

How are families changing in Jordan? New evidence on marriage and fertility trends among Jordanians and Syrian refugees¹

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In a nutshell

- Fertility decline appears to be resuming in Jordan after a long period during which fertility rates stalled. The national total fertility rate (TFR) in 2016 was 3.4 births per woman.
- Syrian refugees in Jordan have higher fertility rates than Jordanian nationals, at a TFR of 4.4 births per woman. The fertility levels for current Syrian refugees are lower now than they were for this population prior to their displacement to Jordan.
- There is no evidence that the Syrian refugee influx has impacted marriage or fertility rates among the Jordanian host population.
- Early marriage is an important challenge in Jordan. Just under one in 10 Jordanian girls married before age 18 and about two in ten Syrian refugee girls. Girls who marry before age 18 are at greater risk of numerous negative health and socioeconomic outcomes.
- Education is the main factor associated with older ages at marriage and childbirth among Jordanian women. The median age at first birth among Jordanian women varied from 20 years among those with less than basic education to 25 years among women with higher education.

The structure of a country's population has wide-ranging implications for economic development and social policy. Throughout the world, mortality rates in younger ages have fallen, followed by declines in fertility rates, a process known as the demographic transition.

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The pace of fertility decline during the demographic transition plays a large role in determining population growth rates as well as the share of children, and eventually working-age people, in a country's population. Fertility rates therefore have important implications for current and future national policies. Current fertility rates impact the short-term investments needed in health, education and other childhood outcomes.

Family formation also involves major events in individuals' lives. To support couples' decisions about marriage and childbearing, as well as the health outcomes of women and their children, investments in contraceptive access and sexual and reproductive health services are needed. At the same time, practices such as early marriage and childbearing can lead to long-term negative consequences for women and children. This policy brief examines recent trends in fertility and marriage – a key determinant of fertility rates – among Jordanians and Syrian refugees in Jordan. It relies primarily on new evidence from the 2016 Jordan Labor Market Panel Survey, which included a range of marriage and fertility measures. We synthesize these findings with other recent studies conducted by the Higher Population Council (2017), the 2012 Jordan Population and Family Health Survey (Department of Statistics (Jordan) and ICF International 2013), and reports of organizations working with Syrian refugees in order to suggest areas for continued investment in order to improve reproductive health outcomes and reduce rates of early marriage and pregnancy among both Jordanians and refugees.

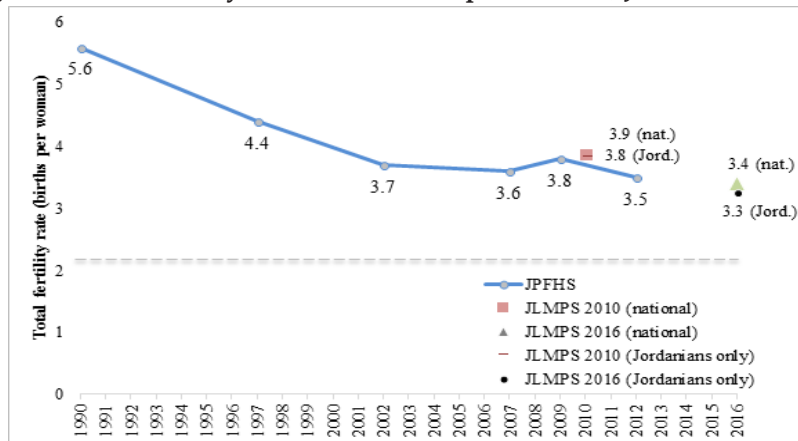
Jordan's fertility stall appears to be ending

The fertility transition in many countries in the Middle East and North Africa (MENA) region has stalled since the early 2000s at fertility rates that will lead to continued high rates of population growth. Fertility stalls, or stalls in the decline of the total fertility rate in a country that has begun the fertility transition, have been documented in numerous developing countries. Jordan is one of the countries that experienced

a lengthy period of fertility stall, which began in the late 1990s and extended through 2009 (Cetorelli and Leone 2012). Since that time, an estimated 1.3 million Syrian refugees have arrived in Jordan, and there has been wide public concern over perceived high rates of early marriage and fertility among refugees.

Figure 1 shows the long-term trend in the total fertility rate (TFR, births per woman) in Jordan from the Jordan Population and Family Health Surveys (JPFHS), which are part of the global Demographic and Health Survey program, as well as the TFR estimates from the 2010 and 2016 Jordan Labor Market Panel Surveys (JLMPS). The dashed grey line indicates the replacement fertility level, or the level of fertility at which the population size will remain stable over the long-term, which is 2.1 births per woman. The figure shows that Jordan began its fertility transition, with fertility rates declining through the 1990s. Then fertility rates stalled at around 3.7 births per woman – much higher than the replacement rate – for about a decade in the 2000s. Both the 2012 JPFHS and the JLMPS surveys show a resumed decline in fertility since about 2010. The JLMPS 2016 estimate is a TFR of 3.4 births per woman, and 3.3 births per woman for Jordanians only.

Figure 1. Total fertility rates (TFR, births per woman), Jordan, 1990-2016



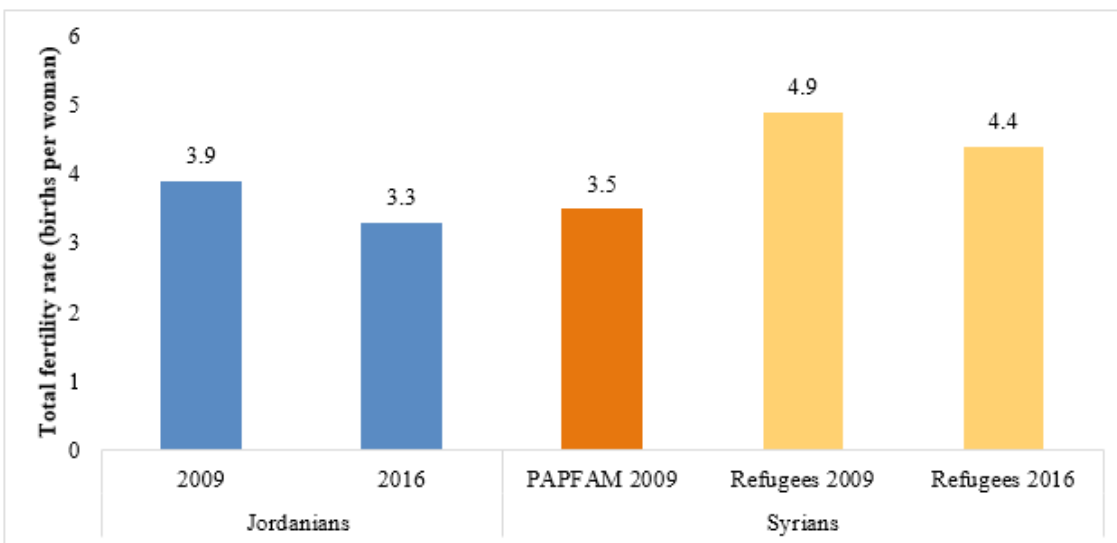
Source: JLMPS 2010 and 2016 based on authors' calculations, JPFHS statistics (Department of Statistics (Jordan) and ICF International 2013; Department of Statistics and ICF Macro 2010)

The Syrian refugee population had higher fertility before arriving in Jordan

Figure 1 demonstrates that including Syrian refugees and other non-Jordanian nationals has a very small influence on the TFR for Jordan as a whole (an increase of 0.1 births per woman). Syrian refugees in

Jordan do have higher fertility rates than Jordanian nationals, as well as higher fertility rates than Syria as a whole prior to the war (Figure 2). Yet data indicate that fertility levels for current Syrian refugees are lower now than they were for this population prior to their displacement to Jordan.

Figure 2. Total fertility rates (TFR, births per woman), among Jordanian and Syrian refugee women in Jordan



Source: JLMPS 2010 and 2016 based on authors' calculations, PAPFAM data taken from League of Arab States and Syrian Arab Republic (2011).

As shown in Figure 2, the national TFR in Syria from the latest data available from before the conflict (the 2009 PAPPAM survey) was 3.5 births per woman. Once the fertility rates for Syrian refugees in Jordan are reconstructed for this same time in 2009, prior to their arrival in Jordan, the TFR among this group was 4.9. Data from the JLMPS indicate that as of 2016, the fertility rate among Syrian refugees in Jordan was a TFR of 4.4. Fertility rates among refugees are thus lower now than they were for this same group when they were still in Syria (Sieverding, Berri, and Abdulrahim 2018). At the same time, the difference in fertility rates for this group in 2009 as compared to the 2009 national average indicates that Syrian refugees in Jordan are different from the Syrian population as a whole. For example, the majority of the Syrian refugee population in Jordan is of rural origins (Stave and Hillesund 2015), and TFR in rural areas of Syria was 3.9 in 2009 as compared to 3.1 in urban areas (League of Arab States and Syrian Arab Republic 2011). In other words, Syrian refugees have higher fertility rates than the Jordanian population because of the characteristics of the refugee population, and fertility rates among refugees have not increased since their arrival to Jordan.

Syrian refugees could also potentially impact the marriage and fertility patterns of Jordanians. For example, if the arrival of refugees negatively affected the labor market or housing market in Jordan, this could delay marriage among Jordanians. However, research demonstrates little effect on the labor market and at most a small negative effect on the housing market (Al-Hawarin, Assaad, and Elsayed 2018; Fallah, Krafft, and Wahba 2018). Additionally, Syrians could be marrying Jordanians. However only 3% of marriages among Syrian women since arriving in Jordan were to Jordanian men. Research based on the JLMPS shows no evidence that the Syrian refugee influx has directly impacted marriage or fertility rates among the Jordanian host population (Krafft and Sieverding 2018).

Early marriage remains a persistent problem among both Jordanians and Syrians

Marriage timing is an important factor that may contribute to shifts in fertility rates. Overall, there has not been a substantial shift in marriage timing among Jordanian women that could explain the fertility stall and resumed decline. For women born between 1975 and 1995, the trends in age at first marriage and first birth have essentially been flat. The median age at marriage has risen very slowly from 22 to 23, and median age at first birth from 24 to 25.

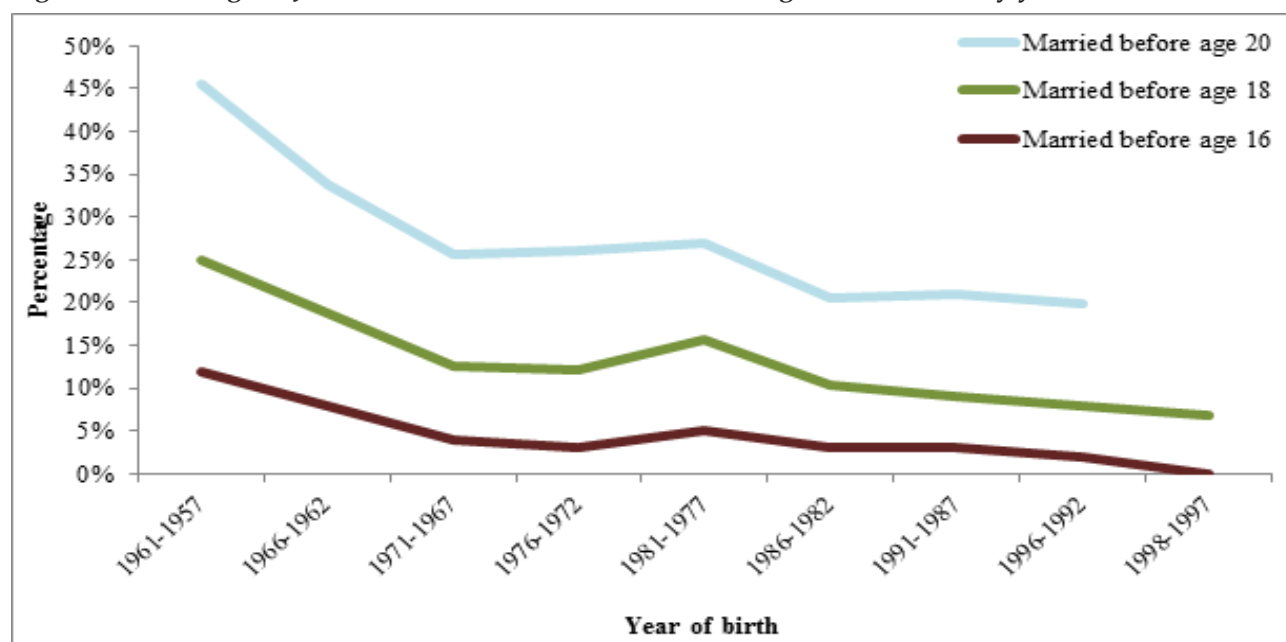
In addition, although rates of early marriage have been declining in Jordan, there is still a substantial percentage of girls who marry early. UNICEF defines early marriage as marriage before age 18 and Jordan's legal age of marriage is likewise age 18, with some exceptions (Higher Population Council 2017). Early marriage hinders education, as girls who marry early often drop out of school. Early marriage has a wide range of other negative consequences for girls' wellbeing and personal development. Girls who marry early are pushed into assuming adult responsibilities and roles that they are not ready for psychologically, physiologically, or socially. They are also at risk of early pregnancy and childbearing, which have negative consequences for both them and their children (Higher Population Council 2017; UNICEF 2006). Of importance to national and economic development, girls who interrupt education by marriage do not contribute to the economic growth of their country, and face increased chances of poverty (UNICEF 2006).

Although rates of early marriage have been declining among Jordanians, as shown in Figure 3, among Jordanian women born in the 1980s and early 1990s, just under 10% married before age 18 and 2-3% married before age 16. This is below the MENA regional average of 17% of girls married before age 18 (UNICEF 2018). However, 20% of Jordanian women married before they reached the age of 20, which likely reduces their opportunities to attend higher education. Rates of early marriage among Syrian refugee

women are higher. The median age at marriage among Syrian refugee women was 22, with 25% of refugee women having married before age 18 and 8% before age 16. However, many of these women married when they were still in Syria. Among refugee women who are currently aged 18-24, and are now nearer to the median age at marriage, 18% married before age 18 and 5% before age 16. A similar rate of early marriage among Jordanian girls and even higher rates among Syrian refugee girls were found in the Jordanian Census of 2015 (Higher Population Council 2017). The rate of early marriage

among Syrian refugees in Jordan places them above both the MENA average of 17% and global average of 21%. However, only 13% of girls were married before age 18 in Syria as of 2006 (UNICEF 2018). The higher rate of early marriage among Syrian refugees in Jordan does not necessarily indicate a change in early marriage practices among Syrian refugees. Data from the JLMPS suggest that early marriage was common among this particular population of Syrian refugees before their arrival to Jordan.

Figure 3. Percentage of Jordanian women who married before age 16, 18, and 20 by year of birth



Source: Authors' calculations based on JLMPS 2016

Girls who marry early are at risk of negative health and socioeconomic outcomes

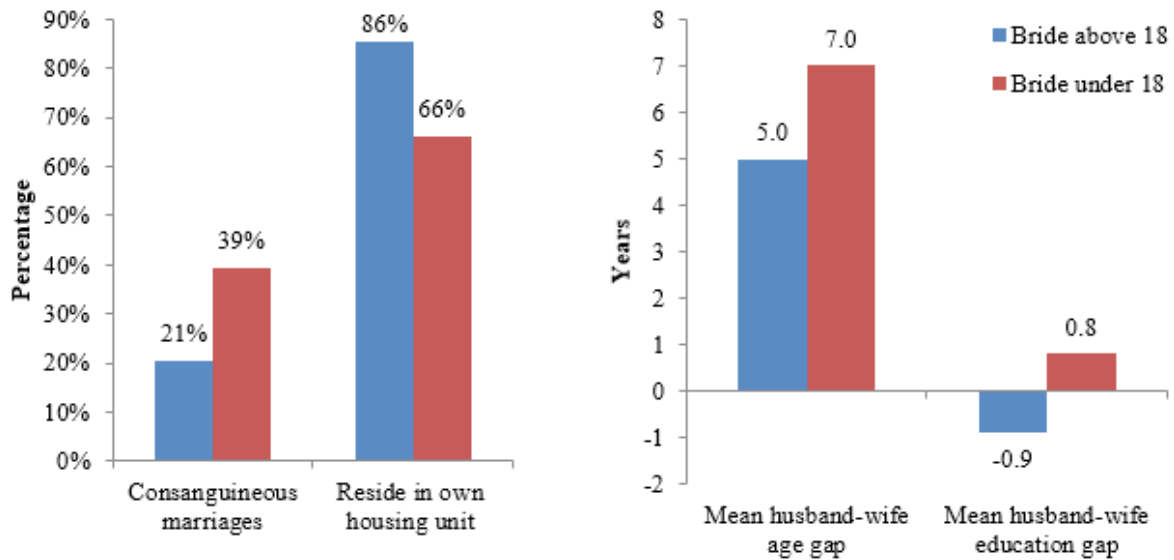
The data from the JLMPS also confirm that girls, both Jordanian and Syrian refugees, who married before they reach age 18 in the context of Jordan, experience marriage outcomes that are associated with lower women's autonomy. This may place them at a disadvantage for later life outcomes as compared to girls who marry at age 18 or above (Figure 4 and

and Higher Population Council (2017)). Girls married early are at a higher risk of being married to a relative or kin (consanguineous marriage). The percentage of early marriages that were consanguineous was 39% compared to non-early marriages (21%). Girls married before age 18 were more likely to share the house with the extended family rather than having an independent house with their husbands. Moreover, the average husband-wife age gap was larger in marriages where the bride was less

than 18 years of age (7 years) compared to marriages where she was 18 years or older (5 years). In terms of education, for early marriages, the husband had, on average, 0.8 more years of schooling than his wife, whereas in marriages where the bride was 18 years or older, the husband had, on average, 0.9 less years of schooling than his wife. All of these outcomes are likely to lead to lower autonomy among women who married before age 18, limiting their agency and empowerment (Jensen and Thornton 2003). The Higher Population Council (2017) notes that girls who are married early often suffer from worse reproductive,

mental and physical health outcomes, including those related to early pregnancy. In accordance with international literature on early marriage and schooling, the Higher Population Council also notes that nearly nine in 10 girls married under the age of 18 had less than an elementary education. Among Syrian refugees who left school since 2011, the JLMPS data indicate that 5% of girls left school to get married. However, there may also be a combination of factors, including financial pressures, that lead girls to both drop out of school and get married.

Figure 4. Marriage outcomes among brides aged below 18 versus 18 and above, marriages formed in 2012-2016



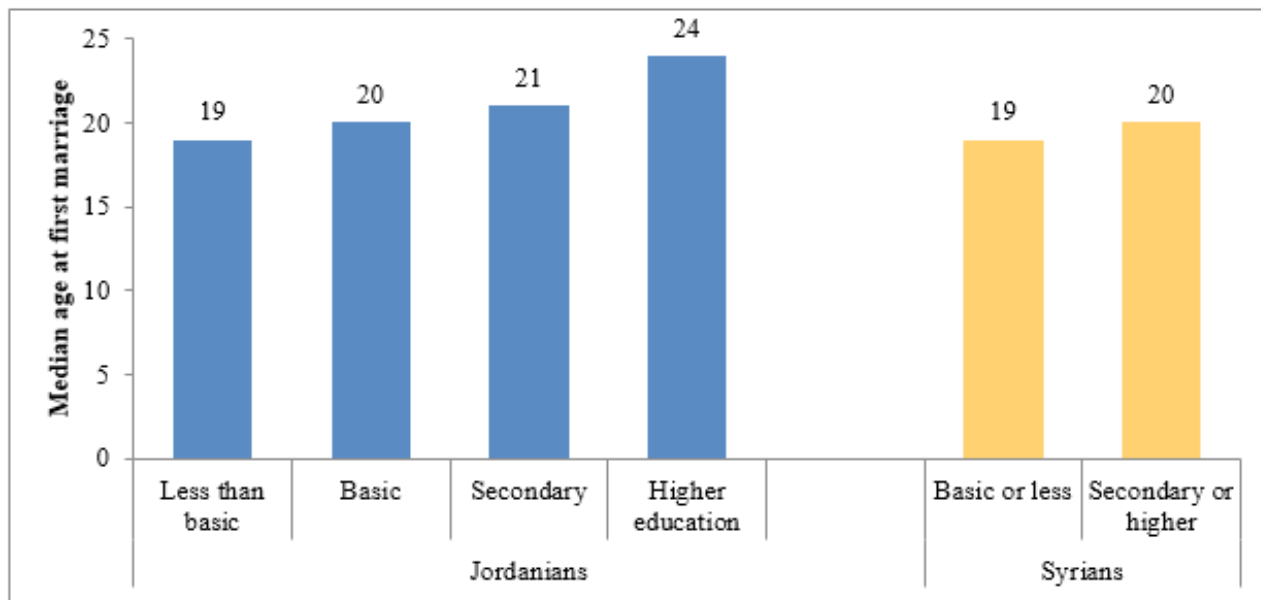
Source: Authors' calculations based on JLMPS 2016

Women's education is a key factor related to older ages at marriage and first birth

The main factor associated with older ages at marriage among Jordanian women is education. As shown in Figure 5, among women aged 25-49 in 2016, median age at marriage for those with less than basic education was 19 years old, compared to 24 years old for women with higher education. Although there were very few Syrian refugee women with more than a basic education, the small group with secondary or

higher education also had a slightly older median age at first marriage.

Figure 5. Median age at first marriage by education among Jordanian and Syrian refugee women aged 25-49, 2016



Source: Authors' calculations based on JLMPS 2016

Because childbirth closely follows marriage, education is also the major factor associated with timing of childbearing among Jordanian women. The median age at first birth varied from 20 years among women with less than basic education to 22 years among women with basic and secondary education to 25 years among women with secondary education and above (Sieverding, Berri, and Abdulrahim 2018).

Recommendations

Fertility rates in Jordan have resumed falling after a long period of stagnation. Evidence from the JLMPS 2016 also demonstrates that, although Syrian refugees do have higher fertility rates than Jordanian nationals, the arrival of the Syrian refugees in Jordan has neither caused Jordan's fertility stall to extend nor affected marriage or fertility patterns among Jordanians. Nevertheless, early marriage remains an important challenge among both Jordanian and Syrian women. It is also critical that the sexual and reproductive health needs of both Jordanian and Syrian women are met during this period when both populations' fertility rates appear to be changing. Several

key investments by the Jordanian government and international partners can help to support women and couples' family planning needs and reduce the negative consequences of early marriage during this time.

Continued investments in women's education

Higher levels of education are a key factor associated with later ages at first marriage and first birth for women in Jordan. Globally, women's education is also one of the main factors associated with lower fertility rates (Bledsoe et al. 1999). Further investments in girls' education are thus of critical importance to maintain the resumed fertility decline in Jordan, combat early marriage, and achieve more positive health and human capital outcomes for women and their children. This is particularly important among the Syrian refugee population, as refugee girls have lower rates of school enrollment and higher rates of school dropout in their teenage years than Jordanian girls (Krafft et al. 2018). Improving women's access to employment opportunities so that they can translate their education into the labor market may also

be a key factor associated with fertility rates in the Middle East and North Africa region (Al Zalak and Goujon 2017; Krafft 2016). Women tend to leave work at marriage (Selwaness and Krafft 2018), so ensuring family formation is reconcilable with employment is a further challenge.

Interventions to combat early marriage

Investing in girls' education and interventions to keep girls in school is also a key strategy to combat early marriage. In addition, multisectoral approaches are needed to address key drivers of early marriage in the context of Jordan, both for Jordanians and Syrian refugees. The Jordanian Higher Population Council (2017) considers early marriage as a violation of girls' human rights, and has advocated for the abolition of the exceptions to the Civil Status Law allowing girls to be married under age 18 under certain circumstances. The Higher Population Council has also recommended the development of a national strategy on child marriage and a comprehensive awareness campaign on the negative effects of early marriage. In developing such campaigns, as well as targeted interventions to prevent early marriage among Jordanian and Syrian refugee girls, government agencies and their partners should rely on the existing evidence base on what works to prevent early marriage. A recent global systematic review of programs to prevent early marriage suggested that programs that empower girls and address the financial drivers of early marriage among poor families could be the most effective in preventing child marriage (Lee-Rife et al. 2012).

Improved access to sexual and reproductive health services and information

For all women, including girls who are married early, access to contraceptives and sexual and reproductive health services and information are essential. Such services yield positive health outcomes and help women to have their desired family sizes. In Jordan, a major constraint in addressing the needs of Syrian refugees is an unclear picture of their current sexual and reproductive health needs. There is no recent na-

tionally representative data available on sexual and reproductive health or desired family sizes. The new Jordan Population and Family Health Survey, fielded in 2017/2018 will help to fill this gap (The DHS Program 2018), but regular follow-up surveys will also be needed to rapidly assess progress from policy and programmatic responses.

The existing evidence shows that both Jordanian and Syrian refugee women have a need for additional reproductive health services. In 2012, only 84% of women's demand for family planning was met in Jordan, and only 58% of demand was satisfied with modern methods, which tend to be more effective (Department of Statistics (Jordan) and ICF International 2013). Studies among Syrian refugees in Jordan also suggest that knowledge of and access to family planning is low (Abisaab et al. 2014; Doedens et al. 2013; Samari 2017), although there is a need for more representative data. Syrian women in one survey wanted the same number of children as Jordanians (3.7) (USAID 2016), suggesting that knowledge of and access to contraceptive services for refugees can be improved to help women achieve their desired family size. The Jordan Communication, Advocacy and Policy (J-CAP) program to address policy and family-level barriers to family planning for both Jordanians and Syrians is one example of programming to address these needs—although more needs to be done (USAID 2018, 2016). Scaling up family planning services for refugees has been identified as a key health challenge for some time (Health Sector Working Group 2017, 2015) and needs to be prioritized.

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