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**The Demography of Palestinians:
New surveys in the
Palestinian Territories and Jordan**

FAFO-Notat

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Introduction

The present paper is more of a menu than a dish. The results from the surveys I will be talking about are not yet in, so I will describe some of the issues that have been raised in the design and implementation of the surveys. Also a certain amount of politics will be mentioned, since the one survey I will talk about is a demographic survey of the Palestinian territories (DSPT), that is the West Bank and Gaza, and the other is the Jordan Living Conditions Survey (jlcs).

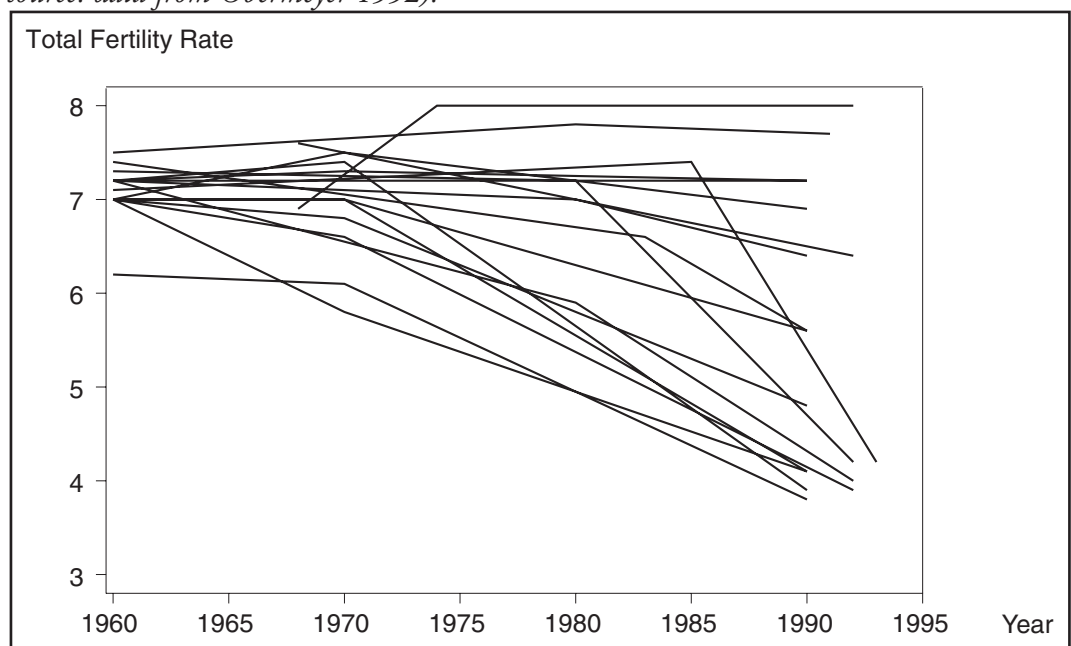
First, however, let me describe some of the demographic characteristics of the Arab Middle East, in which these surveys are embedded.

High Fertility

The most striking characteristic is perhaps that of extremely high fertility, indeed some of the highest total fertility rates in the world are found in the Middle East. The 1991/92 DHS estimate for Yemen of 7.8 is a case in point. But at the same time, a fertility transition is undoubtedly underway in most countries. A few exceptions stand out such as those of Yemen and Saudi Arabia and perhaps also the Palestinian Territories where surveys carried out in 1991 and 1992 suggest a TFR of between 6 and 7 (Abu Libdeh et al 1992, Heiberg and Øvensen 1993). In other countries, recent surveys all show quite substantial declines since the mid-eighties (see Figure 1).

Like all students of a region, I would hold that the region I concentrate on exhibit a particular pattern of fertility decline (Caldwell et al 1992). Caldwell contrasts the Asian and European pattern with the African, by pointing out that the Asian and European pattern was characterized by a low teenage fertility at the onset, because of strong norms against it, and then that the fertility decline took place at for women of increasing age,

Figure 1: Development of the Total Fertility Rate in Arab countries between 1960 and 1992. Sources (ordered from high to low TFR at the last year with data): Gaza (PCBS 1994:87), Yemen (CSO et al 1994), Oman, Saudi Arabia, Libya, Iraq, West Bank (PCBS 1994:87), Jordan (Zou'bi et al 1992), Qatar, UAE, Algeria (Population Council/PAPCHILD 1994), Syria (Population Council/PAPCHILD 1994), Bahrain, Tunisia, Morocco (Population Council/PAPCHILD 1994), Egypt (Courbage 1994), Kuwait, Lebanon. Countries without source: data from Obermeyer 1992).



and that the really large declines were among women nearing the end of their reproductive period. This resulted in an after-transition-pattern with few, closely spaced children comparatively early. The African pattern, on the other hand is characterized by early marriage, high teenage fertility, and long spacing between births. At least some countries, such as Zimbabwe, appears to keep that pattern during transition, so that the decline in age specific fertility rates are fairly even over the whole age span, and so that spacing is kept long.

One might expect that the Middle Eastern fertility decline would follow an Asian/European pattern rather than the African one. Norms against pre-marital sexual activity are strong in the Middle East. In Jordan, the occurrence of murders of a woman by their father or brother because of illicit sexual relations are common enough to be recognized as a social problem. However, some countries, such as Jordan or Egypt, show declines which are fairly evenly spread over the ages, and Yemen shows urban-rural differentials which are similar. One may argue that this is the only way a fertility decline *can* happen in the extremely high fertility Middle-Eastern countries, since the fertility levels at the onset of transition are so much higher than they were in Europe and in many Asian countries.

...but Striking Differences

There are also striking differences between the various Arab countries. Some exhibit the fairly early median age at marriage for women of around 20-21 years. This is the case for Yemen, Jordan, Egypt, Palestine and Oman while women in Bahrain and Qatar have median age at marriage of 24-25 years and in the Mahgreb even higher (Courbage 1994, Heiberg and Øvensen 1992, PCBS 1994).

In the various Arab countries there is a strong association between the education of women and fertility. In Algeria, for instance, women with no education had a TFR of 5.3, while those with primary school had 3.4. Similar levels for Syria (1990-93) was 5.3 and 3.8. These figures are especially interesting if we look at the age distribution of schooling for women by age. In a previous survey of the West Bank and Gaza, FAFO showed that while women of 20-29 years of age had an average 9 years of schooling, those in the 40-49 group had only 2.5 years on the average. In the first group, about 3 percent had no schooling at all, while in the latter the percentage was 15 (Øvensen and Heiberg 1992 and calculations on the dataset).

The data from the West Bank and Gaza illustrates a feature of the Middle Eastern fertility transition and education that is important to keep in mind. Even in societies with high fertility rates (and the West Bank and Gaza are decidedly among those), there is now a new generation of women with much higher education than that of their mothers. In some cases this appears to have started to translate itself into lower fertility, but not all. What appears to be a rule, although this is more of a contention than a fact, is that the effect of increased education among women on fertility comes later than one would expect. In Syria, for instance, although the number of educated women increased 9-fold between 1960 and 1990, nothing appears to have happened to the fertility rates before the mid-eighties (Courbage 1994a (Syria)).

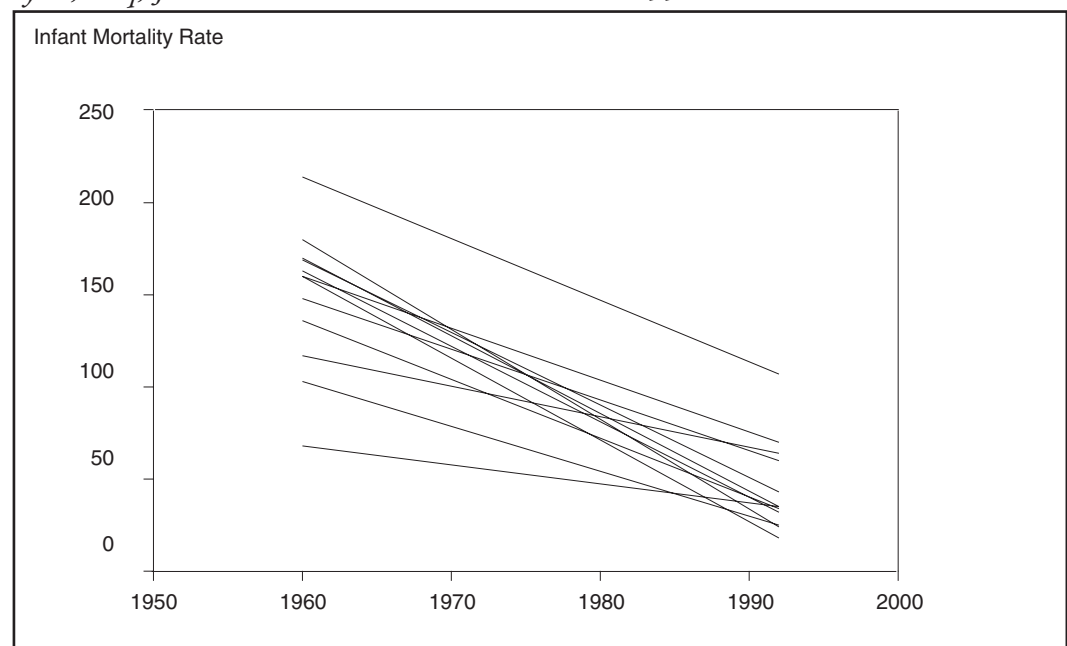
In the West Bank and Gaza, the effect of education on fertility does not appear very visible at the moment. However, one of the issues that the demographic survey will be able to resolve, is precisely this link. However, one should also make the perhaps obvious observation that fertility declines in Arab countries have not been only due to changes in the education of women. Rather, one of the characteristics of the decline in Egypt,

for instance is the fact that there appears to be a general decline, regardless of the subgroup of women (Courbage 1994b).

Also, another set of important factors in the demographic picture in the Middle East are the economic ones of generally low labour force participation of women, the high proportion of the labour force employed in wage labour and the dependence on remittances. These factors are linked. The fact that the economies are basically modern in the sense that agriculture and family farms make out a comparatively small part of the economy, coupled with the fact that wage labour outside the home is the most important, that remittances and other forms of non-labour income are quite important, and the preference (at least among men) that women should stay at home, create a situation of very low female labour force participation. In some circumstances, as in Gaza after the border closure in 1992 between the occupied territories and Israel, it is as low as 7 percent. The women that are members of the labour force appears either to be marginal in the view of the society, such as women heads of households, divorced or separated, or they may be professionals in well paid jobs. This picture may change, as it probably will become more difficult to obtain work that may provide remittances, and also more difficult for a family to sustain itself on the wage labour of only one member. Indeed, the fertility decline in Syria may be linked to the economic hardship in recent years.

It is difficult to discuss the role of women in the context of Middle Eastern demography without referring to the role of Islam. There are basically two positions, namely that the links that I described above must be seen in the context of the generally low status ascribed to women in Islam, and that the analysis is far from complete without going into detail on these aspects. The other position is that the first is basically an Orientalist one, that is one that principally reduces a complex reality to an idealized reversal of western rationality, without considering the diversity of the cultural and societal forms in question (Said 1978). Of course, when all the societies in question are predominantly Muslim and partly have been selected for study because of that characteristic, it becomes poor logic to ascribe their other characteristics as a result of Islam.

Figure 2: Infant mortality decline between 1960 and 1992 in selected Arab countries. From top to bottom in 1960: Yemen, Oman, Saudi Arabia, Egypt, Tunis, UAE, Libya, Algeria, Syria, Iraq, Jordan and Lebanon. Source: UNICEF 1994.



In any case, as Obermeyer (1992) points out, a reading of selected passages of the Koran to substantiate a particular Muslim view on demographic issues, is at best fairly suspect scholarship in view of the range of traditions and views present within the Muslim world.

Low Mortality

Another aspect of the demographic picture of the Middle East is the general decline in infant mortality rates during the last 30 years. Here, the striking feature is the general decline to much lower levels than what has been the case in Africa, even though the starting point in several cases were similar to the African.

Thus, the an important feature of the overall picture that of populations with very low mortality levels compared to their fertility. It has often been pointed out that a difference between the European and the current Third World demographic transition is the size of the gap between the mortality and fertility rates, leading to higher growth rates in the Third World than what was achieved during the European transition. The Middle East appears to represent the extreme of this difference, with the Palestinians perhaps as *the* extreme.

Female Surplus Mortality

A corollary of the general decline in infant and child mortality rates is that the surplus mortality of women also has been substantially reduced since the sixties. It still exists, however, and especially for girls between aged between 2 to 3 weeks and 5 years, according to Tabutin (1991) who bases her analysis on data from Egypt, Morocco and Tunis. Other observers, however, present data that suggest that the problem is only one of the past (Courbage 1995). Data for the occupied territories also suggest a surplus mortality of female children, and especially as regards post-neonatal mortality (PCBS 1994:41).

An issue related to child mortality and morbidity that has started to receive attention from health workers in some countries (e.g. Jordan) is that of consanguineous marriages. In most of the Arab countries the number of consanguineous marriages is quite high, with usually about 30% of the marriages being between first and second cousins and around 20% with other relatives (Courbage 1995). Although the topic is a nightmare to study because of confounding factors, it appears that the offspring of consanguineous unions have both higher mortality and morbidity than other children (Bittles 1994, Boisvert & Mayer 1994). Thus, the presence of such unions appears an important factor in the explanation of the mortality patterns in the Arab world.

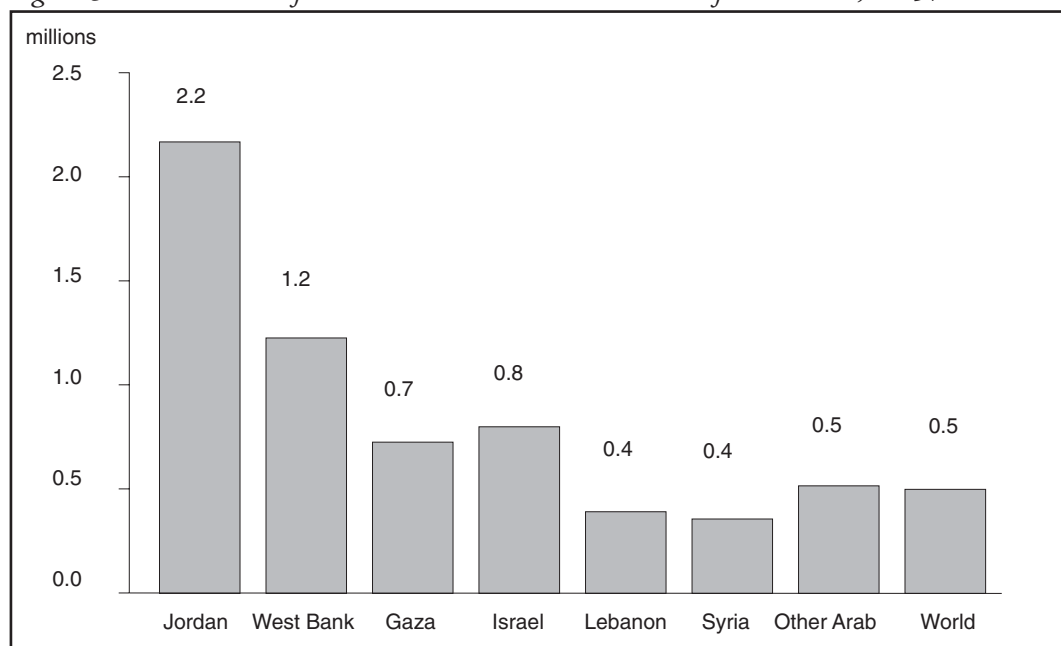
Migration and Refugees

Finally, in this short overview, a point that makes life complicated both for demographers and the people concerned, namely that of refugees and migration. All numbers within this field are mildly put contested, and Figure 3 below should probably be taken only as an approximation. For instance, in making it the US Bureau of the census appears to have accepted the commonly cited figure of 300 000 returnees from the Gulf to Jordan during the Gulf war, a figure that at the very least is wildly inconsistent with UNRWA statistics on refugees in Jordan (Endresen and Øvensen 1994:20) which seems to indicate that only a tenth of that number arrived. The figure of 500 000 for the rest

of the world is mainly an informed guess. The other side of this distribution is the number of relatives of Palestinians in the West Bank and Gaza who reside abroad. According to one study (cited by World Bank 1993), about 45% of the households have one or more relatives living outside the territories.

Palestinians are, of course, not the only ethnic group that have been forced to migrate or migrate voluntarily in the Middle East. The resulting mosaic of peoples raises the question of political fertility, i.e. that people try to get children in order to increase their numerical strength. Israeli discourse and politics on Palestinian demography are certainly influenced by this. For instance, the thinking of Labor politicians who have wanted territorial compromises with the Palestinians has been partly based on the problems which would arise if the comparatively large populations of Gaza and the West Bank should be permanently be included in Israel and be given democratic rights alongside Jews (Tessler 1994:469-472. On the more conservative side of Israeli politics, the minister of communication in the Likud government in 1982 stated “Don’t worry about the demographic density of the Arabs. When I was born in Petah Tikvah, we were entirely surrounded by Arab villages. They have all since disappeared” (cited in Tessler 1994:548). On the other side of the conflict a leading Hamas member and specialist in reproductive medicine, Moustapha al-Faraouné, stated in 1992 that he “. . .helped his people to procreate so that we will not disappear under the flood of Jewish immigration. Palestinians and Israelis, we are engaged in a demographic war that does not know mercy.” (AFP news, cited in Courbage 1994b: 729). Data on the reality of this war as it concerns fertility is hard to come by, and some students discount it. Maswada (1994), holds that there is no indication that political considerations motivate Palestinians in Syria in their fertility choices, and points out that the Palestinian fertility patterns appears to vary considerably.

Figure 3: Distribution of Palestinians. Source: US.Bureau of the Census, nd:57



The New Surveys

It is on this background then, that our surveys in the Palestinian territories and in Jordan take place.

The demographic survey of the Palestinian territories is carried out by the Palestinian Central Bureau of Statistics in cooperation with FAFO. It is financed by the European Commission. It is a large survey, with a target sample size 15 000 households in the West Bank and Gaza. Field work is currently going on and is expected to be finished by the end of this June.

When the survey was designed, many of the concerns discussed above were taken into consideration, although the main aim was to provide basic demographic data that could be used by Palestinian planners, especially on the district level. However, it was also designed in the knowledge that a Demographic and Health Survey would be carried out by Macro International, and therefore questions relating to family planning and health were for the most part dropped. Now we regret that bitterly, because the DHS was shelved a few weeks ago. Nevertheless, the survey will give a fairly complete view of current fertility and mortality, and devotes also a number of questions to migration. At the outset it was planned to devote a fairly large section of the questionnaire to migration, but the ambition had to be reduced. The first version called for a complete migration history for the members of the household. This proved very difficult in the field, and was dropped after the pilot. We also discussed indirect migration measures, but soon came to the conclusion that it was impossible to fulfill the rather stringent assumptions required by these methods in the context of the Palestinian Diaspora. What remains, is basically the whereabouts of relatives abroad, lifetime migration and period migration since 1987. The survey also contains a fair number of background variables, and also aims to establish a simple socio-economic ranking of the respondents.

The Jordan Living Conditions survey is a much more complex survey than the demographic survey. It is a full blown living conditions survey, but rather far from the original Scandinavian model. In particular it differs in that it focuses much more on the relation between the individual and the household, it concentrates much more on household economics and being financed partly by UNICEF it focuses much more on women and children. The other funders are IDRC and the World Bank.

The Jordan Living Conditions Survey was conceived in the context of the Multilateral Working Group for Refugees in the Middle East Peace Process, i.e. as part of the so called Madrid track, but even though the original emphasis was Palestinian refugees the survey has been expanded to cover the whole of the Jordanian population for both technical and political reasons. The technical was that it would be impossible to design a sample frame which only consisted of Palestinians, the political was that a survey focusing on only Palestinians would simply not be accepted by the Jordanians.

The survey is a cooperation between the Jordanian Department of Statistics and FAFO. It is fairly advanced, and at present the survey looks like it will go to the field in August.

Given that the last Demographic and Health survey took place in Jordan in 1990, that plans for a new one has been put on hold, and the focus of UNICEF it was decided to expand the demography and health part of the survey, so that it in many ways resemble a mini-DHS. In order to be able to compare with the DHS many of the same questions from the 1990 survey have been retained. This, in fact, will also to a large extent secure comparability with the Demographic Survey in the Palestinian Territories. Compared to the Demographic Survey, there will be more emphasis on health and family

planning, less on adult mortality, but fairly similar to the DS or a typical DHS on fertility. The questionnaire will also have a section on male fertility and fertility preferences.

In the jlcs, there will be an emphasis on migration, including that of refugees, returnees from the Gulf, internal migrants and others.

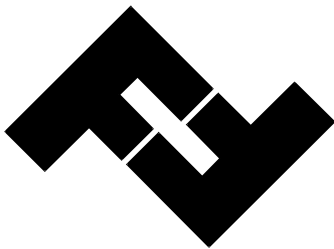
The most exiting feature of the jlcs in the context of demography is perhaps the amount of other variables that can be used to test theories on determinants of demographic variables.

The two surveys are in many ways complementary to each other in that the Demographic survey takes place in a population which does not appear to have started any fertility decline. In Jordan, on the other hand, the decline has started, in a population that culturally is extremely similar if not identical to the Palestinians on the West Bank and Gaza. This raises interesting questions for comparative analysis, and we hope that we will be able to go into some of those, in addition to providing data that are much in demand both in Palestine and in Jordan.

References

- Abu Libdeh, H., C. Smith, K. Nabris and M. Shahin (1992), *Survey of infant and child mortality in the West Bank and Gaza Strip*. Jerusalem: UNICEF.
- Bittles, A. H. (1994), Consanguinity as a demographic variable. *Population and development review* 20(3): 561-584.
- Boisvert, M. and F. M. Mayer (1994), Mortalité infantile et consanguinité dans un population endogame du Québec. *Population* (3): 685-724.
- Caldwell, J. C., I. Orubuloye and P. Caldwell (1992), Fertility decline in Africa: A new type of transition? *Population and Development Review* 18(2): 211-242.
- Central Statistical Organization, PAPCHILD and Macro International (1994), *Yemen Demographic and Maternal and Child Health Survey 1991/1992*. Calverton: CSO and MI.
- Courbage, Y. (1994), Évolution démographique et attitudes politiques en Syrie. *Population* (3): 725-750.
- (1994), La politique démographique en Égypte et son évaluation. *Population* (4-5): 1041-1056.
- (1995), Baisse de la fécondité dans la péninsule Arabique. *Population* (2): 415-446.
- Endresen, L. C. and G. Øvensen (1994), *The potential of UNRWA data for research on Palestinian refugees*. Series FAFO report 176. Oslo: FAFO.
- Heiberg, M. and G. Øvensen (1993), *Palestinian Society*. Oslo: FAFO.
- Maswada, T. A. (1994), *The demographic characteristics of Palestinian refugees in Syria 1949-1992*. Thesis submitted for the degree of Doctor of Philosophy. London: London University.
- Obermeyer, C. M. (1992), Islam, Women and Politics: The Demography of Arab Countries. *Population and Development Review* 18(1): 33-60.
- Palestinian Bureau of Statistics (1994), *Demography of the Palestinian population in the West Bank and Gaza Strip*. Current status report series no 1. Rammallah: PCBS.
- Population Council and Macro International (1994), Morocco 1992: Results from the Demographic and Health Survey. *Studies in Family Planning* 25(1): 59-63.

- Population Council and PAPCHILD, Algeria (1992), Results from the PAPCHILD Survey. *Studies in Family Planning* 25(3): 191-195.
- Population Council and PAPCHILD, Syria (1994), Results from the PAPCHILD Survey. *Studies in Family Planning* 25(4): 248-252.
- Said, E. (1978), *Orientalism*. New York: Pantheon.
- Tabutin, D. (1991), La surmortalité féminine en Afrique du Nord de 1965 à nos jours : aspects descriptifs. *Population* (4): 833-854.
- Tesler, M. (1994), *A history of the Israeli-Palestinian conflict*. Bloomington: Indiana University Press.
- UNICEF (1994), *The state of the world's children 1994*. Oxford: Oxford University Press.
- US Bureau of the Census. n.d. *Palestinian projections for 16 countries/areas of the world 1990-2010*. Washington: US Bureau of the Census, Center for International Research.
- Zou'bi, A. A. A., S. Poedjastoeti and M. Ayad (1992), *Jordan Population and Family Health Survey 1990*. Series DHS. Amman: Department of Statistics.



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