

Population Policies and Programs

Presentation to: Population and Climate Change:
Relationships, Research, and Responses

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Why should we care about population?

■ Human Rights

- Good services are not available to 200 million couples in developing countries who want family planning.

■ Health

- Poor reproductive health is a leading cause of illness and death.

■ Socioeconomic Development

- Rapid population growth hampers economic growth and perpetuates poverty.

■ The Environment

- Growth of human numbers and consumption is degrading the earth's life-supporting biological systems.

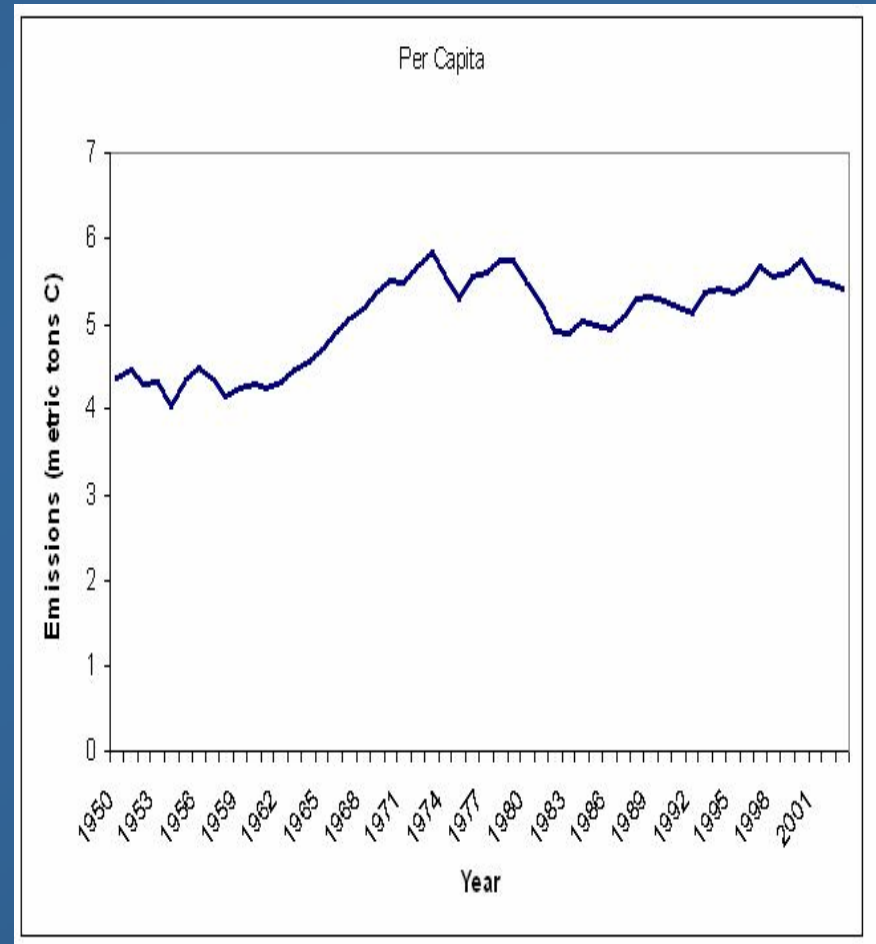
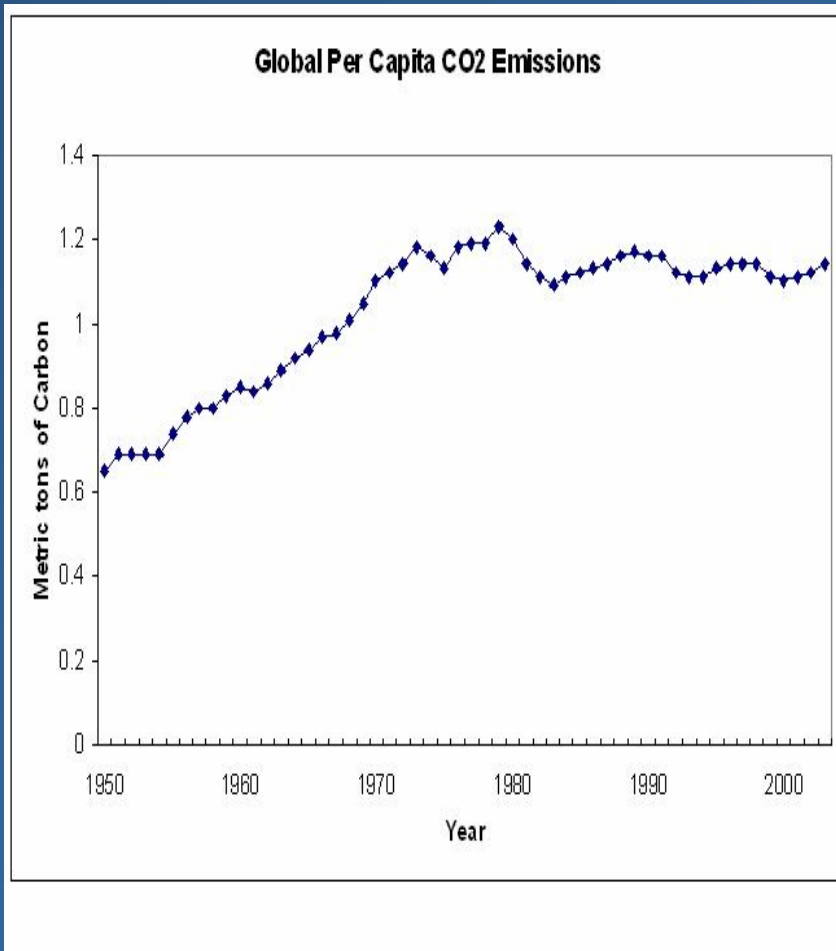
Examples of human impact on the environment:

- **Forests** are dwindling—50% are gone already.
- **Fisheries** are collapsing—75% are at the limit or over.
- **Cropland** is shrinking.
- **Water** shortages loom—aquifers are over pumped.
- **Global warming** is leading to drought, storms, and inundation of coastal areas.

Per capita CO₂ emissions (Global and U.S.) have changed very little since 1970

Global

United States



Source of figures: Carbon Dioxide Information Analysis Center (CDIAC)
Slide courtesy of F. Meyerson, please do not publish.

Impact of humans on the environment relates to:

- Population size
- Per capita consumption
- Environmental impact of technology used to produce what is consumed

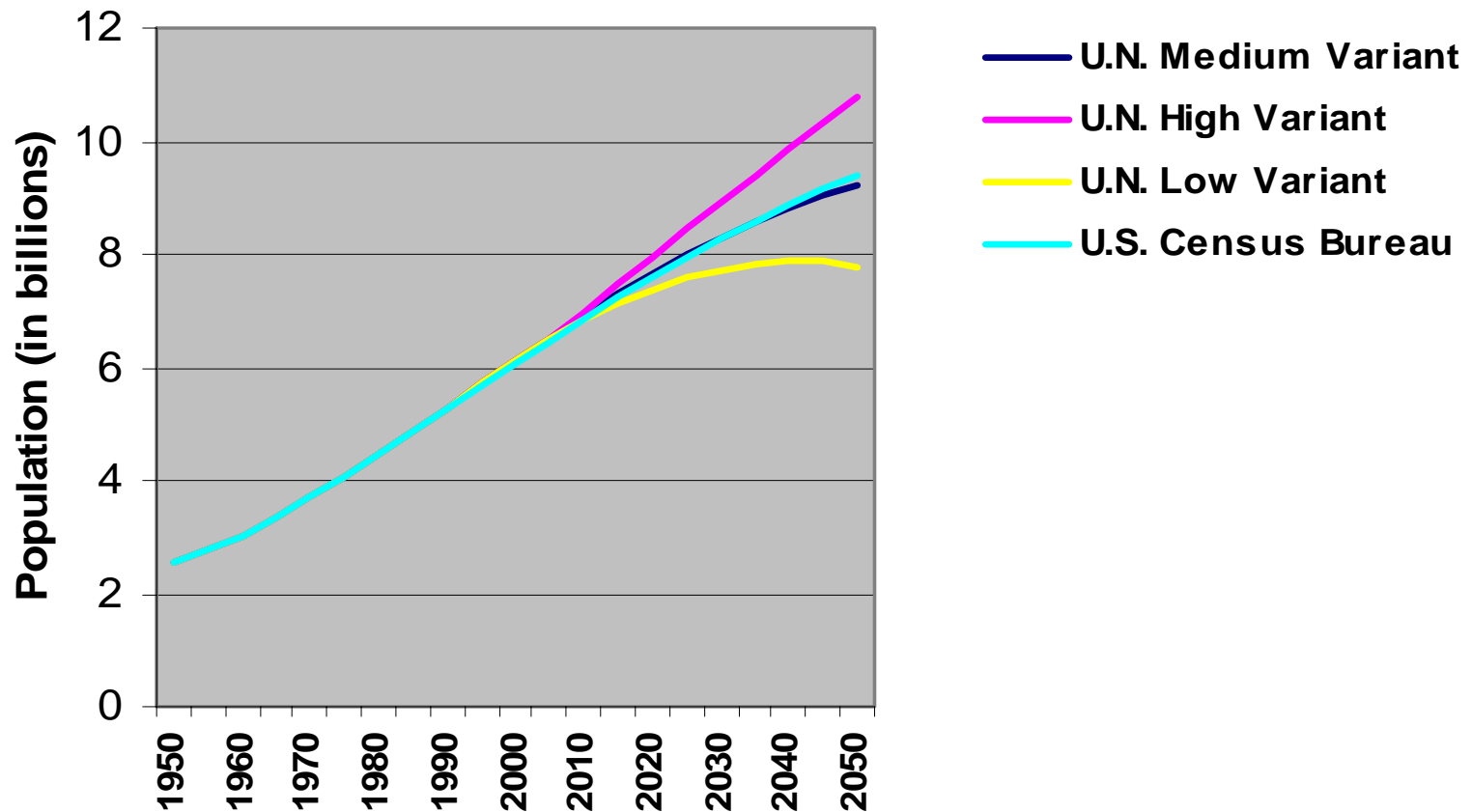
We must address all three.

Growth rates have declined,
but growth of numbers remains high

Year	Average Births Per Woman	Annual Population Growth (millions)
1950 (World)	5.3	48
2007 (World)	2.7	79
2007 (U.S.)	2.1	2.9

95% of growth is in developing countries.

Global Population 1950-2050 (historical and projected)



Projected Population Growth 2007 to 2050 in Regions and Countries

Region or Country (with 75% of 2050 population)	2007 Population (millions)	2050 Population (millions)	Percent Change
Africa	944	1,953	107%
India	1,132	1,747	54%
China	1,318	1,437	9%
Latin America/Caribbean	569	784	38%
USA	302	420	39%
Indonesia	232	297	28%
Pakistan	169	295	75%
World	6,625	9,294	40%

Source: Population Reference Bureau 2007 World Population Data Sheet

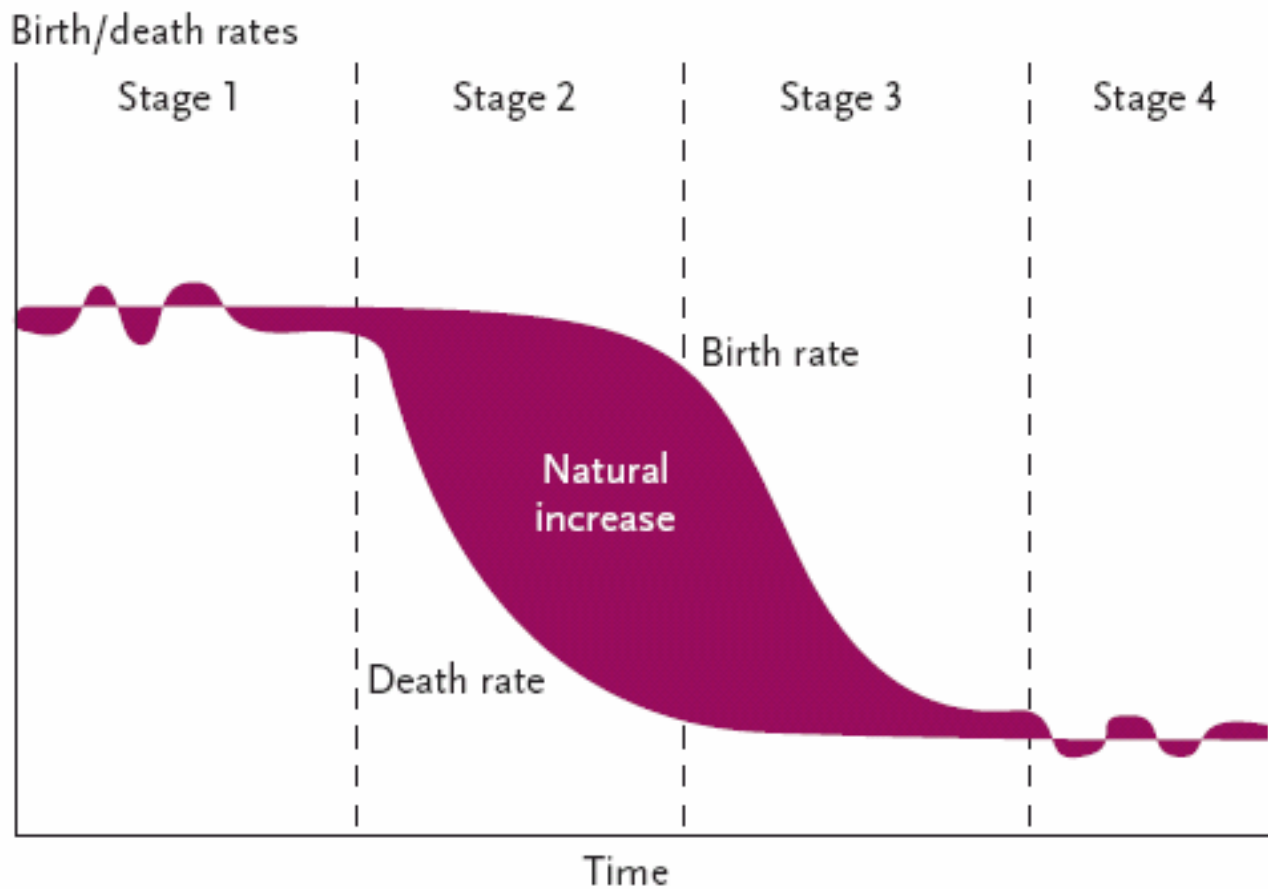
Lack of access to and use of family planning is an important cause of population growth

	World	U.S. (2001)
	Annual numbers in millions	
Pregnancies	210	6.4
Unintended Pregnancies	80	3.1
Abortions	42	1.3
Unplanned Births	34	1.4
Population Growth	79	2.7

Population policies have been based on various theories of fertility decline

- **Demographic transition theory** assumes that perceptions of the survival and the social and economic value of children lag behind declines in their actual death rates.
- The result is decisions to have large families and rapid population growth.

The Classic Stages of Demographic Transitions



Note: Natural increase or decrease is produced from the difference between the number of births and deaths.

Demographic transition theory and its variations are based on the tenet that fertility varies according to the economic cost and benefit of childbearing.

The implication is that lowered fertility requires increasing demand for small families.

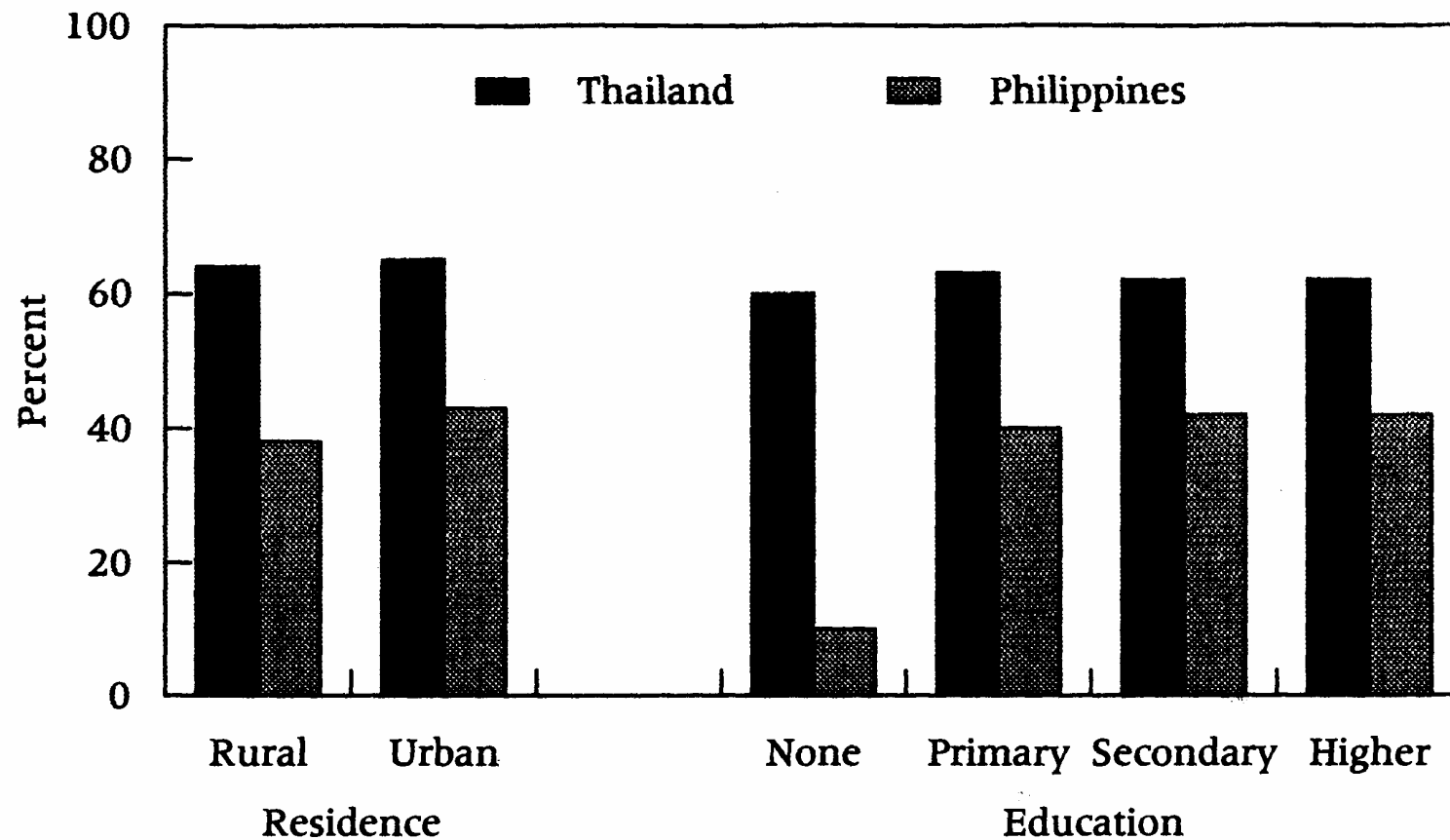
Policies proposed to affect demand for children include:

- Socioeconomic development
- Education – especially for girls
- Improving women's status and economic opportunities
- Improvements in health – especially that of infants and children and reproductive health

Problems with focusing population policy and programs on demand levers:

- The biological mechanisms that regulate fertility are not accounted for, i.e., contraception, lactation, abortion, fecundity, and patterns of sexual behavior such as age of marriage.
- The ideation of the value small families often preceded declines in infant mortality and need for child labor.
- High quality family planning services can overcome barriers such as low educational status of women.

FIGURE 2 Percent of women of reproductive age using contraception, Thailand 1988 and Philippines 1993, by residence and educational level



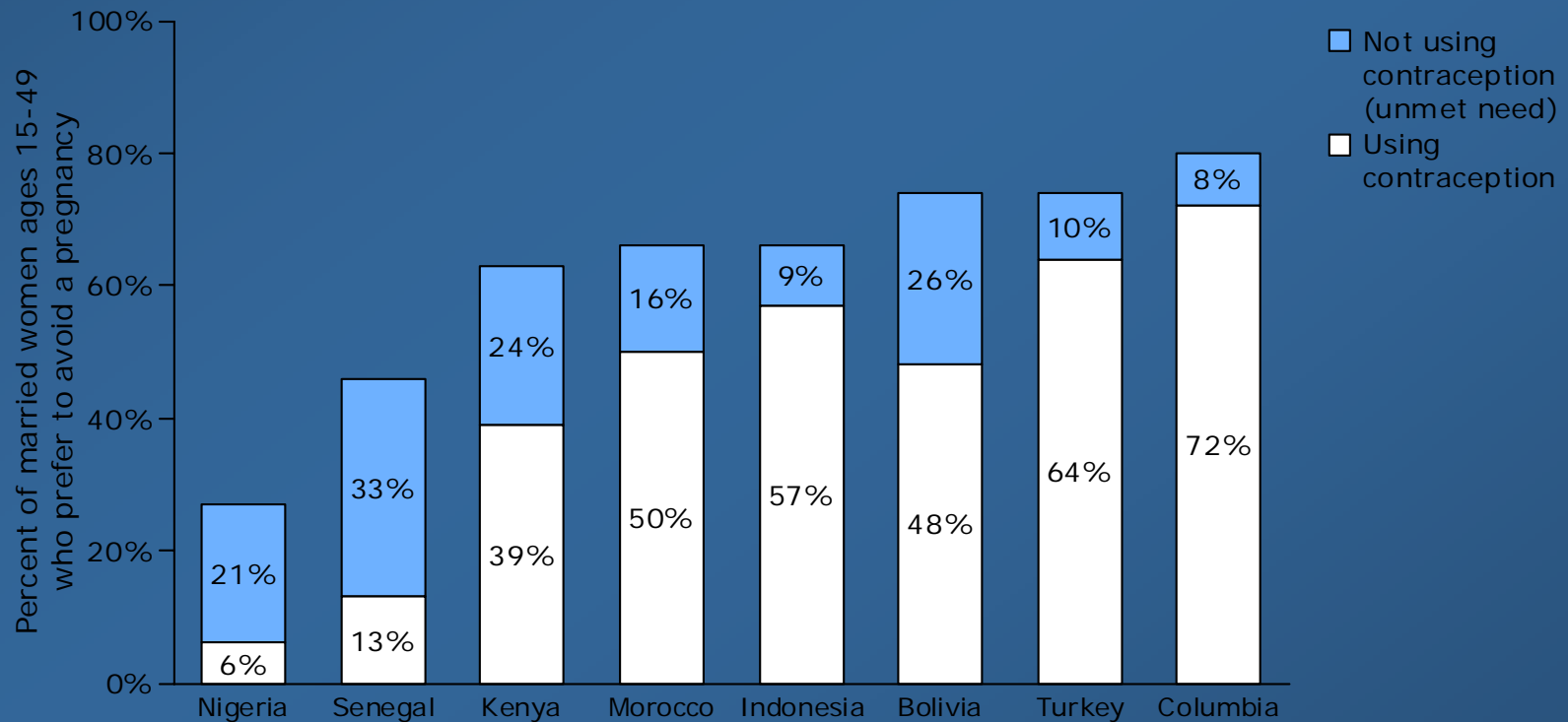
SOURCE: Based on Lee et al. (n.d.)

From: Potts, 1997

Problems with Demand Creation, Con't

- Demand creation policies and activities have intrinsic value, but the time and cost required to implement them is great compared to meeting existing demand for family planning.
- Arguably, providing means to satisfy demand for family planning should precede increasing demand for it.

Contraceptive use among married women (ages 15-49) who prefer to avoid pregnancy



Source: Demographic and Health Surveys, Final Country Reports

The preceding figure suggests unmet demand for contraceptive use exists, and the experience of many countries confirms this:

- Between 1960 and 2005, contraceptive prevalence in less developed countries increased from 9% (30 million users) to 58% (550 million users) among married women of reproductive age.
- During the same time period, the TFR in developing countries declined by half, from 6.0 to 3.1.

An Early Example: Thailand

- Thailand's government launched its population program in 1970, making available a broad array of contraceptives distributed by nurses and midwives within communities.
- By the late 1980s, Thailand's TFR had dropped below replacement-level to fewer than two births per woman (compared with about seven births per woman just two decades earlier) and currently remains low at 1.7.

A More Recent Example: Iran

- Iran restored its national family planning program in 1989.
- The TFR declined from 5.5 in 1988 to 2.8 in 1996 and is currently at the replacement-level of 2.1 births per woman.

According to Dr. Malcolm Potts:
"All societies with unconstrained
access to fertility regulation,
including abortion, experience a
rapid decline to replacement
levels of fertility, and often
lower."

Unintended pregnancy is the factor in continued population growth that is most amenable to program and policy intervention

- Worldwide, 80 million pregnancies (38% of all pregnancies) are unintended.
- More than 200 million women in developing countries would like to delay their next pregnancies, or stop bearing children altogether.
 - 64 million must rely on traditional, less effective methods of contraception.
 - 137 million are using no method because they lack access or face other barriers to using contraception.

ICPD and New Annual Funding Targets for 2005

(adjusted for inflation and program needs)

- Family planning: **\$15.6 billion** (up from \$11.5)
- Reproductive health: **\$15 billion** (up from \$5.4)
- HIV/AIDS: **\$14.9 billion** (UNAIDS estimate for 2006 with 2/3 to be provided by donors; up from \$1.4 billion)
- Basic Research: **\$300 million** (up from \$200 million)

Bottom line: An estimated **\$45.8 billion** annually is needed for population activities; the original 1994 estimate was **\$18.5 billion** (in 1993 dollars).

2005 ICPD Funding Targets for *Donors*

(in billions)

	2003 Donor Expenditures Estimated	Original Donor Target (1993\$)	% of Target	Donor Target Adjusted for Inflation (2005\$)	% of Target	Donor Target Adjusted for Inflation, HIV/AIDS & Reproductive Health (2005\$)*	% of Target
Family Planning	\$0.498	\$3.8	13%	\$5.2	10%	\$5.2	10%
Repro-health	\$1.323	\$1.8	74%	\$2.4	55%	\$5.0	26%
STI/HIV/AIDS	\$2.327	\$0.5	465%	\$0.6	388%	\$9.9	24%
Basic Research	\$0.534	\$0.1	530%	\$0.1	530%	\$0.1	530%
TOTAL	\$4.682	\$6.2	76%	\$8.4	56%	\$20.2	23%

* The new target is broadened to include updated estimates for HIV/AIDS and Reproductive Health Services.

Adapted from: Speidel JJ. *Population Donor Landscape Analysis for Review of Packard Foundation International Grantmaking in Population, Sexual and Reproductive Health and Rights*. Unpublished report; September 6 2005.

Projected 2008 Government Population and AIDS Donor Assistance

Category	Percent	\$ in Millions
General Contributions	6.4	589
Family Planning	3.5	322
Reproductive Health	8.0	736
Basic Research	1.6	147
STD/HIV/AIDS	80.5	7,406
TOTAL	100.0	9,200

Source: UNFPA/UNAIDS/NIDI Resource Flows Project

Public Support for Family Planning in the U.S.

- Half of the 34 million women who need contraceptive services are low-income and would benefit from publicly supported programs.
- Current (FY 2006) funding for family planning is \$1.85 billion, about half of the \$3.5 billion needed.

The supply approach to family planning has limitations

- In some places, men and women want large families
- Cultural, religious, and familial opposition to use of contraception and abortion
- Social, economic, and governmental institutions may be too weak to support adequate family planning information and service programs

Why Population Work Lost Salience

- **Success** of family planning and declining birth rates
- U.N. projections of population growth ending about 2050
- **Low fertility** in most developed (and a few developing) countries
- The ICPD criticized past population work and advanced a less focused “new paradigm” of reproductive health
- The influence of vocal **anti-abortion activists, conservative religious leaders, and conservative think tanks**
- The **AIDS crisis** suggests that population growth is less important
 - The influx of funds for HIV/AIDS work has co-opted the personnel and attention of many NGOs and health ministries
- **“Donor fatigue”**

Why is Population a Relatively Neglected Aspect of Environmental Preservation Strategies?

- Lack of legal and scientific expertise relating to population issues among environmental advocates, scientists, and organizations
- The perception of controversy, e.g., relating to abortion and immigration
- Fear that engagement on population issues will alienate important political audiences
- Moral dilemmas surrounding North/South dynamics and stemming from America's high rate of consumption relative to the rest of the world

The cost of inaction will be high.

If today's birth rates remain unchanged, world population will grow from 6.7 billion to **11.9 billion** by 2050, threatening social and economic progress and undermining efforts to preserve the natural environment.

Conclusion

- We need to greatly **strengthen the family planning programs** that will slow population growth – especially by helping women avoid unintended pregnancies.
- Increased **access to family planning** in developing countries, combined with **measures to reduce consumption** in the U.S. and other wealthy nations, offers a powerful strategy for helping curb climate change and ensure environmental sustainability.