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| Impact of child mortality on fertility preferences in six sub-Saharan African nations |
| **Background/Objectives**  This research examines the relationship between fertility preferences, desire for more children and ideal family size, and experiences of child mortality in Burundi, Malawi, Rwanda, Tanzania, Uganda, and Zambia. Theorists propose that experiencing child mortality can lead to high fertility outcomes. It is hypothesized that women exposed to mortality replace children who have died with subsequent births and desire large family sizes to prepare for future deaths. Understanding the relationship between child mortality and fertility preferences is important for global health equity because large families correlates with poor health outcomes.  **Methods**  All data used in this research were collected by DHS. All models in this research use the experience of child mortality as the independent variable. The first model uses desire for another child as the dependent variable. The second model uses ideal family size as the dependent variable. Bivariate and multivariate analyses were performed for each model.  **Results**  There was a negative association with experiencing child mortality and a desire to have more children in all six countries. Women who had a child die, were less likely to desire another child than women who had not. There was a positive association with experiencing child mortality and ideal family size in five countries. Women who had a child die, were more likely to desire larger family sizes than women who had not. In both models, once confounding variables were accounted for in the multivariate analysis, only Malawi and Rwanda had significant results.  **Discussion**  The countries that had a significant relationship between child mortality and fertility preferences have the lowest mortality rates and steep declines within the sampled countries. Women living within countries that had a recent decline in child mortality, were more likely to have their fertility preferences influenced by a personal experience with child mortality than women living in countries with high child mortality. Yet, women in these countries, that have had a child die, are preferring family sizes with four or more children. Women desiring large families can put stress on herself and her children. Also, women who had not experienced child mortality personally, also preferred a family size of four or more which suggests that community context has influence over women’s fertility preferences.  **Keywords**  Child mortality, fertility preferences, sub-Saharan Africa |