 than for women over 25.

More adolescents 15-19 obtain their contraception from “other” sources compared to older women.



The private sector includes private clinics, private hospitals, private doctors, private pharmacies, and NGO facilities. The public sector includes government clinics and hospitals, government health centers, public family planning clinics, social security programs, and public field workers. Other = Friend, relative, or church



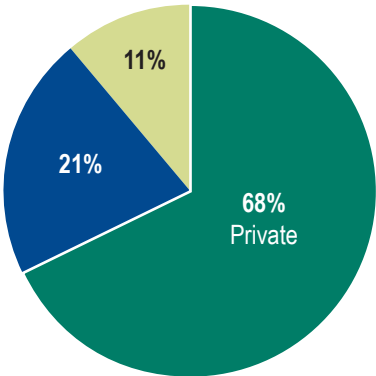
# Marriage Matters for Source

Unmarried adolescents are more likely than married adolescents to use the **private sector** as a source of modern contraception.

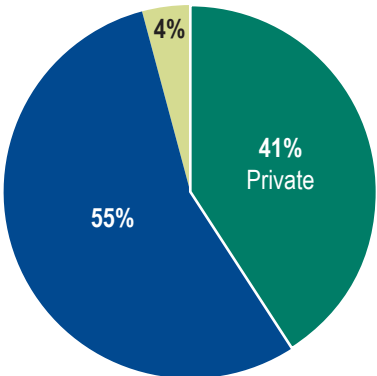
Note: In some Asian countries, the Demographic Health Surveys do not ask questions about contraceptive use or source to unmarried women. Thus, for the analysis of marital status, only countries in Latin America and the Caribbean and Sub-Saharan Africa are included.

Latin America  
and the Caribbean

**Unmarried** young women  
15-24 in LAC

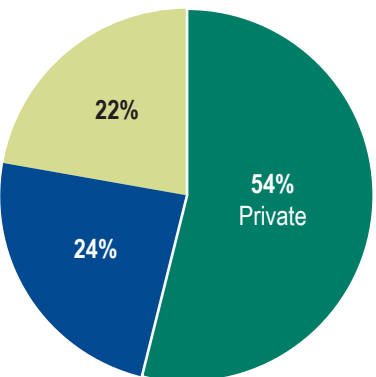


**Married** young women  
15-24 in LAC

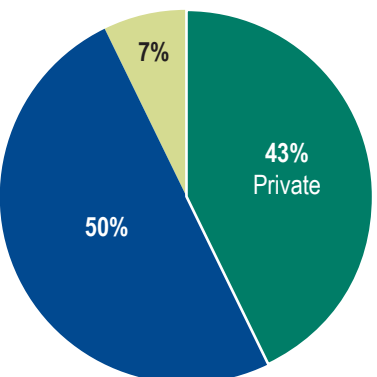


Sub-Saharan Africa

**Unmarried** young women  
15-24 in SSA



**Married** young women  
15-24 in SSA



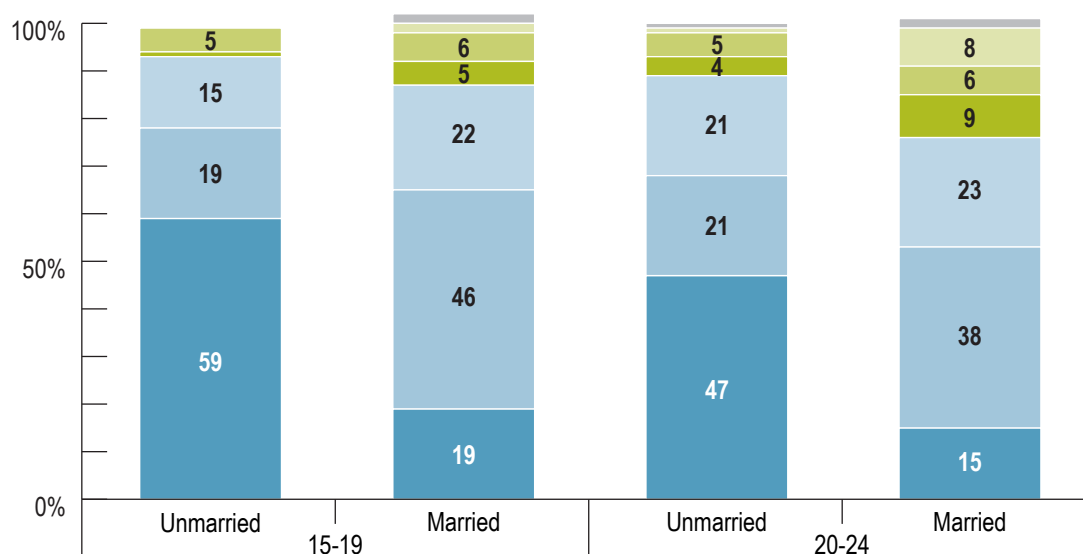
Private   Public   Other

## And Method

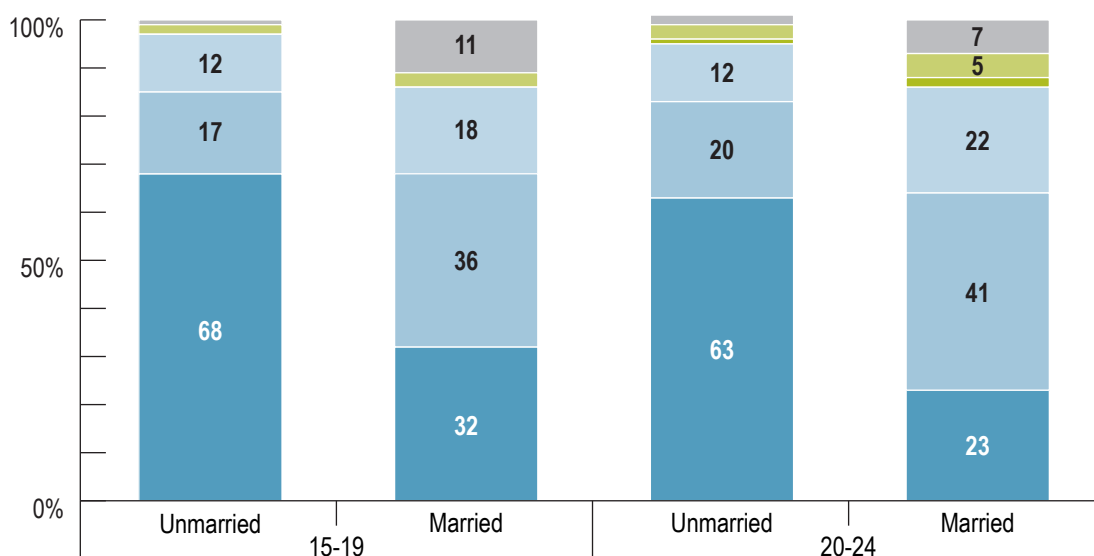
Modern contraceptive method choices among adolescents and young women in Africa and Latin America and the Caribbean differ.

Most unmarried adolescents and young women use condoms, while their married counterparts tend to use injectables.

**Method used by adolescents (15-19) and young women (20-24) in LAC by marital status**



**Method used by adolescents (15-19) and young women (20-24) in SSA by marital status**



**Short-Acting:** Oral Contraceptives, Injectables, Condoms **Long-Acting:** Sterilization, Implants, IUDs, Others







“In our neighborhood, there is a doctor in the public health center and a BlueStar doctor. I chose to go to the BlueStar doctor in Ambodavenina as it is more confidential . . . even if it was further from my home.”

– *Marie Regina, 20, Madagascar*

**Youth deserve the opportunity**  
to access the full range of  
contraceptive methods,  
regardless of source or  
marital status.

The private sector has  
long been a contributor to  
family planning services.  
Engaging with private  
providers will help  
sustain gains made and  
expand access while  
increasing choice.



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**The Strengthening Health Outcomes through the Private Sector** project is the flagship private health sector initiative of the United States Agency for International Development. The five-year project focuses on increasing availability, improving quality, and expanding coverage of essential health products and services in family planning and reproductive health, maternal and child health, HIV, and other health areas through the private sector.

**[shopsproject.org](http://shopsproject.org)**



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