

Viewpoints
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Iran Is Reversing Its Population Policy

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Once again, the Iranian government is reversing its population policy – its fertility policy, to be more precise. Alarmed by the country’s rapidly aging population, Iran’s Supreme Leader Ayatollah Ali Khamenei is now calling on women to procreate and have more children, and the Iranian Minister of Health and Medical Education Marzieh Vahid Dastjerdi has recently said, "The budget for the population control program has been fully eliminated and such a project no longer exists in the health ministry. The policy of population control does not exist as it did previously."ⁱ This comes at a time when the government is barring women from entering some academic fields in higher education, which makes one wonder if this is a coordinated effort to engineer women’s position at home and in society.ⁱⁱ Regardless, Iran’s population control policy that came about more than two decades ago had increasingly become outdated for today’s Iran.

Iran stands out for lowering its fertilityⁱⁱⁱ in a short time without coercion or abortion.^{iv} The total fertility rate dropped from 6.6 births per woman in 1977 to 2.0 births per woman in 2000 and to 1.9 births per woman in 2006. The decline has been particularly impressive in rural areas where the average number of births per woman dropped from 8.1 to 2.1^v in one generation. (To put into perspective the speed at which Iran’s fertility declined, it took about 300 years for European countries to experience a similar decline.)

Because of the high fertility rate that Iran experienced in the recent past, followed by a sharp decline, Iran’s population is now aging rapidly. According to the United Nations Population Division, the median age in Iran increased from 18 in the mid-1970s to 28 today, and it is expected to increase to 40 by 2030 if the fertility trend continues.^{vi} Yes, Iran is facing an aging population, and this may well be in the minds of Ayatollah Khamenei, President Mahmoud Ahmadinejad, and some other officials who are encouraging Iranian women to have more children.

History of the Population Policy and Family Planning Program

Iran has always been pragmatic toward its population policies and programs, and one would expect the same with their pronatalist initiative this time around as well. There have been three distinct periods in the history of Iran’s family planning program, each marked by major changes in the government’s population policy.^{vii} A brief review of them can help us see what may come next.

Family Planning Before the 1979 Islamic Revolution

Iran was one of the first countries to establish a family planning program as part of its development plan. The Imperial Government of Iran launched its family planning program in the Ministry of Health in 1967. The program acknowledged family planning as a human right

and emphasized its social and economic benefits for families and society. It recruited and trained a cadre of professional staff and taught many young doctors about family planning's implications for public health and its critical role in improving the wellbeing of women and children. Family planning became an integral part of maternal and child health services nationwide. By the mid-1970s, 37 percent of married women were practicing family planning, with 24 percent using modern methods. The total fertility rate, although declining, remained high at more than six births per woman.

The Islamic Revolution and Pronatalism

Days after the 1979 Islamic Revolution, the family planning program was dismantled because it was associated with the Iranian royal family and was viewed as a Western innovation. The new government advocated population growth and adopted new social policies, including benefits such as allowances and food subsidies for larger families. In an attempt to ensure continued government support for family planning, however, a number of committed health professionals approached the government with information about the health benefits of family planning. They even obtained *fatwas* (religious edicts concerning daily life) from Ayatollah Khomeini and other top-ranking clerics to the effect that "contraceptive use was not inconsistent with Islamic tenets as long as it did not jeopardize the health of the couple and was used with the informed consent of the husband." As a result, both government-sponsored and private sector health facilities continued to provide family planning services as part of their primary health care. In 1980, Iran was attacked by Iraq. During the eight-year conflict that followed, having a large population was considered an advantage, and population growth became a major propaganda issue. Many Iranian officials were pleased when the 1986 census showed that Iran's population of close to 50 million was growing by more than 3 percent per year, one of the highest rates in the world.

Restoring the Family Planning Program

After the war with Iraq ended, while focusing on drafting its first national development plan, the government saw rapid population growth as a major obstacle to the country's economic and social development and reversed its population policy, reviving the family planning program and promoting small family size. In 1993, the Iranian legislature passed a family planning bill that removed most of the economic incentives for large families. For example, some social benefits for children were provided for only a couple's first three children. The law also gave special attention to such goals as reducing infant mortality, promoting women's education and employment, and extending social security and retirement benefits to all parents so that they would not be motivated to have many children as a source of old age security. While all these legal reforms in support of the family planning program were significant and highlight Iran's commitment to slowing population growth, it is hard to assess their impact on lowering fertility.

Why Iran's Family Planning Program Was Successful

The level and speed of the fertility decline was beyond any expectation. The first official target of the revitalized family planning program, as reflected in the government's first five-year development plan, was to reduce the total fertility to 4.0 births per woman by 2011. By 2000, the rate was already down to half of the stated goal.

The success of Iran's family planning program is largely attributed to the government information and education program and to a health care delivery system that was able to meet reproductive health needs. One of the many family planning posters produced by the Ministry of Health and Medical Education said, "Better life with fewer children; Girl or boy, two is enough." As part of promoting its notion of healthy, small families, the Ministry of Health established premarital counseling classes throughout the country; the government made it mandatory for couples planning to marry to participate before receiving their marriage license. Also, population education became part of the curriculum at all educational levels; university students, for example, had to take a course on population and family planning.

Family planning is one of many services provided for free by the country's primary health care system, which is based on different levels of care and an established referral system. That is why it is often referred to as a health care "network." Iran's primary health care system is recognized as a model by the World Health Organization (WHO). In rural areas, the Ministry of Health and Medical Education is the main provider of health care services, and health workers (*behvarz*) are proactive about reaching out to people. In urban areas, however, health services are largely provided by the private sector. Private health care and the pharmaceutical industry are relatively strong in Iran. Many modern contraceptives are manufactured in the country, making it largely self-sufficient—the only condom factory in the region is in Iran, which exports its products to neighboring and Eastern European countries. To encourage the use of its clinics in low-income areas in cities, the government uses women volunteers to connect people living in their neighborhood to a clinic and make appointments for them to receive basic services, such as immunizing children or receiving contraceptives. Today, the great majority (70 percent) of Iranians live in urban areas.

Now, Can the Government Roll All of this Back?

The answer is most probably not. The notion of small family size is now enshrined in the Iranian psyche, both men's and women's. They now have gotten used to exercising their reproductive rights and would expect to be able to continue to do so, whether it would be through government-sponsored health services or the private sector. Today, 74 percent of married women ages 15 to 49 practice family planning; 60 percent use a modern method; and one-third of modern contraceptive users have relied on a permanent method—female or male sterilization. These rates are more or less comparable to those in the United States.^{viii}

Iranians have been progressive regarding their reproductive rights. Iranian women who have achieved their reproductive rights are at the forefront of the democracy movement in Iran, demanding even more rights. An overwhelming majority of Iranian women live a modern lifestyle that is often not seen in the Western media that show women covered head to toe in black, as if they belong to centuries ago. Elementary school enrollment is universal; the gender gap in secondary school enrollment is almost closed; and more girls have been enrolled in universities than boys (which prompted the government to set quotas for university entrants in favor of male students.) Despite continued international economic sanctions and political isolation, secular ideas find their way into the country through satellite television and the Internet. Iranians have the second highest rate of Internet use in the Middle East and North Africa region, after the United Arab Emirates – although it should be noted that the Internet is filtered in Iran.

Today, Iranians' decision on whether to bring a child into this world is more complicated than just involving a financial incentive, such as the one that President Ahmadinejad introduced about two years ago and the ones that may follow to encourage families to have more children. Under Ahmadinejad's plan, each newborn receives a \$950 deposit into a government bank account. They will then continue to receive \$95 every year until they reach 18 years of age. Parents will also be expected to pay matching funds into the accounts. Then, children can withdraw the money at the age of 20 and use it for education, marriage, health, and housing. But Iranian parents, with their daily economic struggle to make ends meet, know that this amount is not going to go far, considering the high cost of living and skyrocketing inflation.

It is unlikely that the Ministry of Health and Medical Education would ban family planning services altogether. Family planning is an important part of maternal and child health care. The Iranian constitution stipulates that the government is responsible for providing basic health care (including maternal and child health) and education to all of its citizens for free. So, one would expect family planning services to remain as part of a basic health care package. If not, then the government needs to deal with black markets selling contraceptives and the consequences of unwanted pregnancies, including abortion. Abortion is illegal in Iran, but it is practiced underground; because of that, they potentially are performed in unsanitary settings and by unskilled providers. Following WHO recommendations, however, the government does provide post-abortion care to treat complications resulting from unsafe abortions. In short, the human and financial resources of the Ministry of Health and Medical Education are better spent if they are used to provide family planning services to those who need them than used for dealing with the complications of unsafe abortions – not to mention loss of lives, as some women die as a result.

It is also unlikely that the government would roll back its educational activities in schools or premarital counseling classes altogether. While these educational activities were originally developed for family planning purposes, over time they have been expanded to cover other

reproductive issues, such as sexually transmitted diseases, including HIV. Iran has the largest number of people living with HIV/ AIDS in the region.^{ix}

It is not yet clear what schemes the government is going to use to encourage young people to marry in the first place and to have children soon after that. The government already has some programs in place that help young people with wedding expenses and provide appliances for their home – who supposedly otherwise could not afford them – but it is difficult to assess the impact of the program. More important, the number of those participating in the program is too small relative to the size of the country’s young population – it can hardly have any impact on the national average age at marriage.

Welcomed schemes that may come about as the result of the new government initiative include free childcare services across the country, longer maternity leave, and a higher level of child allowances for higher birth orders – schemes that some European countries experiencing low fertility rates have in place.

While these are all speculations, regardless of what the government may or may not do, the number of births in Iran is going to increase for a decade or so. Today, a significant portion of Iran’s population is in its 20s and early 30s (prime ages to marry and have children), born during the high-fertility era around the 1979 Islamic Revolution and the 1980s. So, the number of births is likely going to increase as these baby boomers go through their childbearing years. Therefore, one should not rush to judgment and attribute future increases in the number of births to the success of the Iranian government’s pronatalist policies.



The opinions expressed herein are those of the author and do not reflect those of the Woodrow Wilson Center.

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- ⁱ <http://digitaljournal.com/article/330123> and
<http://www.telegraph.co.uk/news/worldnews/middleeast/iran/9446882/Iran-scraps-birth-control-programme-in-baby-boom-bid.html>
- ⁱⁱ <http://iranprimer.usip.org/blog/2012/aug/20/iran-curtails-female-education>
- ⁱⁱⁱ http://www.prb.org/pdf/IransFamPlanProg_Eng.pdf
- ^{iv} <http://www.prb.org/pdf08/MENAabortion.pdf>
- ^v <http://prbblog.org/?p=65>
- ^{vi} http://esa.un.org/unpd/wpp/unpp/panel_indicators.htm
- ^{vii} http://www.prb.org/pdf/IransFamPlanProg_Eng.pdf
- ^{viii} <http://www.prb.org/Publications/Datasheets/2012/world-population-data-sheet/data-sheet.aspx>
- ^{ix} http://www.unaids.org/en/media/unaids/contentassets/documents/unaidspublication/2011/JC2257_UNAIDS-MENA-report-2011_en.pdf

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