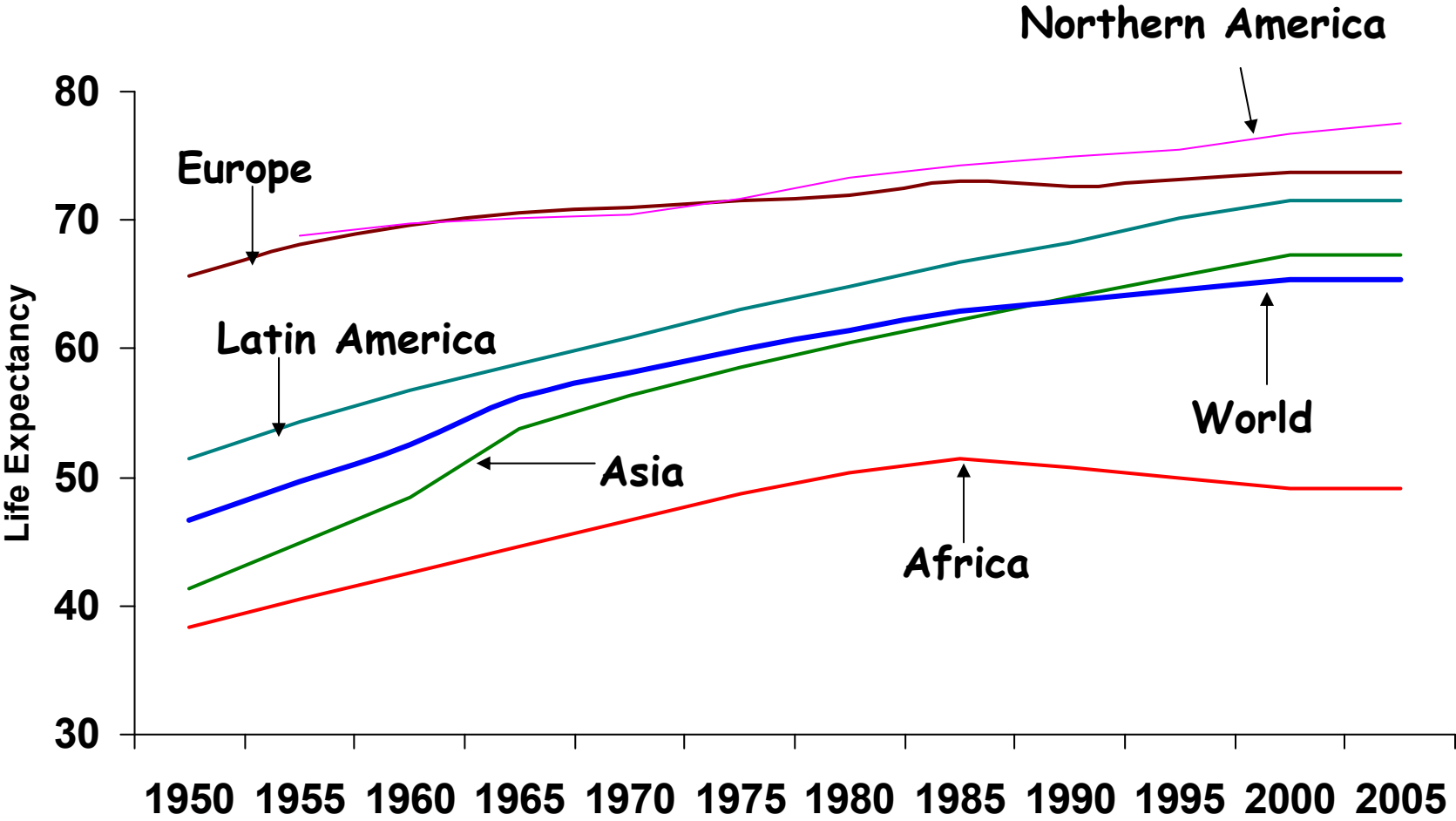


# **Demographic Diversity and its Implications for the Future**

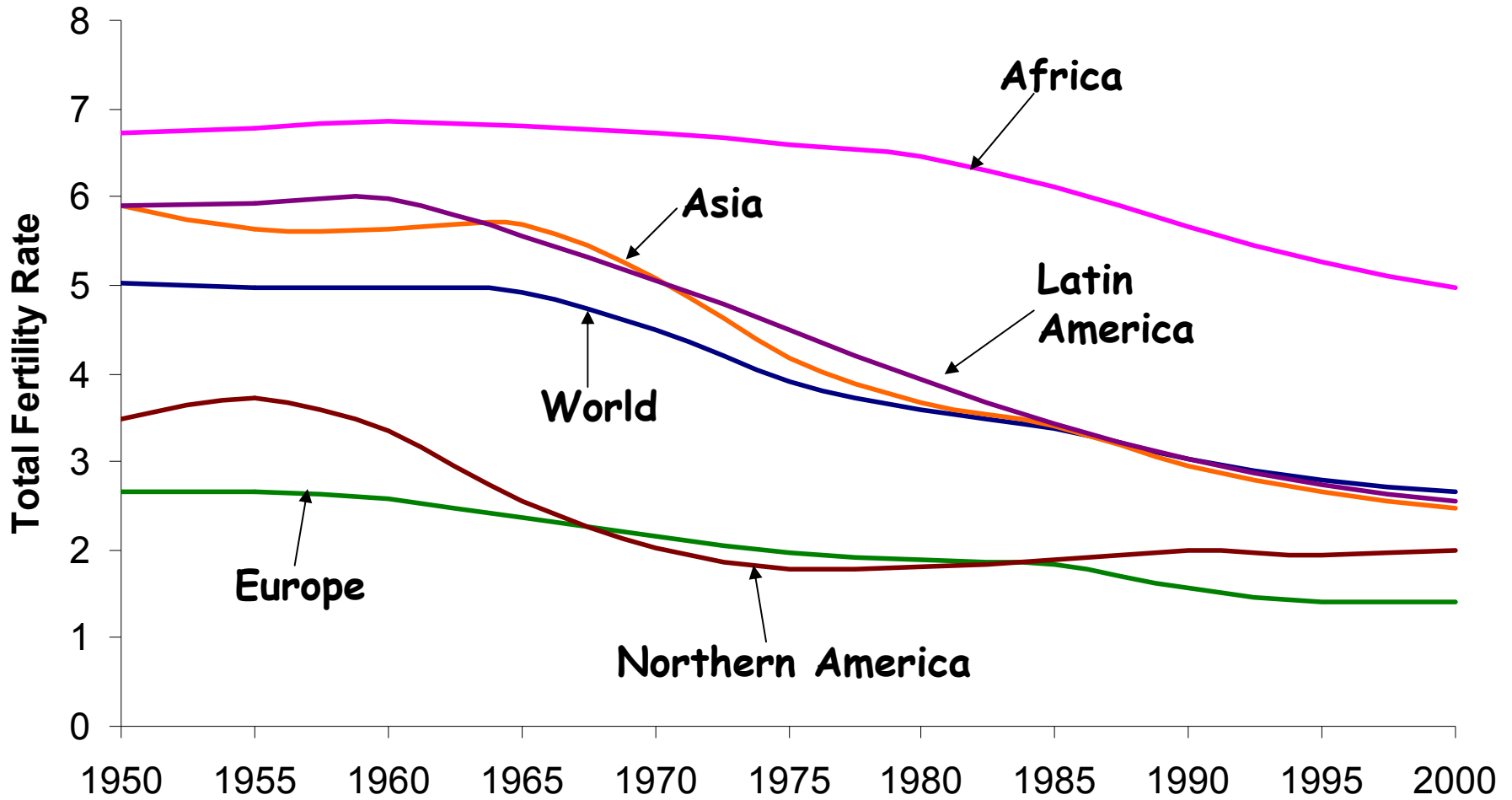
**John Cleland**

**London School of Hygiene & Tropical  
Medicine**

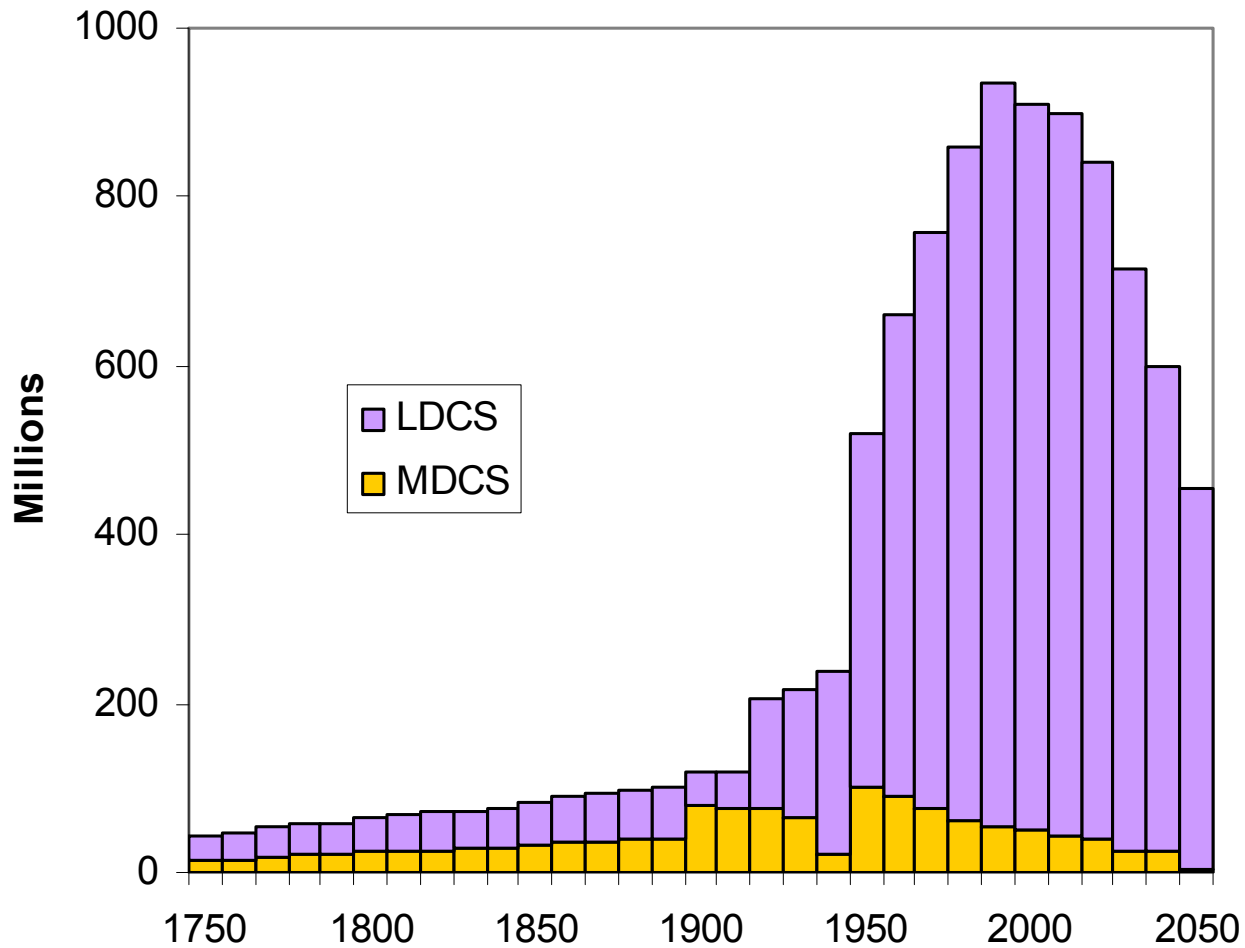
# Life Expectancy Trends 1950-2005



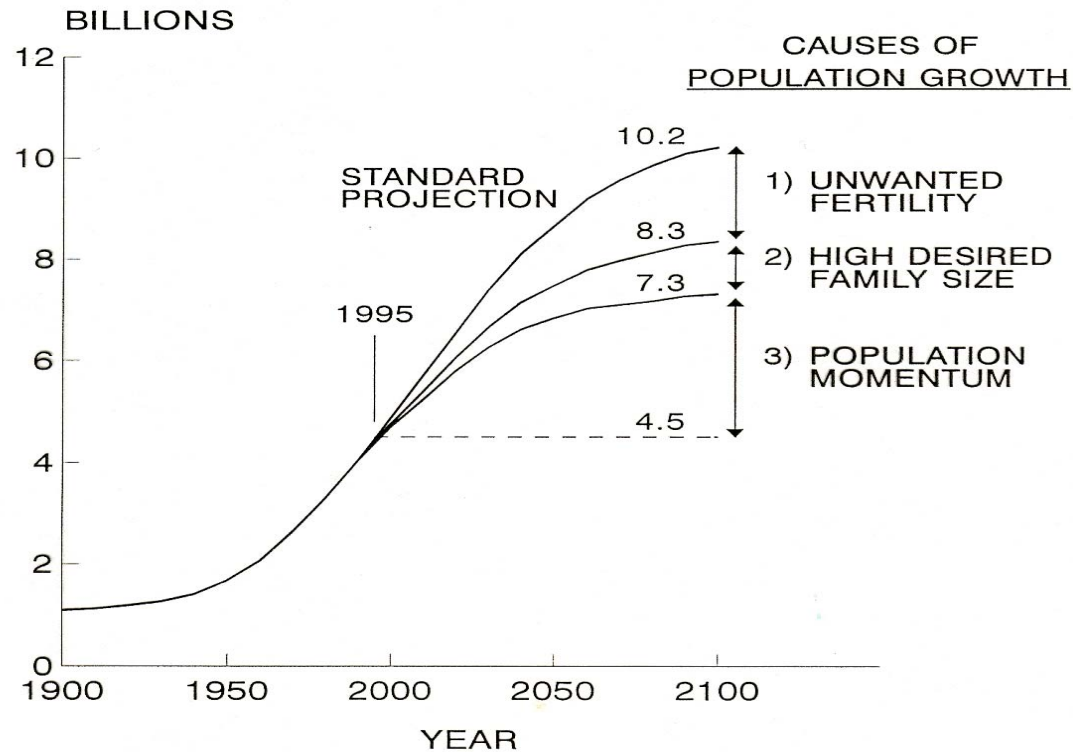
# Fertility Trends 1950-2000



# Increase in Population by Decade, in Millions



# Major Causes of Projected Population Growth: Developing Countries, 1995-2100



Source: Bongaarts J. *Science* 263:771-776. 1994

# Estimated Population, 2005 and Projected Population 2050, in millions

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	<b>2005</b>	<b>2050</b>	<b>Ratio</b>
Sub-Saharan Africa	751	1692	2.25
North Africa	191	312	1.63
Latin America	561	783	1.39
Asia	3905	5217	1.34
Northern America	331	438	1.32
Europe	728	653	0.90
World	6465	9076	1.40

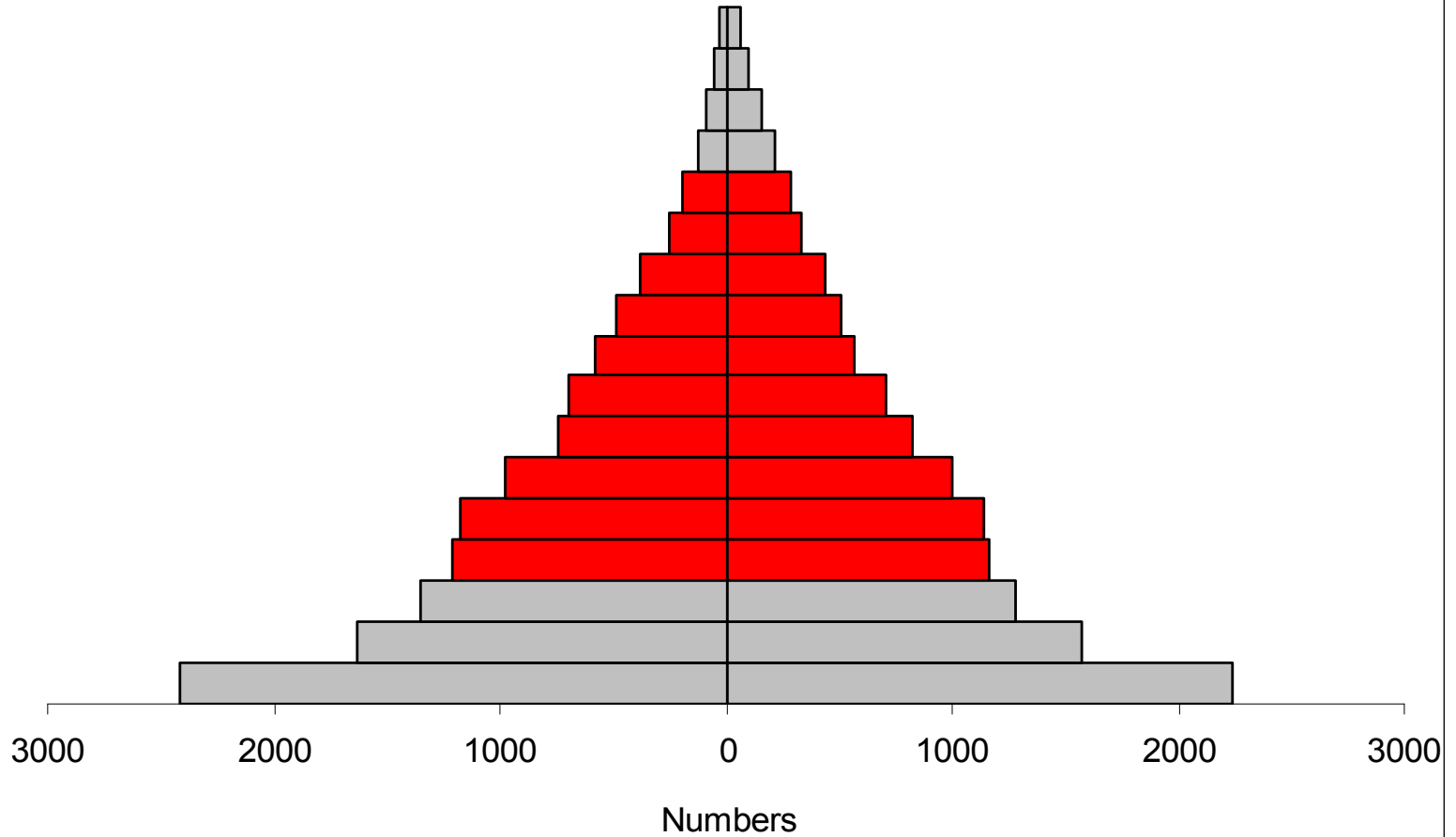
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*Source:* UN Population Proj. 2004

# Graph A: Korea 1960

Males

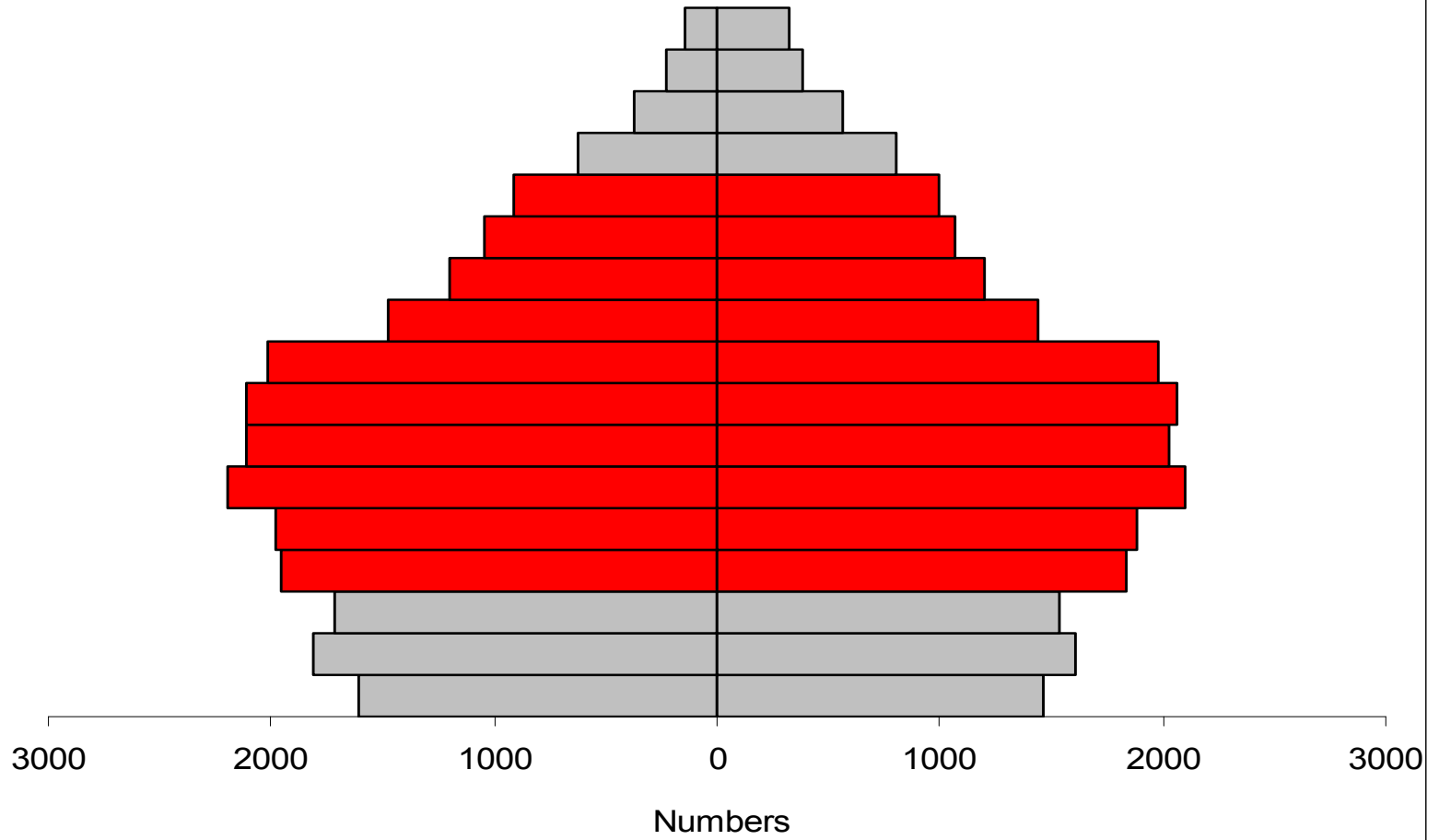
Females



# Graph B: Korea 2000

Males

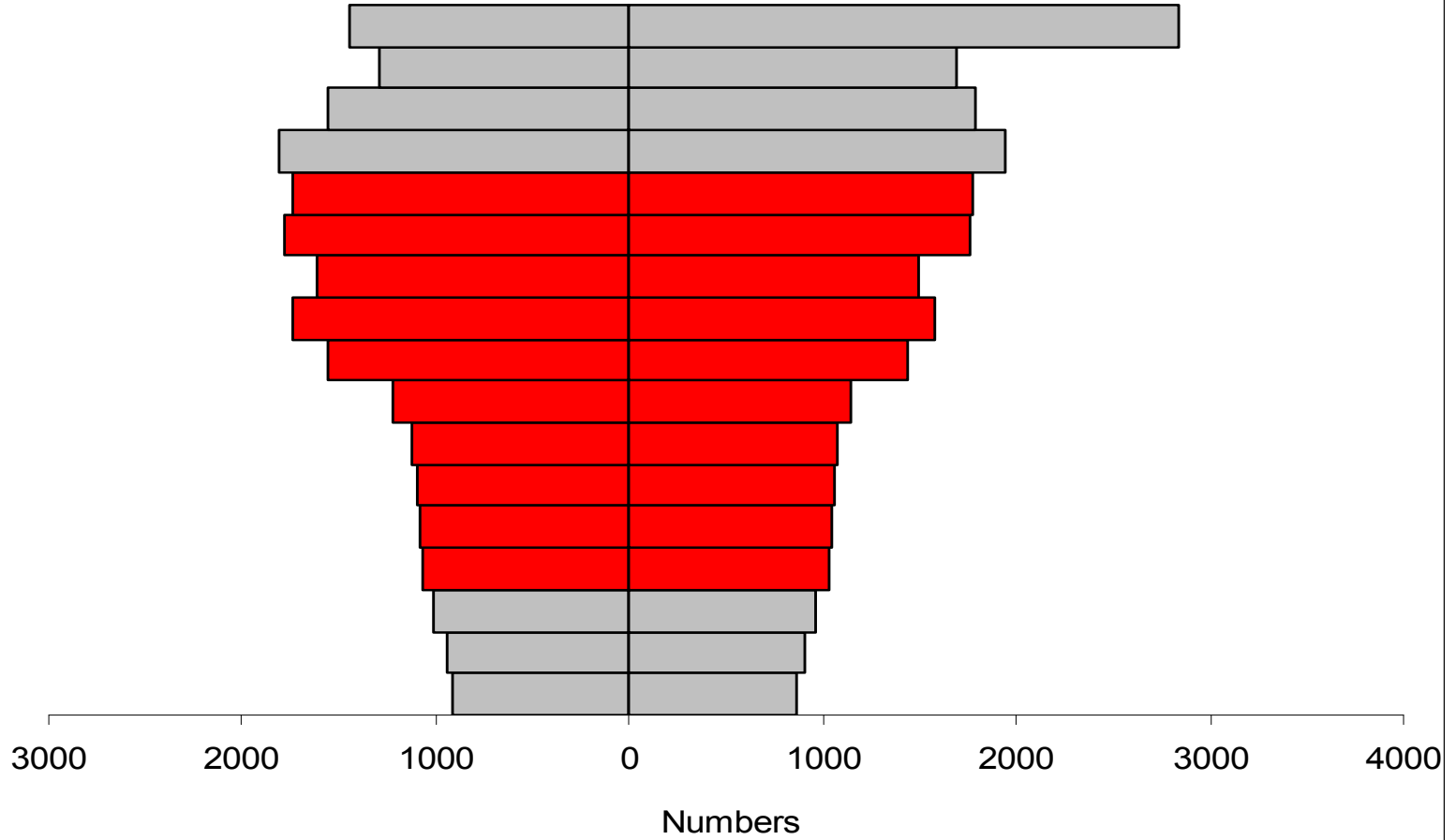
Females



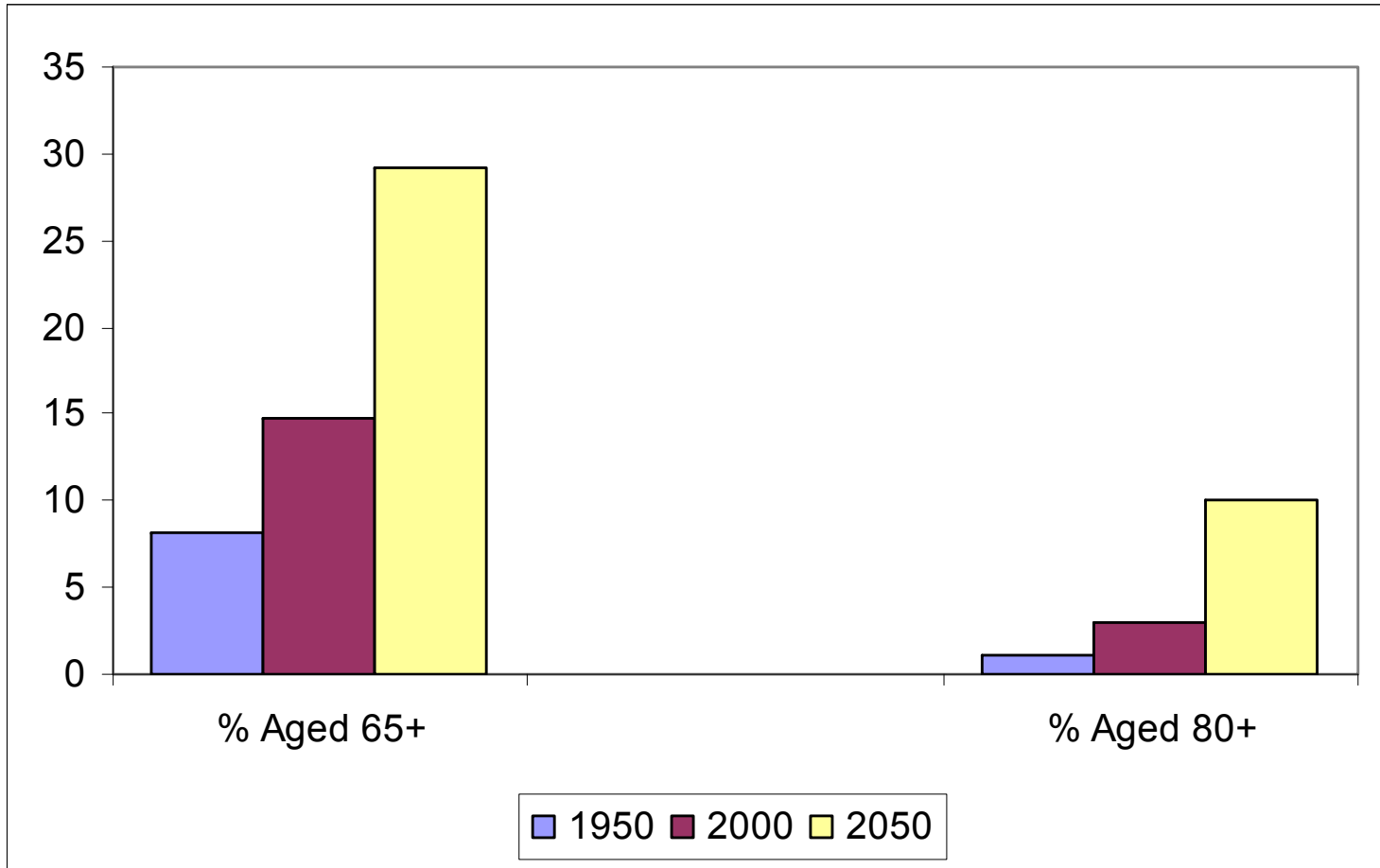
# Graph C: Korea 2040

Males

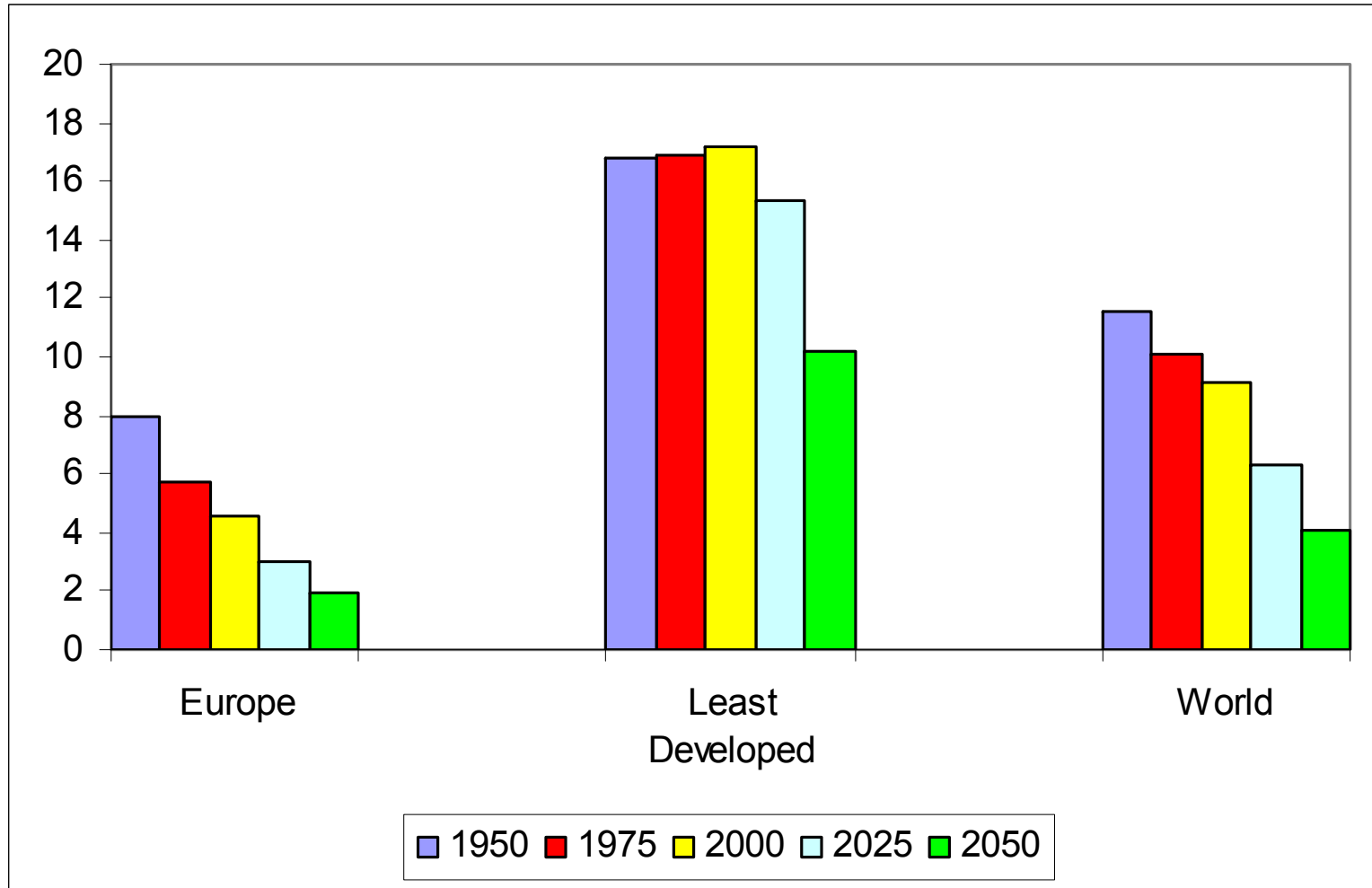
Females



# Population Ageing in Europe



# POTENTIAL SUPPORT RATIO (NUMBER AGED 15-64 /AGED 65+)



*Source:* UN. World Population Ageing, 2002

Figure 1: Stable Population Structure, Life Expectancy, 80 years; TFR, 1.5; Mean age at childbearing, 30 years

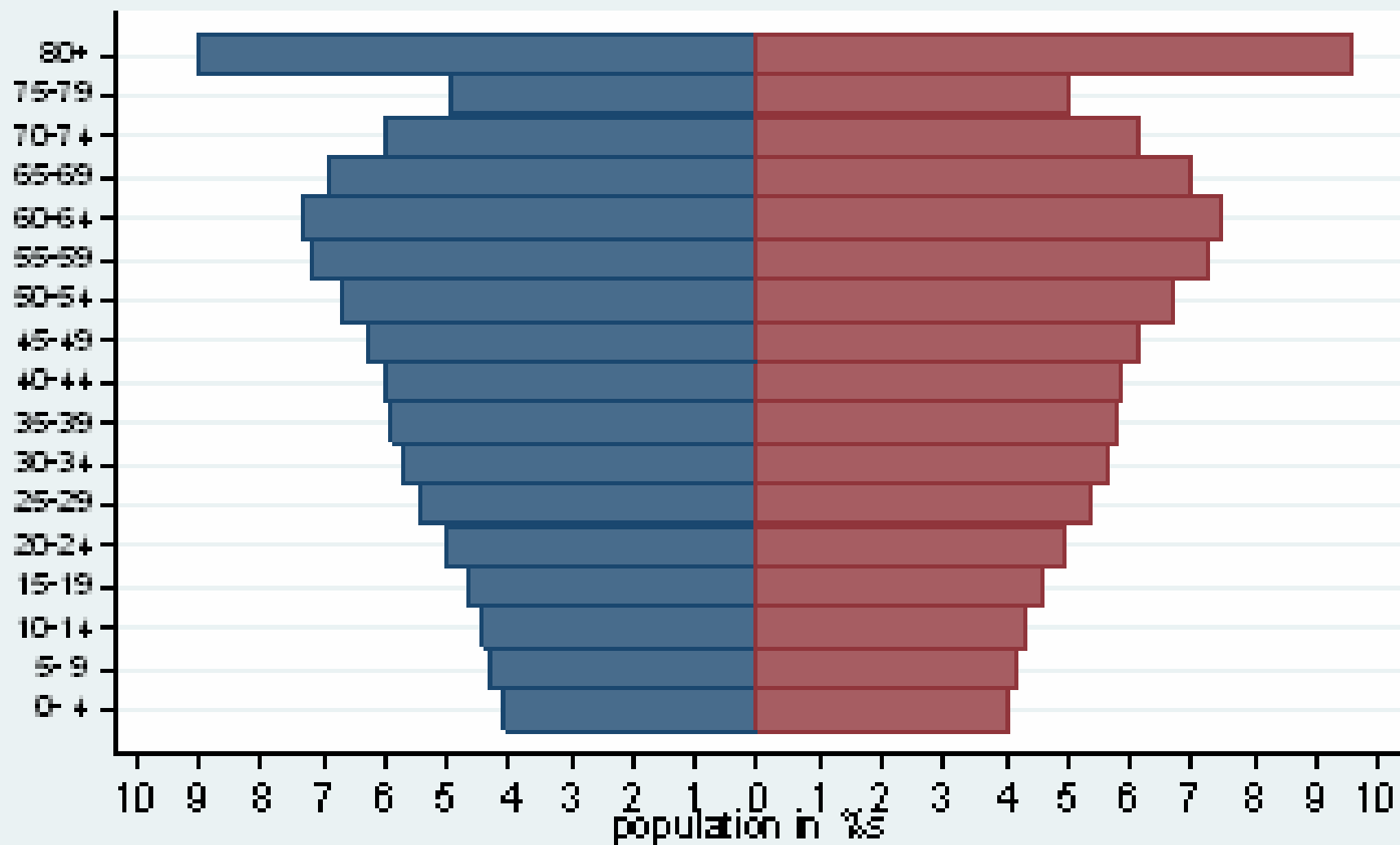
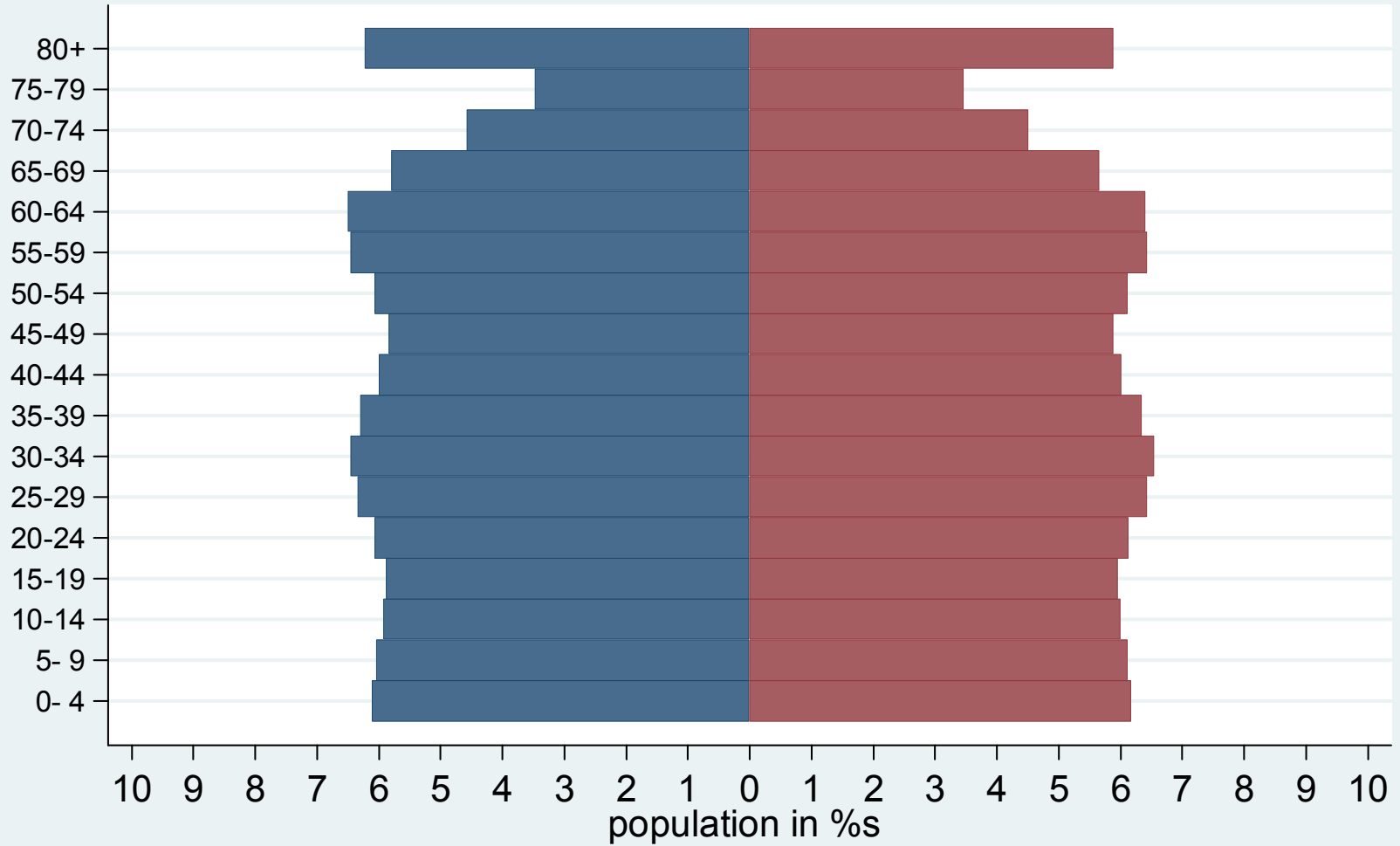


Figure 2: Stable Population Structure, Life Expectancy, 80 years; TFR, 2.0;  
Mean age at childbearing, 30 years



**IMMIGRATION SCENARIOS  
(EUROPE)  
(ALL FIGURES IN MILLIONS)**

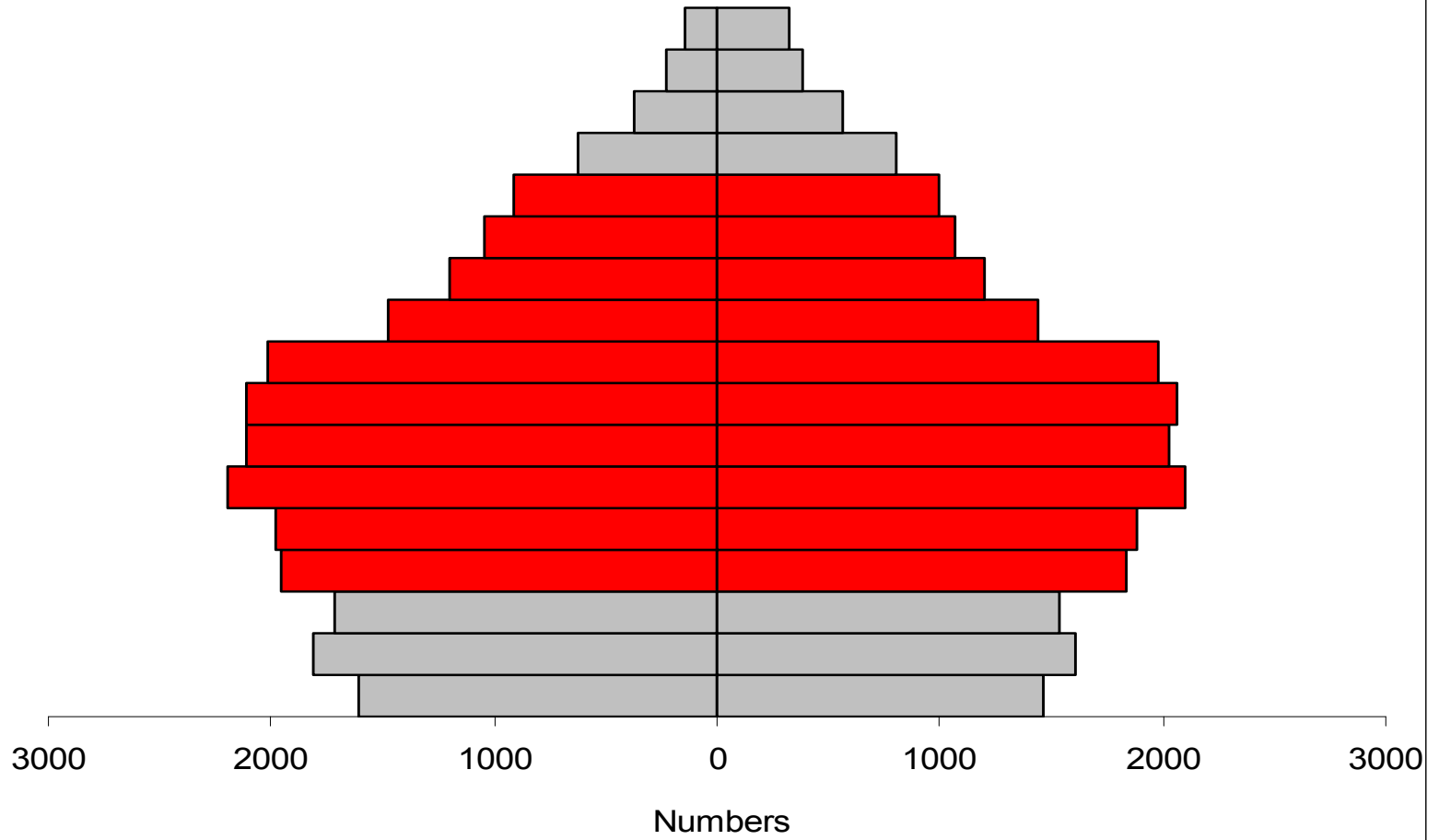
Population Size (2000)	730
Projected Pop. Size assuming no net migration	600
Net Annual Migration (1990-98)	0.95
Net Annual Migration to Keep Constant Pop.	1.82
Net Annual Migration to Keep Constant Age Group 15-64	2.93
Net Annual Migration to Keep Ratio 15-65/65+ Above 3.0	4.27
Net Annual Migration to Keep Constant Ratio 15-64/65+	25.20

(Source: UN Replacement Migration 2001)

# Graph B: Korea 2000

Males

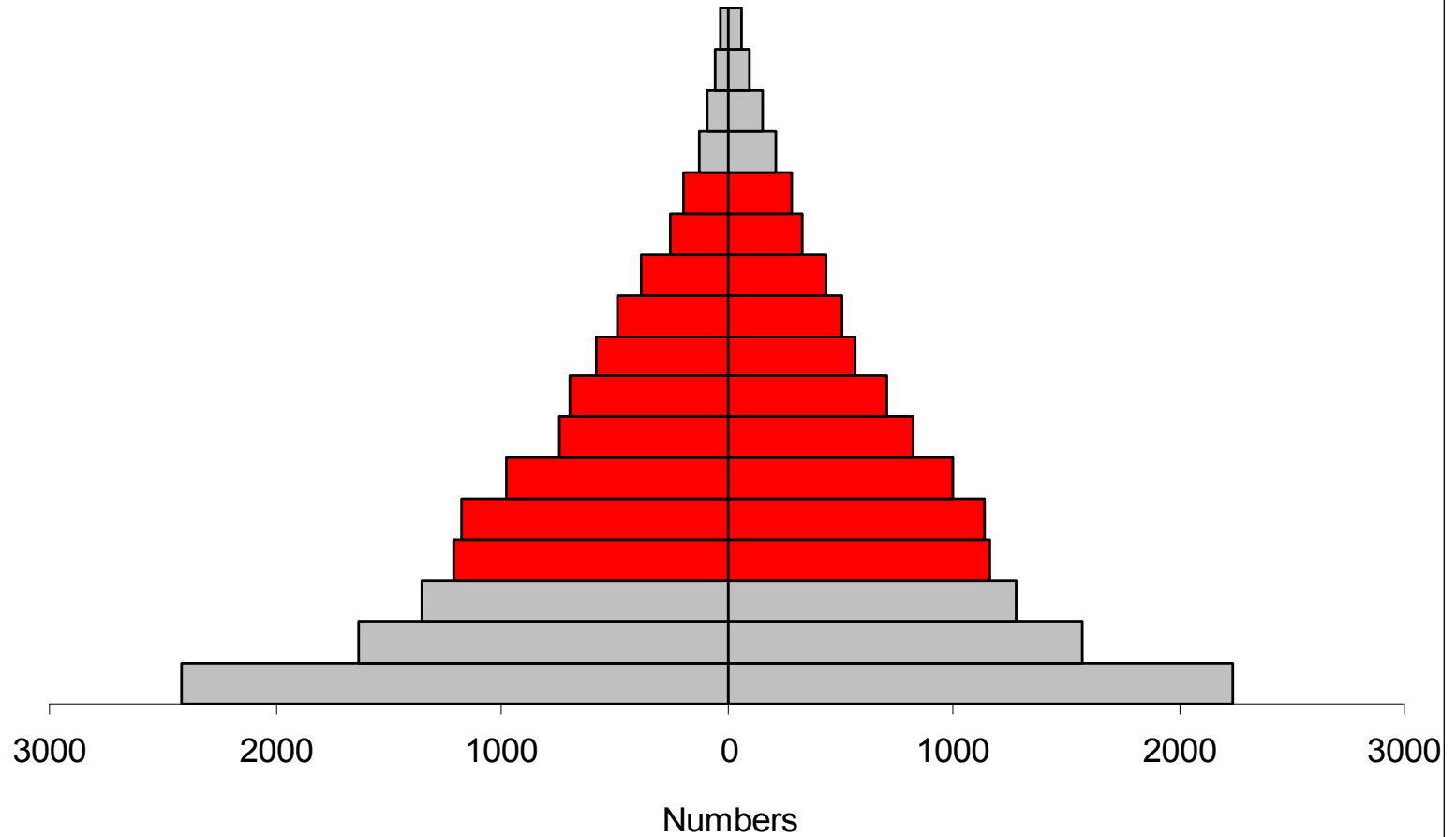
Females



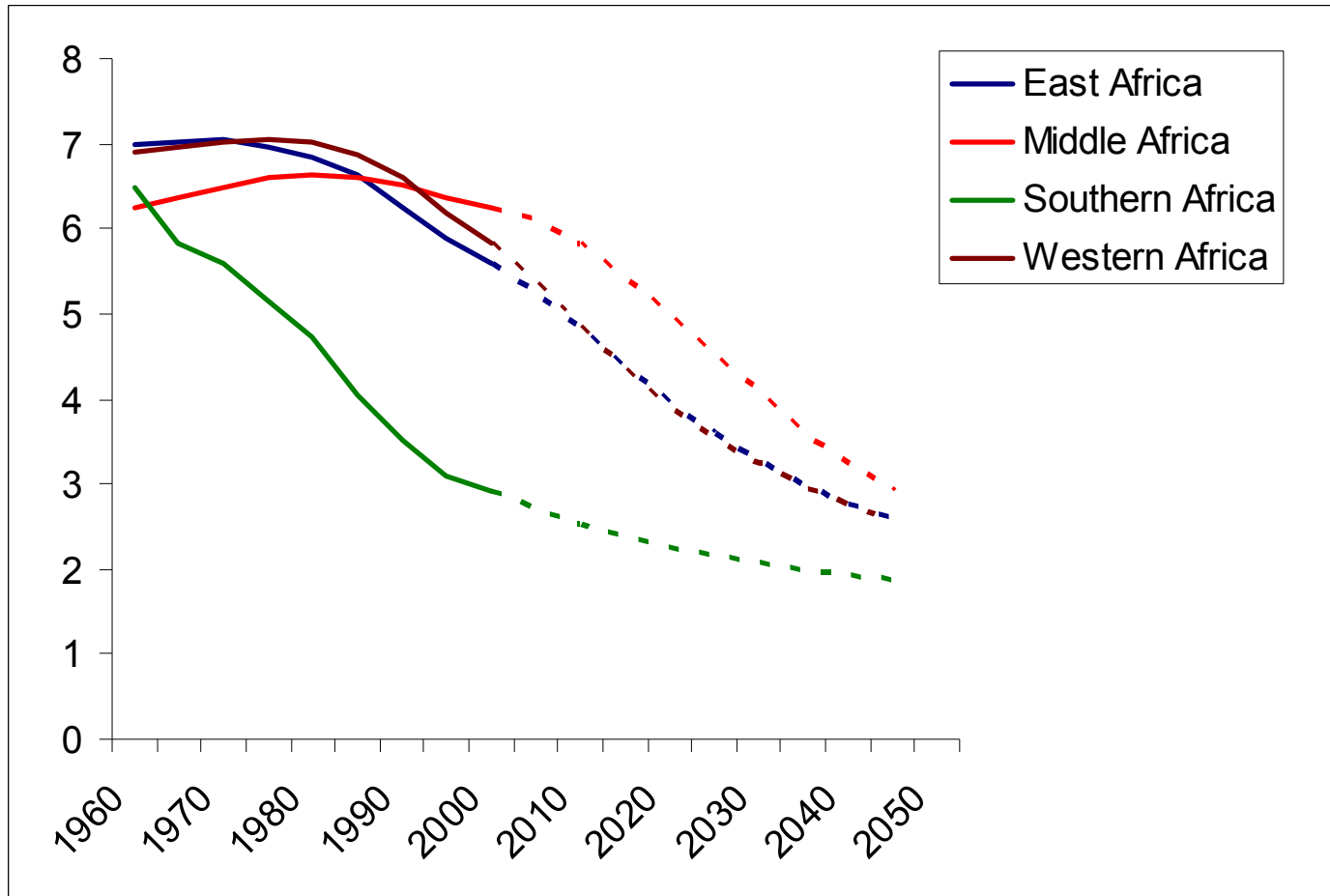
# Graph A: Korea 1960

Males

Females



# African Fertility Trends (Past & Projected)



# Percentage of currently married women using a modern method of contraception: West Africa

Country	PERIOD						Policy to Reduce Fertility
	1975-79	1980-84	1985-89	1990-94	1995-99	2000+	
Benin		1			3	7	-
Burkina Faso				4	5	9	✓
Chad					1	2	-
Côte d'Ivoire		1		4	7		✓
Gabon						12	-
Ghana	6		4	10	13	19	✓
Guinea				5	4	6	✓
Liberia			6				✓
Mali			1		5	6	✓
Mauritania		0				5	-
Niger				2	5	5	✓
Nigeria		1		4	9	8	✓
Senegal	1		2	5	8	10	✓
Togo			3		7	9	-

# Mean desired family sizes among all women (African surveys)

Country	PERIOD					
	1975-79	1980-84	1985-89	1990-94	1995-99	2000+
Benin	7.4				5.5	4.9
Burkina Faso				5.7	5.7	5.6
Chad						8.9
Côte d'Ivoire	8.4			5.5	5.4	
Gabon						4.9
Ghana	6		5.3	4.4	4.3	4.4
Guinea					5.7	5.6
Liberia			6			
Mali			6.9		6.6	6.2
Mauritania						6.2
Niger				8.2	8.2	
Nigeria		8.3		5.8	6.1	6.7
Senegal	8.3		6.8	5.9	5.3	5.4
Togo			5.3		4.5	



# Niger

Population (2005)	14 million
Total Fertility Rate	8 births per woman
Desired number of children	8
% using modern contraception	4%
Life expectancy	45.4 years
Infant mortality	145
Adult literacy	16%
% child stunted	38%
HIV prevalence	1.2%
<i>Projected population in 2050 if</i>	
(a) Fertility remains constant	80 million
(b) Fertility declines to 3.6 by 2050	50 million

## Probable Consequences

- Inability to feed population → continued dependence on food aid and/or famine
- Destruction of local ecosystems due to overgrazing etc
- Continuation of mass poverty, underemployment
- Continuation of dependence on international aid

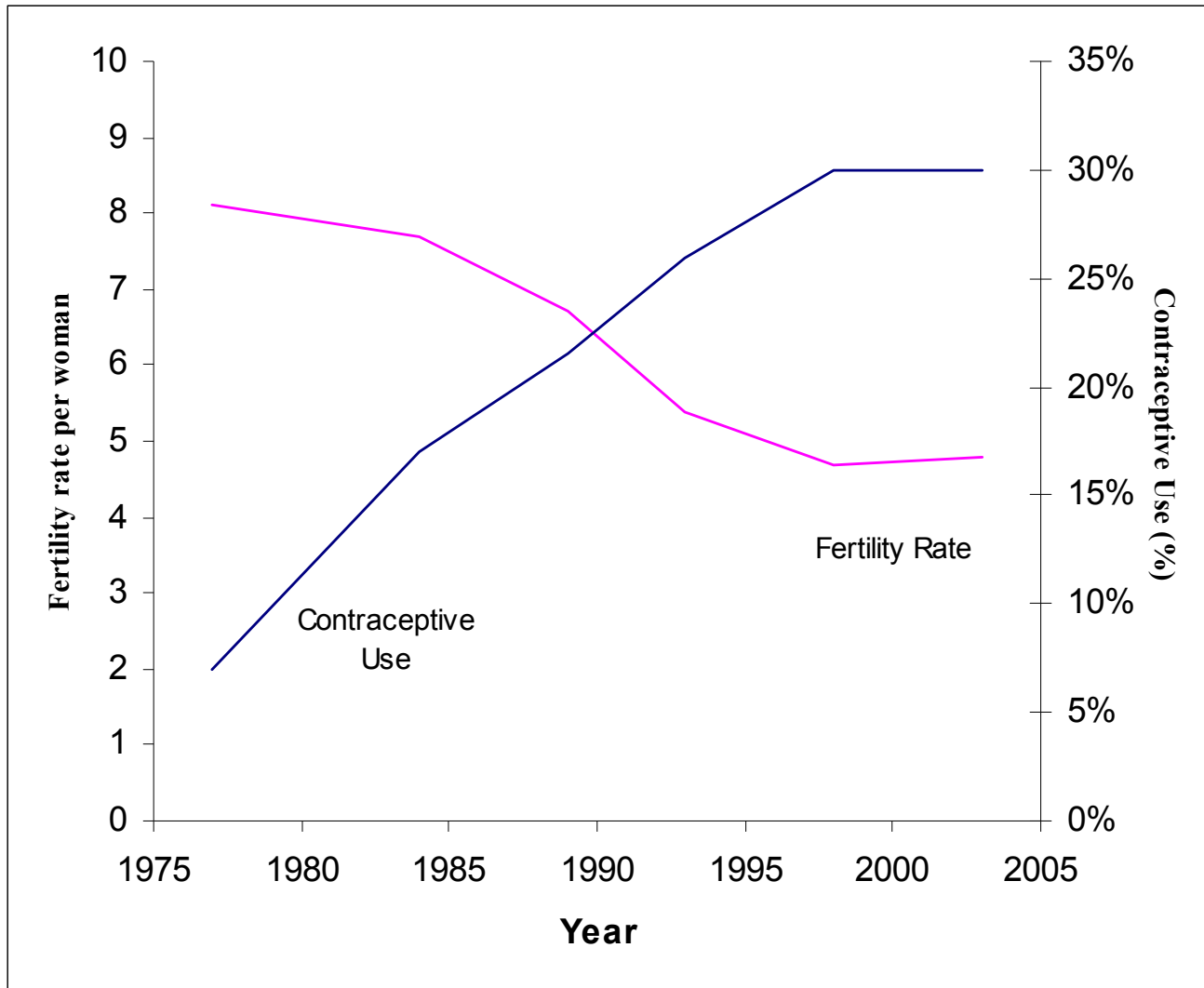
# Possible means of Mitigation

- Uranium mining
- Mass migration to neighbouring coastal states
- Remittances from migrants to Europe
- Attraction of global capital/skills for manufacturing with low cost labour
- Achieve sharper than expected fertility reductions

# Kenya: Changes in Reproductive Indicators

	1977-78	1984	1989	1993
<b>Mean desired family size</b>	<b>7.7</b>	<b>6.2</b>	<b>4.7</b>	<b>3.9</b>
<b>% wanting no more children</b>	<b>16%</b>	<b>N/A</b>	<b>49%</b>	<b>52%</b>
<b>% contracepting</b>	<b>7%</b>	<b>17%</b>	<b>27%</b>	<b>33%</b>
<b>Fertility rate</b>	<b>8</b>	<b>7.7</b>	<b>6.7</b>	<b>5.4</b>

# Trends in total fertility rate and contraceptive use in married Kenyan women



# **KENYA: CAUSES & CONSEQUENCES OF FERTILITY STALL**

**CAUSE(?)** Between 1995-2005 USAID's Annual allocation for family planning fell from \$12 million to \$9 million while HIV/AIDS allocation rose from \$2 to \$74 million

**CONSEQUENCES:** % unwanted births rose from 11% (1998) to 21% (2003) and % contraceptive users relying on public sector supplies fell from 68% to 53%

**KENYA'S PROJECTED POPULATION IN 2050 RAISED FROM 44 TO 83 MILLION**

# DISTRIBUTION OF 76 LOW AND LOWER-MIDDLE INCOME COUNTRIES BY RATE OF POPULATION GROWTH AND UNMET NEED FOR FP

	Unmet Need		
	Low (<10%)	Medium (10-19%)	High (20%+)
<b>Population Growth</b>			
High (2%+pa)	0	6	26
Medium (1.0-1.9%)	6	13	11
Low (<1.0%)	6	5	3

# Conclusions

- High fertility and rapid population growth remains a severe barrier to progress in many – but not all – poor countries
- Most poor countries already have appropriate population & FP policies
- BUT they have received far too little encouragement and funding from donor agencies to implement them with commitment.
- Donors must take much of the blame – Excessive political correctness? Fads and fashions?
- Renewed emphasis on population stabilisation and FP and respect for reproductive rights are compatible
- International FP needs a champion

# What needs to be done?

- Re-forge link between investment in FP and poverty-reduction that was broken in 1994 at Cairo.
- Stop cloaking FP in that obfuscating phrase “sexual and reproductive health”
- Recognise that priorities in poor countries are increasingly divergent – population/fertility is a bigger problem than AIDS in most of Africa but **not** in Southern Africa.