Dimensions of population and development

Valerie J Hull

Terence H Hull

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Australian Development Studies Network

Australian National University

GPO Box 4

Canberra ACT 2601

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Valerie J Hull[1]
Terence H Hull[2]

Preface

This paper was delivered on World Population Day, July 11, 1991 to the United Nations Association of Australia in Canberra. At the time of writing, Valerie Hull was a visitor with the Child Survival Project of the ANU.

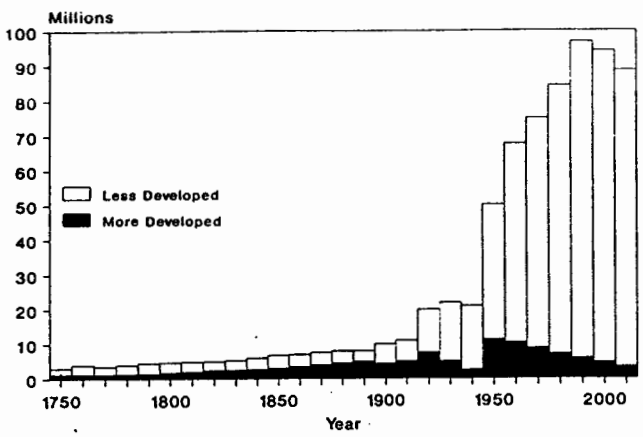
Population and development: macro-level issues

Most descriptions of the macro-level issues of population and development inevitably begin with the litany of statistics about population growth. There can be at least two problems with this. First, it gives the impression that it is numbers, not people, that are important. Second, there is a danger that overexposure to these numbers can make them lose the impact they should have.

Even though most of us might be more comfortable discussing non-quantitative issues of population, we need to come to grips with the actual magnitude of population growth and population momentum in order to understand the nature of the challenges posed by unprecedented expansion of human numbers.

The rate of population growth of the world actually slowed somewhat in the latter half of the 1980s but, given the huge population base, in *absolute numbers* we will be adding more people every day in the 1990s than ever before. *A quarter of a million* people are added to world population every day - between 90 and 100 million people a year. In numerical terms, this is almost equivalent to adding another Nigeria or Bangladesh each year.

Figure 1: Numbers Added to World Population Each Decade, 1750 to 2010



Source: Adapted from data in United Nations World Population Prospects, 1990, p. 21.

If you can remember only one key figure about population growth, remember 250,000 people a day or 100 million additional people a year. In a discussion on dimensions of population and development, that is one dimension in the quantitative sense which all people need to grasp.

By way of comparison, in the 1950s, when people were just beginning to talk about the so-called population explosion, we were adding 50 million people a year. Never in history has the world had to cope with this kind of increase.

The rate of growth is the second statistic which is helpful in understanding population growth. When we hear that a country is growing at a rate of, say, 2 per cent a year, it doesn't sound like much unless you understand the effect of compounding. This figure of 2 per cent a year means a *doubling* of population in only 35 years.

The useful rule of thumb to find doubling time is to divide the annual percentage growth rate into 70 (technically 69.4). For example, a continuing rate of 2.77 percent per year means a doubling in 25 years - a single generation. Countries with current growth rates above 2.77 percent are listed in Figure 2.

Doubling of population every generation would of course provide incredible challenges for those responsible to plan and invest for health services, schools, and eventually jobs. Yet rates in excess of 3 percent are still found in parts of the developing world - particularly in Africa and the Middle East. In our region such rates are found in the Solomon Islands and Vanuatu.

Conversely, in East Asia the average growth rate is 1.3 per cent per annum, implying a longer doubling time of around 54 years if this growth rate were to continue. These rates are taken from the revised UN figures which were published in 1991.

Growth rates alone are not the whole story, since growth is composed of both natural increase - the balance between births and deaths - and net migration in or out of a nation. For instance, according to the UN, the growth rates of China and Australia are nearly identical, at 1.5 and 1.4 per cent per annum. However China has an unusually low rate for a developing country due to its very strict fertility control policies, while substantial in-migration in Australia has resulted in an unusually high growth rate for a developed country.

Figure 2

Countries with Growth Rates Set to Double Population in Less than 25 Years (ie growth of over 2.8 per cent per annum)

Bahrain - 3.7
Benin - 3.0
Botswana - 3.7
Brunei - 3.4
Burundi - 2.9
Cameroon - 3.3
Cayman Islands - 3.9
Central African Rep. - 2.8
Comoros - 3.5
Congo - 3.2
Djibouti - 2.9
French Guiana - 3.4
French Polynesia - 3.2
Gabon - 3.5
Gambia - 2.9
Ghana - 3.2
Guatemala - 2.9
Guinea - 2.9
Honduras - 3.2
Iran - 3.5
Iraq - 3.5
Ivory Coast - 3.8
Jordan - 3.3
Kenya - 3.6
Kuwait - 3.4
Laos - 2.8
Lesotho - 2.9
Liberia - 3.2
Libya - 3.7
Madagascar - 3.2
Macau - 4.0
Malawi - 3.5
Mali - 3.0
Maldives - 3.2
Namibia - 3.2
Nicaragua - 3.4
Niger - 3.1
Nigeria - 3.3
Oman - 3.8
Pakistan - 3.4
Paraguay - 2.9
Qatar - 4.2
Rwanda - 3.4
St. Helena - 3.3
Saudi Arabia - 4.0
Senegal - 2.8
Solomon Islands - 3.3
Somalia - 3.3
Sudan - 2.9
Swaziland - 3.4
Syria - 3.6
Tanzania - 3.7
Togo - 3.1
Uganda - 3.7
United Arab Emirates - 3.3
Vanuatu - 3.0
Wallis and Futuna - 4.5
Yemen, North - 3.1
Yemen, South - 3.8
Zaire - 3.1
Zambia - 3.8
Zimbabwe - 3.2

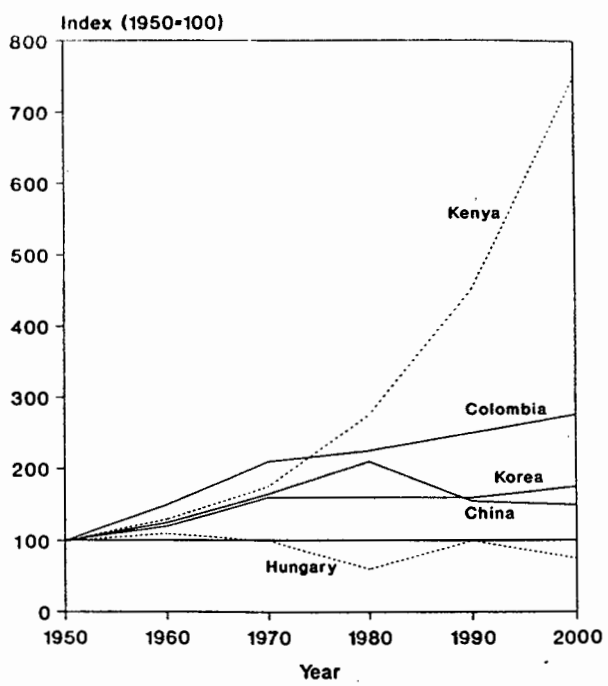
The important thing about these figures on population growth is what they mean for people and the quality of life.

The challenges rapid population growth pose for *education* are well-known, but many do not realize the difference the *rate* of population growth can make.

Figure 3 shows the relative sizes of the school-aged population in a number of countries, comparing the numbers in 1950 and the end of the century. A country such as Kenya, growing at 3.6 per cent a year, faces a school age population at the turn of the century which is 7 times larger than it was in 1950. In Colombia the number of school-age children doubled between 1950 and 1970 but then began to stabilize markedly as fertility declined. In Korea and more dramatically in China, declining fertility has meant much slower growth and even reduction of the numbers of school age children.

We have seen in recent decades that even though tremendous investments have been made in education and other development efforts in the Third World, these investments are diluted by rapid population growth. Despite increased rates of enrollment, the absolute numbers of children not in school continue to rise. It is estimated they will reach 315 million by the turn of the century. The race to provide services such as education to rapidly growing populations has been compared to running up the down escalator. You have to run very fast to maintain upward motion.

Figure 3: Growth Indicies of the School Age Population



Source: World Bank Development Report, 1984, p. 64.

Slowing down the escalator - or slowing population growth - does not imply that you can stop running. Rather it means that your investments in social improvements will be translated more directly into upward progress. Slowing population growth alone obviously does not *automatically* mean improvements in education. Many developing countries are characterized by skewed government spending between sectors, with high proportions of GNP going to military expenditure and large debt burdens. Regressive policies in education which favour higher over lower levels of schooling, and the low status of women in many societies, restrict women's access to education. There are sometimes inappropriate curricula and poor quality of teaching. These are all issues which need to be addressed through more progressive policy efforts to ensure that nations run as hard as they can up the escalator. No matter how well or poorly the government sets education and other welfare priorities, rapid population growth presents a fundamental challenge which makes development much more difficult. It means extending available resources ever more thinly to meet the basic demands of the growing population. It also means a smaller proportion of the investment is available for improving the *quality* of that education.

This seems like common sense, so what makes the topic of population sometimes controversial? There is always a danger that the population issue is reduced to a single goal of controlling numbers which becomes virtually an end in itself, rather than a means to an end. And this is more than just a conceptual issue - it can lead to a narrow and authoritarian approach to framing and implementing population policy.

Critics from both the Right and Left of the political spectrum are unhappy with the narrow 'demographic determinist' viewpoint. This is apparent today in much of the debate on environmental issues, where some are loathe to highlight population growth for fear of 'blaming the victim' and drawing attention away from other causes of environment problems, particularly the wasteful consumption patterns among the affluent. Over-consumption by the few is posed as an alternative to the notion of a "population problem".

Framing the debate in such confrontational terms is unfortunate, for by criticising the narrow demographic determinists, we might be said to be throwing out the 'baby boom' with the bathwater, ignoring the important challenges of population growth. As the UNFPA has noted: for any given type of technology, for any given level of consumption or waste, for any given level of poverty or inequality, the more people there are, the greater is the impact on the environment. Ignoring the impact of the growth of human populations can also imply an unreflective acceptance of the primacy of the 'rights' of human proliferation over all other ecological, spiritual and material values held by human beings and evident in the beauty and variety of the earth.

If we are concerned with avoiding simplistic demographic determinism, what would an enlightened population development policy look like?

-Overall, it would be based on a recognition of the two-way relation between population and development. Not only do development programs need to consider population factors, but equally, population programs cannot succeed without efforts to raise the quality of life and equitably distribute the gains of development.

-There need to be explicit links between national economic goals and individual welfare goals, with particular attention to women's roles. This implies more attention to the *quality* of family planning and health services.

-Population policies would be grounded in sound analysis of the current and projected situations based on good quality data.

-It would involve not a single-minded preoccupation with population *growth*, but other aspects of population dynamics, including policies on population distribution, urbanization, the control of mortality, responses to changing population age structure and population-environment interactions.

-It would involve coordination among the different sectors of the economy and the society.

-Finally, there would be constant, open international dialogue on the issues, so countries could learn from each other's experiences.

As with economic policies of structural adjustment, a balanced population policy, or in other words a policy of 'demographic adjustment', needs to present a *human face*.

To lose sight of human welfare in promoting population control is self-defeating in terms of ultimate development goals. Increasingly it is being shown that policies and programs which *do* aim at quality services and which keep individual welfare goals in the forefront, are likely to achieve more sustainable demographic change favouring further development.

Is this an unrealistic wish list? The policy goal of integrating population with other development efforts has been around for a long time, but *is* being implemented in many different settings. Forty-five countries already have population policy units within their national planning ministries. It is interesting that within the UN system, the UNFPA is organizationally

integrated in its country programs, being responsible to the UNDP, unlike other specialized UN agencies which tend to run more autonomous programs, with all the problems of competition and overlap which that sometimes implies.

Many other facets of 'the ideal population and development policy' are being pursued in various nations. We cannot deny, however, that probably no country has achieved a perfect program in population, any more than there is perfection in any other facet of development as these are very challenging areas.

In the current financial climate, implementing an enlightened population and development policy *is* a large order. This is one reason behind the calls to increase population aid. Just to meet existing demand for family planning services, for example, has proved elusive. Because of the projected huge increases in reproductive-age population, as well as increased demand for contraceptives, there will be growing demands in this one area alone, even without improvements in quality. It is sometimes regarded as cheaper to implement a narrowly-based authoritarian approach to population than the kind of 'human' policy just described.

International assistance helps to bolster areas which are often neglected: training and technical assistance in policy development and good demographic data collection and analysis. Also needed are social and operational research; assistance in service delivery programs (including management needs); training more women for policy and management roles; and, of course, population education. Research on contraceptive technology is still inadequate. More than half the countries in the world still lack reliable statistics on births and deaths. These are all areas where the international community is playing a role which could be expanded. International dialogue is essential to developing and maintaining the political will necessary to make this happen through collaboration.

Population and development: micro-level issues

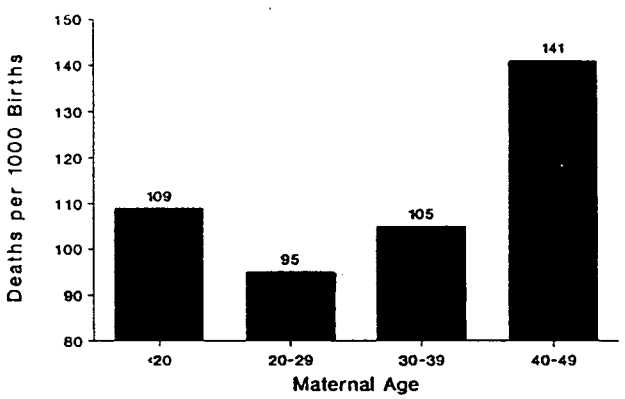
Sound population and development strategies based on concern for quality services delivered in accord with principles of voluntarism have the potential to benefit a group which has traditionally been disadvantaged - Third World women. These strategies will only do so if governments understand this perspective and adopt a sensitive approach to the needs of women. This is true in both a general and more direct sense.

Generally, as countries are better able to free themselves from the frantic 'run up the down escalator', basic education, health and other services can become more widely accessible. As research has shown, this reinforces the trend toward lower fertility. Women who have had access to education, who feel more assured that their children will survive, and who have opportunities for social recognition beyond childbearing are most likely to limit their family size. New economic structures give them new options; new educational systems give them new preferences; and rising incomes and better facilities give them safe, new means of fertility control. These effects of economic and social development is shown to be true in rich countries.

More particularly, the object of development is to produce institutions which can address pressing human needs for health, productivity and knowledge. Control over reproduction is both an obvious means to better health and the common result of falling mortality rates.

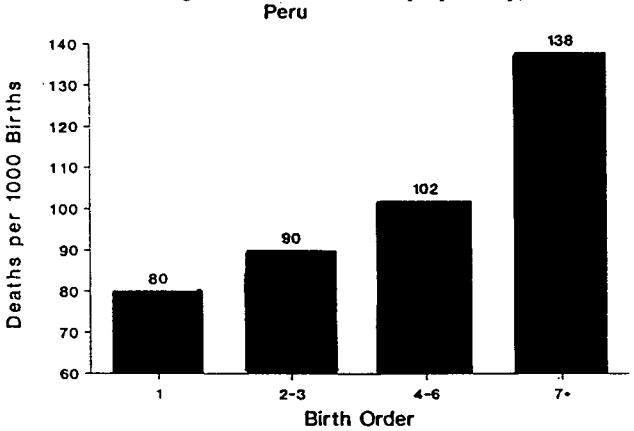
Figures 4-7: Relation between mortality of infants and mothers and maternal age and parity

Figure 4. Infant Mortality by Maternal Age, Peru



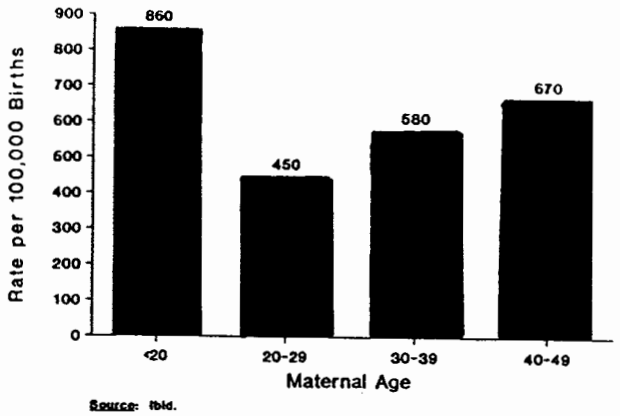
Source: World Bank Development Report, 1984, pp. 128-129.

Figure 5. Infant Mortality by Parity, Peru



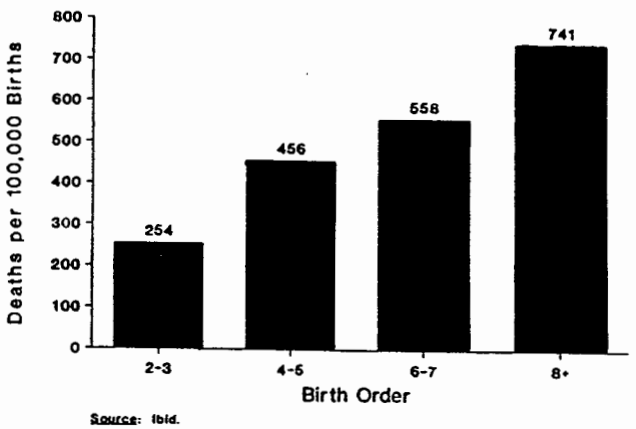
Source: Ibid

Figure 6. Maternal Mortality by Age, Matlab, Bangladesh



Source: Ibid.

Figure 7. Maternal Mortality by Birth Order, Matlab, Bangladesh



Source: Ibid.

The health and survival of mothers and children is facilitated by access to family planning services and advice. For instance, surveys around the developing world have repeatedly shown that early, rapid and late childbearing increases the mortality rates of both women and their babies. Figures 4 through 7 present data for Peru and Bangladesh, but the patterns are typical of the Third World. Maternal mortality in particular is elevated for teen-agers and women who become pregnant in their forties. Many, though obviously not all, of the maternal and infant deaths in the Third World can be prevented through the promotion of later marriage, birth spacing and prevention of high parity births. Many more deaths can be prevented if countries give higher priority to the provision of accessible health services to people of all classes.

Development policies and programs can have an important impact on the formation of family size preferences. But even where development is slow or non-existent, people's view of the world and their place in it is changing rapidly. In the villages of Asia we have been astounded at the rapid pace of social change - with revolutions in personal and social values of a magnitude far outstripping the rates of growth of GNP per capita. These changes are bringing about a total reevaluation of the costs, benefits and value of childbearing.

A few examples may demonstrate the importance of these changes.

In a remote village in Shaanxi province families decided in 1988 that they should act collectively to prevent adolescent children from leaving school to work in fields or a village based brickworks. Education, they reasoned, would be the key to future welfare of the whole village. Moreover, the rules would apply equally to boys and girls. Virtually all the parents taking this decision had themselves received less than 6th class education.

Throughout Java the age at marriage is rising. In previous generations marriages were commonly arranged by parents soon after their daughters reached puberty. Today, communities regard this as 'outdated' (kuno) behaviour, and most marriages are 'love' matches between men and women in their late teens and early twenties. The new patterns have produced much lower rates of divorce, and young couples say that decisions about childbearing should depend on their joint consideration, free from the influence of relatives. This new pattern is accompanied by rising proportions of young women participating in higher education and the formal labour force.

Villagers in Indonesia, Vietnam, the Philippines, Thailand and China, who are subject to incredibly different ideologies, religions and economies, are increasingly forthright in declaring a preference for two or three children. They say they want to provide more opportunities for their children than they had themselves. Growing commitment to education is most impressive, because it reflects their belief that schooling will help prepare their children for a world which is obviously changing rapidly. This change in outlook is occurring even in settings where farmers sweat behind bullocks to plough fields, and rely on very labour intensive forms of trade and manufacture. These are parents with a dream for the future of themselves and their children - a dream that has no history in their culture.

Thus, there is thus a strong case to be made that birth planning at the micro-level is a benefit to the health of both women and children, a key to improving the status and economic options for women, and is also increasingly demanded by people throughout the developing world who are caught up in a rapid change of expectations and familial values.

Critics of population control programs frequently refer to what is perhaps the most often cited study of population and development, produced by the US National Research Council (*Population Growth and Economic Developement: Policy Questions*), and

heavily oriented toward macroeconomic considerations. This report is taken as providing 'negative' proof that data on economic growth do not show a clear benefit from lower rates of population growth. However, in the concluding chapter, after reviewing evidence on the links between population growth and various forms of economic and social development, the authors say:

> There is little debate about the desirability of programs that allow couples access to easy, affordable, and effective means of family planning, even among those who see population growth as a neutral or even a positive influence on development.

They go on to argue that when an individual couple's childbearing decision imposes external costs on other families - through overexploitation of common resources, congestion of public services, or contribution to a socially undesirable distribution of income - there may also be a case to go beyond family planning to a system of incentives and taxes. However, the authors add that it is difficult to make a case for drastic financial or legal restrictions on childbearing since these would contradict the personal welfare goals family planning seeks to promote.

This raises the question: Where do the needs of the society and the individual coincide, and where do they conflict?

Resonses to questions about ideal family size in developing countries, especially in Africa, while lower than current fertility still imply much higher than desired fertility than in the case in the developed world, and higher than the levels needed to ensure the stabilization of human population growth within a century.

Opponents of family planning programs suggest that women in developing countries want to have large families, and that it is their and their family's interests to do so. This suggests that international agencies promoting modern contraception are guilty of cultural imperialism.

Evidence of the desire to control fertility goes back as long as recorded history. Himes' classic *History of Contraception* tells of potions, advice and prayers used by all the world's cultures to delay or facilitate conception. Throughout the compendium runs a common thread: the desire to space and prevent pregnancies. The major reason for such teaching through the ages was not merely to facilitate casanovas in illicit relations, but to raise the awareness of the burdens uncontrolled childbearing placed on families, and the threat of repeated pregnancies to women's health and survival.

Recent research tells us more about women's preferences for the timing and number of births. Researchers are sensitive to the notorious difficulty of eliciting feelings about 'ideal family size' on surveys, and have avoided questions which require women to imagine what they might have done if they enjoyed the privilege of controlling their fertility from marriage, if their community had possessed a well equiped clinic, and if their husbands and extended families were respectful of their preferences. Surveyers are left to ask about the current realities rather than the dreams of women.

Nonetheless, the World Fertility Survey determined that in 23 of 28 countries studied, more than a quarter of women currently had given birth to more children than they would have preferred, and up to half the women aged 40-49 would have preferred to prevent their last birth.

It has been estimated that women in developing countries would bear an average of 1.4 fewer children if they had the ability to choose. We can expect that this number would be even higher if women were not at the mercy of poverty and the pressures of patriarchal social structures.

Kenya is a country with a high growth rate. In recent surveys, half of all married Kenyan women said they wanted no more children. Another 26 per cent said they would like to wait at least two years before having another child. Only 27 per cent of Kenya's married women practice birth control. In rough terms, three-quarters of Kenyan women *today* indicate some desire to control their fertility, but only a third of these are able to do so.

By using annual total population growth and ignoring evidence of unmet demand for birth control, many population control advocates argue that national governments should take steps to reduce fertility to levels lower than those preferred by their citizens. China is an obvious case where this is happening today, through the famous 'one-child per couple' policy. The Chinese government has mobilized a wide range of social forces and economic pressures, to force citizens to limit family sizes to one, or at most two children. However, surveys show that parents would prefer to have at least two or possibly three children, at least one of whom should be a son. Is the State justified in taking such actions to control individual preferences, even on the grounds of protecting group welfare in future?

The Chinese government justifies its action on a number of grounds. These include assertions that high rates of population growth endanger an already crowded economy and environment, and that parental decisions to have large families compromise the welfare of future generations. Thus, the government calls for sacrifice by the current generation to guarantee the resources needed for billions yet unborn. Despite these ambitious pronouncements and strict authoritarian regulations, it is ironic that the Chinese family planning program is not regarded as providing a high quality service. There is

evidence of inadequate birth control education and supplies, and a very limited range of contraceptive options available to most women. In this case the State is playing an active role in population control, but provides inadequate services for family planning.

To clarify this distinction between population control and family planning goals, it might help to look at the exact wording of reproductive rights adopted by the UN, which is: 'the right to decide freely and responsibly the number and spacing of one's children, and to have the information, education and means to do so'.

While the Chinese government concentrates on the rights of the community to control fertility, the UN statements refer to the rights of individuals to make decisions. It is arguable that in *most* areas of the world, responsible individuals - and women in particular - do not enjoy the *right to decide* in the fullest sense. Women are not free and responsible if they are forced to have a large family because they fear the death of their children in infancy, any more than they could be considered free and responsible if they are directed to limit their fertility through compulsory use of specific methods of birth control.

In much of the world children are the only means available to women to achieve status or security, and an absolute necessity if they need sons to satisfy their husband and extended family. Even without the intervention of the State, individuals often find their fertility preferences contradicted by the influences of other community members. Without the education and social options to provide alternatives to traditional institutions of patriarchy, women's choices can hardly be called free.

One could also argue that those who have children without awareness and full consideration of the implications of their high fertility for the wider community are not acting *responsibly*. This is what the National Research Council refers to as 'external costs' which couples place on the community if their childbearing contributes to an overexploitation of resources.

Similarly, those who must consider having a child in the context of inaccessible or inadequate health and family planning services are being denied their full rights. Under such conditions it is not sufficient to simply contrast individual choice and State intervention. The real question is how the State can best ensure that information and services are available to facilitate individuals in making free and responsible decisions on childbearing. The role of the State is not the setting of 'rules' of reproduction, but the creation of an appropriate environment for responsible decision-making, and the provision of the means to implement those decisions freely and safely.

Recent research has been directed at examining why people who know about family planning and say they want it, do not use it. The answer is unsettling to many committed family planners. People were sceptical of the efficacy and safety of the methods provided by government birth control programs. In short, they wanted better quality services. In facing up to this issue investigators have been finding something that should be common sense: higher quality population and family planning services in developing countries lead to higher rates of use of contraceptives. A satisfied customer is a regular consumer, in family planning as in other areas of life.

Quality programs *can* cost more in terms of better quality supplies, more variety, better trained staff and more systematic and caring follow-up. The word 'can' should be stressed here because many resources are consumed by population control efforts in the form of administrative mobilization of community pressures beyond basic educational needs, and the involvement of huge numbers of staff who have little to do with the provision of actual family planning services. Under some conditions, a commitment to quality and an abandonment of inefficient pressures and administrative sanctions might actually lead to less costly programs. Such programs would also have the advantage of building on the commitment and satisfaction of individuals, and would thus be more sustainable over the long run.

A quality program - and we should specify that this means a voluntary approach providing a full range of contraceptive methods and related services - will in most settings require three innovations.

1. It requires a reorientation to a 'client-centred' approach where the needs and desires of the woman or man take precedence.

2. It requires mass education, as distinct from propaganda or sloganeering, in the full range of family planning options, rights and responsibilities.

3. It requires increased investment in birth control supplies, primary service provision points, and networks of specialized services for referral and follow-up.

Though it must be the responsibility of the community to define and develop the strategy most appropriate to meet these three requirements, there is an obvious need for foreign donors to help most developing countries in addressing the problem. In most areas of the world the bulk of such aid would take the form of technical assistance to help with program development. Obviously for a long time there will be the need for supplies and equipment and perhaps even assistance in the 'printware' of pamphlets, guides, and reproductive education materials.

Above all, 'quality' is a question of commitment. International agencies, governments and program staff need to respond to internationally recognised reproductive rights, and through this commitment become responsibile for providing high quality family planning services. This is the thrust of numerous UN conventions and conferences, and the mandate of the UNFPA, over the past two decades.

For the past two decades the UN has promoted family planning as a key element of an international agenda dedicated to peace, development and human rights. The UN agencies have stressed the importance of individual awareness of the ongoing destruction of ecosystems and resources, and the dangerous combination of growing human populations and growing per capita consumption in this process. Family planning is promoted as the means to both enhance individual welfare and reduce population growth rates. For this to succeed it is necessary for all people everywhere to be guaranteed education, full family planning information and high-quality, comprehensive contraceptive services. In this sense, family planning is a basic human, indeed a humane, right and responsibility which deserves our fullest support as a nation and our commitment as individuals.

[1]*Valerie J Hull, Visitor, Child Survival Project, ANU.*

[2]*Terence H Hull, Department of Political and Social Change, ANU.*