



Fertility transition in Syria: an inverse case?

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The impacts and challenges of demographic change

Syrian context

Several phases of fertility transition in Syria :

- The first phase of very high fertility records
- The phase of rapid decline in the mid-1980s
- The phase of low decrease or the phase of stalling fertility transition

Few studies have been devoted to the question of Syrian fertility transition

Theoretical background

The demographic transition theory can't explain Syrian fertility transition

- **X** The crisis led transition hypothesis proposed by Courbage in his analysis of fertility transition in Syria (Courbage 1994, 2007).
- H Different factors have been suggested as the cause of stalling fertility transition (stability of contraceptive prevalence, decrease of mean age at first marriage for women, preference for male children...)



This study aims to review the trends and changes in fertility over the period from 1959 to 2010 and identify the factors underlying them.



Estimates of fertility in this study are based on birth registration data for the period 1959-2010.



Sources: Civil registration (Central Bureau of Statistics various years, Statistical Abstracts).

Data

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Table 1: Birth registration coverage in Syria, 1956-2004

Period	Births of Syrians	Births registered at the	Coverage of birth
	observed from censuses	civil registration	registration
1956-1960	1004054	573000	57.07
1966-1970	1336425	923017	69.07
1977-1981	1824613	1632044	89.45
1990-1994	2070008	1993298	96.29
2000-2004	2488125	2330575	93.67

Sources: Author's calculations based on the 1960, 1970, 1981, 1994 and 2004 census, and civil

registration (Central Bureau of Statistics various years, Statistical Abstracts).

Fertility estimates

Adjustment of births

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- Distribution of late registered births
- Births correction taking account of mortality
- **#** Estimate of women aged 15-49 years
- ℜ Estimate of fertility rates

Total fertility rate

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Sources: Author's calculations

Fertility estimates



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Decomposition of fertility changes

The change in the TFR can be decomposed into two components :

1. Changes in nuptiality

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- 2. Changes in marital fertility
- Each of these components is further broken down by five-year age group between 15 and 49.

Decomposition of fertility changes

Table 2: Decomposition of the change in total fertility rate, Syria

Period	Age group									
	15-19	20-24	25-29	30-34	35-39	40-44	45-49	Total		
Between 1980-1985										
and 1985-1990										
Nuptiality	-0.07	-0.11	-0.07	-0.03	-0.01	0.00	0.00	-0.30		
Marital fertility	-0.05	-0.16	-0.15	-0.21	-0.22	-0.14	-0.06	-1.01		
Total	-0.13	-0.27	-0.23	-0.24	-0.23	-0.14	-0.06	-1.31		
	TFR decreased by 1.31 from 8.14 to 6.83									
Between 2000-2005										
and 2005-2010										
Nuptiality	-0.04	-0.05	-0.04	-0.03	-0.01	0.00	0.00	-0.17		
Marital fertility	0.02	0.09	0.10	0.02	-0.04	-0.03	-0.05	0.11		
Total	-0.02	0.04	0.06	-0.01	-0.05	-0.04	-0.05	-0.07		
	TFR decreased by 0.07 from 4.63 to 4.56									

Sources: Author's calculations

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Conclusion

- # A spectacular fertility decline in the second half of the 1980s: the total fertility rate declined by more than 39 % between 1985 and 1994.
- **X** An inversing trend; the fertility rate started to increase since 2007 to reach exactly the same level as the early 2000s.
- # Age-specific fertility rates declined substantially in all age groups during the second half of the 1980s. While during the recent decade, an increase in fertility at younger ages was observed.



- **#** Changes in fertility were mainly attributable to changes in marital fertility during each of the periods examined.
- Hore than 81 % of the decline in fertility was due to the decrease in marital fertility during the period 1985-1995, nuptiality was responsible for only 18.75% of this decline.
- Houring the last decade, the stability of the fertility rate at 4.7 children per women was the result of two countervailing factors trends:
 - A continuing decline in proportion of married women at younger and central ages
 - An increase in marital fertility among women of these ages (reduced contraceptive prevalence, stability of desired number of children, low levels of employment)



Thank you