Better Care Network

Jordan DHS 2012:
Children's Care and Living Arrangements

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*This series of country briefs aim to provide an analysis of children's living and care arrangements according to the latest available data from **Demographic and Health Surveys (DHS)** or **Multiple Indicators Cluster Surveys (MICS)** at the time of publication.*

*Better Care Network is working with partner organizations to support more systematic use of existing household level data sets, particularly **Demographic and Health Surveys (DHS)** and **Multiple Indicators Cluster Surveys (MICS)**, to provide a better picture of the patterns and trends relating to children in households and their living and care arrangements. It does not seek at this stage to show how these various arrangements relate to particular outcomes for child well-being, although work is being carried out, to be able to do so as part of the Technical Working Group on Children and Care under the Child Protection Monitoring and Evaluation Reference Group (CP MERG). The content of these papers will evolve as a result, and feedback and suggestions are welcome on the content of the briefs as well as how they can be improved. Communications should be sent to Florence.martin@bettercarenetwork.org*

The briefs are targeted to policy makers, researchers, and practitioners working to inform policy and programs for children's care and protection at country and international levels. In order to enable researchers and policy makers in the countries and regions to conduct further analysis, tables with the data extracted for the purpose of this brief have been included at the end of this report.
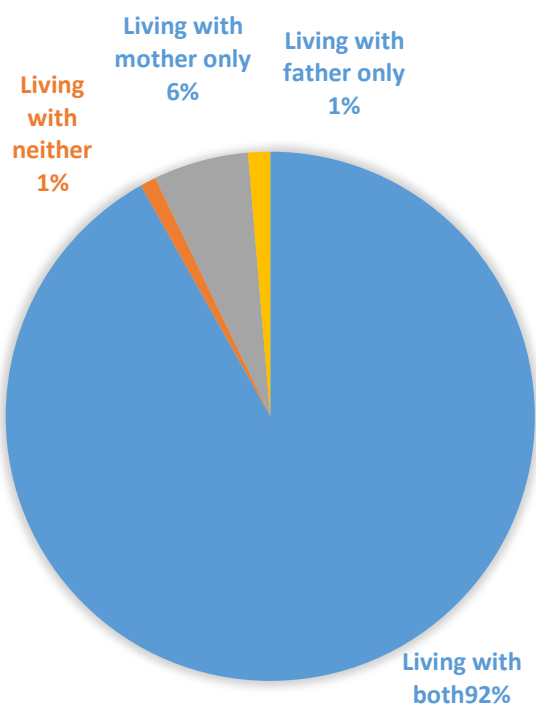
Suggested citation: Better Care Network. (2016). Jordan DHS 2012: Children's Care and Living Arrangements, New York: Better Care Network.

EXECUTIVE SUMMARY:

Children's Living Arrangements:

PERCENT DISTRIBUTION OF LIVING ARRAGEMENTS AMONG CHILDREN 0-17; JORDAN, 2012

Living with mother only 6%

Living with father only 1%

Living with neither 1%

Living with both 92%

- Over 9 out of every 10 children (age 0-17) in Jordan live with both biological parents (92%). Another 6% live with their biological mother only and 1% with only their biological father. Only 1% of children 0-17 in Jordan do not live with either biological parent.

- Slight variations in living arrangement are seen according to age group, rural-urban, and regional background characteristics.

  o In Jordan, as children age more children move out of their parents home while both parents are still living, increasing from 0.3% of children in the youngest age groups living outside of parental care to 2% of children 15-17 living away from both living biological parents.

  o Interestingly, for children 0-17 in Jordan with two living biological parents, the proportion of children living with their mother only declines as children age, with 6.8% of newborns living with their biological mother only and 3.1% of teenagers 15-17 doing the same. Meanwhile, the proportion of children living with their biological father increases as children get older (from 0.1% in the youngest age group to 1.2% in the oldest age cohorts).

  o Wealth quintile is weakly associated with living with neither biological parent. Households in the two wealthiest quintile least frequently house children who are living with neither biological parent than households in the poorest wealth quintiles (0.8% of households in the two richest wealth quintiles compared to 1.3% ad 1.1% in households in the bottom two wealth quintiles nationwide).

- Small regional variations are found in children's living arrangements in Jordan. This is partly driven by urban-rural differences: more children live with both biological parents in rural areas in Jordan (91.5% vs. 93.4%). Nonetheless, the three DHS geographic regions of Jordan see over 90% of all children 0-17 living with both biological parents, ranging from 91.4% in the North of Jordan to 93% in the South.

- In the West Asia regional context, Jordan has the highest rate of children living with both biological parents at 95% for children ages 0-14, and the lowest rates of children living outside of parental care when both parents are alive (0.3%). Additionally, relative to Armenia's (12%) and Azerbaijan's (11%), Jordan's rate of children 0-14 living with only their biological mothers when their fathers are is alive is strikingly low when compared to its regional neighbors.

Parent Survivorship:

PERCENT DISTRIBUTION OF PARENTAL SURVIVAL STATUS ACCORDING TO AGE GROUP OF CHILD, JORDAN 2012
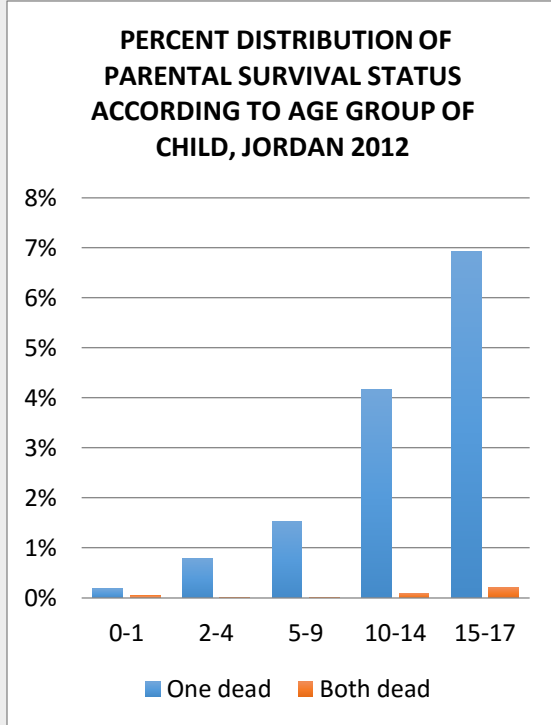
- In Jordan, 0.1% of all children 0-17 experience being orphaned (the loss of both biological parents). However, 2.8% of children have lost one parent by age 18 and 2% of children have lost a mother or a father before reaching 15 years of age.
  - There is a higher percentage of children living in urban areas who have lost one biological parent compared to those living in rural areas.
  - Some regional diversity is seen in the regional distribution of parental death for children under the age of 18 in Jordan ranging from 2.7% of children in the North region of Jordan who have lost a mothe or a father to 3.3% of children in the South who have experienced the same.
- Relative to other DHS West Asia states, Jordan has a lower rate of single and double parent death among West Asian countries. At 2.9% of all children 0-17 experiencing the death of one parent, Jordan has higher rates of neighboring Turkey (1.6%) and Armenia (1.7%) but lower rates than Yemen (5.1%).

Living Arrangements of Children Living with Neither Biological Parent:

- In Jordan, 1% of children age 0-17 live with neither biological parent. Of these, 77% have two living biological parents and another 16% have one. In Jordan, 7% of these children do not have a surviving biological parent. This underlines the reality in Jordan that most children living out of parental care have at least one parent alive (93%).

- The large majority of these children living with neither biological parent - 95% - live in households headed by a relative. In fact only 2% of children 0-17 are reported as living in a household headed by someone other than a relative.
  - In the regional context, Jordan's prevalence of children 0-14 who live in households in which they are related to the household head is comparable to other west Asian countries. In Armenia, 3% of children live outside of family care and, in Azerbaijan, under 1% of children do the same.

- Twice as many boys live outside of family care when compared to gils (2.3% vs 1%) and more children living outside of family care appear to live in households located in rural settings (2.2% vs 1.5%).

- Within Jordan, the Northern region sees the highest number of children living in households with no relatives at 4.3%. In this region only 91% of children live in related care – markedly lower than the 98% found in the Central region and 96% found in the Southern region. Nonetheless, caution must be employed in analyzing these results due to sample size limitations in these subgroups and a substantial number of children missing information about parental survival status.

"The family being the fundamental group of society and the natural environment for the growth, well-being and protection of children, efforts should primarily be directed to enabling the child to remain in or return to the care of his/her parents, or when appropriate, other close family members."

– The Guidelines for the Alternative Care of Children (2009) II.A.3

Over the last 30 years there has been a growing understanding of the critical importance of the family and a family environment for children in terms of their development and well-being. This realization is at the core of the *United Nations Convention on the Rights of the Child* adopted in 1989, and more recently, of the *Guidelines for the Alternative Care of Children* welcomed by the United Nations General Assembly in 2009.[1]

A major body of empirical research in psychology, neuroscience, social work, and other disciplines has demonstrated the importance of investing in children's early years to support this critical period of child development.[2] Findings about the negative impact of emotional deprivation and institutionalization for younger children have further reinforced the critical importance of parental care and a family environment.[3] As a result, reforms of child protection and alternative care systems for children deprived of parental care, or at risk of being so, have been ongoing in virtually all regions of the world, with a particular focus on moving away from the use of residential care and strengthening the capacity of parents and families to care for their children.[4]

These reforms have also been informed by research that has shown that the vast majority of children in residential care are not placed there because care is genuinely needed or that they are without parental or family care, but rather because their families are facing a range of challenges in their capacity to care, including poverty, lack of access to social services, discrimination and social exclusion, as well as a result of personal or social crises and emergencies.[5] As a result, governments and other stakeholders in these reform processes have recognized that a major focus of this shift away from the use of residential care for children is not simply about reducing the numbers of institutions and removing children from there, but also about establishing better preventive and family support services to reduce child-family separation and stop children going into alternative care in the first place.

Understanding better the situation of children in 'care vulnerable situations', including those outside of parental care, has become crucial not only for HIV prevalent countries but for all countries seeking to strengthen their responses and systems for children facing a range of care and protection risks. A

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[1] UN General Assembly, Guidelines for the Alternative Care of Children: resolution adopted by the General Assembly, 24 February 2010, (A/RES/64/142). Available at: http://www.bettercarenetwork.org/docs/Guidelines-English.pdf

[2] National Research Council and Institute of Medicine (2000) *From Neurons to Neighborhoods: The Science of Early Childhood Development.* Committee on Integrating the Science of Early Childhood Development. Jack P. Shonkoff and Deborah A. Phillips, eds. Board on Children, Youth, and Families, Commission on Behavioral and Social Sciences and Education. Washington, D.C.: National Academy Press.

[3] For a review of the evidence, see for example Williamson, J, & Greenberg, A. (2010). Families, not orphanages. (Better Care Network, working paper). Retrieved from http://www.bettercarenetwork.org/docs/Families%20Not%20Orphanages.pdf; Browne, K. (2009). The Risk of Harm to Young Children in Institutional Care. Better Care Network and Save the Children Working Paper). Retrieved from http://www.bettercarenetwork.org/docs/The_Risk_of_Harm.pdf; Csaky (2009) Keeping Children Out of harmful institutions, Save the Children UK. Retrieved from http://www.bettercarenetwork.org/BCN/details.asp?id=21471&themeID=1003&topicID=1023

[4] For documentation of these reforms, go to Better Care Network online Library of Documents at: www.bettercarenetwork.org

[5] Williamson, J, & Greenberg, A. (2010). Families, not orphanages. (Better Care Network, working paper). Retrieved from http://www.bettercarenetwork.org/BCN/details.asp?id=23328&themeID=1003&topicID=1023.

number of organizations and initiatives have drawn attention to the need for more systematic data on children's care situations, including family arrangements, parental status, care practices, and their impact on child well-being.

National household surveys provide critical data to monitor population-level patterns and trends in relation to key socio-demographic indicators at national and sub-national levels that can also be used to draw important comparisons between countries at both regional and international levels. These surveys provide particularly rich data sets through which changing household compositions and living arrangements, fertility and marriage, health and nutrition, literacy and access to education, poverty and deprivation, and other key indicators of child and family well-being are being gathered on a five yearly basis for a nationally representative sample of households. Initial analysis of this data for a small number of countries has shown how critical this data can be to understand the care situations of these children but also to highlight potential indicators of vulnerability associated with different care and living arrangements. [6]

Demographic and Health Surveys (DHS) have been conducted in middle to low income countries by national statistical agencies with support from USAID since the mid-1980s in over 90 countries. The DHS has now entered its Phase 7 (2013-2018). The survey includes 3 main questionnaires (Household, woman and man's questionnaires) and provides nationally representative data on health and population, including fertility, maternal and child survival, immunization, water and sanitation, education, living arrangements among others. In addition, the DHS has included questionnaire modules on a range of topics such as domestic violence, Female Genital Mutilation, Fistula, out of pocket expenditures.

Multiple Indicators Cluster Surveys (MICS) have been conducted with support from UNICEF since the mid-1990s in more than 100 countries, tracking progress and trends on more than 20 indictors relating to the Millennium Development Goals (MDGs) and other major international commitments relevant to the situation of women and children. MICS has entered in its fifth phase, MICS 5 (2012-2014). The survey includes a household questionnaire, a questionnaire for women 15-49 years of age with or without birth history, a questionnaire on children under 5 years of age administered to the mothers or caretaker of these children and a questionnaire for men 15-49 years of age. The questionnaires cover a wide range of issues, including education, child labor, child discipline, water and sanitation, maternal and new born health, marriage and union, FGM, birth registration, early childhood development, breastfeeding, sexual behavior, fertility and Tobacco and alcohol use among others.

Both DHS and MICs have also increasingly gathered data on attitudes and beliefs on some critical social issues such as child care practices, attitudes towards HIV AIDS, domestic violence and child discipline.

Better Care Network is working with partner organizations to support more systematic use of existing household level data sets, particularly DHS and MICS data, to provide a better picture of the patterns and trends relating to children in households and their living and care arrangements. In collaboration with members of the Child Protection Monitoring, Evaluation Reference Group (CP MERG) and its Technical Working Group on Children Without Adequate Care, and with support from Save the Children,

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[6] See for examples, Family for Every Child and INTRAC (2012) Context for Children and Policy situation paper, Roby (2011) Children in Informal Alternative Care, UNICEF; Child Frontiers (2012) Family support services and alternative care in Sub-Saharan Africa: Background paper; Better Care Network (2013) Analysis of DHS data (Ghana, Liberia, Rwanda, Jordan, Sierra Leone); Save the Children (2013). Save the Children Research Initiative: Understanding and Improving Informal Alternative Care Mechanisms to increase the care and protection of children, with a focus on Kinship care in West Central Africa.

it is developing a series of country briefs using the latest available data set from DHS or MICS for the country and presenting the data and analysis of the trends, when data is available, regarding children's living arrangements and care situations. It does not seek at this stage to show how these various arrangements relate to particular outcomes for child well-being, although work is being carried out to be able to do so and the content of these papers will evolve as a result. The brief is targeted to policy makers, researchers, and practitioners working to inform policy and programs for children's care and protection at country and international levels.

The DHS and MICS core questionnaires contain a number of questions in relation to children's living arrangements, survivorship of parents, and relationship to the head of the household. This data in some countries is collected for all children under 15 years of age in a household and in others for children under 18 years of age. The data on survival status of parents is collected under the HIV AIDS section of the questionnaire and whilst it is collected systematically in countries with high HIV prevalence, other countries do not always collect it. This data is key to understanding the extent of parental loss (single/double orphans) but also the extent to which parental loss is a significant factor in children's living arrangement as well as a number of outcome indicators.

A core question asked by all DHS/MICS questionnaires relates to the relationship between children in a particular household to the head of the household. Although there are slight variations in the range of possible relationships provided, there is general consistency as far as the key categories are concerned (grandchild, niece and nephews, foster child, unrelated, for example). This data is systematically collected but rarely extracted and analyzed in the national reports, despite its clear relevance to children's care situations. Although that data is not a perfect proxy indicator for caregiving arrangements, as it does not provide actual information as to who the legal or de facto caregiver for a particular child is in that household, it is nonetheless a clear indicator of whether a child is living within or outside of family care. This information is key to understanding the extent and patterns of informal alternative care, particularly kinship care, in a given country and this, in turn is critical to inform policies seeking to strengthen parental care, prevent harmful separation but also support adequate family care and family based alternative care.

The DHS and MICS data has huge potential to inform child protection policy and programming, however currently this potential is not being realized. A key barrier is that in most cases the data that would be useful, such as on children's care and different living arrangements, is not extracted and presented in national reports. Furthermore, awareness of this potentially useful DHS and MICS data amongst child protection practitioners is very low. Given the scarcity of national monitoring data on child protection issues in many contexts, it is important that the sector explores the potential of the DHS and MICS data and also is better informed of what it could offer and how it could be used to support better policies and interventions targeting at risk children and families. It is hoped that these country briefs can contribute to this.

JORDAN 2012 DHS:

The data presented in this report come from the 2012 Jordan Population and Family Health Survey (DHS) that was carried out by the Department of Statistics (DoS).[7] MEASURE DHS is a USAID-funded project that provides technical support in the implementation country-wide surveys across the world. Funding for this effort came primarily from the government of Jordan, with additional funding from the United States Agency for International Development (USAID), the United Nations Population Fund (UNFPA), and the United Nations Children's Fund (UNICEF).

The primary objective for this data collection effort is to provide country-wide information on demographic characteristics, health conditions and behaviors, and indicators around mortality. The child well-being indicators reported here come from the DHS Household Questionnaire. This questionnaire is used to list all individuals who spent the previous night in a selected household. It collects basic information of each member listed: name, sex, age, education, relationship to head of the household, and disability status. Additionally, for children under the age of 18 survival status of parents is also recorded.

During the 2012 Jordan DHS data collection effort, a total of 15,190 households were interviewed and 76,302 household members were listed. Of these, 22,903 individuals were under the age of 18 and 17,505 children were under the age of 15. The household questionnaire retained a response rate of 96.6%. All figures reported here have accounted for sample weights, none are unweighted. No exclusion criteria has been applied – the data presented below represent the entire sample of individuals present in the dataset. As a result, the numbers below are slightly larger than the figures reported in the 2012 Jordan DHS country report. Data were analyzed using the statistical software package SAS 9.4. To measure statistically significant levels of association chi-squared tests and t-tests were run using a 5% alpha level.

To understand Jordan in its regional context and compare across other eastern African states, data was pulled from nationally representative Demographic and Health Surveys (DHS) that were most recently run in these neighboring countries. The West Asia Region is defined by the DHS as including the following countries: Armenia[8], Azerbaijan[9], Georgia, Jordan[7], Turkey[10], and Yemen[11]. Given that many of these countries collected data for the 0-15 age range until recently, for cross-country comparisons under 15 age groups will be used. All DHS survey conducted in Jordan are also represented in this report to look at any significant changes that have occurred within country over the last two decades. Lastly, all country level development statistics were pulled from the Human Development Report 2014[12].

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[7] Department of Statistics [Jordan] and ICF International. 2013. Jordan Population and Family Health Survey 2012. Calverton, Maryland, USA: Department of Statistics and ICF International.

[8] National Statistical Service [Armenia], Ministry of Health [Armenia], and ICF International. 2012. Armenia Demographic and Health Survey 2010. Calverton, Maryland: National Statistical Service, Ministry of Health, and ICF International.

[9] State Statistical Committee (SSC) [Azerbaijan] and Macro International Inc. 2008. Azerbaijan Demographic and Health Survey 2006. Calverton, Maryland, USA: State Statistical Committee and Macro International Inc

[10] Hacettepe University Institute of Population Studies, Turkey Demographic and Health Survey, 2003. Hacettepe University Institute of Population Studies, Ministry of Health General Directorate of Mother and Child Health and Family Planning, State Planning Organization and European Union. Ankara, Turkey

[11] Ministry of Public Health and Population (MOPHP), Central Statistical Organization (CSO) [Yemen], Pan Arab Program for Family Health (PAPFAM), and ICF International. 2015. Yemen National Health and Demographic Survey 2013. Rockville, Maryland, USA: MOPHP, CSO, PAPFAM, and ICF International.

[12] United Nations Development Program 2014. *Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience*. Human Development Report 2014. Tokyo.

BASIC STATISTICS: [13] [14]

Country
- Total population: 7,270,000
- Gross Domestic Product per capita: $11.340
- Human Development Index: .745 (Rank – 77)
- Population living below $1.25 a day: 0.12%
- Life expectancy at birth: 73.85 years
- Median age: 23.98 years
- Urban vs. rural distribution: 83% of the population is urban, 17% rural
- Sex ratio at birth (male to female): 1.05
- Under-5 MR: 19 per 1,000 live births.
- Maternal MR: 63 per 100,000 live births
- Birth registration of children (% under age 5): 99.1%
- Unemployment rate: 12.2%
- Child labor (age 5-14): 1.9%
- Adult literacy rate (15+years): 95.9%

Households
- Mean household composition: 5.1 members
  - 7% of households in Jordan have 9 or more persons.
- 36% of the population is under age 15
- Female headed households: 13%
- Urban - rural distribution: 71% of interviewed households were urban; 29% rural

Fertility
- Total Fertility Rate: 3.5 children
  - Fertility decline has stalled with a mere 5% decline between 2002 and 2012.
- Women in rural areas have nearly the same number of children as women in urban areas (3.9 vs. 3.4).

- Adolescent fertility: 26 births per 1,000 girls age 15-19.
  - 5% percent of women age 15-19 are already mothers or currently pregnant with their first child.
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  - Only 6.2% of all Jordanian women age 25-49 report having given birth prior to age 18, but more than three times that percentage of all women (19.1%) have given birth by age 20.
  - 32% of births occur within 24 months of a previous birth.

Marriage:
- Median age at first marriage: 22.4 years for women
- Early marriage: 15% of women are married by age 18, 33% by age 20.
  - In Jordan, 18 is the legal age to marry for both men and women. It appears that the percent of women married by 18 is declining overall.
  - The proportion of women married by 15 has declined over the last decades from 2.7% among women currently 40-44 to 0.3% among girls 20-24.
- Five percent of married women are in polygynous unions, with older women more likely to be in these unions than younger women.
- In Jordan, 35% of ever married women 15-49 report being in a kinship marriage, one in which they are related to their current husband or first husband.
  - The proportion or marriages between first cousins on the father's side is higher than on the mother's side (13% vs 9%). Data indicate that another 1% were dual first cousins (both on the father's and mother's side).
  - Kinship marriages are more common among rural women (40%) than among women living in urban households (34%).

13 Department of Statistics [Jordan] and ICF International. 2013. Jordan Population and Family Health Survey 2012. Calverton, Maryland, USA: Department of Statistics and ICF International.

14 United Nations Development Program 2014. *Sustaining Human Progress: Reducing Vulnerabilities and Building Resilience*. Human Development Report 2014. Tokyo.
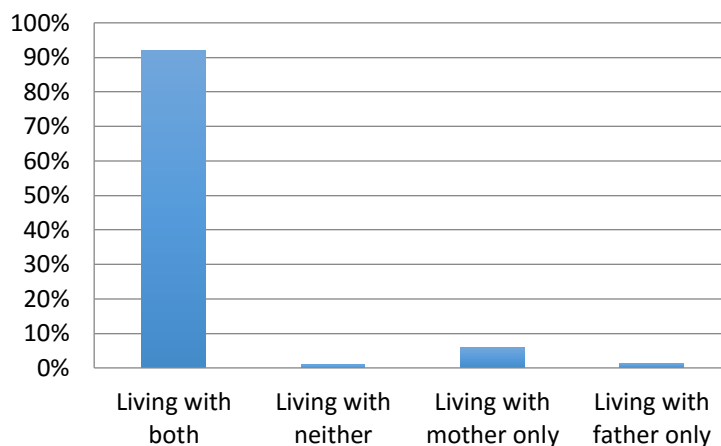
CHILDREN'S LIVING ARRANGEMENTS:

In Jordan, 92% of children under the age of 18 live in households with both biological parents. They represent the overwhelming majority of children living in households in the country. Another 7% of children 0-17 live with one biological parent, with nearly four times as many children living with their biological mothers than with their biological fathers. Only 1% of children live with neither biological parent in Jordan.

When disaggregated by background characteristics, factors such as age and geographic region appear to significantly influence living arrangements among children in Jordan. However, gender does not appear to play a strong role in living arrangements among in Jordan, with approximately equal distributions of girls and boys living with both biological parent, a single mother or father, or neither biological parent.

FIGURE 1: PERCENT DISTRIBUTION OF LIVING ARRANGEMENTS AMONG CHILDREN 0-17 IN JORDAN, 2012

Variations in living arrangements across age groups are evident in Jordan. At an early age nearly all children still live with their biological mother (+99%) of which 93% live with both biological parents and 7% of children live with only their biological mother. As children get older the proportion of children living with their biological mother only stays fairly constant, while more begin to live with only their biological father. While the number of children living with both biological parents does not change dramatically as children age in Jordan, for the oldest age group, the proportion living with both biological parents drops to a low of 87%. Part of these slight shifts can be explained by the death of a biological parent. Since more children experience the loss of a parent as they get older, the proportion of children living with their only surviving parent increases with age – only 0.2% of children in the youngest age group live with only their mother after having lost their father while 5.2% of children 15-17 do the same. A similar but less pronounced trend is seen for children living with only their biological father after their mother has passed reaching a high of 1.4% for children in the oldest age group. Conversely, among children living with a single biological parent when their other parent is still living, the proportion living with their mother decreases with age while the proportion who live only with their father increases during this same time. More research is needed to understand why this decreasing trend occurs.

Simultaneously, the likelihood that a child will live with neither biological parent increases with age. While 0.4% of children under 2 live with neither biological parent, 0.6% of children age 10-14 and 2.5% of children age 15-17 do not live with either their mother or their father (as seen in Figure 2).

Children in rural regions of Jordan more commonly live with both biological parents when compared to children living in urban households (93.4% vs. 91.5%). During the 2012 DHS data collection Jordan was subdivided into 3 administrative provinces made up of 12 governorates: Central, North, and South. The capital Amman is located in the Central region. Regional data is presented here to understand the regional diversity found within the country. As Figure 3 shows, children in the South (93%) are the most likely to live with both biological parents followed by the Central and North regions respectively. Nonetheless, all regions see a near-equal proportion of children living with neither biological parent at 1%. Jordan is primarily urban with 87% of its population residing in city centers as of the 2012. Jordan has seen rapid urban growth through rural-urban migration and increased international immigration fueled in part by the crises in Iraq and Syria.

Household wealth quintile appears to be positively associated with

FIGURE 2: PERCENT DISTRIBUTION OF CHILDREN LIVING WITH AT LEAST ONE BIOLOGICAL PARENT VS NEITHER BIOLOGICAL PARENT AMONG CHILDREN 0-17 IN JORDAN, ACCORDING TO AGE GROUP

- Living with at least one biological parent
- Living with neither biological parent
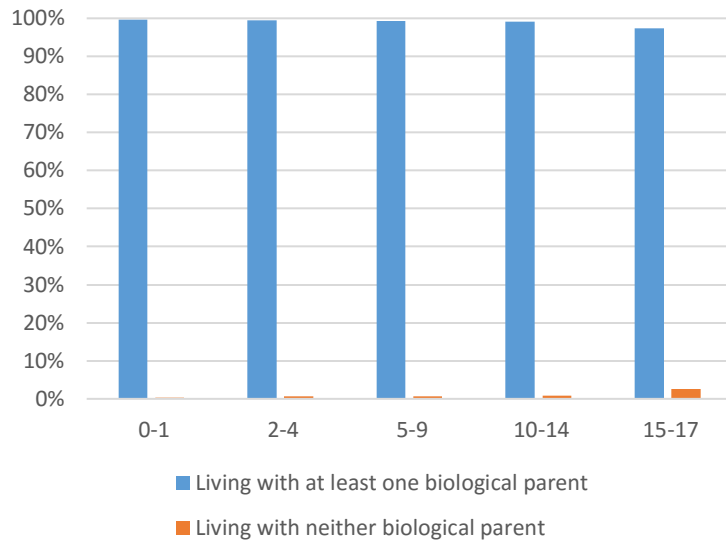
FIGURE 3: PERCENT OF CHILDREN 0-17 LIVING WITH BOTH BIOLOGICAL PARENTS BY REGION

likelihood of children living with both biological parent. This may be due to richer households wielding more resources to care for their own children. While 89% of children in the poorest household live with both biological parent, an incremental increase is seen for every wealth quintile reaching 94% for those living in the second most wealth "richer" quintile. Interestingly, for children living in households in the wealthiest quintile – "richest" – the proportion of children living with both biological parent drops back down to under 92%. This may be due to the wealthiest households having available resources to pursue better educational opportunities away from the family. For children living with neither biological parent,

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fewer children are found in wealthier quintiles than in households positioned in poorer quintiles. While 1.1% and 1.3% of children found in households residing in the two poorest quintiles are living without their mother or their father, in the two richest quintiles 0.8% of children are living with neither parent. This association with wealth is likely colinear with rural-urban and regional characteristics. In Jordan, wealth is concentrated in urban centers and poverty is more acute in rural areas. The 2012 Jordan DHS reported that 45% of urban households fell into the top two wealth quintiles while 57% of rural households fell into the bottom two wealth quintiles.

When it comes to children living with at least one biological parent, little regional variation is seen across the three geographic blocks of Jordan. The South has a marginally smaller percentage of children living with a single biological parent (6%) compared to the other two regions (7%). That being said the North has the highest rates of children living with a single biological parent when the other is still living, with 1% living with their father only and another 4% living with their mother only, nearly double what is found in the South region. The South, on the other hand, has the highest percentage of children living with only their mother who have lost a biological father at 3% as seen in Figure 4.

FIGURE 4: REGIONAL VARIATIONS IN LIVING ARRANGEMENTS AMONG CHILDREN 0-17 LIVING WITH A SINGLE BIOLOGICAL PARENT IN JORDAN
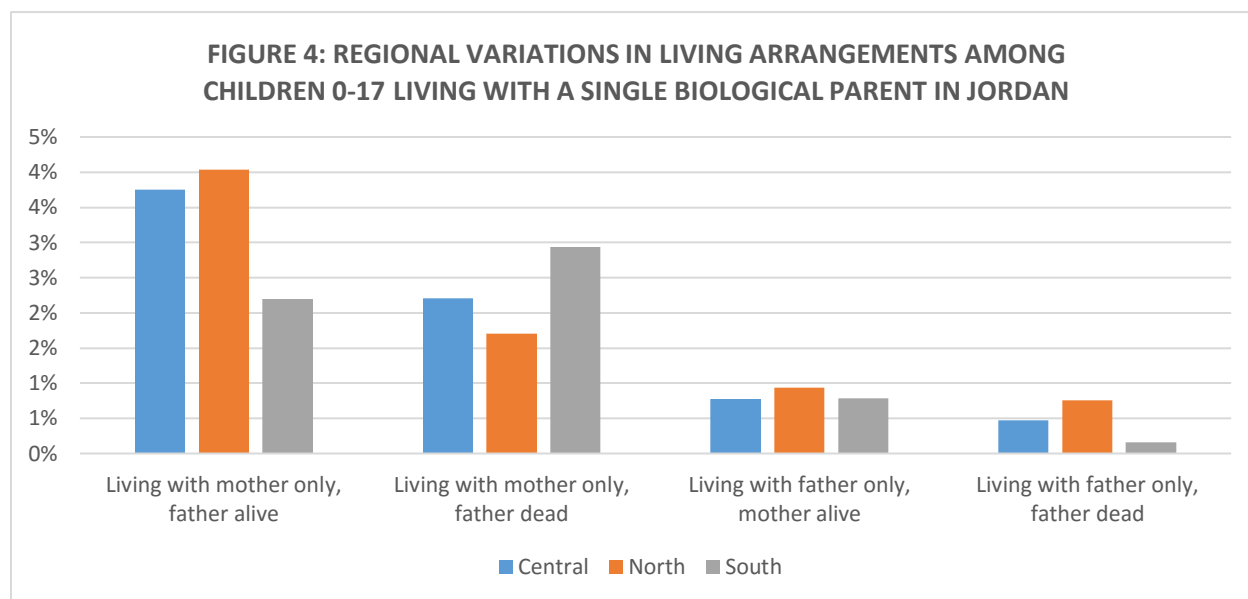
Regionally, Jordan sits in the middle of Western Asia countries when it comes to children's living arrangements. Of the four countries with complete data in the region, Jordan ranks first in the highest percentage of children living with both biological parents at 92%, and fourth in percentage of children living with one biological parent (6.1%) or neither biological parent (0.8%) in the region among children 0-17. Nonetheless, this should be interpreted with caution given that most of Jordan's bordering neighbors do not have available DHS data on children's living arrangements.

DEATH OF A PARENT (SINGLE AND DOUBLE "ORPHANHOOD"):

In Jordan, orphanhood is very rare, experienced only by 0.1% of all children 0-17. As can be expected, loss of a single parent is more frequent – 2% of children lose one parent before the age of 15 and 2.8% of children lose a mother or a father by age 18. Parental loss is positively associated with age: almost all children living in households (+99%) under the age of two have two living parents, while 6.9% of children age 15-17 have lost one biological parent and 0.2% have lost both as seen in Figure 6. In the last two decades the overall rate of parental death (single and double parent death combined) has remained steady in Jordan.
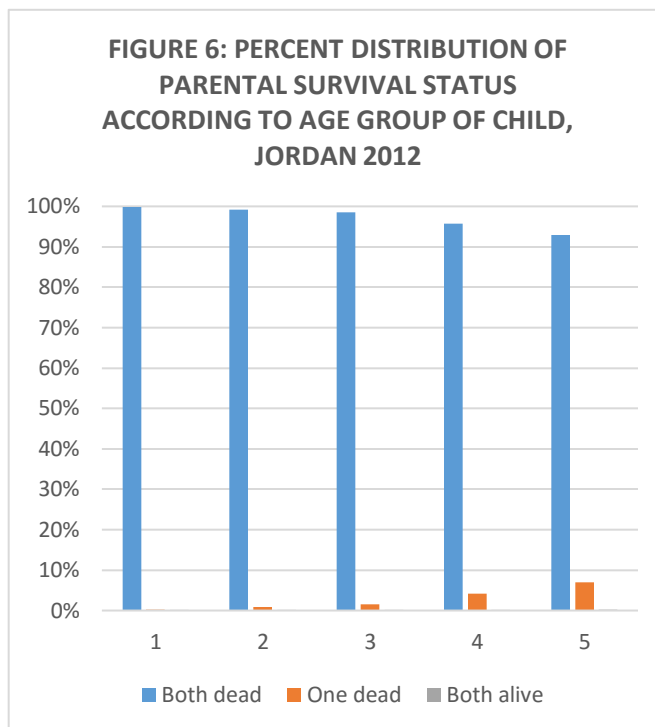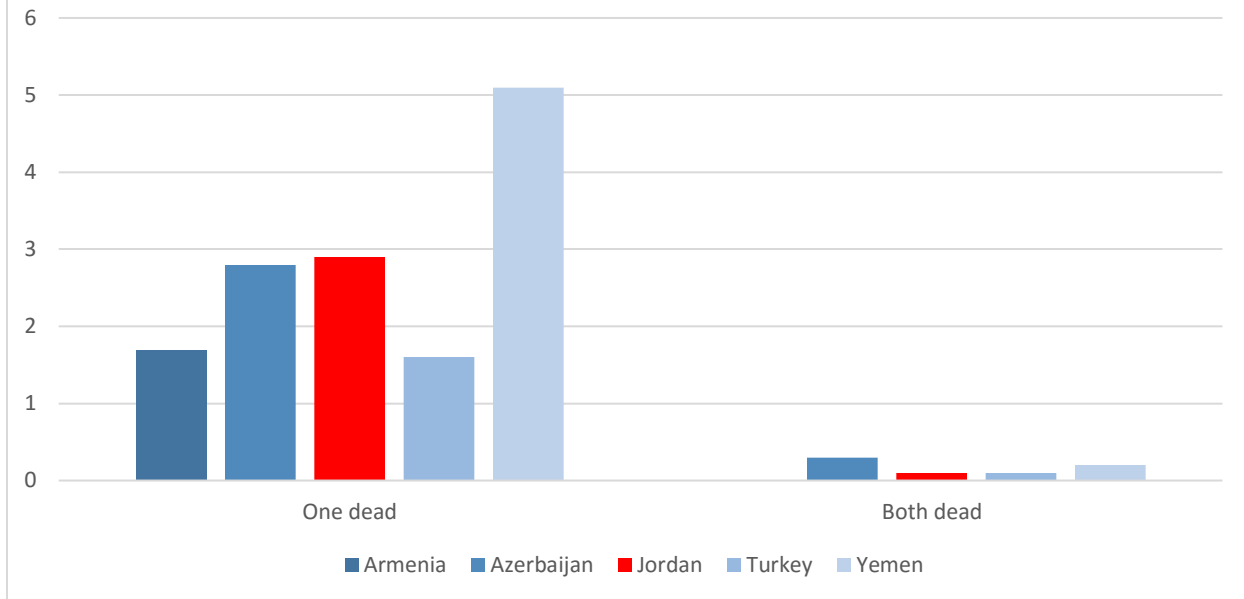
Wealth quintile of the household appears to be weakly associated with the likelihood of losing a parent for children in Jordan. Children living in the poorest two quintiles experience the highest rates of single parent death at 4.5% and 3.1% respectively. Approximately 2% of children in the middle quintile and above experience the death of a parent. While orphaning is extremely uncommon in Jordan, children in the poorest two quintiles also experience this slightly more frequently than do children in the middle wealth bracket and above. This may indicate poorer health outcomes for households situated in the less affluent wealth quintiles.

A slightly higher percentage of children who have experienced the death of a biological parent were living in urban areas in Jordan than in rural areas in 2012: 2.9% of children in urban areas had one parent die before they turned 18 compared to 2.5% of children living in rural areas. Rural-urban differences did not seem to play a role in orphaning. When disaggregated by administrative region in Jordan, the South region housed the highest proportion of children who had lost a biological parent at 3.3%.

Regionally, Jordan ranks in the middle of the West Asia states with available data for most single parent loss at 2.9% among children 0-17. While Armenia, Azerbaijan, and Turkey have lower rates of single parent death, Yemen sees 5.1% of children 0-17 experiencing the loss of a mother or a father. When it comes to orphanhood, the states with available DHS data have low rates of double parent death. The highest is Azerbaijan at 0.3% of children 0-17, higher than the 0.1% found in Jordan.

FIGURE 6: PERCENT DISTRIBUTION OF PARENTAL SURVIVAL STATUS ACCORDING TO AGE GROUP OF CHILD, JORDAN 2012

FIGURE 7: PERCENT OF PARENT LOSS AMONG CHILDREN AGE 0-17 BY COUNTRY, DHS WEST ASIA REGION

Children Living with Neither Biological Parent:

As discussed above, during the 2012 data collection, very few children under the age of 18 in the sampled households had experienced the loss of both biological parents in Jordan. They represented under 1% of all children living in the country. The loss of one biological parent was slightly more common, with 2.8% of all children in Jordan losing either their biological mother or father prior to their eighteenth birthday. Nonetheless these children represent a small fraction (7%) of children living with neither biological parent in the country. This would seem to indicate that parental death is not the primary reason for children not living without a biological parent.

When taking a closer look at the 1% of children who live with neither biological parent in Jordan, the overwhelming majority of these children still live in family care, residing instead in households with their grandparents, aunts, uncles, siblings, and other relatives. Nationwide, 95% of children aged 0-17 live in family care, and approximately 1.6% of surveyed households report hosting a child 0-17 who is unrelated to the head of the household.

Additional research is needed in Jordan to tease apart the living arrangements of children not living with either biological parent. Unfortunately, while data is collected within the Demographic and Health Surveys regarding household composition and child relationship to household head, the prevalence of children living outside of parental care was so rare that the resulting sample sizes were too small to result in any robust findings. Therefore, we cannot disentangle who these children living outside of family care ultimately live with and may serve as their primary caregiver. More data is required to understand predictors of care structures among this group of children.

Limitations:

The data presented here represent children who were residing in households at the time of data collection. It does not include the most vulnerable cohort of children ages 0-17 who are not living in households. These data look at the relationship between the child and the head of the household. They do not provide information on the primary caregiver of the child. Moreover, it does not capture multigenerational households across children not living with a biological parent; therefore, it is possible that a child who is reported as the grandchild of the household head is also cohabitating with an aunt or uncle, sibling, or other relative. Also to note, the available questionnaire categories that capture relationships to household head do not distinguish between maternal and paternal relatives, an area that may warrant closer attention in further data collection efforts.

Another limitation found in this report is the inflexibility of the structured household. Flows of communication, individuals, and funding that build the networks of each individual household remain hidden. The data cannot uncover whether children living with neither biological parent who have living biological parents communicate with them, are visited by them, or are supported financially by them. It does not capture the stability of the household composition, leaving unknown the timing of when a parent left or whether the parent comes and goes routinely. These limitations highlight areas of study that require additional data in order to uncover children's care structures in Jordan.

Table 1. Percent distribution of children under age 18 by living arrangement and survival status of parents, according to background characteristics, Jordan 2012 TOTAL N=32888

	Living with both 91.9%	Living with neither 1.0%				Living with mother only 5.8%		Living with father only 1.3%		Missing information 0.0%	Total Count 100.0%	Summary Figures				
		Only father alive	Only mother alive	Both alive	Both dead	Father alive	Father dead	Mother alive	Mother dead			Not living with a biological parent	Both parents dead	One parent dead	Number of children 0-14	Number of children 0-17
Sex																
Male	92.1%	0.1%	0.0%	0.6%	0.1%	3.7%	2.2%	0.7%	0.5%	0.0%	100.0%	0.8%	0.1%	2.8%	14216	17009
Female	91.6%	0.1%	0.1%	1.0%	0.1%	3.7%	2.1%	0.9%	0.5%	0.0%	100.0%	1.2%	0.1%	2.8%	13235	15879
Age																
0-1	92.5%	0.0%	0.0%	0.3%	0.0%	6.8%	0.2%	0.1%	0.0%	0.0%	100.0%	0.4%	0.0%	0.2%	3738	3738
2-4	93.1%	0.0%	0.0%	0.5%	0.0%	5.2%	0.6%	0.4%	0.2%	0.0%	100.0%	0.6%	0.0%	0.8%	6037	6037
5-9	94.2%	0.1%	0.1%	0.4%	0.0%	3.0%	1.2%	0.8%	0.2%	0.0%	100.0%	0.6%	0.0%	1.5%	9182	9182
10-14	91.5%	0.1%	0.0%	0.7%	0.1%	2.3%	3.2%	1.2%	0.9%	0.0%	100.0%	0.9%	0.1%	4.2%	8493	8493
15-17	86.6%	0.2%	0.1%	2.0%	0.2%	3.1%	5.2%	1.2%	1.4%	0.0%	100.0%	2.5%	0.2%	6.9%	0	5438
Residence																
Urban	91.5%	0.1%	0.1%	0.8%	0.1%	3.9%	2.1%	0.8%	0.6%	0.0%	100.0%	1.0%	0.1%	2.9%	22359	26822
Rural	93.4%	0.0%	0.1%	0.7%	0.1%	2.6%	2.2%	0.8%	0.3%	0.0%	100.0%	0.8%	0.1%	2.5%	5092	6066
Region																
Central	91.9%	0.1%	0.1%	0.7%	0.1%	3.7%	2.2%	0.8%	0.5%	0.0%	100.0%	0.9%	0.1%	2.8%	16771	20120
North	91.4%	0.2%	0.1%	0.8%	0.1%	4.0%	1.7%	0.9%	0.8%	0.0%	100.0%	1.1%	0.1%	2.7%	7926	9472
South	93.0%	0.1%	0.1%	0.6%	0.0%	2.2%	2.9%	0.8%	0.2%	0.0%	100.0%	0.9%	0.0%	3.3%	2753	3296
Wealth index																
Poorest	89.1%	0.2%	0.1%	0.7%	0.1%	5.0%	3.6%	0.6%	0.6%	0.0%	100.0%	1.1%	0.1%	4.5%	6134	7366
Poorer	91.3%	0.1%	0.1%	0.9%	0.2%	3.2%	2.4%	1.2%	0.5%	0.0%	100.0%	1.3%	0.2%	3.1%	5765	6942
Middle	93.6%	0.1%	0.0%	0.7%	0.0%	3.6%	1.3%	0.4%	0.2%	0.0%	100.0%	0.9%	0.0%	1.6%	5749	6759
Richer	94.1%	0.0%	0.0%	0.7%	0.0%	2.5%	1.6%	0.5%	0.6%	0.0%	100.0%	0.8%	0.0%	2.3%	5375	6400
Richest	91.6%	0.1%	0.0%	0.7%	0.0%	4.0%	1.4%	1.5%	0.7%	0.0%	100.0%	0.8%	0.0%	2.2%	4427	5421
Total < 15	92.9%	0.1%	0.0%	0.5%	0.0%	3.8%	1.5%	0.8%	0.4%	0.0%	100.0%	0.7%	0.0%	2.0%	27450	27450
Total < 18	91.9%	0.1%	0.1%	0.7%	0.1%	3.7%	2.1%	0.8%	0.5%	0.0%	100.0%	1.0%	0.1%	2.8%	27450	32888

| Jordan, 2012 | Table 2. Living arrangements among children under age 18 not living with a biological parent - the percent distribution of survival status of parent and the percent distribution of relationship to head of household, according to background characteristics, Jordan 2012 TOTAL N=441 | | | | | | | | | | | |

	Living with neither					Both parents dead	Only one dead	Total in family care	Total not in family care	Total number of weighted children 0-14	Total number of weighted children 0-17	Total number of unweighted children 0-17
	Only father alive	Only mother alive	Both alive	Both dead	Total							
Sex												
Male	12.8%	4.0%	72.1%	11.1%	100.0%	11.1%	16.8%	92.6%	2.3%	88	132	134
Female	8.2%	7.3%	80.0%	4.5%	100.0%	4.5%	15.5%	97.3%	1.0%	95	189	210
Age												
0-1	2.7%	0.0%	86.6%	10.7%	100.0%	10.7%	2.7%	100.0%	0.0%	15	15	23
2-4	7.1%	0.0%	90.8%	2.1%	100.0%	2.1%	7.1%	96.4%	3.6%	35	35	47
5-9	15.1%	19.4%	64.3%	1.2%	100.0%	1.2%	34.6%	94.7%	4.9%	58	58	55
10-14	11.9%	1.4%	75.8%	11.0%	100.0%	11.0%	13.3%	93.5%	0.3%	76	76	70
15-17	8.6%	4.9%	77.9%	8.6%	100.0%	8.6%	13.5%	96.0%	0.5%		137	149
Residence												
Urban	11.1%	5.8%	76.2%	6.9%	100.0%	6.9%	16.9%	95.3%	1.5%	155	269	252
Rural	5.2%	6.4%	79.5%	8.9%	100.0%	8.9%	11.6%	95.5%	2.2%	28	51	92
Region												
Central	7.5%	5.7%	79.7%	7.1%	100.0%	7.1%	13.2%	97.7%	0.1%	108	184	115
North	14.0%	4.6%	72.8%	8.7%	100.0%	8.7%	18.5%	91.4%	4.3%	60	107	131
South	12.5%	12.4%	72.7%	2.4%	100.0%	2.4%	24.9%	95.5%	0.5%	16	29	98
Wealth index												
Poorest	18.0%	11.0%	64.3%	6.6%	100.0%	6.6%	29.1%	93.4%	0.7%	47	80	120
Poorer	4.8%	9.2%	70.9%	15.1%	100.0%	15.1%	14.0%	94.3%	0.6%	34	93	101
Middle	15.2%	2.1%	78.8%	4.0%	100.0%	4.0%	17.3%	95.6%	3.9%	31	58	56
Richer	0.0%	0.9%	96.8%	2.3%	100.0%	2.3%	0.9%	96.6%	3.4%	44	48	41
Richest	11.5%	0.0%	87.7%	0.8%	100.0%	0.8%	11.5%	100.0%	0.0%	28	41	26
Total < 15	11.2%	6.7%	75.9%	6.2%	100.0%	6.2%	17.9%	94.9%	2.4%	183	183	195
Total < 18	10.1%	5.9%	76.8%	7.2%	100.0%	7.2%	16.0%	95.4%	1.6%	183	320	344