

# Women's Empowerment and Contraceptive Method Use in Egypt

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## INTRODUCTION

Egypt's fertility rate reached a 25-year high of 3.5 births per woman in 2014. Women's use of long-acting reversible contraceptive (LARC) methods such as intrauterine devices (IUDs)—which are associated with fewer unplanned pregnancies and declines in fertility rates compared to short-acting methods like oral contraceptive pills—increased steadily between 1984 and 2000. However, the Ministry of Health and Population has observed a shift from IUDs to oral contraceptive pills in public health clinics since 2011.

Globally, it is assumed that women's empowerment plays an important role in women's choice of a specific contraceptive method. Women's empowerment is the process through which women acquire resources that may enhance women's agency, such as education, or increase their ability to define their life choices. However, no study has explored the relationship between women's empowerment and women's choices between short-acting methods such as the oral contraceptive pill and long-acting reversible methods such as the IUD.

Using data from the 2005, 2008 and 2014 nationally representative Egyptian Demographic and Health Surveys, this research brief reports on a study that examines patterns of contraceptive choices over time in Egypt and uses indicators of women's agency to explore how women's empowerment is associated with the choice of contraceptive methods. Women's agency is measured as high levels of household decision-making and low tolerance of intimate partner violence. The analysis focuses on two groups: 1) 47,545 married women across the three surveys in their childbearing years who, because neither the woman nor her husband are sterilized, could become pregnant, and 2) 43,031 women who make at least one household decision. The second group excludes women who did not make any decisions, allowing for exploration of the differences in contraceptive method choice among decision-makers.

## POLICY IMPLICATIONS

Women's empowerment in Egypt needs to be promoted through pathways of gender equity within the context of the family and community. In addition, gaps in contraceptive method access need to be addressed. Programmatic efforts should encourage women's agency through promotion of interpersonal household control that involves communication and negotiation with spouses as well as gender programming that helps men accept family planning. Concurrently, policymakers and family planning programs need to address the decline in LARC use and subsequent rise in fertility in Egypt. This can be achieved through providing LARC training for physicians in order for couples to access to the full range of contraceptive methods.

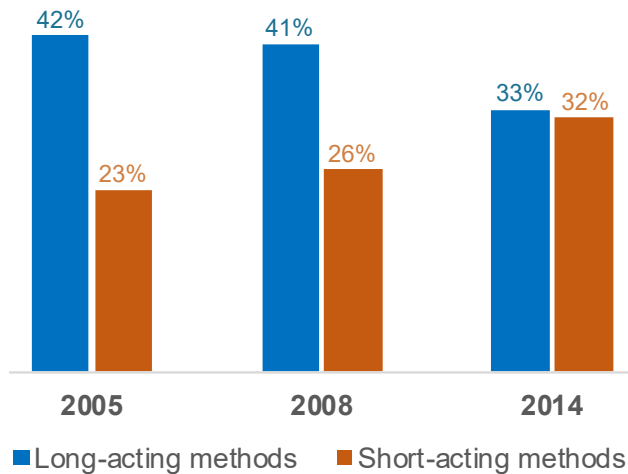
## KEY FINDINGS

- > From 2005 to 2014, LARC use significantly declined in Egypt. In 2014, only 33% of women were using IUDs or contraceptive implants compared to 42% in 2008 and 41% in 2005. In contrast, use of short-acting methods increased to 32% in 2014, from 23% in 2005.
- > Compared to women in both 2005 and 2008, women in 2014 were significantly less likely to use LARC methods vs. no method and LARC methods vs. short-acting methods.
- > More empowered women who make more household decisions on their own and joint household decisions with spouses are more likely to use short-acting and LARC methods compared to no method.
- > Women who are more accepting of intimate partner violence are less likely to use any contraceptive method.

(see figure)

## CONTRACEPTIVE METHOD USE OVER TIME IN EGYPT AND THE ASSOCIATION BETWEEN EGYPTIAN WOMEN'S EMPOWERMENT AND CONTRACEPTIVE METHOD CHOICE

### Contraceptive Use



### The likelihood of using...

LARC methods compared to no method in 2014 (compared to use in 2005 and 2008)	↓
LARC methods compared to short-acting methods in 2014 (compared to use in 2005 and 2008)	↓
Short-acting and LARC methods compared to no method among more empowered women who make more household decisions on their own and joint household decisions with spouses	↑
Any contraceptive method among women who are more accepting of intimate partner violence	↓

The figure on the left shows the decrease in use of long-acting contraceptive methods (e.g., IUDs) from 2005 to 2014 and the increase in use of short-acting methods (e.g., oral contraceptive pills, injectables) over the same period.

The chart on the right, based on multivariate multinomial regression models, shows the association between Egyptian women's empowerment and contraceptive method choice. Downward arrows mean that the likelihood is decreased; the upward arrow corresponds to an increased likelihood.

Source: 2005, 2008 and 2014 Egyptian Demographic and Health Surveys.

### REFERENCE

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