

Rethinking Contraceptive Futures

Summary

Contraceptive use has historically been central to family planning (FP) and demographic transitions, particularly in high-fertility settings. Yet today, contraceptive practices and dynamics are unfolding within increasingly diverse fertility regimes: persistently high fertility in some settings, declining and low fertility in others, and uneven transitions across and within countries. At the same time, contraception is embedded in shifting social norms, technological innovation, digital ecosystems, gender politics, shifting reproductive health (RH) markets, and evolving health systems.

This Special Issue seeks to reframe contraception not only as a tool for fertility reduction, but as a multidimensional social, demographic, and technological practice that operates across varied fertility contexts. We are not seeking to reframe the rationale of contraception “beyond pregnancy prevention” *per se*; rather, we aim to advance beyond a narrow macro-level framing of contraception solely as an instrument for population-level fertility reduction. To do so, we invite scholarship that situates contraceptive behavior within life-course trajectories, evolving fertility regimes, gendered power relations, technological change, and shifting policy landscapes. We use **contraceptive use** deliberately to emphasize individual- and couple-level practices, dynamics, and meanings—including adoption, continuation, switching, discontinuation, and embodied experience—while recognizing its longstanding connections to FP/RH policy and demographic change.

Scope and Rationale

Across the globe, contraceptive use is shaped by:

- Diverging fertility trajectories (declining, persistently high, or very low fertility)
- Postponement of childbearing and changing life-course patterns
- Expansion of assisted reproductive technologies (ART) and fertility markets
- Changing information ecosystems in SRHR (social media, big data, embodied knowledge)
- Growing attention to side effects, method dissatisfaction, and user-centered care
- Inequalities in access, agency, and method mix
- Emerging contraceptive and multipurpose prevention technologies

While research on contraception remains robust, it is often siloed, with fertility transition debates on one side, biomedical and technological innovation on another, and gender, sexuality, and reproductive rights and justice arguments left for separate conversations. This Special Issue aims to bridge these discussions. We are particularly interested in scholarship that clarifies how contraceptive use is being reinterpreted, practiced, and governed across shifting fertility regimes and broader social change.

Objectives

This Special Issue invites contributions that broaden and challenge traditional understandings of contraceptive use, access, and meaning. Contributions may engage explicitly with FP debates but should foreground contraceptive practices and their evolving meanings within broader social and demographic paradigms. We seek papers that illuminate contraceptive practices as culturally, politically, and technologically embedded, and that situate contraception within the wider conversations that shape people's lives. We welcome empirical (quantitative, qualitative, or mixed-methods), theoretical, methodological, and policy-oriented contributions from low- and middle-income (LMIC) and high-income (HIC) settings. Comparative and cross-context analyses are especially encouraged.

Special Issue Themes

Key themes include (but are not limited to):

1. Contraception Across Changing Fertility Regimes

- How is contraceptive use understood and practiced in contexts of declining or persistently low fertility?
- How do high-fertility and low-fertility settings coexist within global health narratives?
- What are the implications for FP policy, measurement, and programming? How should global health actors reconcile these parallel trends (declining fertility in many settings and persistent high fertility in others) when considering the future role of contraception in sexual and reproductive health and rights (SRHR) policy and programming?
- How do contraceptive dynamics (adoption, switching, discontinuation) differ across demographic contexts?

We welcome empirical and theoretical work that clarifies (as opposed to assuming) the relationship between contraception and demographic transition processes.

2. Contraception as a Life-Course Technology

- Contraceptive use across the reproductive life course, including adolescence, birth spacing, postponement, and perimenopause
- Contraception in contexts of delayed childbearing and partnership change
- Relationships between contraceptive use and return to fecundity
- Intersections between contraception and fertility enhancement technologies (ART, egg freezing, surrogacy)

This theme explores contraception as a technology that structures reproductive timing rather than solely limiting total fertility.

3. Information Ecosystems, Embodied Knowledge, and Data Management in SRHR

- Social media, misinformation, and user-generated knowledge
- Shifting narratives around contraception and SRHR (side effects, hormone hesitancy, method safety)
- Innovations in global SRHR data management (data sourcing, collection, synthesis, analysis), including topics related to big data and SRHR

We are interested in how information platforms and shifts in information sources are reshaping contraceptive knowledge, trust, and decision-making across settings.

4. Innovation and Emerging Technologies

- Novel contraceptive methods (male methods, multipurpose prevention technologies)
- Self-administered and on-demand methods
- Ethical, gendered, and social implications of innovation
- Funding environments and implications for future contraceptive development

Submissions should critically assess technological futures rather than assume linear progress.

5. Inequalities, Access, and Stratified Reproductive Futures

- Changing method mix and differential access across socioeconomic groups
- Inequities in service provision and supply chains
- Contraceptive autonomy, agency, and reproductive justice perspectives
- Structural and political economy dimensions shaping contraceptive systems

Equity is treated here as an integrative lens—who benefits from emerging trends, and who is excluded?

6. Contraception, Embodiment, and Social Meaning

- Intersections of sex, sexuality, pleasure, and contraceptive behavior
- Non-contraceptive therapeutic uses (e.g., menstrual regulation, gender-affirming care), where these illuminate broader contraceptive dynamics
- Cultural and political meanings attached to contraception

Submissions should situate these issues within the broader framing of contraceptive futures rather than treating them as isolated biomedical topics.

Types of Contributions

We particularly welcome:

- Original empirical research (quantitative, qualitative, or mixed-methods)
- Comparative or cross-context studies
- Conceptual and theoretical contributions
- Policy analyses
- Methodological innovations
- Critical commentaries and perspectives

All submissions should clearly articulate how they contribute to rethinking contraceptive behavior and dynamics across evolving fertility and social contexts.

We are open to other related suggestions that may not be listed here.

Planned Process for Paper Solicitation

We envisage a hybrid model of paper solicitation:

- **Open Call for Papers:** Upon approval, we will issue an open call widely through SRHR, social sciences, public health, demography, and population health networks, encouraging submissions from diverse disciplines, geographies, and career stages, with particular attention to LMIC-based scholars and early-career researchers.
- **Targeted Invitations:** In parallel, we will invite contributions from leading experts working on these topics, including both LMIC and HIC perspectives, to ensure coverage of key themes and methodological approaches.
- **Linkages to Existing Networks and Meetings:** We anticipate drawing on work presented in recent SRHR and population conferences (PAA, EPC, IUSSP, IPC, ICFP, SFP, APHA) and networks (for example, side events or working groups focused on infertility, low fertility, and reproductive justice), encouraging those authors to develop full manuscripts for the special issue.

Submission Details and Timeline

We ask for submissions to be **abstracts of at least 1 page** in the main body, excluding references, figures, and tables. Abstracts should specify whether the authors envision submitting a commentary, theoretical perspective, report, or original research article. Extended abstracts will be reviewed based on their relevance to one or both key themes highlighted above.

Please **send abstracts by June 30, 2026** to [rfriedman\[@\]popcouncil.org](mailto:rfriedman[@]popcouncil.org). Authors will be notified by July 15 whether a full paper is invited for submission. The deadline for full papers is January 15, 2027. All submissions will be reviewed through the Studies' double-anonymized peer review process.

Articles are posted on Early View as they are accepted and processed. Special issue publication is planned for December 2027.

Guest Editor Team

The editorial team will consist of co-editors and invited guest editors with demonstrated expertise across LMIC and HIC settings, as well as experience in editorial leadership, peer review, and collaborative special issues.