



January 2009

## Fertility at Kersa Demographic Surveillance and Health Research Center field Site.

This briefs the fertility of population in the Surveillance site.

Based on vital event Registration fertility conducted from October 2007- September 30, 2008

### Introduction

Fertility is one of the three principal components of population dynamics that determine the size and structure of the population of a country. Total fertility rates have declined and, at the start of the 21<sup>st</sup> century were at low levels across nearly all countries in the developed world. For the previous 25 years, total fertility rates in most western European countries including Ethiopia have been stable at low levels (below the replacement level). Most developing countries have experienced high total fertility rates. In 2006, the national total fertility rate was 5.4. Among regions of the country, total fertility rate was

highest in Oromiya Regional National State, which was 6.2.

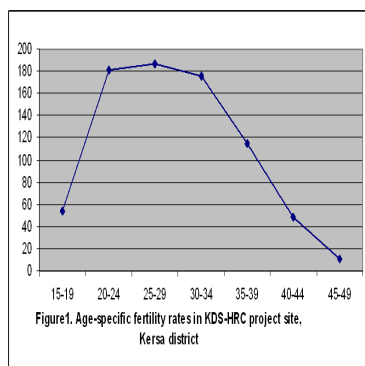
Vital event (fertility) registration has been conducted on all the 12 kebeles of the project site since October 2007. The vital registration is based on fertility information collected from women of childbearing ages (15-49 years) in the field site. There were a total of 1408 live births in the population in one year period.

Table 1. Characteristic of births in Kersa Demographic Surveillance and Health Research Center (KDS-HRC) field site, Kersa District, 2008

Characteristics	No (%)
<b>Sex</b>	
Male	773 (53.6)
Female	670 (46.4)
<b>Status</b>	
Alive	1408 (97.6)
Dead	24
<b>Physical Conditions</b>	
Normal	1424 (98.7)
Not-normal	19 (1.3)
<b>Health conditions</b>	
Healthy	1414 (98)
Not healthy	29 (2)

Majority of women gave birth at home and most of them were attended by traditional birth attendants (TBAs). Mean age of mothers at first delivery and current delivery were 18.7 years (SD=2.9) and 26.9 years (SD=6.3) respectively.

The Crude Birth Rate (CBR) of the population was 28.5 among 1000 population; and General Fertility Rate (GFR) was 126.8 among 1000 reproductive age group women. The Total Fertility rate (TFR) is 3.86 births per woman. Age pattern of fertility in Age-Specific Fertility Rates (ASFRs) indicates that it is peak was 187 births per 1000 among women in the of age 25-29 and declined there after (figure 1). Of the total live births, male to female Ratio is 1.17; 1.0 (117 males to 100 females).



## Policy Recommendations

This fertility registration indicated that there is fertility, total fertility rates (TFR) in the population, though, most of this vital statistics are lower than the national level.

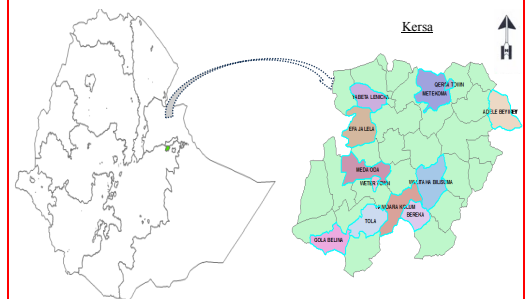
The total fertility rate of the population is lower than the national level. Several reports have indicated that TFR has declined in almost all developed countries and some developing countries including Ethiopia. This may be due to development of socioeconomic status of the countries, expansion of health services, and improvement of health awareness of the population.

Maternal health services including family planning services should be accessible and affordable to the population. Beside these, awareness creation in the population has paramount importance in addressing of the problem.

### Kersa Demographic Surveillance and Health Research Center (KDS-HRC), Haramaya University:

The surveillance site was established in September 2007 in Kersa district, Eastern Hararge of Oromia region, East Ethiopia with aim of tracking demographic changes like death, birth, migration and marital status change. The surveillance activities further extended by adding surveys in Nutrition, Reproductive Health, Environmental Health, HIV/AIDS, Morbidity/health seeking behavior and health care utilization during the month of January-March 2008.

The surveillance activity is instituted in 12 kebeles (the smallest administrative unit in Ethiopia with approximate population Size of 4-5 thousand). Two of the kebeles are semi urban and the remaining 10 are rural kebeles.



According to the first census there were 10,256 households and 53,482 people in the study site with an average household size of 5.2 and sex ratio of 104.5. In the study area the crude birth and death rates were 26.8 and 9.2 per 1000 population. Infant and under five mortality rates were 44.9 and 108.2 per 1000 live births respectively.

The activities of the surveillance are lead by a coordinator and a group of six staff members from the College of Health and Medical Sciences.

