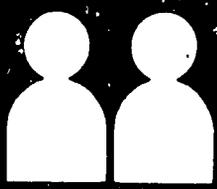
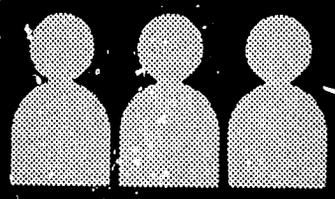
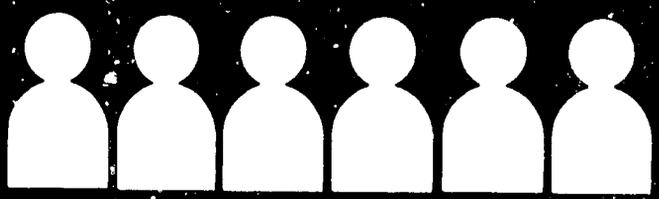
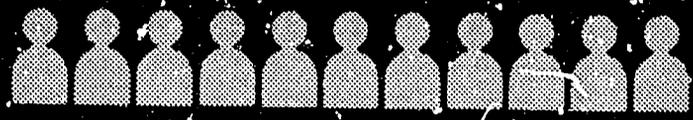


PN-AAT-612 41733

The findings of a research project commissioned
by USAID and USAID and conducted between
1972 and 1984. The findings are available to
the public under the provisions of the
Freedom of Information Act.



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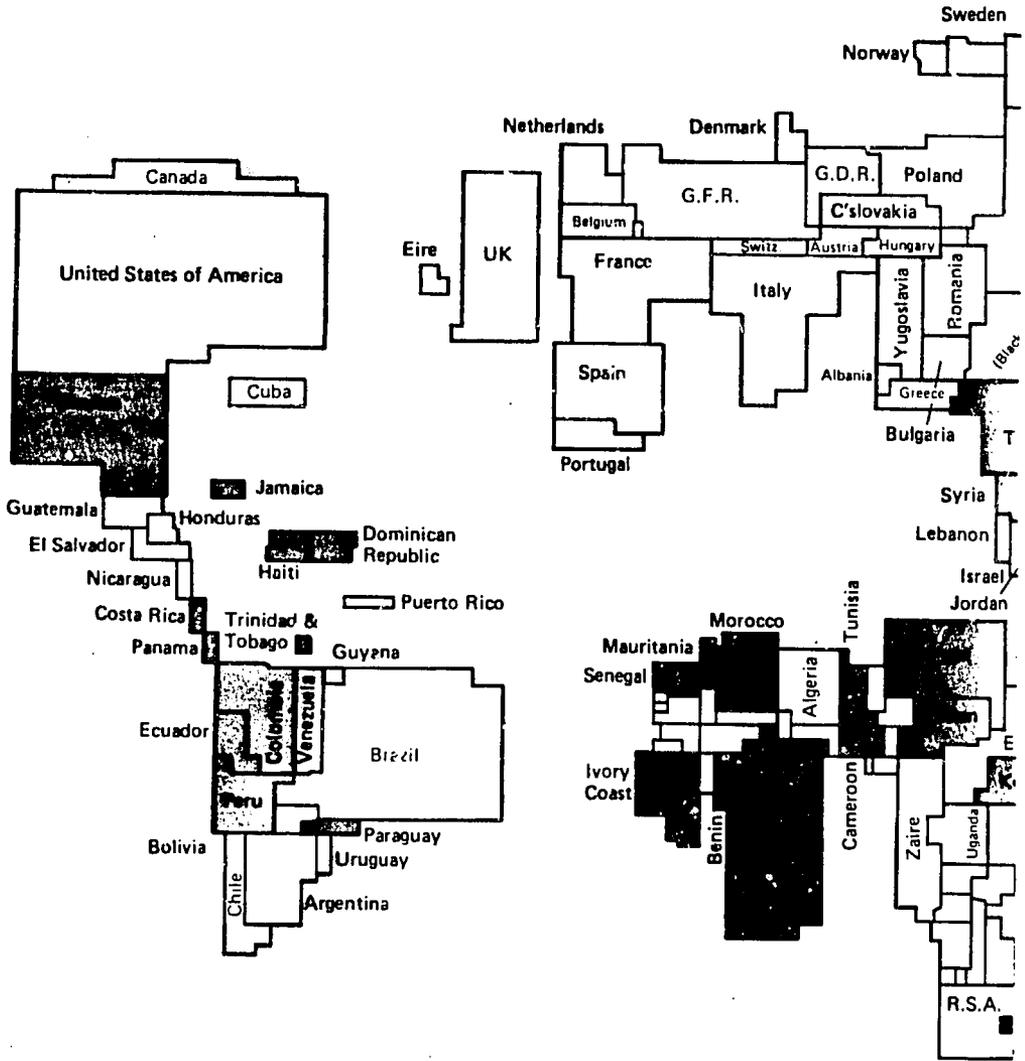
PN-AAT612

World Fertility Survey



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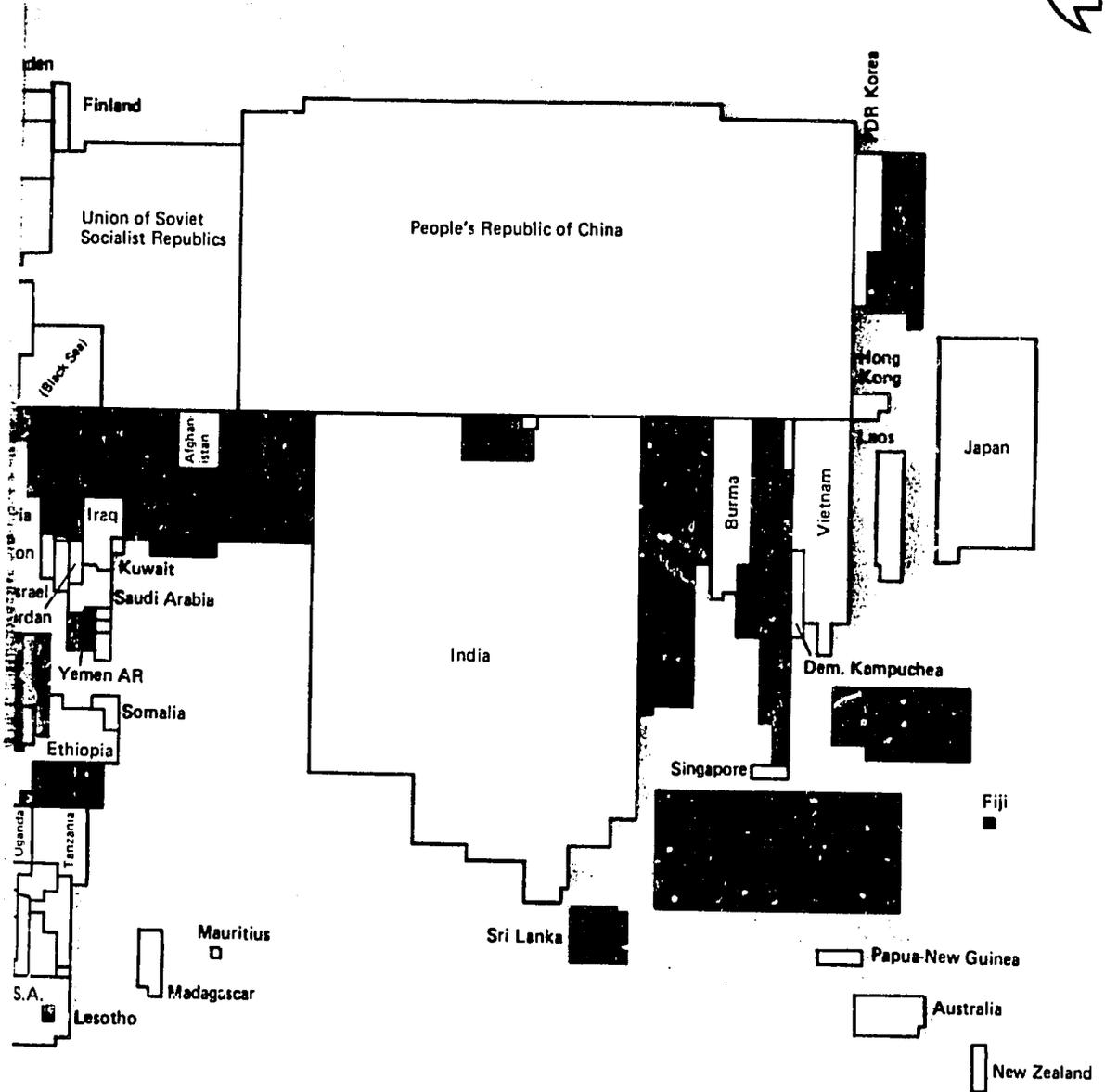
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Developing countries which participated in the World Fertility Survey by region

Developed countries which participated in the survey





which
vey

This world map has been calculated and drawn with the area of each country in proportion to its population

The scale is ■ = 1 million people



Fertility in the Developing World

The World Fertility Survey (WFS) was established in 1972. It was commissioned at a time of growing concern among governments and international agencies over the accelerated rates of growth of human populations. Official attitudes to family planning programmes varied widely among countries and there was a view in some quarters that economic development would of itself bring down birth rates as it had done long before in many of the industrialized countries. What was becoming clear, above all, was that, before really effective family planning policies could be formulated and implemented, better information was needed about fertility itself. Against this background, the WFS programme was set up to collect internationally comparable data on fertility, infant mortality and family planning. It was established as a research project within an already existing organization, the International Statistical Institute, and operated with the collaboration of the United Nations and in co-operation with the International Union for the Scientific Study of Population. Funds were provided by the United Nations Fund for Population Activities and the United States Agency for International Development, with additional support from the governments of the United Kingdom, France, Canada and Japan.

Both developing and developed countries were invited to participate in the research programme, the largest social survey ever carried out. The first developing countries to participate came from Asia and the Pacific, with Fiji providing a pilot survey. Between 1974 and 1979, fifteen countries from this region conducted their data collection. Fieldwork took place in the Americas in the early and middle years of the WFS programme. Thirteen country surveys in Latin and Central America and the Caribbean went into the field in the years 1975-80. Activity in the African continent marked the final years of the programme, with Lesotho conducting its fieldwork in 1977, followed by twelve other African countries. Portugal was the only European country to participate. (The dates of fieldwork are given in the table below.) Iran, who also joined, completed their survey independently, and their results are therefore not included here. Recruitment to the WFS programme ceased in 1981 and the programme closed in June 1984. Altogether 41 developing countries had participated and published their findings, representing a total population of 1063 million, with 218,582 women interviewed in sample surveys in the various countries. Twenty developed countries, mainly from Europe, participated, but no funding or technical assistance were provided as in the case of developing countries. The present booklet covers only the developing countries.

In some of the countries, research into fertility and contraceptive use had already been conducted, but these were often unsystematized studies, which lacked international comparability. The WFS attempted to remedy the defect of earlier surveys by developing recommended questionnaires in English, French, Spanish and Arabic, to be used in all the countries, adapted to local conditions as necessary. Two recommended questionnaires were established, after consultation with many international experts: the household schedule, usually administered to the head of household, which collected information on the size and structure of the household, and the individual questionnaire, which was administered to individual women in the household. This second questionnaire was longer and more detailed and took about half an hour to administer. It investigated each woman's background and education, all her pregnancies and births, her knowledge and experience of contraception, her marriage(s), her own wishes as to the size of her family, her work experience, covering work paid in cash or kind and unpaid labour, and her husband's education and job. Additional sections, known as modules, were optional and some countries made use of them to collect more detailed data on some of the topics of the basic questionnaire, such as contraceptive availability, or to collect information on other relevant subjects, such as adult mortality or the local environment and amenities. A major example of how the basic questionnaire was adapted to local conditions is the definition of husband or partner. In Asia and the Middle East, only married (or formerly married) women were interviewed. In regions where little childbearing takes place outside marriage, interviewing unmarried women would have caused offence and anyway would have yielded little useful data. In Africa and Latin America, consensual unions were investigated and women asked about their common law husbands. In the Caribbean countries where less formal relationships not involving co-habitation also have a bearing on fertility levels, women were asked about all their relationships, including these 'visiting unions'. But despite these local differences, the international comparability of the data remained.

In each country, the agency executing the survey set up its own team, and technical assistance and funds were provided by the WFS. The experience provided by the WFS of conducting a survey of this type was considered one of the major achievements of the programme which sought to increase national capability of survey work. The sample was designed, interviewers and supervisors were recruited locally and trained, the questionnaire was translated into local languages if required, and a trial run, known as the pre-test, was conducted. The questionnaire was then refined and improved and the main survey went into the field. Sample sizes ranged from 2605 women in Yemen Arab Republic to 9727 in Nigeria, averaging around 5000 women. The data was usually processed in the country, but in a few cases it was processed at the WFS headquarters in London. The principal report on the findings of each country survey was prepared by the country in collaboration with the

WFS staff. It consisted of a description of the results, with the most significant tables, followed by the very detailed tabulations. A summary of the findings of each country was also prepared, and was published in English, French and Spanish.

After publication of the principal report, further analysis of the data was conducted, much of it by nationals of the countries concerned. This analysis has resulted in a large number of papers published in demographic journals and presented at conferences; much of it has been published by the WFS itself in its various series. A number of depository libraries throughout the world hold the complete set of WFS publications. A publications list and individual copies may be obtained from the Permanent Office of the International Statistical Institute, 428 Prinses Beatrixlaan, PO Box 950, 2270 AZ Voorburg, Netherlands.

These publications are specialist in approach and this booklet offers a more accessible graphic presentation of the major findings of the WFS. The average age of women at marriage, the size of their families and total fertility rates are illustrated. The influence of education and urban or rural residence on fertility and contraceptive use is shown, together with the desire of married women for more children, their desired family size and levels of infant and child mortality. In the last years of the WFS programme, other areas of analysis provided interesting results. Researchers looked at the effect of breastfeeding on fertility levels and at the higher mortality among infants and children in families where babies are born in rapid succession. A possible unmet need for family planning among women who report not wanting to increase their families but who do not use contraception has been identified. A list of sources for the charts appears at the end of this booklet.

The WFS has completed its programme of surveys and analysis, but fertility research continues and a wider concern for population matters has been stimulated by the programme. It has been responsible for the creation of a large body of carefully checked, high quality data, invariably more reliable than previous data. This information has allowed the countries to acquire knowledge, and accurate knowledge, of their fertility.

Countries participating in the World Fertility Survey

	Population mid-1984 (estimate, millions)	Year of field- work	Sample size (women)		Population mid-1984 (estimate, millions)	Year of field- work	Sample size (women)
Africa							
Benin	3.9	1981/82	4018	Philippines	54.5	1978	9268
Cameroun	9.4	1978	8219	Sri Lanka	16.1	1975	6810
Egypt	47.0	1980	8788	Syria	10.1	1978	4487
Ghana	14.3	1979/80	6125	Thailand	51.7	1975	3820
Ivory Coast	9.2	1980/81	5764	Turkey	50.2	1978	4431
Kenya	19.4	1977/78	8100	Yemen A.R.	5.9	1979	2605
Lesotho	1.5	1977	3603				
Mauritania	1.8	1981	3500	Europe			
Morocco	23.6	1980	5800	Portugal	10.1	1979/80	5148
Nigeria	88.1	1981/82	9727				
Senegal	6.5	1978	3985	Americas			
Sudan (North)	21.1	1978/79	3115	Colombia	28.2	1976	5378
Tunisia	7.0	1978	4123	Costa Rica	2.5	1976	3935
				Dominican Rep.	6.3	1975	3115
Asia and Pacific				Ecuador	9.1	1979/80	6797
Bangladesh	99.6	1975/76	6504	Guyana	0.8	1975	4642
Fiji	0.7	1974	4928	Haiti	5.5	1977	3350
Indonesia	161.6	1976	9155	Jamaica	2.4	1975/76	3096
Iran*	43.8	1977	4878	Mexico	77.7	1976/77	7310
Jordan	3.5	1976	3610	Panama	2.1	1975/76	3701
Korea, Rep. of	42.0	1974	5430	Paraguay	3.6	1979	4622
Malaysia	15.3	1974	6321	Peru	19.2	1977/78	5640
Nepal	16.6	1976	5940	Trinidad & Tobago	1.2	1977	4359
Pakistan	97.3	1975	4952	Venezuela	18.6	1977	4361

* Results not included here.

1 Average age of women at first marriage



This is known as the singulate mean age at marriage or SMAM.

AFRICA

Age in years



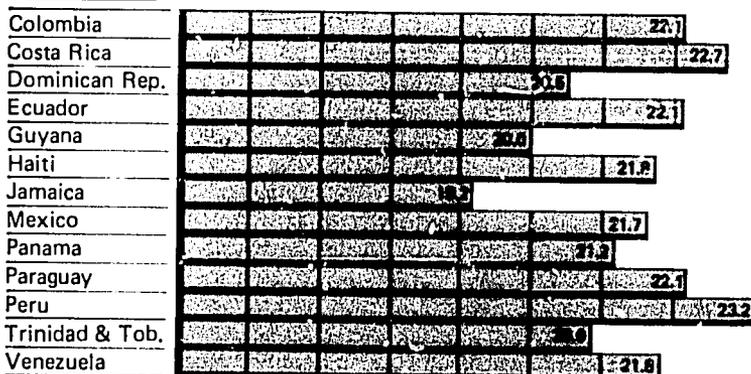
ASIA AND PACIFIC



EUROPE



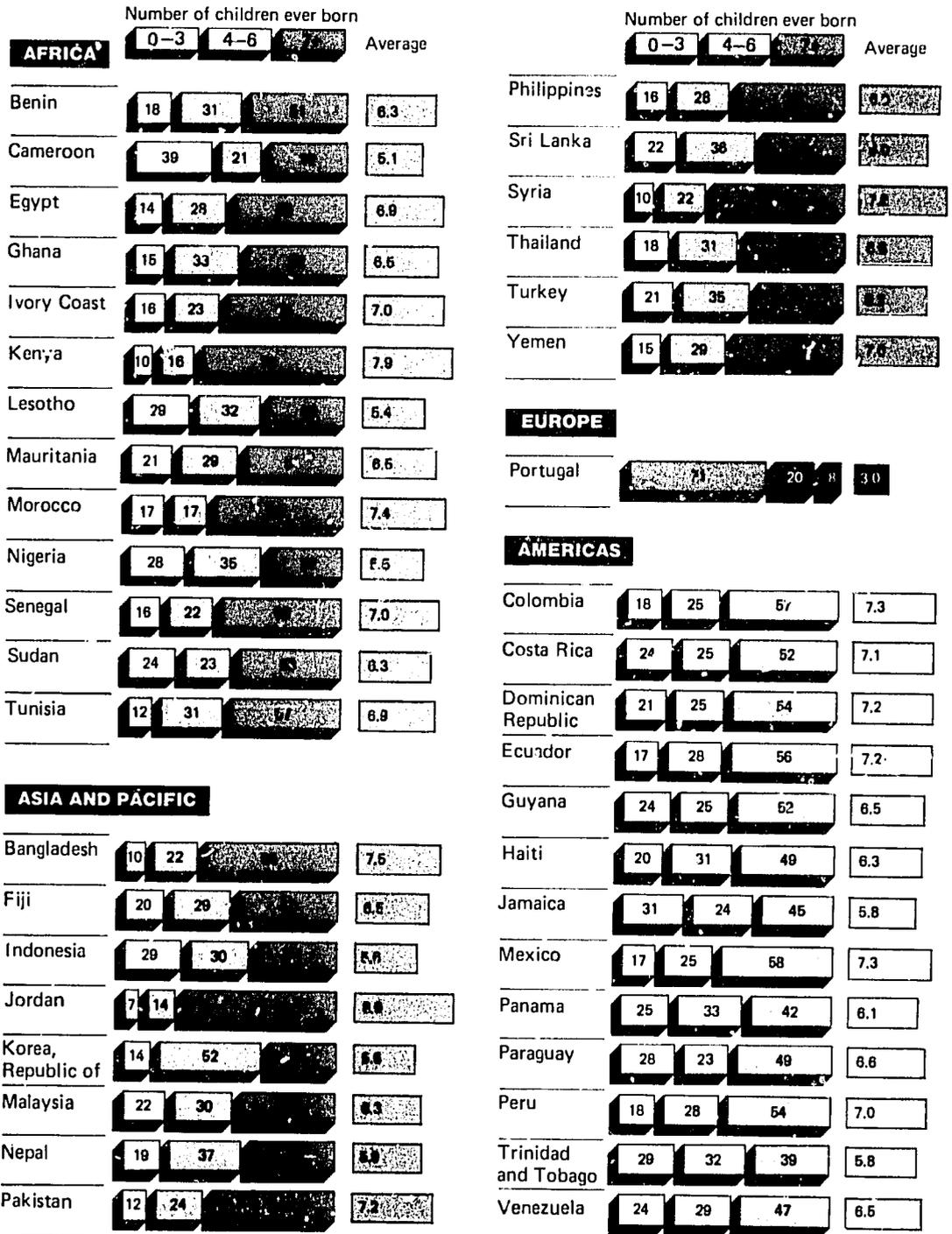
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2 Married women and the size of their families

This chart shows the percentage distribution of currently married women over 40 according to the number of children they have had, giving an indication of how many women have large or small families. The final bar shows the average number of children in a family.

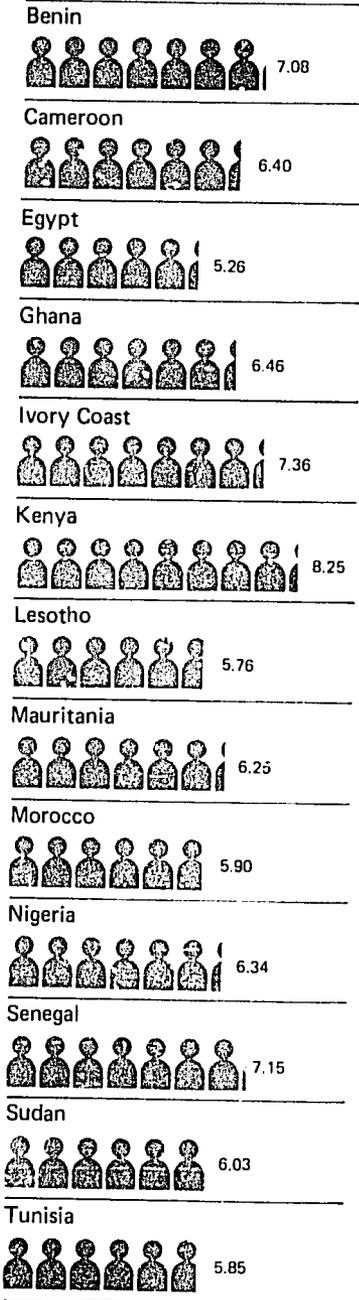


3 Total fertility rates

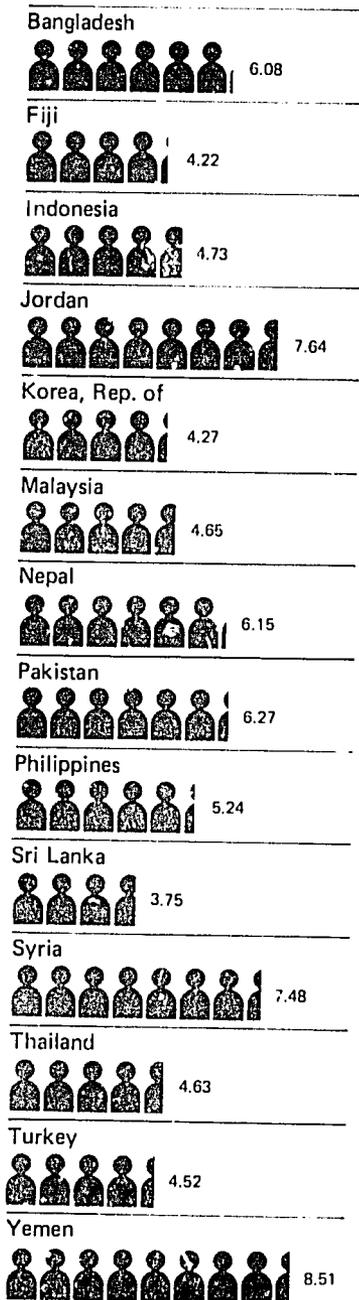


This chart shows the total fertility rate. This rate indicates the level of fertility in a country, and is calculated on the assumption that women will continue to have children at the rates prevalent in their country in the period 0 – 4 years before the country survey.

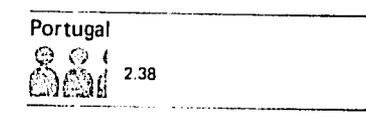
AFRICA



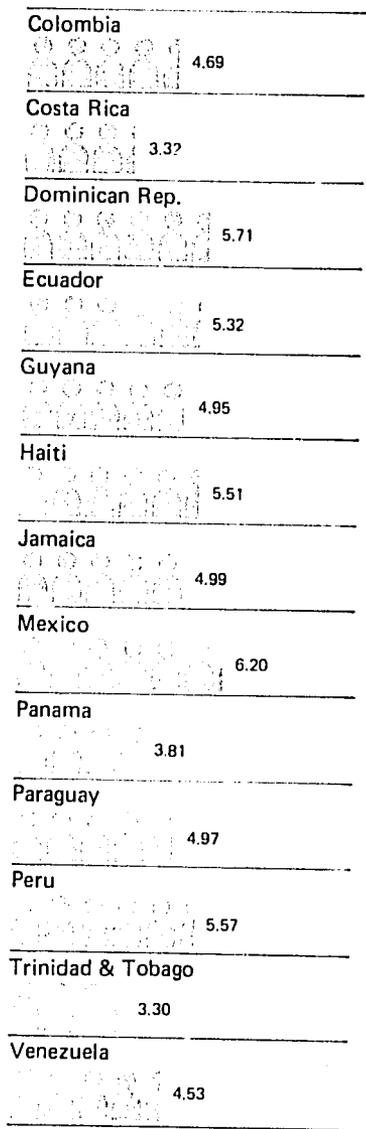
ASIA AND PACIFIC



EUROPE



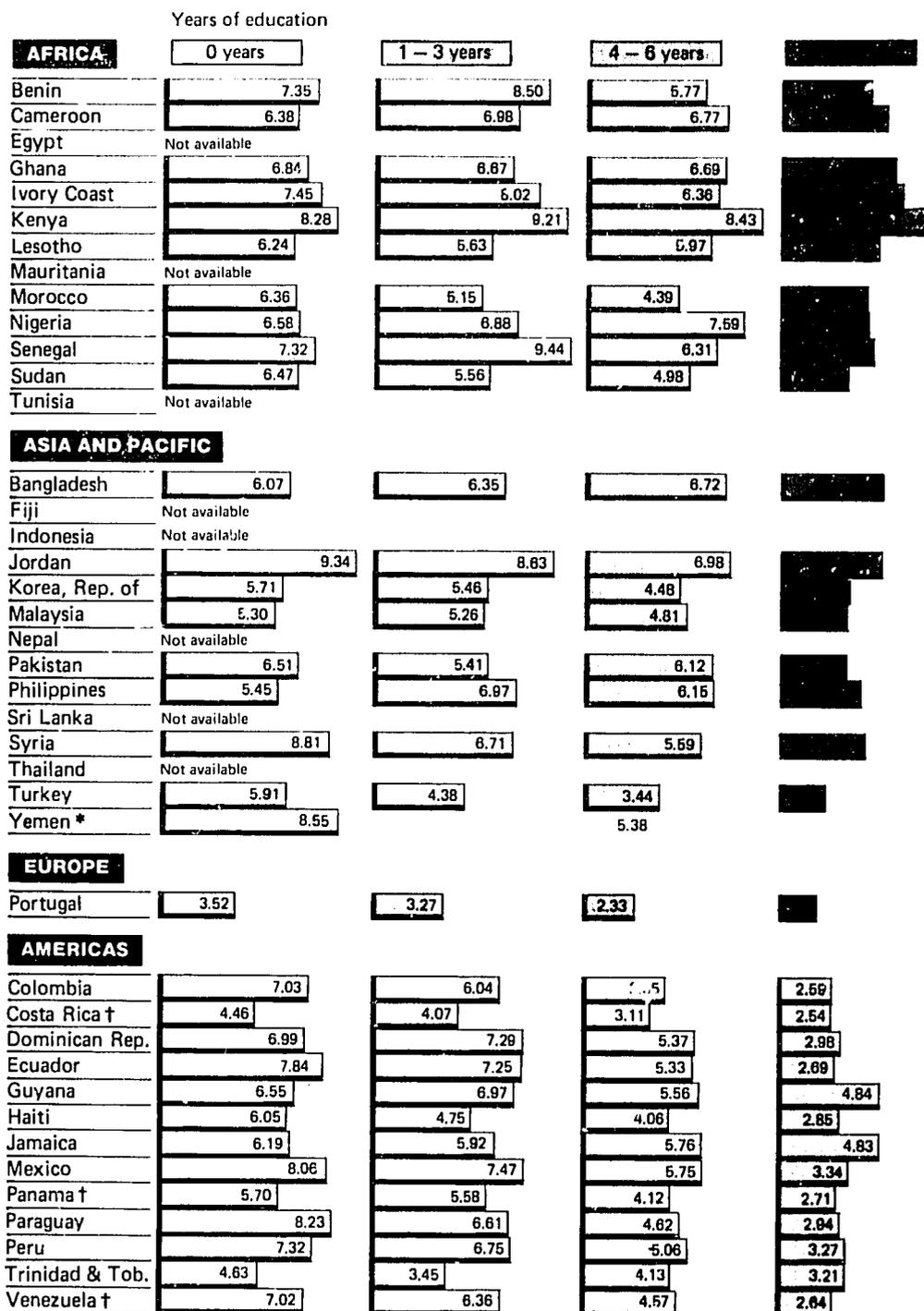
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4 Fertility and education

This chart shows the current total fertility rate (see chart 3) by education. It breaks down the sample of women into educational groups, ranging from the group with no education to the group with 7 or more years of education. The period used is 0 - 4 years before the country survey.



* Only two education groupings used : 0 years; 1+ years

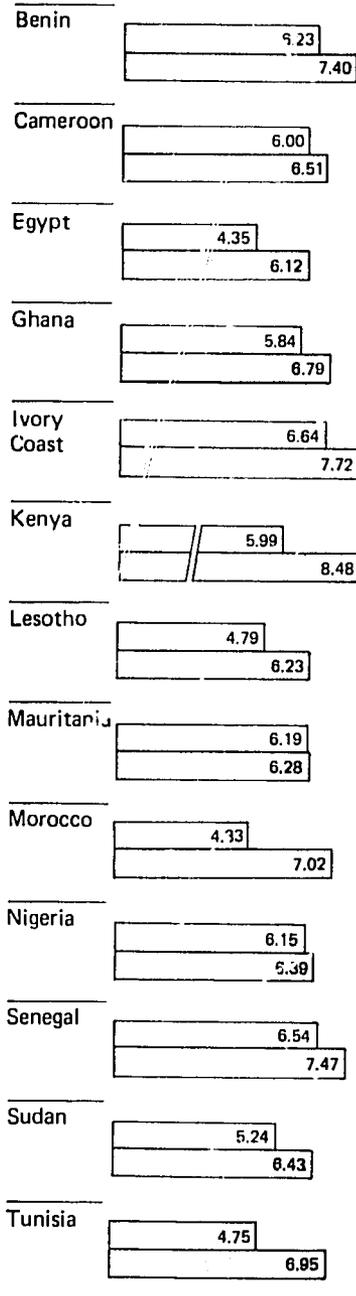
† Values refer to ages 15 - 49 for Venezuela and ages 20 - 49 for Costa Rica and Panama

5 Fertility and place of residence

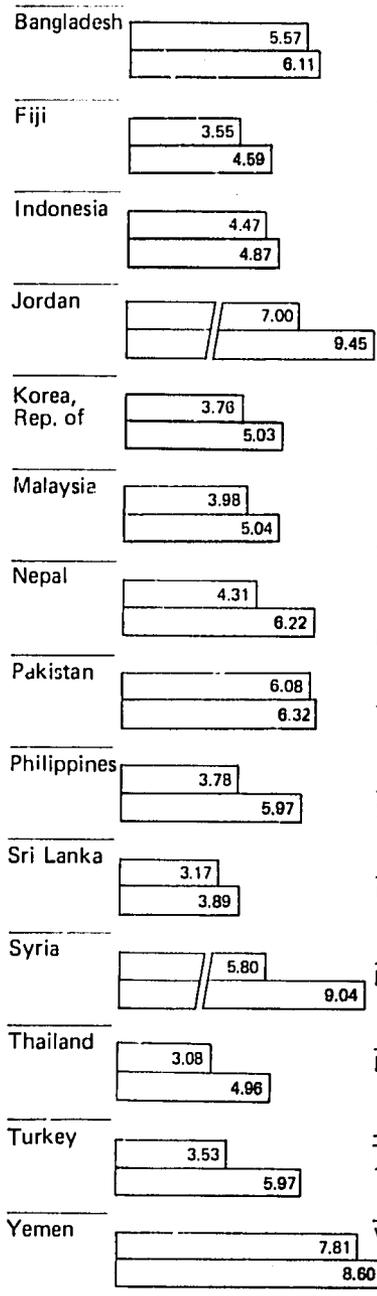


This chart shows the current total fertility rate (see chart 3) by place of residence. It breaks down the sample of women into residential groups: urban residents (top bar) and rural residents (lower bar).

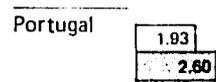
AFRICA



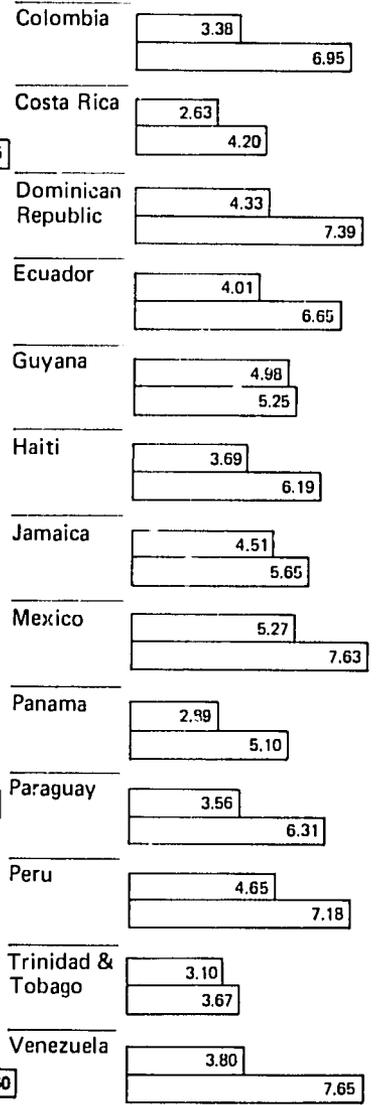
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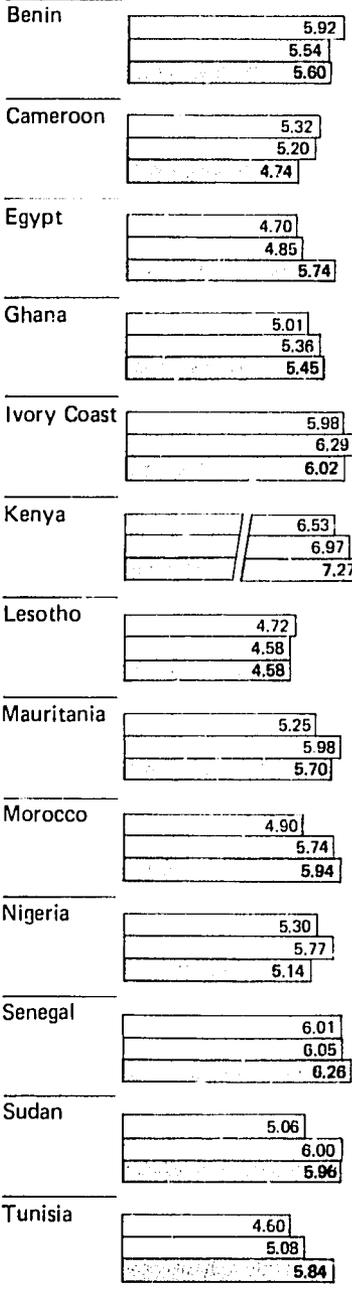




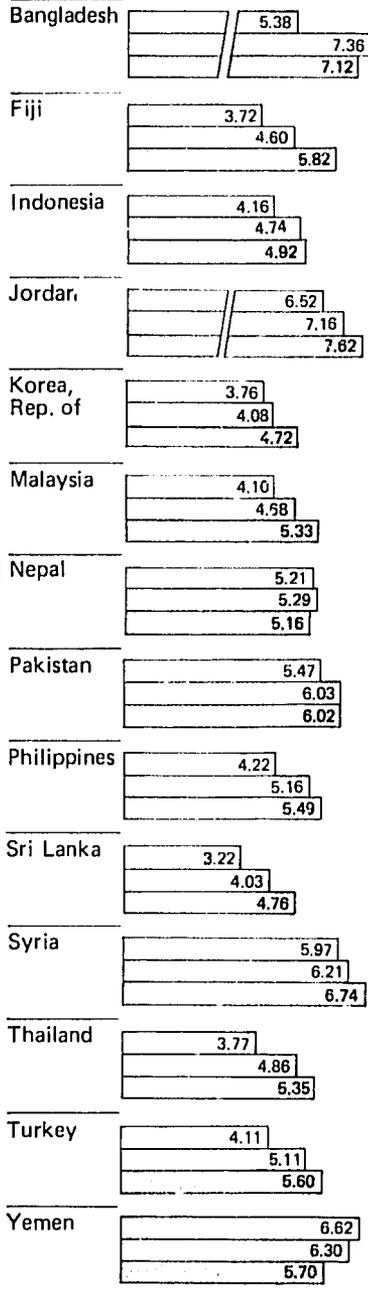
6 Fertility past and present

This chart shows the total fertility rate (see chart 3) cumulated up to the age group 35 – 39. Three periods are shown: 0 – 4 years before the country survey (top bar for each country), 5 – 9 years (centre bar), 10 – 14 years (lowest bar). A comparison of the three bars shows if fertility is declining, increasing or remaining the same.

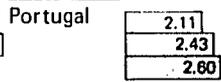
AFRICA



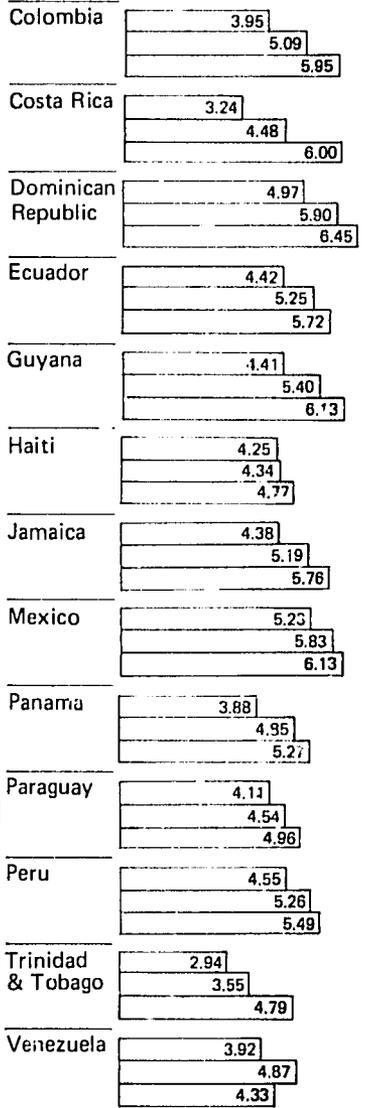
ASIA AND PACIFIC



EUROPE



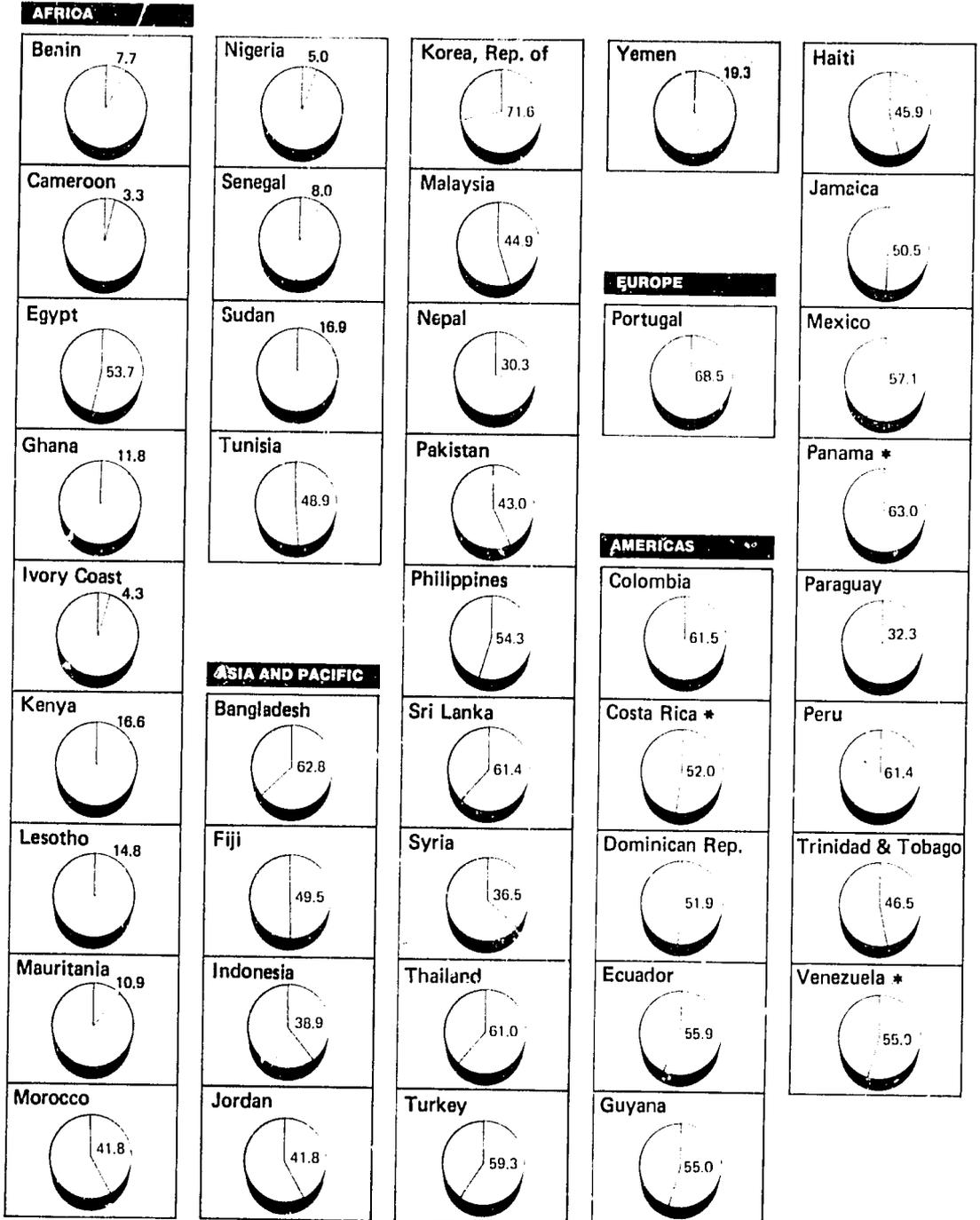
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7 Desire for more children

Women in the survey were asked if they wanted another child. This chart shows in the white section of each pie-chart the percentage of married women aged 15 – 49, able to conceive, who said they wanted to have no more children.



* Values refer to ages 15 – 44 for Venezuela and ages 20 – 49 for Costa Rica and Panama

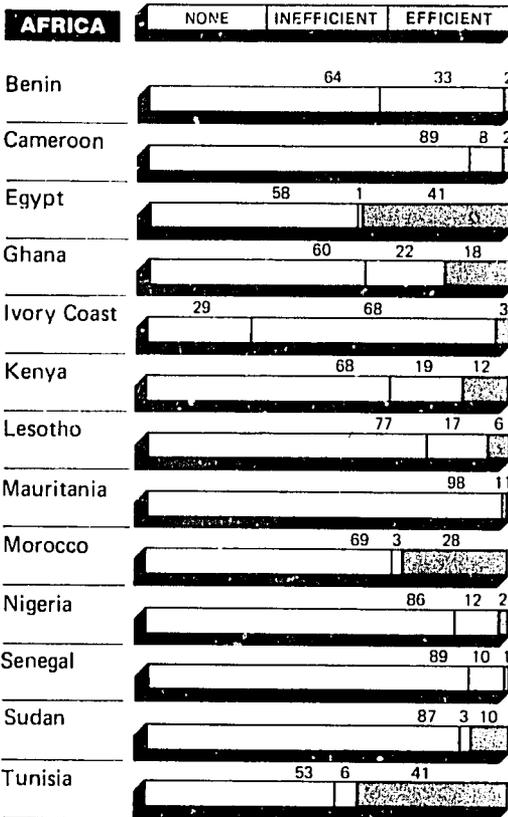
12

8 Ever-use of contraception

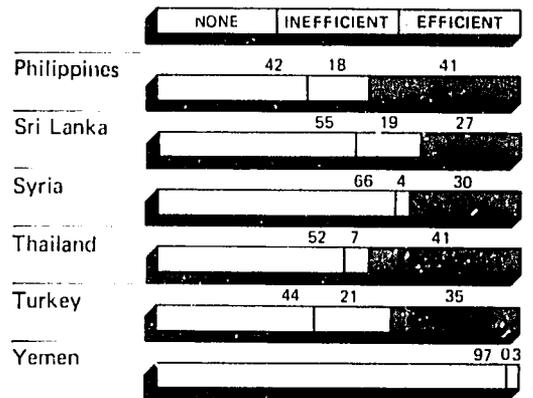
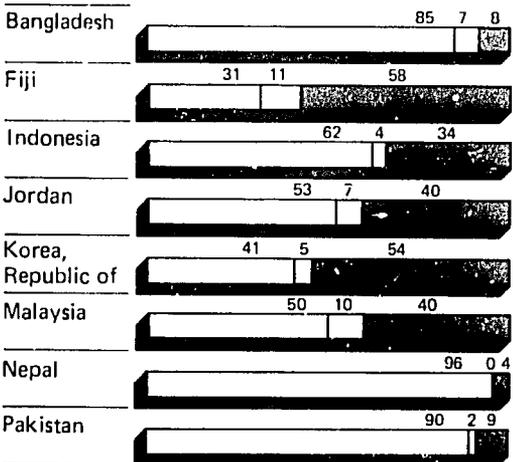


Women in the survey were asked if they had ever used contraception. This chart shows the percentage of currently married women aged 15 – 49 who had never used contraception, the percentage who had used efficient contraceptive methods and the percentage who had used inefficient methods.

[Pill, IUD, other female scientific methods (such as diaphragm, jelly or cream), sterilization and condom were classified as efficient. Rhythm, withdrawal, douche, temporary abstinence and traditional folk methods were classified as inefficient.]



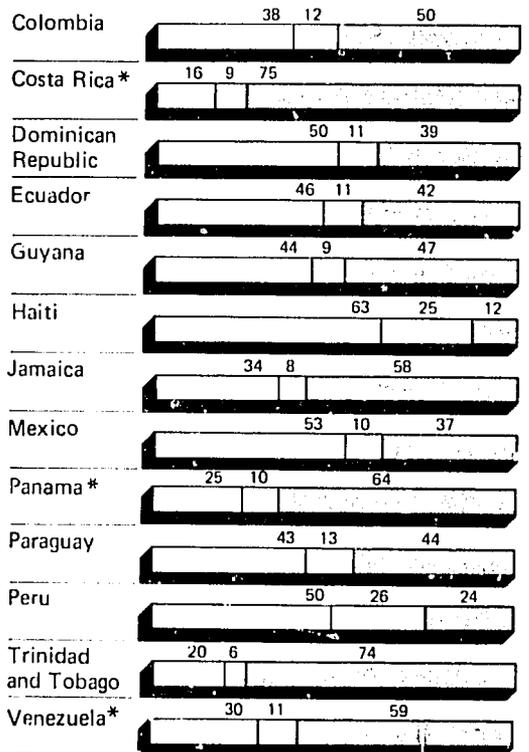
ASIA AND PACIFIC



EUROPE



AMERICAS



* Values refer to ages 15 – 44 for Venezuela and ages 20 – 49 for Costa Rica and Panama



9 Ever-use of contraception and education

This chart breaks down the sample of currently married women aged 15 – 49 who had ever used contraception, whether efficient or inefficient methods (see chart 8) into educational groups. The figures are percentages.

	INEFFICIENT				EFFICIENT			
	Years of education				Years of education			
	0	1–3	4–6	7 +	0	1–3	4–6	7 +
AFRICA								
Benin	33	36	30	32	1	6	10	25
Cameroon	4	13	17	24	1	2	4	19
Egypt	1	2	1	2	30	46	54	72
Ghana	22	26	24	20	8	21	23	38
Ivory Coast	70	65	18	51	1	4	9	27
Kenya	17	20	23	22	7	11	14	28
Lesotho	15	16	17	18	2	5	6	9
Mauritania	0	2	2	1	0	0	2	1
Morocco *	2	7	–	9	23	61	–	72
Nigeria	9	13	22	21	1	1	4	18
Senegal	10	10	0	–	1	9	[17]	–
Sudan	2	2	9	11	4	26	27	58
Tunisia	4	11	9	19	37	47	50	62
ASIA AND PACIFIC								
Bangladesh	6	10	10	13	6	11	13	32
Fiji	9	10	13	11	60	63	58	58
Indonesia	3	3	5	12	30	36	40	53
Jordan	6	6	8	10	28	45	45	69
Korea, Rep. of	3	2	5	7	48	58	54	56
Malaysia	8	11	10	15	27	43	45	54
Nepal	0	0	2	2	3	10	17	30
Pakistan	1	2	3	5	7	19	18	31
Philippines	8	17	19	18	9	23	38	57
Sri Lanka	11	15	20	25	19	23	27	32
Syria	3	6	5	9	17	53	54	58
Thailand	6	6	6	11	32	40	42	57
Turkey	18	25	25	22	25	36	42	62
Yemen *	0	(0)	–	–	3	(16)	–	–
EUROPE								
Portugal	47	45	34	23	18	27	47	67
AMERICAS								
Colombia	10	13	12	14	25	41	60	74
Costa Rica †	8	9	10	7	61	68	76	84
Dominican Rep.	8	12	11	12	22	31	47	61
Ecuador	9	12	12	12	15	25	47	68
Guyana	1	2	8	10	32	39	42	50
Haiti	23	29	32	30	6	22	31	34
Jamaica	(5)	3	7	9	(24)	45	48	62
Mexico	8	9	13	10	13	28	44	71
Panama †	17	14	12	7	38	42	63	79
Paraguay	16	13	15	11	18	29	46	69
Peru	17	27	33	30	4	14	33	53
Trinidad & Tob.	8	8	3	6	49	60	68	76
Venezuela †	7	9	13	10	36	48	61	73

() = less than 20 cases

() = less than 50 cases

* 1–6 years of education for Morocco and 1+ years for Yemen

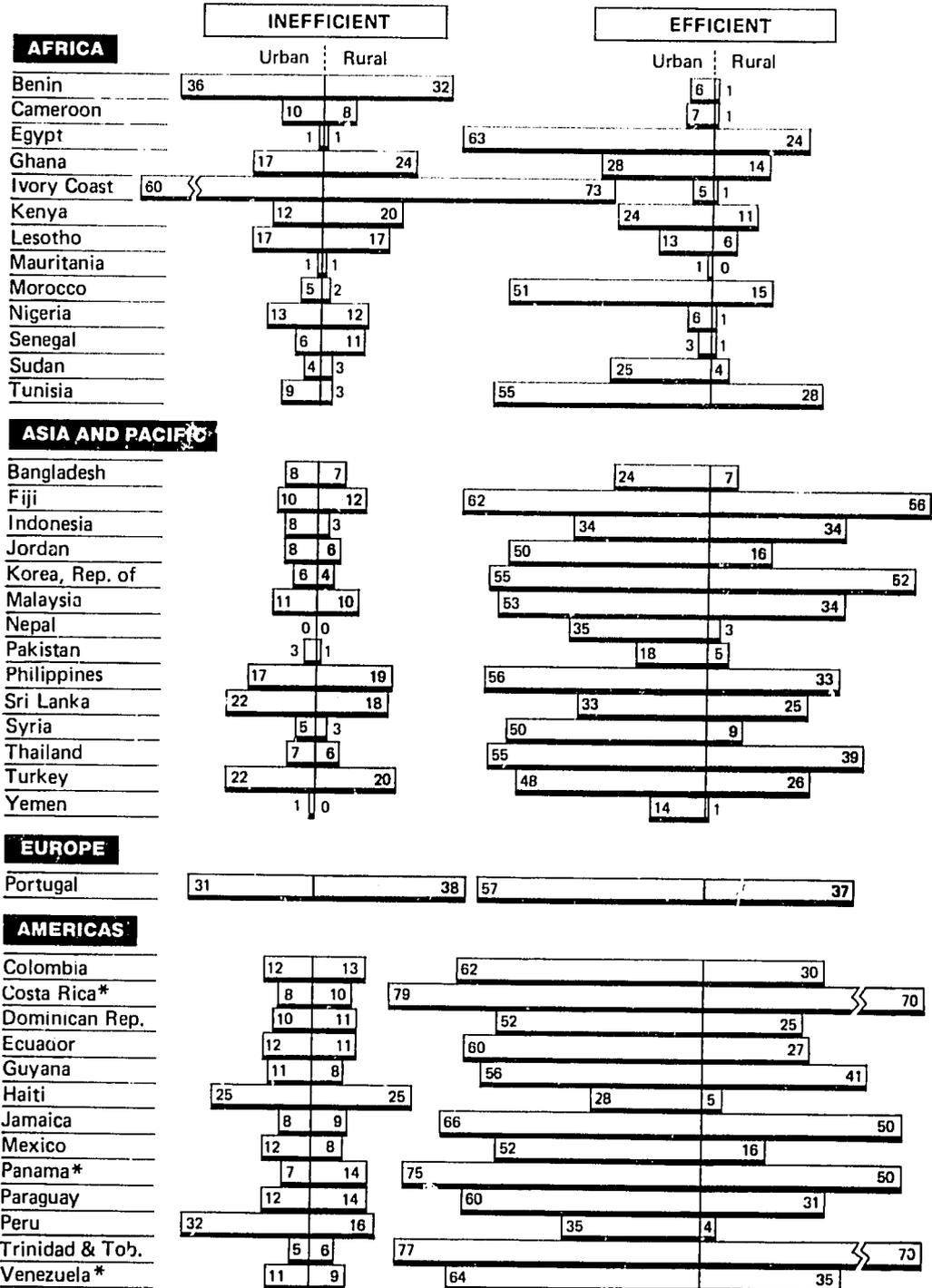
† Values refer to ages 15 – 44 for Venezuela and ages 20 – 49 for Costa Rica and Panama

14



10 Ever-use of contraception and place of residence

This chart breaks down the sample of currently married women aged 15 -- 49 who had ever used contraception, whether efficient or inefficient methods (see chart 8), into residential groups. The figures are percentages.



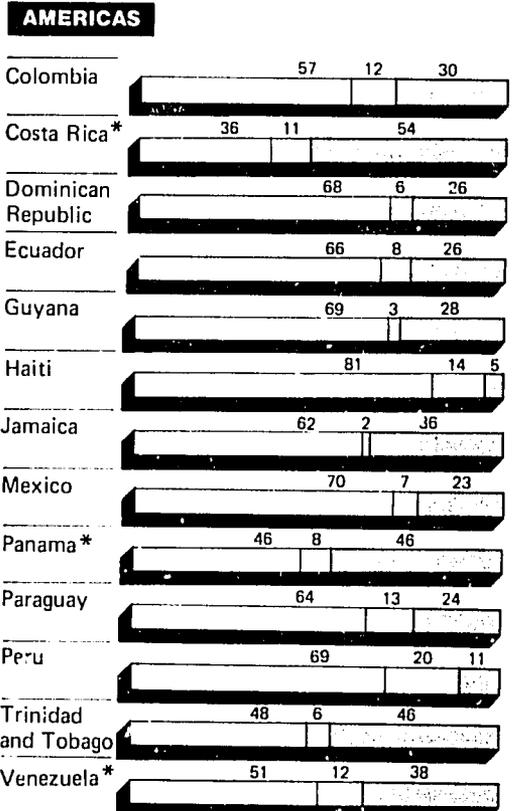
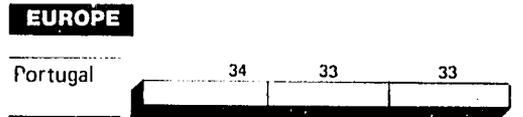
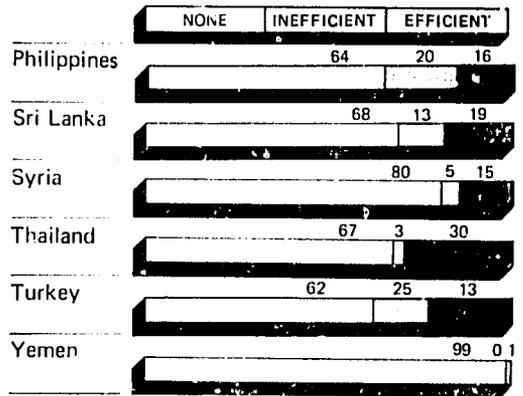
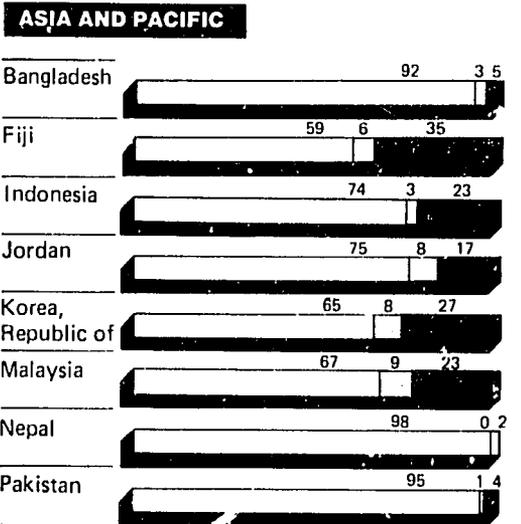
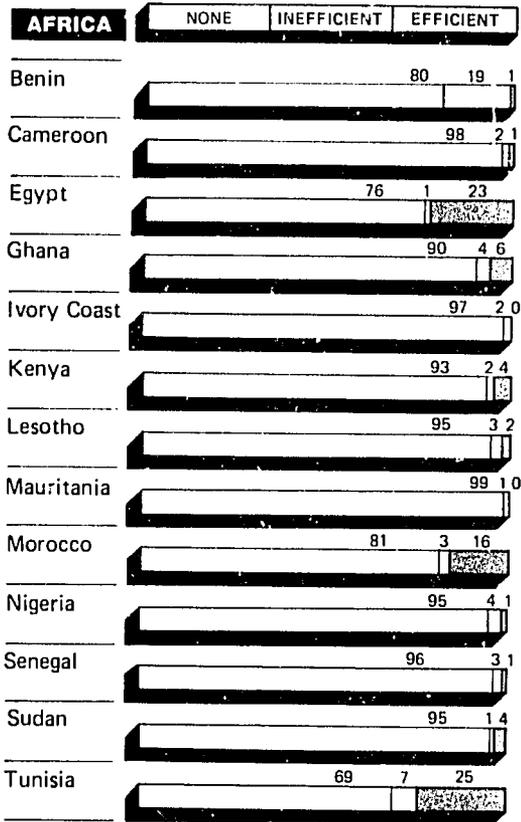
* Values refer to ages 15 - 44 for Venezuela and ages 20 - 49 for Costa Rica and Panama

5

11 Current use of contraception



Women in the survey were asked if they were currently using contraception. This chart shows the percentage of currently married women aged 15 – 49 who, at the time of the survey, were not using contraception, the percentage who were using efficient methods and the percentage who were using inefficient methods.



* Values refer to ages 15 – 44 for Venezuela and ages 20 – 49 for Costa Rica and Panama

12 Current use of contraception and education



This chart breaks down the sample of currently married women aged 15 – 49 who were using contraception, whether efficient or inefficient methods (see chart 8), into educational groups. The figures are percentages.

	INEFFICIENT				EFFICIENT			
	Years of education				Years of education			
	0	1-3	4-6	7+	0	1-3	4-6	7+
AFRICA								
Benin	19	26	19	22	0	2	3	7
Cameroon	1	2	4	9	0	0	1	7
Egypt	1	1	1	6	16	24	30	48
Ghana	4	6	4	4	2	6	7	13
Ivory Coast	2	2	4	11	0	1	2	6
Kenya	2	2	4	3	2	3	5	11
Lesotho	1	2	3	3	1	1	3	3
Mauritania	0	2	0	0	0	0	1	0
Morocco *	2	7	-	15	13	40	-	41
Nigeria	3	5	7	9	0	1	1	4
Senegal	3	5	[0]	-	0	5	[0]	-
Sudan	0	1	1	6	1	10	11	29
Tunisia	4	12	11	28	23	30	30	28
ASIA AND PACIFIC								
Bangladesh	2	4	5	7	4	6	7	20
Fiji	4	4	6	7	43	44	34	31
Indonesia	3	3	4	12	20	26	28	32
Jordan	5	11	10	12	10	17	22	30
Korea, Rep. of	6	6	7	12	24	28	27	28
Malaysia	7	10	10	14	15	23	28	33
Nepal	0	0	0	0	2	6	10	18
Pakistan	1	1	2	7	3	9	8	15
Philippines	6	15	20	23	4	7	14	25
Sri Lanka	6	9	13	19	13	16	20	23
Syria	2	7	9	11	8	30	25	32
Thailand	2	3	3	5	24	27	32	39
Turkey	18	29	31	36	9	12	18	29
Yemen *	0	(0)	-	-	1	(10)	-	-
EUROPE								
Portugal	39	39	33	24	13	21	36	51
AMERICAS								
Colombia	8	10	13	19	14	24	38	46
Costa Rica †	10	9	11	13	44	51	55	58
Dominican Rep.	2	5	6	10	15	21	31	39
Ecuador	4	6	7	13	9	15	29	42
Guyana	0	1	1	4	29	33	30	27
Haiti	12	15	22	20	2	12	13	17
Jamaica	(0)	0	2	2	(16)	27	28	38
Mexico	4	6	8	10	8	17	29	46
Panama †	12	10	8	7	27	32	46	54
Paraguay	9	9	14	17	10	15	25	38
Peru	10	18	28	29	2	6	15	25
Trinidad & Tob.	7	5	4	6	23	38	41	48
Venezuela †	7	10	12	13	25	30	40	45

[] = less than 20 cases

() = less than 50 cases

* 1 – 6 years of education for Morocco and 1+ years for Yemen

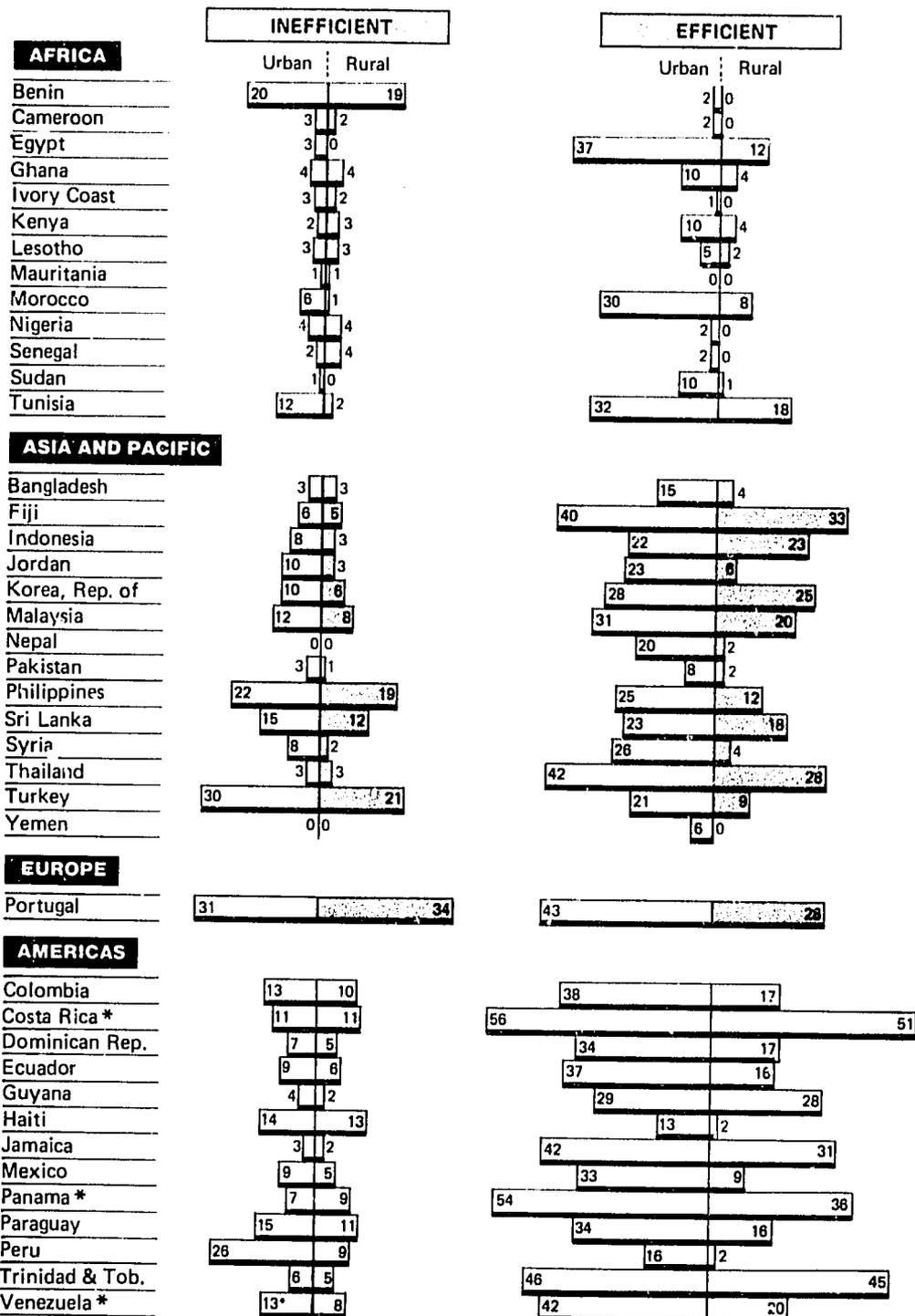
† Values refer to ages 15 – 44 for Venezuela and ages 20 – 49 for Costa Rica and Panama





13 Current use of contraception and place of residence

This chart breaks down the sample of currently married women aged 15 – 49 who were using contraception, whether efficient or inefficient methods (see chart 8), into residential groups. The figures are percentages.



*Values refer to ages 15 – 44 for Venezuela and ages 20 – 49 for Costa Rica and Panama

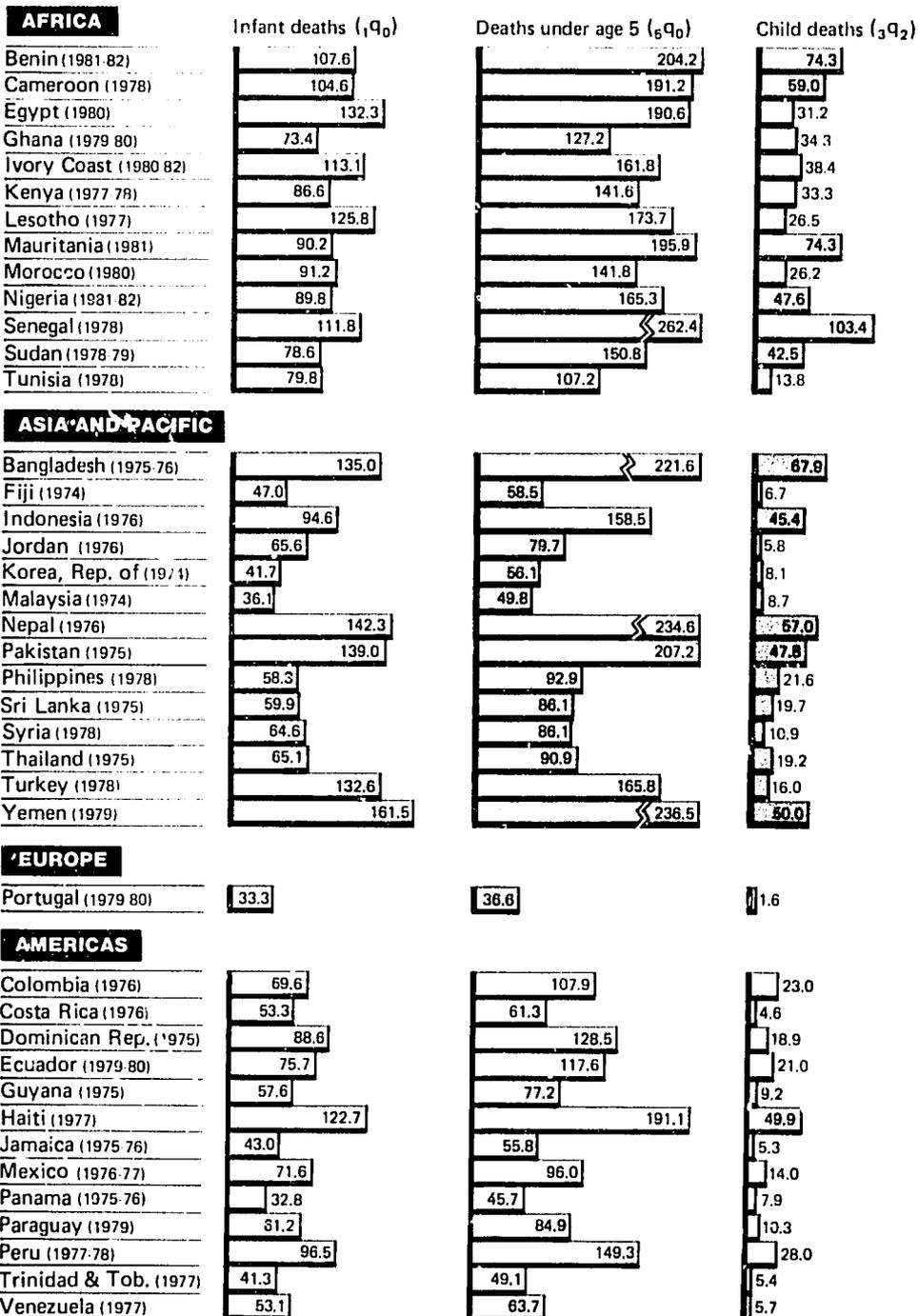


14 Infant and child mortality



This chart illustrates reported infant and child deaths in the period 0 – 4 years before the country survey, classified in three ways: infant deaths (babies under one year), deaths among children under age five, and child deaths (children aged two to five). The rates are deaths per 1000 births.

Date of survey



15 Effect of women's education on infant and child mortality



This chart shows how the mortality of infants under one year and children under five years may be linked to the education of the mother. The period taken is 0 – 4 years before the country survey and the rates are deaths per 1000 births.

INFANT DEATHS (190)

Years of education

0 1-3 4-6 7+

AFRICA

Benin	127.5	(91.6)	(57.6)	(37.0)
Cameroon	115.7	88.3	82.7	63.7
Egypt	147.4	143.2	125.2	77.9
Ghana	77.3	(62.2)	65.5	65.7
Ivory Coast	132.2	(151.7)	109.7	(71.3)
Kenya	103.9	89.3	82.0	69.9
Lesotho	(149.0)	133.5	120.6	118.2
Mauritania	82.9	91.5	(56.0)	(81.1)
Morocco	99.1	(100.2)	(54.1)	(60.2)
Nigeria	96.8	74.7	71.3	(53.9)
Senegal	121.1	(71.1)	(94.3)	30.9
Sudan	79.7	87.8	(83.4)	(57.0)
Tunisia	79.3	(90.0)	67.1	21.3

ASIA AND PACIFIC

Bangladesh	135.9	31.9	114.1	(115.8)
Fiji	64.5	54.4	54.1	38.1
Indonesia	102.7	108.8	81.5	54.6
Jordan	73.3	56.1	71.7	45.9
Korea, Rep. of	57.4	51.1	45.0	40.8
Malaysia	42.8	35.6	41.1	24.8
Nepal	151.4	(138.3)	(124.7)	(83.1)
Pakistan	140.1	(114.9)	(124.2)	(111.9)
Philippines	97.4	(73.1)	60.5	38.0
Sri Lanka	76.8	70.2	58.5	39.4
Syria	71.8	(78.7)	57.3	33.1
Thailand	96.6	(76.1)	70.8	(18.1)
Turkey	144.0	145.9	128.7	(0.6)
Yemen	164.4	(189.9)	(92.4)	(131.9)

EUROPE

Portugal	63.3	40.1	36.9	29.5
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AMERICAS

Colombia	85.4	80.1	46.1	39.9
Costa Rica	100.9	71.2	62.0	32.3
Dominican Rep.	125.6	94.3	86.4	61.2
Ecuador	88.3	98.4	75.6	47.6
Guyana	(44.3)	(80.9)	66.7	53.6
Haiti	136.7	109.1	(180.6)	(71.0)
Jamaica	(85.4)	(64.8)	48.1	37.5
Mexico	89.6	79.6	65.2	47.3
Panama	71.0	62.4	33.5	33.7
Paraguay	69.0	63.4	56.3	33.4
Peru	136.4	117.9	67.4	44.9
Trinidad & Tob.	(79.0)	(63.5)	48.0	39.2
Venezuela	68.7	50.4	48.4	32.5

DEATHS OF UNDER-FIVES (190)

Years of education

0 1-3 4-6 7+

83.3	(78.7)	(62.0)	(29.9)
68.9	46.7	42.7	(35.5)
43.0	46.4	34.3	5.1
43.1	(40.3)	14.0	20.5
50.5	(24.9)	(22.2)	30.6
42.5	35.4	(27.3)	22.1
(38.7)	27.6	30.0	17.9
P6.3	64.1	(16.5)	(17.9)
32.4	(14.5)	(7.2)	(0.0)
179.3	(124.0)	125.9	(93.0)
114.4	(16.7)	(17.1)	(27.4)
46.3	(23.9)	(15.8)	(7.9)
22.9	(4.2)	6.1	(0.0)

68.5	51.8	34.8	(11.7)
3.4	5.9	6.1	5.3
60.3	66.2	36.8	11.9
10.2	2.5	2.4	1.5
16.9	17.2	9.5	8.7
11.8	9.4	5.3	1.4
60.5	(10.2)	(22.3)	(16.3)
47.4	(23.3)	(27.3)	(14.1)
25.3	30.6	22.3	10.4
28.8	18.0	14.9	8.3
13.8	(8.4)	5.1	8.3
30.0	(32.8)	18.8	(4.2)
21.0	28.5	11.3	(0.0)
58.5	(0.0)	(0.0)	(0.0)

2.7	1.8	1.8	2.3
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16 Effect of closely spaced births on infant and child mortality



This chart shows the mortality among infants under one year and children aged two to five in the period 0 – 9 years before the country survey by reference to the interval since the previous birth. The first figure in each block shows the number of deaths per 1000 births among babies born less than 24 months after the previous child; the second figure shows deaths where the birth interval is 24 – 47 months; the third figure shows deaths for the birth interval of 48 months or over. The World Fertility Survey has shown that children born in rapid succession, after short birth intervals, have higher mortality.

	INFANT DEATHS (‰)			CHILD DEATHS (‰)		
	< 24	24–47	48+	< 24	24–47	48+
AFRICA						
Benin	158.4	107.3	79.1	77.5	81.2	(63.0)
Cameroon	143.1	74.0	63.5	78.5	57.6	45.5
Egypt	203.1	96.8	54.8	60.3	40.4	14.6
Ghana	121.7	57.8	44.0	37.6	37.7	19.6
Ivory Coast	148.6	106.6	67.1	60.0	48.5	23.8
Kenya	116.7	67.6	58.6	42.4	35.0	27.0
Lesotho	201.7	114.0	88.5	26.7	24.5	27.3
Mauritania	111.7	63.7	60.0	74.0	79.5	(71.0)
Morocco	130.2	66.2	50.1	41.6	24.8	19.5
Nigeria	116.0	74.5	46.1	62.2	41.0	44.4
Senegal	137.3	105.4	80.8	106.0	109.5	(105.5)
Sudan	98.3	60.4	37.3	49.9	40.4	(35.4)
Tunisia	121.8	48.9	23.9	31.6	18.4	9.0
ASIA AND PACIFIC						
Bangladesh	184.9	89.0	58.2	81.3	61.9	27.2
Fiji	57.5	36.1	40.9	6.1	6.5	2.5
Indonesia	137.6	76.5	55.9	69.1	45.6	31.7
Jordan	86.5	35.5	38.0	9.1	4.9	(9.3)
Korea, Rep. of	70.3	40.2	40.7	12.4	12.0	5.0
Malaysia ^a	43.5	32.4	30.4	9.9	9.0	7.4
Nepal	199.6	130.7	70.8	66.0	67.4	25.2
Pakistan	183.4	103.2	70.8	61.5	44.8	24.6
Philippines	72.3	45.3	53.7	27.7	19.5	11.5
Sri Lanka	70.5	53.9	43.7	20.4	20.7	12.1
Syria	90.4	37.1	23.1	14.0	10.5	12.3
Thailand	109.4	52.4	42.3	29.3	21.2	21.0
Turkey	182.6	94.7	76.0	26.8	16.5	8.5
Yemen	220.5	94.4	64.4	83.2	35.3	(19.0)
EUROPE						
Portugal	72.5	27.3	25.5			
AMERICAS						
Colombia	81.7	52.9	38.1	27.2	20.8	(18.3)
Costa Rica	84.1	54.2	42.3	8.1	8.2	0.0
Dominican Rep.	104.8	75.1	(60.3)	23.9	16.0	(10.9)
Ecuador	107.4	64.4	57.9	26.8	20.4	15.8
Guyana	68.6	42.8	44.2	10.5	9.6	(4.2)
Haiti	187.2	112.4	(90.6)	57.1	54.9	(42.1)
Jamaica	55.6	30.0	26.7	8.4	2.6	(4.0)
Mexico	87.6	56.5	63.9	15.3	19.2	8.0
Panama	51.5	32.9	34.0	6.8	9.6	7.5
Paraguay	70.9	44.7	54.9	11.8	11.4	(8.2)
Peru	137.1	86.6	54.8	37.2	33.0	15.7
Trinidad & Tob.	53.3	28.1	35.5	4.4	1.9	(3.6)
Venezuela	63.2	35.1	50.0	11.6	4.5	(4.9)

() = less than 500 cases

17 Breastfeeding



Breastfeeding suppresses ovulation, and a woman who is breastfeeding will not conceive as quickly as a woman who is not breastfeeding. Women in the survey were asked whether they had breastfed their last two babies, and for how long. The first block of figures shows the per cent distribution, by month, of women breastfeeding. The second block shows the per cent of women who had ever breastfed and the third block gives the average length of breastfeeding.

AFRICA	Breastfeeding distribution by months since birth				
	3	6	12	18	24
Benin	90	90	76	52	34
Cameroon	92	90	77	45	20
Egypt	89	82	66	46	21
Ghana	91	90	72	44	19
Ivory Coast	87	84	78	52	22
Kenya	86	82	67	35	17
Lesotho	93	89	76	66	33
Mauritania	91	86	68	45	12
Morocco	83	75	62	41	12
Nigeria	96	85	69	49	35
Senegal	94	94	82	59	22
Sudan	91	86	72	39	14
Tunisia	83	74	52	35	14

Per cent ever breastfed

Average duration of breastfeeding (months)

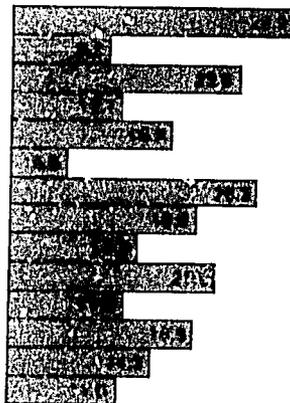
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ASIA AND PACIFIC

Bangladesh	91	86	82	77	65
Fiji	72	53	34	16	8
Indonesia	90	86	82	64	46
Jordan	84	64	48	24	4
Korea, Rep. of	86	86	64	42	24
Malaysia	47	34	19	11	2
Nepal	92	92	82	66	49
Pakistan	90	86	78	58	30
Philippines	79	70	53	24	12
Sri Lanka	83	88	73	56	33
Syria	88	72	41	24	6
Thailand	82	68	67	52	34
Turkey	84	80	45	47	14
Yemen	73	67	29	26	8

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EUROPE

Portugal	29	12	7	2	4
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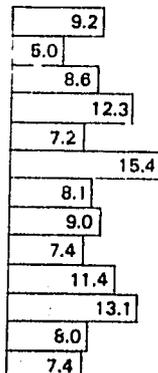
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AMERICAS

Colombia	70	54	39	17	3
Costa Rica	35	36	9	9	3
Dominican Rep.	70	56	27	13	4
Ecuador	86	74	48	25	6
Guyana	62	38	22	7	6
Haiti	93	85	72	48	6
Jamaica	74	50	24	4	4
Mexico	62	52	39	19	4
Panama	52	43	30	9	5
Paraguay	80	77	49	16	3
Peru	81	71	54	33	12
Trinidad & Tob.	68	53	25	15	8
Venezuela	50	40	30	14	7

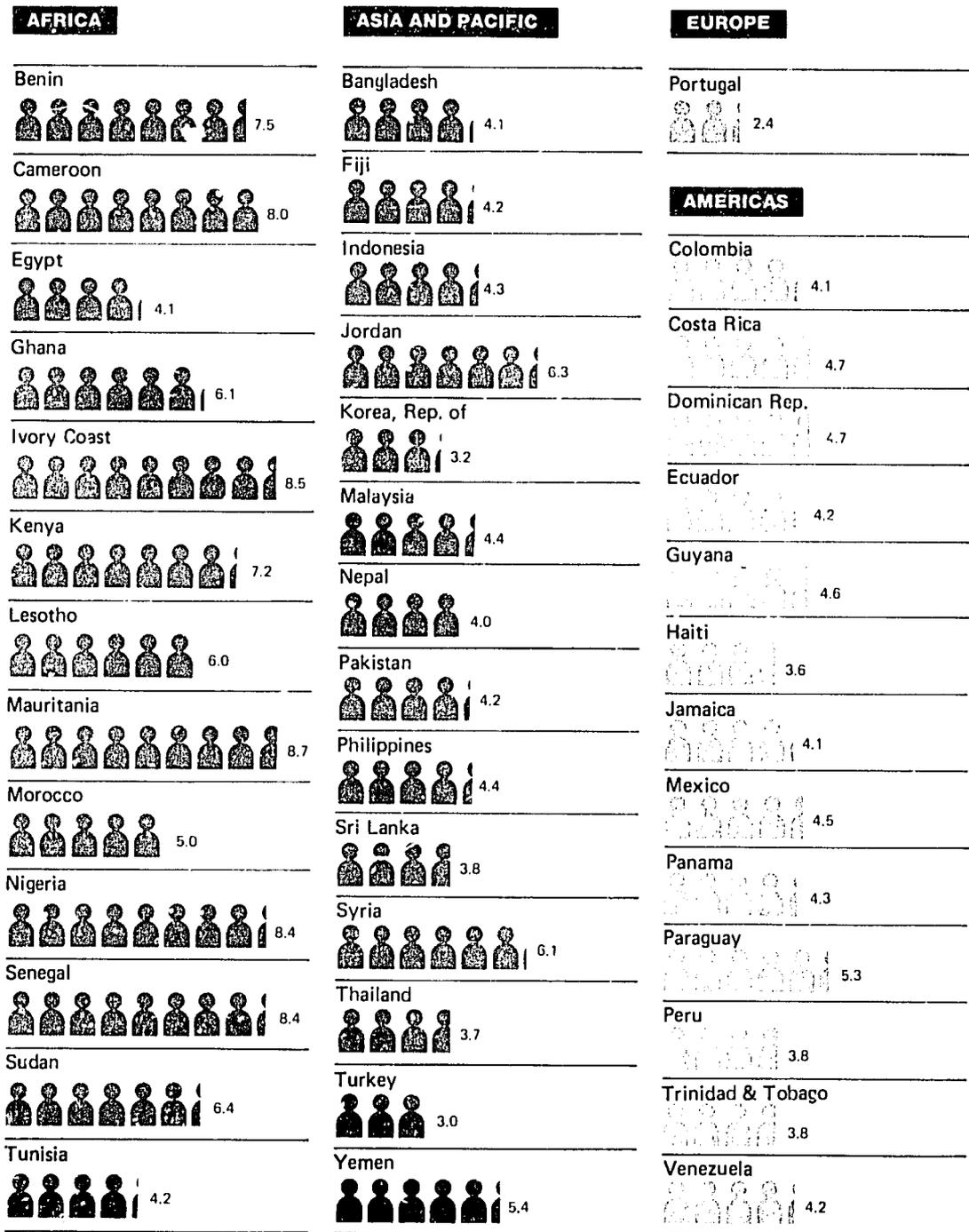
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18 Desired family size



Currently married women in the survey were asked how many children they wanted altogether. The average desired family size (i.e. the number of children desired) they reported is shown below.

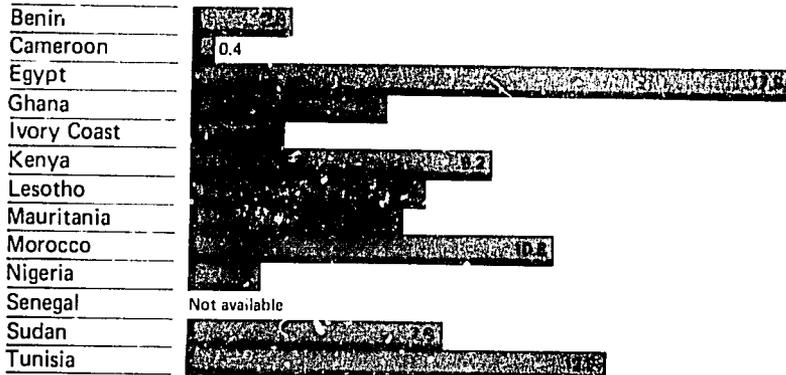




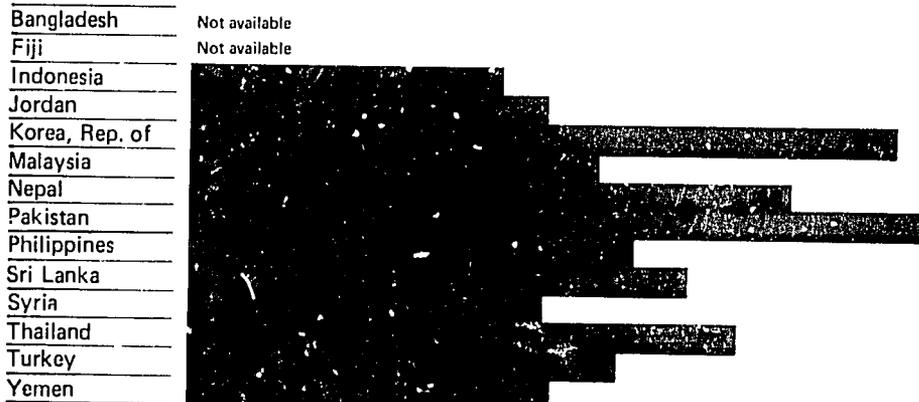
19 Unmet need for contraception

Women in the survey were asked if they wanted more children. They were also asked if they were using any method of contraception. This chart shows the percentage of married women, not pregnant and able to conceive, who reported that they did not want any more children but that they were not using contraception.

AFRICA



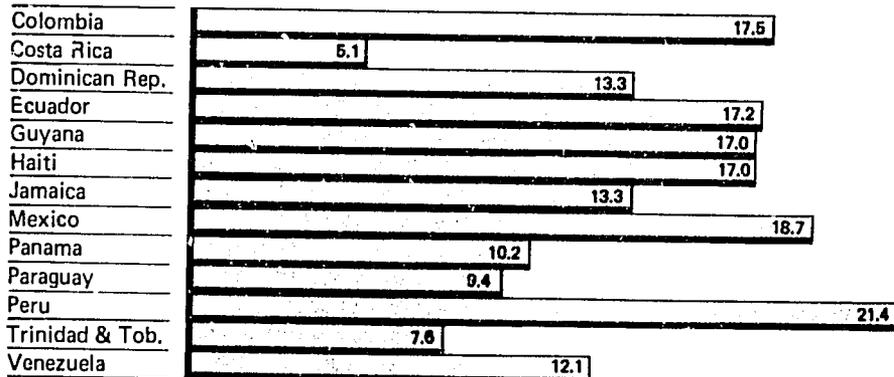
ASIA AND PACIFIC



EUROPE



AMERICAS





SOURCES

The data in the charts was taken from the following sources:

- Chart 1** David P. Smith (1980). Age at First Marriage. **WFS Comparative Studies** no 7, table 2.
G. Edward Ebanks and Susheela Singh (forthcoming). Socio-Economic Differentials in Age at Marriage. **WFS Comparative Studies**.
- Chart 2** WFS data from individual surveys.
- Chart 3** Hazel Ashurst, Sundat Balkaran and J. B. Casterline (forthcoming). Socio-Economic Differentials in Recent Fertility. **WFS Comparative Studies** no 42.
- Chart 4** *ibid.*
- Chart 5** *ibid.*
- Chart 6** Noreen Goldman and John Hobcraft (1982). Birth Histories. **WFS Comparative Studies** no 17, appendix table A.
Susheela Singh (forthcoming). Birth Histories: Levels and Trends in Fertility in Forty-one WF Countries. **WFS Comparative Studies**.
- Chart 7** Robert E. Lightbourne and Alphonse L. MacDonald (1982). Family Size Preferences. **WFS Comparative Studies** no 14, table A14.
Unpublished tables from Robert E. Lightbourne.
- Chart 8** Zeba A. Sahar and V. C. Chidambaram (1984). Differentials in Contraceptive Use. **WFS Comparative Studies** no 36.
V. C. Chidambaram and Sundat Balkaran (1984). Socio-Economic Differentials in Contraceptive Use. WFS unpublished MS.
- Chart 9** *ibid.*
- Chart 10** *ibid.*
- Chart 11** *ibid.*
- Chart 12** *ibid.*
- Chart 13** *ibid.*
- Chart 14** Shea Oscar Rutstein (forthcoming). Infant and Child Mortality: Levels, Trends and Demographic Differentials. **WFS Comparative Studies**.
- Chart 15** Shea Oscar Rutstein (1984). Socio-Economic Differentials in Infant and Child Mortality. **WFS Comparative Studies (Cross-National Summaries): Preliminary Tables**, table 1.
- Chart 16** Rutstein (forthcoming), *op. cit.*
- Chart 17** Benoît Ferry and David P. Smith (1983). Breastfeeding Differentials. **WFS Comparative Studies** no 23.
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- Chart 18** John B. Casterline, Susheela Singh, John Cleland and Hazel Ashurst (1984). The Proximate Determinants of Fertility. **WFS Comparative Studies** no 39.
Unpublished tables from the WFS.
- Chart 19** WFS data from individual surveys.

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