According to the 2007 Solomon Islands Demographic Health Survey (SI DHS) there has been a slow but steady decline in fertility rates over the last 20 years. Solomon Islands women have a total of 4.6 children on average.

Fertility levels are lower for women residing in urban areas (Total Fertility Rate [TFR]= 3.4) than rural areas (TFR=4.8). This difference is particularly pronounced in the 15–19 year age group (rural=75 births per 1000, urban= 41 births per 1000).

The initiation of childbirth starts early among Solomon Islands women. Over the past 20 years, adolescent fertility has decreased from 111 live births to 70 live births per 1000 women. A similar decline has taken place amongst 20–24-year-old women (from 256 to 209 live births per 100 women).

The median age at first birth shows a modest increase across Solomon Islands (from 20.8 to 21.6 years). This increase is evident across all regions except for Guadalcanal.

For women aged 25–49, the median age of first sexual intercourse is 18.2, which is lower than age of first marriage (19.9).

There is a higher proportion of women marrying earlier than men. Almost 1 in 10 young women aged 15–19 were married, while no young men in the same age group reported being married, indicating a cultural practice of early marriage for women.

Birth intervals

Close birth interval is an indicator of higher risk of infant mortality in the country. Around 1 in 5 births in Solomon Islands occur less than 24 months after the preceding birth.

Evidence showed close birth intervals particularly among children from Guadalcanal and Malaita.

Polygyny

The survey results indicated that polygyny is not very common, with only 5 percent of women reporting their husband have more than one wife. This was highest in the 15–19-year-old age group (11.3%). Women living in Honiara and in the highest wealth quintiles were most likely to be living in a polygynous relationship.
**Family planning**

Knowledge of at least one method of modern contraception is almost universal among both women and men. In spite of this knowledge and a desire to limit childbearing, only 27.3 percent of currently married women were using some form of modern contraceptive at the time of the survey.

**Family planning: knowledge versus practice**

Of women who are currently using contraceptives, the proportion of sexually active unmarried women using a modern method of contraception (16.2%) is less than for currently married women (27.3%). Among unmarried women who reported using contraceptives, the greatest proportion (14%), stated that they were using condoms.

**Current use of modern contraceptives (married women aged 15–49)**

<table>
<thead>
<tr>
<th>Method</th>
<th>Current use</th>
<th>Knowledge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female sterilisation</td>
<td>13%</td>
<td>79%</td>
</tr>
<tr>
<td>Male sterilisation</td>
<td>0.3%</td>
<td>62%</td>
</tr>
<tr>
<td>Pill</td>
<td>1%</td>
<td>75%</td>
</tr>
<tr>
<td>Intrauterine Device (IUD)</td>
<td>2%</td>
<td>59%</td>
</tr>
<tr>
<td>Injectables (Depo-provera)</td>
<td>9%</td>
<td>87%</td>
</tr>
<tr>
<td>Male condom</td>
<td>2%</td>
<td>89%</td>
</tr>
<tr>
<td>Female condom</td>
<td>42%</td>
<td></td>
</tr>
<tr>
<td>Lactational Amenorrhoea</td>
<td>0.1%</td>
<td>18%</td>
</tr>
<tr>
<td>Method (LAM)</td>
<td>7%</td>
<td>68%</td>
</tr>
<tr>
<td>A traditional method</td>
<td>13%</td>
<td>65%</td>
</tr>
<tr>
<td>Not currently using contraceptives</td>
<td>48.1%</td>
<td>25.1%</td>
</tr>
</tbody>
</table>

**Intended future use of contraceptives (married women aged 15–49)**

Just under 50 percent of currently married women who do not already use contraceptives do not intend to use any in the future.

Of those women who do intend to use some form of contraception in the future, the most popular choices are injectables, female sterilisation and male condoms.

The main reasons women reported for not using contraceptives were that they feared side effects (37%), are subfecund or infecund (15%), or were opposed to the use of contraceptives (15%).

The survey revealed that most Solomon Islands women do not begin to use contraception until they have had at least one child.

There is a direct association between use of modern family planning methods and number of children. Three percent of women with no living children use modern contraceptives (32% with three to four children and 38% with five or more children).

Those that do use contraception mostly obtained it for free (90%). More than 4 in 5 women in Solomon Islands get their contraceptives from government clinics where they are provided for free.

Injectables seem to be the most popular choice, with 38.6 percent stating that it would be their choice for future use of contraception.

Results showed that married women in Solomon Islands generally use contraceptives for birth limiting. There appears to be a slight shift however, toward earlier use of contraception, indicating a desire to delay childbearing among younger Solomon Island women.

**Policy note:**

There has been a slow and steady decline in fertility levels over the past 20 years. However, it remains at an average of 4.6 live births, and current contraceptive use is quite low, with intended future use not much higher. Eleven percent of women reported an unmet need for birth spacing or limiting.

It is possible that with a full range of low-cost contraceptive choices as well as education to dispel some of the myths and fears surrounding contraceptives, more women would choose to use modern contraceptives, particularly in rural areas where access to various options appears to be limited.

Injectables and contraceptives that do not require the male partner’s cooperation currently appear to be popular choices among contraceptive options. It would be beneficial to encourage an open environment where both men and women can discuss contraceptive options.

There were indications of numerous missed opportunities to inform and educate women about contraceptive options and choices, with over three quarters of women reporting that they had not discussed contraceptives with outreach workers or during previous visits to health centres.

*For more detailed information on fertility and family planning see chapters 4, 5, 6 & 7 in the full 2007 SI DHS report.*