LASFIEW TOTAL 11,315,550

POPULATION 24 YEARS OR YOUNGER 1

50.22%

WOMEN OF REPRODUCTIVE AGE

(15-49 years)

2,888,550

POPULATION 15-24 YEARS 2,084,520 (male + female)

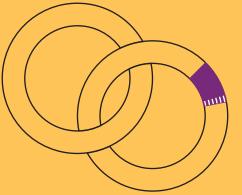
WOMEN (20-24 years) WHO WERE FIRST MARRIED OR IN UNION II

> **BEFORE** AGE 18

9.7%

BEFORE AGE 15

1.5%

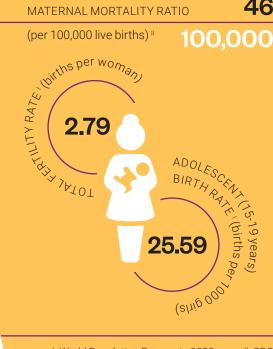


MATERNAL MORTALITY RATIO

46

(per 100,000 live births) |

100,000



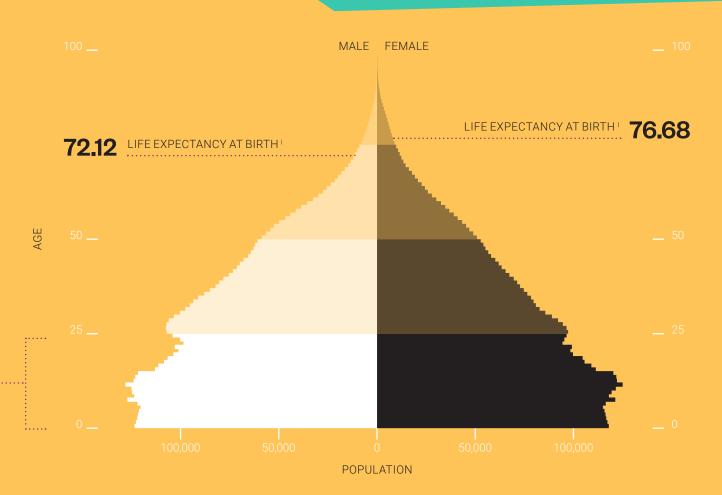


8% UNMET NEED FOR FAMILY PLANNING (all women) ||

57% DEMAND FOR FAMILY PLANNING SATISFIED WITH MODERN METHODS (all women)

99.7% DELIVERIES ATTENDED BY SKILLED HEALTH PERSONNEL "

The Hashemite Kingdom of Jordan has committed to intensify efforts for the full, effective and accelerated implementation and funding of the ICPD Programme of Action, Key Actions for the Further Implementation of the Programme of Action of the ICPD and Agenda 2030 for Sustainable Development. Jordan has also affirmed commitment to the ICPD's Programme of Action, and the Sustainable Development Goals. The country made a broad range of commitments during the Nairobi Summit on ICPD25, including the provision of quality information, counseling and family planning services based on a human rights approach, especially in remote areas and for vulnerable groups. Jordan has also affirmed its commitment to reducing maternal morbidity and mortality.



In 2017, the most recent year for which data is available, 14.2% of currently married or in union women had an unmet need for family planning. This was highest among women with no education and women living in the poorest households. In 2017, 56.7% of currently married or in union women had their demand for family satisfied by modern methods. This was higher among women with secondary education and above, and among women living in wealthy households.

Unmet Need for Family Planning, Married Women

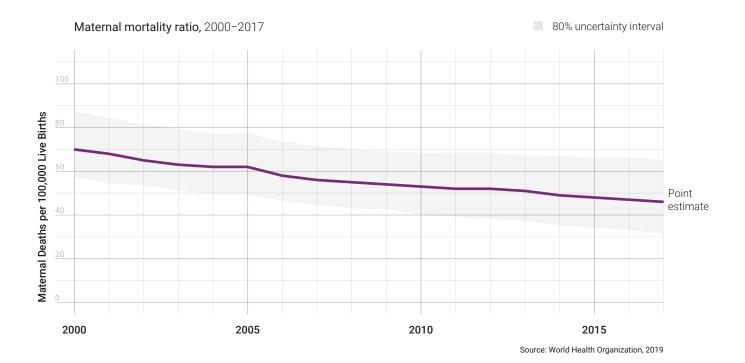


Source: Demographic and Health Survey, 2017

Demand for Family Planning Satisfied with Modern Methods, Married Women



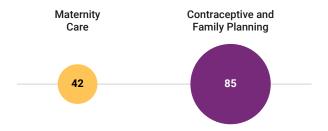
Jordan's maternal mortality ratio decreased from 2000 to 2017 and was estimated to be 46 maternal deaths per 100,000 live births in 2017, the latest year for which most recent data is available, a low rate for the region where the highest maternal mortality ratio is 295 maternal deaths per 100,000 live births. Recognizing the impact of unsafe abortion on maternal deaths, Nairobi Summit Commitment 3 highlights the integration of "a comprehensive package of sexual and reproductive health interventions, including access to safe abortion to the full extent of the law, measures for preventing and avoiding unsafe abortions, and the provision of post-abortion care into national UHC strategies, policies and programmes, and the need to protect and ensure all individuals' right to bodily integrity, autonomy and reproductive rights, and to provide access to essential services in support of these rights". Abortion is only permitted in Jordan under certain circumstances including to preserve the mother's health.



Since the Nairobi Summit, stakeholders have explored opportunities to advance Jordan's commitments. A monitoring and evaluation system to track ICPD and SDGs was taken place. In its 2022 Voluntary National Review of the implementation of sustainable development, Jordan reflected that a draft national plan was prepared to implement the commitments of the Nairobi Summit 2021-2030 and to reach targets of zero unmet need for family planning, zero (preventable) maternal deaths and zero family violence by 2030.

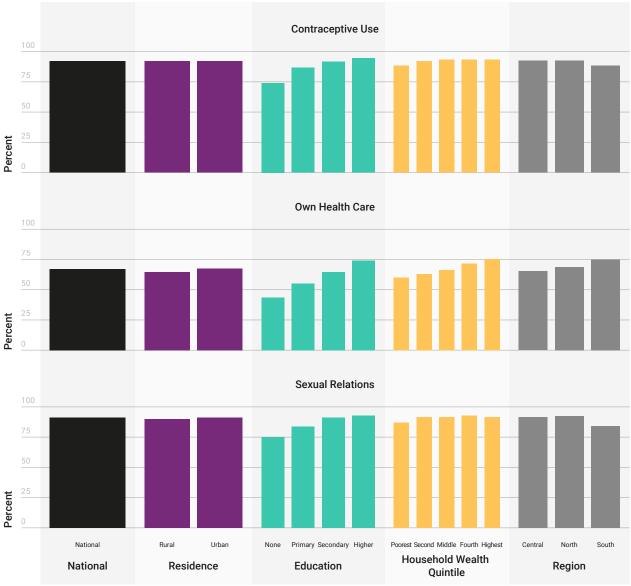
In Jordan, 91.2% of married women aged 15 to 49 make their own decisions regarding sexual relations, 92.3% about contraceptive use, 67.3% about health care, and 58.2% about all three decisions. The percentages are higher among women with secondary and higher education. SDG 5.6.2 reflects the extent to which prevailing laws enable or disable women and men's full and equal access to health and rights. On average, Jordan has achieved 42% of enabling laws and regulations that guarantee full and equal access to women and men to maternity care, and 85% to contraceptive and family planning services.

Extent to which Jordan has laws and regulations that guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information and education



Source: United Nations Population Fund, 2022

Proportion of married women who make their own informed decisions regarding reproductive health care, contraceptive use, and sexual relations



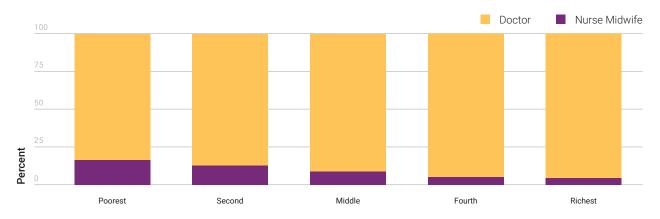
In 2017, the percentage of births in Jordan that were attended by skilled health personnel was 99.7% - the highest in the region, with very little variation between geography, residence, and wealth, and the percentage being only slightly lower among women with no education. As household wealth increases, so does the proportion of births attended by doctors; however overall doctors are the main attendants at births in Jordan.

Births with Skilled Attendant



Source: Demographic and Health Survey, 2017

Skilled Birth Providers by Wealth Quintile



Household Wealth Quintile

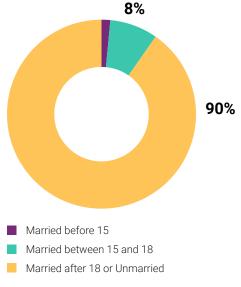
Source: Demographic and Health Survey, 2017

Jordan has made important achievements in the field of reproductive health, especially in reducing the maternal mortality rate, by providing advanced health care for mothers in hospitals. In its Voluntary National Review report in 2022 Jordan reported that a national plan for the period 2021-2030 was prepared to implement the commitments of the Nairobi Summit and to reach zero indicators of the unmet need for family planning, zero maternal deaths and zero family violence by 2030. Further in 2022, Jordan launched the National Reproductive and Sexual Health Strategy for the years (2020-2030).

At the Nairobi Summit, Jordan has affirmed its commitment to ensuring that adolescents and young people have comprehensive and age-appropriate information, to help them make sound decisions related to their sexual and reproductive health

In Jordan, 9.8% of women aged 20-24 years were married before age 18, with 1.5% of women were married before age 15 – one of the lowest in the region. There is little variation in the percentage of marriage before 15 and 18 by residence. Marriage before age 18 is greater among those with primary and no education, and in the poorest and second poorest households.

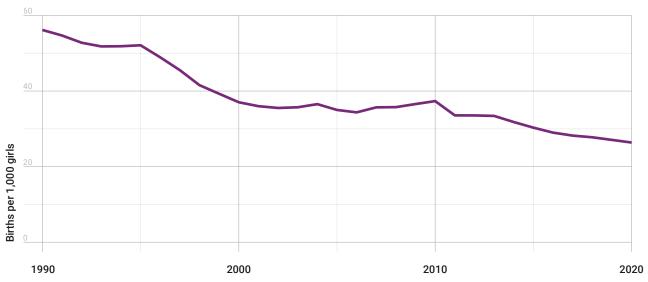
Age of Marriage Distribution, Women 20-24





Jordan's adolescent birth rate has been steadily decreasing from 1990 to 2020, and is estimated to be 24 births per 1,000 girls in 2022. The adolescent birth rate is higher in urban areas than rural areas, highest among those with primary education, and in the poorest households.

Adolescent birth rate, 1990-2020

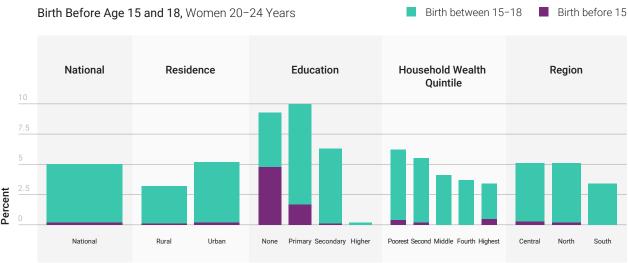


Source: World Population Prospects, 2022

Adolescent birth rate



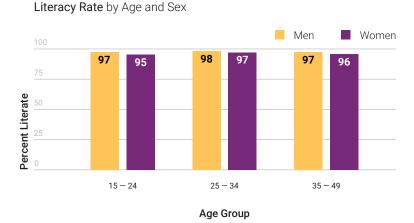
Among those girls who give birth before age 18, the percentage is higher in urban areas than in rural areas, and is highest among those with no and primary education, and among those in the poorest households. Among women with no education, the proportion of births before age 15 and before age 18 is approximately the same. As education and wealth increases, the proportion of births before 15 years decreases.



Source: Demographic and Health Survey, 2017

At the Nairobi Summit, Jordan committed to the continued participation of young people in the development of national strategies and plans, and to help youth participate in decision-making.

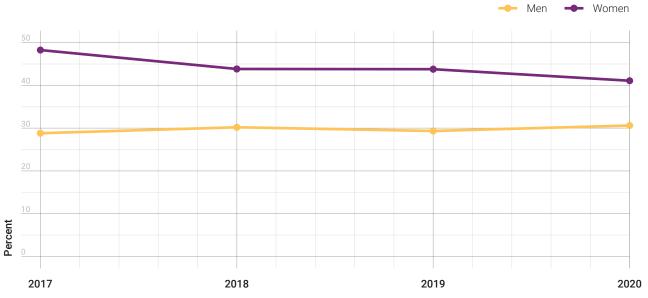
Jordan's literacy rate is greater than 95% among men and women, but slightly higher for men than for women.



Source: Demographic and Health Survey, 2017

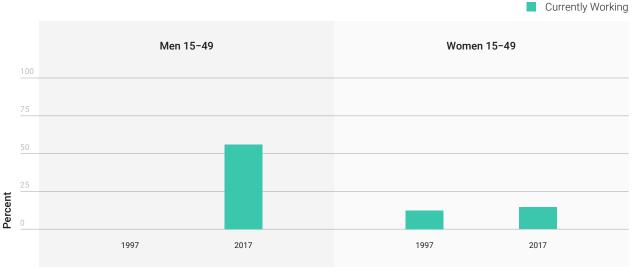
In 2017, nearly four times as many men (56.1%) were currently working, compared with women (14.5%), with the percentage of women currently working increasing only slightly between 1997 and 2017. Young people who are not in education, employment or training (i.e., the NEET population) quantifies the proportion of young people who find themselves outside of the educational system and without work. In Jordan, the percent of youth not in education, employment or training is greater among women than men; the percentage is decreased from 2017 to 2020 among young women, but increased slightly for young men during this period.

Percent of Youth (15-24) Not in Education, Employment, or Training, by Sex

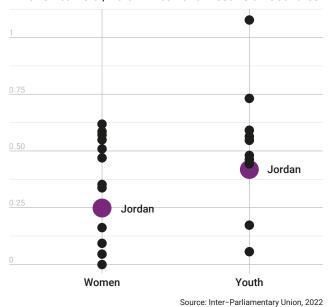


Source: LFS - Employment and Unemployment Survey, 2017-2020

Employment Trends (Currently Working), by Sex



Ratio of proportion of population in parliament to proportion in national population, Lower Chamber or Unicameral, North African and West Asian Countries



development, to provide access to justice for all and build effective, accountable and inclusive institutions at all levels. One component of this is ensuring responsive, inclusive, participatory and representative decision-making at all levels. The ratio of the proportion of women Members of Parliament in Jordan is lower than the median for the region, while that for youth Members of Parliament is the third lowest in the region (SDG 16.17.1).

SDG Goal 16 seeks to promote peaceful

and inclusive societies for sustainable

Source. Inter-1 amamentary officin, 2022

Jordan is hosting the second-highest share of refugees per capita in the world. More than 760,000 refugees are registered with UNHCR, predominantly from Syria, with large groups from Iraq, Yemen, Sudan, and Somalia. Some 83% live in urban areas outside of refugee camps. 2022 marks the 10 years since Jordan's Za'atari camp opened its doors to displaced Syrians. Over 20,000 births have been recorded in Za'atari, equating to around 40 babies being born every week. UNFPA Jordan has been active from the onset of the Syrian crisis to respond to the needs of the Syrians both in the communities and the established camps, as well as other affected populations, with a goal of minimizing maternal and neonatal morbidity and mortality, and reducing the risks and consequences of gender-based violence. As part of its ICPD25 commitments, Jordan is committed to implement the Response Plan for the Syria Crisis for the years 2020-2022, which focuses on the provisioning of health services to refugees and improving services in rural health centers that host refugees in cooperation with international donors. Additionally, Jordan has been committed to implementing the minimal initial service package.

IV. UNHCR V. UNFPA