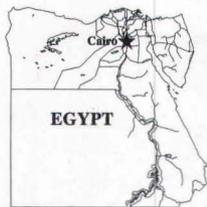


Population Trends Egypt



U.S. Department of Commerce
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- Egypt—even while implementing a successful family planning program—continues to face urgent demographic challenges now and in the future. The government actively promotes family planning; contraceptive prevalence is increasing with almost half of all married women practicing family planning; and fertility is declining. With a current population of 61 million, projected to increase to 92 million by 2020, family planning needs are still large and will grow. Presently, 20 percent of married women do not use family planning despite a desire to limit or space births.
- Egypt's shifting population age structure—its demographic transition from a predominantly young to relatively older

population (figure 1)—will have important implications for economic and social programs, including family planning. The fastest growing age groups include young adults, who are served by the family planning programs and who will be looking for jobs, and the elderly, who require medical and other support programs.

- Also, Egypt's population is concentrated in a very small portion of its overall land area: currently, 97 percent of the population lives on 4 percent of the land. Both land and infrastructure will be strained by further population increases.

Fertility and Mortality

Egypt is one of the few countries in the Near East and North Africa to

report substantial declines in fertility. The total fertility rate (TFR) has declined from 5.5 in 1980 to 3.8 children per woman in 1994.

However, the current TFR of 3.8 children per woman substantially exceeds the replacement rate, ensuring that Egypt's population will continue to grow for many years. Further, this average obscures the great differential among subpopulations: in urban lower Egypt the TFR is less than three while women in rural upper Egypt have, on average, six children (based on 1992 Egyptian Demographic and Health Survey, EDHS). Figure 2 demonstrates the variations in TFR among Egypt's women and shows the generally inverse correlation with contraceptive use.

Egypt, like many developing countries, has experienced a notable reduction in mortality rates. Life expectancy at birth has risen from 39 years in 1952 (Committee on Population and Demography, CPD, 1982) to 61 years in 1994. A decline of over 60 percent in Egypt's infant mortality rate (IMR) was a major contributor to the increase in life expectancy. Immunization of children to prevent childhood diseases is relatively high: according to the 1992 EDHS, 67 percent of all children 12-23 months of age received vaccinations.

As in the case of falling fertility, past progress in infant mortality is impressive but does not eliminate the need to work for further improvements. At the current rate of

Figure 1.
Total Population of Egypt, by Age and Sex: 1994 to 2020

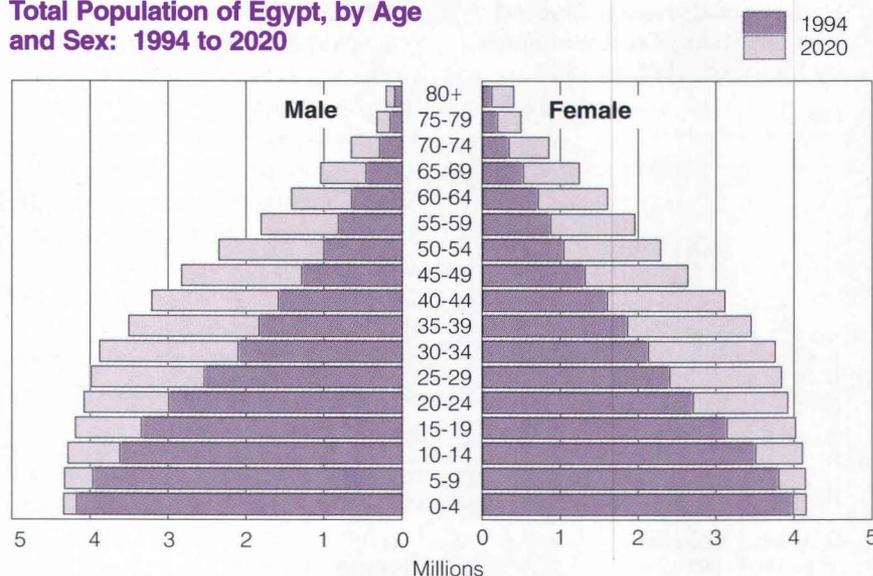
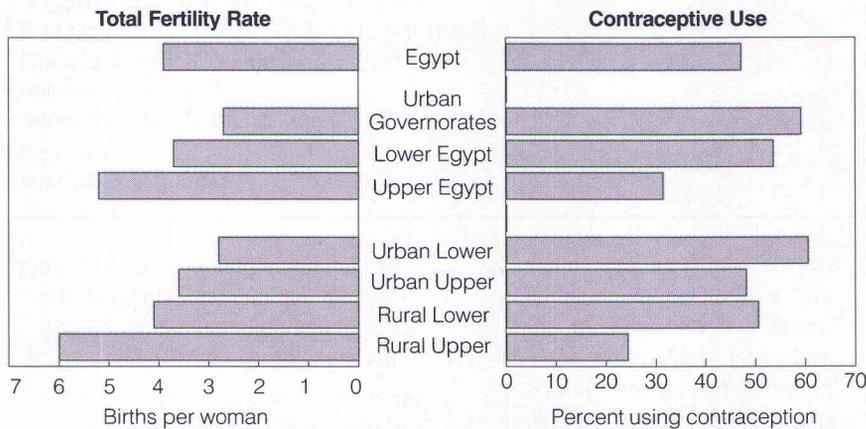


Figure 2.
Total Fertility Rate and Contraceptive Use, by Region: 1992

(Lower Egypt is in the north; upper is in the south.)



76 deaths per 1,000 births, the IMR has not fallen as much as in other North African countries, such as Tunisia (34) and Morocco (50).

Over 60 percent of all births in Egypt can be classified as "high risk" births, i.e., one or more of the following factors are present: births to women under age 18 or over age 34; high birth order (3 or more), and short interval (less than 2 years) between births (Egypt National Population Council and Macro International Inc., ENPC and MII, 1993). Such factors adversely impact infant health and raise mortality rates.

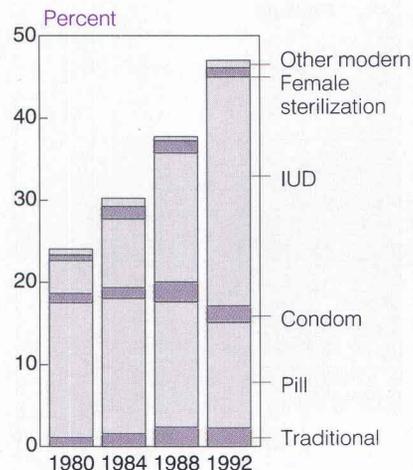
Contraceptive Prevalence

Recognizing rapid population growth as an impediment to development, the Egyptian government began in 1977 to place greater emphasis on improved delivery of family planning services, and in 1985 established a National Population Council to coordinate family planning activities in the nation. These initiatives seem to be paying off. Between 1980 and 1992, the contraceptive prevalence rate nearly doubled, from 24 percent of currently married women using contraceptives in 1980, to 47 percent in 1992 (figure 3; ENPC and MII, 1993). In recent years,

contraceptive use has increased even faster. Between 1988 and 1992, the contraceptive prevalence rate increased by over 9 percentage points, 1.3 million more users in just 4 years.

Almost all users rely on the modern contraceptive methods. Surveys of married women show a dramatic increase in the use of IUD's; in 1992 59 percent (2.6 million women) of those using contraception depended on IUD's, up from 42 percent in 1988. Oral contraceptives were used by another 27 percent, or 1.2 million women, somewhat

Figure 3.
Percent of Currently Married Women Using Contraceptives, by Method: 1980 to 1992



fewer than in 1988. Figure 3 illustrates these trends.

Levels of contraceptive use vary considerably among the regions of the country, with the highest rates in urban areas. However, all regions are experiencing steady increases in contraceptive use:

Share of Married Women Using Contraceptives

(Percent)

	1984	1988	1992
Urban governorates	49.6	56.0	59.1
Lower Egypt	34.1	41.2	53.5
—Urban	47.6	54.5	60.5
—Rural	28.5	35.6	50.5
Upper Egypt	17.3	22.1	31.4
—Urban	36.8	41.5	48.1
—Rural	7.9	11.5	24.3

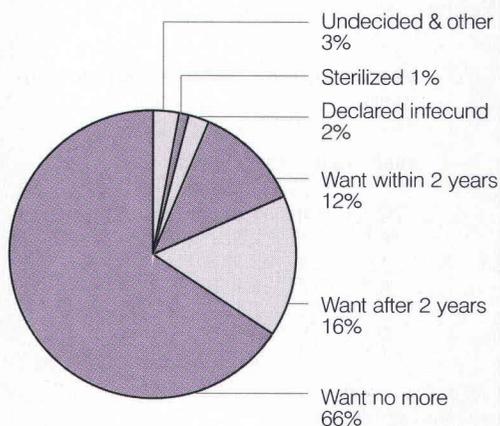
In Egypt, as in other countries, contraceptive use increases with the level of education of women. According to the 1992 EDHS, the largest difference in contraceptive prevalence was between those who had no education (38 percent) and those with some primary education (54 percent).

Although family planning has greatly expanded over the past decade, there remains a substantial unmet need. Eighty-two percent of married women in Egypt indicate they want to limit or space births (figure 4). After taking account of those practicing contraception or not being exposed to the risk of conception, 20 percent of currently married women—about 2 million in Egypt—have an unmet family planning need. Two-thirds of this group (1.3 million women, most of them over age 30) want to limit further births; the others, mostly younger, want to space births (figure 5). Unmet need is highest among rural women and women with no education.

Age Groups

Egypt's population age structure is changing, an inevitable result of falling fertility. The most important changes in Egypt's age structure

Figure 4.
Fertility Preference of Currently Married Women, Ages 15-49: 1992

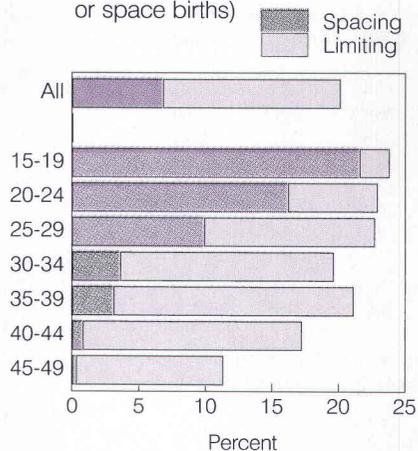


are the falling proportion of children and growing share of working age population: between now and the end of this century the number of children 14 years and under (currently 23 million), will remain virtually unchanged while the population 15-64 years old will increase almost 16 percent (an additional 5.9 million). By 2020, the working age population will increase by another 20 million from 42 million to 62 million.

Egypt's population age structure (see figure 1) represents opportunities and challenges. The declining

Figure 5.
Unmet Need for Family Planning, by Age: 1992

(Share of currently married women wanting to limit or space births)



dependency ratio (ratio of young and old to working age) eases the economic burden of supporting dependent groups. However, the challenge is to provide jobs to the growing labor force. The changing age structure of Egypt's population also presents a challenge to the family planning program. The number of women in childbearing ages (15-49) will increase from 15 million to 25 million by 2020. Thus, even if Egypt maintains the 1992 level of contraceptive use and marriage rates, the number of couples that the family planning program will have to serve increases from 4.8 million in 1994 to 8.2 million in 2020.

Urbanization

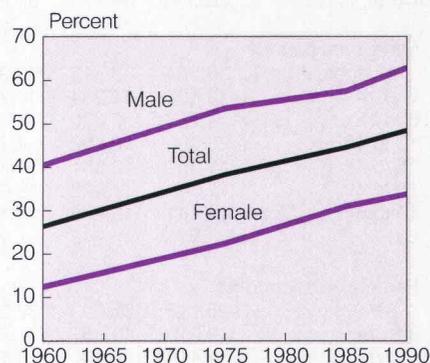
Egypt, like most developing countries, is undergoing rapid urbanization, a process that is expected to continue for several decades. Currently 45 percent (27 million) of the country's population lives in urban areas (UN, 1993). In 2020, 54 million people (almost equal to the total population in 1990) are projected to be living in urban areas. The growth of the country's largest city, Cairo, has dominated the urbanization process in Egypt. Nearly half of the total urban population lives in the agglomeration of Greater Cairo.

Literacy

Level of education, especially among women, is a powerful predictor of level of contraceptive use and fertility in developing populations. The literacy rate of the Egyptian population has improved over the last three decades (figure 6), from 26 percent in 1960 to 48 percent in 1990 (UNESCO, 1991). Yet, it is the second lowest literacy rate, after Yemen, in the Near East and North Africa (NENA) region. Egypt has one of the widest gaps in the

males and females; males, with a literacy rate of 63 percent, are twice as likely to be literate as females whose rate is only 34 percent.

Figure 6.
Literacy of Population Age 15 and Over, by Sex: 1960 to 1990



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IPC collects, assesses, and analyzes population and related statistics from all countries. Based on these data, IPC produces the demographic estimates and projections used in this series of reports. This report, written by Arjun Adlakha and Barry Kostinsky, was prepared with the support of the U.S. Agency for International Development. More detailed information is available from the Chief, International Programs Center, U.S. Bureau of the Census, Washington, DC 20233-8860.

Table 1.
**Population Indicators for Egypt:
1986 to 2020**
(Population in thousands)

Indicator	1986	1990	1994	2000	2020
POPULATION					
Total country . . .	50,974	56,106	61,144	68,437	92,350
Urban	22,378	24,631	27,282	31,755	54,394
Rural	28,596	31,475	33,862	36,682	37,956
Male, total country					
All ages	25,864	28,413	30,921	34,542	46,442
0 to 14	10,495	11,234	11,768	12,310	12,958
6 to 12	4,722	5,020	5,358	5,688	6,046
13 to 18	3,486	3,832	4,124	4,505	5,067
15 to 44	11,361	12,881	14,405	16,585	22,859
15 to 49	12,341	13,972	15,693	18,162	22,691
15 to 64	14,441	16,236	18,161	21,107	31,265
65+	928	943	992	1,126	2,219
Female, total country					
All ages	25,110	27,693	30,223	33,894	45,908
0 to 14	9,919	10,751	11,290	11,753	12,394
6 to 12	4,414	4,836	5,157	5,421	5,784
13 to 18	3,156	3,493	3,927	4,353	4,853
15 to 44	11,159	12,439	13,830	15,941	22,071
15 to 49	12,155	13,552	15,144	17,553	24,703
15 to 64	14,315	15,931	17,770	20,709	30,540
65+	875	1,011	1,163	1,433	2,974
Married females					
15 to 49	8,153	9,134	10,203	11,871	17,491
15 to 19	513	563	633	712	811
20 to 24	1,332	1,459	1,596	1,892	2,310
25 to 29	1,660	1,834	2,009	2,296	3,205
30 to 34	1,532	1,706	1,886	2,156	3,329
35 to 39	1,318	1,495	1,668	1,930	3,089
40 to 44	998	1,183	1,356	1,591	2,633
45 to 49	800	894	1,055	1,294	2,114
DEPENDENCY RATIO					
Both sexes	77.3	74.4	70.2	63.7	49.4
LIFE EXPECTANCY AT BIRTH (years)					
Both sexes	58.2	59.5	60.8	62.7	68.5
Male	56.5	57.7	58.9	60.7	66.1
Female	59.9	61.4	62.8	64.8	71.0
INFANT MORTALITY RATE (per 1,000 births)					
Both sexes	92.1	84.0	76.4	65.7	37.8
Male	94.0	85.9	78.3	67.5	39.6
Female	90.1	82.1	74.5	63.7	35.9
TOTAL FERTILITY RATE (per woman)					
	4.9	4.2	3.8	3.2	2.3

Note: Dependency ratio is the number of persons under age 15 and age 65 and over per 100 persons ages 15 to 64 years.
Source: U.S. Bureau of the Census, International Programs Center, International Data Base.

Table 2.
**Contraceptive Prevalence Among Married
Women Under 50 Years of Age, by Method:
Selected Years**

Method	Percent current users			Percent distribution of users		
	1980	1988	1992	1980	1988	1992
All	24.1	37.8	47.1	100	100	100
Pill	16.5	15.3	12.9	68	40	27
Condom	1.1	2.4	2.0	5	6	4
IUD	4.0	15.7	27.9	17	42	59
Female ster.	0.7	1.5	1.1	3	4	2
Other modern	0.7	0.5	0.9	3	1	2
Traditional	1.1	2.4	2.3	4	6	5
CHILDLESS WOMEN: 1992						
percent of ever-married women aged 45-49 3.4						
AVERAGE DURATION OF POSTPARTUM INFECUNDABILITY: 1992						
Number of months 8.7						

Source: ENPC & MII, 1993, table 5.3, and CAPMAS and WFS, 1983, table 4.4.1.

Table 3.
**Average Age of Users of
Selected Methods: 1992**

Method	Average age
Pill	34.0
Condom	38.4
IUD	33.3
Female ster.	41.3
Traditional	36.1

Note: Average age of user is calculated at the U.S. Bureau of the Census using the 1992 EDHS data on contraceptive prevalence by age.
Source: ENPC & MII, 1993, table 5.2.

Table 4.
**Fertility Rates
(per 1,000 women)**

Age	1980	1988	1992
15-19	104	72	64
20-24	268	220	210
25-29	298	243	224
30-34	227	182	157
35-39	137	118	90
40-44	50	41	43
45-49	17	6	6
Total fertility rate (per woman)	5.5	4.4	4.0

Source: U.S. Bureau of the Census, International Programs Center, International Data Base.