

CONTRACEPTIVE BEHAVIOUR

Results of the
representative survey of
adults 2023

CONTRACEPTIVE BEHAVIOUR

Adults 2023

Research report on the representative survey

by Sara Scharmanski and Angelika Hessling

edited by
Federal Centre for Health Education (BZgA)
2024

Contents

Foreword	3
Results at a glance	4
Study design	6
Project profile	6
Methodological notes	7
1 Use of contraceptives	10
1.1 Contraceptive behaviour: the majority of respondents use contraception	10
1.2 Abstaining from contraceptives depending on the phase of life	12
1.3 Contraceptive methods used: condoms are number one	14
1.4 Reasons for choosing the contraceptive method: reliable, simple and well tolerated	18
1.5 Costs as an influencing factor: varying degrees	21
2 Information on the method of contraception used	24
2.1 Subjective assessment: well informed about own contraceptive	24
2.2 Most important sources of information: gynaecological practices and the internet	26
2.3 The internet as a source of information: predominant use of search engines	29
3 The topic of contraception in gynaecological practice	32
4 Attitudes towards hormonal contraception	35
4.1 Increasingly critical attitude towards hormones	35
4.2 Change in attitude more widespread	39
5 Usage problems with contraceptives	42
5.1 The pill: frequently reported usage problems	42
5.2 Condoms: hardly any usage problems reported	45
Appendix	47
Literature	47
List of figures	48
BZgA research on the topic of contraception	49
Contraceptive behaviour 2024	49
Contraception as a topic in other BZgA projects	50
Research topic: health in online communication	51
Imprint	52

Foreword

The Federal Centre for Health Education (BZgA) has been collecting well-founded and up-to-date research data on sexuality education, contraception and family planning for several decades. The recurring survey “Contraceptive behaviour” is a central component of this: it provides us with valuable insights into the use of and attitudes towards contraceptives in the German population.

This study is part of a long tradition of BZgA surveys in this field: the first survey on the contraceptive behaviour of sexually active adults took place in 2003. Further surveys followed in 2007, 2011 and 2018. The current fifth survey iteration was conducted in 2023. This series of studies provides an insight into current contraceptive behaviour in Germany and also looks at changes over time.

In the current iteration of the survey, 1,001 sexually active adults aged 18 to 49 were interviewed by telephone about their contraceptive methods and attitudes. The representative survey focused on the current use of various contraceptive methods, attitudes towards individual contraceptive methods and hormonal contraception in particular, information behaviour and preferred sources of information.

In addition to the topics from the previous iteration of the survey, the current repeat survey takes a closer look at the internet as a source of health information and the importance of costs when choosing a contraceptive.

By continuously collecting scientifically sound data on current contraceptive behaviour, developments and changes in the population can be reliably recorded. The study ensures that the BZgA’s education and advice services meet the current needs and attitudes of the population.

We wish you fresh perspectives and informative insights into the subject area.

Your Federal Centre for Health Education (BZgA)

Cologne, July 2024

Results at a glance

I Contraception: a matter of course

Seven out of ten men and women between the ages of 18 and 49 who have been sexually active in the last twelve months are currently using contraceptives (70 %). The use of contraceptives is most common among younger people under the age of 30 (85 %). Relationship status is also relevant: people without a steady relationship use contraception more frequently (83 %).

» [Chapter 1.1](#)

Most important contraceptives: condoms and the contraceptive pill

Condoms and the pill remain the most important contraceptives in Germany. However, the development of the use of these two main contraceptives could hardly be more contrasting. While the pill was the most commonly used contraceptive until 2011, there were already signs of a massive shift away from it in 2018. Use of the pill has steadily declined since then. Today, only 38 percent of the contraceptive population still use the pill – almost a third less than in 2007 (then 55 %).

Condoms, on the other hand, are becoming increasingly popular: at 53 percent, they are being used more frequently than the contraceptive pill for the first time. In 2007, the figure was only 36 percent.

Contraceptive pill use is still most widespread in the youngest age group: women and men between the ages of 18 and 29 who use contraception (46 %). However, this group also shows the declining trend in use most clearly: in 2011, pill use among them was still at 72 percent. At the same time, significantly more young adults (18 percent) now use an IUD/IUS than in 2011 (3 percent).

» [Chapter 1.3](#)

Contraceptive methods: attitudes towards hormonal contraception increasingly critical

This fundamental change in contraceptive behaviour is based on an increasingly critical attitude towards hormonal contraceptive methods. 61 percent of sexually active women and men agree with the statement that contraception with hormones has “negative effects on mind and body” – in 2018, only 48 percent agreed with this. 15 percent of women using contraception justify their choice of contraceptive with a general rejection of the pill or other hormonal contraception. Twelve years ago, only 1 percent of women stated this.

The now predominantly negative attitude is also expressed with regard to other aspects of hormonal contraceptive methods: fewer respondents than in 2018 agreed with the statements that “using hormonal contraceptives for years is harmless” or that they were “also suitable for very young girls” (the rejection of these statements has seen an increase of 4 and 9 percentage points respectively). It can also be seen that hormone-critical attitudes are now represented in all sections of the population, including men and older people.

» [Chapter 4.1](#)

» [Chapter 4.2](#)

Contraceptives: best reliable, uncomplicated and well tolerated

When choosing a contraceptive, the decision is primarily based on its reliability (39 %) and ease of use (30 %). For 25 percent, good tolerability is now one of the most important factors.

» [Chapter 1.4](#)

The cost of a contraceptive is an important factor for 30 percent of all women using contraception, but only for 9 percent of men who use contraception. The cost

factor is most relevant for younger women under the age of 30 (41 %). In contrast, the cost factor is usually not a decisive factor for men, regardless of age. And: the lower the disposable income, the more likely it is that the costs will also be taken into account when deciding in favour of a contraceptive.

» [Chapter 1.5](#)

Those who do not use contraception usually have good reasons for not doing so. For older sexually active women and men, the main reason is that they cannot have children (any more) (53 % of 40 to 49-year-olds). Younger people most frequently cite a desire to have children (49 % of those under 40 who do not use contraception).

» [Chapter 1.2](#)

Information: research on the internet, good advice in gynaecological practice

Almost all respondents feel sufficiently informed about the contraceptive method they use – 94 % of contraceptive users describe their own level of information as “good” or “very good”. The gynaecologist remains by far the most important source of contraceptive information for women (73 %). Information on the internet for contraceptive education has become significantly more important over the past five years, regardless of the person’s sex – for a total of 48 percent, the internet is now one of the most important sources of information. For the first time, the web is the most frequently cited source of information for men.

If information was obtained on the internet, search engines such as Google were clearly the most important tool (80 %). Websites with a special educational or advice focus were in second place (51 %).

» [Chapter 2.1](#)

» [Chapter 2.2](#)

» [Chapter 2.3](#)

When it comes to contraceptive advice, contraceptive users in Germany most frequently trust the advice of medical professionals, in particular from gynaecological professionals. At 66 percent, this is once again well ahead of the recommendations of family doctors, which were cited by a total of 30 percent of respondents.

Gynaecologists play a central role for the female part of the population when it comes to providing contraceptive information. For half of the women who visited a gynaecological practice in the past twelve months (and this applies to almost all women), contraception was also a topic of discussion there. Almost four out of five rate these consultations as helpful (78 %). Although most women felt reassured in their previous contraceptive practice because of the advice received, they were almost twice as likely to change their contraceptive method than five years ago (16 % compared to 9 %).

» [Chapter 3](#)

Usage problems: reported more frequently with the pill than with condoms

At 64 %, women who use the pill report problems with its use almost twice as often as men who use condoms (35 %). Compared to the 2018 survey, female users now report fewer difficulties when using the pill (down from 78 % to 64 %) – although it should be noted that the number of women using the pill has decreased significantly since then. The main problem with the contraceptive pill remains: the need to take it regularly. 39 percent of pill users cite this as a problem. In addition, a total of 36 percent of reasons relate to physical effects or side effects.

The problems associated with using condoms that are reported by men are more varied. The most frequently reported problem is burst or torn condoms (13 %).

» [Chapter 5.1](#)

» [Chapter 5.2](#)



Study design

In 2023, the Federal Centre for Health Education (BZgA) conducted this nationwide, representative repeat survey. The study examines the knowledge and assessments of contraceptive behaviour in Germany from the perspective of the sexually active population aged 18 to 49. For the purposes of this study, this includes women and men who say they have “been intimate with someone” in the past twelve months.

Project profile



Project participants:

Dr Sara Scharmanski, BZgA
Arthur Guzy, Kantar Public (now: Verian)

Client:

Federal Centre for Health Education (BZgA)

Data collection:

Kantar Public (now: Verian)



Survey area:

Federal Republic of Germany



Period:

Project period: May to December 2023
Period of data collection: August to September 2023



Target group/sample:

- Representative random sample
- 1,001 interviews, 500 of which were with men and 501 with women
- Target group: sexually active adults between the ages of 18 and 49



Survey method:

Telephone interviews (CATI)



Previous surveys:

2003, 2007, 2011, 2018



You can find more information [online](#).

Kantar Public (now: Verian) is responsible for collecting and analysing the data for this report.

Methodological notes

The survey is based on a representative random sample within the framework of a multi-topic telephone survey via landline and mobile phone (so called dual-frame approach). The sampling procedure uses the ADM master sample as the basis for selection and is carried out using the “random last two digits” method.

Further information and primary sources on the ADM design for dual-frame telephone samples are available on the website of the industry association Arbeitskreis Deutscher Markt- und Sozialforschungsinstitute e.V. (ADM) (cf. ADM, n. d.).

Carrying out the survey

The survey was conducted by Telquest GmbH. The CATI interviewers took part in a set series of standardized training sessions and received study-specific information. Before the beginning of each interview, the interviewees were instructed in data protection law and actively consented to the data processing.

A special feature of the survey: male respondents were interviewed exclusively by male individuals, female respondents by female individuals. The aim of the measure was to prevent gender bias and to strengthen the relationship of trust in the interview situation, as the survey contains sensitive questions.

It is recognised that the binary concept of woman and man does not reflect the reality of life for all people. However, a non-binary differentiation by gender must be dispensed with. This approach is solely due to methodological necessity and not to a lack of a diversity-sensitive perspective. For this same reason, the term “sex” (biological aspects, assigned by birth) continues to be used (in contrast to “gender” in the sense of social construction, gender identity as personal internal perception of oneself) to enable statements on long-term trends (see also Office for Statistics Regulation, 2024). In addition to the binary sex categorisation based on the interviewees’ assessment, gender identity and sexual orientation were also surveyed. A total of 1 percent of respondents described their gender as diverse, while a further 1 percent did not specify. The responses regarding sexual orientation show that a total of 7 percent of the sexu-

ally active men and 11 percent of the women surveyed stated an orientation that was not clearly heterosexual. This includes homosexual and bisexual individuals, as well as those who do not feel attracted by women or men or who do not provide any information on this matter.

However, comparative analyses according to sexual orientation and gender identity are not possible without distortion due to the small number of cases.

Target group and sample

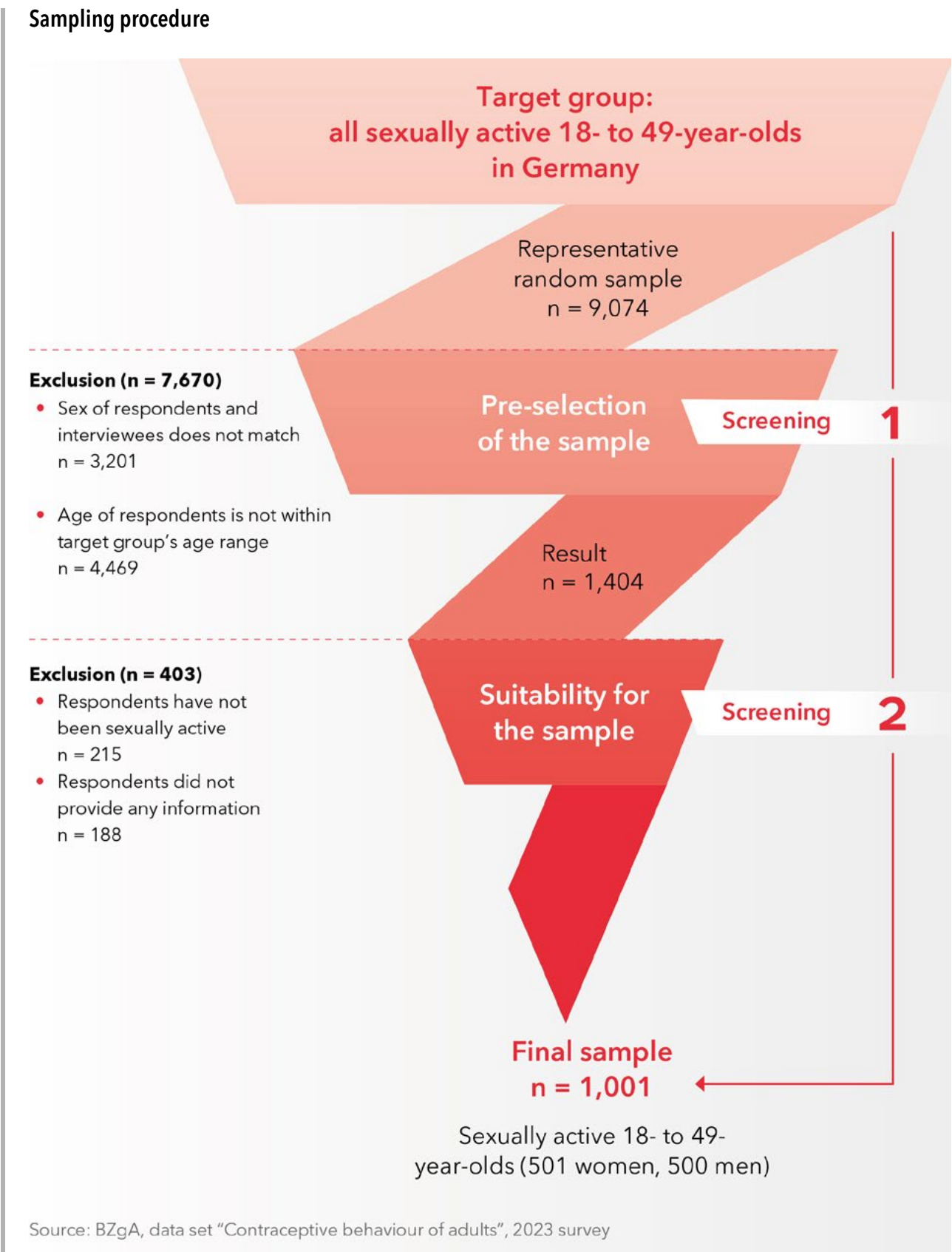
This study on the contraceptive behaviour of adults focuses on the population group of sexually active adults between the ages of 18 and 49 in Germany. A two-stage screening procedure was used to survey this target group (see Figure 1). A total of 9,074 interviews were conducted as part of the study, of which 7,670 had to be discarded in the first screening step. Of these, the sex of the interviewee and interviewer did not match in 3,201 interviews. In a further 4,469 interviews, the age of the interviewee was outside the target group, i.e. outside the age range of 18 to 49 years.

The remaining 1,404 respondents were asked the following question in the second screening step: “People are very different in their sexual habits. Some are more active, some less active, and everyone has times in their lives when nothing happens sexually. What about you: have you been intimate with someone in the last twelve months?” In the second screening step, 215 adults between the ages of 18 and 49 explicitly stated that they had not been sexually active in the last twelve months. A further 188 adults were unable or unwilling to answer this question. These two response groups were also excluded from the study. This corresponds to 403 interviews.

Finally, 1,001 interviews were included in the sample, i.e. the interviews of all adult respondents who stated that they had been sexually active in the last twelve months and who completed the entire questionnaire. The questionnaire used in the study included a standard block of sociodemographic questions and 17 substantive questions. The average interview duration was 6.9 minutes.

Sampling procedure

FIGURE 1



Weighting of the data

All results presented in this report are based on weighted figures. The data was weighted on the basis of the total sample, which includes all individuals aged 14 and over. The weighting procedure used controls for the following characteristics: federal state, city size, sex, age, occupation, education and household size. As a section of this overall sample, the results of the target group relevant here are also representative of people aged between 18 and 49 and can be transferred to the population within the statistical fluctuation ranges.

Socio-demographic characteristics

A number of socio-demographic characteristics were collected during the interviews. In order to prepare this data for the analyses in this report, key characteristics were grouped or summarised. The most important sub-groups for the research report are briefly described below.

Age groups

- 18 to 29 years
- 30 to 39 years
- 40 to 49 years

Education indicator: school-leaving qualifications

- Elementary school/Hauptschule (basic level of education)
- Schools with intermediate educational qualifications (moderate level of education)
- A-levels/Level 3 qualifications and above (high level of education)

Net household income

- up to 1,500 euro
- 1,500 to under 2,500 euro
- 2,500 to under 3,500 euro
- 3,500 euro or more

Data analysis and visualisation

All surveys based on random samples are subject to statistical uncertainty. The survey results can therefore deviate to a certain extent from the "true" opinion of the population as a whole. In this survey, this so-called margin of error is up to ± 3 percentage points.

All displayed proportional values are rounded off to whole numbers. Due to rounding, it is possible that proportional values in the graphs do not add up to 100 percent. For the same reason, categories summarised by addition (e.g. so-called "top two values" such as "very satisfied" and "fairly satisfied") may differ from the sum of the individual categories shown. In the case of questions with several answer options, the summed responses may exceed 100 percent.

Where methodologically appropriate, results from previous surveys are presented to show changes over time. For individual questions, the data goes back to 2003; further surveys were conducted in 2007, 2011 and 2018.

1

Use of contraceptives

The study focuses on the population group of sexually active adults between the ages of 18 and 49. It provides insights into how and whether contraception is used and which reasons influence the choice of contraceptive methods. The aim of the survey is also to investigate the reasons for not using contraception.

1.1 Contraceptive behaviour: the majority of respondents use contraception

Anyone who stated that they had been sexually active in the past 12 months generally used contraception during sexual activity.

- Seven out of ten respondents state that they currently use contraception during sexual intercourse (70 %, [see Figure 2](#)).
- Five years ago, this figure was similar at 71 percent.
- In 2011, the earliest year for which data is available from this series of studies, slightly more respondents (76 percent) stated that they were using a contraceptive.

If we look at sexually active adults who use contraception, the factors of sex, relationship status and, above all, age are interesting – because these factors are associated with the contraceptive behaviour of sexually active adults.

Percentage of respondents not currently using contraception

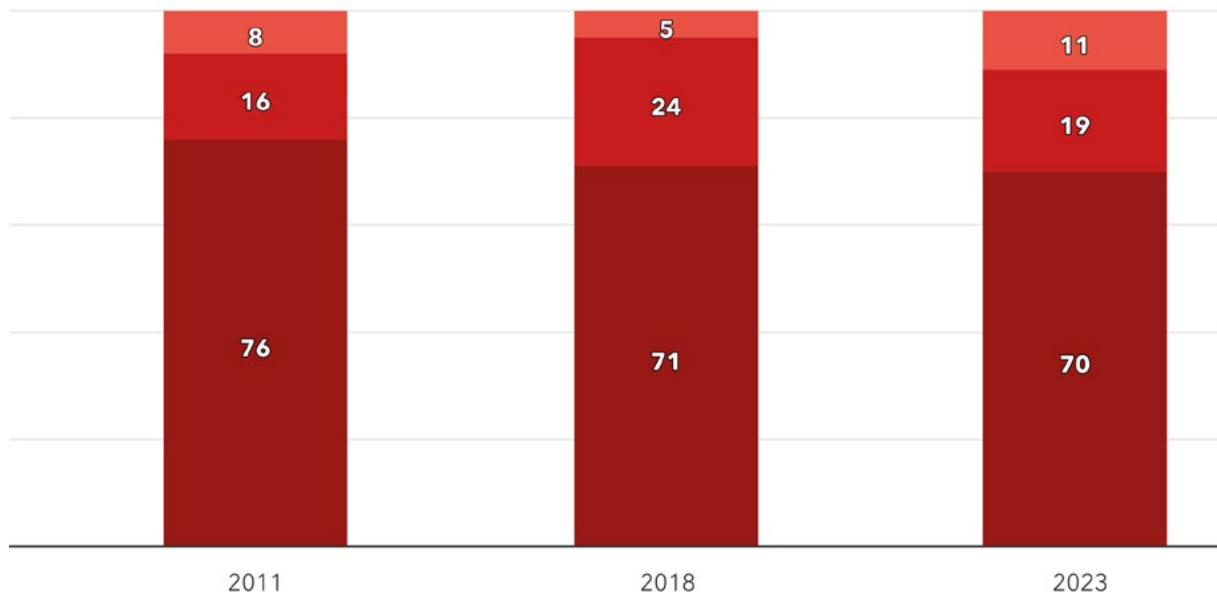
11 percent of respondents currently prefer not to provide any information on the topic. In previous iterations of the survey, this proportion was slightly lower (8 % at most). In contrast, 19 percent explicitly state that they are currently not using contraception. This means that the percentage of respondents currently not using contraception is lower than in the study from 2018 (24 %), but slightly higher than in 2011 (16 %). A look at the motives in [the following chapter 1.2 Abstaining from contraceptives](#) shows that the vast majority have good reasons for not using contraception.

FIGURE 2

Current contraceptive behaviour - trend

Question: Are you or your partner currently using contraceptives or are you using contraceptive methods?

■ Yes, I use contraception ■ No, currently not ■ Don't know, no data



Basis: Sexually active respondents (2023: N = 1,001) | Figures in percent

Quelle: BZgA, data set "Contraceptive behaviour of adults", survey 2011, 2018, 2023

Factors sex, age, relationship status

Men and women are very similar with regard to contraception - there is currently only a difference of 2 percentage points (see Figure 3).

The most obvious socio-demographic factor that has an impact on contraceptive behaviour is age. 85 percent of those under 30 use contraception during sexual activity, while the figure is as high as 95 percent among respondents up to the age of 24. In comparison, women and men in the oldest age cohort analysed (40 to 49 years: 59 %) have the lowest rate of contraceptive use. And: this age progression can be observed in a very similar way among women and men (see Figure 3).

Furthermore, existing relationships have an impact on the extent to which contraceptives are used during sexual intercourse. Steady relationships are themselves related to age - women and men aged 30 and over are significantly more likely to be in relationships than younger sexually active people, at 88 percent. Among respondents aged between 18 and 24, for example, the figure is only 72 percent. At 69 percent, respondents who are in a steady relationship are less likely to use contraception than those without a partner (83 %).

FIGURE 3

Current contraceptive behaviour by sex and age

Question: Are you or your partner currently using contraceptives or contraceptive methods?

Sex



Age



Basis: 1,001 Sexually active respondents | Yes answers in percent
 Quelle: BZgA, data set "Contraceptive behaviour of adults", 2023 survey

1.2 Abstaining from contraceptives depending on the phase of life

Not using contraception should not be equated with recklessness or ignorance. A look at the motives shows that the vast majority of people have good reasons for not using contraception during sexual intercourse.

As already shown, contraceptive behaviour is strongly dependent on age - this is also the case for the proportion of women and men who state that they currently do not use contraceptives (see Figure 4). While this only applies to less than one in ten sexually active respondents under the age of 30, the proportion increases to 26 percent with increasing age. Among women aged 30 and over in particular, the proportion not using contraception is significantly higher than among men of the same age (27 % compared to 19 %).

Desire to have children and not using contraception

Of the 19 percent who currently state that they do not use contraception, around a third (6 %) are women and men who wish to have children or are already expecting a child. Among respondents under the age of 40 who are not using contraception, the desire to have children is the single most frequently cited reason.

Another 6 percent attribute their decision not to use contraception to the fact that they or their partner cannot have children (anymore) - this is by far the most common reason among older respondents. Below the age bracket of 30, the proportion of those not using contraception is comparatively low (only 9 %). If 18 to 29-year-olds do not use contraception, they usually do so because they would like to have a child or are already pregnant. Other reasons only play a subordinate role.

However, it is the 30 to 39 decade in which the desire to have children is most pronounced overall and is the main reason for not using contraception: around half of those not using contraception at this age do not use contraception because they want to have children (49 %). This corresponds to 10 percent of all sexually active people in this age group. The desire to have children is much lower among significantly younger or significantly older respondents (4 % in each case).

Not using contraception in relationships

Relationships were identified in [Chapter 1.1 Contraceptive behaviour](#) as a key differentiating feature with regard to contraceptive behaviour. Accordingly, contraceptive use is avoided twice as often in stable relationships as in casual relationships (21 % compared to 11 %). The reasons for not using contraception also differ: by far the most common reasons cited by respondents in relationships were a current desire to have children or the fact that the respondents themselves or their partner cannot have children (anymore) (7 % each). If there is no partner, these motives are stated just as frequently as the simple reason that there is currently no sexual intercourse (1 % to 3 % each).

The fact that women not in a steady relationship (15%) are significantly more likely to report that they are currently not using contraception than men without a partner (8 %) is due in particular to the fact

that this group refers significantly more frequently to a desire to have children or a pregnancy (6 % compared to 1 %).

Other reasons for not using contraception

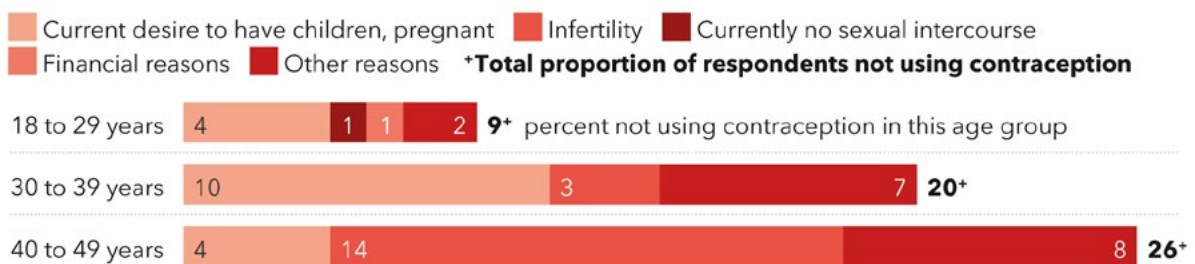
The fact that there is currently no sexual intercourse and contraception is therefore not necessary does not play a significant role in the overall view of contraceptive behaviour (less than 1 %).

A total of 6 percent of sexually active respondents gave other reasons why they were not currently using contraceptives. In these cases, the reasons were recorded in the interview as open-ended responses. The documented reasons vary widely. In most cases, it was recorded that contraception was not necessary in the current life situation: for example, due to age or health reasons or because they simply wanted to “take their chances”.

FIGURE 4

Reasons for not using contraception

Question: Are you or your partner currently using contraceptives or contraceptive methods? Currently not, because ...



Basis: 1,001 Sexually active respondents | Deviations in the total are due to rounding | Figures in percent
 Source: BZgA, data set “Contraceptive behaviour of adults”, 2023 survey

1.3 Contraceptive methods used: condoms are number one

In order to be able to better compare the prevalence of individual contraceptives, the following passages focus on the group of people who use contraceptive methods during sexual encounters – respondents not using contraceptives are not included in the analysis.

The most common contraceptive methods

Condoms and the pill remain the most important contraceptives in Germany – the majority of the German population between the ages of 18 and 49 who use contraception are still most likely to rely on at least one of these two contraceptive methods. This currently applies to 76 percent of contraceptive users, with only 24 percent relying exclusively on other methods (see Figure 5).

The development of use of the two main contraceptives could hardly be more contrasting: While the pill was the most commonly used contraceptive in the 2007 and 2011 survey iterations (at least 53 % use among contraceptive users), a massive change was already apparent in 2018. At that time, condoms and the pill were on a par overall for the first time (46 % and 47 % respectively). The use of the pill has continued to decline since then, with only 38 percent of contraceptive users still using it today. In comparison: In 2007, this figure was still 17 percentage points higher at 55 percent.

At currently 53 percent, condoms are used significantly more often than the pill for contraception for the first time. Compared to 2007 (36 %), there has been a mirror-image increase of 17 percentage points.

This drastic change in contraceptive behaviour is based on an increasingly critical attitude towards hormonal contraceptive methods – more on this in [Chapter 4 Attitudes towards hormonal contraception](#). There has also been a change in terms of sole use: 23 percent of contraceptive users currently use the pill alone, compared to 34 percent five years ago and 37 percent in 2011. The exclusive use of condoms has increased from 20 percent to 36 percent in the same period.

All other contraceptive methods referred to are much less widely used. The copper coil or hormonal IUSs are also used most frequently. At currently 14 percent, a slight upward trend can also be observed here compared to the last iterations of the survey (up to a maximum of 11 % in 2018).

Sterilisation is used as a contraceptive method in 6 percent of cases – such a procedure is still significantly more common in men (4 %) than in women (1 %). This means that sterilisation is about as common as it was in 2018 (5 %); in 2011, 9 percent still used this method.

In contrast, all other contraceptive methods are only used by comparatively few sexually active people, including so-called natural methods of family planning (NFP for short) or the use of fertility monitors (combined: 4 %). The changes over the years are minor.

FIGURE 5

Contraceptives used - trend

Question: Are you or your partner currently using contraceptives or contraceptive methods?
Here: The 5 most common methods



Basis: Respondents who use contraception (2023: n = 711) | Multiple responses possible | For 2007: 20 to 44 years, then 18 to 49 years | Figures in percent

Source: BZgA, data set "Contraceptive behaviour of adults", 2007, 2011, 2018, 2023 surveys

Contraceptive methods used by sex

The question about the contraceptive methods used was deliberately posed in such a way that the contraceptives of all sexual partners involved had to be taken into account (see Figure 5). Nonetheless, there is still a difference between men and women when it comes to the main contraceptive method: when it comes to the use of condoms, the main responsibility lies with the man, which is why they are cited much more frequently by men (61%) than by women (44%). This discrepancy was already observed to a similar extent in 2018 and 2011 (19 and 16 percentage points respectively, now 17 points) – but at a lower level of responses at the time.

With regard to the pill, there are hardly any differences in the statements by sex: women report it only slightly less often (35%) than men (41%). The differences were already minimal in the previous survey iterations (maximum 1 percentage point). This also means that the overall decline in the use of the pill is confirmed by both sexes.

Relevant sex differences can only be seen in the use of the contraceptive coil. As was the case in 2018 and 2011, women reported using the IUD/IUS about twice as often as men (19% compared to 10%).

Contraceptive methods used according to phase of life

Depending on the phase of life, contraceptive behaviour also changes - this can be clearly seen in the different response behaviour of the three age cohorts under consideration, also in a long-term comparison with 2011 (see Figure 6).

The highest proportion of pill use is still found in the youngest age group, women and men aged between 18 and 29 who use contraception (46 %). In the older cohorts, the proportion of use does not increase over 37 percent.

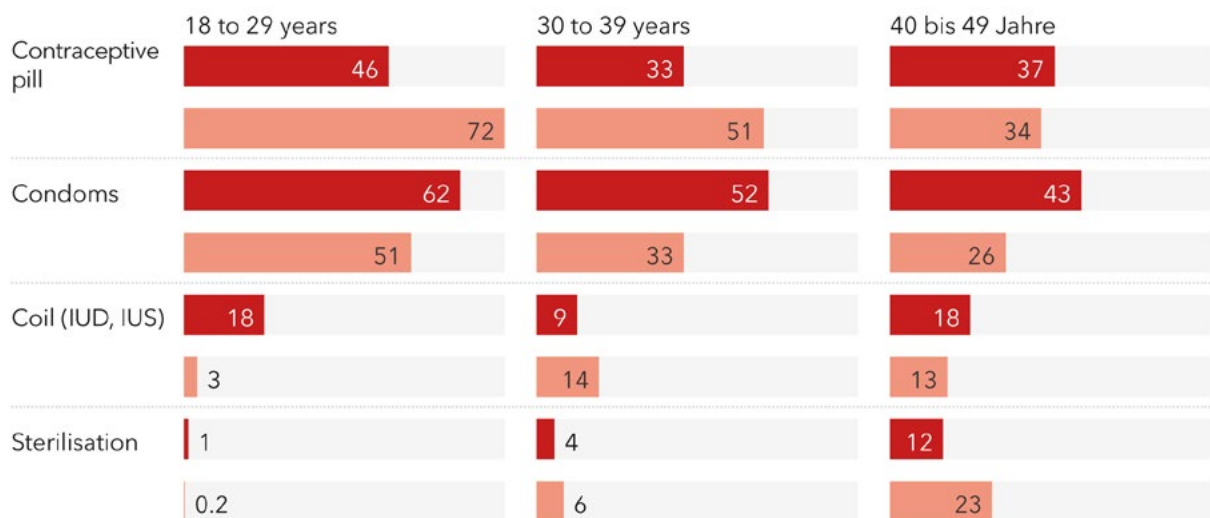
At the same time, however, the younger age group also shows the clearest decline in pill use. Across all available survey iterations since 2011, a decrease totalling 26 percentage points can be seen. Among respondents aged between 30 and 39, pill use has fallen by 18 percentage points in the same period. Interestingly, no such decline can be observed among older respondents: in 2011, 34 percent of this age group stated that they used the pill; in 2018, the figure was 39 percent, similar to today (37 %).

FIGURE 6

Contraceptives used by age - trend

Question: Are you or your partner currently using contraceptives or contraceptive methods?

■ 2023 ■ 2011



Basis: Respondents who use contraception (2023: n = 711) | Multiple responses possible | Shown: most frequent responses in percent

Source: BZgA, data set "Contraceptive behaviour of adults", 2011, 2023 surveys

As in the previous studies, the younger population under the age of 30 not only has the highest proportion of pill users, but also uses condoms most frequently in the same age group. However, the differences between the three age cohorts analysed have become somewhat smaller as a result of the general increase in condom use. In 2011, they were still 25 percentage points, at the end of the decade 24 points, and today there is only a 19 percentage point difference between the age cohorts analysed. The fact that condoms are used more frequently can be attributed to the increasing use among contraceptive users aged 30 and over: among 30- to 39-year-olds, increases of 19 percentage points have been observed over the last twelve years, and among 40- to 49-year-olds an increase of 17 points has been recorded. Younger people under the age of 30 also use condoms as a method of contraception more frequently today than twelve years ago. However, due to the already high level of use, the further increase of 11 points is proportionately lower here (see Figure 6).

In 2011, the pill was the main contraceptive across all age groups until 2018, when the condom was listed most frequently for the first time among young people under 30 (then 58 %, pill: 56 %). Today, the situation is different: the condom is now the most commonly used contraceptive in all three age groups analysed.

Other contraceptive methods and special features

Although all other contraceptive methods quoted do not play anywhere near the same role as the two main methods, condoms and the pill, the age comparison also provides further relevant findings here: compared to the last survey on contraceptive behaviour in Germany, the copper coil or hormonal IUSs are currently used more frequently (plus 4 percentage points). On closer inspection, this development is mainly due to the increase in use among younger contraceptive users. In 2011, the IUD/IUS was still the contraceptive method of choice for only 3 percent of 18 to 29-year-olds; in 2018, this figure was barely higher at 5 percent. Today, on the other hand, 18 percent rely on contraception with an IUD/IUS. This means that there is no longer any difference in the use of the IUD/IUS compared to the 40 to 49 age group. Older people aged between 40 and 49 also use it 18 percent of the time (up 5 percentage points compared to 2011).

The situation is different in the middle age group, where 9 percent state that they use the coil, a decrease compared to 2011 (minus 5 points compared to 2011). Compared to the result five years ago, however, the usage base in this age band has stabilised somewhat (5 % at that time).

Sterilisation is still relatively important today, especially for contraceptive users aged 40 and over (12 %). Furthermore, such a surgical procedure for contraceptive purposes is particularly relevant for them in relation to the male partner (10 %), while sterilisation of the woman is named by 3 percent of respondents aged 40 and over. In 2011, almost twice as many people in this age group were still using contraception (23 %), but by the time of the next survey iteration in 2018, the proportion had already fallen to its current level (12 %). Among contraceptive users under the age of 40, sterilisation hardly played a role then or now (from 2011, a maximum of 6 % in each case).

Condoms are very important for those who are not in a steady relationship: 68 percent of them say they use condoms for contraception. The majority of these women and men also use condoms exclusively (49 %).

Other contraceptive options such as natural family planning methods (temperature measurement, mucus monitoring), vaginal rings, other hormonal contraceptives (three-monthly injections, hormone implants, etc.) and coitus interruptus are most likely to be used by women aged 30 to 39 years (between 2 % and 6 % in each case).

1.4 Reasons for choosing the contraceptive method: reliable, simple and well tolerated

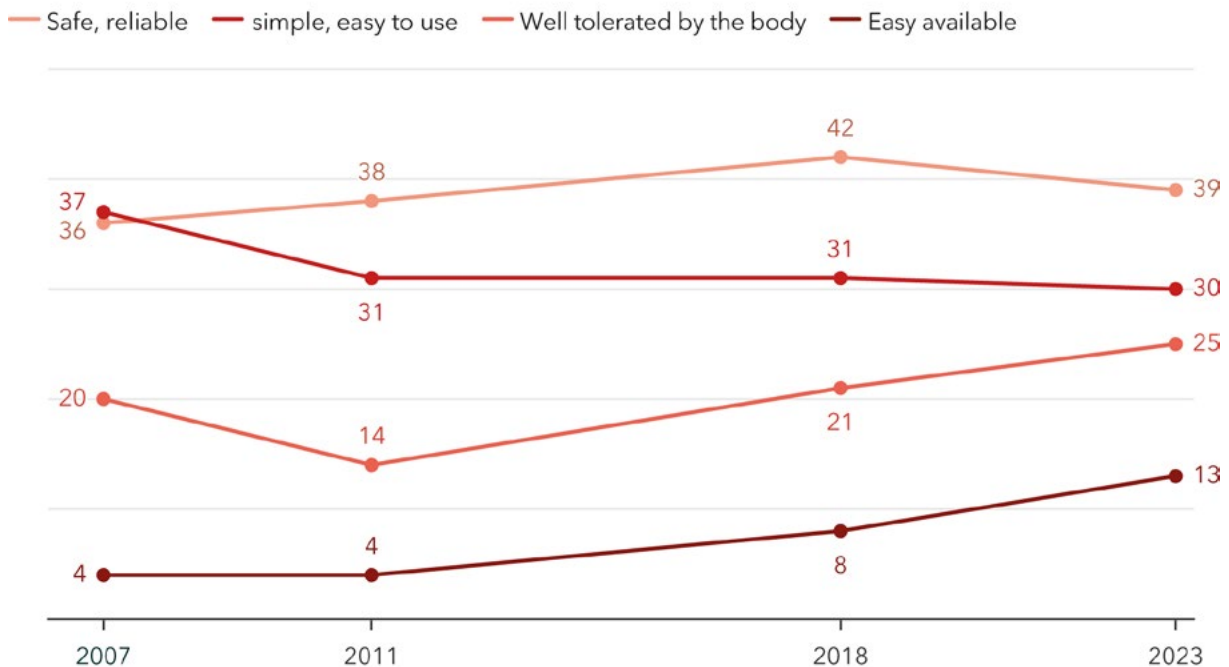
The main reason given by the respondents for choosing their contraceptive remains unchanged: the conviction that the contraception is safe and reliable. Currently, almost four out of ten respondents who are using contraception at this time cite the safety argument (39%, see Figure 7). Apart from minor fluctuations, this reason was also cited to a similar extent back to 2007. The same applies to the extent to which the contraceptive method is easy, practical and convenient to use: three out of ten contraceptive users currently consider this to be relevant to their contraceptive decision (30 %).

The other most frequently cited reasons also remain unchanged in their ranking compared to previous years - although there have been clearer shifts in attitudes in the recent past. For example, more and more contraceptive users are choosing their contraceptive method with the least possible side effects in mind. At 25 percent, this reason reaches its highest value in the current measurement over time, after an increase was already observed in 2018 (see Figure 7). Tolerability is also addressed in the form of another aspect: 9 percent currently state that they are intolerant to the pill and other hormonal contraceptive methods or generally reject them.

FIGURE 7

Reasons for choosing a contraceptive method - trend

Question: Why did you or your partner decide in favour of this contraceptive or this method? Here: The most frequently reported reasons



Basis: Respondents who use contraception (2023: n = 711) | Multiple responses possible | For 2007: 20 to 44 years, then 18 to 49 years | Figures in percent

Source: BZgA, data set "Contraceptive behaviour of adults", 2007, 2011, 2018, 2023 surveys

This figure is three times higher than previous surveys (2011 and 2018: 3 % each), which indicates why the pill is no longer the most commonly used contraceptive method.

The aspect of availability is also becoming increasingly important. While the question of the extent to which one's own contraceptive is easy to obtain was only relevant for a maximum of 4 percent of contraceptive users until 2011, this proportion has risen continuously in subsequent years to currently 13 percent. Men (17 %) and respondents under the age of 25 (17 %) in particular refer to this.

A number of other reasons are cited by around 10 percent of the respondents using contraception, including existing experience with a particular contraceptive, the partner's wish, the cost factor, medical recommendations, but also practical advantages such as the spontaneous applicability of the contraceptive or the additional protection against STIs (each cited between 9 % and 11 %).

What is new is that these aspects are generally listed more frequently than before. In 2011, none of these reasons were cited by more than 7 percent of respondents.

Reasons depending on the contraceptive method chosen

The safety of the contraceptive is usually the top priority, regardless of which of the common contraceptives the contraceptive users have chosen. If the pill is used, the reliability of the method is emphasised in just under half of the cases, with the same figure for condoms (47 % in both cases).

Those who rely on the pill as their sole contraceptive emphasise the safety aspect less frequently (34 %). At 37 percent, ease of use is cited more often – more than those who use condoms alone (28 %). Good tolerability and few side effects are not a prominent reason for choosing the pill; this consideration is more relevant for other contraceptives (especially condoms and IUD/IUS alone). Instead, many people who only use the pill report that they are following a doctor's recommendation (19 %).

For respondents who only use condoms, good tolerability is the main motive alongside reliability (39 %), followed closely by ease of use (28 %). And: in addition to the 30 percent who cite good tolerability as a reason for choosing condoms, 16 percent explicitly argue against the pill and other hormonal contraceptives (intolerance, general rejection). This defence against the pill did not play such a large role among contraceptive users who only used condoms in 2018 and 2011 (10 % each at the time). Taken together, the tolerance of the condom in the broader sense is the most important motive for contraceptive users who rely solely on condoms, at 45 percent.

Contraceptive users who use the IUD/IUS similarly emphasise its tolerability, safety and ease of use (32 % to 36 %) – whereby the latter is particularly due to the fact that there is no need to take it every day as with the pill. If the IUD/IUS is used, contraception is also provided for spontaneous sexual intercourse which is cited as a motive by 10 percent of this group. Another characteristic of the IUD/IUS is that it is more frequently used on a doctor's recommendation (12 %).

The number of users in the data is too small for a robust analysis of the motives with regard to the other contraceptives. However, it is noticeable that respondents who use sterilisation for contraception often refer to their partner's wishes. Sterilisation is also the method of choice if the actual family planning has already been completed. Those who opt for natural family planning refer noticeably often to reasons of compatibility. They are also the most likely to criticise hormonal contraceptive methods.

Motivations depending on sex

Men and women come to very different judgements regarding the two most commonly used contraceptive methods, the pill and condoms. Men consider condoms to be safer than the pill more often (54 % compared to 44 %) – women tend to favour the pill (38 % compared to 51 %).

Men are also more likely to see condoms as a convenient, easy-to-use form of contraception (35 %, women: 20 %), especially as they are easy to obtain (24 %, women: 13 %). When women rely on condoms for contraception, they do so not least because of the low side effects. Of the women who cite condoms as their sole contraceptive, 32 percent emphasise this aspect – for them, this is the highest value of all possible reasons (men: 28 %).

As far as the main advantages of contraception with the pill are concerned, the views of women and men differ less widely than is the case with condoms. In terms of both safety and ease of use, the differences amount to a maximum of 7 percentage points. One relevant difference: 19 percent of women who use the pill as a contraceptive also consider it to be well tolerated, compared to only 9 percent of men.

Incidentally, it is not uncommon for men to bow to their partner's wishes, i.e. she determines the contraceptive method to be used (16 %). Conversely, this is rarely the case the other way around (5 %). Although no clear data evidence can be provided due to the small number of cases, the partner's wish often seems to relate to surgical sterilisation. However, it should also be noted that in individual cases this may also refer to female partners of women and male partners of men.

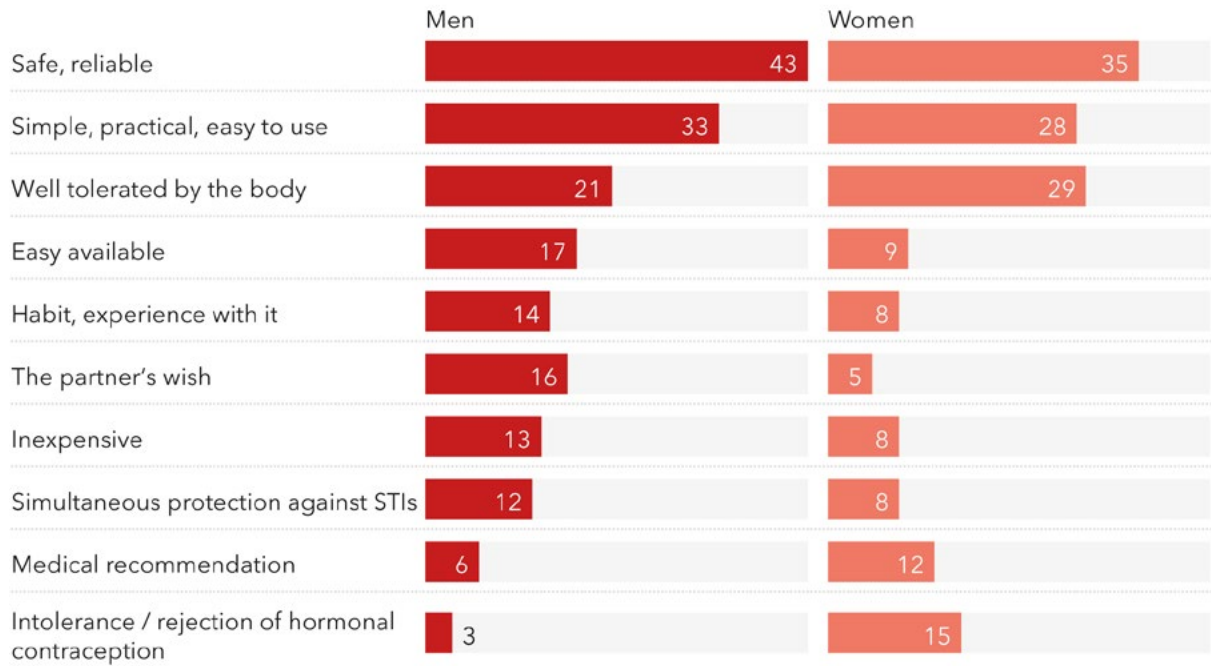
Health-related arguments are generally used more by women. A total of 15 percent of women using contraception report intolerances or are generally critical of hormonal contraception (men: 3 %). 12 percent of women say that their contraceptive decision (also) depends on the recommendation of a doctor (men: 6 %). Only additional protection against sexually transmitted infections (STIs) is reported slightly more frequently by men (12 % compared to 8 %). An overview of the general sex differences (without reference to individual contraceptives) in the context of contraceptive choice can be found in [Figure 8](#) below.

Men spontaneously cite the cost aspect slightly more often than women when choosing a contraceptive (13 % compared to 8 %). The influence of contraceptive costs is examined in more detail in the following [chapter 1.5 Costs as an influencing factor](#) – when asked specifically about the importance of costs when choosing a contraceptive, the sex ratios are clearly reversed.

FIGURE 8

Reasons for choosing a contraceptive method by sex

Question: Why did you or your partner decide in favour of this contraceptive or this method?



Basis: 711 Respondents who use contraception | Multiple responses possible | Figures in percent

Source: BZgA, "Contraceptive behaviour of adults" dataset, 2023 survey

1.5 Costs as an influencing factor: varying degrees

In the overall view of the relevant reasons for choosing a specific contraceptive, contraceptive costs are not a prominent motive (see also [Chapter 1.4 Reasons for choosing a contraceptive method](#)): A total of 11 percent of contraceptive users say that they also made their decision because they consider the current contraceptive method to be "inexpensive". The disposable household income has no influence on the frequency of this argument being quoted.

From a health policy perspective, however, another question is more relevant: To what extent do contraceptive costs represent an inhibiting factor or a barrier to the choice of a contraceptive?

Cost factor in the study analysis

The study examines the question of whether contraceptive costs are a barrier using various approaches.

The statements of sexually active people who are currently not using contraception provide an indication (see [Chapter 1.2 Abstaining from contraceptives](#)). Financial reasons for not using contraception are definitely reported here, albeit only to a small extent (2% of those not using contraception). It should be borne in mind that these are spontaneous responses. The response behaviour may be influenced by social desirability or feelings of shame and could therefore also be distorted.

In addition, for the first time in the survey series on adult contraceptive behaviour, a question specifically tailored to the cost effect was asked. Respondents were able to rate the role of the cost aspect in their most recent decision in favour of a particular contraceptive method on a scale from “Cost aspect was very important” (scale value 1) to “Cost aspect did not play a role” (scale value 6).

The survey of the cost aspect in this form is based on results from the research project *frauen leben 3* (women’s lives 3), in which, among other things, a connection between the choice of contraceptive and the financial situation was investigated. The formulation of the question in this project has proven its worth in various survey iterations (see Helfferich et al., 2016, pp. 134-137; for the overall project Knittel & Olejniczak, 2023).



The BZgA research project women’s lives 3

More information on the project
and further research results can be
found [online](#).

Cost factor and sex

The opinions on whether and to what extent the decision to use contraception depends on the costs vary greatly: For women who use contraception, the cost factor is significantly more important (30 percent) than for men (9 percent, [see Figure 9](#)). The cost of contraception also plays a role for younger people in particular – 27 percent of those under 30 state that the financial aspect was important in their decision to use contraception. For respondents aged between 18 and 24, the figure is as high as 34 percent. By comparison, this is much less the case for respondents in their thirties (20 percent) and especially for those aged 40 and over (8 percent). When combining the factors of age and sex, younger women in particular come into focus: for 41 percent of women under 30 who use contraception, the cost of contraception was an important decision factor. No such age effect can be observed for men. Only 10 percent of younger men under the age of 30 stated that the cost aspect played an important role (older men: 5 % to 9 %).

Results on the cost factor

A total of 19 percent of people who are currently using contraception state that the costs played an important role in their decision to use a specific contraceptive method, with 11 percent of these choosing the strongest response “very important”. For the majority of contraceptive users, however, the financial aspect was not a decisive factor (54 %) ([see Figure 9](#)).

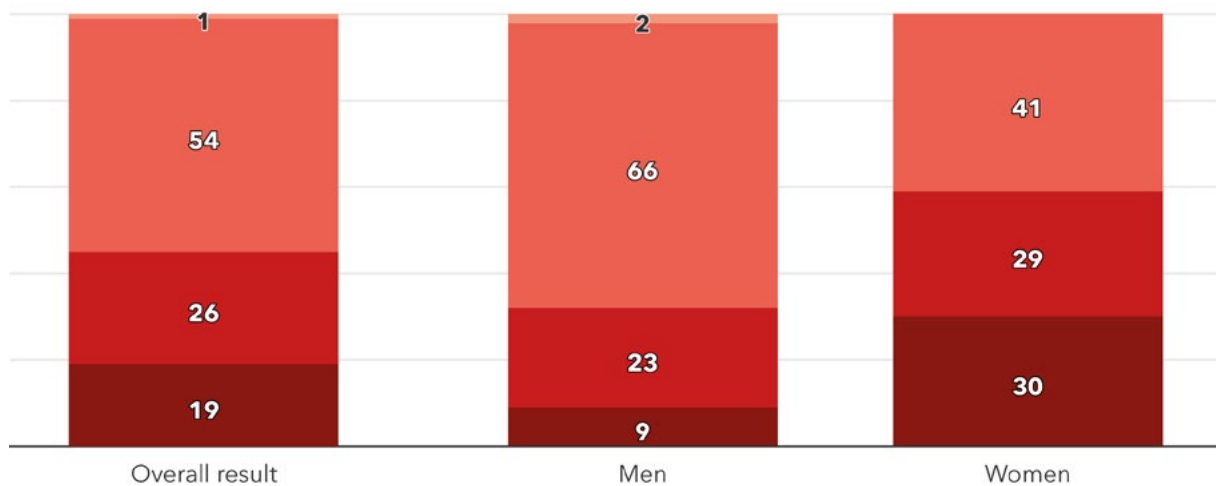
Whether and to what extent contraception costs money depends on a variety of factors: who is responsible for buying the contraceptive? Can the costs be shared, for example in a relationship? What are the costs of the contraceptive in question? And last but not least: What financial resources are available for this budget item? All of this also depends on the current life situation such as education, occupation, age, education and income, etc.

FIGURE 9

Relevance of the cost aspect by sex

Question: The last time you decided in favour of a contraceptive method: How important was the aspect of money, i.e. cost, in the decision?

■ Cost aspect was important
 ■ Cost aspect was moderately important
 ■ Cost aspect was not important
 ■ Not applicable, don't know, no data



Basis: 711 Respondents who use contraception | Shown: important (scale values 1 + 2), moderate (3 + 4), not important (scale values 5 + 6) | Deviations in the sum of 100 % are due to rounding | Figures in percent
 Source: BZgA, data set "Contraceptive behaviour of adults", 2023 survey

Cost in connection with other factors

The analysis also shows correlations between the cost factor and net household income, but due to case number restrictions, only a trend statement can be made here. The lower the disposable income, the more likely it is that costs also play a role in the decision in favour of a contraceptive. For example, the cost factor was important for 27 percent of people with a net household income of less than 2,500 euro, but only for 12 percent of people with an income of 3,500 euro.

On the other hand, whether or not there is a steady relationship is less important for the influence of costs on the choice of contraceptive (1 percentage point difference in the "important" share). The question of which contraceptive is actually used is also less

decisive. When comparing the contraceptives used, only sterilisation (male or female) and the IUD/IUS stood out - if these contraceptive methods are used, the cost factor is particularly often stated to have played a role. Here too, however, the data only allows for a vague trend statement. In any case, there are no relevant differences between pill and condom users (15 % compared to 17 % "important").

The sex of the interviewee proves to be the most relevant factor across the various contraceptive methods.

2

Information on the method of contraception used

The use of contraceptives is closely linked to knowledge about different methods of contraception. For this reason, the current study – as in previous surveys – asks respondents for their subjective assessment of their level of knowledge about contraceptive methods.

However, it is also of interest where this knowledge comes from and how respondents inform themselves about contraception. For this reason, since 2018 the repeat survey has been expanded to include the question about the most important sources of information on the contraceptive method used.

This study pays particular attention to the importance of the Internet as a source of information.

2.1 Subjective assessment: well informed about own contraceptive

Almost all of the respondents feel sufficiently informed about the method of contraception they use. Only 5 percent of respondents use the negatively formulated answer options “less good” or “poorly informed”. Relevant gradations in the assessments of the level of information generally only occur between the categories “very well” and “well” informed.

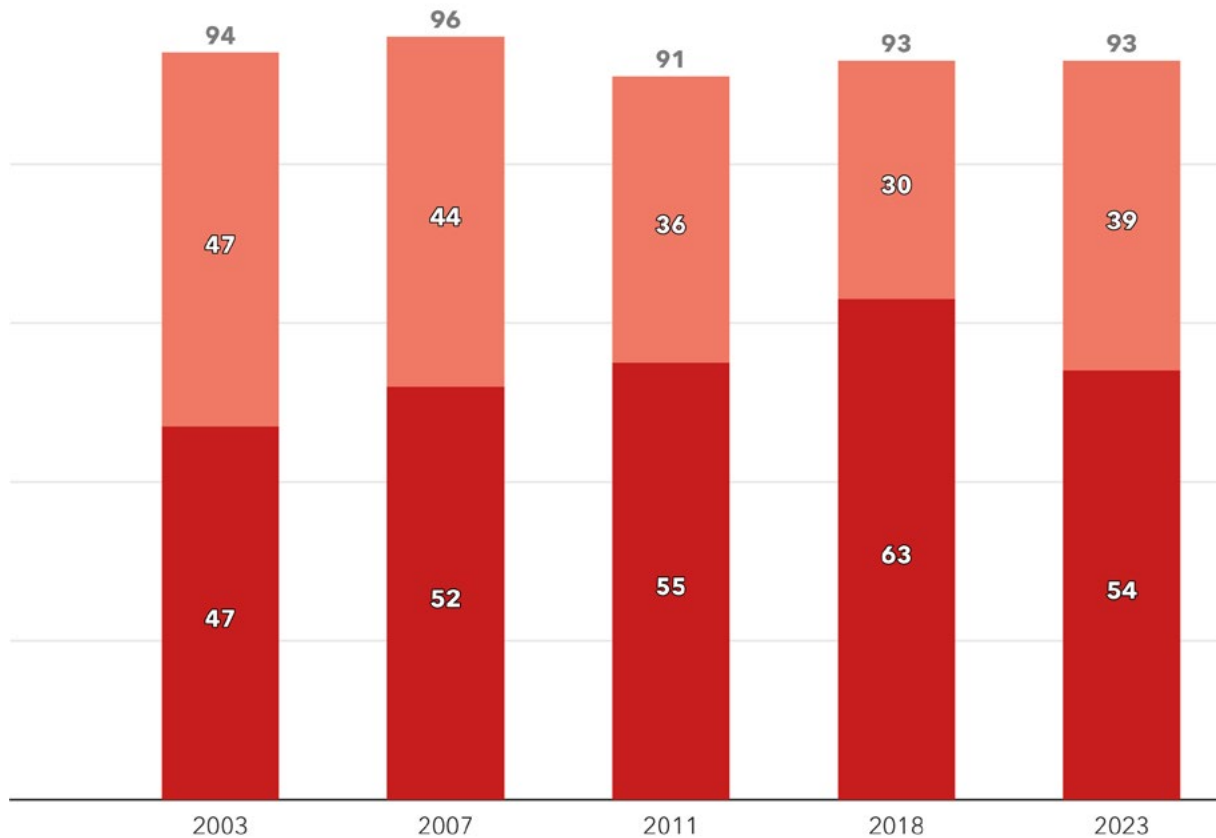
There have been some shifts here over the years: up until 2018, an increasing number of respondents described themselves as “very well” informed. The current results from 2023 do not continue this trend. At 54 percent, a similar number of respondents currently choose the best rating as in 2011 (then 55 %) (see [Figure 10](#)).

FIGURE 10

Subjective assessment of information about the contraceptive method used - trend

Question: How well informed do you feel about the contraceptive method or contraceptive you are currently using?

Very well Well



Basis: Respondents who use contraception (2023: n = 711) | For 2007: 20 to 44 years, then 18 to 49 years
Figures in percent

Source: BZgA, data set "Contraceptive behaviour of adults", 2003, 2007, 2011, 2018, 2023 surveys

Particularly among those who rate their level of information as "well" or "very well", there are significant differences when the sexes are compared. If "very well informed" and "well informed" are considered together, women have a slight lead of 5 percentage points over men. However, while 67 percent of women describe themselves as "very well" informed, this figure is only 43 percent for men.

At 24 percentage points, the gap between the sexes is therefore also significantly larger today than in 2018 (16 points) or 2011 (17 points). It remains to be seen to what extent this result will stabilise in the future.

Even when differentiated according to age, differences can be identified - but again particularly with regard to the highest rating category "very well". An age discrepancy is currently more apparent than in the previous iterations of the survey:

Although younger contraceptive users are just as likely to be “well” informed as older users, they are less likely to rate themselves as “very well” informed. Among respondents up to the age of 29, 40 percent do so, whereas 62 percent of contraceptive users aged 30 and over describe themselves as “very well” informed about the contraceptive method used. The lower willingness of younger people to choose the highest rating category for information is also evident in a comparison with the 2018 survey: at that time, the proportion of under-30s who were “very well” informed was 59 percent, which is 19 percentage points less in 2023 than in 2018. At 9 percentage points, the proportion between the youngest and oldest age groups was also significantly lower than today at 23 percentage points.

The choice of contraceptive can be used to better categorise the results: if a distinction is made according to the contraceptive method used, the pill and condoms are more frequently chosen as the methods respondents are most well informed about than in general. However, there is a difference between the contraceptive methods used: 42 percent of those who use the pill feel “very well” informed about the contraceptive method they have chosen.

In contrast, the proportion of those who use condoms is much higher (57 %). If the pill and other hormonal contraceptive methods are generally rejected, the proportion of respondents who describe themselves as “very well” informed is even higher (67 %). It is possible that the lower proportion of younger people who consider themselves to be subjectively “very well” informed confirms greater uncertainty regarding hormonal contraceptive methods.

The observed age correlation remains if a distinction is also made according to sex. In this case, the percentages of being “very well” informed range from 46 percent for women under 30 who use contraception to 79 percent for women aged 40 and over. Among men, the values are generally significantly lower (32 % to 49 %).

There are also indications in the data that the (very good) level of information about the chosen contraceptive method is also linked to the level of education. However, low case numbers, particularly for respondents with basic formal school qualifications, do not allow for a more detailed analysis.

2.2 Most important sources of information: gynaecological practices and the internet

The 2018 survey was the first one in the series of surveys on adult contraceptive behaviour that asked about the most important sources of information about the contraceptive method used. This topic was further expanded in the current survey iteration. This study now also allows comparisons to be made between 2018 and 2023.

Overall, the three most important sources of information on their own contraceptive method remain unchanged: for around half of those surveyed, the gynaecologist remains the most important source of information (51 %).

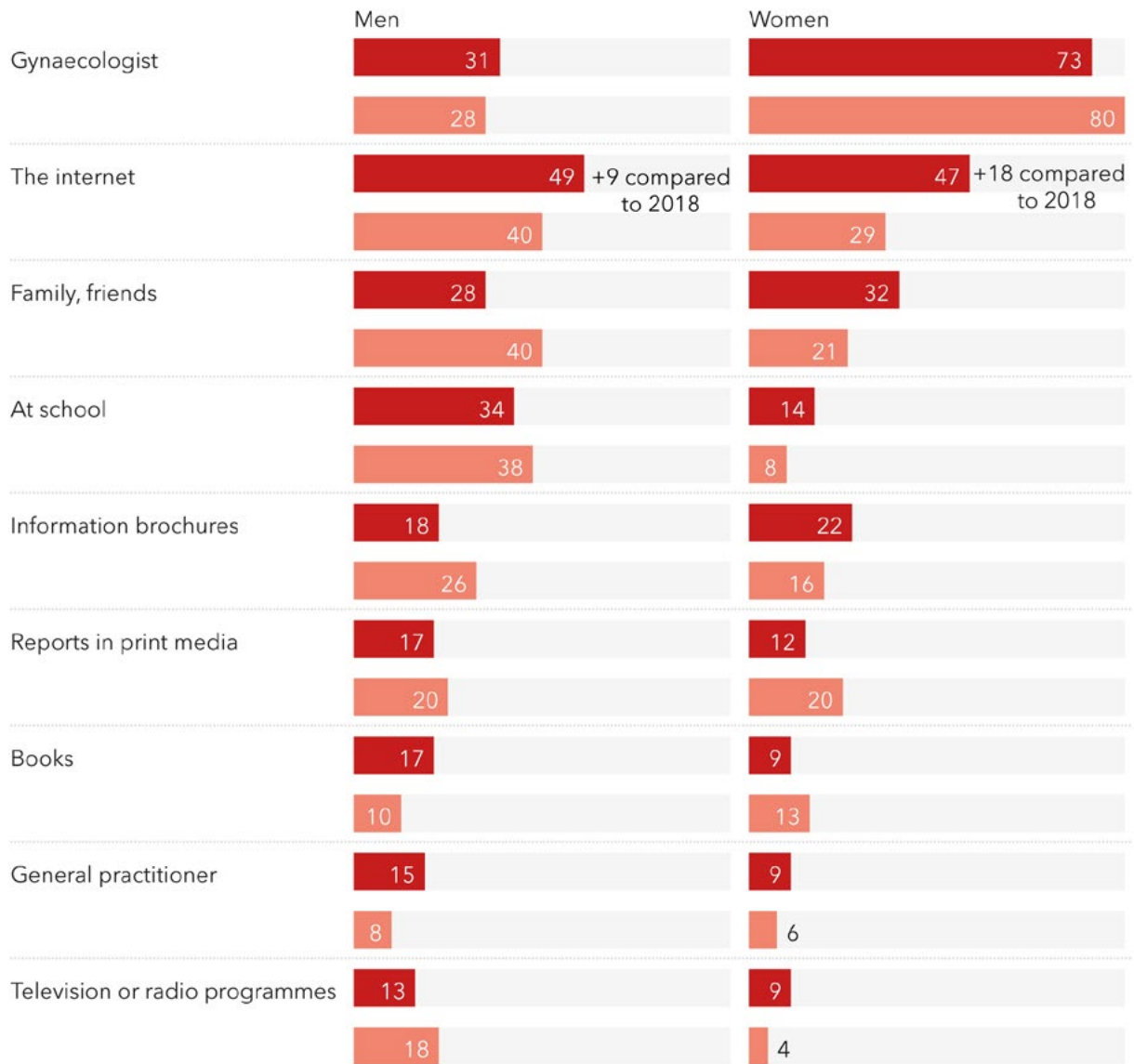
The internet and personal conversations follow in second and third place. As the information strategies used continue to be very sex-specific, it makes sense to present them separately for men and women ([see Figure 11](#)).

FIGURE 11

Sources of information on the contraceptive method used by sex - trend

Question: Who or what was the most important source of information for you about the contraceptive or contraceptive method you currently use?

■ 2023 ■ 2018



Basis: Respondents who use contraception (2023: n = 711) | Multiple responses possible | Shown: most frequent responses in percent

Source: BZgA, data set "Contraceptive behaviour of adults", 2018, 2023 surveys

Preferred sources of information by sex

Women still generally see their gynaecologist as their main point of contact: for 73 percent, gynaecological advice is the most important source of information.

In contrast, other people or media are less important, even if the vast majority of women also state other options in the interview. On average, women in the current survey cite 2.4 sources of information.

From the perspective of female contraceptive users, the second and third most important sources remain unchanged compared to 2018. With 47 percent of responses, the internet in particular has gained further importance as a source of information on contraception and is therefore by far the second most important source – in 2018, 29 percent of respondents said they used online sources.

Men are less likely to say that they seek advice from a gynaecological practice (31 %). Male respondents have a significantly broader information pattern. Overall, they use an average of 2.5 different sources of information, which is similar to the average number of sources used by women.

The most important development, which was already evident among women, concerns online content: men using contraception also count the internet significantly more often among their most important sources of information when it comes to contraceptive issues than was recognisable in 2018. At 49 percent, the internet is clearly the most frequently cited source among men. However, at 9 percentage points, the increase compared to 2018 is less pronounced than for women (18 points). In contrast to five years ago, online sources are therefore among the most important sources of information for women and men with similar frequency.

In 2018, advice from family members and friends as well as information from school were still of similar importance to internet sources for male respondents (around 40 % in each case). Today, these sources of information are less relevant (max. 34 %). However, it remains the case that men are much more likely to refer to school knowledge than women (currently 34 % compared to 14 %).

Furthermore, the sex differences remain consistently in the single-digit percentage point range. Around one in five women and almost as many men state that they have obtained relevant information from educational brochures (22 % compared to 18 %). Content from media such as print, audio and in visual form is important for less than 20 percent, regardless of sex. The same applies to advice from GPs. Advice from pharmacies or advice centres is reported by a maximum of 7 percent of contraceptive users.

Preferred sources of information by age

Age also has an influence on personal information behaviour: For younger people, online content continues to be significantly more important than for older people. Among 18- to 29-year-olds, almost two thirds cite the internet as an important information channel (63 %); among the next age cohort, this figure is only 45 percent, and the proportion falls further to 35 percent with increasing age. This age discrepancy totalling 28 percentage points is more pronounced among women (33 points) than among men (23 points). In 2018, similarly large differences were found in the age comparison (then 27 percentage points).

Gynaecological advice is by far the most important source of contraceptive information for women of all ages (69 % to 77 % depending on age). In addition, younger women generally use a wider range of information options – they name an average of 3.0 sources. By comparison, women aged 40 and over name an average of 2.0 sources. The biggest age differences are in terms of personal environment and school, with younger women citing these more frequently than older women (23 and 17 percentage points respectively).

For men using contraception, the internet is increasingly replacing other sources of information. Younger men under the age of 30 use online information significantly more often than older men, but overall the number of sources used remains roughly the same (2.4 to 2.5). Although school, for example, is still a very important source of information for many younger men aged between 18 and 29 (43 %, otherwise 34 % at most), they also attended school more recently. On the other hand, they are less likely than older men to say that they obtain information about contraception from gynaecological advice, educational brochures (age difference: 14 percentage points each) and radio and television programmes (10 points).

Influence of contraception used on the choice of information sources

If the pill is used as a contraceptive, gynaecologists are even more important as a source of information than they already are (68 % compared to 51 % on average). This applies above all to women: If they state that they use the pill as a contraceptive, 94 % use gynaecological expertise as a general source of information on contraceptive issues (overall average of women using contraception: 73 %). A similar pattern emerges among men and women who state that they use the copper or hormonal coil. They also answered with an above-average frequency that they used the gynaecologist (75 %).

This is different when respondents list the condom as a contraceptive (here only 37 %). For them, the Internet is the main source (55 %).

Even if the data situation for the other contraceptive methods only allows for trend statements, it is noticeable that internet information also plays a central role when natural family planning methods are used or at least one partner is sterilised. In these cases, reference is also often made to advice from the personal environment.

2.3 The internet as a source of information: predominant use of search engines

Internet sources have become more important in the context of contraceptive education over the past five years. Both the women and men surveyed use the internet as a source of information much more frequently than in 2018 (Figure 12):

- For men, there was an increase of 9 percentage points.
- The percentage point increase for women is twice as high as for men, up 18 percentage points on 2018.

FIGURE 12

The internet as a source of information by sex - trend

Question: Who or what was the most important source of information for you about the contraceptive or method you currently use? Here: The internet



Basis: Respondents who use contraception (2023: n = 711) | Figures in percent

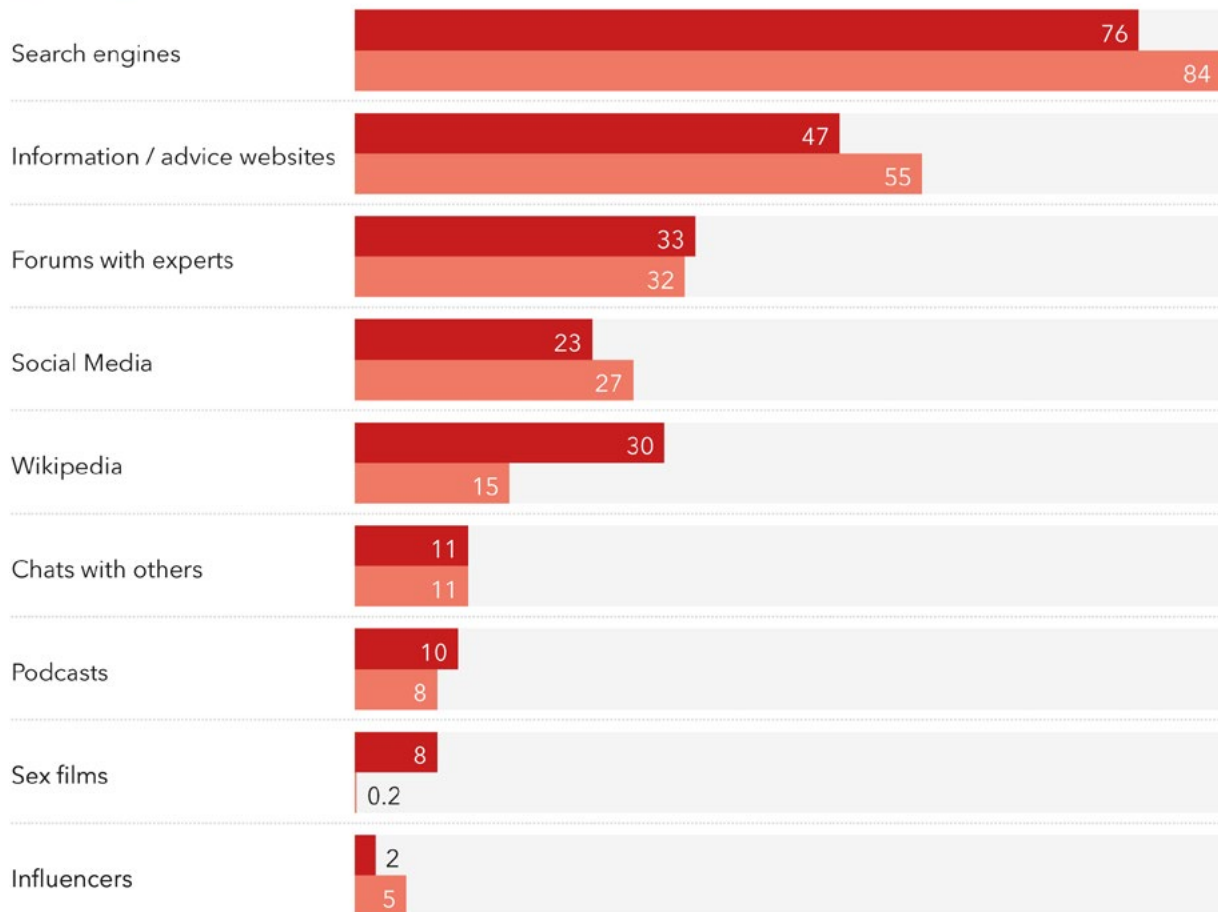
Source: BZgA, data set "Contraceptive behaviour of adults", 2018, 2023 surveys

FIGURE 13

Internet sources used for contraceptive information by sex

Question: And which source of information on the internet was the most important for you?

■ Men ■ Women



Basis: 347 Respondents for whom the internet was one of the most important sources of information | Multiple responses possible | Figures in percent

Source: BZgA, data set "Contraceptive behaviour of adults", 2023 survey

This study takes a closer look at the internet as a source of information on contraception and examines for the first time which internet sources are relevant when searching for suitable information on contraception (see Figure 13).

The most important tool for finding information on the internet is search engines such as Google. This is cited by 80 percent of respondents and is the top choice by a wide margin for both men and women.

Websites with a special educational or advice focus are in second place. Half of those surveyed use this type of service, women slightly more often than men (55 % compared to 47 %). A third (32 %) cite special forums with access to experts as an important source of information.

Further internet sources

Wikipedia is still one of the most frequently used services with a total of 23 percent but is obviously used very differently depending on sex: at 30 percent, men use the content of the encyclopaedia, which is compiled from the knowledge of many (crowdsourcing), twice as often as women (15 %).

According to the respondents, social media content is not necessarily one of the most relevant sources of information for contraceptive issues. Of the reasons given overall, social media came in mid-table with 25 percent. At most 11 percent of respondents, both women and men, named chats or influencers as sources of information.

Podcasts are among the most important sources of information for around one in ten people who use the internet for contraceptive issues (9 %).

As pornography is readily available on the internet, respondents were also asked whether sex films were considered a relevant source of information. Among the male respondents, pornographic content is only relevant for 8 percent, while less than 1 percent of the women surveyed cited it as a possible source.

When respondents cite the internet as one of the most important sources of information, there is a tendency for older respondents aged between 40 and 49 to rely more frequently on search engine results and Wikipedia content, while educational websites and social media are slightly more popular with younger respondents under 30. However, the small number of cases means that only tendencies can be stated here.

3

The topic of contraception in gynaecological practice

Gynaecologists play a central role for the female part of the population in Germany when it comes to providing contraceptive information. Analogous to the 2018 survey iteration, the extent to which the topic of contraception is addressed during visits to the gynaecologist was therefore examined in more detail - and, above all, how women perceive and evaluate these consultations.

As in 2018, almost all sexually active women between the ages of 18 and 49 have visited a gynaecological practice at least once in the last twelve months. Only 6 percent currently refute this, with a further 2 percent unwilling or unable to say. In this survey iteration, one in two women also reported that contraception was one of the topics discussed during this visit to a gynaecological practice (50 %; 2018: 49 %, [see Figure 14](#)).

The younger the women are, the more likely they are to report that contraception was discussed during a visit to the gynaecologist. Among the youngest women surveyed between the ages of 18 and 29, this applies to 63 percent, among women in their thirties to around half (53 %) and in the oldest age group only one in three (40 to 49 years: 34 %) reported this. This clear age difference totalling 29 percentage points was not observed to this extent five years ago (then: 7 points).

One of the most important indicators for addressing contraceptive issues is whether the woman in question is currently using contraceptives or not. If this is the case, 60 percent state that they have also spoken to their gynaecologist about it. If they are not using contraception, the figure is only 17 percent. In contrast, which contraceptive is currently being used has relatively little influence on the need for discussion - as far as the data situation allows for detailed analyses. For example, there is only a 3 percentage point difference between users of the pill and condoms when it comes to the question of whether contraceptive issues have been discussed (63 % compared to 60 %).

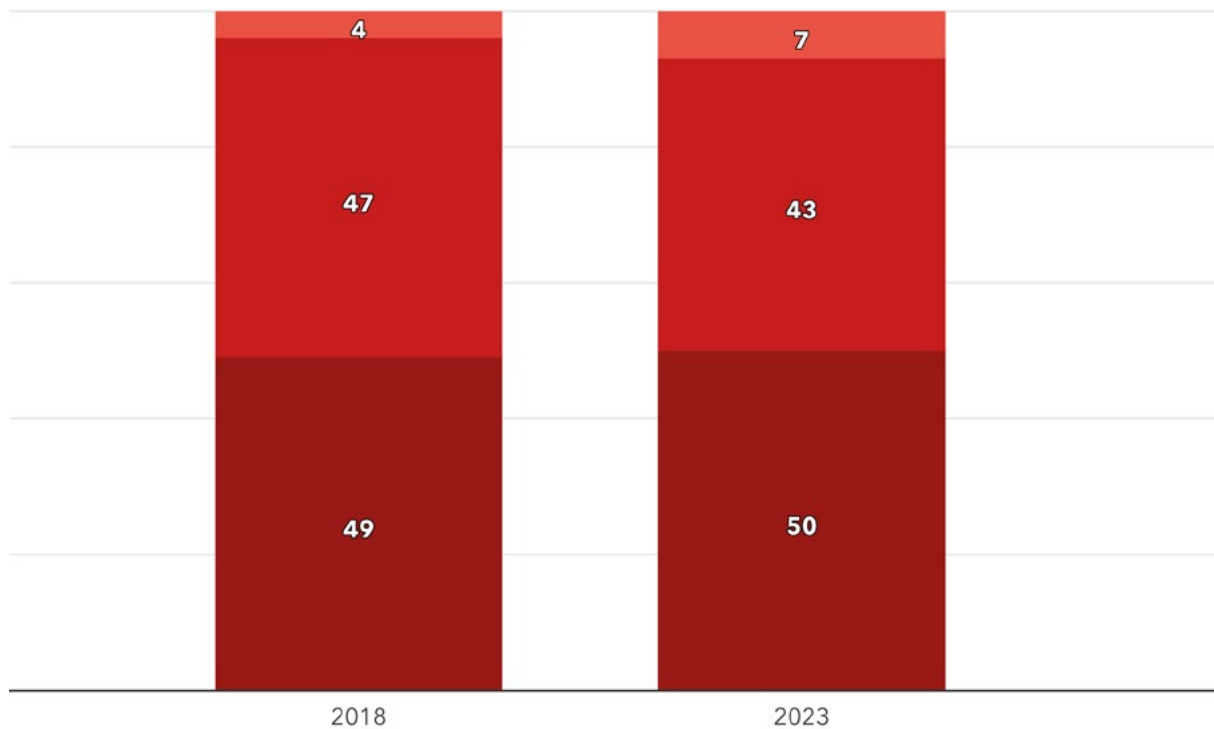
Women with a higher level of formal education are more likely than those with a moderate level of education to say that contraception was discussed (56 % compared to 38 %). Reliable statements about women with a basic level of education cannot be made due to the small number of cases.

FIGURE 14

Communication about contraception in gynaecological practices - trend

Question: If you have been to the gynaecologist in the last 12 months: Was the topic of contraception discussed during this visit?

■ Yes ■ No ■ Not been there, don't know, no data



Basis: Sexually active women (2023: n= 501) | Figures in percent

Source: BZgA, data set "Contraceptive behaviour of adults", 2018, 2023 surveys

Evaluation and conclusions

If contraception was a topic during the last visit to the practice, the respective gynaecologist is usually given a very positive assessment: 54 percent then state that they found the consultation "very helpful". A further quarter summed up that it had been "somewhat" helpful - so all in all, four out of five women rated the doctor's communication positively, with a similar number in 2018 (78 % today compared to 81 % in 2018, see Figure 15). And the remaining fifth? Around half of these women (11 % in total) said they "somewhat agreed" when asked whether this conversation had been helpful for them. Currently, 9 percent of respondents state that the conversation was "not at all helpful", which

is almost twice as many as in 2018 (then 5 %). In most cases, the contraceptive discussion at the gynaecologist's practice still resulted in women continuing to use the contraceptive they had previously used: 61 percent of women who discussed contraceptive issues felt reassured in their choice afterwards. Five years ago, the figure was slightly higher at 65 percent (see Figure 15).

According to the latest data, it appears that more women than five years ago have actually changed their contraceptive or contraceptive method as a result of the conversation. This is currently 16 percent, compared to 9 percent in 2018, which is only around half as many.

The reasons for this development cannot be clearly established on the basis of the available data. The change in contraceptive method appears to be distributed relatively evenly across the age groups. The change was referred to particularly frequently when women were currently using the IUD/IUS as a contraceptive.

Unfortunately, no information is available on how contraception was used before the gynaecological consultation. In any case, current pill users are rarely among those women.

FIGURE 15

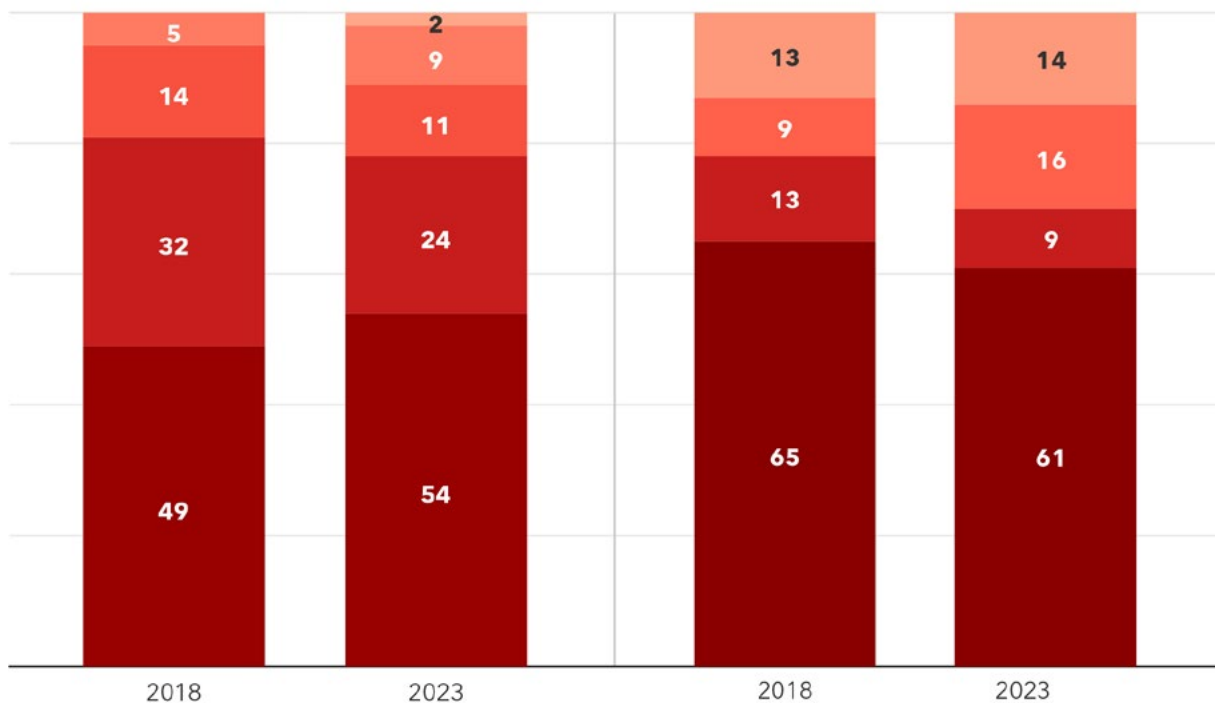
Communication about contraception in gynaecological practices: assessment and conclusions - trend

Question: Was this conversation about contraception [in the gynaecological practice] helpful for you?

Question: Was this conversation about contraception [in the gynaecological practice] helpful for you? The conversation has led me ...

- Yes, very
- Yes, somewhat
- No, somewhat not
- No, not at all
- Don't know, no data

- ... being more confident in my choice of contraceptive method
- ... to doubt my choice of contraceptive method
- ... to change my contraceptive method
- None of the answers given, don't know, no data



Basis: Women who have visited a gynaecological practice in the last 12 months and discussed contraception there (2023: n = 248) | Figures in percent

Source: BZgA, data set "Contraceptive behaviour of adults", 2018, 2023 surveys

4

Attitudes towards hormonal contraception

The contraceptive behaviour of adults in Germany is changing - there are significant shifts, as this study also found in the previous chapters. The number of people using the pill is declining significantly, yet millions of people continue to use it regularly, just like other hormonal methods. Against this backdrop, the 2018 survey iteration was the first to investigate the general attitude of the population towards hormone-based contraceptives.

4.1 Increasingly critical attitude towards hormones

The current data once again shows a correlation between the observed changes in contraceptive behaviour and critical attitudes towards hormonal contraceptive methods.

In this study, the respondents were presented with three statements on hormonal contraception and asked to indicate whether they agreed or disagreed with each statement. The wording of the three statements is based on the qualitative interviews from the BZgA project *frauen leben 2* (women's lives 2), in which the participants expressed attitudes, myths and prejudices towards hormonal contraception (for the interviews, see Helfferich et al., 2011, p. 129 ff).

These statements in the interviews were taken verbatim in excerpts. The basic tenor is partly positive, partly negative. To determine the respondents' agreement or disagreement with the statements more precisely, they were asked to indicate their attitude on a scale of one to five, from "completely agree" (1) to "completely disagree" (5).

The question wording was: "How much do you personally agree with the following views?":

- Statement 1: "Contraception with the contraceptive pill or another hormonal contraceptive has **negative impact** on mind and body."
- Statement 2: "Contraception with the contraceptive pill or another hormonal contraceptive **for years** is harmless."
- Statement 3: "Contraception with the contraceptive pill or another hormonal contraceptive is also **suitable for very young girls**."



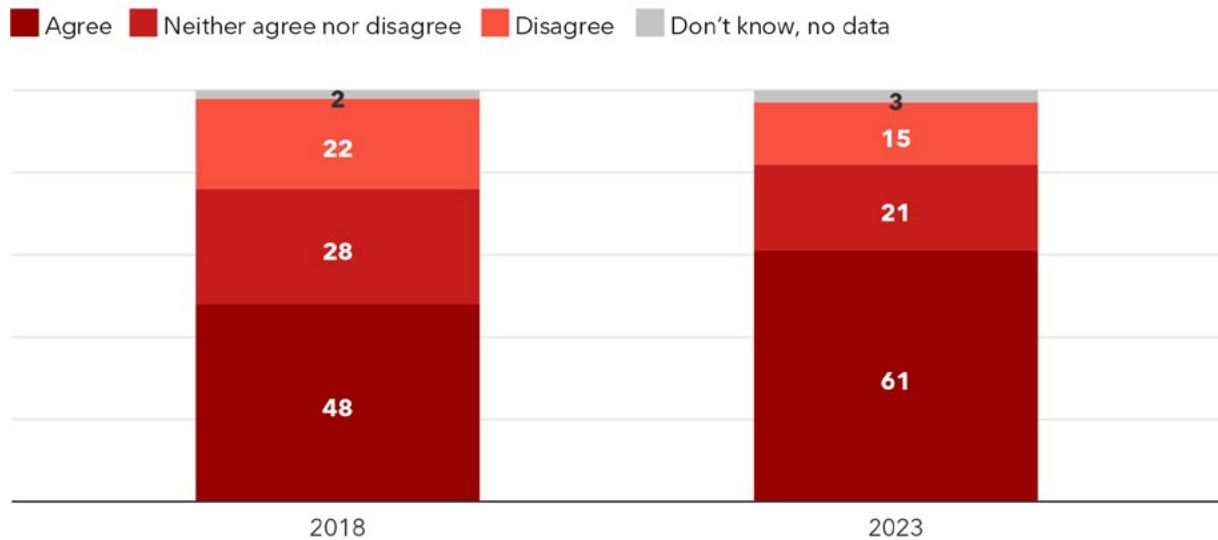
The BZgA research project women's lives 2

More information on the project and further research results can be found [online](#).

FIGURE 16

Attitudes towards the negative impact of hormonal contraception – trend

Question: There are different views on contraceptives. On a scale from 1 “completely agree” to 5 “completely disagree”: How much do you personally agree with the following views? Here: Contraception with the contraceptive pill or another hormonal contraceptive has **negative impact** on mind and body



Basis: Sexually active respondents (2023: N = 1,001) | Shown: agreement (scale values 1 + 2), neither agree nor disagree (scale value 3), disagreement (scale values 4 + 5) | Figures in percent
 Source: BZgA, data set “Contraceptive behaviour of adults”, 2018, 2023 surveys

Question about possible negative impact

The proportion of sexually active women and men who agree with the statement that contraception with the pill “has negative effects on mind and body” has risen significantly over the past five years from 48 to 61 percent (see Figure 16). Only 15 percent explicitly disagree with the statement (2018: 22 %).

The data clearly indicates that the contraceptive method currently used has an impact on the evaluation of the pill or hormones in other forms. Respondents who use the contraceptive pill are significantly less likely to criticise the effects on the mind and body. Slightly less than half of them (46 %) referred to negative side effects. However, criticism is also becoming more frequent here: in 2018, the figure was 17 percentage points lower (29 % at the time).

A distinction must also be made by sex: men are more likely to see negative effects than five years ago. In 2018, 20 percent of men who reported that the pill was the contraceptive used during intercourse reported negative effects. Today, the figure is 53 percent – an increase of 33 percentage points.

In contrast, the opinion of pill users themselves has remained comparatively stable (critical votes in 2018: 38 %, today: 37 %). However, it should be noted in this assessment that the total number of pill users has decreased significantly in the meantime.

Women who stated that condoms were used as contraception during sexual intercourse largely agree with the hormone-critical statement that hormonal contraception has a negative impact on the body and mind (74 %) – especially when the condom is the only contraceptive (81%).

Regardless of formal educational attainment, most respondents are currently critical of the physical effects of hormonal contraception. Respondents with a higher level of education are most likely to report negative effects (65 %).

Question about good long-term tolerance

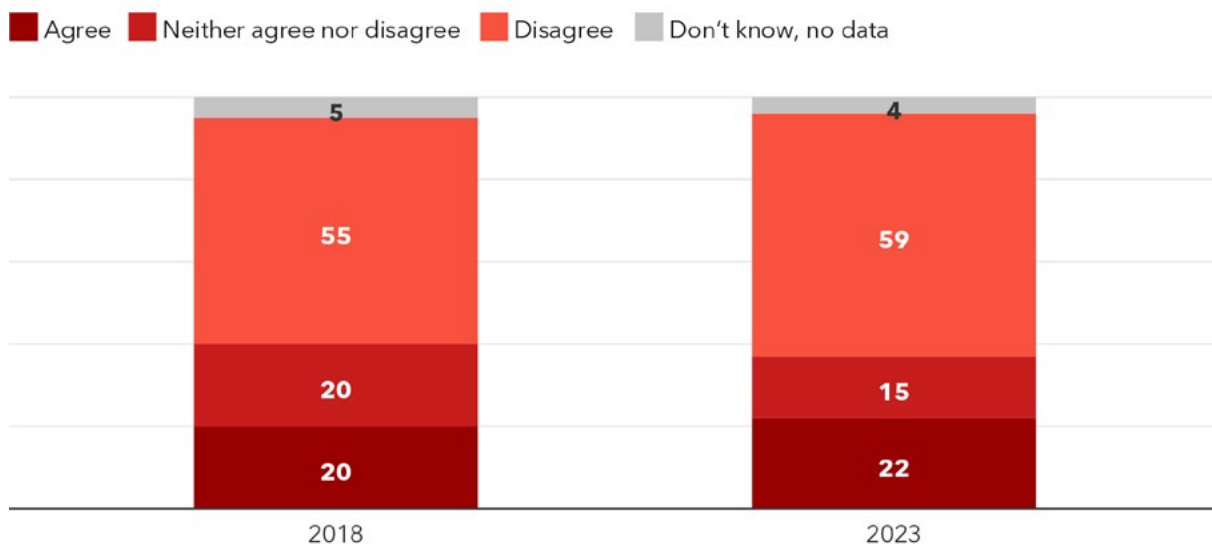
The second of the statements presented on hormonal contraception was deliberately worded positively: “Contraception with the contraceptive pill or another hormonal contraceptive for years is harmless.” In this case, a rejection of the statement means that taking the pill or other hormone-based contraceptives over longer periods of time is seen as problematic. In 2018, most of the sexually active population was already critical of using the pill for years, and rejection has since increased further (59 % compared to 55 %, see Figure 17).

The way opinions develop is similar to the first statement: while there has been little change in women’s rejection of the statement, men’s attitudes have changed in the direction of women’s in recent years. In 2023, a largely equal proportion of women and men were critical of using hormones for years (61 % compared to 57 %), whereas this was not yet the case in 2018 (62 % compared to 48 %). In addition, older respondents aged 40 and over are currently more likely to be critical than was the case in 2018 (58 % compared to 44 %). Among both women and men, age no longer plays a significant role when it comes to assessing the long-term tolerability of hormonal contraception (maximum difference of 6 percentage points depending on age group). Once again, respondents who use the pill as a contraceptive method are not as critical (42 %) as those who use condoms (66 %), especially when the condom is the only method used (73 %).

FIGURE 17

Attitudes towards long-term use of hormonal contraception - trend

Question: There are different views on contraceptives. On a scale from 1 “completely agree” to 5 “completely disagree”: How much do you personally agree with the following views? Here: Contraception with the contraceptive pill or another hormonal contraceptive **for years** is harmless.



Basis: Sexually active respondents (2023: N = 1,001) | Shown: agreement (scale values 1 + 2), neither agree nor disagree (scale value 3), disagreement (scale values 4 + 5) | Figures in percent
 Source: BZgA, data set “Contraceptive behaviour of adults”, 2018, 2023 surveys

Question about tolerance in young women

Only 20 percent of sexually active Germans still believe that even very young girls can use hormonal contraceptives such as the pill without risk. Even though many already expressed disapproval of this in 2018 (43 %), this proportion has risen further since then: at 52 percent, more respondents than before see risks for young female users (see Figure 18).

There is also a convergence of responses for this statement when comparing the sexes - albeit with the opposite sign: Today, 51 percent of women and 53 percent of men are critical; in 2018, men were still significantly more likely to reject the suitability of hormonal contraceptives for young users (48 percent) than women (38 percent).

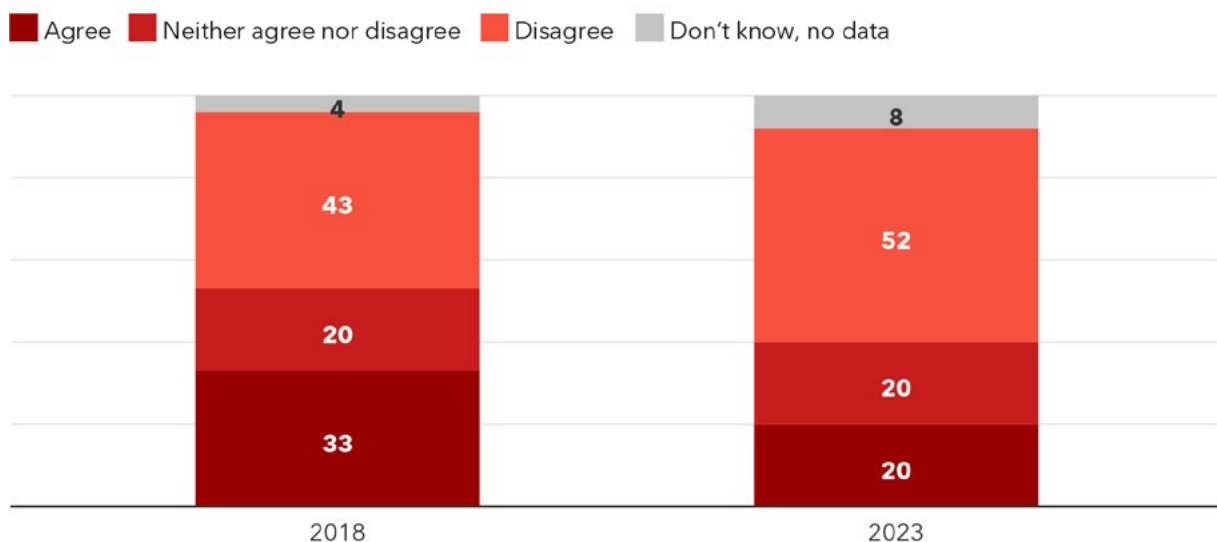
In contrast to the statements on physical and psychological effects and long-term use, the suitability of hormonal contraceptives for young girls remains an issue that is viewed less critically by older respondents than by younger ones. Despite this, the rejection rate among those aged 40 and over has risen from 35 to 45 percent.

Women who use the pill for contraception are again much less critical than women who use condoms (33 % compared to 56 %). To a lesser extent, the statements from men also show similar tendencies (53 % compared to 65 %).

FIGURE 18

Suitability of hormonal contraception for young women - trend

Question: There are different views on contraceptives. On a scale from 1 "completely agree" to 5 "completely disagree": How much do you personally agree with the following views? Here: Contraception with the contraceptive pill or another hormonal contraceptive is also **suitable for very young girls**



Basis: Sexually active respondents (2023: N = 1,001) | Shown: agreement (scale values 1 + 2), neither agree nor disagree (scale value 3), disagreement (scale values 4 + 5) | Figures in percent
 Source: BZgA, data set "Contraceptive behaviour of adults", 2018, 2023 surveys

4.2 Change in attitude more widespread

When it comes to attitudes towards hormonal contraception, it is worth taking a closer look at the sexes: the proportion of critical voices has also risen among women – i.e. potential users – from 55 to 59 percent today (see Figure 19). As can be seen, however, the overall increase is more likely due to a change in sentiment among the male population: while in 2018, not even half of sexually active men (40 %) attributed negative effects on the mind and body to hormonal contraceptives, this figure is 2023 just under two thirds (64 %). This corresponds to an increase of 24 percentage points. This is even higher among men today than among women (see Figure 20).

If age is also considered, younger women (under 30 years: 60 %) and those in the middle age group (30 to 39 years: 64 %) are more likely to be critical than older women (40 years and over: 51 %). Five years ago, age differences were observed at a similar level (then 45 % to 63 %). Depending on the age group, between 62 and 68 percent of men are now critical of the effects of hormonal contraception. In 2018, this only applied to a similar extent to younger men under the age of 30 (47 %) and the oldest age group considered (45 %). The opinion of men aged between 30 and 39 has therefore undergone the most significant development in this respect: in 2018, only 31 percent responded critically, compared to 63 percent today (up 32 percentage points).

In general, it can be said that the respondents in the 2023 survey took a critical attitude towards hormonal contraception, regardless of the aspect addressed. Furthermore, over the past five years, negative attitudes have become more widespread among the population. In particular, men and older people are increasingly critical of hormonal contraceptive methods.

And: over time, another striking feature emerges, if the critical assessments of the three statements five years ago are considered. In 2018, it was primarily the statement on long-term use that was viewed critically. In 2023, all three statements on hormonal contraceptives (statements about the effects on mind and body, the long-term use, and the suitability for very young girls) are evaluated critically with similar frequency.

FIGURE 19

Women: attitudes towards hormonal contraception - trend

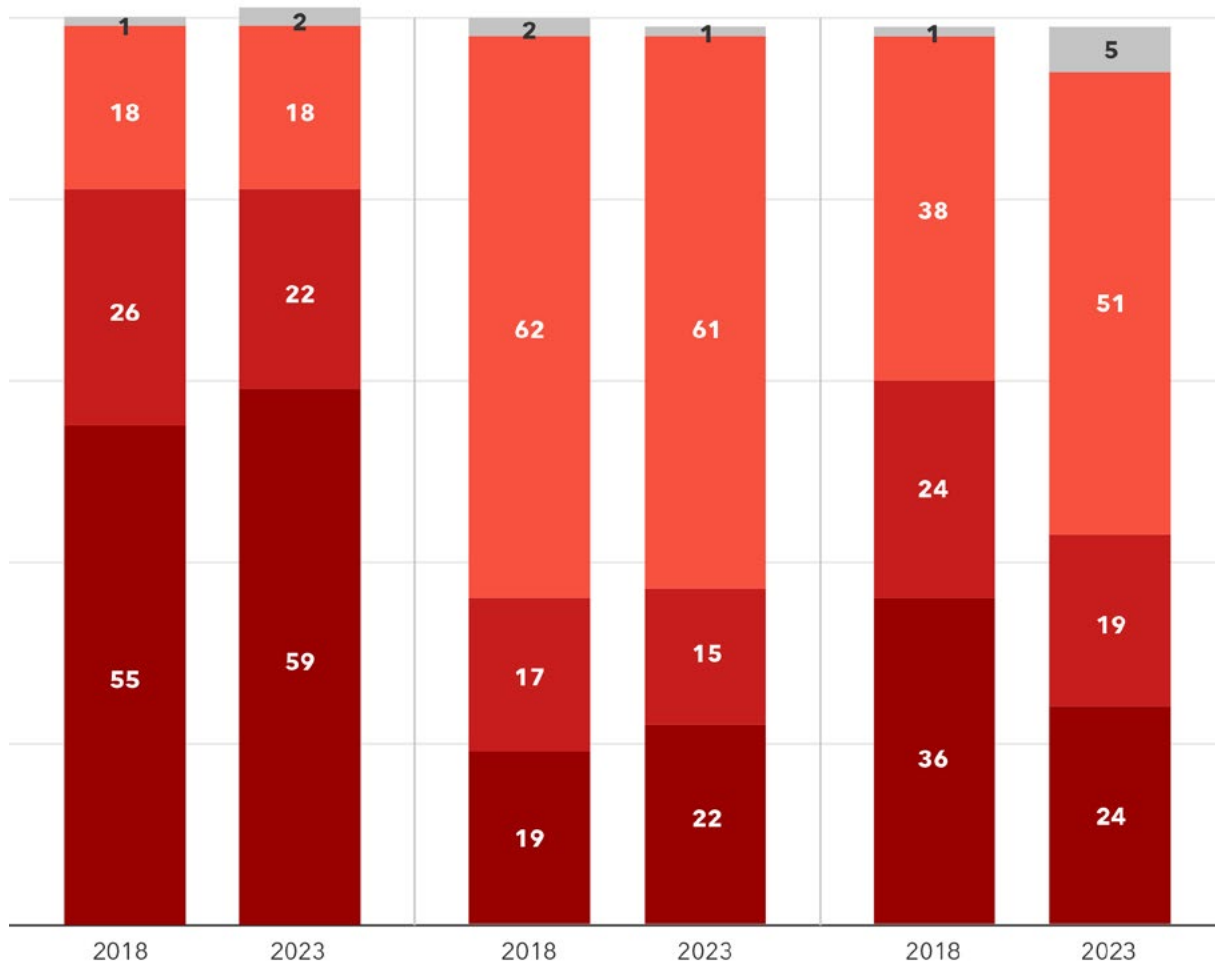
Question: There are different views on contraceptives. On a scale from 1 "completely agree" to 5 "completely disagree": How much do you personally agree with the following views?

Here: Contraception with the contraceptive pill or another hormonal contraceptive has **negative impact** on mind and body.

Here: Contraception with the contraceptive pill or another hormonal contraceptive **for years is harmless.**

Here: Contraception with the pill or or another hormonal contraceptive is also suitable for **very young girls.**

■ Agree
 ■ Neither agree nor disagree
 ■ Disagree
 ■ Don't know, no data



Basis: Sexually active women (2023: n = 501) | Shown: agreement (scale values 1 + 2), neither agree nor disagree (scale value 3), disagreement (scale values 4 + 5) | Deviations in the sum of 100 % are due to rounding | Figures in percent

Source: BZgA, data set "Contraceptive behaviour of adults", 2018, 2023 surveys

FIGURE 20

Men: attitudes towards hormonal contraception - trend

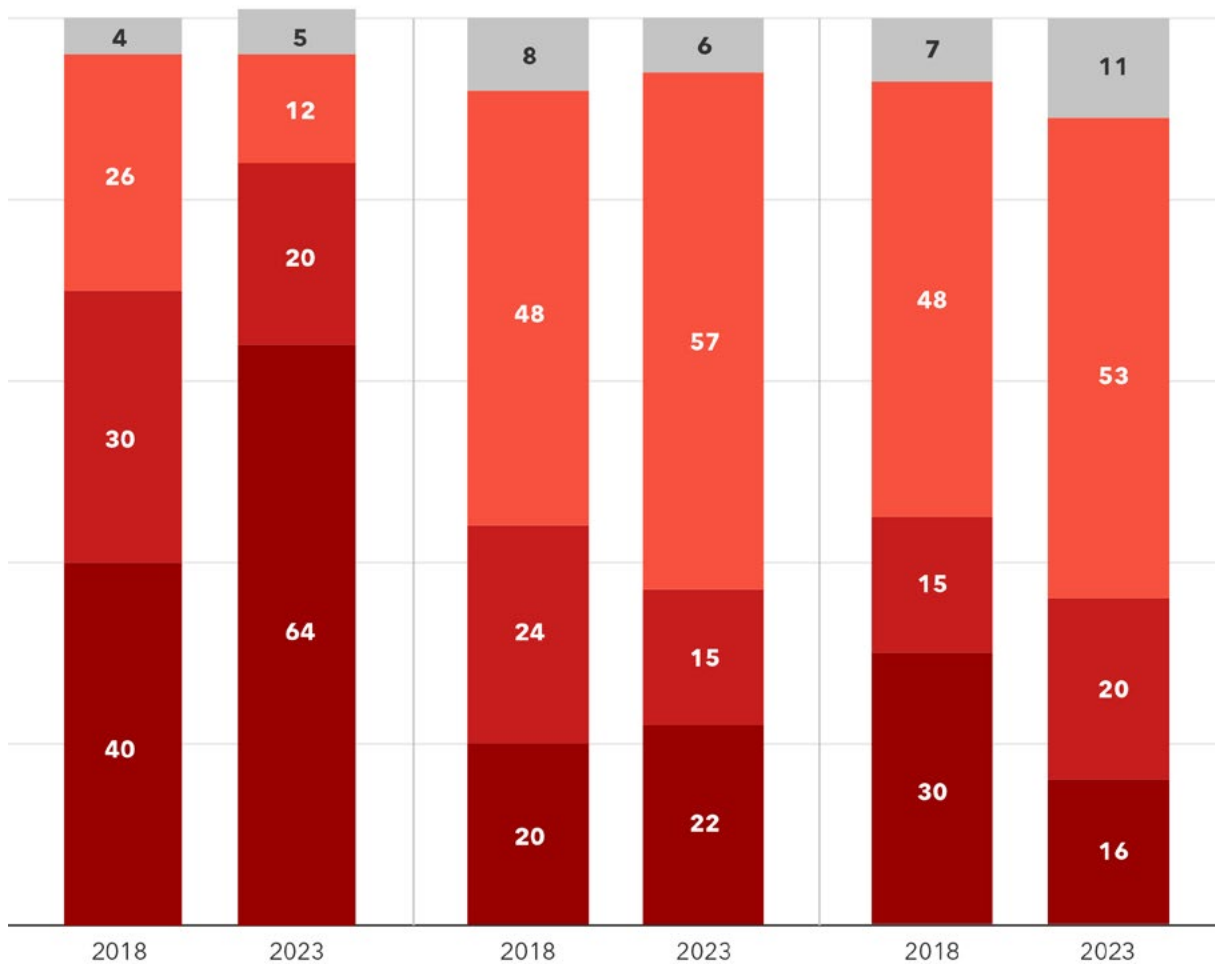
Question: There are different views on contraceptives. On a scale from 1 "completely agree" to 5 "completely disagree": How much do you personally agree with the following views?

Here: Contraception with the contraceptive pill or another hormonal contraceptive has **negative impact** on mind and body.

Here: Contraception with the contraceptive pill or another hormonal contraceptive **for years** is harmless.

Here: Contraception with the contraceptive pill or another hormonal contraceptive is also **suitable for very young girls**.

■ Agree
 ■ Neither agree nor disagree
 ■ Disagree
 ■ Don't know, no data



Basis: Sexually active men (2023: n = 500) | Shown: agreement (scale values 1 + 2), neither agree nor disagree (scale value 3), disagreement (scale values 4 + 5) | Deviations in the sum of 100 % are due to rounding | Figures in percent

Source: BZgA, data set "Contraceptive behaviour of adults", 2018, 2023 surveys

5

Usage problems with contraceptives

As in the two previous survey iterations on the contraceptive behaviour of adults, sexually active women and men were asked about possible difficulties they had encountered when using the pill and condoms. Those who stated that they were currently using the respective contraceptive were surveyed. The focus is therefore on the sex with active experience of use. The experiences of taking the pill are therefore presented from the perspective of women who use the pill, while male users primarily report on problems with the use of condoms.

5.1 The pill: frequently reported usage problems

Problems with the use of the pill remain widespread across the various survey points of the study series, as the answers from the perspective of women with personal experience of use show. When comparing the different survey iterations, it is important to bear this in mind: Between 2011 and 2023, the use of the pill has already declined by a third (33 %) according to the women using contraception themselves. It can therefore be assumed that those women who experienced unacceptable usage problems have switched to other contraceptives in the meantime anyway. The extent of reported difficulties in using the pill increased significantly from 59 to 78 percent between 2011 and 2018 (plus 19 percentage points).

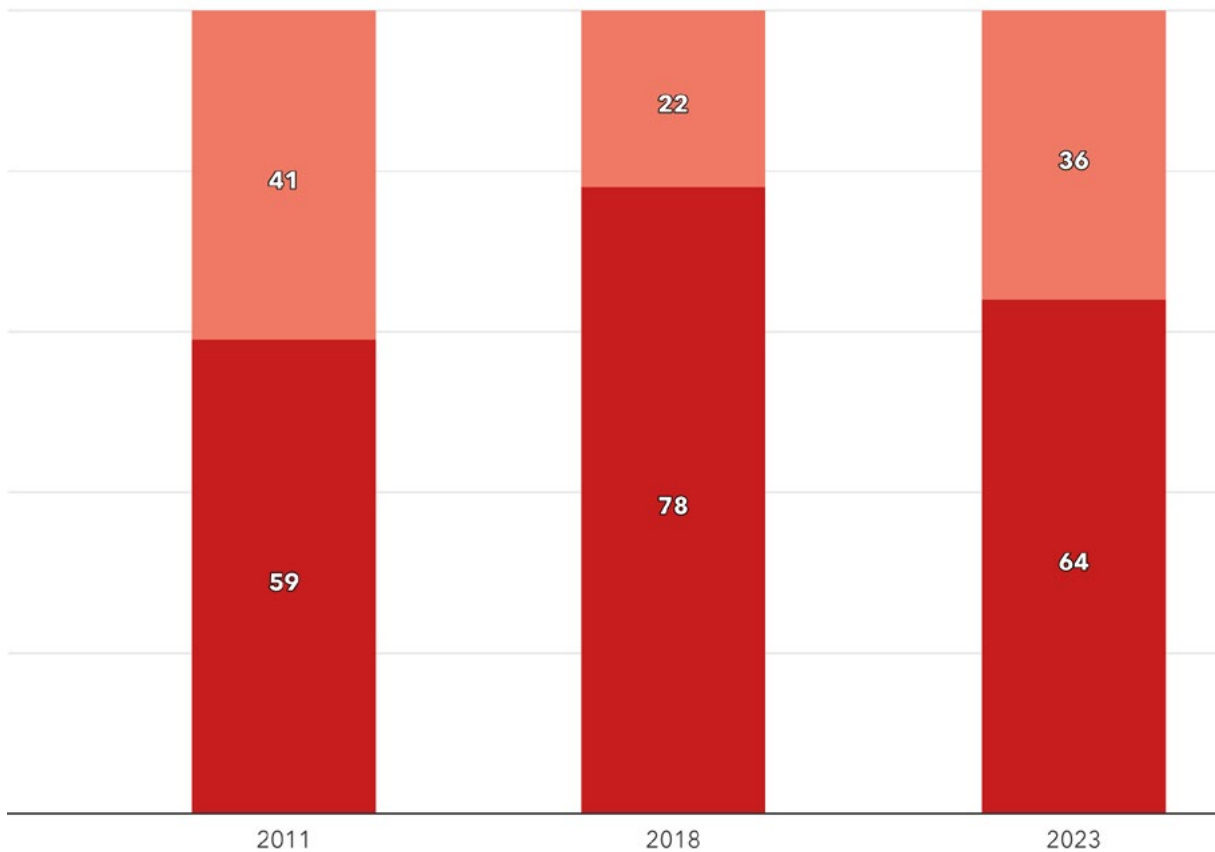
Pill use among women using contraception also declined in the same period (minus 6 percentage points). The sharpest decline then occurred in the years after 2018 (minus 12 percentage points). In this context, the current proportion of 64 percent citing problems with use among the remaining pill users still appears high (see [Figure 21](#)).

FIGURE 21

The pill: usage problems - trend

Question: Have you or your partner ever experienced [...] difficulties when using the pill in the last 12 months?

Yes No



Basis: Women who use contraception using the pill (2023: n = 104) | Figures in percent

Source: BZgA, data set "Contraceptive behaviour of adults", 2011, 2018, 2023 surveys

Type of problems reported with the pill

On average, pill users reported 1.4 of the eight possible problems listed. By far the main problem with the pill: forgetting to take it (on time). Two out of five women have done this at least once in the past twelve months (39%), a similar number to 2011 (38%). In 2018, forgetting to take the pill was by far the most frequently reported problem at 65%.

In addition, there are those who have forgotten to take the pill with them when staying away from home. At

15 percent, this affects a similar number of pill users as five and twelve years ago (21% and 12% respectively) (see Figure 22).

A total of 36 percent cited direct physical effects - down from 39 percent in 2018: at 9 percent, only half as many women now report headaches as a problem as in 2018 (then: 20%). In contrast, intermenstrual bleeding due to taking the medication is now much more common (27% compared to 11%).

Other side effects attributed to the pill include unwanted weight gain, cited by 8 percent of respondents (2018: 11%), and allergies, cited by 4 per cent (2018: 1%). In addition, a good one in five users (21 %) mentioned a lower libido, which represents a tripling of the frequency of this aspect compared to 2018 (then 7 %).

And: twice as many women as in 2018 were unsure about the effectiveness because vomiting or diarrhoea occurred, with a total of 15 percent reporting uncertainty in this survey, compared to 7 percent of users in 2018 (see Figure 22).

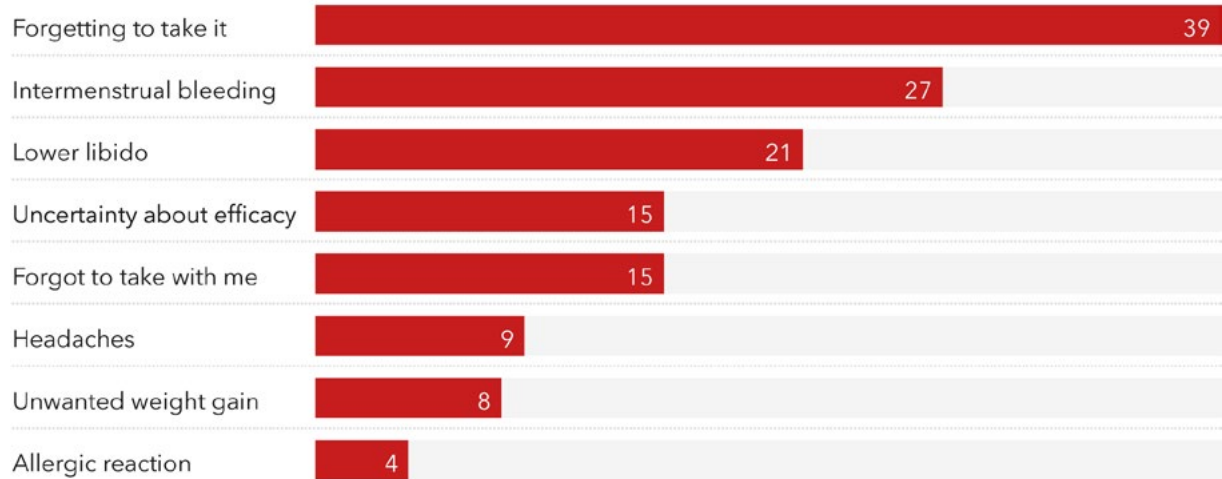
Younger pill users between the ages of 18 and 29 are by far the most likely to report application problems - however, due to case number restrictions, only a trend statement can be made here.

When it comes to the overall prevalence of problems with use, the responses of men whose sexual relationships involve contraception using the pill do not differ significantly from those of women (63 %; women: 64 %). This is new, because in 2011 and especially in 2018, men reported significantly fewer difficulties in using the pill (15 and 28 percentage points difference respectively).

FIGURE 22

The pill: most common problems with use from the women’s perspective

Question: Have you or your partner ever experienced any of the following difficulties when using the pill in the last 12 months?



Basis: 104 Women who use contraception using the pill | Multiple responses possible | Figures in percent

Source: BZgA, dataset "Contraceptive behaviour of adults", 2023 survey

5.2 Condoms: hardly any usage problems reported

According to the majority of male users, using condoms for contraception still cause no problems (see Figure 23). This is very remarkable, as the user base of condoms among men has grown by 26 percent since 2011, mirroring the move away from the pill.

Currently, two out of three men who use condoms for contraception respond to the question about usage problems with “none of the above” (65 %).

Only 35 percent of respondents reported problems with the application in the last twelve months. This figure has remained relatively constant over time and is even slightly below the level of the last two survey iterations.

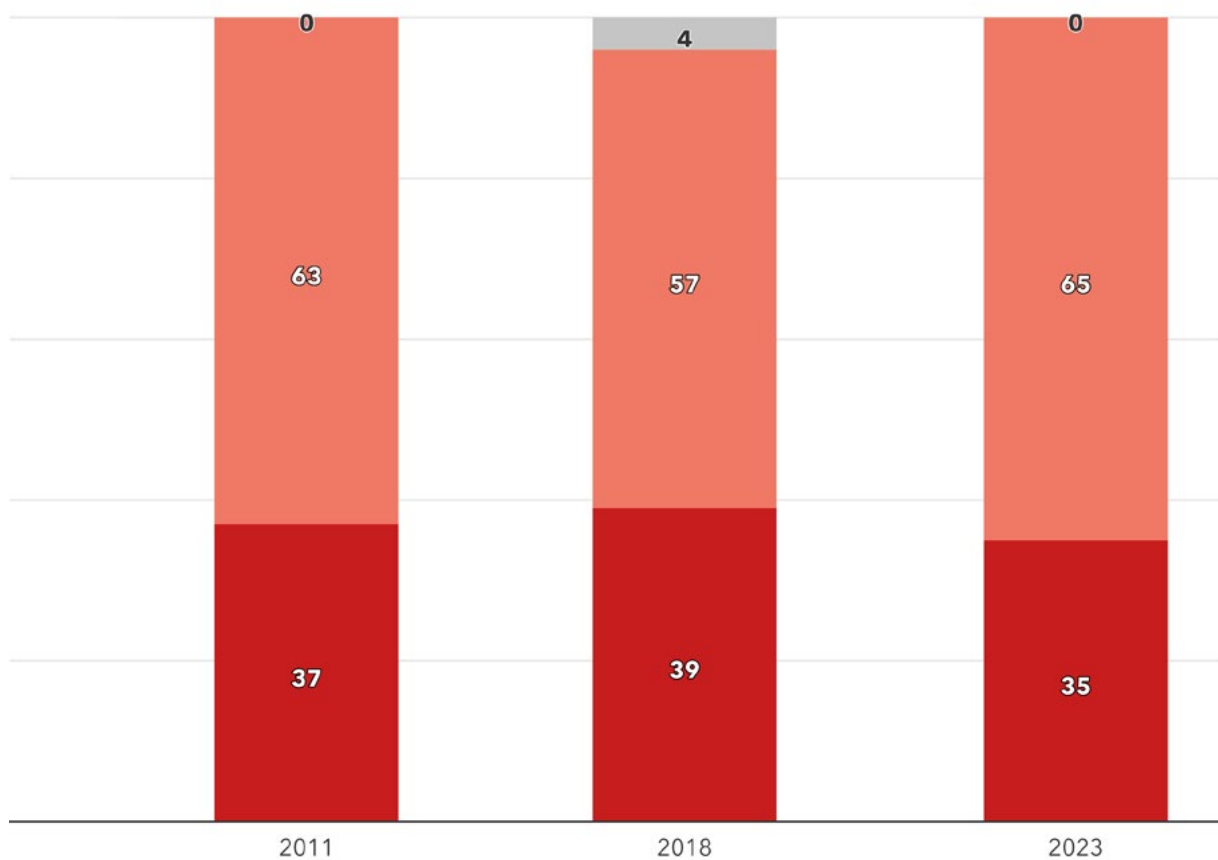
Compared to the women surveyed who use the pill, fewer problems are mentioned when using condoms: the average number of problems reported (0.7) is significantly lower than the comparable figure for pill users (1.4).

FIGURE 23

Condoms: usage problems - trend

Question: Have you or your partner ever experienced [...] difficulties with condom use in the last 12 months?

■ Yes ■ No ■ Don't know, no data



Basis: Men who use condoms as contraception (2023: n = 224) | Figures in percent
 Source: BZgA, data set “Contraceptive behaviour of adults”, 2011, 2018, 2023 surveys

Type of usage problems cited for condoms

Most of the eight problems with condom use submitted for evaluation are about equally widespread – and at a low level. The most frequently cited problems were that the condom burst or tore (13 %), slipped off (11 %) or that there were difficulties putting it on (11 %).

The overall perception of the problem has therefore shifted somewhat. Difficulties with the size of the condom (“too small”: 8 %) or the dryness of the contraceptive (9 %) are now in single figures, whereas five years ago they were reported much more frequently (2018: 14 % and 15 % respectively).

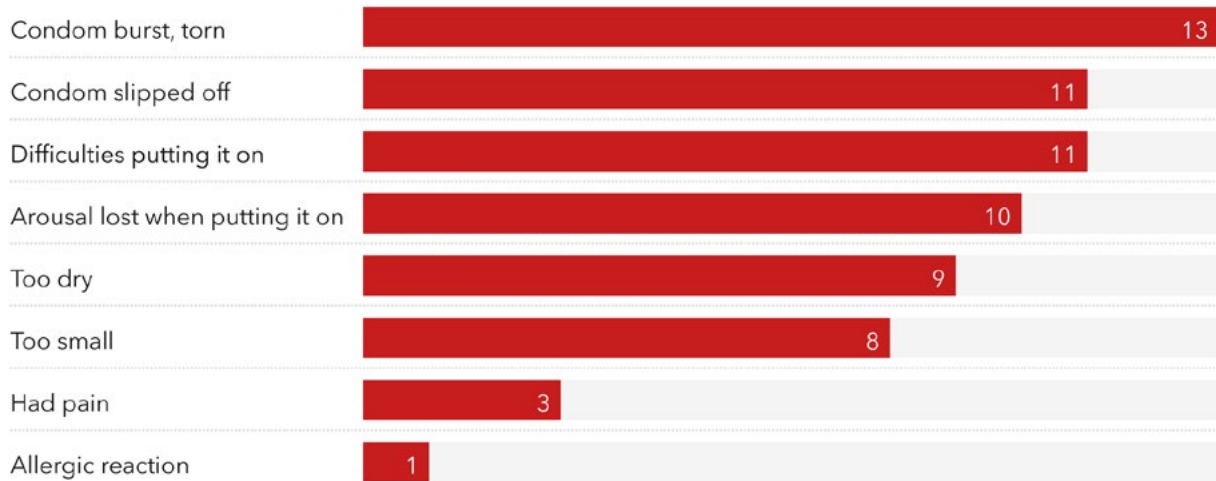
On the other hand, twice as many men (10 %) experience a loss of arousal while putting the condom on than in 2018 cited (5 %). Pain or allergic reactions still tend to be isolated cases (consistently a maximum of 5 % each since 2011).

Women often know about men’s problems. Among women who use condoms for contraception in their relationship, 32 percent report they experience difficulties. This is almost as high as the proportion of men (35%). Similar findings were already made in the previous surveys (discrepancy 2018: 6 percentage points, 2011: 4 points).

FIGURE 24

Condoms: most common usage problems from the men’s perspective

Question: Have you or your partner ever experienced any of the following difficulties when using condoms in the last 12 months?



Basis: 224 men who use condoms for contraception | Multiple responses possible | Figures in percent
 Source: BZgA, “Contraceptive behaviour of adults” dataset, 2023 survey



Appendix

Literature

Arbeitskreis Deutscher Markt- und Sozialforschungsinstitute e. V. (ADM). (n. d.). *Arbeitsgemeinschaft ADM-Stichprobe [ADM sample working group]*. <https://www.adm-ev.de/leistungen/arbeitsgemeinschaft-adm-stichproben/> [accessed on 11 November 2024]

Helfferrich, C., Klindworth, H., & Kruse, J. (2011). *Women's lives. Family planning and migration*. (ed. by the Federal Centre for Health Education, BZgA) (Research and Practice in Sexuality Education and Family Planning, 34). Cologne: BZgA. <https://www.sexualaufklaerung.de/en/english/projects/detail/womens-lives-family-planning-and-migration-in-womens-lives/> [accessed on 11 November 2024]

Helfferrich, C., Klindworth, H., Heine, Y., & Wlosnewski, I. (2016). *frauen leben 3. Familienplanung im Lebenslauf von Frauen. Schwerpunkt: Ungewollte Schwangerschaften. Eine Studie im Auftrag der Bundeszentrale für gesundheitliche Aufklärung* (Forschung und Praxis der Sexualaufklärung und Familienplanung, 38). <https://www.sexualaufklaerung.de/publikation/band-38-frauen-leben-3-familienplanung-im-lebenslauf-von-frauen-schwerpunkt-ungewollte-schwangerschaften/> [accessed on 11 November 2024]

Englisch summary: Helfferrich, C., Klindworth, H., Heine, Y., & Wlosnewski, I. (2016). *women's lives 3 – family planning in women lives. Focus: unintended pregnancies* (ed. by the Federal Centre for Health Education, BZgA) (M. Scuffil, translation). Cologne: BZgA. <https://www.sexualaufklaerung.de/en/english/projects/detail/womens-lives-3-selected-results> [accessed on 11 November 2024]

Knittel, T., & Olejniczak, L. (2023): Ungewollte Schwangerschaften im Lebenslauf – Ergebnisse der Studie „frauen leben 3“, *FORUM Sexualaufklärung und Familienplanung: Informationsdienst der Bundeszentrale für gesundheitliche Aufklärung (BZgA)*, 1, 21-27. https://doi.org/10.17623/BZgA_SRH:forum_2023-1_beitrag_fl3_ungewollt_schwangerschaften

Englisch version: Knittel, T., & Olejniczak, L. (2023). Unwanted pregnancies over the life course – Results of the “women's lives 3” study, *FORUM sexuality education and family planning: information service of the Federal Centre for Health Education (BZgA)*, 1, 21-26. https://doi.org/10.17623/BZgA_SRH:forum_2023-1_en_article_fl3_unwanted_pregnancies [accessed on 11 November 2024]

Office for Statistics Regulation (2024, 19 February). *Collecting and reporting data about sex and gender identity in official statistics: A guide for official statistics producers* (last updated 2024, December). Available at <https://osr.statisticsauthority.gov.uk/publication/collecting-and-reporting-data-about-sex-and-gender-identity-in-official-statistics-a-guide-for-official-statistics-producers/> [accessed on 20 Decembre 2024]

List of figures

Figure 1	Sampling procedure.....	8
Figure 2	Current contraceptive behaviour - trend.....	11
Figure 3	Current contraceptive behaviour by sex and age.....	12
Figure 4	Reasons for not using contraception.....	13
Figure 5	Contraceptives used - trend.....	15
Figure 6	Contraceptives used by age - trend.....	16
Figure 7	Reasons for choosing a contraceptive method - trend.....	18
Figure 8	Reasons for choosing a contraceptive method by sex.....	21
Figure 9	Relevance of the cost aspect by sex.....	23
Figure 10	Subjective assessment of information about the contraceptive method used - trend.....	25
Figure 11	Sources of information on the contraceptive method used by sex - trend.....	27
Figure 12	The internet as a source of information by sex - trend.....	29
Figure 13	Internet sources used for contraceptive information by sex.....	30
Figure 14	Communication about contraception in gynaecological practices - trend.....	33
Figure 15	Communication about contraception in gynaecological practices: assessment and conclusions - trend.....	34
Figure 16	Attitudes towards the negative impact of hormonal contraception - trend.....	36
Figure 17	Attitudes towards long-term use of hormonal contraception - trend.....	37
Figure 18	Suitability of hormonal contraception for young women - trend.....	38
Figure 19	Women: attitudes towards hormonal contraception - trend.....	40
Figure 20	Men: attitudes towards hormonal contraception - trend.....	41
Figure 21	The pill: usage problems - trend.....	43
Figure 22	The pill: most common problems with use from the women’s perspective.....	44
Figure 23	Condoms: usage problems - trend.....	45
Figure 24	Condoms: most common usage problems from the men’s perspective.....	46



BZgA research on the topic of contraception

People’s attitudes to contraception and contraceptive methods vary according to their life situation and age, as do their needs for information, education and/or advice. The different behaviours and attitudes are the focus of various BZgA studies and research projects. Another focus is the analysis of health communication services.

Contraceptive behaviour 2024

The repeat survey on the contraceptive behaviour of the sexually active population in Germany will be continued in 2024 with a new survey and an expansion of the established study design. Further information and interactive graphics on the current research can be found on the BZgA website www.sexualaufklaerung.de/en/english:

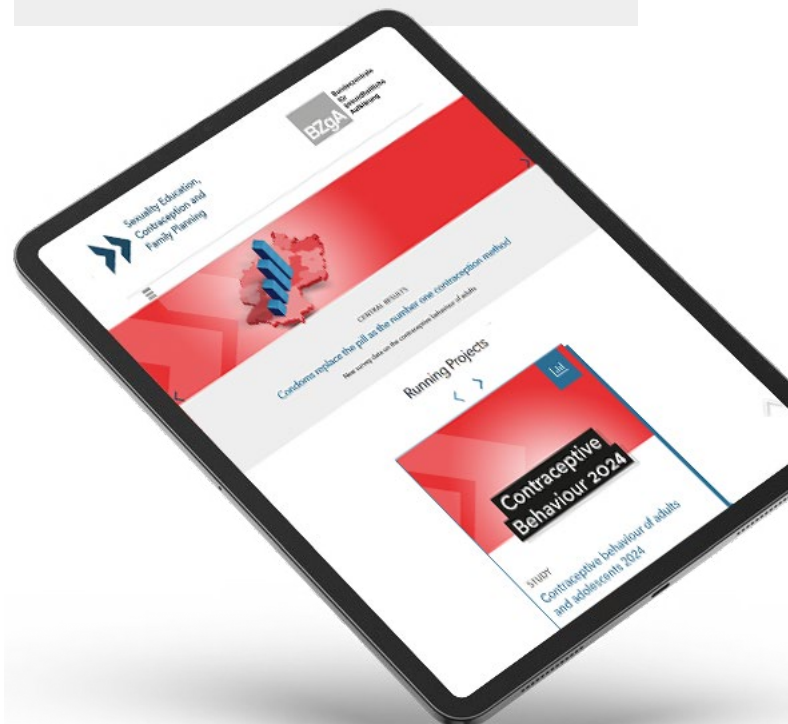


BZgA project contraceptive behaviour 2024: You can find more information [online](#).



Stay informed - subscribe to our newsletter

You can find more information [online](#).



Contraception as a topic in other BZgA projects

Youth sexuality

For thirty years, the BZgA has been researching the experiences and attitudes of adolescents and young adults on topics such as the first time, contraception and sexuality education. Contraception is also a topic in the 9th iteration of the survey, with four fact sheets analysing how 14- to 25-year-olds deal with its:

- **In Focus: Contraceptive Behaviour**
<https://www.sexualaufklaerung.de/en/english/projects/detail/in-focus-contraceptive-behaviour/>
- **In Focus: The Contraceptive Pill**
<https://www.sexualaufklaerung.de/en/english/projects/detail/in-focus-the-contraceptive-pill>
- **In Focus: Condoms**
<https://www.sexualaufklaerung.de/en/english/projects/detail/in-focus-condoms/>
- **Emergency Contraception**
<https://www.sexualaufklaerung.de/en/english/projects/detail/emergency-contraception/>

These and other fact sheets from the 9th iteration of the youth sexuality research project are available in English. <https://www.sexualaufklaerung.de/en/english/research-publications/factsheets/>

Monitoring of this part of the population will continue in 2024 with the 10th iteration of this study series.



More information on the BZgA project youth sexuality
www.sexualaufklaerung.de/en/english/

Repeat survey
**YOUTH
SEXUALITY**

Family planning throughout life

Family planning - and therefore contraception - is influenced by different phases and situations in life, and many factors play a role, especially for women. A particular focus of research is therefore on how women deal with family planning and the situational circumstances in which they want or do not want to have children.

More than 19,000 women between the ages of 20 and 44 in the Federal Republic of Germany were interviewed for the large-scale repeat survey. Originally, designed for four representative federal states, it became clear that an expansion would allow a deeper insight into the specific conditions in each federal state. Over the past ten years, data has been collected in four phases of the survey, so that detailed analyses are now available for all federal states.

For more information: <https://www.sexualaufklaerung.de/en/english/projects/detail/womens-lives-3-family-planning-in-womens-lives-unintended-pregnancies-and-pregnancy-conflicts/>

The series of studies will be continued in the research project *frauen leben 4* (women's lives 4), which started in 2023.



More information on the BZgA project women's lives 4
www.sexualaufklaerung.de/en/english/

Repeat survey
**FAMILY PLANNING
THROUGHOUT LIFE**

Research topic: health in online communication

The first time, menstruation, contraception and terminations have long been present on social media. Social media platforms such as YouTube, TikTok and Instagram are increasingly being used as common sources of information on sexual and reproductive health issues. But who communicates with each other here? How do users react to the content, how do they rate it? And what about the quality of this online information?

Until now, there has been no systematic scientific study of online communication on these topics in German-speaking countries.

Therefore the Federal Centre for Health Education (BZgA) conducted two studies::

- A media content analysis on the topic of contraception on social media
- A media content analysis on the topics of the first time, menstruation and terminations

Both studies are supplemented by qualitative interviews with young people aged between 17 and 25 on the use and evaluation of online information on sexual and reproductive health.

Contraception in social media

As part of a research project funded by the BZgA, the "Contraception in social media" project at TU Ilmenau is investigating how contraceptive behaviour is communicated in posts, videos and comments on the social media platforms YouTube, TikTok and Instagram.

The aim is to systematically analyse for the first time how different contraceptive methods are presented, discussed and evaluated on the main social media platforms in German-speaking countries. In addition, the quality of information is to be categorised.

Team lead: Prof Dr Nicola Döring, TU Ilmenau

Project period: June 2021 - January 2023



More Information on the BZgA project contraception in social media www.sexualaufklaerung.de/en/english/

First time, menstruation and termination (EMSA) in social media

The project "EMSA: First time, menstruation and termination of pregnancy as topics of sexual and reproductive online health communication" is another BZgA-funded research project at TU Ilmenau.

The aim is to systematically analyse social media communication and its evaluation on three central topics of sexual health - the first time, menstruation and termination.

Team lead: Prof Dr Nicola Döring, TU Ilmenau

Project period: 2023 - 2026



More information on the BZgA project EMSA www.sexualaufklaerung.de/en/english/

Imprint

Publisher

Bundeszentrale für gesundheitliche Aufklärung (BZgA)
[Federal Centre for Health Education (BZgA)]

Acting Director: Dr Johannes Nießen

Maarweg 149-161
50825 Cologne
Tel.: +49 221 8992-0
www.bzga.de
www.sexualaufklaerung.de

Authors

Dr Sara Scharmanski, Angelika Hessling, BZgA

Translation and editing

Kühn Medienkonzept & Design GmbH
Ruppichteroth, Cologne

To ensure the scientific accuracy and precision of the content, the translation was reviewed and edited by a native English speaker.

Concept and design

Kühn Medienkonzept & Design GmbH
Ruppichteroth, Cologne

Version

PDF version (EN) 1.0, published online February 2025
translated from German version 1.0 (September 2024)

First published in German

This publication is a translation of the study published first in German: Scharmanski, S., & Hessling, A. (2024). *Verhütungsverhalten Erwachsener 2023. Forschungsbericht zur Repräsentativbefragung* (Hrsg.: Bundeszentrale für gesundheitliche Aufklärung, BZgA) (Forschung und Praxis der Sexualaufklärung und Familienplanung). Köln: BZgA. https://doi.org/10.17623/BZgA_SRH:st_verhuetung2023

Cite this publication

Scharmanski, S., & Hessling, A. (2024). *Contraceptive behaviour of adults 2023. Research report on the representative survey* (Ed.: Federal Centre for Health Education, BZgA) (Research and practice in sexuality education and family planning). Cologne: BZgA. https://doi.org/10.17623/BZgA_SRH:st_en_contraception2023

All rights reserved.

This publication is distributed free of charge by the BZgA.
It is not intended for resale by the recipient or third parties.

The Federal Centre for Health Education (BZgA) has been collecting data on the contraceptive behaviour of adults in Germany since 2003. The representative survey focuses on the sexually active population between the ages of 18 and 49.

Further information on the survey and on projects in the field of contraception and other sexual and reproductive health topics can be found on the website of the Federal Centre for Health Education (BZgA).



More information on the BZgA research field of sexual and reproductive health:

www.sexualaufklaerung.de/en/english/

Stay informed - subscribe to our newsletter

The newsletter of the Sexuality Education, Contraception and Family Planning Department of the Federal Centre for Health Education (BZgA) provides information about new BZgA publications, new online content and offers.



More information about the BZgA newsletter:

www.sexualaufklaerung.de/en/english/