Making Sense of Tanzania’s Fertility: The Role of Contraceptive Use
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The issue
Contraceptive prevalence (CPR) has more than doubled since the early 1990s; yet the total fertility rate (TFR) remains high.

The question
What role have changes in contraceptive use and method mix played in determining fertility trends and differentials in Tanzania?

Methodology
Secondary analysis of:
- Demographic and Health Surveys (DHS) (1991/2, 1996, 2004/5)*
- Reproductive and Child Health Survey (RCHS) (1999)

Findings
Bongaarts’ model suggests:
- No fertility stall in urban areas, but fertility stall in rural areas

Drivers of the rural fertility stall =
- contraceptive use + increase in % in-union

Low CPR in rural areas + early growth in CPR and method mix effectiveness not sustained = less impact on decreasing TFR.

Rural CPR growth offset ↑ in % in-union. Had % in-union not increased, rural TFR would have declined.

The future?
Future CPR increases will play large role in fertility decline:

Tanzania is mostly rural (+70%), so national trend driven by rural stall.

Knowledge contribution
- Rural fertility stall exists, but, can be overcome
- Focus efforts on rural areas to close growing urban/rural gap
- Government’s effort to revitalize FP will play key role in promoting individual rights, slowed population growth, and improved development prospects.

*At time of analysis the 2010 DHS was not yet available

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