

## 1 **S3 Text: Fertility decline vs Infant Mortality Rate**

2 *Between-group analyses:* Data from Rwanda (1990-95) and Cambodia (1975-80) are omitted  
3 from Fig. 5 because genocide and massacres temporarily increased infant mortality rates to  
4 extremely high values. In both cases, there was a surprisingly rapid return to a decreasing  
5 trend. In Rwanda, the sequence of ISRs in the four 5-year periods beginning in 1985-90 was  
6 88.6%, 71.1%, 88.4% and 91%. In Cambodia the sequence, starting in 1970-75, was 86.1%, 68%,  
7 84.6% and 91.4%.

8 *Single-country analyses:* Because initial ISR values were lower and ISR increased more slowly in  
9 MACs than in ODCs, MACs had more data points in general in the single-country regressions  
10 (median = 8, range = 2-13; 1 country had 2 observations) than did ODCs (median = 4, range  
11 = 2-9; 7 countries had 2 observations).

12 The great majority of countries (77 of 89) with more than 2 observations yielded linear  
13 regressions with  $R^2 > 0.5$ ; 57 had  $R^2 > 0.75$ . Among low correlations ( $R^2 < 0.5$ ) there is  
14 either almost no change in TFR plus only slight deviation from linearity (5 countries) or there  
15 is strong non-linearity because, as ISR increases, TFR first increases then declines (5 countries).  
16 Two nations (Congo and Zimbabwe) show strong nonlinearity during the decline phase, which  
17 may be related to the prevalence of AIDS or other traumas.

## 18 **References**