

Bangladesh 2019



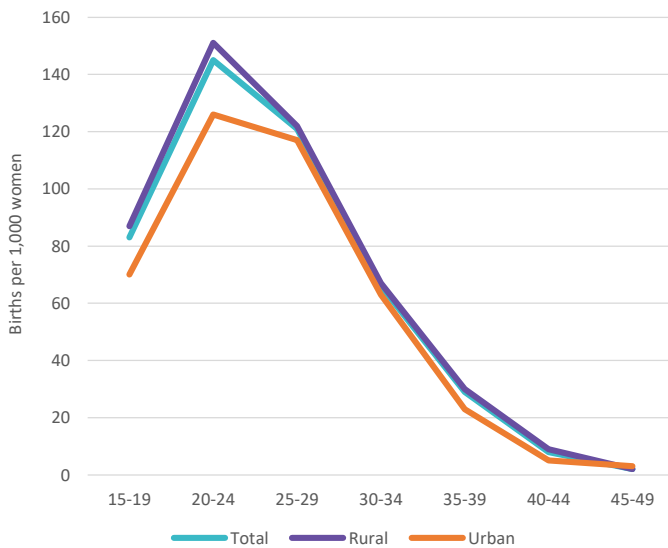
Fertility & Family Planning

Multiple Indicator
Cluster Surveys

Fertility

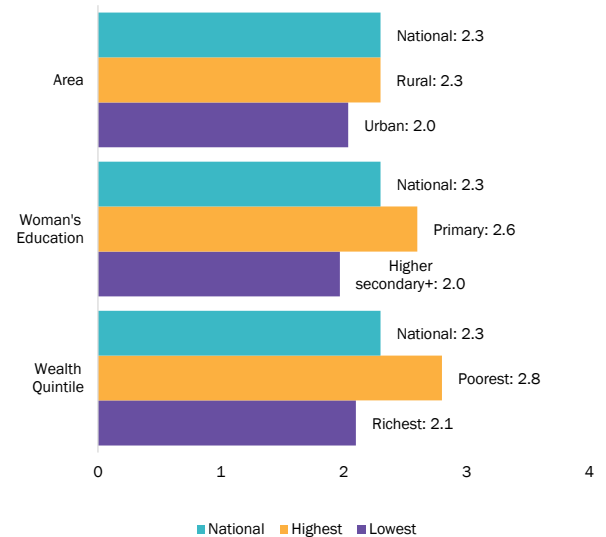


Age Specific Fertility Rates



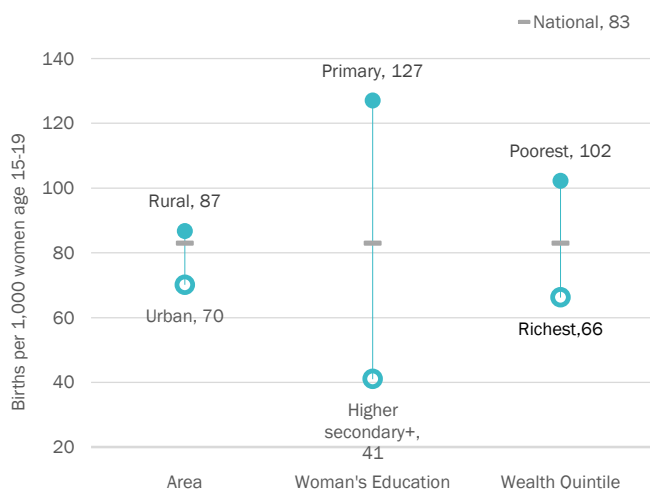
Age-specific fertility rates (ASFR) are the number of live births in the last 3 years, divided by the average number of women in that age group during the same period, expressed per 1,000 women

Total Fertility Rate



The total fertility rate (TFR) is calculated by summing the age-specific fertility rates (ASFRs) calculated for each of the five-year age groups of women, from age 15 through to age 49

Adolescent Birth Rate: SDG Indicator 3.7.2



Age-specific fertility rate for girls age 15-19 years for the three-year period preceding the survey

Adolescent Birth rate SDG 3.7.2 indicator is under target 3.7: By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes

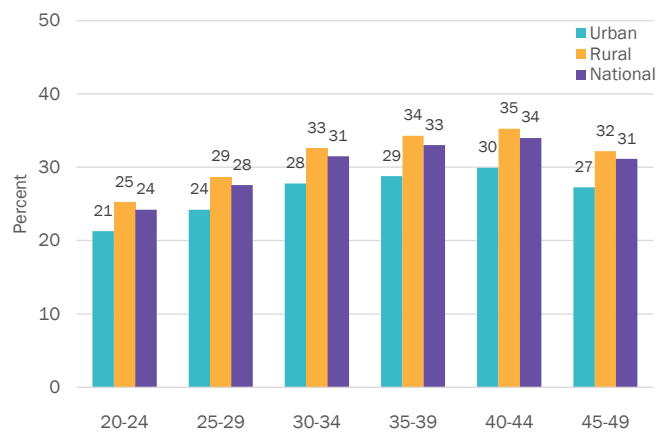
Reducing adolescent fertility and addressing the multiple factors underlying it are essential for improving sexual and reproductive health and the social and economic well-being of adolescents. Preventing births very early in a woman's life is an important measure to improve maternal health and reduce infant mortality.

Early Child Bearing - by Age 18



Percentage of women age 20-24 years who have had a live birth before age 18, by background characteristics

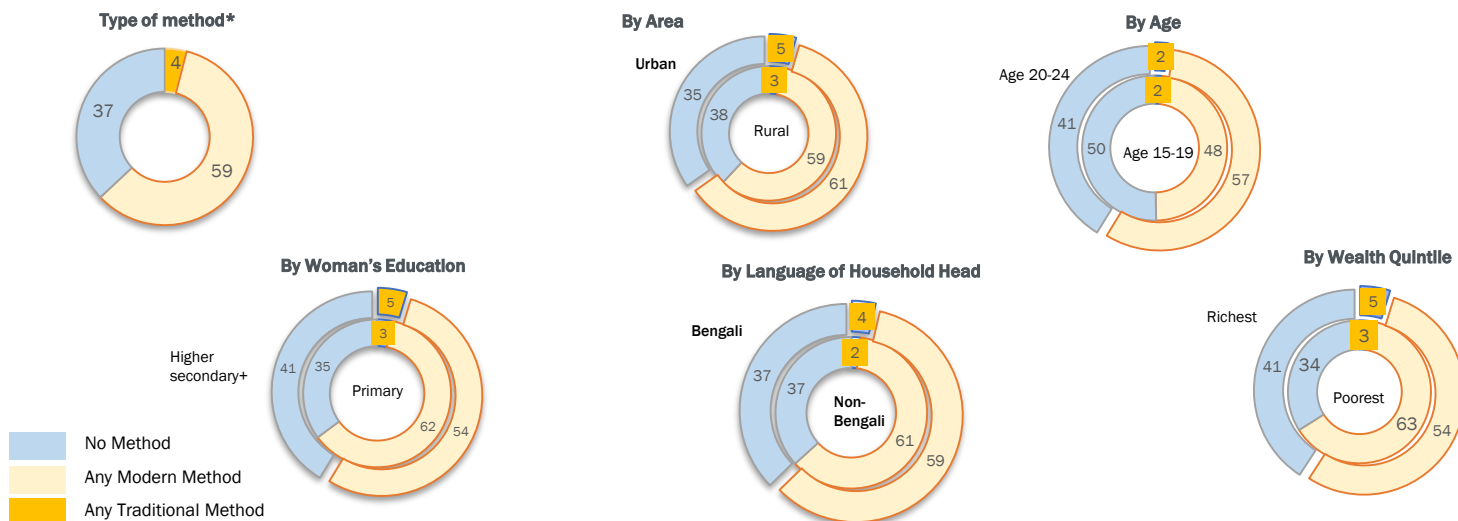
Trends in Early Child Bearing - by Age 18



Percentage of women age 20-49 years who have had a live birth before age 18

Family Planning

Method of Family Planning by Various Characteristics



Percentage of women age 15-49 years currently married who are using (or whose partner is using) a contraceptive method

*Modern Methods include female sterilization, male sterilization, IUD, injectables, implants, pills, male condom, Female condom, diaphragm, foam, jelly and contraceptive patch
Traditional methods refer to periodic abstinence and withdrawal

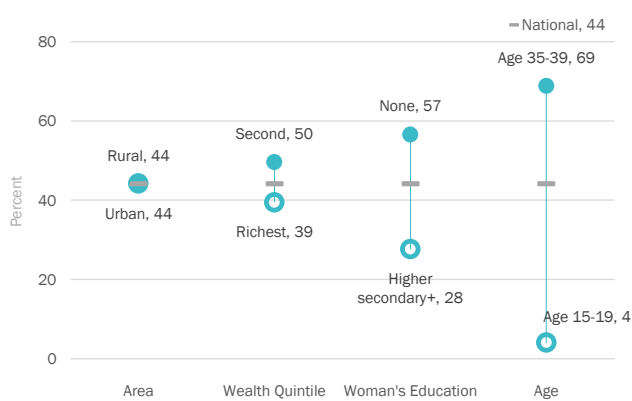
Met Need for Family Planning

Met Need for Family Planning - Spacing



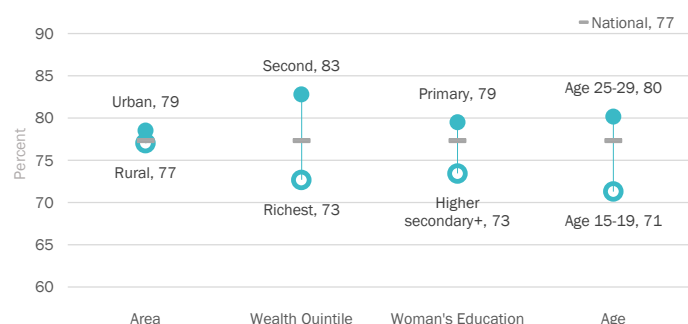
Percentage of women age 15-49 years currently married with met need for family planning for spacing, by background characteristics

Met Need for Family Planning - Limiting



Percentage of women age 15-49 years currently married with an met need for family planning for limiting, by background characteristics

Percentage of Demand for Family Planning Satisfied with Modern Methods - SDG Indicator 3.7.1 (lowest vs highest)



The proportion of demand for family planning satisfied with modern methods (SDG indicator 3.7.1) is useful in assessing overall levels of coverage for family planning programmes and services. Access to and use of an effective means to prevent pregnancy helps enable women and their partners to exercise their rights to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so. Meeting demand for family planning with modern methods also contributes to maternal and child health by preventing unintended pregnancies and closely spaced pregnancies, which are at higher risk for poor obstetrical outcomes.

Divisional Data on Fertility & Family Planning

Division	Adolescent Birth Rate	Total Fertility Rate	Child bearing before 15*	Child bearing before 18	Contraception Use of modern method among married	Contraception Use of any method among married	Demand for family planning satisfied with modern methods among married
National	83	2.3	0.9	24	59	63	77
Barishal	85	2.4	0.8	22	61	63	80
Chattogram	82	2.5	0.6	22	52	55	70
Dhaka	77	2.1	0.7	22	58	62	76
Khulna	88	2.0	0.5	26	58	65	76
Mymensingh	74	2.7	1.4	23	62	64	80
Rajshahi	92	2.0	1.6	34	62	66	82
Rangpur	98	2.3	1.8	29	71	74	87
Sylhet	68	2.6	0.3	15	53	58	75

*Percentage of women age 15-19 years who have had a live birth before age 15

Key Messages

- Information presented in this snapshot refers to married women aged 15-49 years only. In Bangladesh MICS 2019, some questions for modules were not asked to unmarried women aged 15-49 years.

- Findings from this MICS show higher age-specific fertility rates and adolescent birth rates for households in rural areas, among the poorest and those with only primary education.

- The education level of women aged 15-19 shows the most significant difference in adolescent fertility, which suggests that increased access to education could be a decisive factor in reducing adolescent fertility, and thus ensuring the well-being of

adolescents. Alternatively, adolescent women with high birth rates might be deprived of education and therefore in need of increased policy priority.

- Amongst women aged 20-24 years, one in four in rural areas and one in five in urban areas had a live birth before 18 years of age. Women from the poorest households are twice as likely to have a live birth before the age of 18 than women from the wealthiest households. However, data from this MICS demonstrate that education is the most decisive factor when it comes to determining if a woman will have a baby before the age of 18. Five percent of women with a higher secondary educational attainment level had a live birth before 18 years of age, compared to 31% of women with no education.

- Disparities exist in early childbearing in Bangladesh. In Rajshahi, two percent of women aged 20-24 years had a live birth before age 15, and 34% had a live birth before age 18. While childbearing before 15 years of age has reduced over time in Bangladesh, findings from this MICS indicate that early childbearing is still prevalent amongst the population.

- The percentage of women who had a child before 18 years of age varies across the country. In Sylhet division 15% of women aged 20-24 years had a live birth before 18 years of age compared to 34% in Rajshahi division. These data indicate a high prevalence of child marriage throughout the country, requiring more significant awareness-raising and better implementation of the law.

The Bangladesh Multiple Indicator Cluster Survey (MICS) was carried out in 2019 by the Bangladesh Bureau of Statistics as part of the global MICS programme. Technical and financial support was also provided by the United Nations Children's Fund (UNICEF).

The objective of this snapshot is to disseminate selected findings from the Bangladesh MICS 2018-2019 related to Fertility and Family Planning. Data from this snapshot can be found in table TM1.1, TM 2.1, TM2.2, TM2.3, TM3.1 and TM3.3.

Further statistical snapshots and the Survey Findings Report for this and other surveys are available on mics.unicef.org/surveys.