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WORLD FERTILITY SURVEY



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The Jordan Fertility Survey 1976 A Summary of Findings

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The World Fertility Survey is an international research programme whose purpose is to assess the current state of human fertility throughout the world. This is being done principally through promoting and supporting nationally representative, internationally comparable, and scientifically designed and conducted sample surveys of fertility behaviour in as many countries as possible.

The WFS is being undertaken, with the collaboration of the United Nations, by the International Statistical Institute in cooperation with the International Union for the Scientific Study of Population. Financial support is provided principally by the United Nations Fund for Population Activities and the United States Agency for International Development. Substantial support is also provided by the U.K. Overseas Development Administration.

This summary is one of a series containing the salient findings of the First Country Reports of the countries participating in the WFS programme. A copy of the report itself: *The Jordan Fertility Survey, 1976* is available for reference at all WFS depository libraries, or may be obtained from the International Statistical Institute, 428 Prinses Beatrixlaan, P.O. Box 950, 2270 AZ Voorburg, Netherlands, on payment of U.S. \$ 10 postage.

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THE JORDAN FERTILITY SURVEY 1976:

A SUMMARY OF FINDINGS

1. THE SETTING

Transjordan gained independence from the Ottoman Empire and became an autonomous political entity in 1923. Annexation of the districts of Ma'an and Aqaba followed shortly, in 1925. The present Hashemite Kingdom of Jordan was established in 1950 and the West Bank officially declared part of the Kingdom.

Estimates indicate that the population of Jordan has grown enormously since 1950. The population of the East Bank of Jordan was estimated as 587,000 in 1952. According to the 1961 Census, the population of the East Bank was 900,766. The Israeli occupation of the West Bank and Gaza Strip in 1967 resulted in the flight of hundreds of thousands from these territories to the East Bank. The number of people living on the East Bank was estimated to be 1,952,000 in 1975, a more than threefold increase over the estimate for 1952.

The population is unevenly distributed within the East Bank. The distribution reflects in part the pattern of rainfall and cultivation and in part the influence of the prevailing state of war in the region. Rapid urbanization has resulted from the influx of Palestinian refugees in 1948 and in 1967, as well as from internal migration out of rural areas to the cities. In 1975, the population of the three largest cities in the East Bank -- Amman, Zarqa and Irbid -- represented about 54 per cent of the total population of the East Bank.

Rapid economic and social changes since the early 1950's have assisted a sharp reduction in death rates. The reported crude death rate declined from 21 per thousand in 1950-54 to 18 per thousand in 1961 and then to 12 per thousand in 1975. Birth rates have maintained a high level, however: since 1960, the crude birth rate has remained in the range of 45 to 50 per thousand. The resultant rate of natural growth is thus quite rapid, about 35 per thousand annually.

The population of Jordan is very young: 50 per cent of the population is under 15 years of age. Consistent with this age distribution, the average household size is large: in 1976 about two-thirds of the households on the East Bank consisted of 6 or more persons, and about 10 per cent of the households consisted of 10 or more persons. Marriage of women occurs relatively early and is virtually universal.

There has been in recent years a rapid expansion of the educational system, and 88 per cent of children aged 6-14 were enrolled in primary schools in 1976. The educational level of the adult population is lower, however, reflecting the less intense schooling in the past. In 1976, among persons 12 years of age and older, 13 per cent of the males and 41 per cent of the females were illiterate.

Jordan has no formal population policy. Nevertheless, recognizing the problems associated with rapid population growth, the Government of Jordan established in 1973 a 'National Population Commission' to assume the responsibility of planning and promoting a national population policy. Recently the government has been considering offering family planning services in the Maternal and Child Health Centers run by the Ministry of Health. There exist so far five private family planning clinics.

2. THE SURVEY

The Jordan Fertility Survey (JFS) was undertaken in 1976 under the direct responsibility of the Department of Statistics of the Government of Jordan, as part of the World Fertility Survey and with the financial support of the United Nations Fund for Population Activities. The main objectives of the survey were: (1) To provide accurate and reliable data on the trend and pattern of fertility as well as on factors affecting fertility; (2) To provide information on contraceptive knowledge and practice and on fertility norms, in order to identify policy measures needed in Jordan; and (3) To provide a base for reliable population projections and thus make possible appropriate planning for future population needs.

The JFS was implemented in two stages, a Household Survey and an Individual Survey. The sample for the Household Survey was designed to include 5 per cent of the households in the East Bank, yielding an expected sample size of 14,000 to 15,000 households. For the Individual Survey, 1 out of 4 of the households selected for the Household Survey were subsampled and all ever-married women aged 15 to 49 who slept in the selected households the night preceding the interview were eligible for inclusion. The completed JFS included 14,493 households in the Household Survey and 3,610 women in the Individual Survey. The overall response rates exceeded ninety per cent in both surveys: in all strata of the nation sampled, with the exception of the 'small villages' stratum where the response rate in the Household Survey fell between eighty and ninety per cent.

The two stages of the JFS were separated by four to five weeks, the Household Survey taking place in June-July 1976 and the Individual Survey in July-September 1976. Field work for the Household Survey was carried out by 12 teams, each consisting of 4 enumerators and a supervisor, the majority of whom were male. Field work for the individual survey was carried out by 3 teams, each consisting of 4 females, a female editor, and a male supervisor.

The JFS utilized three questionnaires, each of which was translated into Arabic. The Household Schedule obtained information on the age, sex, and marital status of household members. In addition, the WFS General Mortality Module was appended to the Household Schedule to enable estimation of mortality levels and trends from the data collected. The Individual Questionnaire administered to ever-married women obtained information regarding their marriage and maternity histories, knowledge and use of contraception, fertility intentions and preferences, and socio-economic characteristics. This questionnaire was based on the WFS Core Questionnaire, incorporating in addition the Fertility Regulation Module and some questions from the Abortion Module. The third questionnaire was the Community Level Module, which consisted of questions on general characteristics and socio-economic conditions at the village level.

3. FINDINGS

3.1 NUPTIALITY AND EXPOSURE TO CHILDBEARING

In Jordan exposure to the risk of conception is confined (almost exclusively to women in the married state. For this reason the detailed Individual Questionnaire was administered only to women currently married at the time of the survey or married some time prior to the survey. In Jordan, a woman's exposure to the risk of conception over the reproductive ages will be influenced by a variety of factors: age at first marriage; the duration of the first marriage and, if dissolved, the length of the interval until remarriage, if it occurs; and, while married, factors such as temporary separation of spouses, coital frequency, adolescent sterility, primary and secondary sterility, post partum amenorrhoea, and contraceptive use. The JFS obtained detailed information which sheds light on the importance of most of these factors.

Age at Marriage

The JFS data document that first marriage is a relatively early and virtually universal experience among women in Jordan. The survey data also indicate a clear trend toward later marriage and a concomitant trend for first marriages to women in younger age groups to spread over a wider age range.

	Current Age					
	20-24	25-29	30-34	35-39	40-44	45-49
Age at Which 50 Per Cent Were First Married	19.4	18.4	17.6	17.6	17.3	16.7

The age at which 50 per cent of each of the cohorts (age groups) of women were first married has risen from 16.7 years for the age cohort 45-49 to 19.4 years for women 20 to 24. The decline in first marriage at quite young ages has been equally striking. Among the oldest women (ages 45-49) 31 per cent first married before their fifteenth birthday; among the youngest (ages 15-19) only 5.5 per cent did so.

The age at first marriage varies among socio-economic strata of the population as well as among age groups. Women residing in urban areas appear to marry later: among women aged 20-24 included in the Household Survey, for example, the percentage ever married is 58 per cent in urban areas and 78 per cent in rural areas. There is also a clear relationship between education and age at marriage. Among women aged 20-24, the percentage of women ever married declines steadily from 80 per cent for women with no schooling, to 76 per cent for those with incomplete primary education, to 58 per cent for those with preparatory education, to 31 per cent for those with secondary education or higher.

Differentials in age at first marriage also are evident when women are classified by work status before marriage. Among the subsample of women in the Individual Survey who first married before the age of 20 (approximately 70 per cent of the sample), those women who worked for cash outside the

family before marriage married about 1.4 years later than women who worked as unpaid family workers. Similarly large differentials appear when the women are classified by occupation before first marriage. Those women who were engaged in technical or clerical occupations report a mean age at marriage 2.3 years higher than those engaged in work in the agricultural or farming sector. A full 86 per cent of the subsample report not working at all before marriage, however, so that the impact of involvement in the modern economic sector on the average age at first marriage of the entire sample of women is quite small.

Moslem women tend to marry at younger ages than do Christian women, but the latter group comprise less than 10 per cent of the sample.

Marital Stability

Marriage is relatively stable. Out of all ever-married women in the sample, only 7 per cent of the first marriages have been dissolved, 3.6 per cent due to the death of the husband and 2.9 per cent due to divorce. Approximately half of the women experiencing dissolution of the first marriage had remarried as of the survey.

A larger proportion of the women than these figures might suggest are likely to experience marital dissolution before age 50. Among those women whose first marriage occurred 25 to 29 years before the survey, for example, almost 15 per cent have experienced dissolution of the marriage, with widowhood accounting for two-thirds of the dissolutions. Due to improvements in mortality, however, the percentage experiencing dissolution of the first marriage during the first thirty years is likely to decline among more recent birth cohorts.

Breast-Feeding

Exposure to childbearing is influenced by the practice and duration of breast-feeding. Breast-feeding women are less prone to conceive due to a delay in the resumption of ovulation. Although the extent to which breast-feeding influences fertility cannot be established from the survey data, major differences in length of breast-feeding among strata of the sample provide one possible explanation for observed fertility differentials.

The analysis of breast-feeding is restricted to women who had at least two live births (including any current pregnancy). This limits the analysis to about 86 per cent of the sample. For these women, the overall mean length of breast-feeding is 11.2 months. Younger women breast-feed for shorter durations than do older women: 8.8 months on average for women aged 15-24 as opposed to 14.1 months for women aged 45-49. More educated and urban women tend to breast-feed their children for shorter duration on the average: those women with secondary education breast-feed for almost 6 months less than women with no schooling, and women residing in Amman breast-feed for about 5 months less than women in medium or small villages.

The percentage of women who did not breast-feed varies only slightly with age, remaining at about 8.2 per cent up to age 44.

Exposure Status

Among the ever-married women in the Individual Survey, at the date of the survey 4.3 per cent were not currently married, 20.3 per cent were pregnant, 1.8 per cent were contraceptively sterilized, and 10.8 per cent reported that they were incapable of conceiving. The remaining 62.8 per cent were currently exposed to the risk of pregnancy.

There is no notable decline in the percentage of women currently exposed with increasing duration of marriage through the first twenty-five years of marriage, due to compensating effects of more frequent current pregnancies at shorter durations and increased marital dissolution and fecundity impairments at later durations. After twenty-five years of marriage, however, the combined effects of marital dissolution and fecundity impairments greatly diminish the percentage of women currently exposed to risk of pregnancy.

3.2 FERTILITY

Information on fertility was obtained through the use of a detailed birth and pregnancy history. This information permits examination of levels and differentials in several measures of fertility which are of interest: (1) Cumulative fertility as of the survey date; (2) Fertility in the first five years after marriage; and (3) Fertility in the period immediately preceding the survey.

Cumulative Fertility

Since ever-married women in households included in the Household Survey were asked to report their total number of live births, both the Household Survey and the Individual Survey provide data on the average number of children ever born to ever-married women. The two sources of data reveal very similar mean numbers of births for women classified by age at the survey dates:

Survey	Current Age							All
	15-19	20-24	25-29	30-34	35-39	40-44	45-49	
Household	1.6	2.5	4.1	6.0	7.5	8.3	8.6	5.6
Individual	0.9	2.4	4.2	5.9	7.3	8.6	8.8	5.4

The means in excess of 8.0 for women over age 40 and the means already in excess of 2.0 for women aged 20-24 both indicate a pattern of high fertility.

The high fertility levels result from the long periods of exposure to risk of pregnancy common in Jordan. It is evident from the discussion in the previous section that a principal factor affecting the length of

period of exposure is age at first marriage. The mean numbers of children ever born to women in the sample classified by both current age and age at first marriage are shown in Table 1. Until age 40 there is a clear pattern for women who married later to have fewer children at any given age interval, but this pattern is readily explained by the shorter periods of exposure which characterize women who married late. It is more noteworthy in Table 1 that among those women whose reproductive

TABLE 1
MEAN NUMBER OF CHILDREN EVER BORN TO EVER-MARRIED WOMEN,
BY AGE AT FIRST MARRIAGE AND BY CURRENT AGE

Current Age	Age at First Marriage						Total
	<15	15-17	18-19	20-21	22-24	25+	
15-19	1.5	0.7	0.1	-	-	-	0.9
20-24	3.8	2.9	1.7	0.9	0.5*	-	2.4
25-29	5.6	4.9	4.2	3.1	2.1	1.1*	4.2
30-34	7.3	6.9	5.7	4.6	3.2	1.9*	5.9
35-39	9.0	7.5	7.2	6.5	5.4*	3.1*	7.3
40-44	9.3	9.5	7.9	8.6	7.0*	3.9*	8.6
45-49	10.3	8.9	7.9	7.8*	6.8*	5.7*	8.8
Total	7.0	5.3	5.0	4.6	3.9	2.8	5.4

* Mean calculated on the basis of fewer than 50 women.

careers are complete or virtually complete (women over age 40), only those women who married at ages 22 or above show lower mean numbers of births. These late marriers comprise only 11 per cent of the sample. These data suggest that, if other patterns of behaviour related to fertility were not to change, first marriage would need to be postponed considerably beyond the ages typical even among the youngest age cohorts for a significant fall in fertility levels in Jordan to result.

There are significant differentials in the mean number of children ever born according to several socio-economic characteristics of the women. In evaluating the importance of such characteristics, it is important to take account of differences among the socio-economic groups in mean duration of exposure, since the average age and age at first marriage of the women in the various groups differ. Significant differences in cumulative fertility exist between women in rural and urban areas, with differences in mean duration taken into account. For example, among women over age 40, rural women show on average 0.5 more children ever born than do urban women. There are also differences by the occupation of the women's husbands, with the wives of technical and clerical workers reporting the fewest births and the wives of unskilled workers and of service workers reporting the greatest number of births, after adjusting the differences in mean duration of marriages. It appears that most of the

differences observed by husband's occupation, however, are due to differences in the levels of educational attainment of the wives of the husbands in various occupations. The educational differentials are, in fact, among the largest observed in the JFS data: after adjusting for duration differences, the mean number of children ever born differs by 1.9 births between women with no schooling and women with secondary schooling or more; the difference is 0.6 births between women with no schooling and women with primary schooling.

Fertility in the First Five Years After Marriage

The figures shown in the table below refer only to women who first married at least five years prior to the survey. It is evident that women who marry before age 15 or after age 25 experience fewer births during the first years after marriage than the remainder of the women. The subfecundity of women at young ages and at ages over 25 probably accounts for these differentials. Since the women who marry before age 15 comprise a substantial proportion of the sample (26 per cent of the women married at least five years), the mean differences observed here reveal different paces of family-building which are of some importance.

MEAN NUMBER OF CHILDREN BORN IN THE FIRST FIVE YEARS AFTER FIRST MARRIAGE, BY AGE AT FIRST MARRIAGE

	Age at First Marriage						Total
	<15	15-17	18-19	20-21	22-24	25+	
Mean Number of Children Born	2.1	2.4	2.5	2.4	2.2	2.3	2.4

The data indicate no clear differences in the level of fertility during the first five years after marriage among women with different socio-economic characteristics. It appears that women tend to have children rapidly within the first five years after marriage regardless of their socio-economic background. The socio-economic differential in fertility which are reported in the previous section emerge in the years following the early marriage years.

Current Fertility

As noted earlier, a main objective of the JFS was to obtain estimates of the current levels and trends in fertility in Jordan.

Information obtained in both the Household Survey and the Individual Survey on births in the 12-month period preceding the survey date permit calculation of age specific fertility rates (defined as the number of births to women in five-year age groups divided by the number of women in that

age group). The summation of these rates multiplied by five yields a 'total fertility rate'. The total fertility rate may be interpreted as the total number of live births that would occur to a woman if she were to go through her reproductive years bearing children at the age specific rates currently prevailing. The rates shown in Table 2 indicate that under the fertility rates prevailing in 1975-76 women in Jordan would bear in excess of 7 children between ages 15 and 49. This is somewhat less than the mean number of children ever born for women over age 40

TABLE 2

AGE SPECIFIC FERTILITY RATES (PER 1000 WOMEN), BY CURRENT AGE, AND TOTAL FERTILITY RATE: JORDAN FERTILITY SURVEY, 1976

Survey	Current Age							Total Fertility Rate
	15-19	20-24	25-29	30-34	35-39	40-44	45-49	
Household	71	300	367	332	240	112	47	7.8
Individual	93	335	386	311	229	83	25	7.8

at the time of the survey (see above) but a high level of fertility nonetheless. The Household Survey data and the Individual Survey data show slightly different age specific rates, but the total fertility rates from the two surveys are almost identical.

There are significant differentials in current fertility levels by socio-economic characteristics of the women, as demonstrated by the fertility rates shown in Table 3. The total fertility rate for women residing in the cities is 6.45 births, the rate for women residing in towns is 7.02 births, while the rate for women residing in rural areas is 9.07 births. The differences by level of education are even more substantial,

TABLE 3

TOTAL FERTILITY RATE BY RESIDENCE AND BY EDUCATIONAL ATTAINMENT: JORDAN FERTILITY SURVEY, 1976

Residence				
Urban (cities)	Urban (towns)		Rural	Total
6.45	7.02		9.07	7.34
Educational Attainment				
No Schooling	Primary	Preparatory	Secondary	Total
9.01	6.07	5.02	3.17	7.34

ranging from 3.17 births for women with secondary education to 9.01 births for women with no schooling. It should be noted that the differences among groups in age specific rates at younger ages may be due, partly or largely, to differences in the proportion married among the various groups at these ages rather than to differences in the rate of childbearing within marriage.

Total fertility rates for the 15 years preceding the survey (1961-1976) have been estimated from the JFS data. The estimates indicate that the rate has declined from 9.04 live births in 1961-66, to 8.54 births in 1966-71, to 7.70 births for 1971-76. Thus the level of fertility during 1971-76 was about 15 per cent below that for the period 1961-66. The estimates of the age specific rates show that this decline of about 1.3 births results from declines in fertility at all ages. The estimate of fertility trend over time from the JFS data may be influenced by factors such as the omission of births and the misreporting of dates of births by women in the interviews, and for this reason the estimates must be treated cautiously until the data are subjected to full evaluation of their quality.

3.3 PREFERENCE FOR NUMBER AND SEX OF CHILDREN

Among currently married fecund women, 42 per cent indicate that they do not want to have any more children. The percentage wanting no more children rises sharply with the number of surviving children, from 4 per cent of the women with no children to 78 per cent of those with 9 or more children. The percentage also increases with age, even among women with the same number of surviving children.

	Number of Living Children						Total
	0	1-2	3-4	5-6	7-8	9+	
Per Cent Wanting No More Children	4	10	32	51	69	78	42

The JFS data show that the percentage of women wanting to cease childbearing increases with increasing levels of educational attainment and is significantly higher in urban areas than in rural areas.

Sex Preferences

Jordanian women express a strong preference for sons over daughters. More women are satisfied with a sex composition weighted toward sons, and accordingly higher proportions of women express a desire to cease childbearing when these conditions are fulfilled. For example, consider the women with five living children at the time of the survey:

	Number of Living Sons				
	0	1	2	3	4
Per Cent Wanting No More Children	13	33	51	60	67

Women who wanted another child were asked whether they preferred the next child to be a boy or a girl. Most women prefer their next child to be a boy rather than a girl: 42 per cent prefer a boy, 13 per cent a girl, and 44 per cent express no preference. The responses indicate, moreover, that a balanced sex composition is not as satisfying as having more boys. Among those women with the same number of surviving children, those women with more boys than girls desire fewer additional children, on average.

Total Number of Children Desired

The mean number of total children desired among currently married women is 6.3. The majority (65 per cent) state a preference for five or more children. The mean number desired by any age group always equals or exceeds the mean number of living children, however, suggesting that the women may be intentionally reconciling stated desires with their fertility achievements to date.

Women in the younger age groups tend to desire fewer children than older women. The data also suggest that women who marry later tend to prefer smaller families, as do more educated women and women residing in urban areas. Each of these differentials follows from the consistency between stated desires and number of living children, a consistency which may be intentional, as just noted above.

3.4 CONTRACEPTIVE KNOWLEDGE AND USE

Knowledge of Contraceptive Methods

Women were asked in the JFS whether they knew or had heard of ways or methods to avoid pregnancy. Any method mentioned was considered to be a method known to the woman. Knowledge of a method, is therefore, not indicative of an understanding of the efficiency and proper use of that method.

Among all ever-married women, almost 97 per cent have heard of one efficient contraceptive method (Pill, IUD, Condom, Sterilization, and Other Female Scientific). The Pill is the most widely known method (96 per cent), followed by sterilization (79 per cent) and the IUD (76 per cent). Male contraception is mentioned by a few women (19 per cent).

Knowledge of an efficient method appears to be unrelated to age of the women or socio-economic characteristics of the women: among all strata examined, knowledge of at least one efficient method is reported by over 90 per cent of the women.

Ever-Use of Contraception

Among all ever-married women, 46 per cent report use of contraception at one time or another, most (39 per cent) reporting use of an efficient method. In view of the high fertility levels described above, these percentages reporting ever-use of contraception are surprisingly large. It should be noted, however, that 'ever-use' does not imply use over long periods of time or effective use when the method was employed.

In order of importance the effective methods used were the Pill (36 per cent), the Condom (9 per cent), and the IUD (4 per cent). Among ineffective methods, Withdrawal (18 per cent) and Rhythm (13 per cent) predominate.

The percentage of ever-users rises sharply up to age group 25-29, then remains roughly at the same level until declining among those aged 45-49. Similarly, the percentage of ever-users increases with number of living children up to the third child and thereafter stabilizes. The data indicate that older women have used more reliable and effective methods.

There are substantial urban-rural differences in ever-use: 57 per cent of ever-married women in urban areas reported ever using contraception, while only 21 per cent of rural women reported doing so.

Current Use of Contraception

Current use is investigated for a group of women regarded as currently 'exposed' to the risk of conception: non-pregnant, currently married women without a fecundity impairment. Contraceptively sterilized women are included in this group.

Current use of contraception is somewhat lower than ever-use; 26 per cent of the exposed women reported current use of an efficient method, and an additional 12 per cent reported use of an inefficient method. The Pill is by far the most popular method, being used by 18 per cent of the exposed women.

Current use shows the same age pattern as ever-use: the percentage currently using rises and then falls with age, being highest among women aged 30-44. A similar inverted U pattern appears when the percentages currently using are examined by number of living children.

The percentage currently using contraception is higher in urban than in rural areas (48 per cent and 12 per cent, respectively). Current use also shows a consistent relationship with level of educational attainment, rising uniformly with increasing level of education.

Almost two-thirds of the currently married fecund women who had never used a method of contraception indicate no intention of using contraception in the future. These women, who acknowledge no need for active family planning at any age or parity, comprise 28 per cent of all ever-married women in the sample. At the same time, a substantial minority of those who had never used a method of contraception -- about one-third -- intend to use in the future.

Family Size Preference and Contraceptive Use

The data show a clear pattern of greater use of contraceptive methods by exposed women who do not want future births:

	Percentage Currently Using		
	No Method	Inefficient Method	Efficient Method
Want Future Birth	79	8	13
Do Not Want Future Birth	41	17	42

Nevertheless, among those women who want to cease childbearing, less than half (42 per cent) report current use of an efficient method. The remaining 58 per cent of the women indicate desires to prevent further conceptions but report no active effort to do so. Intensified family planning efforts in Jordan would quite naturally be addressed to the needs of this group.

3.5 MORTALITY

As noted previously, the Household Survey incorporated a mortality module in order to obtain information on levels of mortality at all ages. Information obtained in the detailed maternity histories of the Individual Survey provide an additional basis for deriving estimates of infant and child mortality. The summary of the findings provided here will be limited to levels and trends in infant and child mortality.

The question of levels, trends, and differentials in infant and child mortality in Jordan is of particular interest because of the relatively high rates which are believed to have hitherto prevailed. The data indicate that in the period immediately preceding the survey, out of 1000 live births of either sex, 81 males and 83 females die within the first year of life, and 95 males and 99 females die before reaching the second year of life. Mortality during these first two years is much higher in rural than in urban areas.

The data also suggest that there has been a substantial reduction in the level of infant and child mortality in recent decades. Almost 130 out of 1000 live births born in the period 1950-54 died within the first year of life; the corresponding figure for 1970-75 is 70 out of 1000. The validity of these estimates is almost certainly jeopardized by omission and misreporting of births and infant deaths in the past. It is quite likely, however, that due to the reporting biases the decline suggested by the data is less than the true decline.