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CENTRAL AGENCY FOR PUBLIC
MOBILISTATION & STATISTICS

EGYPTIAN FERTILITY SURVEY
1980

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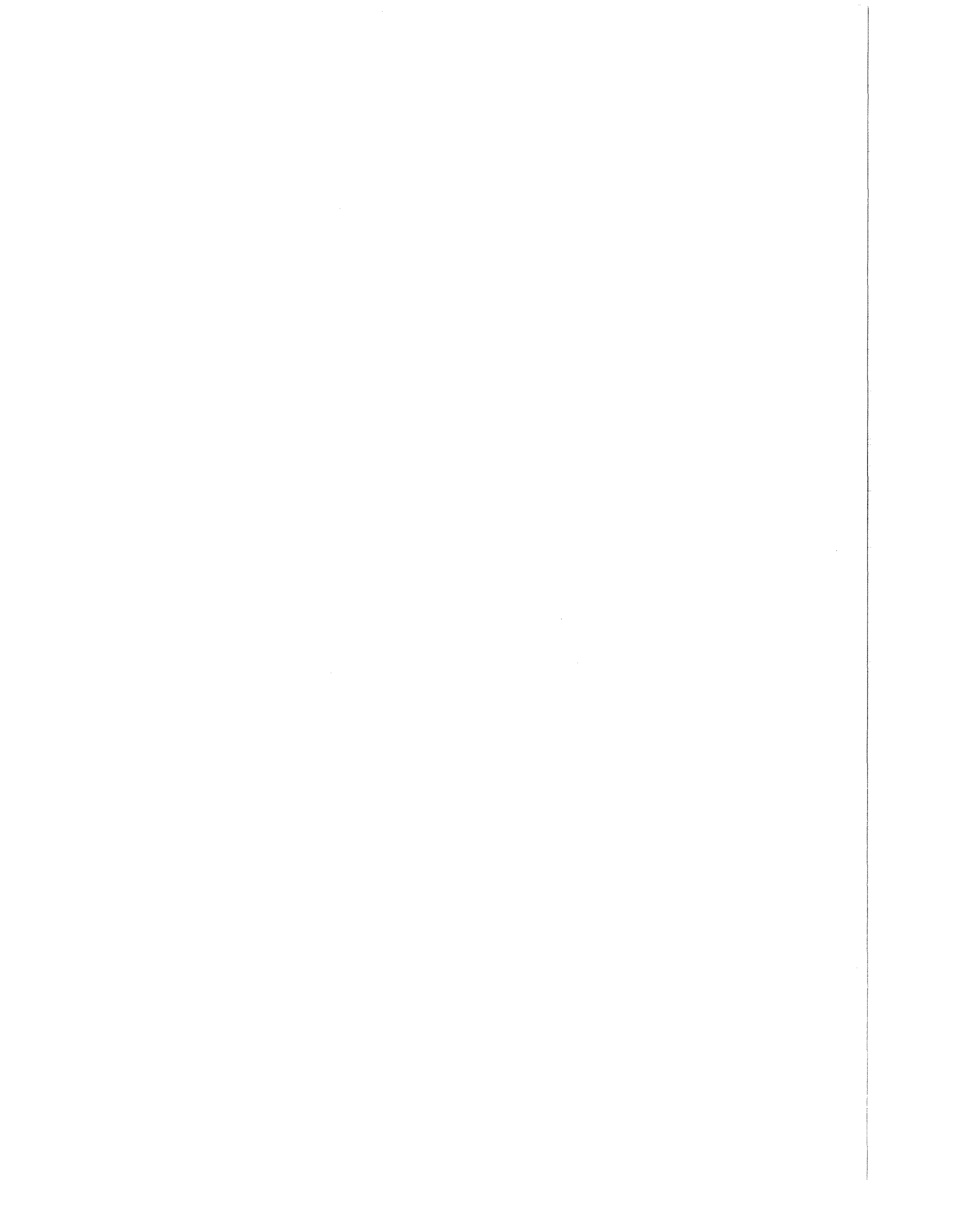
PREFACE

Egypt has recently witnessed the intensification of pres-
sures of rapid population growth and high birth rates on re-
sources and the braking effect which this has had on social
and economic progress. Over the past few years, however,
concentrated efforts have been made to provide family plan-
ning services in an attempt to control the population problem
within a policy of continued improvement in the welfare of
the people.

The Central Agency for Public Mobilisation and Statis-
tics recognizes the need for conducting at frequent intervals -
fertility survey which would help in the assessment of the
demographic situation and of the success in controlling fertility
in Egypt.

It was against this background that CAPMAS conducted
the Egyptian Fertility Survey in 1980. CAPMAS takes this
opportunity to express its gratitude to the international agen-
cies, as well as regional and national organizations whose
willing and effective participation contributed to the success
of this survey. In particular CAPMAS wishes to record its
appreciations to the International Statistical Institute, the World
Fertility Survey and the United Nations Fund for Population
Activities for collaboration in organization, programing, and fun-
ding of the project.

The Egyptian Fertility Survey was designed as a two -
phase survey : the first phase was conducted in February-March
1980, and the second in May - June 1980.

Data collection was followed by comprehensive Office
Editing of the questionnaires and some oneway tabulations have
been produced and analysed.

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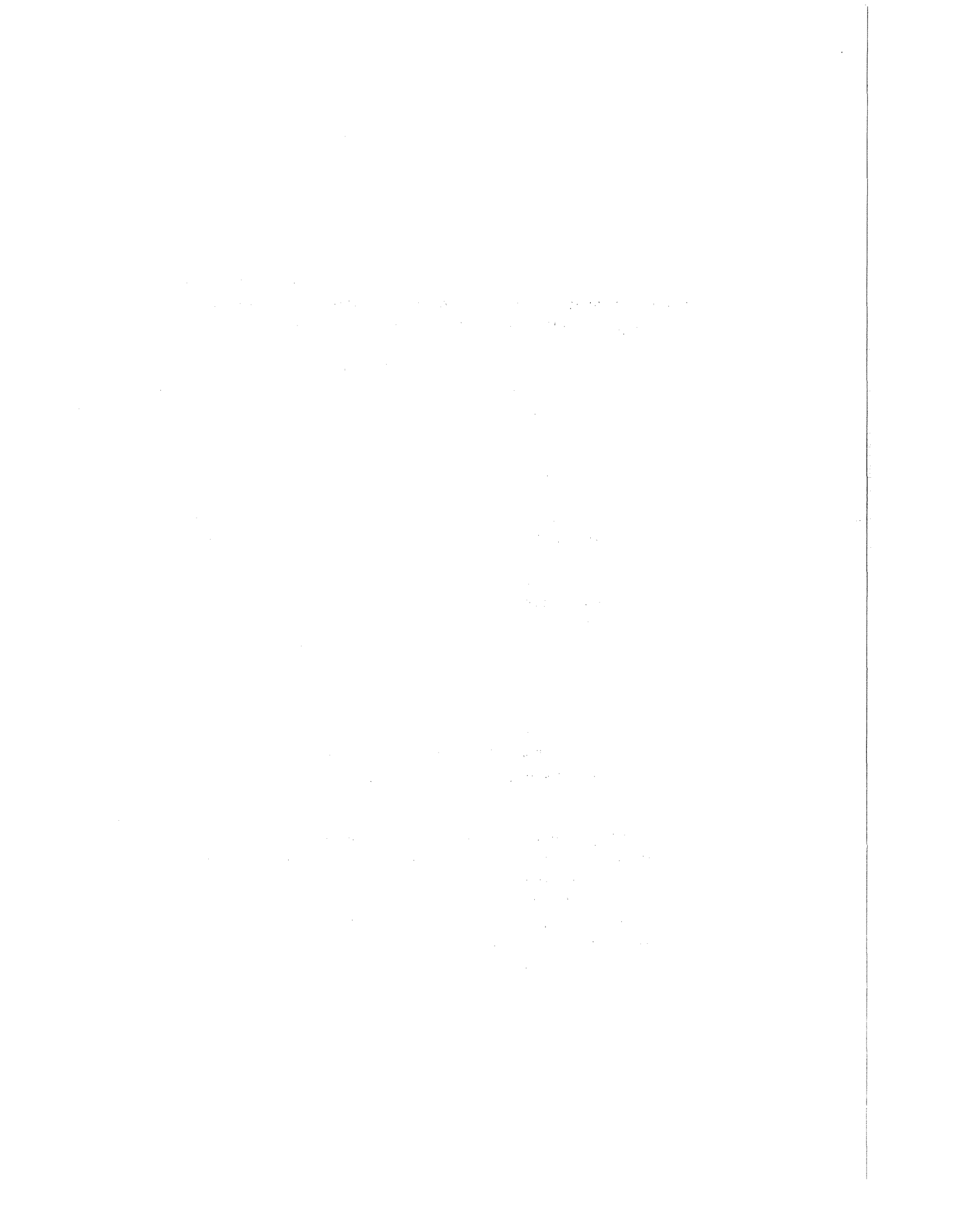
This is the first of a series of scientific reports which will be published by CAPMAS on the Egyptian Fertility Survey 1980. CAPMAS hopes that the facts presented in these reports will provide a comprehensive data base for the assessment of ongoing family planning programmes and for the development of future programmes.

Dr. Awad Mokhtar Hallouda
President, C. A. P. M. A. S.

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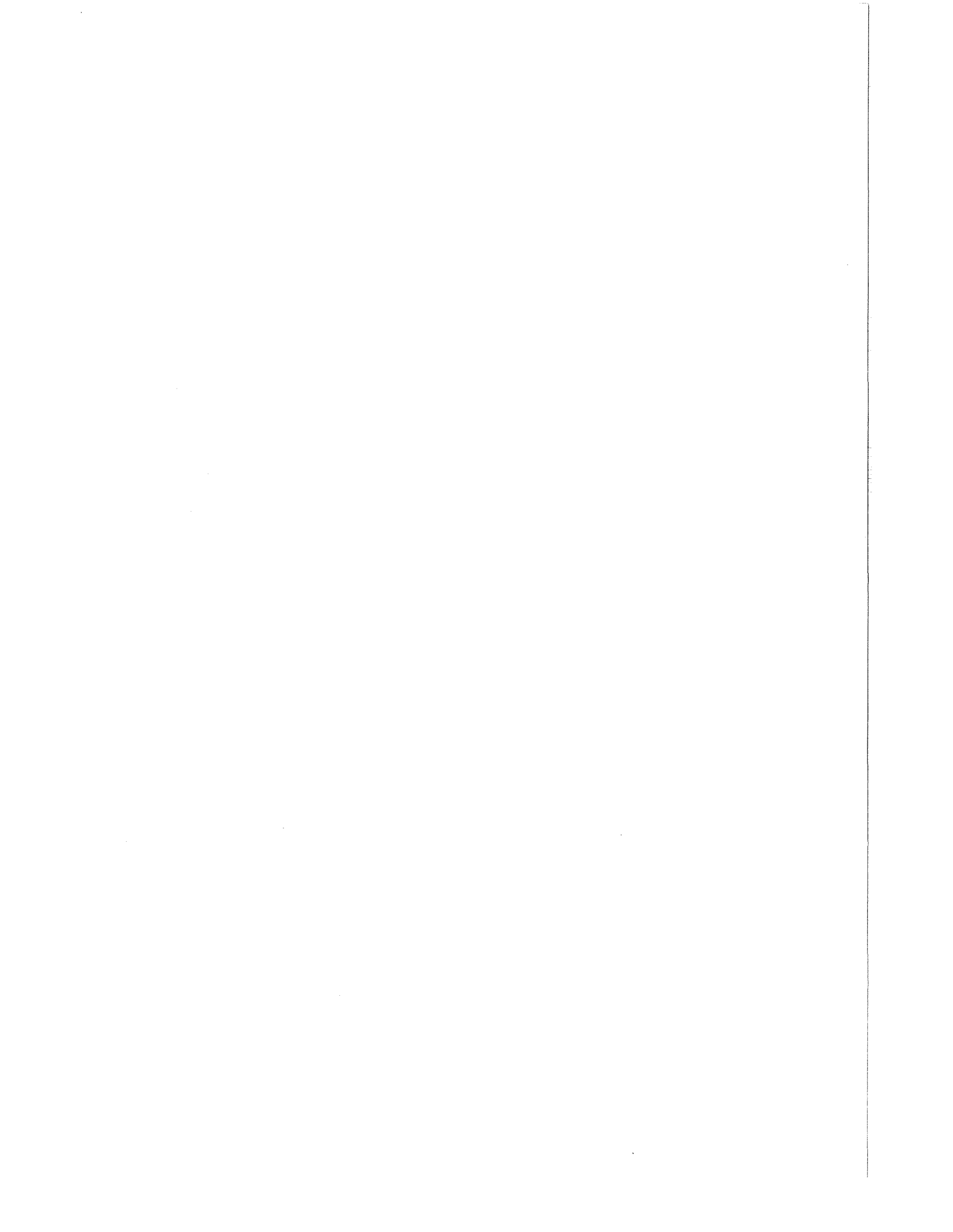
THE EGYPTIAN FERTILITY SURVEY 1980

The Egyptian Fertility Survey 1980 (EFS) was undertaken by the Central Agency for Public Mobilisation and Statistics.

The survey was designed to provide comprehensive data on : fertility, knowledge, attitudes and practice of contraception; and the socio-economic, biological and cultural factors affecting fertility.

The EFS was designed as a two-phase survey.

* First-Phase Survey : Two questionnaires were used in the first phase : the Household Schedule and the Individual Question-naire which was administered to ever-married women under 50 years of age who usually reside in the sample households.

* Second-Phase Survey: The second phase was administered to a sub-sample of the households successfully interviewed in the first phase. Two questionnaires were used in the second phase: the Household Economic Schedule and the Husband's Fertility Questionnaire.

A detailed Community-Level Questionnaire was also used in rural areas.

The Egyptian Fertility Survey has been conducted with the col-laboration of the World Fertility Survey of the International Statistical Institute, the World Bank, and the United Nations Fund for Population Activities.

CONTENTS

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1 - BACKGROUND & METHODOLOGY

1.1 - Introduction :

Egypt, along with other members of the developing world has witnessed the intensification of pressures of rapid and high population growth on resources and the braking effect which this has had on social and economic progress.

The Government of Egypt recognizes the need for a strategy of planned population programmes aimed at re-ducing the rate of population growth within a policy of continued improvement in the welfare of its people.

The Central Agency for Public Mobilisation and Statis-tics (CAPMAS) recognizes the need to develop a comprehen-sive data base for use in the determination of such a strategy. A very important aspect of the pursuit of this policy is the requirement for assessments to be made at frequent intervals of the demographic situation in the country. CAPMAS provides the main tools for such assess-ment through the population censuses, records of vital statistics and surveys.

Of special importance is the measurement of fertility levels and the study of factors affecting fertility at specific periods of development. It was against this background that CAPMAS undertook the National Fertility Survey in 1974 - 1975.

To provide up-to-date data on fertility and to set up
bench marks relating to the interaction of fertility and
other factors, both economic and social, for continuing
analysis, CAPMAS conducted the Egyptian Fertility Survey
(EFS) in 1980. This survey was conducted as part of
the World Fertility Survey Programme. The World Fertility
Survey (WFS) is an international programme of fertility
research undertaken by the International Statistical Ins-
titute (ISI) with the collaboration of the United Nations
(UN) and the International Union for the Scientific
Study of Population (IUSSP).

The Egyptian Fertility Survey (EFS) was designed to
meet Egypt's needs for fertility data as well as to provide
data comparable with other countries participating in the
WFS.

A number of specific objectives were identified for the
EFS as follows :

(a) to provide accurate up-to-date data on fertility levels
    and patterns at both the national and regional levels;

(b) to provide information on the socio-economic, biological
    and cultural factors affecting fertility;

(c) to provide information on knowledge, attitudes and prac-
    tice of contraception;

(d) to provide a data base necessary for the evaluation of
    the effect of the family planning programme on fertility;

(e) to provide a data base that could be used in the prepa-
    ration of population projections;

(f) to provide a comprehensive data base for use in the determination of population policies within the framework of social and economic development plans; and

(g) to provide data for making comparisons of fertility between different countries and different parts of the world.

The EFS was funded from three sources: the Government of Egypt, a grant from the ISI / WFS (UNFPA), and a grant from the World Bank.

1.2 - Sample Design :

The sample for EFS was designed to provide independent estimates for each of the rural, the urban, and national level.

The sample design was a multistage stratified one. Shiakhas in urban areas and villages in rural areas were the primary sampling units.

In designing the survey sample, all the urban Shiakhas and Villages were arranged as to represent all the strata of the population. With a probability proportional to size, 92 Shiakhas from the urban areas and 108 villages from the rural areas were selected, on the basis of the estimated number of households in both rural and urban areas. About 50 eligiblewomen were to be interviewed in each selected Shiakha or village (the eligible woman whould be an Egyptian ever-married woman under 50 years of age).

Each of the selected shiakhas (the ultimate areal unit in urban areas) was visited for determining its

boundaries, principal roads and its main features, and ,
a sketch was prepared for it.   Besides, all the buildings
constructed after the 1976 census as well as the house-
holds residing in them were identified in order to deter-
mine the total number of households in the Shiakhas as a
whole and in each part of it that was used as an enumera-
tion area in the 1976 census.   For each of the enumera-
tion areas, both the percentage of literacy - as calculated
from the findings of the 1976 census - and the number of
households in it were taken as a base for arranging all the
enumeration areas and for selecting two enumeration areas
out of each of the selected shiakhas.

New lists of the housing units in each of the selected
enumeration areas were prepared, and one eighth of housing
units (about 25) were selected by systematic random samp-
ling (this number could differ according to the size of
the selected enumeration area).

As for the villages selected for representing the rural
areas, data on the number of households in each of the
selected main villages as well as its hamlets as identified
in the 1976 Census were used for determining the size of
the village.   Big villages of more than certain specified
size were divided into parts approximately similar in size,
and one of these parts was chosen with probability propor_
tional to size.   If the main village was selected, it was
visited on the spot to be divided after adding any housing
units constructed after 1976 Census.   The selection method
of one part was a propability proportion to size one also.
The selected part of the village was well delineated, and

a sketch was prepared for it illustrating its main fea-
tures. Similarly, new lists of the housing units in
the selected part of the village were prepared, and about
50 housing units were selected by systematic random samp-
ling (again this number could differ according to the
size of the selected part).

In addition to preparing a sketch for each of the
selected enumeration areas in urban areas and the selec-
ted parts of villages in rural areas, a list of the se·
lected housing units and their addresses was prepared
before the beginning of the main field work.

It should be noted that the sample was designed as a
Master Sample, i.e. it was taken into consideration the
possibility of utilizing it in designing and drawing
other samples needed for other demographic surveys.

1.3 — The Questionnaires :

The Egyptian Fertility Survey was designed as a two —
phase survey. The first phase was administered to ever —
married Egyptian women under 50 years of age who usually
reside in the sample households. The second phase was
administered to a sub-sample of the households success-
fully interviewed in the first phase.

1.3.1 — First Phase Survey :

Two questionnaires were used in the First
Phase Survey : The Household Schedule and the
Indiviual Questionnaire.

(a) The Household Schedule :

The household schedule applied to each household living
in each of the selected sample dwellings.   A person or a
group of persons living together in the same dwelling and
sharing the main meal was defined to form a household.   The
respondent for the household schedule could be any usual
member of the household capable of answering the questions .
In practice, however, the respondent was often the eligible
woman herself, since the household and the individual inter-
views were conducted generally during the same visit to the
household.

The interviewer first listed all usual residents of the
household, starting with the head (as defined by the res-
pondent).This was followed by special probes to enlist child-
ren or infants and other non-family usual members such as
servants, friends or lodgers.   It may be noted that in con-
trast to a majority of the WFS surveys, eligibility for the
individual interview was defined on a de-jure (rather than a
de-facto) basis.   This departure was introduced to facili-
tate selection of the sub-sample for the second phase survey.

To obtain data on the population covered by the survey,
as well as to identify women eligible for the individual
interview, age, sex and relationship to head of the house-
hold were obtained for each household member listed: also
marital status was obtained for each household member aged
12 years or more.

The WFS standard version of the household schedule in-
cludes questions on children ever born for each female as

well as on education of each household member. These
questions were not included in the EFS household schedule.
The reason for this is that the questions on children are
relevant only when the household schedule is applied to a
larger sample than that for the individual interview. In
the Egyptian Fertility Survey, both the household schedule
and the individual questionnaire were administered to all
households living in the sample dwellings.

(b)   The Individual Questionnaire :

This questionnaire was applied to all Egyptian ever —
married women under 50 years of age who were usual resi—
dents in the sample households. The respondent had to
be the woman herself, though her husband could answer or
help in answering questions relating to his socio—economic
background. The interviewers were instructed to conduct
the interview in privacy, as far as possible under the
given circumstances.

The WFS CORE questionnaire was examined in detail in
meetings between experts from CAPMAS and ISI / WFS. In
principle, all aspects of the WFS CORE questionnaire were
accepted, but more detailed classifications of certain
aspects of fertility and family planning were introduced,
more questions were added and some refinements were made.

The individual questionnaire used in the EFS consisted
of eight sections as follows :

Section 1 : <u>Respondent's Background</u> :

This section included questions on childhood place of residence, current age of respondent, level of education, literacy and religion. Compared to the standard WFS version, a more detailed classification for level of education was used, and literacy was measured by ability to read as well as to write.

Recognizing the difficulty in obtaining accurate data on age, the following procedure was used. The respondent was first asked about her month and year of birth, and whether or not this was obtained, the respondent was then asked to give her current age. The interviewer was specially trained to probe in detail where required (for example, by referring to other events in the respondent's life), and also to consult any documentary evidence available. Next, the interviewer plotted the respondent's birth-date on the Events Chart (see next page) so that this date could be subsequently compared with dates of other events. Finally, the interviewer recorded her comments regarding age-reporting ; whether the age was reported without further probing : whether it was obtained from some document ; whether extensive probing was necessary, and whether the reporting was believed to be only an approximate estimate.

The events chart
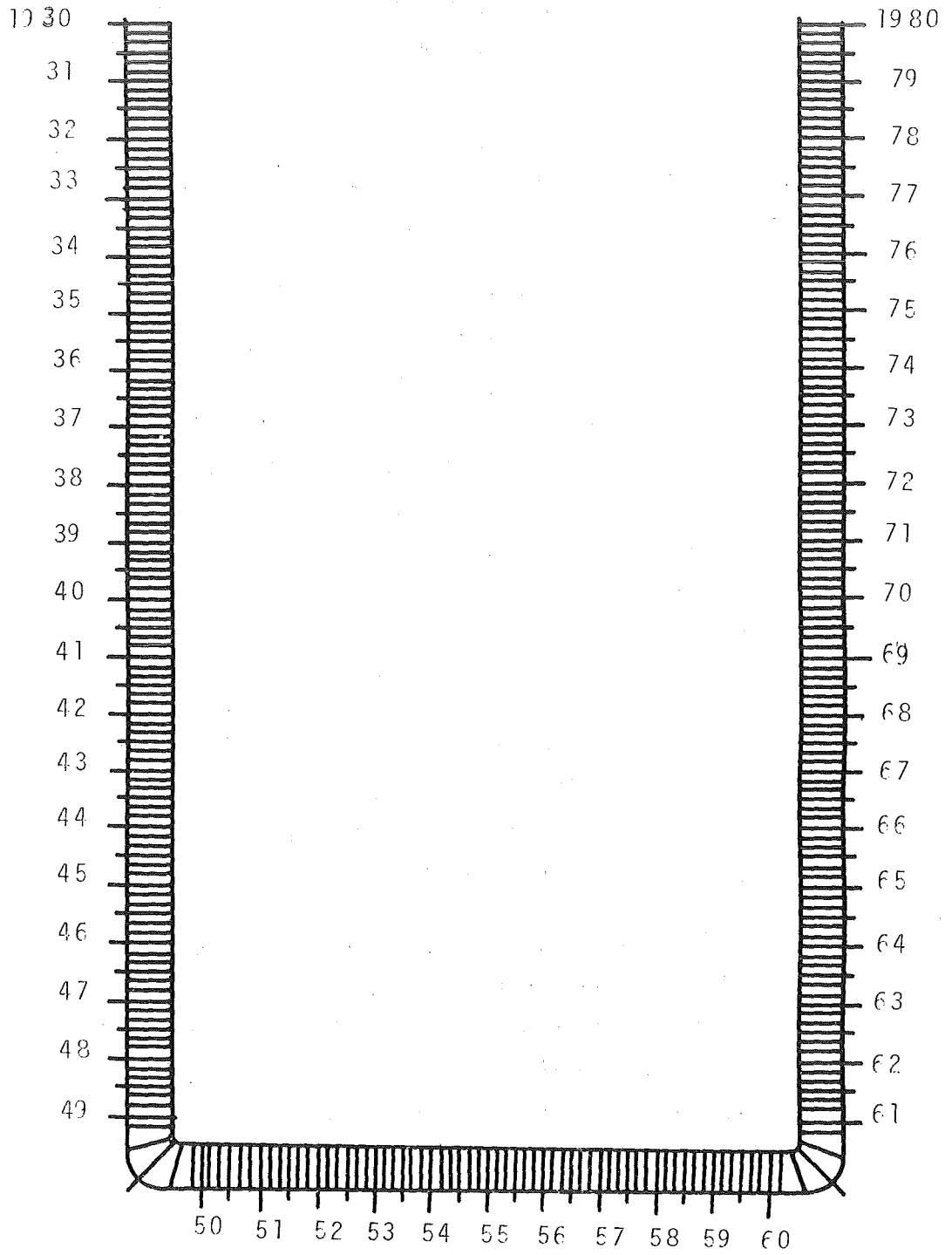
Section 2 : <u>Marriage History</u> :

Since almost all births in Egypt occur within
wedlock, this section—unlike the WFS standard ver—
sion—preceded the sections of birth history and
contraceptive knowledge and use. This deviation from
the WFS CORE is common to other WFS surveys par—
ticularly in the Middle East and Asia.

Again, special attention was paid to obtaining
dates. If the calendar year of consummation of
marriage could not be obtained, the respondent was
asked to give her age at the time her marriage took
place. In the case of former marriages, if the
year of termination of a marriage could not be
obtained, the respondent was asked to give the
duration (in completed years) she and her hus—
band lived together in that marriage until it was
dissolved (by divorce or death of husband).

This section also included a detailed classi—
fication for absence of husband. Unlike the WFS
CORE, the date of beginning of temporary absence
(by reason of absence) was asked.

Two questions — not included in the WFS CORE —
on blood relationship and type of relation, if any,
were added to this section. Finally, this section
included questions on age at menarche, and regula—
rity and duration of menstrual periods.

Section 3 : Pregnancy and Motherhood History:

The information collected on the maternity his-
tory of the respondent is the main focus of any
fertility survey.   The principal output of this sec-
tion is : live births, by sex and date of occurrence,
and survivorship, incidence of infant and child mor-
tality, incidence of pregnancy wastage, including in-
duced abortions, prevalence and duration of lactation
in the open and the last closed birth intervals, dura-
tion of post-partum amenorrhea in the open and the
last closed birth intervals, and current pregnancy,
with duration of pregnancy and sexpreference.

Thus, this section was made up piecing together a
modified version of section 4 (Maternity History) of
the WFS CORE, some questions from the WFS " Abortion
Module " and some questions from the WFS " Factors
Other Than Contraception Affecting Fertility ".

To achieve a record as complete as possible of all
live births, the numbers of living children (by sex
and whether living at home or away) were obtained
first.   This was followed by the number of dead child-
ren, if any, by sex, and then a probe to confirm that
the total number of live births so obtained was cor-
rect.   This was followed by questions on current preg-
nancy with duration and sexpreference – and the number
of all other pregnancies that resulted in abortion or
still birth.

Next, starting with the first born, child data were
obtained on the name, sex, date of birth, duration
of birth interval, survivorship, and if dead—age
at death and finally the number of other pregnan-
cies — if any — that took place during the inter
birth interval preceding the birth of the child.
If the calendar year of birth was not available,
the duration (in completed years) since the
birth occurred was asked. In such case, the inter-
val since marriage (for the first born) or since
the previous birth (for any subsequent birth) was
also asked. This redundancy in the information
obtained was introduced to minimize the incidences
of " not stated " cases, and to help checking con-
sistency of the information both in the field, and
during office and machine editing.

In the second part of the pregnancy history
data, information was collected on other pregnan-
cies which ended in abortion or still births that
occurred in each birth interval including the open
interval.

Section 4 : <u>Knowledge and Use of Contraception:</u>

In this section knowledge and use of various
contraceptive methods were recorded method by me-
thod. First, the respondent was asked to name
any methods she knew of. Then, to avoid omission
and at the same time to obtain a comprehensive
picture of all methods available, the interviewers

were instructed to read a concise description of method, and ask whether the method was known and ever used. The sequence was concluded with a question asking the respondent whether she had ever heard of any other method apart from those already mentioned.

This was followed by questions on the following aspects :

(a) Sources of knowledge of family planning.

(b) Knowledge and use of the available sources of family planning advice and supplies.

(c) Intentions regarding future use of these sources.

(d) The process of decision-making within the family in respect of the use of contraceptive methods.

These questions were added to section 4 because the data gathered will provide the policy-markers with valuable information on the progress of the family planning programme in Egypt, as well as information to evaluate past policies in order to formulate more effective ones for the future.

Section 5 : Family Planning :

This section incorporated the WFS " Family Planning Model ". It classified the respondents into categories as followes :

(a) Married and living with husband, not currently pregnant, and never used any contraceptive me=thod.

(b) Married and living with husband, not currently pregnant, and had used contraceptive method.

(c) Currently pregnant, and had never used any con-traceptive method.

(d) Currently pregnant and had used contraceptive method.

(e) Divorced, widowed, separated, sterile or steri-lized.

To facilitate interviewer's work, pages of different colour were used for each of these five groups.

The content of this section may be summarised as follows : information was sought on the perceived capacity to have children and the desire for more children, including the number desired, preference concerning the sex of the next child, and whether the previous pregnancy was wanted. If the woman had used any contraceptive method, information was sought on current method (or the last method used in the open birth interval) and on the method used in the last closed interval. For those who had never used contraception, information was sought on intentions regarding future use.

Some questions — not included in the WFS Module — were added to this section concerning the process of

decision-making within the family in respect of the desired family size.

Section 6 : <u>Work History</u> :

In general, this section followed the WFS CORE, and covered the following items :

(a) Detailed occupational information about respondent's current or most recent work since marriage.

(b) Nature of the respondent's work before marriage.

The questionnaire provides information for testing the hypothesis about the relationship between employment and fertility. The periods for which information on work status may be analysed are: before (first) marriage, since that time, and for those who have had children, between marriage and the birth of their first child.

Section 7 : <u>Current (Last) Husband's Background</u>:

This section follows the standard WFS CORE and provides information on respondent's current or last husband's age, occupation, working status and education.

Section 8 : <u>Costs and Benefits of Raising Children</u>:

This section was added to the EFS questionnaire to collect data on the costs and benefits of raising children as perceived by the mother. Similar questions were included in the husband's questionnaire

used in the Second Phase Survey. The data collected
on this topic in the two phases will provide valuable
information which will allow testing the various hy-
pothesis regarding the relationship between costs and
benefits of children as perceived by parents and the
pattern of fertility and contraceptive use.

(C) The Community - Level Questionnaire

A detailed Community-Level questionnaire was
developed and applied to all rural areas selec-
ted for the First Phase Survey Sample.

1.3.2 : Second-Phase Survey:

Two questionnaires were used in the Second
Phase Survey : the " Household Economic Schedule"
and the WFS " Husband's Fertility Questionnaire ".
Contents of these questionnaires will be outlined
in a further communication.

1.4 : Pretests:

Three pretests were conducted prior to the main survey.
The questionnaires used in the First Phase Survey were tes-
ted in Pretest 1 and those used in the Second Phase Survey
were tested in Pretests 2 and 3.

The objectives of the pretests were as follows :

(a) To test the formulation of the questions in relation to
their acceptability terms of common usage.

(b) To test the formulation of responses to the attituding questions.

(c) To test the reaction of the public in general to the questions included in the survey.

(d) To estimate the degree of non-response, totally partially as well as spatially.

(e) To estimate the number of households and eligible women which could be interviewed perday, and the average interview time involved.

(f) To test the extent to which modification made as a result of a previous field test improved the efficiency of the questionnaire

1.5 : Training and Field Work :

In the First Phase Survey, supervisors (all males) were given a two-week training course and interviewers (all females) were given an intensive three-week training course. In the Second Phase Survey, supervisors attended a one-week training course and interviewers (males) attended a two - training course.

Field work was conducted during February - March 1980 for the First Phase Survey and during May - June for the Second Phase Survey.

Table (1) : shows the numbers of clusters, dwellings, households, eligible women and completed questionnaires for the First Phase Survey.

TABLE (1)

Numbers of Clusters and Households Coverd by the
First Phase Survey, Egyptian Fertility Survey 1980.

	Urban	Rural	Total
Number of Clusters	92	108	200
Number of Listed Dwellings	39967	72272	112239
Number of Selected Dwellings.	5095	5501	10596
Number of Households Interviewed.	4733	5346	10079
Number of Eligible Women.	3773	5149	8922
Number of Completed Questionnaires.	3716	5108	8824

2 - F E R T I L I T Y

2.1 : Introduction :

The estimation of levels, differentials and trends in fertility is a primary objective of the EFS. Particular care was taken to devise a set of questions and interviewing procedures which would give accurate data on the number of children ever born and the timing of births in a respondent's life. As already mentioned, the total number of births was obtained by a sequence of questions eliciting separately the number of children alive and deceased, the former classified by sex and residence in the household and the latter classified by sex.

Following this, the questionnaire was designed to provide for the collection of detailed pregnancy history data in two parts, the first relating to all live births and the second to other pregnancies.

In the first part of the pregnancy history data, the interviewer ascertained-beginning with the first birth and referring to each child by name - the date of birth, sex, survivorship and age at death - if applicable - for each child. The date was asked as the calendar year and month of birth, but if this could not be obtained the duration in completed years and months since marriage (for the first child) or since the birth of the previous child (for the second and subsequent children) was requested. In such cases, and, as a check, age of children were also obtained.

In the second part of the pregnancy history data, information was collected on other pregnancies which ended in abortion or still births that occurred in each birth interval.

One of the main measures of fertility employed here is based on the cross-sectional view at the time of the interview. This measure is the current parity, or number of children ever born, and makes to direct reference to the timing of fertility of individual respondents.

Section 2.2 considers regional differences in the mean number of children ever born to all ever-married women under 50 years of age at the time of the survey. In section 2.3 regional differences in the mean number of children ever-born to evermarried women aged 45 - 49 years are considered.

In the present report, five regions have been identified as follows :

(a) Urban Governorates : Cairo, Alexandria, Suez and Port Said.

(b) Urban Lower Egypt : Urban areas north of Cairo.

(c) Urban Upper Egypt : Urban areas south of Cairo to Aswan.

(d) Rural Lower Egypt : Rural areas north of Cairo.

(e) Rural Upper Egypt : Rural areas south of Cairo to Aswan.

It should be noted that these regions do not strictly speaking, represent geographic regions, rather they form domains of analysis.

2.2 : Current Parity :

2.2.1.: Children Ever Born :

Table 2 shows the mean number of children
ever-born to all ever-married women under 50
years of age according to type of place of resi-
dence. This measure gives a general idea of
the average fertility achieved by all women in
the sample. However, a more detailed analysis
of the pattern and level of fertility would re-
quire the examination of this index according to
some important demographic variables such as age
of women, age at first marriage, duration of mar-
riage, etc... Such detailed analysis will be
presented in further reports.

As may be seen from table 2, the mean number
of children ever-born to all ever-married women
in the sample is 4.1 children. This mean is
higher in rural than in urban areas (4.3 against
3.9 children respectively). The mean is only
3.8 in urban governorates, whereas it reaches
4.2 children in both lower and upper Egypt.

TABLE (2)

Average Number of Children Ever-Born per Egyptian
Ever-married Women Less Than 50 Years of Age,
Egyptian Fertility Survey, 1980.

Area	Urban Governo- rates	Lower Egypt	Upper Egypt	Total
Urban	3.8	3.8	4.0	3.9
Rural	-	4.4	4.3	4.3
Total	3.8	4.2	4.2	4.1

Further, the mean is higher in rural than in urban parts of both lower and upper Egypt. In lower Egypt, the mean is 4.4 in rural areas against 3.8 children in urban areas. In upper Egypt, the mean is 4.3 and 4.0 for rual and urban areas respectively.

2.2.2 : Survivorship of Children :

The question of the impact of infant and child mortality on fertility in Egypt is particularly important, in view of the relatively high infant and child mortality rates which are believed to have hitherto prevailed. It is therefore, useful to know the impact of child mortality on family size in order to place findings on fertility and family planning in their proper context.

Table (3) shows the mean number of children surviving to ever married women aged less than 50 years.

TABLE (3)

Mean Number of Children Surviving to Ever
Married Women Aged Less Than 50 Years,
Egyptian Fertility Survey, 1980

Area	Urban Governo-rates	Lower Egypt	Upper Egypt	Total
Urban	3.1	3.1	3.0	3.1
Rural	-	3.4	2.9	3.2
Total	3.1	3.3	2.9	3.1

The Following points may be noted :

1 - The mean number of children surviving to ever married women aged less than 50 years is 3.1 children, with a slight difference between urban and rural areas.

2 - The mean numbers of children surviving in urban gover-norates and in urban lower Egypt are similar (3.1 Child-ren). However it is Slightly lower than the general average in urban upper Egypt (only three children).

3 — Although the average numbers of children ever born per
women in rural areas in both lower and upper Egypt are
more or less identical, the mean number of children sur-
viving in rural lower Egypt reaches 3.4 children, but it
drops to only 2.9 children in rural upper Egypt.   This
may reflect the better health services available in rural
lower Egypt.

Table 4 shows the proportion of children surviving to all
ever-married women under 50 years of age by type of place   of
residence.

TABLE (4)

Proportion of Children Surviving to Ever-married
Women Aged Less Than 50 Years,
Egyptian Fertility Survey, 1980.

(per-cent)

Area	Urban Governo-rates	Lower Egypt	Upper Egypt	Total
Urban	82	82	75	79
Rural	–	77	67	74
Total	82	79	69	76

Table (4)   indicates the following :

1 — The proportion of children surviving to all ever married
women in the sample is 76 per-cent. In other words, the
Egyptian woman looses, on the average, about one-fourth
of the children she has since her first marriage.

2 — As expected, the highest proportion of children surviving
is observed in urban governorates and in urban areas of
lower Egypt (82 per-cent). The proportion of children
surviving drops to only 69 per-cent in upper Egypt, This
means that almost one third of the children born alive to
women in upper Egypt die.

3 — Although the average number of children ever born is more
or less identical for all urban areas in Egypt, the propor-
tion of children surviving tends to differ according to
region of residence. It reaches 82 per-cent for both ur-
ban governorates and urban lower Egypt while it drops to
only 75 per-cent in urban upper Egypt.

4 — Women living in rural upper Egypt lose, on the average,
about one child out of every three children they have.
This reflects the poorer conditions of health services in
rural upper Egypt.

In rural lower Egypt, the proportion of children surviving
rises to 77 per-cent.

2.3 : Completed Fertility :

2.3.1 : Children Ever Born :

The mean number of children ever born to
women aged 45 – 49 years at the time of the
survey gives a good indicator of the level of
completed fertility.

Table (5) shows the level of completed
family size of ever-married women aged 45 – 49
years.

The following observations may be made :

1 – The mean number of children ever-born to
ever married women aged 45 – 49 years
is as high as 6.8 live births. It should
be noted however, that this figure for
completed fertility is high because it
refers to older women who married at very
young ages and who apparently did not use ,
any modern method of contraception through-
out most of their childhearing life.

TABLE (5)

Mean Number of Children Ever-born to Ever-married
Women Aged 45 - 49 Years,
Egyptian Fertility Survey, 1980

Area	Urban Governo- rates	Lower Egypt	Upper Egypt	Total
Urban	6.3	7.4	6.9	6.7
Rural	-	7.1	6.8	7.0
Total	6.3	7.2	6.8	6.8

2 - The completed family size for rural women tends to
be higher than that for urban women. It is 7.0
children for the first group against 6.7 children
for the latter.

3 - The lowest level of completed family size is obser-
ved in urban governorates (6.3 children). However
completed fertility tends to increase to 6.8 child-
ren in upper Egypt and to 7.2 children in lower
Egypt.

4 - The urban-rural differentials in completed family
size are relatively significant in lower Egypt than
in upper Egypt, While the completed family size is
7.4 and 7.1 live births in urban and rural areas of

looses, on the average, about two out
of every seven children born alive. This ref-
lects the high infant and child mortality which
prevailed in the past, i. e. the number of child-
ren surviving for woman aged 45 - 49 years is
affected by the mortality rates that prevaled in
the past 35 years or so. Thus, while woman aged
(15 - 49) years has lost about one child out of
four live births, woman aged 45 - 49 years have
lost about two children out of seven births. This
may be attributed to the inprovement in mortality
rates.

2 — While the urban governorates show the lowest
   level of completed fertility, upper Egypt shows
   the lowest average number of children surviving.
   The table reveals that the average is about 4.4
   children in upper Egypt against 5.1 children in
   lower Egypt and 4.8 children in urban governo-
   rates.

TABLE (6)

Average Number of Children Surviving for Egyptian
   Ever-married Women Aged (45 - 49) Years,
   Egyptian Fertility Survey, 1980 .

Area	Urban Coverno-rates	Lower Egypt	Upper Egypt	Total
Urban	4.8	5.5	4.8	5.0
Rural	—	4.9	4.3	4.6
Total	4.8	5.1	4.4	4.8

3 — Urban-rural differentials are apparently
   appear with respect to the number of child-
   ren surviving.   While it reaches 5.5 child-
   ren per woman lives in urban lower Egypt it
   drops to only 4.9 children in rural lower
   Egypt. Likewise, in upper Egypt, the average
   number of children surviving is 4.8 against

4.3 children for urban and rural areas res-
pectively.

Table (7) gives the proportion of children Surviving
for ever-married women aged 45-49 years. Obviously, the
proportion of surviving children for women aged 45 - 49
tends to be lower than that for women aged (15 - 49)
years. As stated earlier, the proportion of surviving
children related to the first group is affected by diffe-
rent mortality rates extended over a long period of time.

TABLE (7)
Proportion of Children Surviving for Ever-married
Women in the age group (45 - 49)
Egyptian Fertility Survey, 1980

Area	Urban Governo- rates	Lower Egypt	Upper Egypt	Total
Urban	76	74	70	75
Rural	-	69	63	66
Total	76	71	65	71

Table (7) shows the following :

1 - The proportion of children surviving for ever-married
    women aged (45 - 40) is 71 per-cent.

2 – Urban governorates record the highest proportion
   of surviving children of 76 per-cent, this is fol-
   lowed by that in lower Egypt (71%), while the
   proportion of surviving children in Upper Egypt
   is the lowest one (65 %).

3 – As a result of the varied socio-economic and
   health conditions between rural and urban areas,
   the proportions of children surviving are 74 and
   70 per cent in urban lower and urban upper Egypt
   respectively against 69 and 63 per cent in rural
   lower and rural upper Egypt respectively.

4 – Data in table (7) also shows significant differen-
   ces between rural areas in lower and upper Egypt.
   While the proportion of children surviving in rural
   lower Egypt reaches 69 per cent, it drops to only
   63 per cent in rural upper Egypt. This may be
   mainly attributed to the relatively poorer health
   services in rural upper Egypt.

3 - FAMILY PLANNING

3.1 - Current Use of Contraception :

The use of modern means of contraception is of recent
origin in Egypt. Over the past few years however, concent-
rated efforts have been made to provide couples with facili-
ties for family planning. The measurement of the extent to
which the knowledge and use of these facilities has spread
is one of the major objectives of the Egyptian Fertility
Survey. Hence, the data which this survey will provide on
the levels and differentials of contraceptive knowledge and
use among Egyptian women will be of considerable practical
value in assessing the impact of the family planning prog-
rammes in Egypt and in developing future programmes.

The prevalence of current use of contraception is per-
haps the best available indicator of the impact of the family
planning programme in Egypt and of the probable effect of
contraception on fertility.

In the EFS, all women who had reported ever-use of cont-
raception and were currently married and non-pregnant were
asked the question : Are you or your husband using a method
to keep you from getting pregnant?. If the response was
" Yes " , they were asked to specify the method they were
using .

It should be noted that the figures presented here refer
to current use among all currently married women and not to
women who are currently exposed to the risk of conception.

Prevalence rates based on the " currently exposed " group
of women will be published in a further report.

   Table (8) shows the proportion of currently married
women using contraception according to type of place of
residence.   The following observations may be made

1 - Only 23.8 per-cent of the all currently married women
    aged (15 - 49) years are using contraception. This
    proportion is considered low if compared to those ob-
    served in other societies with successful family plan-
    ning programmes.   The proportion is more or less
    similar to the figure shown by the 1974/ 75 National
    Fertility Survey.

2 - Regional differentials are substantial among women
    using contraception. The proportion of current users
    is 43% in urban governorates, 24% in lower Egypt and
    only 13% in upper Egypt.

3 - As expected, the proportion of women using contracep-
    tion in urban areas is substantially higher than that
    in rural areas, It reaches about 40% in urban against
    only 12 per .cent in rural areas. This rural-urban
    differential is also shown among lower and upper Egypt
    separately. In lower Egypt, the proportion of current
    users is 41% per-cent in urban areas gainst only 18%
    in rural areas. Likewise, in upper Egypt it is 33%
    and 4% in urban and rural areas respectively. Thus,
    concentrated efforts and intensive family planning
    programmes are required in rural areas, particularly
    in rural Upper Egypt.

TABLE (8)

PROPORTION* OF CURRENTLY MARRIED WOMEN USING CONTRACEPTIVES,

EGYPTIAN FERTILITY SURVEY, 1980

(per-cent)

Method of Contraception.	Urban Governorates.	Lower Egypt			Upper Egypt			Total		
		Urban	Rural	Total	Urban	Rural	Total	Urban	Rural	Total
Pill	25.8	32.8	13.1	18.1	21.1	3.0	8.4	26.5	8.7	16.3
I.U.D.	8.2	4.0	3.0	3.2	6.5	0.7	2.5	6.6	2.0	4.0
Others**	8.9	4.3	1.6	2.2	5.2	0.3	1.8	6.7	1.0	3.5
Total	42.9	41.1	17.7	23.5	32.8	4.0	12.7	39.8	11.7	23.8

* These proportions are related to the total number of Currently married Women Aged Less than 50 Years.

** Other methods of contraception include condom, safe period, foam tablets, jelly, cream ... etc, but not breast-feeding.

(34)

In general, the relatively high proportion of current
users among currently married women in urban governorates
reflects the acceptance on the part of certain Egyptian
strata for using contraception. Studying the social and
economic conditions of those strata will enable for identifying
the specific forces that help in raising contraceptive use
in the other areas.

3.2 : Use of Pells :

In spite of the availability of pills in family plan-
ning centres at a very low price, the percentage of current
users among the currently married women at ages under 50
years is still at a low level of 16.3 per cent (only about
one-sixth of the currently married women). The percentage
of pill users reached its highest level in the urban gover-
norates 26 per cent). Users in lower Egypt have a higher
percentage of 18% compared to 8 per cent in upper Egypt.
Following the same trend, it seems that urban women in lower
Egypt are more aware of family planning practice than women
in upper Egypt, this is clearly indicated from a comparison
of the percentages of pill users in the two areas in which
they reached 33 and 21 per cent respectively.

Similarly, the proportion of current users among women in
rural lower Egypt achieved a much higher level of 13 per cent
compared to only 3 per cent in rural upper Egypt. In other
words we can say that 97 per cent of women in rural areas of
upper Egypt are non-users. This may reflect a lack of in-
formation on family planning and contraception. Therefore,
intensive efforts are urgently needed to spread information

on family planning and contraception in these rural areas of upper Egypt.

3.3 : Use of I.U.D. :

As can be seen from table (8), the proportion of current users of I.U.D. among the currently married women is about 4% for the whole country, and varies between 2% and 6.6% for rural and urban areas, respectively. This proportion however, is highest in urban governorates (8.2 per cent). It may also be seen from the table that the proportion of I.U.D. users in urban Upper Egypt follows the same level of urban Egypt as a whole of about 6.5 and 6.6 per cent respectively.

In rural Upper Egypt, the proportion of current users is only 0.7 per cent compared to 3 per cent in rural lower Egypt. Since I.U.D. is considered as one of the most effective contraceptives, more efforts are needed specially in rural areas in order to increase usage of this effective method.

3.4 : Using of Other Methods :

We now consider the current use of other methods such as condom, safe period (rhythm), foam tablets... etc. The proportion of users of these other methods is 3.5 per cent of the currently married women. This percentage increased to about 9 per cent in urban governorates and 4.3, 5.2 per cent for both urban lower and Upper Egypt repectively. On the other extreme, it is only 1.6 and 0.3 for rural lower and Upper Egypt respectively.

3.5 : The Most Popular Methods:

Table (9) shows the percent distribution of married
women who are currently using contraceptives according to
the type of contraception in different regions of the
country.   The following points may be underlined :

1 — The pill is the most used method for all regions of the
  country it has being used by about 69% of all women who
  use contraception.   This is consistent with the re-
  sults of National Fertility Survey of 1974 / 75 which
  revealed that 75 per cent of users were using pills.

2 — The highest percentage of those who are using pills
  is found in urban Lower Egypt (80%) while the lowest
  one is found in urban governorates (60%).

3 — I.U.D.   comes as the second method being used.   The per-
  centage of I.U.D. users reached about 17 per cent for
  the country as a whole, and it increases to about 20
  per cent for urban Upper Egypt and 19 per cent for urban
  governorates.   This percentage reaches its lowest level
  of only 9.6 per cent in urban Lower Egypt.   This may be
  attributed to the increase of the percentage of pill
  users in that area.

TABLE (9)

Percent Distribution of Currenty Married Women
Using Contraception According to Method Used,
Egyptian Fertility Survey, 1980.

Regions	Pills	I.U.D.	Other Methods	Total
Urban Governorates	60.1	19.0	20.9	100.0
Urban Lower Egypt	80.0	9.6	10.4	100.0
Rural Lower Egypt	74.5	16.7	8.8	100.0
Total Lower Egypt	76.9	13.6	9.5	100.0
Urban Upper Egypt	·64.3	19.9	15.8	100.0
Rural Upper Egypt	74.1	17.3	8.6	100.0
Total Upper Egypt	66.5	19.3	14.2	100.0
Total Urban	66.4	16.7	16.9	100.0
Total Rural	74.4	16.8	8.8	100.0
Total Country	68.7	16.7	14.6	100.0

4 - The increase in the percentages of users of both the
"I.U.D." and " other methods" in urban governorates
(19.0 and 20.9 per cent respectively) is the main
reason contributed to the reduced percentage of pill
users in the urban governorates.

Table (10) presents the percent distribution of
married women according to type of current use of cont-
raception in different regions of the country compared
to the results of 1974/ 1975 National Fertility Survey.
It may be seen from the table that :

1 — Although the pill is the most practiced contracep-
   tive method used in different regions of the country
   in both 1979 / 1980 and 1974 / 1975 surveys, the
   percentage of pill users has shown a declining trend
   in 1980 for all regions of the country with the ex-
   ception of rural Upper Egypt where this percentage
   increased from 52.8 per cent in 1974 / 1975 to 74.1
   per cent in 1980. This may be due to a shift by
   higher proportion of women in this regions from using
   the traditional methods of family planning to the use
   ot the pill and other effective methods. This inter-
   pretation may also be ascertained from the increase
   in the percentage of I.U.D. users for the same region
   from 10.4% in 1974 / 1975 to 17.3 per cent in 1980.

2 — On the contrary to this declining trend in current
   use of the pill, the percentage of I.U.D. users in
   1980 is relatively higher than that shown in 1974/75
   in all regions without exception. This may be attri-
   buted to the effectiveness of this method.

TABLE (10)

PERCENT DISTRIBUTION OF CURRENTLY MARRIED WOMEN USING
CONTRACEPTIVES ACCORDING TO TYPE OF CONTRACEPTIVE USED

EGYPTIAN FERTILITY SURVEY 1980, NATIONAL FERTILITY SURVEY 1974/ 75

| Regions	Oral Pills		I.U.D.		Other Methods		All Methods	
	1980	74/75	1980	74/75	1980	74/75	1980	74/75
Urban Governorates	60.1	68.4	19.0	12.5	20.9	19.1	100.0	100.0
Urban Lower Egypt	80.0	83.0	9.6	7.4	10.4	9.6	100.0	100.0
Urban Upper Egypt	64.3	79.3	19.9	7.2	15.8	13.5	100.0	100.0
Rural Lower Egypt	74.5	76.6	16.7	10.3	8.8	13.1	100.0	100.0
Rural Upper Egypt	74.1	52.8	17.3	10.4	8.6	36.8	100.0	100.0
Total Country	68.7	75.0	16.7	9.6	14.6	15.4	100.0	100.0

(40)

4 - CONCLUSIONS

The preliminary results of the Egyptian Fertility Survey
have provided a clear picture of the dimensions of the most
important demographic variables affecting the Egyptian society.
These results are assumed to be of significant importance for
implementing the relevant population policy, and to help those
who are interested in the field of family planning. Of these
preliminary results, the main findings may be summerized as
follows :

1 - The level of completed family size in Egypt is one of the
highest levels in the world today. This level has reached
6.8 children for ever married woman at ages 45 - 49 years.
It is expected that the improvement of medical services
especially for women at younger ages will reduce the rates
of abortion and still-births. Such a situation will incréase
fertility levels unless family planning efforts succeded to
reduce the existing ferility rates.

2 - The level of completed family size for rural women is slightly
higher than that for urban women (7 and 6.7 children respec-
tively). This is mainly attributed to the lower level of
completed fertility for women living in the urban governorates
of only 6.3 children.

3 - The average number of surviving children to ever-married woman
aged 45 - 49 years is 4.8. This average is relatively higher
in urban than in rural areas (5 and 4.6 living children respec-
tively). This difference - in spite of the lower fertility
level of the urban women - is mainly due to the better health
conditions and higher educational levels of urban women and
consequently lower infant and child mortality rates.

4 — Ever-married women aged 45 — 49 years lose 25 per cent of
their total number of children ever born in urban areas,
and 34 per cent in rural areas with an average figure for
the country of 29 per cent. This high level of infant and
child mortality may challenge the efforts of family plan-
ning programmes as a result of the fear of death of child-
ren.

5 — The percentage of women using contraceptives is still low
reading only 23.8 per cent of all currently married women
in the reproductive ages (15 — 45) years). Hence, integ-
rated and intensive efforts concerning family planning are
needed in order to increase the percentage of acceptors and
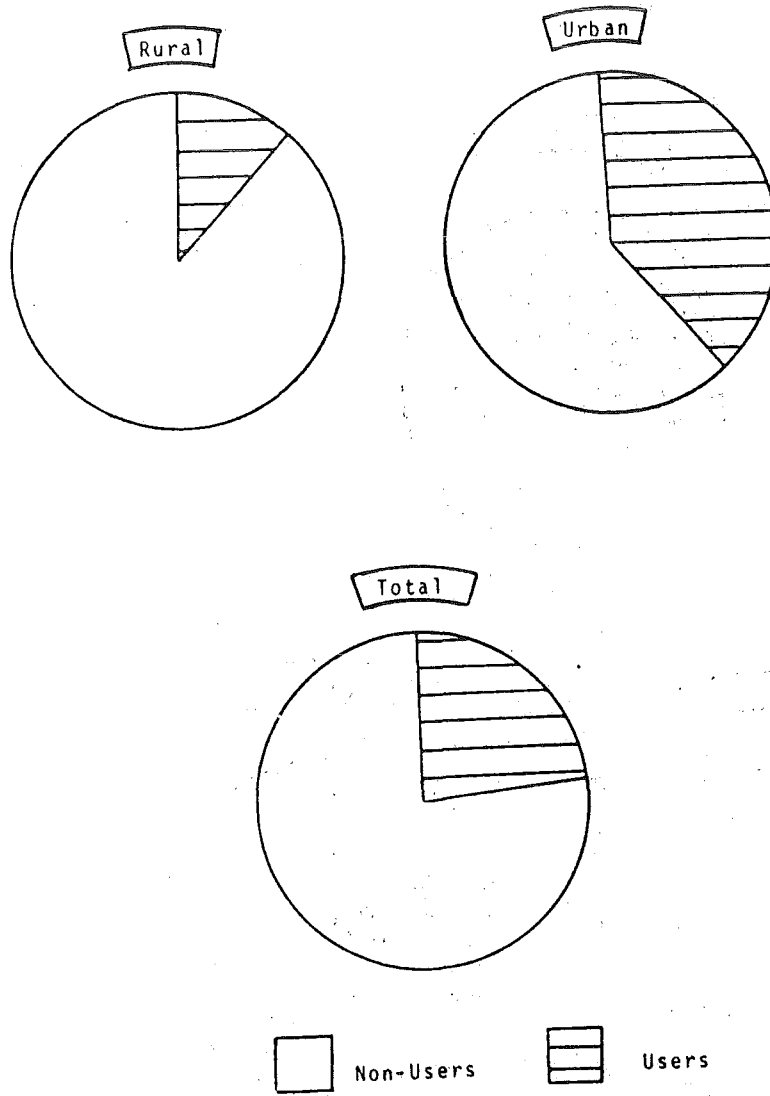users of contraceptives.

* * *
*

Average Number of Children Ever-Born and Surviving Children
of Egyptian Ever-Married Women Aged 45-49 years.
Egyptian Fertility Survey, 1980
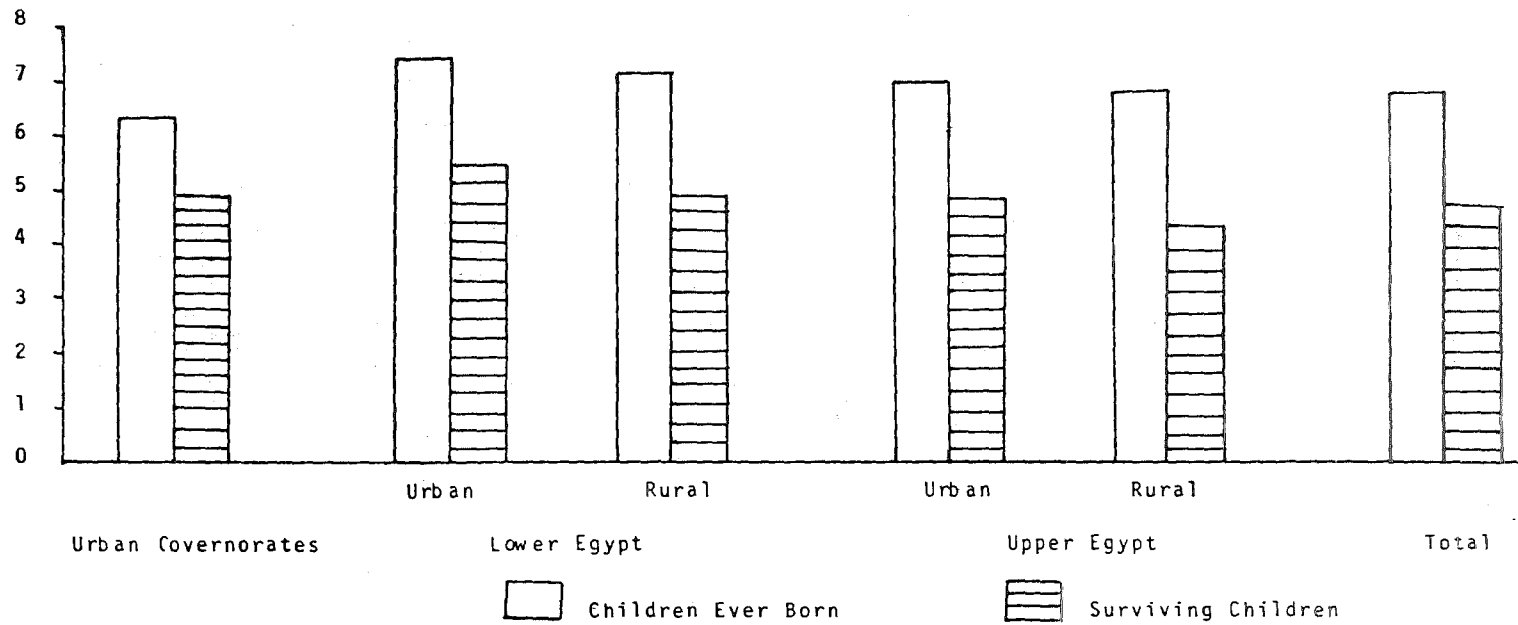
Average number of Children Ever-Born and Surviving Children
of Egyptian Ever-Married Women less than 50 years of age.
Egyptian Fertility Survey, 1980
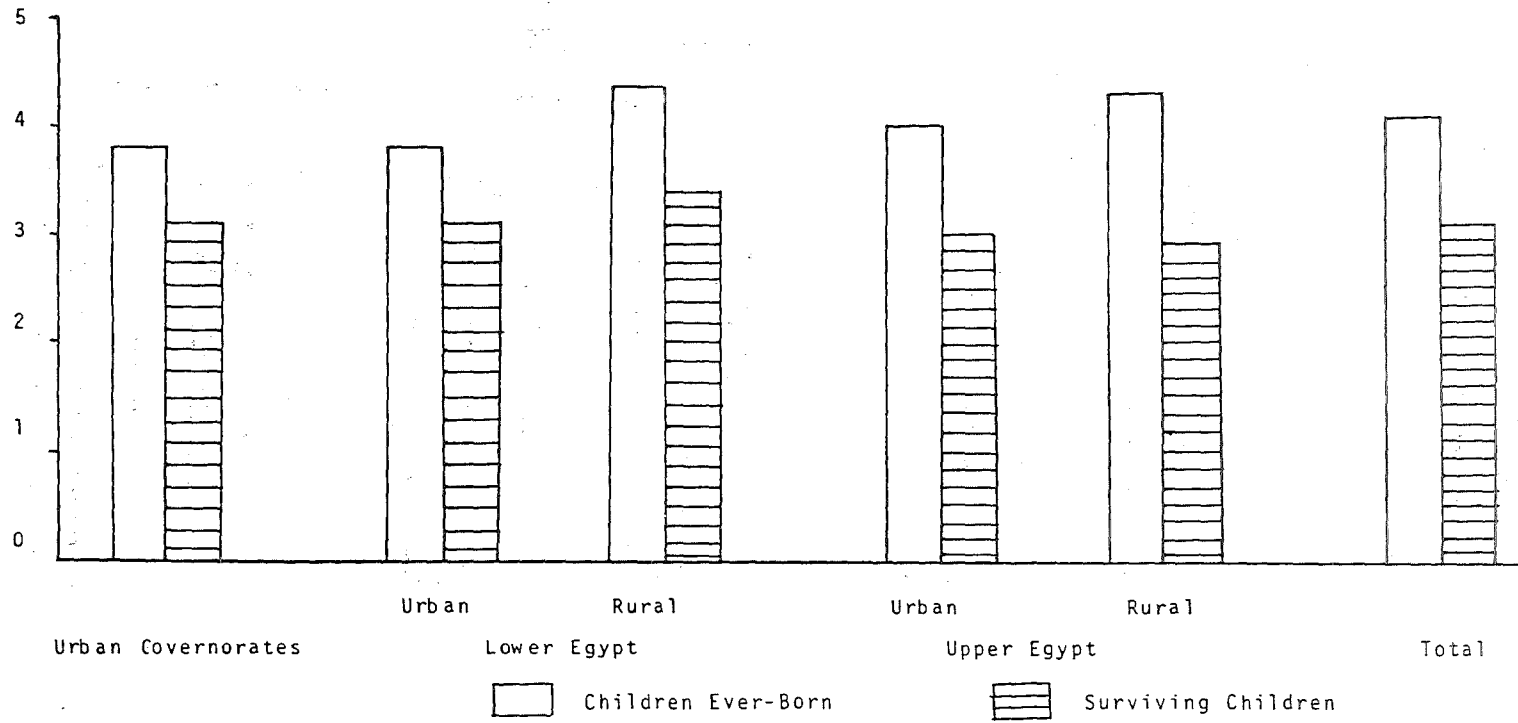
Percentages of Currently Married Women Using Comtraceptives

to Total Currently Married Women.

Egyptian Fertility Survey, 1980

Rural

Urban

Total

☐ Non-Users   ▤ Users

Percentage Distribution of Currently Married Women
Using Contraceptives according to Type of Method.
Egyptian Fertility Survey, 1980

Total

Rural   Urban

Oral Pills   I.U.D.   Other Methods