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REVIEW AND APPRAISAL OF PROGRESS MADE TOWARDS THE IMPLEMENTATION OF THE WORLD POPULATION PLAN OF ACTION

Fourth review and appraisal of the World Population Plan of Action

Report of the Secretary-General

#### SUMMARY

The present report presents the results of the fourth quinquennial review and appraisal of progress made towards achieving the goals and objectives of the World Population Plan of Action.  $\underline{1}$ / The findings of the review and appraisal of the Plan have been used by the Economic and Social Council to make the necessary modifications in the goals and recommendations of the Plan. The present report focuses on 30 selected population issues. The report provides an overall assessment of the level of implementation of the World Population Plan of Action and appropriate background information on population trends and policies that would help facilitate the deliberations at the International Conference on Population and Development in September 1994. The report has also provided important input in the preparation of the draft Programme of Action of the Conference.

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#### CONTENTS

			<u>Paragraphs</u>	Page
INTRO	DUCTION		1 - 6	6
I.		OBJECTIVES OF THE WORLD POPULATION	7 - 9	7
	Issue No. 1:	Individual rights and responsibilities versus societal goals and objectives .	8 - 9	8
II.		DEVELOPMENT, THE ENVIRONMENT AND	10 - 46	9
	Issue No. 2:	Attainment of the development goals of the International Development Strategy for the Fourth United Nations	11 00	0
		Development Decade	11 - 29	9
	Issue No. 3:	Population, the environment and development	30 - 46	15
III.	GENDER EQUALIT	Y AND EMPOWERMENT OF WOMEN	47 - 66	22
	Issue No. 4:	Achieving gender equality	48 - 55	22
	Issue No. 5:	Women's education and its demographic impact	56 - 66	24
IV.	THE FAMILY: I	TS ROLES, COMPOSITION AND STRUCTURE	67 - 82	27
	Issue No. 6:	Diversity of family structures and composition	68 - 77	27
	Issue No. 7:	Socio-economic support to the family .	78 - 82	30
v.	POPULATION GRO	WTH AND STRUCTURE	83 - 109	33
	Issue No. 8:	Diversity of rates of population growth	88 - 97	38
	Issue No. 9:	Changes in the population structure	98 - 109	40
VI.		IGHTS, REPRODUCTIVE HEALTH AND FAMILY	110 - 142	45
	Issue No. 10:	Diversity of reproduction patterns and policies	111 - 126	45
	Issue No. 11:	Availability and access to family planning	127 - 137	53

## CONTENTS (continued)

			<u>Paragraphs</u>	Page
	Issue No. 12:	Adolescents	138 - 142	59
VII.	HEALTH AND MOR	TALITY	143 - 187	61
	Issue No. 13:	Goals and targets in morbidity and mortality	144 - 160	61
	Issue No. 14:	Maternal mortality	161 - 175	66
	Issue No. 15:	Acquired immune deficiency syndrome (AIDS)	176 - 187	70
VIII.		TRIBUTION, URBANIZATION AND INTERNAL	188 - 204	74
	Issue No. 16:	Population growth in large urban agglomerations	193 - 204	75
IX.	INTERNATIONAL	MIGRATION	205 - 235	79
	Issue No. 17:	Documented migrants	209 - 214	81
	Issue No. 18:	Undocumented migrants	215 - 219	83
	Issue No. 19:	Refugees	220 - 235	84
Х.	POPULATION INF	ORMATION, EDUCATION AND COMMUNICATION .	236 - 270	89
	Issue No. 20:	Technical population information	240 - 245	89
	Issue No. 21:	Creation of awareness	246 - 270	91
XI.	TECHNOLOGY, RE	SEARCH AND DEVELOPMENT	271 - 299	97
	Issue No. 22:	Balanced programme of data collection	272 - 282	97
	Issue No. 23:	Substantive and operational research .	283 - 299	100
XII.	NATIONAL ACTIO	NN	300 - 348	104
	Issue No. 24:	Integrated approaches for population policies	301 - 315	104
	Issue No. 25:	Management of programmes	316 - 331	108
	Issue No. 26:	Achieving self-reliance	332 - 348	112

## CONTENTS (continued)

XIII. INTERNATIONAL COOPERATION	117 117 124 128
cooperation	124 128
	128
-	
XIV. PARTNERSHIP WITH NON-GOVERNMENTAL SECTORS 375 - 383	
Issue No. 29: Strengthening the partnership with non-governmental sectors	128
XV. MONITORING, REVIEW AND APPRAISAL	130
Issue No. 30: Monitoring, review and appraisal 384 - 394	130
Tables	
1. Major demographic indicators by major area, 1950-2015	34
2. Governments' perception of rates of population growth, 1976-1993	37
3. Governments' policies aimed at influencing the rates of population growth, 1976-1993	37
4. Estimates and projections of proportions of the population under age 15 and age 65 years or over, by major area, 1950-2015	42
5. Age-specific fertility rates for major areas and regions of the world, 1990-1995	48
6. Governments' views on fertility levels, 1976-1993	50
7. Aim of Governments' policies to influence fertility levels, 1976-1993	50
8. Grounds for permitting abortion, 1993	53
9. Average prevalence of specific contraceptive methods, by region, 1990	55
10. Governments' policies concerning access to contraceptive methods, 1974-1993	56
11. Availability of contraceptive services, by region, 1982 and 1989	58
12. Mortality indicators, 1950-2015	62

## CONTENTS (continued)

## Page

13.	Population size of urban agglomerations with 10 million or more in 2010, for the years 1970, 1990 and 2010, and their average annual rate of growth, 1970-1990 and 1990-2010	76
14.	Governments' perceptions and policies concerning level of immigration and emigration, 1976-1993	80
15.	Expenditures for population assistance by channel of distribution, 1982-1991	120
16.	Total donor expenditures by programme area, 1982-1990	121
17.	UNFPA's expenditures by programme area, 1975-1991	122

#### INTRODUCTION

The World Population Plan of Action,  $\underline{1}$  / which was adopted by the United 1. Nations World Population Conference, held in Bucharest in 1974, stipulates (para. 108) that a comprehensive and thorough review and appraisal of progress made towards achieving the goals and recommendations of the Plan of Action should be undertaken every five years by the United Nations system. The findings of such reviews and appraisals have been considered by the Economic and Social Council in order to make the appropriate modifications to the goals and recommendations of the Plan of Action. Three assessments previous to the present review and appraisal were undertaken, in 1979, 1984 and 1989. 2/ As a result of those assessments, a total of 117 additional recommendations for the further implementation of the Plan of Action were adopted by the Economic and Social Council. The findings of the second assessment were discussed at the International Conference on Population (Mexico City, 1984) and provided the rationale for a set of 88 recommendations for the further implementation of the Plan of Action which hereinafter will be referred to as the Mexico City recommendations. 3/

2. Normally, the present report would have covered the findings of the fourth review and appraisal only for the period 1989-1994. However, considering that a new programme of action might be adopted at the International Conference on Population and Development in 1994, it has been deemed more appropriate that this report also cover the period following the adoption of the Plan of Action in 1974. The appropriate background information on trends and policies provided by this report, as well as the illustration of the major advances and successes in applying the provisions of the Plan of Action, the lessons learned and issues that have emerged, could help facilitate the deliberations of the International Conference on Population and Development.

3. On the basis of the experience gained from the previous assessments, it was considered useful to focus the report on a selected number of relevant population issues. At its twenty-fifth session, the Population Commission suggested that the fourth review and appraisal should concentrate on a selected number of issues, as had been done for the third assessment. 4/ As a result of various consultations, including a discussion with the members of the inter-agency task force established for the Conference by the Administrative Committee on Coordination (ACC), 30 issues were selected for the fourth review and appraisal. 5/

4. The present report covers the major topics of the Plan of Action, but follows the structure of the draft Programme of Action of the Conference. The structure of the two documents might be better understood if the proposed actions are grouped in three major sets as follows:

(a) The areas that are the subject-matter of the Plan of Action, namely, socio-economic development and population; women; the family; and the major demographic factors, namely, population growth and demographic structures, human reproduction, mortality, population distribution, and internal and international migration;

(b) The planned activities that will affect the subject areas presented in the first set: data collection and analysis, research, provision of services, managerial operations of programmes, creation of awareness and information, education and communication activities, and evaluation of actions;

(c) The different actors that are responsible for the activities in each area: Governments; the international community; non-governmental organizations; the private sector; scholars; and the media, among others.

For each of the topics included in the present report, there is a brief summary of overall trends and tendencies, a description of the most salient issues related to the topic indicating its relevance, actions contemplated by the Plan of Action (if any), measures adopted by Governments and by the international community, and an assessment of the implementation of the Plan of Action.

5. For the preparation of this report, a large number of sources were used. Among the most important were the preparatory activities for the 1994 Conference (namely, the documentation for the six expert group meetings and the five regional population conferences, and the deliberations of the Preparatory Committee for the Conference), as well as products of various activities in the work programme of relevant units of the United Nations system, such as the results of the 1991 biennial report  $\underline{6}$  and the 1993 biennial report  $\underline{7}$  on the monitoring of population trends and policies; the report of the Secretary-General on monitoring of multilateral population assistance (E/CN.9/1994/6); the reports of the Secretary-General on the activities of the United Nations system in the field of population (E/CN.9/1994/5) and on the work of intergovernmental and non-governmental organizations in the implementation of the World Population Plan of Action (E/CN.9/1994/7), and information from the Population Policy Data Bank maintained by the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat (hereinafter referred to as the Population Policy Data Bank), which also includes the findings of the seven Population Inquiries Among Governments.

6. The present assessment, like the three previous reviews, has been carried out by the relevant units of the United Nations system. Owing to stringent budgetary constraints, it was conducted with the utmost economy of resources, by making extensive use of existing facilities and coordinating mechanisms, as recommended by the Population Commission. The report has been prepared by the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat, with valuable contributions from other divisions of the same Department, the regional commissions, the United Nations Population Fund (UNFPA), the specialized agencies and other bodies and programmes of the United Nations system, as well as several non-governmental organizations.

# I. PRINCIPLES AND OBJECTIVES OF THE WORLD POPULATION PLAN OF ACTION

7. The World Population Plan of Action contains a set of principles and objectives (paras. 14 and 15). The two paragraphs setting forth those principles and objectives indicate the rationale for action in the field of

population, the guiding criteria and the expected results to be achieved. This part of the Plan of Action may be perceived as constituting its structural segment, while the set of recommendations refers to the instruments to be used in order to achieve its objectives. The prior three assessments of the Plan of Action have shown that the validity of the principles and objectives are universally recognized by national Governments, the international community and non-governmental organizations. The Economic and Social Council, in its resolution on convening of an International Conference on Population in 1984, decided that the 1984 Conference should work within the framework of the existing World Population Plan of Action, the principles and objectives of which continued to be fully valid.  $\underline{8}/$ 

#### Issue No. 1: Individual rights and responsibilities versus societal goals and objectives

8. During the deliberations at the first and second sessions of the Preparatory Committee for the International Conference on Population and Development, as well as at various sessions of the Economic and Social Council, there were several suggestions that the relationships between individual rights and societal goals be discussed, inasmuch as some specific situations might create ambiguities in the way human rights were recognized and respected. Although the Plan of Action affirms (para. 14) that the formulation and implementation of population policies is the sovereign right of each nation, it is none the less also based on the principle (para. 14 (f)) that all couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so. Individual rights and societal goals may be at odds in some specific circumstances, particularly in periods of rapid social change. In this respect, human reproduction and other demographic phenomena are not so very different from other elements of the reality of social life, where in many instances individuals, whatever their rights, face strong appeals to conform to societal goals. The Plan of Action, however, clearly recommends (para. 29 (a)) that all countries should respect and ensure, regardless of their overall demographic goals, the right of persons to determine, in a free, informed and responsible manner, the number and spacing of their children. The Plan of Action also acknowledges (para. 34) that family size may also be affected by incentives and disincentive schemes, but it emphasizes that if such schemes are adopted or modified it is essential that they should not violate human rights, and rejects any form of coercion.

9. The Plan of Action is also based on the principle (para. 14 (f)) that couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children, and that the responsibility of couples and individuals in the exercise of this right takes into account the needs of their living and future children, and their responsibilities towards the community. Such consideration of the needs and rights of future generations is exactly at the core of the concept of sustainable development. It is also consistent with the widely recognized idea that every right also entails obligations, and that those responsibilities refer to duties not only <u>vis-à-vis</u> other human beings, but also <u>vis-à-vis</u> future generations. In the Mexico City recommendations it was affirmed (recommendation 24, para. 26) that the experience since the adoption of the Plan of Action had suggested that Governments could do more to assist people in making their reproductive decisions in a responsible way; this statement is still applicable, and is relevant to the trends observed in the present decade.

#### II. SOCIO-ECONOMIC DEVELOPMENT, THE ENVIRONMENT AND POPULATION

10. The explicit aim of the World Population Plan of Action is to help coordinate population trends and the trends of economic and social development (para. 1). Population policies and programmes are conceived by the Plan of Action as constituent elements of socio-economic development policies (para. 14 (d)) whose aim is to affect, <u>inter alia</u>, population growth, morbidity and mortality, reproduction and family formation, population distribution and internal migration, international migration and, consequently, demographic structures (para. 15 (c)). The following two issues have been selected to illustrate the level of implementation of the Plan of Action and refer to the role played by the socio-economic transformation proposed by the Plan of Action and the interrelationships among population, the environment and the process of development.

#### Issue No. 2: Attainment of the development goals of the International Development Strategy for the Fourth United Nations Development Decade <u>9</u>/

11. The Plan of Action affirms, as one of its principles, that population and development are interrelated (para 14 (c)). To meet the challenges of development, in the Plan of Action (paras. 68-70) and the Mexico City recommendations (para. 14 and particularly recommendations 1-3), adopted at the International Conference on Population in 1984, Governments are urged to adopt an integrated approach towards population and development, both in national policies and at the international level. Such recommendations also reflect the view that although the actions of developing countries are of primary importance, the attainment of development goals will require appropriate policies and support by the developed countries and the international community.

The Plan of Action emphasizes that the basis for an effective solution of 12. population problems is, above all, socio-economic transformation (para. 1). Consequently, the Plan of Action makes a number of recommendations dealing with socio-economic policies, and mentions specifically some issues, for example, development assistance, economic growth, food and agriculture, education, health and employment, with the understanding that such socio-economic transformation will modify demographic variables by creating new conditions. The wide range of issues mentioned by the Plan of Action correspond, mutatis mutandis, to the themes included in the last three international development strategies adopted by the General Assembly.  $\underline{9}$ / The major findings of this review and appraisal confirm, in general, the results of the previous assessments, which have revealed that the impact of economic growth on the levels of fertility and mortality is likely to be less direct than on other dimensions of development. In other words, there is increasing evidence that the resolution of demographic issues is to be found in the synergistic combination of various strategic

dimensions that call for simultaneous action on various fronts: income distribution; improvement in the status of women; gender equality; basic education; primary health care (including family planning); and employment opportunities. <u>10</u>/

#### Sustained economic growth

13. Sustained economic growth represents a desperately important imperative throughout the developing countries. Without the benefits of such growth, developing countries will not be able to improve the standards of living of their people and a durable resolution to demographic issues will be seriously hampered. In the Declaration on International Economic Cooperation, in particular the Revitalization of Economic Growth and Development of the Developing Countries, the States Members of the United Nations strongly affirm the need to revitalize growth and development in the developing countries and to address together the problems of abject poverty and hunger. 11/ Similar ideas appear in the Declaration on the Right to Development.  $\underline{12}$ / During the past decades, the developing world has made enormous economic progress. This can be seen most clearly in the rising trend for incomes and consumption: Between 1965 and 1985, consumption per capita in the developing world went up by almost 70 per cent. Broader measures of well-being confirm this picture: Life expectancy, infant and child mortality, and educational attainment have all improved markedly. Nevertheless, while overall trends clearly show that during the past two decades significant economic and social progress were achieved in the developing world, markedly diverging regional and national trends have been observed. It is clear that in some cases efforts were quite successful, while others involved a sequence of difficulties. The very diverse trends in the growth of output per person highlight this fact.

14. Slow growth of per capita output in Africa, at an average annual rate of 0.4 per cent in the first decade after the adoption of the Plan of Action, gave way to an outright decline of 0.6 per cent per annum after 1984. In the smaller and generally poorer countries of sub-Saharan Africa (that is, those excluding Nigeria), the situation was more extreme; an average annual decline of 1.0 per cent in the first 10 years became an average decline of 1.8 per cent per annum after 1984. In Latin America, the 1980s are commonly referred to as the lost decade. Indeed, after per capita output rose 0.7 per cent on average in the 10 years up to 1984, it has been virtually stagnating since, with a growth per capita of only 0.2 per cent per annum. Unlike the African situation, however, there are now signs that growth in Latin America might be on the verge of significant improvement, as economic recovery seems to have begun recently to take hold in some countries and foreign and domestic investors have brought considerable sums of foreign exchange back into the region. In other words, Latin America may be at a turning-point. In the Asian and Pacific region, in contrast, per capita output rose by a robust 2.6 per cent annually in the 10 years after the United Nations World Population Conference in Bucharest, and it has been rising by an even stronger 3.1 per cent per annum in the more recent period. Since the developing countries of Asia and the Pacific constitute over 70 per cent of the population living in the less developed regions, this trend is particularly heartening - even more so because the more rapidly growing countries include some of the poorest of the world. In the West Asian subregion, however, output per capita has been falling 3.1 per cent per annum

since 1984. If many of the citizens of this region have been fortunate to be living over vast pools of petroleum resources, they have also been afflicted by almost a decade of warfare, which took its economic as well as human toll. The region is not unique in this regard. The recent devastation in the former Yugoslavia has virtually wiped out all the growth in average output per capita in the Mediterranean region since 1974.

15. Given the important economic achievements realized by the developing countries as a group, it is all the more staggering that almost one third of the total population, or 1.3 billion people, in the developing world are still living in poverty. Progress in raising average incomes, however welcome, must not distract attention from this massive and continuing burden of poverty, which is spread unevenly: among the regions of the developing world, among countries within those regions, and among localities within those countries. In those countries that have exhibited a marked economic progress since the 1960s, poverty has declined and even the incomes of those remaining in poverty have increased. However, in countries that experienced poor economic performance, the number in poverty fell more slowly. Nearly half of the world's poor live in South Asia, a region that accounts for 30 per cent of world population. Sub-Saharan Africa accounts for a smaller but still highly disproportionate share of global poverty. Where rapid population growth has been an additional factor, as in sub-Saharan Africa, the number of those in poverty has risen. In these particular cases, extensive poverty aggravates the negative impacts of population pressure on land use and, in turn, constitutes a major obstacle to obtaining fertility and mortality declines in rural areas. There is increasing evidence that the correlation between high levels of fertility and of poverty is strongly associated with the low socio-economic status of women.

During the 1980s, many developing countries had to cope with economic 16. crises and embarked on macroeconomic actions, including stabilization policies aimed at reducing inflation and external deficits, and structural adjustment programmes addressing internal and external imbalances in resource allocation in specific sectors such as trade, finance and industry. Such policies intended to eliminate rigidities in the countries concerned and to foster a macroeconomic stability as a condition for sustained economic growth. Although in the longer term economic restructuring associated with adjustment is likely to bring about an improvement in the standard of living of the entire population, in the short term those economic policies have tended to increase the number of the poor and have put many of the poor at risk. The comparison of experiences of developing countries suggests that poverty reduction can be achieved by first pursuing a strategy that promotes the productive use of the poor's most abundant asset, namely labour, in both industry and agriculture. Experience also shows that equally critical is the provision of basic social services to the poor. Primary health care, family planning, nutrition and primary education are especially important.

17. Several lessons are embedded in this set of growth statistics. The first is a reminder that peace and a functioning civil society are prerequisites of sustained economic growth and sustainable development. A second lesson is that rigid economic structures, excessive dependence on a limited range of commodity exports, and a thin layer of "human capital" have been extremely costly. High levels of domestic savings, access to modern technologies, low levels of

inflation, and particularly heavy investments in education have been associated with the successful case histories. Indeed, international cooperation during this period has increasingly focused on facilitating and hastening structural adjustment to the shocks and building capacities to identify and capture opportunities. Finally, it should be repeated that poverty is increasingly recognized to be closely associated with both undesirable demographic trends and environmental degradation and that, together with social and economic inequality, it is exacerbating the problems derived from rapid population growth. There is little doubt that economic growth is necessary to combat poverty and to provide the means to satisfy basic needs; but economic growth should be reconcilable with the idea of sustainable development. Such development may be achieved if appropriate technologies are developed and made available to developing countries on preferential and concessional terms, and suitable strategies and policies are adopted to stimulate conservation of existing resources and avert environmental degradation.

#### Food and agriculture

18. The Plan of Action recognizes the important role that food and agriculture play in improving the standards of living of people and recommends that Governments give high priority to improving methods of food production, the investigation and development of new sources of food and more effective utilization of existing sources (para. 70) in response to the needs of the rapidly growing world population. Trends in per capita food production and food supplies have, to a large extent, paralleled trends in per capita output. Such a situation is not very different from the one assessed a decade ago when the second review and appraisal of the World Population Plan of Action found that globally the growth of food production had more than kept pace with the rate of population increases and was projected to do so in the future.  $\underline{13}/$ Similar findings were noted in the third review and appraisal of the World Population Plan of Action. 14/ Equally remarkable is the fact that during the past three decades the number of countries that have been able to meet their daily per capita requirements has gone from less than 25 to more than 50. Nevertheless, enormous disparities account for the fact that about 800 million people still do not get sufficient food. 15/

During the 1980s, per capita food production continued to grow at the 19. global level. At the world level, the average food production per capita increased 1.1 per cent per annum on average and such growth took place mostly in the developing countries, reflecting above all high growth rates in Asia (China and India increased their production by 27 per cent during the periods 1979-1981 and 1988-1990). Sub-Saharan Africa continued on its long-term path to decline (minus 0.5 per cent per annum). Per capita food supplies continued to increase at the global level, but there was no progress in sub-Saharan Africa (with per capita food supplies stagnant at grossly inadequate levels) and Latin America. The overall incidence of undernutrition declined significantly in relative terms but only slightly in absolute terms in the developing countries. However, the incidence of undernutrition increased in both absolute and relative terms in sub-Saharan Africa and in absolute terms in Latin America. The cereals deficit of the developing countries continued to increase but at a much slower rate than in the 1970s. Much of the increase originated in the growth of cereal imports into the regions of northern Africa and Western Asia.

20. At the global level, the Food and Agriculture Organization of the United Nations (FAO) estimates that the daily calorie supply per capita increased from 2,383 in 1965, and 2,580 around the period 1979-1981 to 2,700 in the period 1988-1990. Important improvements have been achieved in Asia, but not in Latin America, which remained stagnant at a daily calorie supply per capita of 2,690 during the past decade, and sub-Saharan Africa, where there was a decline (from 2,120 to 2,100).

#### Education

21. The Plan of Action recalls the important place of education in achieving social and economic development (para. 69). Notable improvements have been registered in this area; during the past two decades, primary school enrolment has increased from less than 70 to more than 80 per cent, while secondary school enrolment has almost doubled (from 25 to 40 per cent). Such achievements have been realized particularly during the past decade and in those countries that have guaranteed the right to education for all. The countries that have invested more in education are also those that have generally manifested a better performance in terms of economic growth, reduction of poverty and overall improvement in the standard of living of their populations. Approximately 1 billion school-age children are currently enrolled. However, sub-Saharan Africa, and Western and Southern Asia still lack sufficient school space to enrol all children in first-level education. For sub-Saharan Africa, as was not the case for the other developing regions, coverage of the primary school-age population declined appreciably, from 79 to 67 per cent. In 1990 there were an estimated 130 million out-of-school youth in the age group 6-11 in the developing countries, and 277 million in the age group 12-17. Millions more satisfy the attendance requirements but fail to complete basic education programmes, and thus do not acquire essential knowledge and skills.

22. Even though the total number of illiterate adults in the world -948 million in 1990 - is still important, significant progress towards adult literacy has been achieved. The adult literacy rates in all regions of the world are rising and the global rate is expected to go above 75 per cent before the end of the century. In sub-Saharan Africa and Southern Asia the rate is expected to be lower, and a figure of 49 per cent is projected for the group of least developed countries.

23. In a majority of developing countries, girls are still underrepresented in enrolment at every level of formal education. Moreover, the opportunities for girls to advance beyond the first level of formal education to the second and third levels are still significantly fewer than for boys. The United Nations Educational, Scientific and Cultural Organization (UNESCO) estimates that currently one out of three adult females in the world is illiterate, compared with only one out of five adult males. While there has been substantial progress in reducing male/female disparities in illiteracy, the gender differences remain pronounced in certain regions, notably Southern and Western Asia, and sub-Saharan Africa.

#### <u>Health</u>

24. Although specific aspects related to the health sector are covered in chapter VII below, it is important to mention that in general there has been notable progress in improving the health conditions of populations. However, there is still a wide gap between the health coverage of urban areas and that of rural ones. The health-care systems in the majority of the developing countries have not been able to attend properly to the needs of rural areas and have demonstrated increasing difficulties in coping with the rapidly increasing demand of fast-growing populations in the urban and suburban areas. As a result, increasing numbers of people are not receiving appropriate or comprehensive health care. Even more alarming is the gap between population growth and the amount of health sector investments, which are even shrinking in many countries. According to the World Health Organization (WHO), this deterioration has been a result of the low priority given to the health sector by many Governments, as well as of the effect on the social sector of the debt crisis and the effect of poorly designed structural adjustment policies. Furthermore, the quality of the services has become increasingly difficult to maintain or improve, as the physical infrastructure is decaying.

25. World food production outweighs consumption, as has been mentioned above. Nevertheless, the lack of access to food has affected a large number of people. Among the victims are more than 2 billion people who suffer from micronutrient deficiencies which can lead to blindness, mental retardation and death, as well as more than 150 million people in Asia and about 30 million people in Africa (including a large proportion in the two regions of children under five years of age suffering from protein-energy malnutrition).

#### Employment

26. The Plan of Action recognizes that a major challenge faced by developing countries is the creation of sufficient employment opportunities in the modern sector of their economies to absorb their rapidly growing labour force. As the six-billionth inhabitant is currently expected to be born in the year 1998, one year sooner than was projected in the late 1980s, population growth and concomitant growth in the labour force are making the employment issue a great challenge, especially for developing countries in which unemployment, underemployment and poverty are associated with low levels of investment, and where the economic climate is most likely to remain unfavourable.

27. According to the International Labour Organization (ILO), the major economic factors and policies that have aggravated the employment problem are (a) the disproportionate emphasis given by countries to growth-oriented development strategies at the expense of other major development goals; (b) the selection of ill-suited production techniques that are capital-intensive in the industrial as well as in the agriculture sectors; (c) the lack of an adequate balance between national production destined for export and that destined for domestic consumption; (d) labour-market segmentation, giving preference to capital-intensive production methods rather than to the informal sector; and (e) the insufficient monitoring of structural adjustment programmes and other policies implemented to deregulate the economy and to reduce the size of the public sector.

28. Strategies for responding adequately to the above problems have been instituted by the international community and are based on the recognition of the existing links among population growth, employment, income distribution and poverty. Such strategies aim at promoting employment in all sectors, facilitating the access to productive inputs and improved technologies, and establishing/strengthening education and training systems responding to specific employment situations.

29. ILO organized a first gathering of the High-Level Meeting on Employment and Structural Adjustment in November 1987, which recognized the gravity of the world economic situation, characterized by the growth of unemployment and poverty, indebtedness and imbalances. Special attention was given to measures to be devised to achieve adjustment and growth with minimum social cost and to promote participation and dialogue between social groups, including employers' and workers' organizations. As the reforms envisaged and the changes that have taken place since 1987 have not yet begun to remove, particularly in Africa, the deep-seated structural problems such as low productivity, underdeveloped human capital and lack of investment that are the root cause of poverty and lack of employment, amendments are urgently needed. A second High-Level Meeting is foreseen in the period 1994-1995 to examine the next phase of structural adjustment programmes and to discuss strategies to improve labour market policies, to make environmental policies compatible with employment creation and poverty alleviation, and to ensure a balance between labour protection and employment promotion. It will also examine ways of managing the transition from State-run to market-oriented economies, of privatizing State-owned enterprises, and of responding to increased migratory pressure.

#### Issue No. 3: Population, the environment and development

30. One of the objectives of the World Population Plan of Action is to advance national and international understanding of the complex relations among the problems of population, resources, environment and development, and to promote a unified analytical approach to the study of these interrelationships and to relevant policies (para. 15 (d)). The Plan of Action explicitly affirms that in the democratic formulation of national population goals and policies, consideration must be given, together with other economic and social factors, to the supplies and characteristics of natural resources and to the quality of the environment (para. 14 (j)). The continuing debate over the connection between population growth, development and environmental impacts has been a major concern of the international community since the 1974 World Population Conference in Bucharest. In recommendation 4 of the Mexico City recommendations, adopted by the International Conference on Population, held in Mexico City in 1984, Governments are urged to adopt and implement specific policies, including population policies, that will contribute to redressing imbalances between trends in population growth and resources and environmental requirements and promote improved methods of identifying, extracting, renewing, utilizing and conserving natural resources.

31. A major impetus to the current concern about the linkages between population factors and the environment was given by the publication in 1987 of the report of the World Commission on Environment and Development,  $\underline{16}$ / whose

perhaps most important message was the introduction of the concept of sustainable development. The report observed that rapidly growing populations could increase the pressure on resources and slow any rise in living standards; thus sustainable development could only be achieved if population size and growth were in harmony with the changing productive potential of the ecosystem.

32. Two years later, in November 1989, the International Forum on Population in the Twenty-first Century adopted the Amsterdam Declaration on A Better Life for Future Generations, <u>17</u>/ which acknowledged, <u>inter alia</u>, that population, resources and the environment were inextricably linked and stressed the commitment of the Forum's participants to bringing about a sustainable relationship between human numbers, resources and development (preamble, para. 1).

33. In 1990, the report of the South Commission <u>18</u>/ acknowledged that in several developing countries, the pressure of growing numbers on the limited fertile land was accelerating the degradation of land and water resources and causing excessive deforestation. The Commission found that the present trends in population, if not moderated, had frightening implications for the ability of the South to meet the twin challenges of development and environmental security in the twenty-first century.

34. Agenda 21, 19/ adopted in 1992 by the United Nations Conference on Environment and Development, recognizes that demographic trends and factors and sustainable development have a synergistic relationship, and reiterates that the growth of world population and production combined with unsustainable consumption patterns places increasingly severe stress on the life-supporting capacities of the planet. The pivotal contribution of the United Nations Conference on Environment and Development was its strong emphasis on the crosssectoral linkages between issues of development and the environment. Among other important matters, it addressed the connection between demographic dynamics and sustainability, thereby extending and reinforcing the earlier references in the World Population Plan of Action and the recommendations for its further implementation. In chapter 5 of Agenda 21, five key objectives are identified within the three main programme areas: (a) to incorporate demographic trends and factors in the global analysis of environment and development issues; (b) to develop a better understanding of the relationships among demographic dynamics, technology, cultural behaviour, natural resources and life support systems; (c) to assess human vulnerability in ecologically sensitive areas and centres of population to determine the priorities for action at all levels; (d) to fully integrate population concerns into national planning, policy- and decision-making processes, with full recognition of women's rights; (e) to implement population programmes along with natural resource management and development programmes at the local level to ensure sustainable use of natural resources, improve the quality of life of the people and enhance environmental quality. 20/ Agenda 21 calls for developing and disseminating knowledge concerning the links between demographic trends and factors and sustainable development and, on this basis, for formulating integrated national policies and local programmes for population, the environment and development.

35. Population, development and environmental issues are linked in complex ways. The ecological impacts of population factors are shaped by the characteristics of the physical environment, as well as by the type of social organization (which includes a complex set of cultural values that determines patterns of consumption), the level of economic development and the available technological options. If the prospects for future generations are not to be compromised, important changes must be made towards the adoption of a sustainable pattern of development, one that maintains a balance between population size and environmental capacities and also succeeds in lightening the grinding burden of poverty that afflicts a large portion of the world population. A large amount of research has been done on each of the three components - population, the environment, and the process of development - but of particular interest is the proper understanding of the interrelations among them. Brief illustrations of some of the linkages among population, the environment and socio-economic development are presented below.

#### Land use and deforestation

36. The state of the environment in rural areas is of particular importance since such areas currently account for two thirds of the population of developing countries. In those areas, where agriculture remains the major economic activity of increasing numbers of poor people, it is necessary to exploit excessively the limited agricultural resources, and this thus puts at risk the basis for further production. In particular, the growth of rural populations plays an important role in the process of deforestation through the clearing of land on the margins of tropical forest and through the quest for firewood. In the early 1980s, it was estimated that tropical deforestation was proceeding at a rate of 11.4 million hectares per annum. Recent estimates have pushed the rate up from 17 million to 20 million hectares per annum in the late 1980s. The latest statistics suggest that the overall rate of tropical deforestation in the 1980s was 0.9 per cent per annum. About 1.3 billion people live in areas where fuelwood is consumed faster than trees can regrow.

37. Population pressure on land resources also leads to fragmentation of landholdings, shortening of fallow periods, and cultivation of erosion-prone hillsides, all of which contribute to soil degradation. The phenomenon of landlessness is also widespread; the proportion of agricultural landless households is estimated to be 17 per cent in Latin America, 11 per cent in the Middle East, 15 per cent in South Asia and 6.5 per cent in Africa. Even more important is the proportion of smallholder households, whose landholdings are too small to provide a sustainable livelihood, with the proportion being about 60 per cent in the developing countries as a group. Under the norms of partible inheritance of land that are typical for most developing countries, rapid population growth contributes in a significant way to the fragmentation of agricultural holdings. To the extent that land fragmentation is not matched by the introduction of intensive and environmentally sustainable agricultural techniques, the farmers with exceedingly small plots are forced to "mine" their land or migrate and engage in ecologically destructive practices of land extensification on marginal lands where soil and climatic conditions are poorly suited to annual cropping. As a result of rapid population growth, combined with the aforementioned institutional factors and lack of development, some 7-8 million hectares of rain-fed croplands and 1.5 million hectares of irrigated

land are currently lost every year, while another 20 million hectares lose virtually all their agricultural productivity. Rapid population growth has also been identified as one of the factors contributing to the excessive exploitation of pastures, destruction of vegetation on mountain slopes, siltation of rivers and increasing incidence of floods.

#### Water resources

38. The phenomenon of freshwater scarcity is increasing rapidly with a growing world population and urbanization as well as with the process of economic growth. Currently, 80 countries with 40 per cent of the world population suffer from serious water shortages. Given existing climatic conditions and current population projections, it is estimated that the per capita global water-supply will decline by 24 per cent by the end of the century. Projections made by hydrologists indicate that meeting demands by the year 2000 will require virtually all the usable freshwater supplies in North Africa and the Middle East; 15-25 Northern African and sub-Saharan African countries may face serious problems with water shortages by the year 2025.

39. With regard to water resources, in the report of the Secretary-General, to the General Assembly at its forty-fifth session, concerning the Achievements of the International Drinking Water Supply and Sanitation Decade 1981-1990, it was pointed out that in spite of progress achieved concerning service coverage during that period, the situation in urban areas of developing countries, particularly in large cities, could become alarming in years to come. <u>21</u>/ Given the high rate of growth in the urban centres, the number of people in urban areas without adequate water-supply facilities could increase by as much as 83 per cent, and the number of dwellers without adequate sanitation services, by as much as 68 per cent. As a result, there could be a vast number of urban and rural poor devoid of suitable water-supply and sanitation services and increasingly vulnerable to water-related diseases. At the same time, too often water resources projects have failed to benefit the urban and rural poor.

40. The projected high rates of population growth in urban areas will bring with them a rapid rate of growth in the demand for water for domestic, municipal and industrial uses, which will often strain existing water-supply capabilities, and the provision of additional supplies will often require the development of costlier sources. In addition, demands for urban water-supplies will compete increasingly with growing demands for irrigated agriculture. Besides the fact that water is in short supply in a number of countries, much of what is available is not safe to drink. With regard to water quality, in the report of the Secretary-General (to the Committee on Natural Resources at its twelfth session, held in 1991) on strategies and measures for the implementation of the Mar del Plata Action Plan in the 1990s, it was pointed out that increasing population pressures and the rapid growth of urbanization were causing dangerous concentration and acceleration of pollution and the deterioration of water quality in surface waters and groundwaters. That report also pointed out that in many cases, the waste-assimilative capacity of freshwater bodies adjacent to towns had been outstripped, and that in many major centres the situation had reached dangerous proportions. In addition, there was also concern about the increasing entry of agricultural chemicals into surface waters and groundwaters. 22/

41. Given those considerations, both the International Conference on Water and the Environment, <u>23</u>/ which was part of the preparatory process of the United Nations Conference on Environment and Development, and chapter 18 of Agenda 21 of the United Nations Conference on Environment and Development, stressed, <u>inter alia</u>, the concept of a holistic approach to water resources development and management, including the interrelationship between land and water, and the efficient use of the resource through demand management; the need for a participatory approach to development through management at the lowest appropriate level; the use of appropriate technologies; and capacity-building. In 1990, in spite of dramatic improvements in the standards and levels of services in drinking-water supply and sanitation achieved in the past two decades, especially in the rural areas of developing countries, 1.2 billion people did not have access to clean water-supplies and 1.7 billion people were not served by adequate sanitary facilities.

42. Most settlements in Africa and Asia, including many cities with 1 million or more inhabitants, have neither sewerage systems nor refuse-collection systems. An estimated 30-50 per cent of solid wastes generated within cities is left uncollected and 90 per cent of the sewage that is collected is discharged without treatment, thereby polluting the area's water and soil. According to a recent assessment, improvements in water supplies and sanitation can bring median reductions of 22 per cent in morbidity from diarrhoea which causes about 900 million episodes of illness each year, 28 per cent reduction in morbidity from roundworm infection which afflicts at any one time 900 million people, and 73 per cent reduction in morbidity from schistosomiasis which afflicts 200 million people. The problems of the urban environment are taking on an ever-increasing importance as the process of urbanization continues at a rapid pace in many countries, both developed and developing. Many cities are unable to expand their infrastructures rapidly enough to cope with the environmental requirements of their burgeoning populations. In addition to the problems related to water-supply, sanitation and waste-water treatment, the disposal of solid wastes is another major environmental problem facing cities.

#### Atmospheric pollution

43. Atmospheric pollution remains an important health hazard for urban populations throughout the world. The United Nations Environment Programme (UNEP) Global Environment Monitoring System estimates that nearly 900 million urban-dwellers, mostly in developing countries, are exposed to unhealthy levels of sulphur dioxide and that more than 1 billion people are exposed to excessive levels of particulates. National trends in emissions and concentrations of these substances are mixed. While significant progress was made in the past two decades by countries of the Organisation for Economic Cooperation and Development (OECD), there has been little or no improvement at all in the heavily polluted industrial areas of Eastern Europe and the former Union of Soviet Socialist Republics (USSR), and in the developing countries the typical trend is towards the rise of air pollution. Environmental conditions are particularly precarious in overcrowded slums and squatter settlements, which are home to an estimated 25-50 per cent of the urban population of developing countries.

#### Energy resources

44. The situation concerning energy is similar to that concerning water resources. The growth of urban centres and increased requirements for industrial production translate themselves into growing demands for energy resources. At the same time, however, the urban and rural poor continue to suffer from inadequate sources and rely on fuelwood for most of their requirements. In paragraph 9.9 of Agenda 21 it is pointed out that much of the world's energy is currently produced and consumed in ways that could not be sustained if technology were to remain constant and if overall quantities were to increase substantially. It is further pointed out that the need to control atmospheric emissions of greenhouse and other gases and substances will increasingly need to be based on efficiency in energy production. Agenda 21 calls, inter alia, for the identification of economically viable and environmentally sound energy sources; the formulation of energy policies integrating economic and environmental considerations; the promotion of the research, development, transfer and use of improved energy-efficient technologies, including new and renewable sources of energy; and the promotion of capacity-building.

45. With regard to rural energy, the General Assembly urged that greater attention be given to the development of new and renewable sources of energy for the rural sector and to their integration into the overall rural economy, bearing in mind the depletion of the fuelwood supply taking place in many regions of the world.  $\underline{24}$ / Chapter 14 of Agenda 21 calls for the promotion of a mix of cost-effective fossil and renewable energy resources that is sustainable and ensures sustainable agricultural development; the promotion of pilot projects that are appropriate and likely to be adequately maintained; the initiation of rural energy programmes supported by technical training, banking and related infrastructure; and the intensification of research and development, diversification and conservation of energy (paras. 14.93 and 14.95).

46. Recent decades have witnessed rapid population changes and socio-economic development but this has been accompanied by increasing environmental stresses at global, regional and local levels. These environmental conditions have had adverse effects on both the populations themselves and the economies that support them. Reversing or even moderating those trends will require efforts on many fronts - those of reassessing national policies, redefining political commitments, and identifying priorities for international cooperation, to name a few. From the conceptual side, careful attention should be given to the examination of two notions in particular that have become very popular when this kind of issue is discussed. The first notion involves the carrying-capacity of an ecosystem, which is generally understood to refer to the number of people that the ecosystem can support at an acceptable level of quality of life. The second notion involves the identification of possible environmental discontinuities, which are understood to refer to the critical thresholds of irreversible injury to the environment that emerge when ecosystems have been mistreated over long periods of high stress without prominent signs of damage. It is equally important to take into account the following (and thus address some puzzles in terms of future environmental stress): In the not very distant future, the very large numbers of people who are living in what are now called less developed regions will be reaching the consumption and production levels

that are current at present in the more developed countries. It is nevertheless expected that as a result of simultaneous efforts on all of the above fronts, it will be possible to develop a set of economic, social and demographic policies that both improve the state of the environment and increase the quality of life of the world population. It should be acknowledged that substantial progress has been achieved over the years with respect to the traditional topics of population research, as well as on natural resources and energy consumption patterns. What has been slow to develop is the interdisciplinary linkage between this type of research, which would make possible better forecasting and projections of environmental effects, and the manner in which the different factors interact with each other. Furthermore, a better understanding of the connections and mutual interactions among the three elements, as proposed by the World Population Plan of Action, still remains an unresolved issue and one of great concern.

#### III. GENDER EQUALITY AND EMPOWERMENT OF WOMEN

47. The equality of men and women is recognized in the Universal Declaration of Human Rights 25/ and other important international instruments, including the World Population Plan of Action and the recommendations for its further implementation. More recent international conferences, such as the United Nations Conference on Environment and Development 26/ and the World Conference on Human Rights 27/ have reaffirmed the international commitment to gender equality and have urged the adoption of measures to improve the status of women. The Plan of Action (paras. 14 (b), 15 (e) and 41-43) and recommendations 5 through 10 of the Mexico City recommendations express the urgency of promoting the status of women as an end in itself and emphasize the close relationship between the condition of women and other demographic phenomena. Although there is no single indicator that could capture the multiple dimensions of the condition of women, discussion on the two following issues, gender equality and education, provide some examples that help the assessment of the degree of progress made. The section below on maternal mortality (paras. 160-174) also provides relevant information on the condition of women.

#### Issue No. 4: Achieving gender equality

48. It has been widely accepted that the elimination of discrimination against women and the achieving of gender equality are aims grounded in basic human rights, whose realization is also essential to the achieving of sustainable development. In response to the principle of gender equality reiterated at the 1975 World Conference of the International Women's Year, <u>28</u>/ in the Convention on the Elimination of All Forms of Discrimination Against Women, <u>29</u>/ adopted in 1979 by the General Assembly, at the 1980 World Conference of the United Nations Decade for Women: Equality, Development and Peace, <u>30</u>/ and in the 1985 Nairobi Forward-looking Strategies for the Advancement of Women, <u>31</u>/ the need to achieve the full integration of women in society on an equal basis with men has moved to the forefront of the global agenda, and female education has been identified as a priority area for national action.

49. According to recent data on social indicators aimed at capturing the condition of women world wide,  $\underline{32}/$  it can be observed that despite the availability of a large number of internationally approved instruments and the important progress made in implementing them, the improvement of women's situation has been found to be much slower than expected. Although institutional and legal barriers to the emancipation of women have been removed increasingly, change in deep-rooted cultural beliefs and social habits that govern gender relationships has been slow. In 1990, the Commission on the Status of Women undertook a five-year review and appraisal of the implementation of women had deteriorated in many parts of the world, especially in the developing countries where economic stagnation, rapid population growth, the growing burden of debt and the reduction of public expenditures on social services had constrained the opportunities for enhancing women's situation in the spheres of education, employment and health.

50. It is encouraging to observe that since the adoption of the Convention on the Elimination of All Forms of Discrimination Against Women, the number of Governments that have signed and ratified or acceded to it had increased from 51 to 94 by 1989; by the end of 1993, 130 States had ratified or acceded to the Convention. While considerable progress has been achieved in eliminating <u>de jure</u> discrimination, less has been made in eliminating de facto discrimination. The Commission on the Status of Women has found that many States are beginning to make use of positive action as a means of reducing the gap between discrimination in law and that in practice. <u>33</u>/

51. With respect to education, the global economic crisis of the 1980s and the poorly designed structural adjustment programmes adopted by developing countries under the auspices of international financial institutions slowed, and in some instances actually reversed, the steady progress of preceding decades. During the past decade, an alarming slow-down in the growth of enrolment was visible in many developing countries, which are still far from reaching universal primary education. Adverse economic conditions and tight finances have limited social investment and resulted in a period of declining growth in real spending on education. According to the United Nations Children's Fund (UNICEF), the group of least developed countries reduced their education budgets per capita by 25 per cent during the 1980s in order to deal with the debt crisis. Although the impact of the economic crisis and adjustment programmes on the availability and quality of education has yet to be fully assessed, shrinking education budgets are likely to affect women in a disproportionate manner and thus constrain progress in surmounting pre-existing gender inequalities. Therefore, mitigating the adverse effects of structural adjustment programmes on education in less developed countries should be an important component of sustainable development strategies in the 1990s.

52. Women's employment and income-earning ability have important effects on their own status as well as on such demographic and family processes as marriage, level and timing of fertility, and arrangements for care of dependants (see chap. IV below). Although available data greatly underestimate the economic contribution of women, those data do show that in all parts of the world women make up substantial proportions of the population employed in the formal economy. United Nations statistics indicate that about one third of the labour force world wide is female, although real figures are underestimated. Women's wages are substantially lower than men's in all countries with the information available.

53. Many characteristics of modern life propel women into employment. Improvement in education has created rising aspirations and opened opportunities. Such factors as technological innovation, the burden of international debt and changing terms of international trade, growing income disparities, changing patterns of landownership, environmental degradation, increasing likelihood of marital disruption, population growth and migration have weakened previously existing social support systems, forcing women to seek new ways of maintaining themselves and their families. On the other hand, continuing discrimination prevents women from getting full reward for their effort. Women everywhere tend to be concentrated in low-paying occupations, and they do not have the same access as men to economic and technical resources. 54. Another area receiving increasing attention is the one related to male responsibilities and participation. The 1984 International Conference on Population recommended the active involvement of men in all areas of family responsibility, including family planning, child-rearing and housework, so that family responsibilities could be fully shared by both partners (recommendation 9). There is clear recognition that men should assume major responsibilities in controlling their own sexual behaviour and the consequences of that behaviour, and take part more actively in family planning and other family responsibilities, to ensure safe motherhood, respect for girls' and women's rights, and support of gender equality, as well as the elimination of all forms of violence, including physical violence, of which women are victims.

55. During the period under consideration, while progress was achieved in terms of the status of women with respect to population programmes, it was also widely recognized that achieving gender equality and improving the status of women were ends in themselves, regardless of any demographic goal. At the same time, it has been recognized that improving the status of women has important demographic impacts, particularly on mortality and fertility levels, and that attention to gender issues within population activities needs to be more explicitly articulated and strengthened. Issues that have been repeatedly emphasized in the series of preparatory activities for the 1994 International Conference on Population and Development include the need for men and women to have better access to a wider variety of safe and effective family planning methods and to be able to exercise fully their reproductive rights independently of any governmental demographic objectives. A need has also been perceived to improve the quality of care in family planning and reproductive health services, to ensure equitable access of males and females throughout the life cycle to medical care and the fruits of research, and to involve women fully in population programme management and planning, as well as in the delivery of services. It is recognized that women face great difficulties in protecting themselves and their children from sexually transmitted diseases, including human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS), and that improving women's status may be vital for combating the spread of these diseases. There is an urgent need for programmes aimed at halting the spread of AIDS and other sexually transmitted diseases to be tailored to the specific needs for information and services of women and men.

#### Issue No. 5: Women's education and its demographic impact

56. One key element of the situation of women that has received major attention, particularly in the context of developmental strategies and population policy, is education. In most of the developing world, the long, historical neglect of women's education has left very high illiteracy rates, especially among older and rural women. According to UNESCO sources, in 1990 there were 346 million illiterate men and 602 million illiterate women (constituting 34 per cent of the adult female population). The numbers are even more striking for some regions: It is estimated that about three quarters of women aged 25 years or over in sub-Saharan Africa, and in Southern and Western Asia, cannot read or write. For those women, illiteracy contributes to their marginalization within the family, the workplace and public life.

57. Better prospects are observed among younger generations. The rapid expansion of the national educational systems in the developing countries during the past three decades has led to a significant reduction in illiteracy rates among young women. During the period 1970-1990, for instance, the percentage of illiterate women aged 20-24 fell from 19 to 8 per cent in Latin America, from 38 to 12 per cent in Eastern and Western Asia, and from 80 to 49 per cent in sub-Saharan Africa.

58. The unanimous adoption of universal primary education as a fundamental right and as an explicit developmental objective led to a significant growth in educational investment and to a rapid expansion of schooling systems during the 1960s and the 1970s, and this resulted in a dramatic global increase in enrolment rates. Educational gains for girls in the developing world were substantial. The estimated proportion of girls aged 6-11 enrolled in schools in developing countries rose from 38 per cent in 1960 to 66 per cent in 1985. Female enrolment in primary school increased from 24.5 to 60 per cent in Africa, from 43 to 65 per cent in Asia and from 57 to 83 per cent in Latin America and the Caribbean. Important, though more modest, enrolment increases for girls in secondary and higher levels of education were also recorded.

59. Until recently, women have been universally underrepresented at all levels of education. Except for Latin America and the Caribbean, the situation still prevails in most developing countries. Women's enrolment in primary and secondary education lags behind men's by at least 10 percentage points in 66 of 108 countries. The gender gap in educational attainment is greatest in lowincome countries, and increases at higher levels of training. However, throughout most of the world, a steady trend towards a narrowing of gender disparities in school enrolment is manifest.

60. Rapid population growth in many developing countries is outpacing educational efforts. Although the proportion of youth enrolled in school has experienced a substantial expansion, the absolute number of children not attending school has actually increased. The difficulty of keeping pace with a rapidly growing school-age population usually translates into shortages of school facilities and into impacts on the quality of educational programmes. This trend is expected to continue into the twenty-first century and may further undermine the achievement of educational parity for boys and girls. In this respect, the observed trends that were mentioned above regarding food production and nutrition in sub-Saharan Africa are a matter of major concern.

61. The links between female education and demographic behaviour are extensively reviewed in the literature, and increasingly taken into account in policy-making. Numerous studies indicate that education influences decisively a woman's overall health, her access to paid employment and her control over family size and birth-spacing, as well as the education and health of her children. Education empowers women with knowledge that allows informed choice in family and non-family matters, enables them to assume a status and identity beyond those connected with child-bearing, and provides exposure to new values that are likely to enhance their autonomy. The need to improve women's education has been advocated repeatedly both at academic and political forums as a means of both promoting development and reducing the levels of fertility in the developing world.

62. Much research has been devoted to exploring the links between women's education and fertility. The World Fertility Survey (WFS) and the more current Demographic and Health Surveys (DHS) programme, which cover a large number of developing countries, have greatly enlarged the empirical basis for documentation of this relationship and for development of new theoretical perspectives. National and cross-national studies based on the data obtained have shown that the association between education and fertility is far more complex than was assumed in the past, since it is contingent on level of development, social structure and cultural milieu. Those studies have explored the multiplicity of channels through which education affects reproductive behaviour. In particular, they have documented how female education delays entry into marriage, influences the normative orientation towards smaller families, and increases awareness and acceptability of, and access to, fertility regulation.

63. Although in the poorest and least literate rural societies, small improvements in female education may, by improving maternal health and reducing breast-feeding duration and post-partum abstinence, result in an increase in fertility in the short run, there is sound evidence that enhanced women's education will, by changing reproductive norms and contraceptive behaviour, lead to its reduction in the long run. Even at low levels of development, education has a sizeable negative effect on fertility after a threshold, which is usually identified with the level of completed primary education, is reached. The consistent finding that female education has a larger impact on fertility than does male education gives strong support to the general argument for reducing gender disparities in educational attainment.

64. Most studies have focused on the effect of parental education on fertility, but there is increasing evidence that the schooling of children has an important link with fertility as well. The universalization of mass education modifies not only the perception of children-related costs but also intergenerational attitudes and economic relationships within the family, and this leads to lower fertility. The relationship between education and health is also firmly established in the literature. Education is closely linked to child mortality, disease and nutrition. The evidence is unequivocal: Educated parents, particularly educated mothers, have better-nourished children and are better health-care providers; consequently, their children are less likely to die in infancy and childhood. The Demographic and Health Surveys, which provide more detail on children's health than was previously available, confirm these conclusions, namely that maternal education plays a larger role in determining a child's chances of survival than any other socio-economic factor.

65. Governments are increasingly aware of the links between women's education and demographic goals; according to information from the Population Policy Data Bank, two thirds of Governments consider that the status of women has a significant influence on demographic goals. The same source indicates that 56 per cent of Governments have adopted measures related to improving the status of women with the aim of influencing demographic trends as well. The role of international organizations has been important in raising awareness regarding the need to enhance women's conditions of life. At the present time, there is a widely shared realization that the implementation of demographic goals requires the promotion of women's status.

66. However, despite universal recognition that women's education is crucial in the development process and that gender-based inequality of access to educational and training resources has critical consequences for women's productive and reproductive roles, as well as for their health status and families, the achievement of universal literacy and educational parity with men is still far from being reached, and the implementation of programmes aimed at enhancing women's educational assets needs to be further strengthened.

#### IV. THE FAMILY: ITS ROLES, COMPOSITION AND STRUCTURE

67. The World Population Plan of Action affirms that the family is the basic unit of society and should be protected by appropriate legislation and policy (para. 14 (g)). In all parts of the world, families perform important socioeconomic and cultural functions. In spite of the many changes that have altered their roles and functions, families continue to provide the natural framework for the emotional, financial and material support essential to the growth and development of their members, particularly infants and children, and for the care of other dependants, including the elderly, disabled and infirm. The family in all its forms is the cornerstone of the world community. As primary agents of socialization, families remain a vital means of preserving and transmitting cultural values. In a broad sense, families can, and often do, educate, train, motivate and support their individual members, thereby investing in their future growth and acting as a vital resource for development. Families are also important agents of sustainable development at all levels of society and their contribution is decisive for success in this area. The specific functions of families include establishing emotional, economic and social bonds between spouses; providing a framework for procreation and sexual relations between spouses; protecting family members; giving a name and status to family members, especially to children; and providing basic care, socialization and education of children.

#### Issue No. 6: Diversity of family structures and composition

68. Along with the almost universally recognized roles attributed to the family, it is important to acknowledge the numerous forms in which families are organized. Such variety is a concomitant of the multiplicity of the forms of social organization, and cultural and religious values. In this respect, the Plan of Action does not endorse any particular form of family over others. As a social unit, the family has been undergoing radical transformations in its formation and structure in the past two decades, owing to demographic as well as major socio-economic changes. In the developed countries, with the end of the marriage boom in the post-1960s, the entry into matrimony and hence the formation of families has been considerably delayed. Formalized marriage has been losing its status, especially in Western countries, where cohabitation without marriage has increased, at least before children are born. Those changes have been affecting family formation in general, and have led particularly to a decrease in the overall prevalence of marriage among women. The number of divorces has also been rising in most countries. Severe inequalities in the division of labour and in the distribution of power also exist within many families. The discussion on the rights of children to decide

on their own affairs has only just begun. Egalitarian possibilities for both genders are but words in most families and a true partnership between men and women on the basis of equal rights and responsibilities is the challenge of modern families. Many of those changes are now beginning to appear in the developing countries.

69. In the developing countries exhibiting a rapid process of modernization, the mean age at marriage has risen significantly, owing particularly to a notable increase in female education, and this has implied a delay in the formation of families. Data confirm that in almost all industrialized and developing countries between the 1960s and the 1980s, and even more so between the 1970s and the 1980s, the singulate mean age at marriage of women increased. 34/ The magnitude of those increments varies, however, from region to region. In Africa, despite signs of a trend towards postponement, the average age at marriage for women is still quite early, and hence contributes to the maintenance of high-fertility patterns in most countries, especially in sub-Saharan Africa where most countries have a singulate mean age at marriage below 21 years. In Latin America and the Caribbean, by the 1980s the singulate mean age at marriage usually exceeded 20 years, but the effect of marriage postponement as opposed to the effect of contraceptive use on fertility levels is more difficult to ascertain in countries of high prevalence of consensual and visiting unions. In Asia, marriages have been delayed to varying degrees in recent years and by the late 1980s, the singulate mean age at marriage exceeded 21 years among women, except in Southern Asia.

70. The less developed regions are also characterized by traditionally larger differences between the sexes in the singulate mean age at marriage than the more developed countries. During the 1980s, differences exceeding five or six years were not uncommon in the less developed regions, whereas in most countries of the more developed regions they generally varied from two to three years. Northern America, Europe and the former USSR were also characterized by a considerable increase in mean age at first marriage, a significant decline in marriage prevalence and an increase in the proportion of those remaining unmarried. In the Scandinavian countries, the proportions of those ever married were very low. This increase in the proportion remaining unmarried may, however, have been largely compensated by the increase in unmarried cohabitation in those countries. During the period 1974-1994, it could also be observed that Governments made important advances in eliminating forms of coercion and discrimination in relation to marriage.

71. Family structures and composition are also affected by other socio-economic and political changes. In the 1970s and 1980s, for example, some Asian and African countries experienced large-scale international migration owing to a great shortage of labour in the oil-rich countries and internal political conflict in some countries of the regions. Recently, there has been large-scale migration from Eastern Europe owing to existing political changes and the political conflict in the former Yugoslavia. The effects of these large-scale migrations on family formation and structure are yet to be known but they need to be considered while formulating policies.

72. Family formation and structure are also influenced by changes in the value system of societies. In fact, the process of modernization has heightened the

value of achieving higher education and entering the labour market, while the attraction of a traditional child-bearing career for women has declined and, in fact, an increasing number of women are achieving higher education and entering the labour market. These changes in the developed countries have significantly modified the lifestyles of both men and women and have produced new levels of aspirations that aim at a smaller number of children. Similar trends are gradually appearing in the developing countries where rapid industrialization and economic development are taking place.

73. The significant breakthroughs in contraceptive technology have made possible the achievement of low fertility levels in the developed countries and the initiation of a process of rapid fertility decline in many developing countries. Such rapid declines in fertility in some Asian and Latin American countries have contributed to declines in the size of households.

74. In all developed countries except the former USSR, the average household size declined through the 1970s. Given the already small size of households, the absolute changes during that period were small - in many cases, between 0.2 and 0.4 persons or less. However, the trend was discernible, and seemed to be continuing through the 1980s, in countries where data were available. For instance, the North American household continued to shrink in size from 3.1 persons in 1970 to 2.7 in 1980, and further to 2.6 persons in 1990. Reduction in household size is also a trend that characterizes most countries in Eastern and South-eastern Asia and in Latin America. China, which contains more than one fifth of the world population, had a moderate household size of 4.4 persons in 1982 and 4.0 persons in 1990. The decline in household size was particularly evident among countries that experienced a significant decline in fertility. On the other hand, there were countries in Africa and in Southern and Western Asia where increases in average household size were reported. For example, the average household size in Algeria increased from 5.9 persons in 1966 to 7.0 persons in 1987. In Pakistan, the size grew from 5.7 persons in 1968 to 6.7 persons in 1981. All countries in Western Asia, except Israel and Turkey, reported an increase in their already high average household size of six or more; this was largely due to a decline in mortality among children as well as among the older age groups between the 1970s and the 1980s.

Household composition varies within and between regions. In the majority 75. of African countries, average household size is almost equally divided between children and adults, with a range of five to six members per household. In most Latin American countries the mean number of adults per household in the 1980s was close to 3.0 and was higher than the number of children. Similarly, the majority of Asian countries had 3.0 or more adult members per household and the mean number of children per household was always smaller than that of adults. In China, Hong Kong, the Republic of Korea and Singapore, a small but growing percentage of the urban elderly no longer live with their adult children. However, the norm is still the extended family and in rural areas there has been little change from the traditional family structure. The pattern of household composition observed in the developed countries was significantly different from that of developing countries. In the 1980s, the mean number of children per household varied in the narrow range of 0.5-0.9 and that of adults per household was in the range of 1.9-2.6; however, most of the countries had households with about 2.0 adult members. The presence of two adult members per household in the

developed countries is an indication of the predominance of the nuclear type of family; on the other hand, the presence of more than two or three adult members per household in the developing countries indicates the prevalence of an extended type of family or of a nuclear type of family with adult children present.

76. In the developed countries, the remarkable increase in the number of one-person households has been another important demographic change that has contributed to the size reduction of households. Between the 1970s and the 1980s, the developing countries were experiencing a drastic decline in the proportion of households of five persons or more, possibly suggesting the dissolution of the extended type of household. Also, there had been an increase in the number of one-person households, although the proportions of single-person households in the developing countries, as compared with those of the developed countries, remained relatively small. This tendency is more noticeable in those developing countries that are engaged in a rapid process of modernization.

77. From the policy perspective, one notable change in family formation and structure is the increasing number of households headed by single persons, particularly women. Female headship is common in many parts of the world and its prevalence is growing in many societies, in both the developed and the developing regions. The proportion of female-headed households among the total number of households ranges from less than 5 per cent in Kuwait and Pakistan to 45 per cent in Botswana and Barbados. A great diversity in the prevalence of female-headed households is observed in each region of the world. Around 1980, both in Latin America and in Africa, the proportion of female-headed households ranged from 10 to over 40 per cent. In Asia, the figures vary within a narrower range at a lower level. No Asian country reports that more than 20 per cent of their households are headed by women. In the developed countries during the 1980s, the range of female-headed households varied from 16 per cent in Spain to 38 per cent in Norway. The chance for formerly married women (widowed, divorced or separated) to become household heads is much higher than for single or married women everywhere in the world. The female headship rates for widowed and divorced/separated women were somewhat higher among the developed countries, where 60-80 per cent of those women were household heads. The corresponding figures for Latin American countries fell in the range of 40-60 per cent. Although the available data refer only to a limited number of African and Asian countries, the headship rates for formerly married women vary greatly within the regions. These trends are seen as signs of the vitality and resilience that the family as an institution has shown despite the many pressures and challenges that it has faced. New forms of family life are developing to meet the challenges of the modern world.

#### Issue No. 7: Socio-economic support to the family

78. To a large extent, perceptions, attitudes and aspirations affecting demographic variables are acquired by individuals through their family life. Families and broader kinship-based support systems, as noted earlier, provide the natural framework for the emotional and material custody essential to the growth and support of their members. Although it is recognized that families

should aim at achieving self-sufficiency, in many circumstances families are not and cannot be wholly self-sufficient. The reasons for and the solutions to family problems cannot be found solely in families themselves, but rather must include the socio-economic and cultural context in which they exist. This observation highlights the need to develop effective legislation, family policies, services and benefits aimed at strengthening basic family functions, taking into account variations in cultural, social and religious customs, and protecting the basic human rights of family members. Beyond this, there is a need to develop "family-sensitive" social and economic strategies, policies and programmes aimed not only at responding to the needs of vulnerable families, but also at identifying the "family impact" of policies and programmes more generally.

The Plan of Action and the Mexico City recommendations contain a series of 79. provisions aimed at supporting families in fulfilling their roles in society (para. 39 and recommendation 34, respectively). Families have been affected by the dynamics of the societies where they exist. Over the past few decades, the family has undergone varying degrees of changes in structure and functions, largely depending upon the level of national economic development and diversification. This process has been accelerated by advances in technology and changes in mores and values. In societies that have not been subject to rapid economic development, urbanization and demographic transformations, the changes have been less drastic. In addition to those long-term sustained influences, some short-term influences, such as the migration of workers, natural disasters, war and drastic deterioration in economic conditions, have placed severe pressure on families and family structure in many developing countries. In performing functions vital to the well-being of its members and society, the response of the family to those changes has ranged from adaptation without significant dysfunction to total breakdown. Where the family system has broken down, the pressure on social institutions has generally been extreme. In contrast, where supporting social and economic mechanisms were still in place, adaptation occurred, with less disruptive effects.

80. In some developed countries, both new laws and social welfare programmes have been instituted to respond to some of the problems that have emerged. Responses to social and economic changes are still evolving in most societies. As the family is such a fundamental unit of society, a more comprehensive understanding of the consequences of those changes for both individuals and society as a whole must be sought before the appropriate social mechanisms can be put in place. Among the social issues affecting the performance of family functions today is the increasing number of unprotected families, including single-parent families headed by poor women, destitute families, families that are separated owing to the working conditions of their members, refugee and displaced families, and families with members disabled or affected by diseases, as well as families afflicted with disintegration, domestic violence and child abuse or neglect. Of particular importance is the recognition that single mothers with children form a disproportionate share of the poor. The economic and social insecurities associated with the female-headed household is a matter of great concern, particularly for the development of young children.

81. There is a continuing need for data collection and analysis directed towards monitoring changes in the structure and dynamics of the family, as well

as towards an understanding of the ways in which economic and social trends and policies affect and are affected by changes within families. Some of the important areas needing improved understanding are child-care arrangements and, more broadly, the interactions among women's, men's and children's diverse roles, including their use of time, access to and control over resources, participation in decision-making processes, and changes in their norms, values and beliefs.

82. Family well-being may depend, to an important degree, on the ability of families to make informed choices concerning fertility. Such choice is a basic right which also has important benefits for maternal and child survival and health. Increased efforts are needed to ensure adequate family-life education which should address such issues as reproduction, sexuality, birth-spacing, information about sexually transmitted diseases (including AIDS). Equally important are parenting skills which are essential for promoting a deeper understanding of responsibilities in a familial and interpersonal context, as well as family values. Families also play a crucial role in meeting the health requirements of all their members; there is a need to support families in this vital role.

#### V. POPULATION GROWTH AND STRUCTURE

83. The following discussion is based on the United Nations <u>1992 Revision</u> of demographic estimates and projections. <u>35</u>/ The revision includes estimates of population size and structure, as well as levels of fertility, mortality and migration for the world, the more developed and the less developed regions, seven major areas, 22 regions and 223 countries, areas and territories. On the basis of such estimates and other analyses, the United Nations also prepares population projections, which are presented in three variants: high, medium and low. The medium variant indicates the most likely future prospect on the basis of the information and knowledge available for each particular country. All three variants assume, in general, further reductions in current levels of mortality and fertility. Table 1 presents a set of major demographic indicators for selected years and periods over the period 1950-2015 for the world and major areas.

84. The Plan of Action invited Governments that considered that their current or expected rates of population growth hampered their goals of promoting human welfare to consider adopting population policies, within the framework of socioeconomic development (para. 17). A similar recommendation was made by the 1984 International Conference on Population, Mexico City (recommendation 13). Governments' perceptions of their population growth rates have changed considerably over the past two decades, with an increasing number of countries viewing their growth rates as too high (see table 2). In 1993, only 11 per cent of countries perceived their population growth rates as too low (13 per cent of the developed countries and 10 per cent of the developing countries); 45 per cent perceived their rates to be satisfactory (87 per cent of the developed countries, compared with only 28 per cent of the developing countries); and only one of the developed countries (the former Yugoslav Republic of Macedonia) perceived its rates to be too high, compared with 61 per cent of the developing countries. <u>36</u>/

85. Many Governments have adopted policies aimed at influencing their population growth rate; others follow a policy of no intervention. Since the adoption of the Plan of Action in 1974, an increasing number of countries have decided to adopt policies aimed at lowering their growth rates. Table 3 displays the evolution of the types of interventions followed by Governments during the past two decades. In 1993, 34 per cent of the developed countries had policies aimed at maintaining their current growth rates, compared with only 4 per cent of the developing countries; and only 2 per cent of the developed countries had policies aimed at lowering their growth rates, compared with 53 per cent of the developing countries.

86. The number and proportion of people disabled due to health hazards, accidents or violence is another matter of major concern. The situation of disabled people is critical among poor communities, particularly in the developing countries. In general, people with disabilities are more vulnerable to physical abuse and discrimination than any other group. Unfortunately, the pressing issue of effective measures to prevent disability, to facilitate rehabilitation and, particularly, to fully integrate disabled persons into society remains unresolved; and in many circumstances, when resources for social

Region	Population size (millions)	Annual rate of change (percentage)	Crude birth rate (per thousand population)	Crude death rate (per thousand population)	Total fertility rate	Life expectancy at birth	Infant mortality rate (per thousand births)	Urban population (percentage)	Numbers of cities of $\overline{5}$ million or more $\underline{b}/$
World									
1950	2 516	1.79	37.5	19.7	5.00	46.4	155	29.3	8
1975	4 078	1.96	31.5	12.2	4.46	57.9	92	37.7	21
1995	5 759	1.68	26.0	9.2	3.26	64.7	62	45.2	35
2015	7 609	1.25	20.2	7.8	2.62	70.2	40	55.6	59
Developed countries									
1950	832	1.28	22.6	10.1	2.83	66.0	56	54.3	9
1975	1 095	0.86	16.7	9.3	2.21	71.1	22	68.8	10
1995	1 244	0.54	14.2	9.7	1.91	74.6	12	74.2	12
2015	1 366	0.38	13.0	10.0	2.01	77.5	ω	80.8	12
Developing countries									
1950	1 684	2.04	44.7	24.4	6.19	40.7	180	17.0	7
1975	2 983	2.38	37.2	13.3	5.42	54.5	105	26.3	11
1995	4 515	2.01	29.4	9.1	3.64	62.4	69	37.2	23
2015	6 242	1.44	21.9	7.3	2.75	68.6	44	50.1	47
Least developed countries									
1950	194	1.89	48.1	27.7	6.49	35.7	193	7.1	0
1975	344	2.47	47.5	21.1	6.68	43.6	148	14.3	0
1995	590	2.94	43.9	15.6	5.97	50.2	111	22.7	Ч

Table 1. Major demographic indicators by major area, 1950-2015  $\underline{a}/$ 

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## A/CONF.171/PC/3 English Page 34

Region	Population size (millions)	Annual rate of change (percentage)	Crude birth rate (per thousand population)	Crude death rate (per thousand population)	Total fertility rate	Life expectancy at birth	Infant mortality rate (per thousand births)	Urban population (percentage)	Numbers of cities of 5 million or more $\underline{b}/$
Africa									
1950	222	2.23	49.2	26.9	6.65	37.7	185	14.5	0
1975	415	2.66	46.8	19.3	6.62	46.1	135	25.0	г
1995	744	2.93	43.0	13.8	6.00	53.0	95	34.7	N
2015	1 265	2.50	33.9	8.9	4.25	61.1	63	47.6	ω
Latin America									
1950	165	2.70	42.3	15.5	5.88	51.4	125	41.6	1
1975	320	2.45	35.2	6.7	4.98	61.1	80	61.2	4
1995	482	1.79	25.7	6.9	3.05	68.0	47	74.2	ŋ
2015	637	1.18	19.0	6.6	2.31	72.0	30	81.8	ω
Northern America									
1950	166	1.80	24.6	9.4	3.47	69.0	29	63.9	Т
1975	239	1.06	15.7	0.6	2.01	71.5	18	73.8	ĸ
1995	292	1.06	15.7	8.8	2.04	76.1	8	76.4	ĸ
2015	341	0.66	12.5	8.5	1.90	78.8	9	82.2	ĸ
Asia									
1950	1 377	1.89	42.9	24.1	5.93	41.0	181	16.4	N
1975	2 356	2.27	34.9	12.4	5.07	56.1	98	24.1	Q
1995	3 408	1.78	26.3	8.3	3.45	64.8	62	31.2	18
2015	4 461	1.14	18.6	7.1	2.40	71.1	37	47.3	33
Europe									
1950	398	0.79	19.8	11.0	2.59	65.7	63	56.2	ĸ
1975	481	0.59	15.7	10.4	2.19	71.5	24	68.8	4
1995	516	0.27	12.7	10.5	1.71	75.2	10	75.0	Ŋ
2015	540	0.14	11.9	10.8	1.94	78.0	7	81.6	ы

Page 35

Region	Population size (millions)	Annual rate of change (percentage)	Crude birth rate (per thousand population)	Crude death rate (per thousand population)	Total fertility rate	Life expectancy at birth	Infant mortality rate (per thousand births)	Urban population (percentage)	Numbers of cities of 5 million or more $\underline{b}/$
Oceania									
1950	13	2.26	27.7	12.3	3.83	61.1	68	61.4	0
1975	21	1.81	23.9	9.6	3.22	66.8	40	71.6	0
1995	29	1.51	19.3	8.0	2.51	72.6	22	70.9	0
2015	37	1.16	16.7	7.5	2.39	76.4	15	74.4	0
USSR (former) <u>c</u> /									
1950	174	1.74	26.3	9.2	2.82	64.1	73	41.5	Ч
1975	247	0.94	18.1	8.6	2.44	68.6	26	59.7	Ч
1995	289	0.51	16.5	10.1	2.25	70.4	24	68.1	7
2015	328	0.65	16.4	6.6	2.30	74.1	12	76.6	2

-The 1992 Revision (United Nations publication, Sales No. E.92.XIII.11). Urbanization Prospects:

 $\underline{a}$ / Figures shown for the specified years refer to the following time-periods: 1950 signifies 1950-1955; 1975 signifies 1970-1975; 1995 signifies 1990-1995; and 2015 signifies 2010-2015, with the exception of population size and urban population, data for which cover the specified years, and number of cities of 5 million or more, data for which cover the years specified in footnote  $\underline{b}$ /.

 $\underline{b}$  / Figures for each region refer to the years 1950, 1970, 1990 and 2010, reading down consecutively.

<u>c</u>/ Including Armenia, Azerbaijan, Belarus, Georgia, Republic of Moldova, Russian Federation, Ukraine, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Estonia, Latvia and Lithuania are included in Northern Europe.

Table 2.	Governments' perception of rates of population growth, 1976-1993
	(Percentage of countries)

Year	Too low	Satisfactory	Too high	Total
1976	25.0	47.4	27.6	100.0 <u>a</u> /
1986	16.5	45.3	38.2	100.0 <u>b</u> /
1993	11.0	45.3	43.7	100.0 <u>c</u> /

<u>Source</u>: The Population Policy Data Bank maintained by the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat.

- <u>a</u>/ Representing 156 countries.
- <u>b</u>/ Representing 170 countries.
- <u>c</u>/ Representing 190 countries.

Table 3. Governments' policies aimed at influencing rates of population growth, 1976-1993

(Percentage of countries)

Year	Raise	No intervention	Maintain	Lower	Total
1976	19.9	55.1	55.1	25.0	100.0 <u>a</u> /
1986	15.9	44.7	8.2	31.2	100.0 <u>b</u> /
1993	11.6	37.4	13.2	37.9	100.0 <u>c</u> /

<u>Source</u>: The Population Policy Data Bank maintained by the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat.

- <u>a</u>/ Representing 156 countries.
- b/ Representing 170 countries.
- <u>c</u>/ Representing 190 countries.

programmes are scarce, the disabled community becomes a target for budgetary cuts. On the other hand, more recently Governments have adopted legislative measures addressing the situation of the disabled. The level of awareness has been enhanced by the United Nations Decade of Disabled Persons (1983-1992) and the adoption of the World Programme of Action concerning Disabled Persons. <u>37</u>/

87. Another group that has been receiving increased attention is that of indigenous people. In many regions of the world, indigenous communities experience discrimination and are unable to participate in the mainstream of the process of social and economic development. Many of those communities manifest particular demographic characteristics that are different from those exhibited by the national populations among which they live. While in some cases indigenous communities have manifested rapid rates of population growth as a consequence of declining mortality (associated with better access to health and welfare services), in other instances those communities have not been able to receive the benefits of social and material progress and their survival is in danger. In many instances, they have been forced to leave their natural habitat. Activities aimed at increasing awareness about the rights and concerns of indigenous people have been carried out by UNESCO for some decades, and that awareness has now been enhanced by the strong support manifested at the United Nations Conference on Environment and Development in 1992 and more recently by the reaffirmation by the General Assembly that it had proclaimed 1993 as the International Year of the World's Indigenous People. 38/

### Issue No. 8: Diversity of rates of population growth

88. The world population will have grown from 4 billion since the adoption of the World Population Plan of Action in 1974 to an expected size of 5.7 billion at the time of the International Conference on Population and Development (September 1994). The amount of the increase over 20 years, 1.7 billion, is equivalent to two fifths (more accurately, 42.5 per cent) of the population of the world in 1974. It is interesting to observe that it took the world 123 years to pass from the first billion around 1804 to the second in 1927. The next increment of 1 billion took 33 years (the world population reached 3 billion in 1960) and the next took 14 years (the world population reached 4 billion at the time of the United Nations World Population Conference at Bucharest). Only 13 years elapsed before the world population reached 5 billion (in 1987) and it is estimated that it will take only 11 years more for it to reach 6 billion (in 1998). Over 90 per cent of the recent population increase will have occurred in the less developed regions of the world.

89. From 1.96 per cent per annum in the period 1970-1975, and a steady 1.73-1.75 per cent per annum in 1975-1990, the world population growth rate is expected to decrease to 1.68 per cent per annum during the quinquennium 1990-1995. This growth rate would be the lowest of the post-Second World War period. Nevertheless, the decline, has not yet been translated into one in absolute numbers; the annual increment which was 47 million in the early 1950s, reached 88 million between 1985 and 1990 and is expected to continue to increase to 98 million between 1995 and 2000. Such declines in the rate of growth are projected assuming a firm continuation of present efforts and policies.

90. Since 1975, the annual growth rate in the less developed regions has decreased slightly, from 2.38 per cent in the period 1970-1975 to 2.01 per cent in the period 1990-1995. The rate in the more developed regions has decreased from 0.86 per cent in the period 1970-1975 to 0.54 per cent in the period 1990-1995.

91. Within the less developed regions, the group of the least developed countries have been growing at an even faster pace; their growth rate has increased from 2.47 per cent in the period 1970-1975 to 2.94 per cent in the period 1990-1995. This group is composed of 47 countries and does not represent a large proportion of the world population. Those countries made up 8 per cent of the world population in 1974 and 10.0 per cent in 1992; by the year 2015 they will constitute 13 per cent of the world population (and 14 per cent in 2025). The rate of growth of those countries, which has been increasing until now, is expected to begin to decline at the end of the present quinquennium.

92. The extremely varied range of demographic growth that characterizes the world at present, ranging from high to low levels of fertility and mortality, reflects the position reached by countries in the various stages of transition. One can distinguish four phases of population growth: (a) an increase in the growth rate to very high levels, due to decreasing mortality coupled with high fertility; (b) a decline in the growth rate, due to fast declining fertility coupled with declining mortality at moderate levels; (c) a stagnation of the growth rate at the intermediate level, due to moderate-level crude death rates and crude birth rates declining at about the same pace; and (d) a further decrease to low levels of growth, due to low fertility coupled with an increasing crude death rate resulting from the ageing of populations.

93. Of the 223 countries, areas and territories included in the above-mentioned <u>World Population Prospects: The 1992 Revision</u>, about half (104), containing more than two thirds of the total world population, had rates of population growth between 1 and 3 per cent per annum in the period 1985-1990. Among the other countries, 53 (representing 11 per cent of the world population) had growth rates of 3 per cent or more per annum; most were in Africa (24 countries) or in Asia (16 countries). At the other extreme, 66 countries, with 21 per cent of the world population, had growth rates below 1.0 per cent per annum; a majority of them were European countries (32 countries), but there were also 15 from Latin America, 3 from Asia and 2 from Africa.

94. In addition to the observed differences in the rates of population growth between the more developed and the less developed regions, it is important to observe that while there is a certain degree of homogeneity among members of the first group, the contrary is the reality of the second one. A certain degree of convergence in growth rates was perceptible in the period 1965-1970 when Africa, Asia and Latin America had growth rates ranging from 2.4 to 2.6 per cent per annum. However, those rates increased in Asia, and particularly in Central America and later on in Africa, as mortality rates declined; while South America's rate held steady, owing to concomitant fertility change. During the period 1985-1990 the growth rate increased in Africa to 3.0 per cent per annum, whereas in Asia and Latin America the rates declined to 1.9 and 2.0 per cent respectively.

The above variations in growth rates are even more pronounced for regions 95. within the major areas. The lowest rates are found in Eastern Asia and the Caribbean (1.3 and 1.5 per cent respectively), whereas the highest rates belong to Eastern and Western Africa (3.2 per cent). As a result of such trends, the distribution of the world population will manifest important transformations. The population of Europe, which already decreased between 1950 and 1990 from a figure representing 16 per cent of the world population to one representing 9 per cent of the world population is expected to represent no more than 7 per cent of the world population in the year 2015; and a similar path will be followed by Northern America and the former USSR (representing 6.6 and 7.2 per cent respectively of the world population in 1950; 5.2 and 5.4 per cent respectively of the world population in 1990; and 4.5 and 4.3 per cent respectively of the world population in 2015). While Asia will continue to hold more than half of the world population (55 per cent in 1950 and 59 per cent in 2015), it is the group of African countries that will increase their proportion significantly (from 9 per cent in 1950 to 17 per cent in 2015).

96. Among the most recent United Nations long-range population projections, the medium-fertility extension assumes that fertility will ultimately stabilize at the replacement level around the year 2100. In this case, it is projected that the world population will increase by 89 per cent between 1990 and 2050, reaching a size of 10 billion, then expand by 12 per cent during the following 50 years (2050-2100) to a size of 11.2 billion, and by 3 per cent during the next 50 years (2100-2150) to a size of 11.5 billion. The world population may stabilize ultimately at 11.6 billion people shortly after the year 2200. This figure is higher than that calculated a decade ago which indicated a stabilization at 10.2 billion around the year 2100.

97. Other long-range projections produce a wide range of projected population sizes. For example, assuming that fertility stabilized at 5 per cent above the replacement level (in other words, at a total fertility rate of 2.17, instead of 2.1, children per woman), the world population would reach 20.8 billion in the year 2150 and would still be growing. If fertility stabilized at 2.5 (high variant), the size would be 28 billion in the year 2150 and still growing. If, however, fertility could stabilize at the level of 1.96 children per woman, the world population in the year 2150 would be just 5.6 billion and declining. It is important to take into account that the level of fertility and the speed of attaining stabilization in the future will depend on the level of social and economic development of each country as well as the effectiveness of Governments' policies and programmes.

### Issue No. 9: Changes in the population structure

98. The age structure of the population varies among countries and changes over time, raising various types of economic and social problems. In the 1950s and 1960s, special attention was drawn to the rapid growth of the child population in the developing countries. The population growth of children was faster than that of adults who were responsible for raising and supporting them, and thus was considered a threat to the economic and social development of those countries. This problem remains serious in countries that still have high levels of fertility. In recent years, increasing attention has been given to

the ageing of populations in many countries. This demographic trend is considered to have significant economic and social consequences in many areas, particularly for pensions, the size of the labour force, medical care, services for the disabled, family structure and residential patterns.

99. For the purpose of analysing differential trends of age distribution, it is useful to classify countries in terms of the timing of the initiation of significant fertility decline. The age distribution of the pre-initiation countries, where significant fertility decline had not started by 1990, was very young in 1950 and became increasingly younger for the period 1950-1990. The proportion under age 15 increased from 42 to 46 per cent, the proportion of those aged 65 or over decreased from 3.5 to 2.8 per cent, and the median age declined from 19.1 to 17.0 years.

100. The trend in age distribution of the late-initiation countries changed its direction around 1970, when those countries, on the average, started their fertility decline. Their age distribution had become increasingly younger in the 1950s and 1960s but became increasingly older in the 1970s and 1980s. The proportion under age 15 increased from 37 per cent in 1950 to 42 per cent in 1970, and then declined to 33 per cent in 1990. The proportion of those aged 65 or over tells a slightly different story: It remained at about 4 per cent in the 1950s and 1960s, then rose to 4.9 per cent in 1990.

101. Trends in the early-initiation countries, where fertility decline had started before 1950, were marked by an acceleration of the ageing of their population. The proportion under age 15 in those countries was 28 per cent in 1950, a figure that was considerably lower than those of the pre-initiation and the late-initiation countries. It rose slightly to 29 per cent in 1965, reflecting the so-called baby boom observed in a number of countries after the Second World War, then declined steeply to 21 per cent in 1990. The proportion aged 65 or over grew rapidly, from 8 per cent in 1950 to 10 per cent in 1970, and further to 12 per cent in 1990. The median age increased from 28 years in 1950 to 34 years in 1990. The pre-initiation pattern of age distribution trends characterized the least developed countries, mostly in Africa, Southern Asia and Western Asia; the late-initiation pattern was followed by the other less developed regions, mostly in Latin America, Eastern Asia and South-eastern Asia; and the early-initiation pattern was followed by the more developed regions, mostly in Northern America, Europe, Oceania and the former USSR.

102. It is estimated that as of mid-1990, the proportion of the world population under age 15, and aged 65 years or over, was 32 per cent and 6 per cent, respectively. In other words, about 1 out of 3 persons on the earth was a child, and 1 out of 16 was an older person. The median age was 24 years, indicating that the world population is still relatively young. There are marked geographical differences in the current age distribution as shown in table 4, reflecting different past levels of and trends in fertility and mortality. The youngest populations are found in Africa, particularly in Eastern Africa and Western Africa. In those two regions, the proportion under age 15 is about 47 per cent, the proportion aged 65 years or over is below 3 per cent, and the size of the child population is 17 times that of the elderly population. Located at the other end of the spectrum are Northern Europe and Western Europe, where the proportion of those aged 65 years or over is about

population under age over, by major area,			s or	
Major area/region	1950	1975	1995	2015
World				
Under 15	34.5	36.9	31.9	27.1
Aged 65 years or over	5.1	5.7	6.5	7.8
Developed regions				
Under 15	27.7	24.8	20.9	19.5
Aged 65 years or over	7.6	10.7	12.9	15.4
Developing regions				
Under 15	39.9	41.4	34.9	28.9
Aged 65 years or over	3.8	3.8	4.8	6.2
Least developed countries				
Under 15	41.3	44.7	44.1	39.6
Aged 65 years or over	3.3	3.1	3.0	3.2
Africa				
Under 15	42.6	44.9	44.8	40.0
Aged 65 years or over	3.2	3.0	3.1	3.3
Asia				
Under 15	36.7	39.9	32.2	25.6
Aged 65 years or over	4.0	4.1	5.4	7.3
Europe				
Under 15	25.4	23.9	19.0	18.2
Aged 65 years or over	8.7	12.3	14.1	16.8
Latin America				
Under 15	40.4	41.2	33.8	26.4
Aged 65 years or over	3.5	4.1	5.1	7.1
Northern America				
Under 15	27.2	25.3	21.8	19.0
Aged 65 years or over	8.1	10.3	12.6	14.4
Oceania	o o –			<b></b>
Under 15	29.7	31.0	26.4	24.2
Aged 65 years or over	7.4	7.5	9.5	11.1
USSR (former)	2.2.2	0.5.5	05 1	0.0
Under 15 Aged 65 years or over	30.2 6.0	26.1 9.5	25.1	23.6
Aged 65 years or over	0.0	2.5	10.9	11.5

Table 4. Estimates and projections of proportions of the population under age 15 and age 65 years or over, by major area, 1950-2015

<u>Source</u>: <u>World Population Prospects</u>: <u>The 1992 Revision</u> (United Nations publication, Sales No. E.93.XIII.7).

15 per cent, and the proportion under age 15 is less than 20 per cent. The sizes of the two groups are comparable in those two regions. The populations of Eastern Europe and the former USSR are relatively younger than those of the other more developed regions. Falling between young-age distributions in Africa, and the relatively old-age distributions in Northern America, Europe, Oceania and the former USSR, are the age distributions of Latin America and Asia. In these two major areas, the proportion aged 65 years or over is about 5 per cent and the proportion under age 15 constitutes about one third of the population.

103. The proportion of the world population under age 15 is projected to decrease from 32 per cent in 1990 to 27 per cent in 2015, and the proportion aged 65 or over will increase from 6 per cent in 1990 to 8 per cent in 2015. Considerable geographical differentials in age distribution are projected to remain during the next few decades. In 2015, Africa will have the highest proportion under age 15 (the projected figure is 40 per cent). At the other end of the spectrum, in Europe and Northern America, the proportion will be about 18-19 per cent. Located in between are Oceania, the former USSR, Asia and Latin America, for which the proportion of those under age 15 is projected to be 23-26 per cent in 2015. The largest regional variations within a major area are expected for Asia where the proportion under age 15 in 2015 will range from 19 per cent (in Eastern Asia) to 34 per cent (in Western Asia).

104. The order is reversed for the projected proportion aged 65 years or over. The highest proportions are expected for Northern America (14 per cent in the year 2015) and in Europe (17 per cent), followed by the former USSR (11.5 per cent) and Oceania (11 per cent). The lowest proportion (3 per cent) is projected for Africa. Again, Latin America and Asia (7 per cent) will fall between Africa and the major areas composed entirely or predominantly of more developed regions.

105. The above trends and perspectives can be better perceived when represented in the form of dependency ratios (the number of children under 15 years and of adults aged 65 or over per 100 adults in the age group 15-64). At the global level, it can be observed that the world passed from a dependency ratio (minors and elderly per 100 adults) of 66 in 1950 to one of 74 in 1975, and it is expected that the dependency ratio will be 62 in the year 1995 and 54 in the year 2015. While dependency ratios are expected to continue to decrease in the future, owing mainly to the decline in the proportion of those aged less than 15 years, their values will increase by about 7 per cent in the more developed regions, as the number of those regions' elderly will be augmented substantially. A similar pattern may be followed by the less developed regions but not before the middle of the next century.

106. According to the information available in the Population Policy Data Bank, only 11 per cent of Governments are satisfied with what their perception reveals about their country's age structure; 40 per cent are unsatisfied; and 7 per cent are very unsatisfied. Those Governments that appear to be unsatisfied are particularly concerned with the high proportion of the population that is below age 15. Among the Governments that specifically alluded to their views on the proportion of the population below age 15, only 7 per cent of Governments reported that they were satisfied.

107. The World Population Plan of Action has various provisions aimed at protecting the condition of children, such as the elimination of child labour and child abuse (para. 32 (e)), the equalization of the legal and social status of children born in and out of wedlock as well as children adopted (para. 40 (a)), and the establishment of the legal responsibilities of parents towards the care and support of all their children (para. 40 (b)). The Plan of Action asks Governments to take fully into account the implications of changing structures of the population in the formulation of their development policies and programmes (para. 63). Deteriorating social and economic conditions of society usually have a devastating impact on children. In many instances such decay is strongly associated with, or is the root cause of, the growing number of street children, children engaged in prostitution, and child labourers. The girl child is particularly vulnerable to gender inequalities among some social groups: She can be the victim of neglect and discrimination in a variety of forms such as differential nourishment and education, and in her socialization. Effective action from Governments to protect children from abuse, to prevent child exploitation, and to deter the increased sex and organ trade which affects children, has been weak. On the positive side, and among important recent achievements, the World Summit for Children, held in September 1990, led to the adoption of a plan of action that contains major goals regarding the survival, protection and development of children by the year 2000. 39/

108. The issue of changing population structure is of critical importance to policy makers as well as to those in the private sector, because there are considerable age variations for many types of economic and social activities and characteristics, including labour force participation, income and needs for a variety of goods and services. People in different age groups are in different stages of the life cycle, so that they have different demands for goods and services. Typical goods and services that are closely related to a particular life-cycle stage include paediatric care, school education, different types of housing, family planning services and obstetric care, nursing homes and other services for the elderly, and geriatric care.

109. With societies including increased proportions of aged people, new requirements are appearing and new allocations are in demand. Of particular importance is the recognition that among the most vulnerable old people are the rapidly increasing proportion of very old women. To respond to the new demands, different societies have established a wide variety of mechanisms and measures to achieve a certain degree of "intergenerational equity", mainly through health-care and income support systems. There is ample evidence that a large majority of the frail elderly have been receiving support from their relatives, particularly their spouses and children. Equally revealing is the finding that the elderly and their families may accept assistance from the formal care sector only as a last resort. In spite of the significant progress made in creating awareness about the contribution that the elderly can continue to provide to society, as well as in adopting measures to respond to the needs of older persons, 40/ it is important to indicate how little advancement has been made in assessing the magnitude of the physical and human resources needed to accommodate the increasing number of very old people, as well as in preparing guidelines on the appropriate balance between social and family support for them.

# VI. REPRODUCTIVE RIGHTS, REPRODUCTIVE HEALTH AND FAMILY PLANNING

110. During the past two decades, an increasing number of countries have adopted varied measures aimed at modifying their fertility levels, the expansion of the availability of family planning services being the most common among them. In addition, increasing numbers of couples and individuals have created a strong demand for such services and are demanding the improvement of their quality. Particularly important is the new emphasis that encompasses reproductive rights, reproductive health and family planning. Reproductive health is conceived of as a condition that facilitates the completion of the reproductive process in full physical, emotional and social well-being. The role played by reproductive rights, which refer to a set of prerogatives and responsibilities on the part of couples and individuals, is a crucial one for the attainment of reproductive health. Access to family planning information and services is an important instrument for the exercise of reproductive rights. In this chapter, three major issues, namely, the diversity of reproduction patterns and policies, the availability of and access to family planning, and adolescent fertility, are examined.

### Issue No. 10: Diversity of reproduction patterns and policies

### Levels and trends of fertility

111. Fertility levels, measured by the total fertility rate (the average total number of children that a woman would have by the end of her reproductive life if current conditions remained unchanged), continued to decline in all of the world regions in recent decades and are expected to continue to do so in the coming years. World fertility fell by 10.5 per cent - from 3.8 to 3.4 births per woman - between the periods 1975-1980 and 1985-1990, and the magnitude of the decline was projected to reach 13.2 per cent by the period 1990-1995. According to World Population Prospects: The 1992 Revision, the total fertility rate varied from 8.5 (the highest: Rwanda) to 1.3 (the lowest: Italy). Virtually all developed countries have fertility rates that are below the population replacement level (2.1 births per woman). The less developed regions have experienced a significant decline in their level of fertility, from 6.2 births per woman in the period 1950-1955 to 3.6 in the period 1990-1995, and the level is projected to be 2.75 in the period 2010-2015, according to the medium-variant projection of the United Nations. The group of least developed countries has experienced the highest fertility levels, with at least six births per woman, on the average, throughout the period. However, in some of the least developed countries, fertility levels have started to decline and the average is projected to be 4.3 in the period 2010-2015.

112. In the less developed regions, the decline in total fertility rates reached 15 per cent during the periods 1975-1980 and 1985-1990 and is expected to exceed 21 per cent by the period 1990-1995. There are however differences within the less developed regions themselves. In most of the regions of Africa, fertility rates remained high, often above six births per woman, and the fertility decline was very small. In the Asian and Latin American regions, fertility tended to converge from rates exceeding 4-5 births per woman towards more moderate levels

of 2-4 births per woman, and fertility levels are projected to continue to proceed in this direction. Thus, by the period 1985-1990 the range of average fertility rates had widened among the less developed regions: It was as low as 3.4 in Latin America and 3.5 in Asia, and as high as 6.3 in Africa. It is important to indicate that the observed reductions in the number of births per woman did not produce a comparative decline in the average number of births; in fact, the annual number of births continued to increase. During the past 15 years, in Africa, for example, fertility rates declined by 9.1 per cent, while the number of births increased by 44.1 per cent. At the world level, while rates declined by 13.2 per cent, the number of births increased by 19 per cent during the same period.  $\underline{41}$ /

113. This situation reflects both the past and the current social, political and economic conditions of those regions. Such conditions affect both economic and social development as well as the degree of success of policies to reduce fertility. Indeed, in general it is in the least developed countries, where the level of development and family planning programme efforts is lowest, that steady high fertility rates are observed. Conversely, among the more modernized countries of Asia and Latin America, where development is progressing and fertility regulation methods are more readily available, fertility has been declining steadily, and sometimes sharply, as is the case in Eastern Asia, for instance, where fertility fell from 2.8 to 2.3 births per woman between the periods 1975-1980 and 1985-1990. In Japan, Singapore, the Republic of Korea and Hong Kong, notably, the total fertility rate fell below the replacement level; and by the late 1980s the total fertility rate had reached levels as low as 1.3 births per woman in Hong Kong.

114. In the more developed regions, where fertility rates below the replacement level were reached as early as the 1970s in a number of countries, fertility has also continued its downward trend. By the period 1985-1990, fertility rates were below 2 births per woman in most developed regions. By 1990, only a few countries, namely Albania, Ireland, Sweden and the former USSR, had fertility rates exceeding 2.1. On the other hand, exceptionally low rates - as low as 1.3 births per woman - were recorded in Italy and Spain as early as 1989. In recent years, however, a turning-point seems to have been reached in some countries where a slight upward fertility trend has been observed. This is the case notably in the United States of America, several countries of Northern and Western Europe, and New Zealand. 42/

115. The significance of those fertility patterns differs substantially, however, for the more developed and the less developed regions when changes in fertility are examined also in terms of changes in average annual number of births. Indeed, in the less developed regions, between the periods 1975-1980 and 1985-1990, the annual average number of births continued to increase, sometimes considerably, mainly as a consequence of the population momentum resulting from the increase in the number of women of reproductive age, which itself resulted from the high fertility of the past. This increase in the number of births, together with the effects of declining mortality, continues to fuel the increments in population size despite the decline in fertility rates. Conversely, in Europe, where the overall total fertility rates declined during the past two decades, the average annual number of births also fell. Thus, despite the overall fertility reductions in the world, many countries of the

less developed regions still continue to be concerned about increasing population size, whereas countries of the more developed regions have been facing other concerns related to fertility decline, notably an increased ageing population, a shrinking of the labour force and immigration issues.

### Age patterns of fertility

116. Besides the differences in their levels of fertility, world regions also show differences in their age patterns of fertility. Those age patterns are influenced by the timing of family formation and the mean age at first marriage, as discussed above (chap. IV, paras. 70 and 71). Assumptions for age-specific fertility rates for the period 1990-1995 show that the less developed regions experience their highest fertility (205 births per 1,000 women) in the age group 20-24, whereas in the more developed regions the highest age-specific fertility rate (only 126 births per 1,000 women) is found in the age group 25-29. When the less developed regions are compared, Africa appears to have the highest age-specific fertility, with an average broad peak pattern of about 275 births per 1,000 women for women aged 20-24 years in the period 1990-1995. Subregional differences reveal, however, that fertility in Northern and Southern Africa is highest at ages 25-29, whereas in the other subregions the peak value occurs at ages 20-24.

117. A broad peak also prevails in Asia and Latin America, even though, with an average rate of about 192 births per 1,000 women in Asia and 173 births per 1,000 women in Latin America at ages 20-24, the peak maximum is much lower than in Africa. In Latin America, however, it is expected that completed fertility will be achieved at a younger age than in Asia. Indeed, in Latin America, it is expected that about two thirds of total fertility will be achieved to less than 60 per cent for the Asian subregions, except Eastern Asia where 80 per cent of total fertility has occurred by age 30 (figures derived from the values presented in table 5).

118. In Europe and Northern America, peak fertility occurs at ages 25-29; in this age group, the fertility rate is 117 births per 1,000 women in Europe and 124 births per 1,000 women in North America. Overall levels are considerably lower than in the less developed regions and completed fertility is achieved even earlier: It is expected that about 70 per cent of total fertility will be completed before age 30. In Australia and New Zealand, the fertility tempo is only slightly slower, with 66 per cent of overall fertility achieved before age 30. The former USSR and Eastern Europe deviate significantly from the overall fertility pattern just described: Peak fertility is expected to occur in age group 20-24, and in the former USSR reproduction ceases early, with almost 80 per cent of total fertility completed by age 30 (figures derived from table 5).

			Fertili	-	(births y age gr		0 women)	
Major area or region	Total fertility (per woman)	15-19	20-24	25-29	30-34	35-39	40-44	45-49
World	3.3	59	190	183	120	65	27	8
More developed regions	1.9	35	119	126	72	25	5	0
Less developed regions	3.6	64	205	198	135	79	36	11
Africa	6.0	143	276	274	228	156	88	35
Eastern Africa	6.8	152	315	306	256	178	104	40
Middle Africa	6.5	207	306	272	230	164	90	25
Northern Africa	4.7	68	206	237	200	138	65	17
Southern Africa	4.2	78	200	214	164	98	62	27
Western Africa	6.5	179	293	284	238	161	98	51
Asia	3.2	44	192	189	119	64	27	7
Eastern Asia	2.1	16	181	151	59	16	5	1
South-eastern Asia	3.4	32	163	205	151	82	32	11
Southern Asia	4.3	72	212	223	173	115	52	14
Western Asia	4.7	77	219	247	184	133	61	17
Europe	1.7	24	99	117	71	25	5	0
Eastern Europe	2.0	45	164	114	52	21	5	0
Northern Europe	1.9	28	100	129	87	31	б	0
Southern Europe	1.5	19	80	103	64	25	б	0
Western Europe	1.6	13	82	125	77	26	5	0
Latin America	3.1	68	173	161	113	68	25	4
Caribbean	2.8	71	161	147	100	60	24	7
Central America	3.5	96	204	171	120	76	26	4
South America	2.9	55	161	160	112	66	24	4
Northern America	2.0	55	119	124	79	27	5	0
Oceania	2.5	30	117	167	115	49	17	6
Australia and New Zealand	1.9	23	89	145	96	31	5	1
USSR (former) $\underline{a}/$	2.3	48	182	122	65	26	7	0

## Table 5. Age-specific fertility rates for major areas and regions of the world, 1990-1995

Source: Supplementary tabulations to <u>World Population Prospects: The 1992 Revision</u> (United Nations publication, Sales No. E.93.XIII.7).

<u>a</u>/ Including Armenia, Azerbaijan, Belarus, Georgia, Republic of Moldova, Russian Federation, Ukraine, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan. Estonia, Latvia and Lithuania are included in Northern Europe.

### Policies aimed at affecting fertility levels

119. It is important to take into account that although fertility levels are conditioned by complex social and economic structures, their impact is mediated by three major intermediate sets of variables: (a) factors affecting exposure to intercourse (for example, age at entry into sexual unions and abstinence); (b) factors affecting conception (for example, levels of fecundity/infecundity and contraception); and (c) factors affecting gestation and parturition (for example, foetal mortality, abortion). Governments wishing to modify the fertility levels of their country may design policies aimed at modifying the social and economic determinants of, and/or the most immediate factors affecting, fertility. The World Population Plan of Action recognizes, as one of its principles, the basic right of couples and individuals to decide freely and responsibly the number and spacing of their children (para. 14 (f)). It also acknowledges the variety of national goals with regard to fertility (para. 27), recommends criteria to be followed in the formulation and implementation of fertility policies (para. 29) and recognizes a series of instruments available to affect fertility (paras. 30-32). The International Conference on Population (Mexico City) not only reaffirmed the provisions of the Plan of Action but also adopted other complementary recommendations asking Governments to make family planning universally available, to provide education and suitable family planning information to adolescents, to improve the quality of services, to provide the necessary resources for those programmes, and to adopt fertility goals and policies ensuring that programmes were neither coercive nor discriminatory (recommendations 25, 27-33, and 35).

120. Governments' views on fertility levels, and their policies, have changed since the adoption of the World Population Plan of Action in 1974, with an increasing number of countries' perceiving their fertility levels as too high (see table 6). Three years into the final decade of the twentieth century, 45 per cent of all countries viewed their level of fertility as too high. This number represented 67 per cent of the world population. The gradual shift towards viewing fertility as excessive (the corresponding figure was 40 per cent of all countries in 1986) is the continuation of a long-term trend that was already under way during the period 1976-1986, when the percentage increased slightly from 35 to 40 per cent. The percentage of countries that viewed fertility as too low dipped from 14 per cent in 1986 to 12 per cent in 1993, while those viewing fertility as satisfactory declined from 50 to 44 per cent between 1986 and 1993.

121. Regarding the policies undertaken to influence the level of fertility (see table 7), the trends closely parallel those in the perceptions of fertility already noted. The percentage of countries intervening to lower fertility increased from 26 to 41 per cent between 1976 and 1993, while the percentage of countries with policies to raise fertility increased slightly during the same period, from 9 to 12 per cent. Those countries with a policy of non-intervention declined sharply from 51 to 33 per cent. Such a global analysis, however, masks much of the diversity that is apparent at a lower level of aggregation. For example, as of 1993, while 63 per cent of the developing countries viewed their fertility level as too high, only a single developed

# Table 6. Governments' views on fertility levels, 1976-1993

Year	Too low	Satisfactory	Too high	Total
1976	11.5	53.2	35.3	100.0 <u>a</u> /
1986	14.1	50.0	40.0	100.0 <u>b</u> /
1993	11.6	43.7	44.7	100.0 <u>c</u> /

(Percentage of countries)

<u>Source</u>: The Population Policy Data Bank maintained by the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat.

- <u>a</u>/ Representing 156 countries.
- <u>b</u>/ Representing 170 countries.
- <u>c</u>/ Representing 190 countries.

Table 7. Aim of Governments' policies to influence fertility levels, 1976-1993

(Percentage of countries)

Year	Raise	Maintain	Lower	No intervention	Total
1976	9.0	14.1	25.6	51.3	100.0 <u>a</u> /
1986	11.8	11.2	32.4	44.6	100.0 <u>b</u> /
1993	12.1	13.7	41.1	33.2	100.0 <u>c</u> /

<u>Source</u>: The Population Policy Data Bank maintained by the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat.

- <u>a</u>/ Representing 156 countries.
- <u>b</u>/ Representing 170 countries.
- c/ Representing 190 countries.

country held this perception. Slightly more than two thirds of developed countries (70 per cent) viewed their fertility level as satisfactory. Those developing countries (7 per cent) that viewed their fertility level as too low were for most part countries with relatively small populations and low population densities. In 1993, 45 per cent of the developed countries adopted a policy of no intervention and 29 per cent desired to maintain their current fertility levels, whereas 28 per cent of the developing countries adopted a policy of no intervention and only 8 per cent desired to maintain their current fertility levels. For the same year, 12 per cent of Governments had adopted policies aimed at increasing their fertility levels (25 per cent of the developed countries and only 5 per cent of the developing countries); and while only one developed country had adopted a policy to lower its fertility level, 57 per cent of the developing countries had done so. On the more general level, it could be observed that the promotion of social justice to be achieved, inter alia, through a more equitable distribution of income, land, social services and amenities, as proposed by the Plan of Action (para. 32 (c)), is a goal that has not been achieved by many Governments, partially owing to the impact of the severe global economic stagnation and recession that have affected many countries during the past two decades.

122. There is also an increased concern over the effect on human reproduction of new biotechnologies that make possible artificial insemination, in vitro fertilization, embryo transfers, surrogate motherhood, cryogenic storage of sperm and ova, genetic selection, and prenatal diagnosis, including sex determination. Some of these technological achievements raise such important questions in the field of reproductive rights and reproductive health as, Should embryo studies leading to eugenic practices be permitted? Under which circumstances could these new biotechnologies be used for demographic purposes? Should women beyond a certain age be permitted to have access to medically assisted reproduction, and receive embryo transfers, for example, or be artificially inseminated? Although most of these technologies have as yet no significant demographic impact, of particular concern are issues such as ethical values, human rights violations, and the potential for future alteration of some demographic characteristics, especially the sex composition of populations. 43/ The international community should begin to address the above issues and discuss the possibility of adopting a set of international standards, perhaps in the form of a protocol, on use of and access to the new biotechnologies.

123. Observation of sex ratios at birth (the number of male births per 100 female births) in some countries and some provinces shows a disproportionate number of boys, above the normal range of values. Some societies have a strong patriarchal tradition and therefore a strong preference for sons. Where prenatal diagnostic techniques are available to identify the gender of the unborn, the use of abortion could explain the irregularities in sex ratios. Concerned by this practice, at least one state government in India has adopted legislation to control the abuse of prenatal diagnostic procedures that would encourage the use of abortion for gender-selective purposes.

### Abortion

124. The recommendations adopted by the International Conference on Population, held in Mexico City in 1984, include a short item that urges Governments to take appropriate steps to help women avoid abortion, which in no case should be promoted as a method of family planning, and whenever possible, provide for the humane treatment and counselling of women who have had recourse to abortion (recommendation 18, subpara.  $\underline{e}$ ). This recommendation was the subject of a heated debate in 1984 and was connected with one of the few instances where a government delegation requested that a separate statement be included indicating that while joining the consensus, the delegation wanted to affirm that one step towards the elimination of illegal abortion, which represented a very serious health hazard, was the provision of access to abortions that were legal and safe.

125. One of the major limitations in understanding abortion practices is the availability of reliable statistics. The most common sources refer to official statistics provided by Governments, surveys and hospital admissions.  $\underline{44}/$  It has been estimated by WHO that approximately half a million women die every year for reasons associated with their reproductive life, and that about 30 per cent of those deaths are due to unsafe abortion. The incidence of abortion varies, however, between the developed and the developing countries for which abortion data are available. 45/ In 1987, in China and India for instance, the number of abortions per 100 live births was estimated to be about 45 and 2 respectively. In the Eastern European countries this ratio sometimes exceeded 100, although it rarely exceeds 30 in the other European regions. It has been estimated that in 1987, between 26 million and 31 million legal abortions, and between 10 million and 22 million clandestine abortions, were performed world wide. Action towards a greater liberalization of abortion has been growing recently in many countries, notably in Belgium, Romania and Spain, where access to legal abortions has been made easier by recent legislation, although abortion is far from being provided on request. In other European countries, however, notably in Ireland, such efforts were less successful and in Poland recent legislation established access to abortion only for health reasons.

126. Information available in the Population Policy Data Bank indicates that in 1993, for the 187 countries for which there was such information, 171 countries granted access to abortion when the purpose was to save the life of the mother and 41 made abortion available on request (see table 8). Finally, it can be reported that no Government has ever sanctioned the use of compulsory abortion or other forms of coercion to comply with demographic targets.

Access granted	Number of countries	Percentage of countries
To save the life of the mother	171	92
To protect the physical health of the mother	119	64
To protect the mental health of the mother	96	52
In case of rape or incest	81	44
In case of foetal impairment	79	42
In case of economic hardship	55	30
On request	41	22

### Table 8. Grounds for permitting abortion, 1993

<u>Sources</u>: <u>Abortion Policies</u>: <u>A Global Review</u>, vol. I, <u>Afghanistan to</u> <u>France</u> (United Nations publication, Sales No. E.92.XIII.8); vol. II, <u>Gabon to</u> <u>Norway</u> (United Nations publication, Sales No. E.94.XIII.2); and vol. III, <u>Oman</u> <u>to Zimbabwe</u> (United Nations publication, forthcoming).

## Issue No. 11: Availability and access to family planning

127. As has been mentioned earlier in this report, there has been an expansion of family planning services around the world. Such expansion has found its rationale as a consequence of recognizing the right of couples and individuals to decide the number and spacing of their children, as a means to achieve demographic purposes, or as a health measure, considering that early, late, numerous and frequent pregnancies are all detrimental to maternal and child health. Recent trends indicate in general some major shifts in the way family planning programmes are conceived and organized:

(a) Emphasis is increasingly being placed on the needs of users, not just on aggregate acceptor figures, and on human rights and health benefits, not just on the demographic impact of programmes;

(b) There is increasing criticism of traditional target systems for family planning workers and more emphasis on integrating such services into health programmes;

(c) There is extensive recognition of the fact that incentive and disincentive schemes to lower or raise fertility have only a marginal impact on fertility levels and in some cases are counter-productive;

(d) There is wider acceptance of family planning programmes as constituting good vehicles for confronting the spread of HIV and other sexually transmitted diseases.

### Contraceptive use

128. According to data available through 1993 (see table 9), in 1990 approximately 57 per cent of couples in the world with the wife in the reproductive ages were currently using contraception - about 72 per cent in the developed countries and 53 per cent in the developing countries. Considering the lag between the time of data collection and the current period, the level of contraceptive use in the developing countries is likely to have been about 55 per cent in 1993. Regional differences in levels of use remain large.

129. Methods used by women make up about two thirds of contraceptive practice world wide, and such methods have been increasing their share in total contraceptive use. The most widely used methods are female sterilization, accounting for 30 per cent of contraceptive use world wide, intra-uterine devices (IUDs) (21 per cent) and oral pills (14 per cent). The main male methods, condoms and vasectomy, each account for 9 per cent of contraceptive use, while "couple" methods – chiefly natural family planning (rhythm) and withdrawal (coitus interruptus) – account for about 13 per cent of contraceptive use. While there remain many countries in Africa and several in other regions where the level of contraceptive use is still very low, most developing countries that have available data on trends have experienced a substantial increase in the level of contraceptive use. Even in sub-Saharan Africa, recent surveys show an increase in levels of use in several countries: Botswana, Cameroon, Kenya, Lesotho, Namibia, Rwanda, Swaziland, South Africa and Zimbabwe.

		Modern	Sterilization	zation			Intra- uterine		Vadinal			
Region	All methods	methods a/	Female	Male	Pill	Inject- able	device (IUD)	Condom	barrier methods	Rhythm	With- drawal	Other methods
	(1)	(2)	(3)	(4)	(2)	(9)	(	(8)	(6)	(10)	(11)	(12)
			A. Pei	Percentage	of	couples with t	the woman i	in the rep:	the reproductive a	ages		
World	57	49	17	ß	8	1	12	ß	1	e	4	Т
Less developed regions	53	48	20	ŋ	9	Т	13	7	0.3	7	7	Т
Africa	18	14	7	0.1	7	7	ю	1	0.2	2	1	1
Northern Africa	40	35	7	/ <mark>व</mark>	19	0.2	12	7	0.3	2	2	0.4
Sub-Saharan Africa	13	σ	1	0.1	m	7	1	0.5	0.1	2	1	1
Asia and Oceania $\underline{c}$	58	54	23	7	4	Т	16	Μ	0.2	7	7	Т
East Asia <u>c</u> /	79	79	33	10	e	0.2	31	7	0.2	Ч	0.1	0.2
Other countries	42	36	15	4	ъ	7	ß	4	0.2	7	٣	г
Latin America	58	48	21	Ч	16	1	9	0	Т	ß	e	Ч
More developed regions $\frac{d}{d}$	72	50	ω	4	16	0.1	9	14	7	80	13	7
				Щ		Percentage of c	contraceptive users	ve users				
World	100	85	30	6	14	7	21	σ	Т	9	7	0
Less developed regions	100	91	38	10	11	м	25	Ŋ	0.5	4	ε	7
Africa	100	78	ω	0.4	37	10	18	4	Т	10	9	D
Northern Africa	100	68	9	/व	48	0.4	30	4	Ч	ß	ß	Г
Sub-Saharan Africa	100	70	11	г	28	18	8	4	Т	15	7	σ
Asia and Oceania $\underline{c}/$	100	63	39	11	٢	7	28	D	0.4	e	e	N
East Asia $\underline{c}/$	100	66	41	12	4	0.2	39	7	0.3	Ч	0.1	0.3
Other countries	100	84	37	10	11	ß	11	80	Ч	9	9	m
Latin America	100	83	36	Ч	28	7	11	4	П	6	9	7
More developed regions d/	100	69	11	9	22	0.2	œ	20	ю	11	18	2

Table 9. Average prevalence of specific contraceptive methods, by region, 1990

2 L L L 2 -ק ק a < data леУ 'n 5 0 E 3 U U T U Note: These estimation countries with no data.

Including methods in columns 3 through 12.

Data unavailable. ଜାର୍ଦ୍ଦା ହି

Excluding Japan.

Australia and New Zealand, Europe, North America and Japan.

### Availability of contraceptives

130. The World Population Plan of Action considers that the recognition of the above-mentioned right of couples and individuals also implies the provision by Governments of the means to achieve the desired number and spacing of children (see Mexico City recommendations 25, 27 and 28). Government policies towards access to contraceptive methods changed during the period 1974-1993. The major change was reflected in the fact that an increasing proportion of Governments provided direct support for modern methods of contraception. For example, the proportion of countries where government policy limited access to contraceptive methods declined from 7.1 per cent in 1974 to 3.5 per cent in 1986 and to less than 2 per cent in 1993. In 1974, direct support was provided by 55.1 per cent of Governments; this proportion increased to 71.8 per cent in 1986 and to 81.6 per cent in 1993 (see table 10). A greater proportion of the developing countries (86.4 per cent) provided direct support for contraceptives as compared with the developed countries (73.2 per cent) in 1993. In 1974, 70.5 per cent of Governments offered direct or indirect support for modern methods of contraception; in 1986, 85.9 per cent of Governments provided direct or indirect support; and by 1993, this proportion had reached 89 per cent (85.7 per cent of the developed countries and 90.3 per cent of the developing countries). 46/

# Table 10. Governments' policies concerning access to contraceptive methods, 1974-1993

		Ace	_		
Year	Access limited	No support	Indirect support	Direct support	Total
1974	7.1	22.4	15.4	55.1	100.0 <u>a</u> /
1986	3.5	10.6	14.1	71.8	100.0 <u>b</u> /
1993	1.6	9.5	7.4	81.6	100.0 <u>c</u> /

#### (Percentage of countries)

<u>Source</u>: The Population Policy Data Bank maintained by the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat.

- <u>a</u>/ Representing 156 countries.
- <u>b</u>/ Representing 170 countries.
- c/ Representing 190 countries.

131. In 1993, as mentioned above, 89.0 per cent of Governments were providing direct or indirect support to family planning programmes. The 1980s saw rapid progress in extending the availability of contraception in the developing countries. 47/ Asia (except Western Asia) and Latin America are the developing regions where contraceptives are most widely available. Availability continues to be most limited in sub-Saharan Africa (where it is estimated that under 40 per cent of the population has ready access to any method), followed by Northern Africa and Western Asia. The countries in transition from centrally planned to market economies manifest a high over-reliance on abortion for fertility regulation purposes and women in those countries clearly need access to contraception on an urgent basis. However, all regions have experienced an impressive increase in contraceptive availability in the past two decades, particularly, between 1982 and 1989, as shown in table 11.

132. Although availability of all the major contraceptive methods increased during the 1980s, there is still no wide choice of methods in most developing countries. A survey covering 97 developing countries has estimated the percentage of each country's population that had ready and easy access to specific contraceptive methods in 1989. Widespread availability of at least one method - defined as ready access for four fifths or more of the national population - was estimated to exist in 28 per cent of the countries. However, in only 8 per cent was there widespread availability for half or more of the national population, ready access to at least one method in 50 per cent of the countries, and availability of four or more methods for only one quarter of the countries.  $\frac{48}{7}$ 

133. Contraceptive availability does, however, tend to be above the average in most of the largest nations, including Bangladesh, Brazil, China, India, Indonesia and Mexico. The most widely available methods are condoms and oral contraceptives ("the pill"), estimated to have been readily available to roughly 70 per cent of the population of the developing countries in 1989 (table 11). Female sterilization is judged to have been readily available to 65 per cent of the population, IUDs to 62 per cent and male sterilization to 57 per cent, in 1989. <u>49</u>/

134. Providing access to modern contraceptive methods is only one of the requirements for an effective family planning programme. For instance, people also need to have complete and accurate information about contraception, including both the benefits and the risks of each method; they need access to follow-up services; and they may need information about and help with other elements of reproductive health. Improving the quality of care, taking into account the client's viewpoint in service design and evaluation, and integrating family planning with other health services are areas needing increased attention. Most family planning clients are women, and there is a need for programmes to engage men as clients and to involve women in much larger numbers at the planning and managerial levels of programmes, as well as in service delivery.

		Availa sco	bility re		Percen	tage o	f popu	lation	with	easy a	ccess	a/ to	
	(percer		ntage		Steril	izatio	n						
	Number of	of ma	ximum)	Fen	ale	Ma	le	IU	D	Pi	11	Con	ldom
Region	countries	1982	1989	1982	1989	1982	1989	1982	1989	1982	1989	1982	1989
All developing													
countries	90	60	72	56	65	51	57	49	62	42	69	60	70
Africa	40	13	27	5	13	1	3	11	27	17	38	17	39
Northern Africa	6	25	41	7	24	0	0	28	53	38	62	32	47
Other Africa	34	9	23	4	9	1	4	6	19	11	31	12	36
Asia	29	69	83	66	76	66	73	58	72	44	73	69	75
Western Asia	11	11	44	12	27	0	21	9	44	17	51	15	50
Other Asia	18	73	85	70	80	70	76	61	74	46	75	72	77
Excluding China	17	57	75	56	72	56	67	41	63	36	64	60	68
Latin America	20	57	72	56	70	21	32	39	47	65	86	61	87

## Table 11. Availability of contraceptive services, by region, 1982 and 1989

Sources: Tabulated in the Population Division of the United Nations Secretariat from family planning availability scores in Robert Sendek and Yvette Bayoumy, Population Council Databank (Version 3.0) (New York Population Council). Based on country-specific estimates by R. Lapham and P. Mauldin for 1982 and by P. Mauldin and J. Ross for 1989. Population weights for 1990 taken from <u>World Population Prospects, 1990</u>, Population Studies, No. 120 (United Nations publication, Sales No. E.91.XIII.4).

 $\underline{a}/$  For countries with estimates available at both dates. Those countries contained 97 per cent of the population of developing countries. To obtain regional averages, countries were weighted by population size.

135. It is estimated that over 80 per cent of users of modern contraception receive their supplies and services from public sector programmes, most of which provide services and supplies of at least some contraceptive methods free of charge or at a heavily subsidized price. Reliance on public services tends to be heaviest in Asia, although the public sector is a major source of services in all regions. In some countries, particularly in Latin America, not-for-profit non-governmental organizations are also major suppliers of subsidized services.

### Financial resources

136. One aspect of programme financing that has received increased attention lately is the growing difficulty of paying for the contraceptives themselves. Contraceptive commodities account for an important part of donor assistance, although the greatest portion of the cost is borne by developing-country Governments, which in 1990 paid for approximately 60 per cent of contraceptive commodities used in the developing countries. UNFPA projects that the annual cost of contraceptive commodities in developing countries will have to increase by almost 60 per cent between 1990 and 2000, based on current prices, in order to accommodate the growing number of couples of child-bearing age and the projected continuing increase in contraceptive prevalence. <u>50</u>/ Although new and improved methods, such as the NORPLANT hormonal implant, offer important advantages to users, there is a serious risk that the relatively high cost will deter developing-country programmes from promoting their introduction on a wide scale.

137. It is unclear how the rising costs of programmes can be met. Governments will find it difficult even to maintain their current share of costs into the future, particularly considering that the expansion of the number of couples and individuals needing services will occur disproportionately in poor countries. Other possibilities include increasing international donor support, expanding local production of contraceptives in selected countries, and exploring possibilities for reducing the level of subsidy – through contraceptive social marketing and public sector cost-recovery. To promote cost-sharing, Governments must have better information on the effects of price changes on use. Care must be taken particularly to ensure that those living in poverty have access to the services they need, if they are to realize their basic right to decide freely and responsibly the number and spacing of their children.

### Issue No. 12: Adolescents

138. Concern about the sexual behaviour of adolescents continues to increase as the recognition of the health, population and socio-economic consequences of precocious pregnancy and sexually transmitted diseases, including HIV/AIDS, becomes widespread. The practice of female genital mutilation in some parts of the world is also a matter of increasing concern and it exerts a highly negative effect on reproductive and sexual life. More than 50 per cent of the world population is under age 25 and 80 per cent of the 1.5 billion young people aged between 10 and 24 years live in developing countries; furthermore, in those countries social conditions are changing rapidly and therefore the opportunities for young people to become productive and fully integrated into society are very much restricted. Urbanization, the extension of education, the explosion of telecommunications and the strains on family functioning influence the behaviour adopted by adolescents throughout the world which will likely persist throughout adulthood.

139. While there is a paucity of reliable information about sexual behaviour, some decline in age-specific fertility rates of women aged under 20 years has been observed in some but not all regions. However, indications that abortions are increasingly becoming the main response to unwanted pregnancies, and the high prevalence of sexually transmitted diseases among young people, demonstrate that unprotected sexual activity is taking place. At the same time, a belief in the social desirability of early marriage and early child-bearing continues to prevail in many countries.

140. Although fertility levels have been decreasing in many regions of the world, the fertility rates of adolescents are very high and in some cases are even increasing. At present, it is estimated that close to 15 million infants born per annum (10 per cent of total births) are from adolescent mothers. Interest in adolescent health is evident in the increasing number of Governments that are formulating policies to improve programmes and of non-governmental organizations that are initiating activities, often focusing on reproductive health, consistent with the recommendations of the World Population Plan of Action. However, these actions have remained much too limited in scope and coverage to have had significant impact on adolescent reproductive behaviour. The recent Expert Group Meeting on Population and Women, 51/ held in Gaborone, Botswana from 22 to 26 June 1992, and the Expert Group Meeting on Family

Planning, Health and Family Well-Being, <u>52</u>/ that were convened in preparation for the International Conference on Population and Development, strongly recommended that Governments strengthen programmes to provide adolescents of both sexes with the information and means to prevent high-risk pregnancies and births and to protect themselves from sexually transmitted disease, including HIV/AIDS.

141. The following obstacles to the prevention of pregnancy and sexually transmitted diseases among young people persist. The first is the level of inadequate and inconsistent policies and legislation curbing early marriage and facilitating service provision. In order that policies may reflect public concern and support for healthy development of adolescents, increased advocacy is required in most countries, based on sound information on the health needs of young people and existing responses in each country. Often, policy provisions do not specifically address adolescent needs or there is confusion among community leaders, professionals and adolescents about legislation affecting the health and behaviour of adolescents and its application. A second factor is the insufficient knowledge about the sexual and fertility behaviour of adolescents, especially in the developing countries. Such knowledge is important in order to overcome myths about adolescent behaviour and to assist programme design. A third factor is the scant provision of information, education and counselling on family planning, maternity, and prevention and control of sexually transmitted diseases, with particular attention to adolescents' needs and their help-seeking behaviour. There are frequently legal and social barriers to using existing services which are all too often launched by individuals without sufficient understanding of adolescent development and training in listening skills to encourage two-way communication.

142. Recognition of the above barriers is implicit in the Plan of Action and the Mexico City recommendations, and concentrated efforts are required in the future to secure their adequate implementation, thus assuring improved reproductive health among adolescents.

### VII. HEALTH AND MORTALITY

143. Recent mortality decline can be attributed to advancement in health technology, and to socio-economic development, particularly as expressed in improved living standards, better nutrition, increased education, and higher status of women. Longevity has an intrinsic value, as it permits people to achieve their goals and aspirations. The following discussion focuses on three issues: the goals and targets specified in the World Population Plan of Action; maternal mortality; and the demographic aspects of AIDS.

### Issue No. 13: Goals and targets in morbidity and mortality

#### Levels, trends and prospects of mortality

144. Mortality levels, trends and prospects are presented through three indicators: (a) life expectancy at birth (the expected average number of years to be lived by a person newly born, assuming a fixed schedule of age-specific mortality rates); (b) the infant mortality rate (the probability of dying between birth and exact age 1); and (c) mortality of children under age 5, also called the under-five mortality rate (the probability of dying between birth and exact age 5). Table 12 presents numerical information on these three mortality indicators. Maternal mortality is discussed separately in paragraphs 160-174 below.

145. At the world level, for the quinquennium 1990-1995, life expectancy is estimated at 64.7 years (62.7 for males and 66.7 for females), representing an increase of 41 per cent from the figure of 46.4 years estimated for the period 1950-1955. A large proportion of that increase took place during the 1950s and early 1960s, and a slow-down was recorded during the 1970s. The medium-variant projections indicate a life expectancy of 70 years in 2010-2015 (68 for males and 72.5 for females). 53/ There have also been important improvements in the infant mortality rate. The infant mortality rate for the world declined from 155 deaths per 1,000 live births in 1950-1955, to the current figure of 62 per 1,000 in 1990-1995, and is projected to reach 40 per 1,000 in 2010-2015. A similar picture can be obtained by observing the evolution of the under-five mortality rate, which evolved from 240 per 1,000 births in 1950-1955 to a current value of 83 per 1,000, and is projected to decline to 57 per 1,000 in 2010-2015. Nevertheless, behind such spectacular achievements there are wide disparities in mortality levels between regions, countries and provinces, as well as by gender.

146. In 1950-1955, the gap in life expectancy between the more developed and the less developed regions was about 25 years. Since then, improvements in mortality have been more rapid in the less developed regions, so that by 1992 that difference had narrowed to 12 years. In fact, the more developed regions have passed from a life expectancy of 66 years in 1950-1955 (63.3 for males and 68.6 for females) to a current life expectancy of 74.6 years (71 for males and 78 for females) in 1990-1995, and the figure is projected to reach 77.5 years in 2010-2015 (74.4 for males and 80.7 for females). Currently, Japan has the highest life expectancy, 78.7 years (75.9 for males and 81.6 for females).

	Life expectancy at birth (years)				mortalit 1,000 bir	-	Under-five mortality (per 1,000 births)		
Region	1950- 1955	1990- 1995	2010- 2015	1950- 1955	1990- 1995	2010- 2015	1950- 1955	1990- 1995	2010- 2015
World	46.4	64.7	70	155	62	40	240	83	57
More developed countries	66.0	74.6	77.5	56	12	8	73	14	10
Less developed countries	40.7	62.4	68.6	180	69	44	281	106	64
Least developed countries	35.7	50.2	58.8	193	120	73	<u>a</u> /	<u>a</u> /	<u>a</u> /

### Table 12. Mortality indicators, 1950-2015

<u>Source</u>: <u>World Population Prospects</u>: <u>The 1992 Revision</u> (United Nations publication, Sales No. E.93.XIII.7).

<u>a</u>/ Data unavailable.

Infant mortality in the more developed regions passed from 56 per 1,000 births in 1950-1955 to the current level of 12 per 1,000, and is projected to decline to 8 per 1,000 in 2010-2015.

147. Compared with the range in current levels of life expectancy in the more developed regions (from about 70 to 77 years), the range in the less developed regions is large. Life expectancy by region ranges from 49 years in Eastern Africa to 72 years in Eastern Asia. Most of Africa has a life expectancy of about 53 years; Asia, 65 years; and Latin America, 68 years. In Eastern Asia, life expectancy is currently estimated at 72 years and all countries, except Mongolia, have current values of over 70 years.

148. Sub-Saharan Africa continues to have the highest level of mortality in the world. The impressive mortality declines that occurred in other regions of the developing world with the introduction of health interventions that reduced mortality caused by infectious and parasitic diseases have not yet been realized in the regions of Sub-Saharan Africa. Although the AIDS pandemic is dealt with below as a separate issue, it is important to mention here that it is particularly severe in Eastern Africa, Middle Africa and Western Africa, and that it has further compromised any effort at improving life expectancy. In the particular case of Uganda, for example, it is estimated that in the absence of AIDS, its current life expectancy of 41.8 years (40.8 for males and 42.9 for females) would have been 50 years.  $\frac{54}{7}$ 

149. With regard to infant mortality, there has been a significant reduction of the gap between the developed and the developing countries. From 180 per 1,000 in 1950-1955, the infant mortality rate among the less developed regions is currently estimated to have declined to 69 per 1,000, and it is projected to reach 44 per 1,000 in 2010-2015. Similar dramatic declines can also be observed

in terms of the under-five mortality. From 240 per 1,000 in 1950-1955, the under-five mortality rate for the world has declined to a current value of 83 per 1,000 and is projected to be 57 per 1,000 in 2010-2015.

150. It is important to note the increasing sex differential in life expectancy at birth: The number of additional years of life expectancy enjoyed by females compared with males rose, in the more developed regions, from 5.3 years four decades ago to 7 years currently. A similar pattern can be observed in the less developed regions, where the gap between female and male life expectancy increased from 1.5 to 2.8 years during the same period. Such changes suggest that women have benefited more from improvements in living standards than men, because of genetic differences, behavioural factors (particularly women's low consumption of alcohol and tobacco), and differential working conditions. Nevertheless, the sex differentials for some European countries have begun to exhibit a plateau and even a decline. These trends may indicate that women's lifestyles are changing and becoming closer to those of men and that men's health standards have recently improved.

151. The mortality trends presented above reflect the different phases of an epidemiological transition. According to estimates from WHO, infectious and parasitic diseases account for almost half of all deaths and remain the leading cause of mortality in the developing countries (45 per cent of deaths, compared with only 4.7 per cent in the developed countries). More than 2 billion people living in about 100 countries are currently exposed to malaria, which has manifested an upward trend in some Latin American and Asian countries. Schistosomiasis is also endemic, in 76 countries where about 200 million people are reported to be infected. It is estimated that in 1990 some 1.7 billion people around the world were infected by tuberculosis and that more than 20 million were suffering from the disease, 95 per cent of whom were living in the developing countries. In the developed countries, cardiovascular diseases are the leading cause of morbidity and mortality, followed by cancer and malignant neoplasms. More recently, tuberculosis has made a powerful comeback in some developed countries, particularly among the underprivileged.

### Policies aimed at reducing mortality

152. The Plan of Action set explicit quantitative targets for a reduction in the levels of mortality, indicating that the world as a whole should achieve a life expectancy at birth of 62 years by 1985 and of 74 years by 2000 (para. 22). These figures have often been cited as implicit goals for mortality improvement at the regional level as well. It is possible only now to verify whether the target that the Plan of Action set for 1985 has been reached, since the data needed to estimate mortality levels during the 1980s for a large number of developing countries were not available earlier. At the world level, although life expectancy was estimated to have just met the target of 62 years set for 1985 by the Plan of Action, it is expected to fall short of the target set for the year 2000 (the projected value is 67.5 for 2000-2005). Although impressive gains in survivorship have been made in the less developed regions as a whole, life expectancy in those regions fell short of the target set by the Plan of Action for 1985 by two years and is not expected to meet the target set for the year 2000.

153. The Plan of Action also set targets for countries with the highest mortality levels: by 1985 they should have reached a life expectancy at birth of at least 50 years and an infant mortality rate of less than 120 deaths per 1,000 live births (para. 23). The International Conference on Population (Mexico City) revised the targets for the year 2000 (recommendation 14) and proposed that countries with higher mortality levels should aim for a life expectancy at birth of at least 60 years and an infant mortality rate of less than 50 per 1,000 live births and that countries with intermediate mortality levels should aim to achieve a life expectancy at birth of at least 70 years and an infant mortality rate of less than 35 per 1,000 live births.

154. According to <u>The 1992 Revision</u>, none of the regions of Africa met the target for life expectancy set by the Plan of Action for 1985, nor did nearly half of the African countries; and less than half met the target for infant mortality. Projections to the year 2000 suggest that an even greater number of countries in Africa are unlikely to meet the targets for either life expectancy or infant mortality set for that year. However, four countries (Cape Verde, Mauritius, Réunion and Tunisia) are expected to meet the targets (for both life expectancy and infant mortality) set for countries with intermediate levels of mortality.

155. In Asia, the situation was mixed. Eastern Asia and Western Asia exceeded the target in 1985 but Southern Asia lagged behind the target by six years and South-eastern Asia by two years. Six countries (three in South-eastern Asia, two in Southern Asia and one in Western Asia) did not meet the targets for life expectancy and infant mortality for 1985. Bangladesh just met the target for life expectancy but fell short of the target for infant mortality. The same six countries are not expected to reach a life expectancy of 60 years and infant mortality of less than 50 per 1,000 live births by the year 2000. An additional six countries (mostly in Southern Asia) are not expected to meet the target for infant mortality, although life expectancy is expected to be above 60 years by the year 2000. The targets set for intermediate-mortality countries are likely to be met by 23 countries in Asia, including all of Eastern Asia (except Mongolia), Western Asia (except Yemen and Iraq), 6 countries in South-eastern Asia and 2 countries in Southern Asia. The Philippines and Viet Nam are expected to reach the target for infant mortality, although their life expectancy levels may fall short of the target.

156. All Latin American countries met the infant mortality goals and exceeded the 1985 target for life expectancy by at least five years. By the year 2000, only Haiti is not expected to reach the target for either life expectancy or infant mortality. Bolivia and Peru are expected to reach the target for life expectancy for the year 2000 but it is expected that their infant mortality will still exceed 50 per 1,000. Of the 28 countries with intermediate mortality in Latin America, 17 are expected to meet the targets for life expectancy and infant mortality set for the year 2000. The Dominican Republic is expected to reach the target for life expectancy but not that for infant mortality. In Oceania, the 1985 target was met by all countries and by the year 2000, it is expected that only Papua New Guinea will not meet the target set for intermediate-mortality countries.

157. In general, recent trends permit the conclusion that no developing region is expected to reach the target set for the year 2000. Among the more developed regions, Eastern Europe and the former USSR are expected to reach life expectancies of 73 and 72 years respectively by the year 2000 (still falling short of the target of 74 years).

158. The Plan of Action recommended, as one of its priorities, the reduction of child mortality (recommendation 24 (a)). This goal was reaffirmed by Governments at the 1990 World Summit for Children. Through improvements in immunization coverage (the goal of 80 per cent immunization coverage was reached in 1990), oral rehydration therapy and basic sanitation, important progress has been made in the reduction of deaths of children under age 5. Child death rates have been halved in almost every region of the developing world (except in sub-Saharan Africa) since at least 1960. There has been a decrease not only in the rates for, but also in the absolute numbers of, child deaths (the annual number of under-five deaths was close to 20 million in the early 1950s, but declined to nearly 15 million in 1980-1985 and is currently estimated to be close to 13 million).

159. The results of the eighth report on the second monitoring of progress in the implementation of the Global Strategy for Health for All by the Year 2000 indicate that in countries where the prevalence of infectious and parasitic diseases is high, about one half of all deaths typically occur before the age of five. Most of the infant and under-five morbidity and mortality, however, could be prevented through the provision of adequate water supply and sanitation facilities at the community level. The International Conference on Population (Mexico City) urged the provision of a sufficient supply of potable water and adequate sanitation facilities for the eradication or control of infectious and parasitic diseases (recommendation 22). The year 1990 marked the conclusion of the International Drinking Water Supply and Sanitation Decade (1981-1990). During that period the percentage of population covered with essential services increased, but millions of people remain without access to water and sanitation services and to the basic elements of care because the increases in services have not kept pace with the increases in population.

160. Despite the availability of modern technologies, the major obstacle to improving health conditions in the developing countries is the weakness of the health infrastructure and the lack of adequate human resources. Infectious and parasitic diseases continue to pose serious risks to child and adult health in the developing countries. Although gaps between the developing and the developed countries have been significantly reduced, particularly in relation to mortality levels, it is important to emphasize that improved levels of survival do not necessarily mean that the population is enjoying better health conditions. More effort is required to increase awareness, at all levels, about the important contribution that primary health care can make to the process of development and about the fact that universal access to such services is of high priority.

### Issue No. 14: Maternal mortality

161. Maternal mortality is one of the leading causes of death among women of reproductive age in the developing world. However, it was not until recently that the enormity of the problem was recognized, largely as a result of the growing number of surveys that permit estimation of maternal mortality rates where such rates cannot be derived from registration sources. Maternal mortality is measured as the annual number of deaths of women related to pregnancy and childbirth per 100,000 births.

162. The main causes of maternal death are haemorrhage, infection, toxaemia and obstructed labour. Studies have shown that the factors that contribute to maintaining high maternal mortality in the developing countries include the relatively large number of pregnancies among women at the extremes of the childbearing range (maternal mortality rates for women below the age of 20 are between five and seven times those of women aged 20-24 years in some countries), maternal depletion through pregnancies that are too closely spaced and the high prevalence of high-parity births. The risk of death related to pregnancy is further exacerbated if women are poor, malnourished, uneducated or beyond the reach of adequate health care. In the developing countries, mortality resulting from the complications of poorly performed abortion, as was indicated above, accounts for a significant proportion of maternal deaths estimated at about 30 per cent.

### Levels, trends and prospects

163. Among the demographic and public health variables, maternal mortality is the indicator that exhibits the widest disparity among countries. On the basis of data tabulated by WHO, it has been estimated that at least half a million women die from causes related to pregnancy and childbirth each year. All but about 4,000 of those deaths take place in developing countries. The incidence of maternal mortality ranges from almost non-existent (Iceland reported only one maternal death in 1987 and one in 1990, Malta has had none since 1986 nor Finland since 1989) to very high (above 1,000 deaths per 100,000 births in some rural areas of Africa). Scattered information suggests that in some countries, one fourth to one half of all deaths of women of child-bearing age result from pregnancy and its complications. The risks associated with pregnancy and childbirth seem, at the global level, to be about 5 per cent lower than they were five years ago. However, because the number of births increased by some 7 per cent over the same period, the total number of maternal deaths has remained almost unchanged.

164. In a majority of the developed countries, maternal mortality rates registered recently were below 10 deaths per 100,000 live births (rates below 4 per 100,000 are common among northern European countries) and only in Hungary, Romania and the former USSR was the rate above 20. In Romania, the maternal mortality rate in 1990 was 83 per 100,000 live births. According to WHO estimates, the maternal mortality rate for developed countries in the aggregate declined from 30 to 26 per 100,000 live births between 1983 and 1988. Reaching and maintaining low levels of maternal mortality have been significant achievements in public health in the developed world. Advancements in obstetric and prenatal care, the introduction of antibiotics and blood transfusions, the

increasing proportion of deliveries taking place in hospitals, and the better general health and nutritional status of pregnant women, along with the introduction of effective means of contraception and the provision of safe abortion have all been important factors in the reduction of maternal mortality in the developed countries.

165. In contrast, the estimated maternal mortality rate for the less developed regions was, around 1988, 420 deaths per 100,000 births, a figure that was about 5 per cent lower than it had been five years earlier. For the group of least developed countries, the rates are estimated at about 700 per 100,000 live births. Although data on maternal mortality are still very scanty, WHO has estimated that Africa has the highest rate (630 per 100,000 births), followed by Asia (380) and Latin America (200).

166. Comparing new information on maternal mortality with that available five years ago suggests that pregnancy and childbirth have become somewhat safer for women in most of Asia and in parts of Latin America. In contrast, the situation has changed very little for individual women in most parts of sub-Saharan Africa, where the increase in the number of births has led to a parallel increase in the number of maternal deaths. This situation has been aggravated in some cases by real increases in maternal mortality. However, it is not immediately apparent which of the changes mentioned in this paragraph and paragraph 164 are real and which are due to better information having become available in the mean time. The resulting situation is the worst in the world and reflects the deteriorating economic and health conditions in the sub-Saharan region.

### Policies aimed at reducing maternal mortality

167. The Plan of Action calls for national and international efforts to reduce general morbidity and mortality, and particularly vigorous efforts to reduce foetal, infant and early childhood mortality and related maternal morbidity and mortality (para. 24 (a)). The International Conference on Population (Mexico City) adopted more precise guidelines to achieve this goal and urged actions in relation to prenuptial medical examinations; prenatal and perinatal care, with special attention to high-risk pregnancies, and safe delivery by trained attendants; nutritional needs of pregnant women; avoidance of abortion and provision of humane treatment and counselling of women who had had abortions; access to family planning for preventing high-risk pregnancies; and education to change attitudes about early child-bearing (recommendation 18 (b)-(g)). The Mexico City recommendations also set the goal of reduction of maternal mortality by at least half by the year 2000 in countries where such mortality was higher than 100 maternal deaths per 100,000 births (recommendation 18 (a)). The Economic and Social Council, in its resolution 1989/92, after discussing the results of the third review and appraisal conducted in 1989, urged Governments and international organizations to strengthen their efforts to achieve the targets established by the International Conference on Population for mortality in general and child and maternal mortality in particular; 55/ it also identified many of the factors associated with high levels of maternal mortality: pregnancies in the youngest and oldest ages of the reproductive period; pregnancies too closely spaced; high-parity births; lack of access to

health services; lack of trained birth attendants; and complications of unsafe abortions.  $\underline{56}/$ 

168. In various forms, most countries with high maternal mortality have adopted the goal of reducing it by 50 per cent by the year 2000. Since that goal was formulated at the Nairobi International Safe Motherhood Conference <u>57</u>/ and reiterated in a number of regional conferences, many nations have formally endorsed it. It is also stated in the Goals for children and development in the 1990s (contained in the Plan of Action for Implementing the World Declaration on the Survival, Protection and Development of Children in the 1990s, adopted by the World Summit for Children in September 1990 (see document A/45/625, annex, appendix, sect. I (b)), which have been accepted by the great majority of countries.

169. In response to that call, WHO, along with four other United Nations organizations and two non-governmental organizations (the United Nations Development Programme (UNDP), UNFPA, UNICEF, the World Bank, the International Planned Parenthood Federation (IPPF), and the Population Council) agreed in 1987 to collaborate in a state motherhood initiative. They have been meeting semi-annually ever since as an inter-agency group to coordinate their efforts to reduce maternal mortality. At their most recent meeting in November 1992, they recommitted themselves to intensifying their efforts and further improving the coordination of their activities in order to accelerate the process. In addition to IPPF and the Population Council, the following organizations have also joined the inter-agency group: Family Health International (United States), which has recently established a department of maternal and neonatal health; Santé maternelle internationale (International maternal health) (France); and Family Care International (United States), to name a few. Many other organizations contribute to the reduction of maternal mortality by promoting family planning and reproductive health around the world.

170. A number of bilateral agencies have joined the effort to reduce the unacceptably high number of maternal deaths. The Governments of Australia, Denmark, France, Germany, Italy, Japan, the Netherlands, Norway, Sweden, the United Kingdom of Great Britain and Northern Ireland, and the United States, to name a few, have provided funds and/or technical cooperation to developing countries for the improvement of maternal health. Those Governments also exchange information with the inter-agency group to ensure further coordination.

171. In some countries, it has been established that the increased provision and improvement of existing maternity services at all levels of the health system are the most effective means of reducing maternal mortality. In addition, family planning programmes together with good primary health care represent important interventions to achieve reductions in maternal mortality. The efficacy of such programmes in achieving this end would be greatly enhanced by the inclusion of safe and readily accessible contraceptive methods, and, where appropriate, access to safe abortion services.

172. Most of the above-mentioned Governments, agencies and organizations share the common strategy of cooperating with countries that have demonstrated strong political will to: (a) assess maternal health needs; (b) develop national plans of action (which are parts of, or integrated with, the overall national health

plan) aimed at meeting the assessed needs; and (c) implement the plan of action as quickly and efficiently as possible. This process has begun or is being initiated in the following countries: Bangladesh, Bolivia, Guinea, Indonesia, the Philippines, Senegal and the United Republic of Tanzania, to name a few. Guidelines are now being written on safe motherhood programme development and implementation that include standards for maternal health services delivery and management. As countries proceed to develop and implement national strategies, those materials will prove invaluable.

173. The above actions illustrate some of the aggressive efforts that have been made to reduce maternal mortality. Nevertheless, considering that most countries have agreed on the target of a 50 per cent reduction in maternal mortality by the year 2000, and that many of them have also begun the process of assessing needs and developing national plans, the total number of maternal deaths world wide has not yet started to decrease. This suggests that the implementation of the recommendations of the Plan of Action had a slower start than anticipated. This may have been due partly to competition for scarce resources, compounded by global recession and the emergence of other crises such as overwhelming famine and the AIDS pandemic that have required large sums of financial aid, and partly to a lack of a sense of urgency on the part of many countries and agencies about acting aggressively enough at the beginning. The lack of a sense of urgency has been largely overcome by the information and advocacy efforts of Governments and many agencies, but the problem of restricted resources has not abated and can be expected to continue for the foreseeable future.

174. Another difficulty has been the size and multisectoral nature of the problem. The approach used until recently by most agencies has been to develop discrete, time-limited, self-contained projects. This has proven completely inadequate for dealing with such a complex problem as maternal mortality reduction. To make motherhood safer requires a massive and simultaneous attack on all the elements contributing to the problem, including the health sector, education, legislation, social services, and rights of women; in the health sector alone, the entire infrastructure of the health system needs strengthening in most countries where maternal mortality is high. This means building new structures, renovating existing ones, providing equipment and supplies, training personnel, and improving management and supervision practices, among other things.

175. The complexity of the problem requires broad vision on the part of planners and concerted, integrated efforts on the part of Governments, funding agencies and technical cooperation organizations. Efficient methods for planning safe motherhood programmes are of recent origin. Previous instructions were imprecise and did not provide guidance in pointing the way for countries desiring to start the process. In addition, coordination of the activities of a large number of agencies is difficult at best and many agencies are only beginning to identify ways of working effectively with others. All these obstacles have delayed the building up of the necessary momentum to reduce maternal mortality. However, early indicators now suggest that many of those obstacles have been or are being overcome and momentum is building up.

### Issue No. 15: Acquired immune deficiency syndrome (AIDS)

176. The rapid spread of HIV, the causal agent of AIDS, is a cause for great concern. AIDS emerged as a major health problem in the mid-1980s, in both the developed and the developing countries, that threatened to undermine major gains in the reduction of morbidity and mortality. The victims of AIDS have most often been adults in their prime, representing the loss of a valuable resource to their countries (the adverse effect of poor health on working-age populations and their productivity is mentioned in para. 24 (e) of the Plan of Action). The number of infants born with HIV infection has been increasing and it is feared that this trend could jeopardize gains in child survival anticipated from immunization programmes and other child-health initiatives. In addition, the enormous costs of caring for the number of AIDS patients expected in the near future may divert resources from other health programmes, with adverse consequences for future improvements in survivorship. The AIDS pandemic will have substantial negative effects on social organization and economic development in some countries. The Plan of Action and the Mexico City recommendations understandably did not explicitly address the issue of AIDS. However, the devastating toll from AIDS with respect to population loss and mortality has implications for the implementation of the Plan of Action and the Mexico City recommendations (recommendations 19, 22 and 23). Projections show that the epidemic is expected to worsen in the 1990s, so that efforts to combat AIDS need to be explicitly articulated.

### Levels, trends and prospects

177. WHO estimates that well over 14 million adults and children have been infected with HIV since the start of the pandemic, and projects that this cumulative figure may reach 30-40 million by the year 2000. It is estimated that over half a million children have been infected with HIV from their infected mothers and that 5-10 million children will be orphaned by AIDS by the year 2000. The epidemic incapacitates people at the ages when they are most needed for the support of the young and the elderly.

178. The majority of the world's HIV cases have resulted from infection through heterosexual transmission, which together with homosexual transmission accounts for about three quarters of HIV infections world wide. Two other modes of transmission of this infection are (a) through blood and blood products, from the transfusion, and from injections, of infected blood; and (b) from mother to child, including both perinatal and post-partum transmission. Virtually all persons diagnosed as having AIDS die within a few years. In infants born infected with HIV, the progression to AIDS is more rapid than in adults. Survival after diagnosis has been increasing in the developed countries from an average of less than one year to between one and two years at present. However, survival after the onset of AIDS in the developing countries remains short - an estimated six months or less. Longer survival periods seem to be directly related to the routine use of antiviral and prophylactic drugs and a better overall quality of health care.

179. The AIDS epidemic is most devastating in sub-Saharan Africa. WHO estimated that by 1992, 1.5 million adults in the region would develop AIDS and more than 7 million would be infected with HIV. In this region, HIV transmission is

predominantly through heterosexual relations; and among the infected population, men and women account for nearly equal proportions. Since many women of childbearing age are infected, HIV transmission from an infected woman to her child before, during or shortly after birth is widespread and a growing problem in the region. According to the United Nations, 58/ this epidemic may bring to a halt future improvements in survivorship for some countries in Africa. In the 15 countries in Eastern, Central and Western Africa where the proportion of those infected (technically called HIV seroprevalence) was above 1 per cent among the adult population in 1990, the already low level of life expectancy at birth (of about 50 years in 1985-1990) is projected to remain unchanged through the year 2000. AIDS is likely to cause an additional annual 2.9 deaths per 1,000 population in those countries by 1995-2000. Because as many women as men carry the virus, WHO estimates that child mortality may increase by as much as 50 per cent through mother-to-child transmission in much of sub-Saharan Africa during the 1990s, thereby offsetting gains in child survival achieved over the past two decades, as sought by the International Conference on Population (Mexico City) (recommendation 17).

180. Transmission of HIV in Northern America, Europe and Australia occurred, at the beginning, predominantly through homosexual contact. Increasingly, injecting drug users and heterosexuals are the agents of transmission, especially in Northern America. WHO estimated that 1.6 million cases of HIV infection might have occurred in these regions by 1992 (about two thirds in the United States) and close to 350,000 or more cases of AIDS may have occurred by that time. It is expected that through the 1990s, homosexual men and injecting drug users will continue to be the population groups most affected by AIDS in the above-mentioned regions, but new infections will occur predominantly in heterosexual men and women having multiple sex partners.

181. In Latin America, the main mode of transmission of HIV was, in the early stages, predominantly through heterosexual and bisexual men and injecting drug users. Since the mid-1980s, heterosexual transmission, initially mainly between bisexual men and their female partners, has become more important. The Caribbean and the urban areas of Brazil are the worst affected in the region. It is estimated that currently about 1 million people in the region may be infected with HIV.

182. The AIDS epidemic took hold in Asia in the second half of the 1980s. Initially, injecting drug users constituted the group most affected but heterosexual transmission has been increasing and is now the predominant mode of transmission. Currently, India and Thailand are the countries worst affected in the region. Estimates of the size of the HIV-infected population are not available for the region as a whole but in India, as of mid-1992, the estimate of the number of HIV-infected persons was up to 1 million and in Thailand, the estimate was about 400,000.

### Action and policies

183. WHO established a Global Programme on AIDS at the beginning of 1987. By 1990, more than 150 countries had established national AIDS committees to coordinate national control programmes. The Global strategy for the prevention and control of AIDS (known as the Global AIDS Strategy) was initially drawn up

by WHO in 1985-1986 and unanimously approved by the Fortieth World Health Assembly (May 1987), and the Venice Summit of the Heads of State or Government (June 1987). Since that time, it has served as the main policy framework for the global response to the pandemic, and it is directed and coordinated by WHO in keeping with its mandate from the General Assembly. 59/ The Strategy calls for direct action, as well as research, to lessen this impact and, in particular, to reduce the burden on women, who often carry the primary responsibility for providing AIDS care. The Global AIDS Strategy was revised in 1991 and endorsed by the World Health Assembly and the General Assembly in 1992. While the three main objectives of the Global AIDS Strategy remain the same (namely, to prevent infection with HIV, reduce the personal and social impact of HIV infection, and mobilize and unify national and international efforts against AIDS), the revised version reflects the new challenges of the evolving pandemic. These include (a) increased emphasis on care; (b) better treatment for other sexually transmitted diseases; (c) greater focus on HIV prevention through improvement of women's health, educational, legal and social status; (d) a more supportive environment for prevention programmes; (e) provision for the socioeconomic impact of the pandemic; and (f) greater emphasis on explaining the public health dangers of stigmatization and discrimination.

184. The Global AIDS Strategy outlines various approaches to overcoming official denial of the existence of HIV infection by national authorities as well as complacency about its current and expected magnitude and the attitudes reflected in the general public. Another challenge is discrimination against people with HIV/AIDS, an irrational response which often stems from the stigma attached to sexually transmitted diseases and mistaken belief that HIV can be transmitted through casual social contact. Non-discrimination is thus vital, not only for the sake of human rights, but also because of its strong public health rationale.

185. In its policy and intervention development, social, behavioural and biomedical research and information/education activities, the Global Programme on AIDS pursues a gender-specific approach aimed at benefiting women. The Programme has developed a comprehensive strategy on women and AIDS to guide the development of policies and interventions at both global and country levels. The Global AIDS Strategy emphasizes women's physical, social and economic vulnerability to HIV infection and recommends action in each area. In addition, the need to reduce the social and personal impact on women (including their disproportionate share of care-giving in relation to the pandemic) and the links between reducing HIV infection and developing comprehensive approaches to women's health are also addressed. Specific reference is made to ensuring women's reproductive rights, including improved access to barrier methods of contraception that prevent both pregnancy and infection from HIV and sexually transmitted diseases, and a wide range of family planning services.

186. The Programme support is geared above all to the implementation of effective strategies and interventions for prevention and care, and to the strengthening of national managerial capacity. A strong management structure is essential for implementing an intersectoral AIDS programme. To enable country programmes to develop as rapidly and as effectively as possible, the Programme has developed programme manager training courses for national senior-level staff from various sectors. Those courses cover planning, implementation, monitoring

and evaluating national AIDS programmes. The Programme initiates and supports research to identify and develop effective interventions and approaches for the prevention and management of HIV/AIDS. Furthermore, it provides guidance, educational materials and technical assistance to national AIDS programmes and a wide range of other partners in the implementation of approaches and interventions, especially at the country level.

187. The Programme also coordinates, supports and promotes various types of clinical and biomedical research. Key areas of research include vaccine development; clinical research and drug development; diagnostics; and epidemiological research, surveillance and forecasting. Finally, the Programme has been actively involved in efforts to improve coordination of HIV/AIDS activities at both global and country levels. This has included the organization of an assessment of coordination of HIV/AIDS activities in six countries (October 1992), the strengthening of the Inter-agency Advisory Group on AIDS (IAAG), and the establishment of a Task Force on HIV/AIDS Coordination that reports to the Programme's Management Committee. Continued attention will be given to this area in the coming years.

# VIII. POPULATION DISTRIBUTION, URBANIZATION AND INTERNAL MIGRATION

188. According to current estimates, by the end of the twentieth century, the world will have, for the first time in history, more urban than rural people. This transformation has affected every aspect of human life and accompanied other important social and economic transformations, particularly in the group of developing countries. Urbanization, or the increase in the proportion of the population living in the urban areas, is the result of three major components: migration to the urban areas; areal reclassification; and natural increase in the urban areas. Although it is very difficult to estimate the exact contribution of each of the three components, the figure for urbanization due to internal migration and areal reclassification ranges between 40 and 50 per cent, with the rest due to natural growth.

189. The levels of urbanization are continuing to rise, slowly in the more developed regions and more rapidly in the less developed ones. <u>60</u>/ In 1990, 43.1 per cent of the world population (2.3 billion people) lived in urban areas (72.7 per cent in the more developed regions and 34.3 in the less developed regions). Such levels are in contrast with those determined in 1950, when 29.3 per cent of the world population lived in urban areas (54.3 per cent in the more developed regions and 17.0 per cent in the less developed regions). It is projected that such proportions will increase to 55.6 per cent by the year 2015. At the same time, urbanization in the less developed regions will climb from 34.3 to 50.1 per cent.

190. Most Governments currently recognize that urbanization is an inevitable and irreversible process, and that as an integral part of economic and social development it needs to be guided rather than obstructed. There is ample empirical proof that urbanization has many beneficial effects, including the acceleration of economic growth, the improvement of the social and cultural environment, the amelioration of education and health services, the more efficient use of land, and even reductions in fertility rates. It is also being increasingly recognized that voluntary migration is a rational response to spatial inequalities and that urbanization is an intrinsic part of the development process.

191. As the urbanization trend has demonstrated for decades, policies to control the growth of large cities have rarely been successful. According to the information contained in the Population Policy Data Bank, only 7 per cent of national Governments consider their own national population distribution pattern to be satisfactory; 25 per cent regard a minor change as desirable; and 45 per cent believe that a major change is required.

192. It must be borne in mind, however, that the growth of urban agglomerations should be accompanied by an allocation of adequate resources to cope with the scale of new demands for employment, housing, infrastructure and services. Efficient management based on integrated urban policies is a necessary condition for beneficial exploitation of the potentials of urbanization and minimization effects. Sound rural development policies are equally important since they promote creation of new markets for urban goods and services and at the same time improve the living conditions of rural areas. The role played by

intermediate and small cities in supporting rural development should also be recognized. If properly managed, these settlements could, in attracting potential migrants, act as counter-magnets with respect to large urban agglomerations.

## Issue No. 16: Population growth in large urban agglomerations

#### Levels, trends and prospects

193. At the global level, the urban population has been growing steadily throughout the past four decades: it grew from 737 million in 1950 to 2,282 million in 1990, and according to the latest United Nations projections, it is expected to reach 2,962 million by the year 2000 and 4,232 million by the year 2015. While the overall rate of growth of urban population is gradually decreasing, the rate for the developing countries will remain above 3 per cent per annum up to the year 2010. Most of the urban population increase will occur in the developing countries. During the 1990s, it is estimated that the urban population in the developed countries will increase by approximately 90 million, whereas in the developing countries this increase will be as much as 590 million. How much of this growth occurs in the largest urban agglomerations will depend on how successful developing regions are in restructuring the hierarchy of their urban places.

194. Current trends in the process of urbanization in the developing regions are marked by a phenomenon called the primacy of large urban agglomerations within the urban hierarchy, as well as by the increasing replacement, by natural population increase in the urban areas, of rural-urban migration as the predominant cause of urban growth. Large urban agglomerations have been growing and are continuing to grow in size and number. In 1950 only New York had more than 10 million inhabitants; by 1970 two Asian cities, Tokyo and Shanghai, had grown to be as large. Two decades later, in 1990, 13 urban agglomerations had at least 10 million residents, and the number of such urban agglomerations is projected to double, to 26, by the year 2010. All but one of the new cities are in the less developed regions. Nine of the 13 largest urban agglomerations in 1990 were in the less developed regions; the proportion is expected to increase to 21 out of a total of 26 in the year 2010.

195. With 25 million inhabitants in 1990, Tokyo was by far the largest urban agglomeration in the world, but by 2010, urban agglomerations exceeding a population size of even 20 million will have become more common. São Paulo (Brazil), Bombay (India), Shanghai (China) and Lagos (Nigeria) are all projected to have at least 20 million residents in 2010. Table 13 shows the population size at three points in time for the 26 urban agglomerations projected to exceed 10 million by 2010. Some cities show enormous growth during the 40-year period between 1970 and 2010. Lagos (Nigeria) and Dhaka (Bangladesh), for example, began the time-period with relatively small populations (2.0 million and 1.5 million, respectively), but they are expected to be among the world's 10 largest urban agglomerations by the year 2010. Their annual growth rates were among the highest in the world in the period 1970-1990, 6.7 per cent and 7.4 per cent, respectively, and they are expected to continue to show rapid growth to the year 2010.

Table 13.	Population size of urban agglomerations with 10 million or more
	in 2010, for the years 1970, 1990 and 2010 and their average
	annual rate of growth, 1970-1990 and 1990-2010

		Population (millions)			Average annual rate of growth (percentage)		
Rank in 2010	Agglomeration	197	0 199	0 2010	1970-1990	1990-2010	
1	Tokyo, Japan	16.5	25.0	28.9	2.09	0.73	
2	São Paulo, Brazil	8.1	18.1	25.0	4.05	1.60	
3	Bombay, India	5.8	12.2	24.4	3.72	3.45	
4	Shanghai, China	11.2	13.4	21.7	0.93	2.39	
5	Lagos, Nigeria	2.0	7.7	21.1	6.71	5.01	
б	Mexico City, Mexico	9.1	15.1		2.55	0.89	
7	Beijing, China	8.1	10.9	18.0	1.48	2.51	
8	Dhaka, Bangladesh	1.5	6.6	17.6	7.38	4.91	
9	New York, United						
	States	16.2	16.1	17.2	-0.04	0.35	
10	Jakarta, Indonesia	3.9	9.2	17.2	4.27	3.13	
11	Karachi, Pakistan	3.1	7.9	17.0	4.67	3.81	
12	Metro Manila,						
	Philippines	3.5	8.9	16.1	4.61	2.96	
13	Calcutta, India	6.9	10.7	15.7	2.20	1.90	
14	Tianjin, China	5.2	9.2		2.86	2.65	
15	Delhi, India	3.5	8.2	15.6	4.20	3.23	
16	Los Angeles,						
	United States	8.4	11.5	13.9	1.56	0.97	
17	Seoul, Republic of						
	Korea	5.3	11.0	13.8	3.63	1.13	
18	Buenos Aires,						
	Argentina	8.4	11.4	13.7	1.54	0.89	
19	Cairo, Egypt	5.3	8.6	13.4	2.41	2.21	
20	Rio de Janeiro,						
	Brazil	7.0	10.9	13.3	2.21	0.98	
21	Bangkok, Thailand	3.1	7.1	12.7	4.12	2.93	
22	Tehran (Islamic						
	Republic of Iran)	3.3	6.7	11.9	3.52	2.90	
23	Istanbul, Turkey	2.8	6.5	11.8	4.24	2.98	
24	Osaka, Japan	9.4	10.5	10.6	0.55	0.06	
25	Moscow, Russian	2.1	-0.0				
	Federation	7.1	9.0	10.4	1.21	0.68	
26	Lima, Peru	2.9	6.5	10.1	3.97	2.21	

<u>Source</u>: <u>World Urbanization Prospects</u>: <u>The 1992 Revision</u> (United Nations publication, Sales No. E.92.XIII.11).

196. By contrast, urban agglomerations in the more developed regions generally exhibited little increase in population size and low rates of growth during the period. New York actually had a small population loss between 1970 and 1990, although Los Angeles and Tokyo both registered fairly robust growth for cities belonging to the group of more developed regions. Two European cities, London and Paris, were respectively the sixth and seventh largest in the world in 1970. By 1990, after a growth rate in the 20-year period of 0.47 per annum, Paris became the fourteenth largest urban agglomeration in the world; London's growth rate during the period was negative (-0.79), and by 1990 it was number 23 in population size among the world urban agglomerations.

197. Table 13 also shows the annual rates of growth for the largest urban agglomerations for two 20-year periods. For most cities, the rate of population increase is expected to decline during 1990-2010, although four of them - Bombay (India), Jakarta (Indonesia), Karachi (Pakistan) and Delhi (India) (in addition to Lagos and Dhaka) - are still projected to grow at a rate of more than 3 per cent per annum. All of the fastest-growing largest urban agglomerations, except Lagos, are in Asia.

198. City size and rates of growth should be examined in the context of a nation's urban structure, which often reflects the level of development in the country. The concentration of a country's urban population in a single very large city is known as primacy. Generally, the predominance of a single "mega-city" in the hierarchy of urban places is characteristic of less developed regions. In the more developed regions, the pattern is more likely to show a number of large cities, each with a relatively small percentage of the country's total urban population.

199. Primacy in a country has been associated with the beginning of economic development and modernization, when investment, resources and infrastructure are concentrated in one place to maximize economic efficiency. Employment opportunities in newly established manufacturing industries attract migrants from rural areas. In rapidly growing cities, immigration usually accounts for a larger share of growth than natural increase. As development proceeds, it is expected that its effects will expand to other areas of the country. Employment opportunities and infrastructure will in turn be created in smaller cities and towns, and the primate city will exhibit a declining share of the nation's urban population. A more balanced urban structure - one with a network of alternative urban centres with transportation and communication among them - will begin to emerge. The growth of secondary cities often signals the diversification of economic activity, as well as a more equitable distribution of the benefits of development.

200. In 1990, primacy was apparent in a number of the largest urban agglomerations. Bangkok (Thailand), Lima (Peru) and Buenos Aires (Argentina) all had more than 40 per cent of their country's urban population. Four other cities - Cairo (Egypt), Dhaka (Bangladesh), Seoul (Republic of Korea) and Metro Manila (Philippines) - had more than 30 per cent of the urban population. United Nations projections show that all seven of those urban agglomerations are expected to lose urban share by the year 2010. None will actually lose population - in fact, all but Buenos Aires and Seoul will grow at a rate of more than 2.2 per cent per annum - but growth in other urban areas will outstrip the

population increase in those primate cities, leading to a somewhat more balanced distribution of urban population.

201. Three countries in Asia are exceptions to the general observation about primate cities. China and India, the two most populous countries in the world and both in less developed regions, do not have primate cities, although both are home to some of the largest urban agglomerations in the world. In 1990, 38 cities in China had at least 1 million residents. Its largest urban agglomerations were Shanghai (13.4 million in 1990), Beijing (10.9 million) and Tianjin (9.2 million), but together they constituted only 11.1 per cent of China's urban population. India, too, has very large urban agglomerations without having primate cities. Bombay, a city of 12.2 million in 1990, along with Calcutta (10.7 million) and Delhi (8.2 million), had 14.4 per cent of India's urban population. This proportion is expected to change slightly by 2010. The third Asian country that does not conform to expectations about primacy is Japan. As a developed country, Japan would be expected to have no dominant primate city; but in 1990 Tokyo had 26.2 per cent of Japan's urban population, up from 22.2 per cent in 1970, and its share is still increasing slowly. By the year 2010 it is expected to be home to just over 27 per cent of Japanese urban-dwellers. The second largest urban agglomeration, Osaka, had 11 per cent of the urban population in 1990.

#### Policies

202. The World Population Plan of Action emphasizes, <u>inter alia</u>, the need for the integration of population distribution policies with economic and social policies, and urges Governments to promote more equitable regional development, develop a network of small- and medium-sized cities and improve economic and social conditions in rural areas (paras. 44-50). Recommendations made at the 1984 International Conference on Population (Mexico City) further urged that Governments should review their socio-economic policies in order to minimize any adverse spatial consequences, as well as to improve the integration of population factors in territorial and sectoral planning, implement population distribution policies through incentives, rather than migration control measures, and adopt effective policies to assist women migrants (recommendations 39-44).

203. Governments throughout the world have adopted and implemented a variety of policies to influence population distribution and internal migration, including incentives and disincentives to influence location decisions of household and firms. In terms of approaches to influencing the spatial distribution of population, Governments continue to pursue, <u>inter alia</u>, strategies aimed at countering of primacy by promoting growth of small towns and intermediate cities, creation or strengthening of rural growth centres, development of lagging regions, and overall rural development to retain the rural population. In order to implement these population distribution strategies, Governments have taken measures that include subsidies for public infrastructure; grants, loans, or other incentives for relocation of industries and workers; decentralization of administrative, educational and research facilities; and provision of housing and social services on a decentralized basis.

204. The results of these actions have been mixed, with failures outnumbering success cases. Administrative and legal measures have had only a modest impact. For example, while opening new lands for settlements has benefited a small proportion of the rural population, it has not been effective in restraining rural-urban migration on a significant scale. Integrated rural development policies, which intended to raise agricultural income and thus persuade people to remain on the farm, have proved overly complex and lacked the necessary resources for effective implementation. In recent years, the implementation of a number of the costlier population distribution policies, such as relocation of national capital cities and establishment of new towns, has been abandoned or curtailed as a result of adverse economic conditions.

#### IX. INTERNATIONAL MIGRATION

205. Growing economic interdependence among countries encourages and is, in turn, encouraged by international migration. International migration is a rational response of individuals to the real or perceived economic, social and political differences between countries. Most international migration flows are of a regional nature; however, interregional migration, particularly that directed to the more developed regions, has been growing. It is estimated that there are more than 125 million people outside their country of birth or citizenship in the world and that half of them are from developing countries. A large proportion of international migrants reflect voluntary movements; on the other hand an increasing number comprises displaced persons and refugees.

206. Table 14 presents the views and policies of Governments in relation to immigration and emigration. In 1993, 2.6 per cent of countries perceived their levels of international immigration as too low; 74.6 per cent perceived their immigration levels as satisfactory; and 22.6 per cent perceived those levels as too high. Among the 190 countries, 1.2 per cent adopted policies to raise their levels, 60.5 per cent desired to maintain their levels, and 35.3 per cent adopted policies to lower their levels.

207. In relation to emigration, for the same reporting date (1993), 3.1 per cent of countries perceived their levels as too low, 75.2 perceived those levels as satisfactory, and 21.7 per cent perceived those levels as too high. In terms of emigration policies, 3.2 per cent of countries sought to raise emigration, 77.4 per cent to maintain current levels, and 19.5 per cent aimed at lowering emigration levels.

208. The World Population Plan of Action recognizes that the significance of international migration varies widely among countries, depending on their area, population size and growth rate, social and economic structure, and environmental conditions. This chapter covers three distinct types of international migrants: documented, undocumented, and refugees.

# Table 14. Governments' perceptions and policies concerning level of immigration and emigration, 1976-1993

(Percentage of countries)

# A. Perceptions

	Immigration					Emigr	ration	
Year	Too low	Satis- factory	Too high	Total	Too low	Satis- factory	Too high	Total
1976	7.1	86.5	6.4	100.0 <u>a</u> /	3.9	83.3	12.8	100.0 <u>a</u> /
1983	6.6	74.4	19.0	100.0 <u>b</u> /	6.0	74.4	19.6	100.0 <u>b</u> /
1986	3.6	76.4	20.0	100.0 <u>c</u> /	5.3	75.3	19.4	100.0 <u>c</u> /
1989	3.5	75.9	20.6	100.0 <u>c</u> /	5.3	74.1	20.6	100.0 <u>c</u> /
1993	2.6	74.6	22.6	100.0 <u>d</u> /	3.1	75.2	21.7	100.0 <u>d</u> /

# B. Policies

	Immigration					Emigration			
Year	Raise	Main- tain <u>e</u> /	Lower	Total	Raise	Main- tain <u>e</u> /	Lower	Total	
1976	7.1	86.5	6.4	100.0 <u>a</u> /	3.8	83.4	12.8	100.0 <u>a</u> /	
1983	5.4	77.9	16.7	100.0 <u>b</u> /	4.8	75.0	20.2	100.0 <u>b</u> /	
1986	3.5	77.1	19.4	100.0 <u>c</u> /	4.7	73.5	21.8	100.0 <u>c</u> /	
1989	4.7	63.7	31.8	100.0 <u>c</u> /	3.5	71.8	24.7	100.0 <u>c</u> /	
1993	4.2	60.5	35.3	100.0 <u>d</u> /	3.2	77.4	19.5	100.0 <u>d</u> /	

<u>Source</u>: The Population Policy Data Bank maintained by the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat.

- <u>a</u>/ Representing 156 countries.
- <u>b</u>/ Representing 168 countries.
- <u>c</u>/ Representing 170 countries.
- <u>d</u>/ Representing 190 countries.
- $\underline{e}/$  Also including those countries that decided not to intervene.

## Issue No. 17: Documented migrants

## Trends

209. Trends in documented migration at the global level remain difficult to assess because many countries known to receive significant numbers of legal migrants either lack adequate flow statistics or fail to disseminate them. In addition, the lack of comparability of available statistics severely limits the inferences that can be made from them. Thus, although there is some evidence suggesting that legal migration to the industrialized Western bloc countries increased between the early and the late 1980s, this assertion must be qualified. The countries of permanent immigration, for instance, admitted about 4 million immigrants during 1980-1984 and some 4.5 million in 1985-1989, with these numbers excluding the 100,000 or so persons admitted annually as temporary migrants and the nearly 3 million undocumented migrants whose status was regularized by United States authorities in the late 1980s and early 1990s. In comparison, the main receiving countries of Northern and Western Europe recorded about 4.6 million incoming migrants during 1980-1984 and 6.3 million during 1985-1989. However, most of those migrants were not admitted on a long-term basis. Indeed, when emigration is taken into account, the main receiving countries in Europe registered net migration losses during 1980-1984 followed by a net migration gain of over 2 million persons during 1985-1989. The increased emigration of ethnic Germans from Eastern Europe to the former Federal Republic of Germany, where they had the right to citizenship accounted for a major portion of that gain; that is, the relaxation of exit restrictions resulting from the changes taking place in Eastern Europe and the former USSR during the 1980s was largely responsible for the increases in net migration to Western European countries during that decade.

210. The oil-producing countries of Western Asia constituted another important focus of attraction for documented migrants during the 1980s, although their importance declined somewhat during the decade as falling oil prices slowed their economic growth and their labour-force needs fell. Although there are no adequate statistics on the number of migrant workers admitted by those countries, data gathered by the main sending countries indicate that the outflow of temporary workers from the latter averaged about 1 million persons per annum during the 1980s and that, towards the end of the decade, increasing proportions of workers headed towards destinations other than those in Western Asia. In particular, Japan and the newly industrializing economies of Eastern and Southeastern Asia began attracting foreign workers towards the end of the 1980s as their local labour markets became increasingly tight. During the early 1990s, the Gulf crisis forced the repatriation of some 700,000 foreign workers from Western Asia but once it was over, migration to the region seems to have resumed.

#### Policies

211. The Plan of Action addresses the needs of documented migrants by focusing mostly on those admitted as workers. Thus, it instructs Governments of receiving countries to provide proper treatment and adequate welfare services to migrant workers and their families (para. 55), and to prevent discrimination against them in the labour market and in society, to preserve their human

rights, to combat prejudice against them and to eliminate obstacles to the reunion of their families (para. 56). The International Conference on Population reiterated this appeal (recommendations 48 and 49) and invited Governments to use relevant ILO conventions as guidelines in achieving their aim (recommendation 48). Progress in the implementation of those recommendations has been slow. In the main receiving countries, few measures have been taken to improve the rights or the situation of documented migrant workers during the past decade. In Europe, the high unemployment rates recorded in a number of countries during the late 1980s and early 1990s fuelled anti-immigrant feelings and led to more restrictive migration policies, especially in relation to family reunification. In most of the receiving countries of Western Asia, migrant workers are still far from enjoying equality of opportunity and treatment with nationals in terms of working conditions; and the effective protection of the basic rights of female migrant workers remains a cause for concern. Furthermore, the Gulf crisis, by forcing the repatriation of large numbers of migrant workers, accentuated their vulnerability.

212. Advances in the implementation of international instruments related to migrant workers have also been modest. Thus, between 1982 and 1991, 3 States ratified the ILO Convention concerning Migration for Employment (No. 97) and another 3 acceded to the ILO Convention concerning Migrations in Abusive Conditions and the Promotion of Equality of Opportunity and Treatment of Migrant Workers (No. 143), bringing to 38 and 15 respectively the total number of States parties to such Conventions. <u>61</u>/ Consequently, although the adoption in 1990 by the General Assembly of the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families 62/ represented a major step towards ensuring the international protection of migrant workers, its ratification is expected to proceed slowly. By the end of 1993, only Mexico and Morocco had signed the Convention. Ratification by 20 States is needed for the Convention to enter into force. The Convention sets forth the basic principles concerning the treatment of migrant workers and members of their families and distinguishes the rights that are to be accorded to all migrant workers, irrespective of the regularity of their status in the receiving State, from those that apply only to migrant workers in a regular situation (part IV of the Convention). It thus establishes standards for the treatment of both documented and undocumented migrants.

213. Both the Plan of Action (paras. 57 and 58) and the Mexico City recommendations (recommendation 46) address the issue of the outflow of skilled workers from developing countries and suggest, among other things, that the Governments of countries of origin expand employment opportunities to retain those workers. Although data on the migration of skilled personnel are far from ideal, the evidence suggests that during the 1980s developing countries themselves were increasingly the destination of skilled migrants originating in both other developing countries and the developed world. Some programmes, such as that instituted in 1974 by the International Organization for Migration (IOM), have assisted skilled workers to return to their countries of origin. Thus, since 1974, 13,000 professional, technical and kindred workers have returned to Latin America with IOM assistance and almost 600 returned to Africa during 1983-1988. In the United Nations system, experts assigned to developing countries with skill shortages are increasingly recruited from developing countries. However, most skilled personnel migrates in response to market

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forces and its convergence on certain developing countries results from the favourable opportunities that they offer. Persons with needed skills are expected to be in high demand, both in the developed and in the most economically dynamic developing countries. It is noteworthy that in amending their immigration laws in 1990, both Japan and the United States accorded higher priority to the admission of skilled migrants.

214. The Plan of Action calls for developed countries to cooperate with developing countries to create more favourable employment opportunities in countries of origin through the increased availability of capital, technical assistance, export markets and more favourable terms of trade (para. 54). Improving the access to export markets of the products of developing countries has been the subject of negotiations that form part of the trade liberalization talks known as the Uruguay Round of multilateral trade negotiations, which has just been successfully concluded. While freer trade is not expected to replace international migration, it is generally acknowledged that in the long run, trade liberalization will foster development and thus eventually reduce pressures to migrate from the developing countries.

## Issue No. 18: Undocumented migrants

#### Trends

215. Considering that the main receiving countries are increasingly restricting the admission of documented migrants, undocumented migration is probably on the rise, though by its very nature it is difficult to quantify. During the 1980s, the United States was the country hosting the largest undocumented population in the world, amounting to several million persons. In addition, the former labour-sending countries of southern Europe began to attract migrants, most of whom had little choice but to be undocumented, given the lack of provisions for their legal admission. Towards the end of the 1980s, Japan also emerged as an important destination of irregular migration and so did some of the newly industrializing countries has often been of an irregular nature, since receiving countries generally lack both the provisions and the enforcement mechanisms to control international migration.

#### Policies

216. Both the Plan of Action (para. 56) and the Mexico City recommendations (recommendations 52 and 53) urge Governments to respect the basic human rights of undocumented migrants, to prevent their exploitation and to combat the activities of those inducing or facilitating undocumented migration. As already noted, the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families has established international standards regarding the rights of undocumented migrant workers. The Convention grants those migrants and members of their families equality of treatment with nationals with regard to remuneration and conditions of work, social security, and access to urgent medical care and education. The Convention also urges Governments to impose sanctions on the employers of undocumented migrants and on

those who organize irregular migration. It further provides guidelines for Governments that wish to regularize the status of undocumented migrants.

217. During the 1980s a number of countries adopted measures to control undocumented migration. In 1986, the United States adopted the Immigration Reform and Control Act (IRCA) which established provisions for the eventual regularization of nearly 3 million undocumented migrants and imposed sanctions on employers who knowingly hired undocumented migrants. IRCA allowed for the regularization of two groups of undocumented migrants: illegal aliens who had been in the United States since before 1 January 1982 and those who had been employed in seasonal agricultural work for at least 90 days during the year ending on 1 May 1986. By the end of 1991, 2.5 million undocumented migrants had been granted permanent residence status under the provisions of IRCA. The success of employer sanctions in curbing the inflow of undocumented migrants to the United States has been mixed, in part because of their weak enforcement.

218. In the late 1980s, Italy and Spain also undertook regularization drives for undocumented aliens as part of the process of framing new immigration laws. In Italy, about 105,000 aliens qualified for legalization during 1987-1988 and another 216,000 in 1990, while in Spain, a total of 177,000 undocumented migrants applied for legalization under campaigns carried out in the period 1985-1986 and 1991.

219. In the European Community, the drive to create a single market and eliminate internal border controls has triggered a range of measures aimed at controlling undocumented migration into Community territory. Apart from increasing the surveillance of their external borders, countries that signed the Convention on the Application of the Schengen Agreement concluded a readmission agreement with Poland, by which Poland agreed to take back undocumented Polish migrants. In addition, in 1991 member States of the European Community agreed on a list of countries whose nationals needed visas to enter Community territory. Increasingly, the adoption of visa requirements, the imposition of fines on airlines that carry passengers without valid documents and the outright deportation of undocumented migrants have been used as measures to curb irregular migration throughout Europe. In addition, countries such as France and the Netherlands have increased the penalties imposed on employers of undocumented migrants and Germany has adopted a series of measures facilitating the control of migrant workers.

## Issue No. 19: Refugees

220. Refugee movements are a facet of broader migratory movements. While there might be a number of contributory factors to refugee outflows, their specificity derives from the determination of what constitutes a refugee. The Statute of the Office of the United Nations High Commissioner for Refugees (UNHCR) identifies as refugees those persons who flee their country or stay away from it because of a well-founded fear of persecution for reasons of race, religion, nationality or political opinion. <u>63</u>/ A similar definition is found in the Convention relating to the Status of Refugees and its 1967 Protocol, the latter containing in its definition membership in a particular social group as a ground for fear of persecution. Somewhat refined definitions are found in the 1969

Convention of the Organization of African Unity (OAU) <u>64</u>/ and in the 1984 Cartagena Declaration on Refugees, adopted by the Colloquium on the International Protection of Refugees in Central America, Panama and Mexico; both documents take into account refugee-generating factors such as external aggression, occupation, foreign domination or events seriously disturbing public order, internal conflicts, and the massive violation of human rights. These two regional definitions, refer in fact to categories of persons to whom UNHCR has extended protection and assistance since the late 1950s. On the basis of these legal instruments and the Cartagena Declaration, a broad spectrum of causes have been identified that allow for the recognition of refugee-type movements within the wider phenomenon of migratory movements.

221. Currently, the international community is confronted with humanitarian emergencies on a scale unknown before. It is becoming ever more important to understand the underlying political, social, economic, demographic and environmental reasons that compel people to move. It is only through a better appreciation of the complexity and interrelatedness of the causes of displacement that a comprehensive approach to the refugee issue will be found.

## <u>Trends</u>

222. UNHCR estimates that in 1993 there were some 18 million refugees, 65/ not to mention the estimated 24 million people displaced within their own countries, often for refugeelike reasons. Between 1984 and 1991, the number of refugees in the world doubled, reaching 16 million in early 1991, and this figure excludes the 2.5 million Palestinian refugees under the mandate of the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA). World wide, nearly 9 out of every 10 refugees have found asylum in developing countries, some of which are among the poorest in the world. No region in the world is spared the impact of the tragic and increasingly complex refugee phenomenon. The presence of refugees has therefore imposed considerable strains on the meagre resources of certain countries, particularly those in Africa. Developed countries have also had difficulties in coping with the growing numbers of asylum-seekers whose cases sometimes take years to be adjudicated and who often do not qualify for refugee status. In response to such developments, a number of developed countries have adopted measures to streamline their asylum adjudication procedures and to control the admission of would-be asylum-seekers so as to prevent the abuse of the asylum system.

223. A significant number of refugees in the world are women and children; this has important programmatic implications for UNHCR's activities in the areas of international protection and assistance. It is for that reason that the Executive Committee of UNHCR highlighted the importance of comprehensive refugee statistics, especially in planning gender-sensitive programmes. In one among the various decisions and conclusions of the Executive Committee of the Programme of the United Nations High Commissioner for Refugees - issuing from its forty-third session (held at Geneva in October 1992) and set forth in its report on the work of that session,  $\frac{66}{-}$  on these two potentially vulnerable groups, the Committee called on the High Commissioner to pursue her efforts to increase public awareness of the rights and protection needs of refugee women and girls, <u>inter alia</u>, (a) through further sensitization of bodies concerned with the status of women, and (b) by promoting and supporting the inclusion of

the issue of the rights of refugee women on the international human rights agenda (para. 21 (j)). In regard to the protection and well-being of refugee children, the Executive Committee emphasized the particular situation of unaccompanied minors.

224. Large numbers of refugees in the world are still to be found in the least developed countries. The problem of refugees and that of their impact on national socio-economic infrastructures and the development process itself cannot be treated in isolation from each other. Likewise, the socio-economic situation prevailing in the refugee's country of origin cannot be disregarded in any comprehensive analysis of contributory factors to the root causes of refugee outflows.

#### Policies

225. The General Assembly only recently emphasized the need to keep issues related to refugees, displaced persons, asylum-seekers and other migratory flows firmly in the international political agenda, especially the question of solution-oriented approaches to deal with such contemporary problems and their causes. <u>67</u>/ Nobody can ignore the socio-economic factors that contribute to displacement or hinder the attainment of durable solutions. It is felt that the deepening global economic crisis, greater environmental degradation, the heavier debt burden and conditions of absolute poverty, as well as the failure of the international community to develop a strategy to address those issues, could most likely aggravate the refugee problem.

226. Given that the 1951 Convention relating to the Status of Refugees and its 1967 Protocol constitute the basis for the international asylum system, the Mexico City recommendations urge Governments to accede to those instruments (recommendation 54). Progress on that front has been substantial, with over 20 States having acceded to those instruments during 1982-1992. As of August 1992, 111 States were parties to either the 1951 Convention or the 1967 Protocol.

227. The Mexico City recommendations also urge Governments and international organizations to find durable solutions to the problems related to refugees, particularly by providing assistance to first-asylum countries, creating conditions conducive to the voluntary repatriation of refugees, and facilitating the local integration of those refugees for whom resettlement or repatriation is not possible (recommendation 55).

228. With the easing of international tensions, there are, of late, increased opportunities for voluntary repatriation. Such return movements need to be completed by development initiatives, as the country of intended return is frequently one having virtually no productive capacity and very limited basic facilities and infrastructure and affected by extreme poverty. The significant contribution that development assistance can make towards the preferred solution of voluntary repatriation  $\underline{68}$  needs to be emphasized. UNHCR has been making particular efforts to involve development agencies in voluntary repatriation drives, hoping thereby to anchor and assure the durable nature of voluntary repatriation movements.

229. During the late 1980s, a number of successful repatriation drives were carried out in the developing countries, particularly in Africa where they involved, among others, Ethiopian, Namibian and Ugandan refugees. The end of the cold war raised expectations regarding the solution of long-standing conflicts that would have important implications for refugee populations. Thus, the peace agreement concluded in 1992 between the warring parties in Mozambique raised hopes for the eventual repatriation of the current largest refugee population in Africa. Similarly, the process of normalization of political life that is taking place in Cambodia and that started in October 1991 when the four warring factions signed agreements on a comprehensive political settlement (the Paris Agreements) has allowed the repatriation of over 300,000 displaced Cambodians. In Central America, the peace process made possible by the reduction of super-Power rivalry has led to a significant reduction in the refugee and displaced population in the region. However, in several cases the resolution of conflict has failed to materialize. Thus, although the 1988 Geneva accords (Agreements on the Settlement of the Situation Relating to Afghanistan) raised prospects for the repatriation of the more than 5.5 million Afghan refugees in the Islamic Republic of Iran and Pakistan, civil war prevented their return. In 1992, however, over half a million Afghan refugees opted for repatriation. Similarly, the continuation of the conflict in Angola has prevented the repatriation of Angolan refugees.

230. A major change occurring during the 1980s was the increase in the number of persons seeking asylum directly in the developed countries. Until the early 1980s, most of the refugees admitted by those countries had been resettled from first countries of asylum and could therefore be screened abroad. In many of the receiving countries, the need to examine asylum claims on a case-by-case basis soon led to considerable backlogs. The practice of granting work permits to asylum-seekers while they awaited the result of the adjudication procedure provided an incentive for abuse of the system. These developments have led developed countries, particularly those in Europe and Northern America, to adopt measures that both control the growth of asylum claims and prevent abuse. Thus, in June 1990, member States of the European Community adopted the Dublin Convention which determined which State would be responsible for adjudicating an asylum request, thus preventing the making of simultaneous claims in several States. In addition, a variety of measures have been taken by European and North American countries to remove manifestly unfounded claims at an early stage of the asylum procedure and even to prevent claims from being filed altogether. The use of the "safe country" principle, for instance, prevents citizens of countries deemed safe from applying for asylum. Germany, one of the major destinations of asylum-seekers, changed its constitution in 1993 so as to be able to apply such a principle.

231. Such developments, together with those mentioned above in connection with the control of undocumented migration (the imposition of visa requirements or of fines on airlines transporting passengers without proper documentation), have effectively increased the barriers to international population movement and as a result are likely to prevent not only the entry of undocumented migrants but also that of bona fide refugees in need of protection. In particular, the safecountry principle established by the 1951 Convention may infringe the individual's right to seek asylum and the practice of sending back migrants without proper documentation may be inconsistent with the principle of

non-refoulement (that is to say, the principle of no forcible return of persons to places where their lives or freedom might be threatened).

232. The changes that have taken place since the end of the cold war have had important implications for the international refugee regime. Such changes have created a new spirit of international cooperation favourable to the resolution of the regional and internal conflicts that were at the root of many of the world refugee problems. With many conflicts thus resolved, some 2 million refugees were able to return home in 1992. However, in areas that previously were under strong super-Power influence, there has been a recrudescence of pronounced nationalist sentiments and ethnic tensions that have led to conflicts and new displacements. Such displacements, with ethnic conflict a common denominator, are becoming more and more typical of the present refugee outflows.

233. Currently, refugees are often fleeing not individual persecution but rather generalized violence, ethnic conflict or civil war. Refugee movements at this time are thus more than a serious humanitarian and human rights issue; often they reflect destabilizing situations that affect international security. Furthermore, there is a growing appreciation of other contributory factors to migratory and refugee movements, namely, developmental and environmental considerations, and a greater sensitivity to the demographic make-up of refugee populations. Whereas in the past, individuals fleeing communist regimes were automatically considered refugees by Western bloc countries and were generally granted permanent settlement rights because they were deemed unlikely to return to their countries of origin, in the 1990s more people are being granted only temporary protection while the situation that gave rise to their flight subsides. Furthermore, new modes of protection are emerging. Thus, the end of super-Power rivalry has allowed the international community to intervene on behalf of internally displaced persons. The creation of safe havens for the Kurdish population within northern Iraq in 1991 and of protected areas in Croatia in 1992 provides some of the most salient examples of this trend.

234. The United Nations Conference on Environment and Development provided UNHCR with the opportunity to reflect on the relationship between environmental degradation and population movements. Environmental degradation can itself be a contributory factor towards refugee flows. In cases where environmental changes are a consequence of or lead to the violation of basic human rights, there could be a valid claim for international protection on the part of those who flee. In addition, environmental considerations can and do influence asylum policies of receiving countries, particularly when large numbers of refugees arrive in ecologically fragile areas.

235. UNHCR is now emphasizing the pursuit, where possible, of a strategy involving preventive activities, including protection of displaced persons in their country of origin. Such an endeavour could be described as comprising efforts to attenuate or avert refugee flows. While prevention is a promising strategy, it has its limits and is not a substitute for asylum.

## X. POPULATION INFORMATION, EDUCATION AND COMMUNICATION

236. Since the adoption of the World Population Plan of Action in 1974, there have been important efforts to promote awareness and understanding of population issues among Governments, non-governmental organizations, communities, families and individuals. Such efforts have also aimed at mobilizing the support of national administrators, decision makers and opinion leaders in favour of population policies and programmes. The basic goal has been to procure an audience with access to clear and accurate information. Although it is difficult to measure the impact of such efforts on different audiences, it has been widely accepted that activities of this type drive policies and programmes, as well as individual and community behaviour.

237. The term "population information, education and communication" (IEC) alludes to a large variety of activities usually having a broad mandate and complex functions, and involving many different audiences, messages and channels of communication. Nevertheless, IEC is normally used to refer to the fostering of interest in a particular subject, such as population, or the environment, for example. In the area of, say, family planning, the term could allude to a series of specific goals, such as (a) creating public awareness about the need for family planning; (b) increasing knowledge about the use and risks of family planning methods, or about where to obtain contraceptives; and (c) motivating couples and individuals to visit family planning services.

238. IEC has its roots in the field of agricultural extension, although its principles have been adapted successfully for other purposes, for example, in population programmes. When specific target audiences are identified, it is expected that IEC-type information will produce a kind of behavioural modification in the intended group, as is the case in the promotion of "safe sex" for the prevention of AIDS. In the field of population, in general, target audiences of IEC activities are more and more concentrated at the grass-roots level.

239. Nevertheless, the term IEC has some unclear connotations because it may refer to different types of information. For example, IEC could be used as an umbrella term to refer to "technical information", which is different in its content and goals from activities aimed at motivating certain type of behaviour. This chapter takes into account these two broad types of information and concentrates on two particular issues, namely, the accurate and objective information that is needed for policy-making and programme management, and activities aimed at increasing the level of awareness about population issues.

#### Issue No. 20: Technical population information

240. The term technical information includes (a) basic data, collected using reliable scientific methods such as censuses and surveys; and (b) the findings and implications of objective research studies. Accurate up-to-date technical information is needed by policy makers and programme managers for the formulation of policies and programme goals, as well as for the preparation of the operational plans needed to achieve those goals. Technical information constitutes the knowledge base upon which to build sound population policies and

programmes. Such information is found in a variety of printed and electronic forms. Users of this type of information may address their requests to population research institutes and universities, but more and more, such requests are being directed to population information centres that have been specifically set up for this purpose.

241. Many countries lack the national mechanism for the collection, storage and processing of relevant country-specific population data. Shortages of trained manpower, the lack of appropriate technology and inadequate financial resources also contribute to the absence of national information infrastructures, particularly in the developing countries. As indicated in Agenda 21, even where information is available, it may not be easily accessible either because of the lack of technology for effective access or because of associated costs, especially for information held outside the country and available commercially. <u>69</u>/

242. Population information centres have three main functions: (a) to identify, collect, organize and store population-related information; (b) to analyse, synthesize, tailor and repackage the data and information to suit the needs of the various types of users they serve; and (c) to retrieve and disseminate that information in both its original and its repackaged formats. The information that is needed for the monitoring and evaluation of programme performance is generally gathered through management information systems (MIS) that have been established for that purpose.

243. The Plan of Action includes various recommendations on the dissemination of information and research results (paras. 88, 91 and 92), which were echoed at the International Conference on Population (Mexico City recommendation 76). Concerning the dissemination and exchange of technical information, it is important to mention that the field of population has been well served through an array of serial publications that have a long tradition of high standards. Periodicals such as the English-language journals <u>Demography</u>, <u>Population and Development Review</u>, and <u>Population Studies</u>, and the French-language journal <u>Population</u>, are well known among scholars and constitute an additional source of technical information beyond the technical publications of the United Nations which include the <u>Population Bulletin of the United Nations</u>, and the periodical publications of the regional commissions. <u>70</u>/

244. One of the most significant recent developments is the spread of national, regional, and international information databases and networks. A notable example is the global Population Information Network (POPIN). (In its resolution 1979/33, the Economic and Social Council requested the Secretary-General, <u>inter alia</u>, to facilitate the establishment of POPIN.) It is a decentralized network for the coordination of population information activities in the various regions and the facilitation of world-wide access to population information; and it links more than 100 libraries, clearing-houses and documentation and information centres for the purpose of improving the circulation of population information. There are regional POPIN networks in Africa (POPIN-AFRICA), Asia (ASIA-PACIFIC POPIN) and Latin America (Information Network on Population for Latin America and the Caribbean (IPALCA)). The availability of population information and literature has also been enhanced through the use of electronic resources such as the <u>POPIN Gopher</u>, and by the

establishment of computerized international, regional and national bibliographic databases, such as POPLINE (maintained by the Population Information Programme of Johns Hopkins University and Princeton University); DOCPAL (maintained by the Latin American Demographic Centre/Economic Commission for Latin America and the Caribbean (CELADE/ECLAC), Santiago, Chile); the Population File of ESCAP Bibliographic Information System (EBIS POPFILE) (maintained by the Economic and Social Commission for Asia and the Pacific (ESCAP), Bangkok); POPINDEX-Africa (maintained by POPIN-AFRICA/Economic Commission for Africa (ECA), Addis Ababa); DOCPOP (maintained by the Fundaçao Sistema Estadual de Analise de Dados (SEADE), São Paulo, Brazil); and RESADOC (maintained by the Sahel Institute, Bamako).

245. In order to promote both effective and equitable access to population information, the United Nations system should encourage and facilitate initiatives to strengthen national information capacities and, whenever possible, should promote the establishment and use of electronic links for sharing information, providing access to databases and other sources of information, facilitating national and international communication, and transferring data.

## Issue No. 21: Creation of awareness

246. Through various means and channels - including population education in schools, non-formal educational programmes serving people of different ages, extension programmes in health, nutrition and agriculture, and the broad utilization of traditional media - population-related knowledge and motivation have been provided; this has fostered interest, created demand and otherwise supported population programme activities. Experience gained in the implementation of population education and information activities in the past 20 years suggests three important criteria to be taken into account: (a) use of the most modern media available for maximum effectiveness; (b) use of multimedia that tries to reach a maximum coverage; and (c) use of traditional media and local entertainment events in order to reach grass-roots communities and the illiterate audience.

# Population education

247. Mass media can play an important role in raising awareness of population issues, the importance of family planning and the location of services, and in establishing a positive atmosphere for national population programmes and family planning activities. Nevertheless, it has been increasingly recognized that attitudes that form the basis for behaviour and views on population issues are often formed early in life. For this reason, an approach beginning long before adulthood, such as population education in the school system, is required. Secondary education should reinforce the learning promoted through primary education and should take into account the specific needs of the school-age population. Population education may take place in many settings. It may begin with educational activities for newly-wed couples, followed by parent education to help partners educate their own children; and the cycle may continue with the education of children in schools.

248. During the past decade, the number of countries developing national population education activities in the formal and non-formal education systems increased considerably. At present, population education programmes are found in over 80 countries in the developing world. Their aims vary from country to country, but they are generally designed to introduce understanding and a sense of responsibility regarding population issues. An increase of 54 per cent was registered in the number of countries that had population education programmes carried out in collaboration with UNESCO and UNFPA, notably in Africa. Over the past two decades, important efforts have been made in the mobilization of intellectual activities for the purpose of preparing the contents and messages to be incorporated in population education country programmes. The conceptual and methodological approaches, comparative analytical studies and prototype teaching/learning materials produced have made important contributions to the advancement of population education. The provision of technical assistance services includes training workshops, awareness and orientation programmes for educators.

249. In spite of the above progress, it is important to observe that most national population education programmes have faced several difficulties, shortfalls and constraints that have reduced their effectiveness, threatened their continuity and delayed their expansion. These include: limited political support and commitment at various levels; absence of a firm policy and its implementation on a continuing basis; limited availability of national data and relevant social research findings on the effects of sociocultural factors on demographic change; shortage of resource materials and teaching staff adequately trained in all aspects of population dynamics; and limited financial support from national and international agencies.

250. Considering that the majority of the population in the developing countries is rural, and that rural/agricultural households' demographic behaviour possesses specific traits that ought to be carefully considered when designing population IEC activities, a specific area under development at FAO is population education in agricultural extension. Target groups for such activities are agricultural education and extension staff (trainers and subjectmatter specialists, trainees and in-service extension workers) and farming families, with particular attention to their youth. Population education topics concretely related to agricultural production, farm management, sustainable agricultural development and environment have been integrated into agricultural extension curricula in selected countries. Methodological adaptation, material production and dissemination effort will continue in this area at least until 1995.

251. Another area of activities has been addressing design and production of materials and training of trainers in the context of informal education programmes for out-of-school rural youth. Booklets have been developed to disseminate knowledge and generate discussions at the community level on human reproduction, family life, population and agriculture, natural resources and the environment. FAO has conducted fieldwork to test the material in selected countries of Africa and Asia with the cooperation of local associations of rural youth and young farmers. This line of activities is also expanding to all the developing regions.

252. Population education is also part of Women in Development programmes. The target group is rural women of child-bearing age who are beneficiaries of agricultural development programmes and projects. FAO has conducted a series of baseline studies on the linkages between rural women's productive and reproductive roles, and the effects of such linkages on family size and structure and on agricultural production and rural development. Results have been instrumental in the preparation of outline formats for non-formal population education activities addressed to rural women.

253. FAO has also been innovative regarding the introduction of population education elements into programmes and curricula geared to nutrition education (an area that has been steadily developing since the late 1970s for the benefit of field programme staff and formal training institutions). Pedagogic supplements on relevant population factors and their relationship with nutrition factors have been developed, tested, translated, adapted and widely applied.

254. With the emergence of AIDS and its sociodemographic consequences, the need of preventive education has acquired a new dimension. As a follow-up to the UNESCO International Conference on Education convened in Geneva in 1986, teaching materials have been prepared taking into account the sociocultural aspects of AIDS transmission, awareness and orientation seminars have been organized, and pilot activities have been launched within the framework of population education programmes at the regional level. At the country level, most programmes have introduced elements of AIDS prevention under the sex and family component of population education.

255. UNESCO and UNFPA jointly organized the First International Congress on Population Education and Development held in Istanbul, Turkey, in April 1993. In preparation for the Congress, UNESCO organized five regional meetings in 1990 and 1991 with the participation of more than 130 specialists from 85 countries and international organizations. The Congress, which was attended by representatives of 91 Governments (including 20 ministers), underlined the strong global support for population education in school systems. It adopted the Istanbul Declaration on the Role of Population Education in and its Contribution to the Promotion of Human Development. The Congress also adopted an Action Framework for Population Education on the Eve of the Twenty-first Century, intended as a reference and a guide for Governments, international organizations, bilateral aid agencies and non-governmental organizations when formulating their plans to implement the Istanbul Declaration.

256. In order to meet the challenges of training the younger generations of administrators, decision makers, policy makers and teachers of the twenty-first century who are currently students in various universities and institutions of higher education in all parts of the world, and as a follow-up to the Congress, which stressed the need for the extension of population education to all educational levels, including that of higher education, efforts need to be made to promote the teaching of population education at the university level. Inter-university cooperation in the field of population education between countries could be established through university twinning and other linking arrangements in connection with the UNESCO Twinning Arrangements (UNITWIN) project and through the establishment of UNESCO Chairs in population education and sustainable development.

257. Population education is a rapidly developing field that is already consolidating its approaches and methods. There are, however, new challenges to be met in its conceptualization and institutionalization, as well as in the expansion of population education to encompass all levels of formal and non-formal education in all countries. Like any other subject, population education needs to adapt itself to changing needs and situations. In view of the expanded vision of the role of education, as advocated in the 1990 World Conference on Education for All, held in Jomtien, Thailand, and in the Rio Declaration on Environment and Development, 71/ adopted at the 1992 United Nations Conference on Environment and Development, it has become more important than ever to broaden the scope of population education to address in an integrated way the issues of population, development, the environment and gender relations. Various other needs, such as the training of teaching staff, coordination among different educational institutions, knowledge gaps to be filled, sensitization of policy makers, production of a variety of teaching materials, and timely evaluation of related activities, should be emphasized.

#### Population communication

258. During the past two decades the world has also experienced a significant revolution in the field of communication, which has been stimulated by (a) rapid urbanization (which creates ever-larger audiences with wider access to mass media); (b) a large number of young people who are more closely attuned to the impact of mass media; (c) an increasing access to audiovisual communication techniques and widespread use of radios, televisions and video cassette recorders; <u>72</u>/ and (d) development of new technologies for storage and processing information (for example, compact discs, easy-to-use data transmission, microcomputers, and software). Such developments have reached a large range of audiences (including local grass-roots ones) and have been accompanied by the recognition of the need to improve the quality of communication between providers of services and their clients.

259. Special efforts have been made to organize population training workshops and courses for professional communicators who work in development programmes. These training programmes provide both communication skills and knowledge for the application of information technologies to addressing population issues and strengthening the management of population communication programmes.

260. A large number of projects have provided technical assistance, training and equipment for the production and distribution of population communication materials aimed at establishing links with regional media networks and national broadcasting institutions in order to promote population issues in their programming. In line with priority activities to enhance the status of women in society, a number of projects were launched by UNESCO in cooperation with national radio and television stations, including the production of television spots and drama on topics related to improving the status of women through education, family patterns, changing gender roles and marriage counselling. Note should be taken of the importance of such activities in conveying appropriate messages effectively to target audiences.

261. UNESCO has a joint project with UNEP called the International Environmental Education Programme (IEEP). This project and the UNFPA/UNESCO action scheme on

population information, education and communication are two key mechanisms for inter-agency cooperation. A new UNESCO interdisciplinary and inter-agency cooperation project, Environment and Population Education and Information for Development, which was approved by UNESCO's General Conference at its twentyseventh session in November 1993, aims at the development of education, training and information activities designed to deal with the interwoven issues of population, environment and human development, including gender perspectives, in an integrated manner, with emphasis on specific and problem-solving research and action.

262. Population communication efforts for rural populations have undergone continuous development. The emphasis has been on developing methods to address illiterate populations at the community grass-roots level. Rural radio has been used in many contexts. Community-participative approaches to identifying topics for communication programmes (and select visual aids) on the basis of sociocultural research have been used extensively. FAO has reviewed its own Development Support Communication programmes, to introduce population-related topics where applicable.

263. FAO has designed programmes aimed at improving the capabilities of agricultural policy makers and programme managers to disseminate knowledge on population issues and render it operational. Since the general awarenessraising programmes among agricultural planners in the 1970s, FAO has developed tools that help policy makers analyse trends in the main determinants of the agricultural resources/requirements dilemma. Two of the main tools, the Agro-Ecological Zones/Potential Population-Supporting Capacity and the Computerized System for Agriculture and Population Planning and Analysis (CAPP), integrate population data and analytical means to study the impact of population dynamics on prospects for land and agricultural development.

264. Recent years have also seen a growing emphasis on the development of software to sensitize policy makers on the interactions between population and development and their causal mechanisms. Such computer-based programmes help leaders to become aware of the impact of relevant policy interventions. Other software packages have been developed that strengthen national capabilities for future data collection and analysis.

265. The convening of meetings and particular gatherings on population has contributed to increased population awareness and the promotion of greater understanding. Of particular interest is the case of several conferences of parliamentarians on population issues. Such gatherings have helped government officials and the public to gain a better understanding of the relationships between population and development and strengthened the role of parliamentarians as the crucial link between the government and the people, in particular as a channel of communication for the articulation of the people's needs. Among the important meetings in this regard, the following may be mentioned: the Third Conference of the Asian Forum of Parliamentarians on Population and Development (1990); the Second Western Hemisphere Parliamentarians Conference on Population and Development (1990); and the Fifth and Sixth Asian Parliamentarian Meetings (1989, 1990).

266. Another important meeting that took place in the recent past was the International Forum on Population in the Twenty-First Century, <u>73</u>/ in which delegates from 79 countries participated. It was a notable international gathering that focused the world's attention on the significance of global population growth. The Forum adopted by consensus the Amsterdam Declaration on a Better Life for Future Generations (A/C.2/44/6, annex), which laid down a blueprint for needed urgent action in the population field. The Declaration was taken note of with appreciation by the General Assembly at its forty-fourth session. <u>74</u>/

267. With the advent of UNFPA's Programme Review and Strategy Development (PRSD) exercises in developing countries, signifying a new approach to population programming, the importance of comprehensive IEC strategies has become increasingly evident. The need for such strategies, and for the coordination they imply, is accentuated by the need to take action simultaneously on several fronts in order to achieve programme goals. In response to those needs, there has been an increase in the attention given to strategy development and to IEC research in the training carried out for IEC specialists, particularly the development of skills in research, audience segmentation and media mix. The choice of the medium and target audience and the adaptation of the message to fit social and cultural realities are increasingly viewed as crucial to provision of effective population information and education, and to effective population-related communication.

268. Another facet of the creation of awareness of population issues is the training of cadres who are capable of staffing population units and interpreting demographic data to decision makers. The existing and newly created regional population training centres are providing relevant training to national experts. UNFPA's Global Programme of Training in Population and Development has also expanded to provide training in the Spanish language and will soon transfer the French-language course to a site in western sub-Saharan Africa.

269. Innovative approaches to reaching young people with population messages have, in the past few years, involved organizing painting and other competitions to engage young minds in the critical analysis of the impact of population growth on such issues as the pollution of the environment and the depletion of natural resources, in terms both of survival and of sustainable development, quality of life and availability of food. In addition, the increased involvement of non-governmental and other organizations in the field of youth and population (for example, the Boy Scouts, the Young Women's Christian Association, and IPPF) has resulted in a variety of learning activities for youth that have in many cases harnessed the energy of this group and made its members activists in the population field. The facilitation of a two-way dialogue between policy makers and youth organizations has been an important product of this trend.

270. Finally, among the important events contributing to awareness-creation on population matters throughout the world is the annual celebration of World Population Day on 11 July. It is accompanied by a wide range of activities and special events for groups ranging from parliamentarians and academics to professionals and young people. Another event is the annual presentation of the United Nations Population Award to individuals or institutions who have been

chosen to be honoured for their outstanding contributions in the area of increasing awareness of population issues and working towards their resolution.

#### XI. TECHNOLOGY, RESEARCH AND DEVELOPMENT

271. Demographic data of sufficient quantity and quality are a prerequisite of mobilizing leadership support for the formulation of population policies. Population issues must be properly documented and interpreted; otherwise, policy makers and programme officers will not be able to identify the determinants of such issues and the actions that are required to address them, much less motivated to undertake those actions. For this reason, the collection, analysis and research of population and other socio-economic variables constitute a fundamental part of the process that embraces the identification of issues, the formulation and implementation of policies and programmes, and the evaluation of such actions. The present chapter concentrates on two particular issues, data collection and substantive and operational research.

#### Issue No. 22: Balanced programme of data collection

272. The Plan of Action (paras. 72-77) and the Mexico City recommendations (recommendations 60-68) provide guidance in the area of data collection and analysis. Such directives have been extremely useful and have been translated into important improvements. At present, for virtually every nation in the world, there is available a set of basic indicators on population trends. Those basic indicators include population size, distribution by sex and urban/rural residence, and rates of increase, crude death and birth rates, total fertility rates, infant mortality and life expectancy at birth. These data correspond to estimates and projections covering the period 1950-2025. Estimates and projections on internal and international migration are almost non-existent in the majority of countries, and in the area of maternal mortality only recently has there been an interest in collecting such data. Over the past two decades, many countries have made demonstrable progress in obtaining such data through censuses, surveys and the improvement of national vital statistics systems, as well as in analysing those data and carrying out research. However, many developing countries have insufficient data to fully assess the interactions among population, development and the environment. There is a scarcity of vital data on women in the developing countries and some countries still do not tabulate sufficiently their statistics by gender.

273. In relation to the data originating from population censuses, the past 20 years have witnessed important improvements. During the 1980s, 192 countries or areas took a census; during that decade, in particular, the African Census Programme (50 out of 54 countries participating) and the 1982 Population Census of China were both undertaken. The decade 1985-1994 was designated by the United Nations as the 1990 census decade and the 1990 World Population and Housing Census Programme was launched in 1985. In the present decade, 194 countries or areas have carried out or are planning to carry out a population and housing census. In some countries, census preparations had actually been made but for various reasons the census was postponed to a date after 1994 or cancelled. In other countries, population registers and administrative records

systems were used to provide census-type data on population and housing. By the end of 1994, it is expected that 96 per cent of the world population will have been enumerated.

274. Since the 1990 census decade has been witnessing a wide use of microcomputers in the processing and dissemination of data, the United Nations has responded by preparing various publications to assist countries in planning using centralized and decentralized methods for census processing and tabulation. The use of microcomputers has also facilitated the development of local census statistics for analysis of population trends and characteristics for policy purposes.

275. Furthermore, a wide range of technical cooperation activities, funded by UNFPA as well as by other donors, were carried out during the past two decades in a large number of developing countries in connection with the successful completion of their national censuses. Those activities included the provision of census experts; advisory services; equipment (including computer hardware and software); and a series of training workshops at both the regional and the national level. The training workshops covered, <u>inter alia</u>, advanced techniques in census cartography, census planning, sampling procedures, methods for collecting economic statistics, data processing, and database development. Of particular importance was a census training programme for sub-Saharan Africa that was funded by the Government of Canada under multi-bilateral arrangements with UNFPA and executed by the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat, with ECA as the associate executing agency.

276. Another area that receives attention in the Plan of Action is the establishment of national vital statistics systems (para. 75). The continuing implementation of the World Programme for the Improvement of Vital Statistics was intensified with the launching of the International Programme for Accelerating the Improvement of Vital Statistics and Civil Registration Systems in 1991. The International Programme was co-sponsored by the Statistical Division of the United Nations Secretariat, UNFPA, WHO and the International Institute for Vital Registration and Statistics. A series of workshops to promote the improvement of vital statistics and civil registration had been planned. They examined the obstacles and considered national strategies to improve completeness and coverage particularly in countries that had already attained 80 per cent completeness or more in registration. The workshops also made suggestions regarding the main components of national master plans for improving the two systems and stressed the need for a steady commitment by countries to reforming the current systems. In spite of the above advances, it has been found that national progress in establishing and strengthening such systems, particularly in the developing countries, has been limited.

277. A particular area that has been receiving considerable attention is migration (both internal and international, but especially international). Migration statistics are very deficient, even in the more developed regions. This fact was recognized by the International Conference on Population (Mexico City) and migration was identified as the least developed area of current demographic statistics (recommendation 64). Part of the difficulties are related to the lack of data, but even if data exist, there are still

difficulties in terms of concepts, definitions and classifications of migrants. Therefore, a rational strategy in this area should include the revision of definitions and classifications, as well as the preparation of guidelines for the collection, tabulation, publication and dissemination of data gathered from multiple sources (population censuses, sample surveys and administrative record systems).

278. An annual publication of the United Nations, the <u>Demographic Yearbook</u>, has been disseminating a variety of demographic and social statistics during the past four decades. These data, which exist on the mainframe computer, have been made available on computer tapes, on an ad hoc basis, to private clients and national offices, as well as to other users in the international system. In recent years, as microcomputers have become more widespread, the demand for demographic data on microcomputer media has increased. In order to meet these needs, a three-year project has been undertaken to strengthen the existing database. Upon completion, the database will contain time-series on demographic and social statistics since 1950 and will permit their rapid retrieval and efficient use for international population research, including the study of special population groups.

279. Distinguished improvements in the area of sample surveys have been made in the past two decades. Some major examples should be mentioned in this respect. First, the World Fertility Survey (WFS), the largest social survey ever undertaken, was launched in 1972. It was carried out by the International Statistical Institute, in collaboration with the United Nations and the International Union for the Scientific Study of Population (IUSSP), with the financial support of UNFPA, the United States Agency for International Development (USAID) and the Overseas Development Administration (United Kingdom). WFS provided not only a set of comparable data covering 20 developed and 42 developing countries but also manuals on survey design, training to nationals of participating countries, data-processing software, standard data tapes and a series of illustrative analyses. As it ended in 1984, the Institute for Resource Development of Macro Systems launched the programme of Demographic and Health Surveys (DHS), which has been considered the successor of the WFS surveys. On a smaller scale, the United Nations, in collaboration with UNICEF, UNFPA and IPPF, and with financial assistance from the Arab Gulf Programme for United Nations Development Organizations (AGFUND), has been undertaking a project called the Pan-Arab Project for Child Development (PAPCHILD) which is aimed at the collection of data on health for policy and programming.

280. Several activities have been designed to address special population groups, such as children, persons with disabilities, and the elderly. Such activities include, <u>inter alia</u>: (a) development of concepts, definitions and classifications; (b) design of strategies for data collection and development of international databases; (c) preparation of training manuals and handbooks; and (d) technical cooperation activities, including training workshops and advisory services. With respect to people with disabilities, great strides have been made in data compilation and dissemination. The international Disability Statistics Database (DISTAT) comprises 12 major socio-economic and demographic topics concerning disability.

281. The implementation and monitoring of international instruments related to the full integration of women into society on an equal basis with men require a solid data foundation. Of particular interest has been the preparation of the Women's Indicators and Statistics Database (WISTAT) and <u>The World's Women</u>, <u>1970-1990: Trends and Statistics</u>. <u>75</u>/ WISTAT is an integrated, readily available, comprehensive database for microcomputers.

282. It is important to signal that the above experience exhibits important achievements and major successes; nevertheless, important work remains to be done. Indeed, in many developing countries, basic data are deficient and incomplete; analyses based on current direct observations are still lacking; the institutional basis for the collection, processing and dissemination of statistical information is weak; and, particularly, there is a need for improving the quality of human resources committed to these activities. From the above experience, a major lesson can be learned, namely, that the data collected from censuses, civil registration systems, social surveys, and any other source, can only be considered complete when those data are evaluated, disseminated and analysed to provide demographic knowledge concerning trends and their socio-economic correlates. Each of the different systems of data collection has its own merits, but becomes more powerful when complemented by the others. In this respect, the third review and appraisal of the Plan of Action concluded that a balanced programme of data collection and analysis for any given country would aim at gradual and harmonious improvement in the different systems of collection and analysis which would fit the particular conditions of the country, and that such a programme should consider particular information needs in terms of specific groups of the population.  $\underline{76}$ /

#### Issue No. 23: Substantive and operational research

283. The Plan of Action (paras. 78-80) and the Mexico City recommendations (recommendations 69-72) give strong emphasis to research activities relating to population and identify the priority areas requiring research to fill gaps in knowledge. As part of the preparatory activities for the 1994 International Conference on Population and Development, six expert group meetings were convened to discuss various population issues, provide substantive basis for assessing the Plan of Action, address the issues of the coming decade, and recommend actions. Each of the meetings examined the level of understanding of particular issues and identified gaps and limitations. Many of the conclusions have been valuable inputs in the preparation of the present report.

284. The principal areas covered by research during the past two decades ranged from social, cultural and economic determinants of population variables in different developmental and political situations to social indicators reflecting the quality of life and the interrelationships between socio-economic and demographic phenomena. During the same period there was accumulated a significantly large body of qualitative and quantitative information obtained from a world-wide research effort. A review of recent research reveals shifts in emphasis among the different research areas and points to important advances as well as gaps that require further research.

285. Important research work has been carried out at the interregional and regional levels. Studies in this area have focused on the interrelationships among socio-economic and population variables, population and development, and the demographic aspects of development planning. At the country level, research has given particular emphasis to the analysis of population growth, population distribution and the determinants and consequences of migration, migration and unemployment, and human resource development. Although considerable research has been carried out, an array of research questions, especially at the operational level, remain in specific country situations. A paucity of human and financial resources has contributed to this situation.

286. Recent trends in the analysis of population dynamics have shifted from fact-finding studies to more focused analyses of how population issues are integrated into socio-economic development planning and programming. A trend in recent years, and one likely to gain momentum in the future, is the growing recognition of the importance of policy-oriented research on sociocultural factors affecting human reproductive behaviour, not only in relation to reproduction but also as regards morbidity, mortality, migration and urbanization. The International Forum on Population in the Twenty-First Century recommended an expansion of research to encompass the determinants of fertility and family planning attitudes and behaviour, as well as family relationships, sexual behaviour and cultural barriers impeding the integration of women in the overall development process. <u>77</u>/

287. Research efforts on the interactions between population and the environment over the past 20 years have, on the one hand, sought, with varying degrees of success, to create macro-level analytical frameworks and, on the other, applied themselves to empirical investigations at the micro-level. Perhaps the most critical shortfall exists in the area of empirical micro-level studies of particular localities. However, a number of potentially significant projects at both levels are being undertaken at present. The study on the relationship among population pressures, poverty and environmentally endangered zones is a field of research that should be given high priority in the coming years.

288. Over the past 20 years the topic of migration has been perceived to be an increasingly crucial demographic and political problem. Spurred by the paucity of research on both internal and international migration, research on migration has been growing very fast, being focused mainly on the analysis of present and future emigration pressures on the developed countries. Relatively little research exists, however, on movements between the developing countries. There is also a lack of serious research on refugees, particularly within the developing countries.

289. In recent years, increasing attention has been given to the ageing of populations in many countries. This demographic trend is considered to have significant economic and social implications which vary considerably according to country-specific circumstances and include the effects of ageing on pensions, the labour force, medical care, family structure and residential patterns. The focus of research on age structure has not been limited to the growth of the elderly population but has considered age distribution in its entirety in a broad framework of global and historical changes. Much research attention has been paid to the causes of change in age structure, and its consequences for

public revenue and expenditure and the labour force, as well as to the identification of possible adjustment mechanisms and approaches to improving demographic policies.

290. Research in human reproduction with specific focus on the needs of developing countries has been expanding. During recent years, considerable progress has been made in the area of research, development and assessment of fertility-regulating methods, including male fertility methods, although practical applications are still some years behind.

291. In the past few years, the role of males in fertility, and particularly male responsibility for family planning, have become important research topics. More studies, however, need to be done, especially at the operational level, to discover effective means of involving male partners in family planning decisions. The investigation of operational questions such as these has been taken up by several national non-governmental organizations that probably have a comparative advantage by virtue of their grass-roots character.

292. In spite of a considerable amount of operational research carried out on the provision of family planning services, needs in this area are still great because of the growing demand for cost-effectiveness and self-financing of programmes owing to growing financial constraints. Operational research and specific micro-level surveys have yielded many operational answers to programmatic questions about service delivery, including quality of care, sociocultural sensitivities, women's needs and more effective cost-recovery strategies.

293. At the operational level, recent research has broadened into several specific topics designed to improve the quality and accessibility of family planning services. An international programme to estimate contraceptive requirements to the year 2000 has made good progress and helped the coordination of international efforts in contraceptive material procurement, although more efforts in this area are needed if the expected growth in demand in developing countries is to be met in the next few years. More systematic research into the legal impediments to family planning acceptance, ranging from import restrictions to civil laws affecting, for example, availability of contraceptives to adolescents, has also accelerated in recent years.

294. In the area of health, recent research has focused on maternal mortality, on maternal and reproductive morbidity and on assessments of unmet needs for family planning. Important advances have been made in the understanding of the interactions among family planning, maternal mortality and child survival. Epidemiological and operational research remains a vital instrument in the efforts to reduce maternal morbidity and mortality.

295. In the next decade, further research will be needed for the development and adaptation of the appropriate technologies and methodologies necessary to reduce high levels of severe morbidity and maternal mortality, as well as for the investigation of their underlying causes.

296. Recent years have seen emphasis on the development of methods for making rapid assessments of social and economic events that are important in

understanding the interaction between population and development, providing substantive and technical bases for policy-relevant research, and establishing quick baselines for the evaluation of programme efforts.

297. Numerous sociocultural research studies conducted during the past 20 years have provided considerable input in the development of information, education and communication activities. However, there is still a lack of knowledge about the sociocultural and psychological profiles of specific target groups, including cultural acceptability of the concept of contraception and the specific methods for achieving it. Among other key areas for future studies is research on sociocultural factors affecting demographic behaviour in urban squatter settlements. Desegregation of quantitative and qualitative information by gender, essential for sociocultural research, has advanced in recent years, but remains inadequate.

298. Another important challenge confronting researchers is to make the best possible use of the microcomputers that are becoming widely available. Doing so could contribute greatly to the decentralization to subnational levels of research, which would thus become more programme-oriented, but achieving this will require methodological and substantive work at all levels.

299. Among the issues that merit more attention and further investigation in the area of population and development are the following linkages: the effect of population growth on the ability to increase human resource investments; poor governance in the face of mounting population pressures; unsustainable efforts to increase food production; strains on water resources; and costs associated with a lower versus a higher degree of population stabilization.

## XII. NATIONAL ACTION

300. The World Population Plan of Action recognizes the sovereign right of nations to respond to their own population and development issues and affirms that the success of the Plan of Action will largely depend on the actions undertaken by national Governments (para. 96). In this sense, the ultimate responsibility, certainly, belongs to national Governments. Action undertaken by countries to address their population problems, in a broadened context of social and economic development, encompasses a large variety of coordinated activities to be carried out by many different actors, including national Governments, regional and local authorities, legislators, non-governmental organizations and the private sector, local communities, families, couples and individuals, and the population in general. It is important to take into account that, in an increasing number of countries, Governments have recently been modifying the manner in which they manage their national affairs. There are new tendencies towards recognizing the larger role to be played by market forces and private initiatives, as opposed to public regulation. National Governments, when making collective decisions and choices, tend more and more to foster the participation of the different actors that constitute the social web of nations. This chapter concentrates on three key issues: the integration of population concerns into development planning and programming; the achievement of self-reliance; and the management of programmes.

# Issue No. 24: Integrated approaches for population policies

301. Comprehensive population policies facilitate the consideration of the various relationships between population factors and socio-economic development in a manner that minimizes policy contradictions and promotes internally consistent and harmonious development. Beginning in the early 1960s, many developing countries started to be involved in preparing their plans and strategies for social and economic development. In many instances, population was included in the planning process, at least as a reference point for defining the real magnitude of needs and resources. In those cases where the process of planning was well organized, population variables used to be taken into account.

302. The Plan of Action states, in its principles and objectives, that population and development are interrelated: population variables influence development variables and are also influenced by them (para. 14 (c)). In recognition of these linkages, and in an attempt to ensure that developing countries build upon them, the Plan of Action recommends that population measures and programmes should be integrated into comprehensive social and economic plans and programmes and that this integration should be reflected in the goals, instrumentalities and organizations for planning within the countries. It is suggested that in general a unit dealing with population aspects be created and placed at a high level of the national administrative structure and that such a unit be staffed with qualified persons from the relevant disciplines (para. 95).

303. According to information in the Population Policy Data Bank, the vast majority of Governments have units responsible for taking into account population variables in development planning within their central planning or

programming agencies; nevertheless, very little progress was made on this front during the 1980s. A large proportion of the developing countries (more than 75 per cent) have a national development plan currently in effect and two thirds of the Governments have at least one agency for formulating or coordinating population policies and a unit for taking into account population variables in development planning within the central planning agency.

304. In recent years, considerable efforts have been made to establish institutional mechanisms to heighten awareness of population issues and to lobby for effective resolution of those issues. Many developing countries have organized national population commissions or councils that are high-level government bodies. These councils or commissions are usually charged with the responsibility of making decisions or giving advice on population matters in general, or of spearheading the formulation of population policies and coordinating all population programmes in both public and private sectors. In many cases, these commissions are also charged with the responsibility of channelling financial and technical assistance for population programmes. The location and effectiveness of these commissions and councils are influenced by the degree of national commitment to population and development issues.

305. In addition to these commissions or councils, there are also population units in planning, health and education ministries in over 70 developing countries. Those commissions, councils and units, by formulating comprehensive population policies, have played a leading role in legitimizing the idea that population is also a programmable sector, as well as in promoting the acceptance of population activities. In many countries where commissions or councils exist, the population units act as technical secretariats.

306. Considerable efforts have been made to assist national Governments in organizing and equipping the units in order to effectively undertake and promote research, policy development, programming, and coordination activities. A variety of training programmes have been used, <u>inter alia</u>, on-the-job training under full-time international experts and consultants and the provision of practical methodological tools, including microcomputer-based user-friendly software (with training provided for their use), and the provision of administrative and logistical support. Similar efforts have been made in relation to national research institutions.

307. Beyond the considerations presented above, evaluating international progress on the integration of population into development policies and vice versa prove to be as difficult as the task of integrating population and development planning itself. This area of the Plan of Action has received, perhaps, less attention than any of the other areas, in spite of its apparent importance. One reason for the relative lack of attention to the issue of integration is the uncertainty concerning the meaning of the term. Integration may be used to address different concerns, namely those involving (a) the use of demographic data to project the size of various groups likely to demand specific services (school-age child labour, the elderly, and so on); (b) the recognition that policies designed for a given purpose (for example, increased spending on education of females to improve the labour force and raise household incomes) might produce a significant impact on certain population variables (for example, in this case perhaps the lowering of fertility); and (c) the modelling of the

linkages and feedback mechanisms among economic, social and demographic variables when development strategies are being prepared. All of these applications can be found in many sources, although the last-mentioned is the one most appropriate to achievement of the type of integration envisioned by the Plan of Action.

308. In addition to the intellectual difficulty of defining integration, there are also problems encountered in the implementation of population policies. Among those problems, the most common is determining the exact linkages between population and development, and developing techniques for modelling them. Another reason for the lack of attention to this issue, seen as involving a process, is the lack of communication between policy makers and researchers; a constructive dialogue between them would help the identification of options for policy-making and programming decisions. Other key problems are the availability of trained human resources for such sophisticated analyses and the collecting of the necessary data on demographic, economic and social variables. Information from the Population Policy Data Bank indicates that more than half of Governments in the group of developing countries regard the following factors as obstacles to the integration of population variables into the development planning process: lack of appropriate methods for assessing the data they have; inadequacy of data on the linkages between population and development; and lack of trained personnel.

309. Sub-Saharan Africa is likely to remain the priority region for population planning. Population problems (especially rapid population growth, refugee and other migration issues, urbanization and spatial distribution) and their complex interactions with such factors as poverty, underemployment and environmental degradation, and the effective implementation of national population policies, deserve continued attention and support. Most countries in sub-Saharan Africa have weak analytical and planning capacities, and only recently have they begun to recognize that demographic and related factors play a crucial role in the development process, and hence that active intervention policies may be required. Over the past decade or so, a great deal of effort has gone into the establishment of the minimum conditions necessary for integrated planning in those countries. Sensitization and awareness-creation activities formed a major component of the international assistance provided by the United Nations system, with the aim of building a national consensus so that designing public policy could become population-oriented.

310. In contrast to sub-Saharan African countries, many Asian and Latin American countries have already relatively developed analytical and institutional capacities for planning as well as a tradition of intervention in the population field. These are countries where the conditions for effective integrated planning have largely been met. Their needs for technical assistance are more specialized and refer to areas such as sectoral planning, migration and urbanization, incorporation of gender concerns into policy, specific policy advice on such issues as population and the environment, and technical aspects of modelling and the use of advanced software packages. Many of those countries also need assistance for undertaking planning at the subnational level.

311. Many countries in Northern Africa and Western Asia may be placed in between these two groups. They have relatively developed analytical and planning

capacities but, as in the first category, population issues tend to receive inadequate attention in public policy. In these cases, the initial requirement is to create favourable conditions for taking proper account of population factors in human resource development strategies and programmes, for example, through the establishment and strengthening of population units and through sensitization activities.

312. In many countries, mainly outside Africa, population and human resource development policies and activities have often been undertaken in the absence of a comprehensive framework. While such an approach may have the advantage of focusing attention and scarce resources on very specific priorities, it may lead to the neglect of some otherwise important factors or have unanticipated effects. Indeed, efforts have at times been limited to the pursuit of population-influencing strategies, particularly family planning, to the neglect of the equally important population-responsive policies needed in such areas as health, education and employment. A balance must be sought between specificity and comprehensiveness when formulating population policies.

313. The experience gained in the implementation of technical cooperation projects in the area of integration of population into development shows a great diversity in the analytical and planning capacities among regions. Two crucial conditions must be met if integrated population and development planning is to be achieved. The first condition is that a political climate in which population issues are considered to be central to public policy be created. A major step towards the achievement of such political commitment is the organization of sensitization and awareness-creation activities targeted at all levels of opinion formation and decision-making, and reaching down ultimately to the general population. The second crucial condition for effecting integrated population and development planning is that an adequate institutional and technical capacity be created. The experience gained in the past two decades indicates that a major means for succeeding in such integration is the establishment and/or strengthening of the population units mentioned above. Those units should be composed of an adequate number of competent personnel, linked to key policy-making bodies and to other relevant ministries, having access to basic demographic and socio-economic data and to analytical tools and planning methodologies that can be adapted to suit local conditions.

314. Countries that have recently adopted or are in the process of formulating national population policies require substantial assistance in the preparation and implementation of detailed and well-coordinated global and sectoral action plans. Their needs go well beyond technical advice in the formulation of policies and programmes: To make an informed choice between alternative instruments and strategies, planners and decision makers need to have an idea of the level of resources that can be made available, <u>inter alia</u>, for the development and implementation of specific measures and programmes, and for the setting up of coordination, monitoring and evaluation mechanisms. A high degree of commitment to population policy implementation is therefore called for.

315. The information presented above does indicate that there are indeed serious barriers to be overcome in the integration of population variables into the development planning process, but it also points to ways of overcoming those

barriers. Recommendations concerning ways in which the institutions of the United Nations system can help overcome these obstacles include mention of the following: (a) continued support of institutional capacity-building in developing country Governments, including data collection, research and analysis; (b) training programmes targeted at appropriate methods for modelling the linkages among economic, social and demographic factors; (c) further research into the mechanisms through which population and development variables are linked; and (d) policy dialogue in support of (i) the establishment of agencies devoted to the integration of population and development for those countries that do not yet have them, and (ii) the improvement of those agencies in such countries as already have them.

#### Issue No. 25: Management of programmes

316. Achieving self-reliance, by building the capacity of Governments, non-governmental organizations and the private sector to address the population issues of their countries, requires the participation of skilled workers and the establishing of a proper administrative environment. The Plan of Action (para. 81) and particularly the Mexico City recommendations (para. 36 and recommendations 73 and 77) recognize such needs and suggest establishing monitoring and evaluation systems, strengthening administrative and managerial capacity and involving communities more actively. More precisely, the Mexico City International Conference on Population focused on three main specifications for the management of population programmes: (a) management should be strengthened through appropriate training activities; (b) all regional and interregional agencies and national Governments should lend their full support to the management of population programmes and national Governments should seek ways of promoting technical cooperation among developing countries (TCDC) in this respect, paying special attention to training of trainers and emphasizing women's participation in all phases of the process; and (c) awareness-raising should be addressed through special programmes for decision makers, administrators, media communicators and other relevant actors.

317. In the past two decades, efforts to improve the management of population programmes have taken many forms. Those efforts have included reorganizing programme structures; establishing new systems of monitoring and decision-making; improving management training; upgrading service delivery and its support services with a view to enhancing quality of care; and improving logistics and management information systems. International organizations, donors, Governments and non-governmental organizations are making efforts to tailor training activities to meet the specific requirements of programmes. There is also a great opportunity for successful technical cooperation among developing countries in the areas of administering and managing population programmes.

318. These efforts have, in many cases, been constrained by a lack of human, financial and technical resources. Many Governments, for example, need to recruit local programme management personnel for their maternal and child health care and family planning (MCH/FP) programmes among those who although they have already demonstrated their abilities in managing public and/or private sector programmes in other areas, do not have prior experience in MCH/FP activities.

319. Although there has been some progress in integrating gender concerns in programme planning and programme management, much more needs to be done to ensure the full incorporation of gender issues into population programmes. Many programmes in the area of MCH/FP, as well as in information, education and communication, that are generally addressed mainly to women, have been found to be seriously wanting because the specific needs of women were not considered in project design and implementation. Women are rarely consulted or asked to participate in needs identification, programme development and management and decision-making.

320. Management of family planning programmes, already difficult in many countries, is often made more so by a lack of adequate managerial training. Although women constitute the majority of health-care providers in many societies, they seldom occupy managerial-level positions in the health and family planning system. There is a particular need for women-centred and women-managed facilities to ensure that their MCH/FP needs are taken fully into consideration. Furthermore, developing countries should pass legislation to enhance the legal status of women with a view to enabling women to contribute more directly in decision-making processes.

321. The area of training has been signalled as a major concern. In many cases, national project personnel, although given responsibility for a wide variety of tasks, has received little management training. Top managers often still lack specialized management skills and training. Rapid changes in management and administrative technology have, in some cases, fostered a dependence on foreign experts. The management of population programmes continues to demand recruitment of good managers and the development of managerial skills through well-planned training. The aim should be to maintain and expand a critical mass of high-level administrators of population programmes.

322. Responding to this need, training programmes have been designed to strengthen the management capabilities of family planning organizations, with particular emphasis on improving quality and access to services. While some progress has been made in inserting appropriate public administration and management components into the training of some population specialists and some skills in this area are being built among population scientists, the inclusion of relevant population themes in the curricula of public administration and management programmes remains unattended to. Without such expertise and conviction on the part of public administrators, population concerns will continue to remain restricted to academic circles only. Therefore, special curricula focusing on population issues designed to meet the needs of public administrators and managers should be urgently developed. In designing such programmes special attention should be paid to the multisectoral nature of population topics.

323. Another area where action has been slow is the assessment of the actual managerial needs of population programmes. It is not enough to emphasize substantive and academic skills as the basis for further programme development and enhancement; due attention must be paid to the basics of how actually to run programmes in a more effective fashion, be they academic or professional.

324. In the area of data collection and analysis, many developing countries have reached some form of self-reliance. However, what needs to be strengthened further is the managerial components of the dissemination of data and the results of analyses and the promotion of data-user services. Regarding the incorporation of population elements in national and sectoral development plans and programmes, while many Governments have become increasingly aware of those elements, methodologies, tools and measures are still lacking and, where they exist, are weak. Hence, further work in this area is critical.

325. One of the most important issues facing managers and administrators is the expansion and improvement of family planning services. Countries with a high success rate in expanding the accessibility and reach of their delivery systems have been successful largely by improving contraceptive logistics and utilizing private-sector efficiency at local and national levels, although the importance of the private sector varies considerably among relatively successful programmes in different regions. Experience has shown that even minimum strategic interventions on a broad scale will most likely lead to the success of country population programmes when they are accompanied by improvements in the quality of services and increased community participation. In the case of family planning, strategic management should aim at a better distribution of a broad range of contraceptive methods, the monitoring of contraception continuation rates, a maintaining of the quality of client-oriented services, and the promoting of women to senior management positions. There is also a growing recognition that sustained political commitment and cooperation among all relevant governmental and non-governmental personnel and institutions are key components in managing population programmes.

326. The inadequate development or use of MIS has been identified as an important obstacle to effective management of national population programmes, particularly MCH/FP programmes, around the world. Several programmatic and managerial issues regarding MIS in support of MCH/FP programmes were identified during the UNFPA diagnostic surveys conducted in Africa, Asia and Latin America and the Caribbean in 1989. Those issues included, among others, lack of focus on management-related indicators; lack of feedback to local levels; lack of accuracy and timeliness of information; and the shortage of trained personnel for interpreting and analysing MIS data for planning and management of family planning programmes.

327. Attempts to improve MIS in the area of family planning have included efforts to simplify existing systems so that they provide accurate and timely information and to provide training for management, supervisory and service personnel in the correct production and use of information. The challenge in the coming years will be to develop and implement inexpensive and easy-to-use MIS for monitoring the quality and quantity of programme performance and impact.

328. Another managerial problem that is common in some countries is the lack of organizational clarity concerning which government bodies have responsibility for population programmes. Such imprecision has adversely affected the administration and management of population programmes. Many programmes are also faced with problems in internal management, field and client relations, relations with other sectors of the Government, and proper management of political linkages with international agencies.

329. Improving the quality of services has become a major concern in the management of programmes. The target-oriented approach of many family planning programmes in the past has contributed to several problems: high discontinuation rates; excessive reliance on non-reversible contraceptive methods; persistence of high rates of induced abortion; and, in some cases, an unfavourable sex ratio due to son preference. In the 1990s attention has turned away from the target-oriented to the quality-oriented approach in family planning services. Recent studies have shown that where management offered a genuine choice of methods, with good information and counselling, there were fewer drop-outs and more satisfied users. The consensus is that satisfied users are not only the key to high continuation rates but also the most effective promoters of family planning. Programme managers should therefore make continuous strategic improvements in the quality of care because such improvements will not only help users to achieve their reproductive goals but simultaneously will also promote higher contraceptive prevalence and, more important, lead to reductions in fertility. Managing and improving quality services will require a genuine commitment among all levels of management to offering services of high quality and to striving for a better understanding of clients' needs and preferences.

330. UNFPA has, in recent years, given serious attention to improving not only its management strategies for field operations, but also its own internal management. The Governing Council of UNDP noted that by 1990 several steps had been taken to strengthen UNFPA's programme management capability: an improvement in the procedures for the recruitment of staff; rotation of staff between the field and headquarters; greater emphasis on confidence-building within the organization; and the increased decentralization of decision-making to the field. UNFPA's leadership has also taken steps to expand technical support at the regional level through the Technical Support System (TSS) and by improving strategic planning in country programmes through the already-mentioned Programme Review and Strategy Development country missions. Such innovations have significant potential to increase the effectiveness of country-level operations.

331. In conclusion, the present review found that good management was a key factor in determining the success or failure of population programmes. To improve the managerial capacities of countries with respect to operating their population programmes, particular attention should be given to improving the quality of their human resources; establishing/strengthening their MIS; reorienting their programmes towards a more client-oriented approach; and involving their communities more extensively in the planning and implementation of programmes. In the area of family planning programmes, particular attention should continue to be given to a large variety of tasks such as improving availability and accessibility by providing contraceptive services that are close to the people, convenient, of low cost and high quality, and culturally acceptable; providing varied approaches for different target groups; providing a broad range of contraceptive methods; utilizing appropriate information, education and communication programmes; and monitoring and evaluating all programme components on a timely basis.

### Issue No. 26: Achieving self-reliance

332. As mentioned above, both in the Plan of Action and in the Mexico City recommendations explicit recognition is given to the vital role of independent, sovereign, national action in the population field. At the same time, it is also recognized that many impediments could face national decision makers in this area, including administrative and managerial weakness; a shortage of the necessary human and capital resources necessary for effective population programme implementation; inadequate monitoring and evaluation systems to provide decision makers with appropriate feedback in order to devise more effective approaches; and lack of adequate mechanisms to ensure that international assistance is provided under arrangements and on conditions that are adapted to the administrative resources of the recipient country (recommendation 77 (c)).

333. The goal of achieving self-reliance has been in the agenda of major population and development meetings. In addition to the calls made at Bucharest in 1974 and at Mexico City 10 years later, there have been similar ones at many other gatherings. In 1984, for example, African Governments in the Kilimanjaro Programme of Action, 78/ proposed accelerating self-reliant, social and economic development for the well-being of African peoples. In 1992, the African Governments noted that despite the increased number of explicit population policies formulated in the continent, the implementation rate of the Kilimanjaro Programme of Action had remained low and reiterated a similar call for self-reliance in the draft Dakar/Ngor Declaration on Population, Family and Sustainable Development.  $\underline{79}$ / Similar proposals were made by other regional meetings. More recently, the Tenth Conference of Heads of State and Government of the Non-Aligned Movement (Jakarta, Indonesia, September 1992) called for an early ministerial meeting on population of the Non-Aligned Movement. Such a meeting took place in 1993 and considered (a) the intensification of exchange of information regarding member countries' experience with population policies and family planning programmes; (b) the organization of South-South technical cooperation and assistance agreements with respect to education and awarenessraising activities, safe motherhood and family planning programmes; and (c) the establishment of joint cooperation for the production of medical supplies required in programmes. 80/

334. In regard to political commitment, countries with strong population policies have typically been able to mobilize sustained commitment not only at the highest level but down to local leaders at the grass-roots level as well. Strong political support should be maintained and followed up by action. There is also a growing realization that population policies will not be successful and sustainable unless the beneficiaries, especially women, are fully involved in their design and subsequent implementation. The reviews of progress in these areas, carried out in 1984 and 1989, revealed that while significant progress had been made in achieving self-reliance, particularly in countries where there was a strong governmental commitment, in many other developing countries the common responsible factor was the lack of adequate resources.

335. The role of institutions is also crucial in promoting self-reliance in managing population programmes. A significant number of Governments throughout the developing world, as mentioned above, have established population

commissions, councils and units. Despite the widespread establishment of those entities, many issues still need to be dealt with. One of the most important is clarifying the mode of interaction between the population unit and sectoral ministries. Increasingly, the recognition that sound institution-building should be multisectoral, broad-based and extended to the district level has been growing.

336. As noted above, a foundation for national self-reliance in population programming has been established in many countries. In most cases, however, it is a bare beginning and much more needs to be done to better set up and institutionalize national capacity for population programme implementation. The growing collaboration between governmental, non-governmental and regional organizations, the renewed emphasis on people's participation at the community level and the mainstreaming of the role of women in development are all efforts that should be continued.

337. To achieve self-reliance and the integration of population and development planning, there must be a network of local capabilities in the collection, research and analysis of data on the interrelationships among population and development, policy formulation and programme development. Multilateral and bilateral agencies have continued to assist in the development of a continuing and national self-reliant capacity to collect, analyse, use and disseminate population-related data. Those efforts have been aimed at enhancing national capacity and self-reliance in formulating, implementing, monitoring and evaluating population policies and programmes. A welcome contribution in this direction has been the devising of the Programme Review and Strategy Development missions by UNFPA, which aim at the establishment of a concrete strategic framework for a country's population programme on the basis of an in-depth review of the achievements of and the constraints in current population activities and the needs for future action. The thrust of such programming is to assist countries in identifying their requirements in order for them to be self-reliant in the formulation, implementation and management of their population policies and programmes.

338. Efforts to better orchestrate and coordinate international assistance have also been strengthened by UNFPA's policy guidelines on national execution. Such efforts are in accord with recent provisions made by the General Assembly that emphasize, inter alia, the need to ensure maximum utilization of national capacity through, in particular, government/national execution of projects, a more programme-oriented approach and regular and timely provision of technical advice and backstopping by agencies at the country level. 81/ The above provisions led UNFPA to review and expand its technical activities through the new Technical Support System (TSS), and to prepare major revisions of the terms of collaboration between UNFPA and other United Nations agencies and non-governmental organizations. Under this revised strategy, considering that the emphasis was to be placed increasingly on the execution of programmes by the Governments themselves, what was sought was to combine such a trend with substantive support to be provided by multidisciplinary teams of specialists, whose location would be at subregional centres in all five major areas of the developing world, bolstered by a thinner layer of agency state-of-the-art specialists located in their respective headquarters. To date, for the activities sponsored by UNFPA, the estimated proportion of projects executed

directly by the Governments themselves (execution ratio) for 1993 is 31 per cent, as compared with 25.7 per cent and 20.9 per cent in 1991 and 1992, respectively.

339. As part of its effort to enhance the operational activities of the United Nations system by encouraging greater coordination at the country level, the General Assembly adopted its resolution 47/199. A central aspect of enhanced coordination will be the Country Strategy Note (CSN) in the elaboration of which developmental bodies of the United Nations, including UNFPA, will participate. It is expected that CSN will focus on areas where the United Nations system can make a significant difference in a concerted team effort.

340. Information from the Population Policy Data Bank indicates that the majority of countries that have expressed the need for assistance in the field of population during the next decade, have mentioned the area of training in population as a means of achieving self-reliance. Similar findings have been gathered by UNFPA through a number of assessments in the area of training. In fact, the ability of national Governments to achieve self-reliance in managing their population programmes is often constrained by inadequate and insufficient attention to human resource development. This has resulted in weak mechanisms for supervision and control, and insufficient attention to staff development and training.

341. With the increased awareness that human resources development is critical for promoting and enhancing national self-reliance, a growing number of Governments, with the assistance of international agencies and donor organizations, have been giving priority to training issues, especially those relating to the development of administrative capabilities in the population field. Human resource development calls for dynamic partnerships, employing multidisciplinary approaches, among teaching, training and research institutions in academic environments, as well as among governmental, semi-public and community-level agencies involved in planning and policy formulation. It seems reasonably clear that Governments are becoming increasingly self-reliant at the higher professional levels of the population field, hence the lower overall demand for resident United Nations technical advisers. At the same time, however, the emphasis that continues to be placed on training activities of all kinds, including institution-building and development of permanent in-country training capacities, suggests that the goal of becoming entirely self-reliant in this area is far from having been attained in many countries.

342. On the basis of the experience gained, it can be concluded that future demands for international assistance will be expressed particularly in the area of training, including the institutionalization of certain training functions within the developing countries themselves. New linkages need to be fostered between academic training/research institutions and government agencies mandated to deal with development planning and population policies and programmes. One particularly important area that requires further attention is training in management itself. Experience has shown that short-term intensive training in this area can be most effective, and some expertise already exists in the specific field of management for population specialists. Much more remains to be done, however, and it is therefore recommended that future efforts be concentrated in this area, as well as in the general areas mentioned above.

343. The importance of coordination of population activities has been stressed in the Plan of Action and in the Mexico City recommendations, as well as at recent gatherings such as the Amsterdam International Forum on Population and the Development Assistance Committee meeting on population. There is a broad consensus among national Governments and donor agencies regarding the development of a mechanism for coordinating all international assistance in the field of population. In some cases, the lack of coordination of project activities has not only hindered the design and fulfilment of population policies at national and local levels but also duplicated programme efforts and wasted resources. The growing realization that collaboration and coordination at both national and international levels could play a critical role in strengthening national capability in managing population policies and programmes has encouraged some agencies to coordinate their programme efforts with those of Governments and other donors. To facilitate and enhance efforts in this direction, Governments and agencies would need to stipulate clearly the terms and conditions for assistance adapted to each country's situation and resources.

344. In their efforts to achieve self-reliance in mobilizing and managing resources for population programmes, Governments have increasingly been focusing attention on such management efficiency issues as decentralization and accountability. The decentralization of the delivery of services for population programmes and the participation of local communities, and non-governmental and private-sector organizations in all population areas have been gaining momentum. Additionally, many national and local institutions have demonstrated that they can be efficient executing agents in cost-sharing and cost-recovery schemes, particularly when they have reliable accounting, recording, reporting and auditing systems together with strong managerial capabilities.

345. Experience over the past two decades with regard to family planning programmes has shown that good-quality service, with sound management support systems and innovative public education efforts, could produce very rapid changes in reproductive behaviour in different socio-economic and cultural settings. In addition, there is a growing realization of the urgent need to extend quality services to underserved areas, since people will use them if they are available. In their efforts to combine easy access, privacy, and highquality services and products with affordability, developing countries have tried a number of initiatives. Some of the most successful recent initiatives include community-based distribution and social marketing programmes. Currently, contraceptive social marketing programmes are in place in many developing countries and some have achieved complete self-sufficiency.

346. The growing scarcity of financial resources for population programmes in developing countries has given rise to the implementation of more market-oriented strategies for contraceptive mix, service quality and cost-recovery, all aimed at cutting costs. There is agreement that closer coordination between health and family planning services and the giving of higher priority to the strengthening of family planning services within existing health facilities could contribute to more cost-effective and efficient use of scarce financial and human resources. Increasingly, family planning is being coupled to maternal and child health services and even to primary health-care packages. Other efficient measures include linking family planning to

agricultural extension programmes, industrial work settings, social work programmes and community participation.

347. The present review of the level of implementation of the Plan of Action indicates that although the goal of population and development assistance is to foster self-reliance, in economically strapped developing nations the risk of project activities' coming to a halt upon cessation of external funding is great. Without external assistance, some Governments can barely continue much less expand population programmes. Moreover, attempts in most countries to redefine the role of the state by transferring Government-owned enterprises to the private sector and the decentralization of decision-making are factors that could continue to affect the thrust and direction of population policies and programmes and, concomitantly, their sustainability and self-sufficiency.

348. National self-reliance, the ultimate objective of technical assistance, demands that in the long run, both the financial and the human resources required for population programmes should come from domestic resources. There is no simple formula that applies equally to every country. However, the following elements need to be present: strong political commitment; strategic planning; and strong institutional and, in particular, managerial capabilities to plan, implement and coordinate population programmes. The involvement of women in all stages of planning and execution of programmes is also fundamental. Increasingly, there is recognition of the need not only to meet the existing demand for family planning but also to increase it by reaching new and neglected groups, especially teenagers and men. Experience has shown that efforts to meet existing demand with sensitive and varied programmes have helped to create new demand. In keeping with this recognition, Governments should set clear population objectives, establish targets and plans, and ensure that adequate budgetary allocations are made for family planning and complementary socio-economic programmes that are in accord with those objectives. Governments should also direct their efforts to generating and mobilizing particularly their own resources in order to implement such objectives in an efficient and timely manner, and to giving high priority to sensitive gender concerns in education, economic participation, reproductive decisions and health.

### XIII. INTERNATIONAL COOPERATION

349. International cooperation is increasingly perceived as essential to the achievement of long-term planetary security. The modern expression "technical cooperation" has almost completely replaced the old term "technical assistance". This has been the result of recognizing that development activities need the participation of many actors on an equal footing, with the recipient country, the donor community and the provider of technical assistance perceived as partners in the same enterprise. Technical cooperation and financial assistance have played a crucial role in promoting and supporting population programmes in the developing countries, and the Plan of Action recognizes this role in achieving its goals and objectives (para. 100). The Plan of Action also invites countries to share their experiences, and urges developed countries to increase their assistance to developing countries and the United Nations system to ensure a proper response to the issues raised in the Plan of Action (paras. 101, 102 and 104). The present chapter concentrates on two particular issues: the priority areas for technical cooperation, and the strengthening of the population programme of the United Nations system.

## Issue No. 27: Priority areas for international cooperation

350. The preceding sections of the present report have illustrated some of the many positive developments that have taken place since the adoption of the World Population Plan of Action in 1974. Many of those developments have been possible because of the recognition accorded to population as an important sector of international cooperation by national Governments and the international community. Developing countries have made significant progress in formulating population policies and programmes. However, economic recession, rising debt burdens and misplaced priorities, occurring simultaneously with those remarkable achievements, have limited, and in many countries reduced, the availability of funds hitherto programmed for population assistance. During the period under review, the need for technical cooperation in population enlarged significantly. Although the amount of financial assistance has increased over the intervening years, the gap between needs and resources has not been reduced significantly. Three major sources have been consulted to prepare this chapter: the Plan of Action and the recommendations for its further implementation; the identification of priority areas for assistance by the Governments themselves; and the experience gained by multilateral organizations in undertaking programmes of technical cooperation.

#### Priorities according to the Plan of Action

351. The Plan of Action offers a series of recommendations for implementation, such as the respect of national sovereignty, the value of sharing mutual experiences, the need to increase assistance to developing countries, and the role to be played by the United Nations system and by non-governmental organizations, and singles out the area of training in the field of population for special attention (paras. 100-106). The Mexico City recommendations, building upon the provisions of the Plan of Action, are more specific and place special emphasis on a number of areas such as integration of population factors into development planning; improvement of the status and participation of women;

collection and analysis of data; biomedical and social research; identification of successful programmes and dissemination of such findings; and implementation of monitoring and evaluation systems, as well as training (recommendation 81).

352. The Economic and Social Council studied the findings of the third review and appraisal of the Plan of Action in 1989 and recommended that the Governments concerned and the international community should give the highest priority to assisting the population programmes of the least developed countries that had large populations and high rates of population growth, in particular those in sub-Saharan Africa. <u>82</u>/

#### Priorities according to national Governments

353. Information from the Population Policy Data Bank indicates that an overwhelming majority - 9 out of 10 developing countries - consider that they will need the support of international technical cooperation at least for another decade. The programme areas that have been identified by Governments as of the highest priority are information on population dynamics, followed by population policy formulation, data collection and processing, and family planning programmes. In spite of the high level of concern expressed by Governments on many occasions on issues related to population redistribution, technical cooperation programmes have been signalled as having the lowest priority or no priority at all. <u>83</u>/ Undependable funding or reduced levels of funding, as well as slowness in implementation, have been identified by Governments of countries receiving financial assistance as the two major difficulties confronted.

354. Pertaining to the priorities given to the different specific components of current and future technical cooperation, computer equipment and software, as well as in-service and short-term training programmes, have been the elements receiving the highest preferences in individual ranking by national Governments; the lowest priority has been given to the provision of resident experts.

355. In relation to the technical cooperation programmes among developing countries, it should be mentioned that the experience during the period under consideration has been limited particularly because of the lack of available resources for such a purpose. Nevertheless, many Governments have indicated that in the field of population, such technical cooperation has an important potential for fostering a stronger political commitment to the solution of population issues and facilitating the exchange of similar experiences under similar conditions.

## Priorities according to the multilateral organizations

356. It is important to take into account that many activities included in the Plan of Action that receive the support of the international community are not classified as population assistance but appear under other labels; this is the case, for example, of technical cooperation to reduce mortality which usually appears as health assistance. Financial assistance for technical cooperation activities in the field of population flows from the donor community (Governments from developed countries and private sources, principally foundations) to the recipients (developing countries and national

non-governmental organizations) through three major channels: bilateral, multilateral, and private sector. According to information on expenditures for population assistance compiled by UNFPA (which includes data from 17 donor countries that are members of the Development Assistance Committee of OECD, 9 multilateral organizations of the United Nations system and 37 international non-governmental organizations), in 1991 there were 141 countries that benefited from financial population assistance. During the same year, those 141 countries expended US\$ 732 million (39 per cent was channelled through bilateral, 34 per cent through multilateral and 27 per cent through non-governmental organizations). <u>84</u>/ Data from table 15 indicate an absolute increase in funds during the period 1982-1991, a proportional increase in bilateral funds, a relative decline in multilateral funds and relative proportional stability of non-governmental resources.

357. According to the same source of information, during the period 1982-1991, the commitments made by donor countries to the field of population assistance evolved from 1.12 per cent of their official development assistance in 1982 to 1.34 per cent in 1991 (the highest value during the period 1982-1991, although the corresponding figure in the early 1970s was 2 per cent). The corresponding values of those commitments as a proportion of gross national product devoted to population assistance were 0.0071 and 0.0092 per cent respectively. Such assistance in population represented US\$ 0.18 per capita in 1991 as compared with US\$ 0.134 per capita in 1982 (both figures in constant 1985 United States dollars).  $\frac{85}{}$ 

358. It is very difficult to find complete information on the distribution of commitments or expenditures by programme area for all sources or channels of financial assistance. UNFPA started in 1985 a biannual compilation of such data for all sources of population assistance. Table 16 presents the amount of donor expenditures by programme area, using the Standard Classification of Population Activities that has been adopted by ACC and employed by UNFPA since 1976. Table 17 shows UNFPA's expenditures by programme distribution; the figures are part of total donor expenditures. The distribution by programme area provides an indication of the priorities established by UNFPA and the donor community. In both cases, family planning activities accounted for a high proportion of population assistance (with a tendency towards increase among the total donor community during the period under consideration); communication and education accounted for the second highest proportion in 1991, reflecting a trend towards expansion. The proportion of assistance for basic data collection, on the other hand, tended to decrease proportionally during the period, particularly at UNFPA; the trend was due to increased national investment in this area and the dependency of such expenditures on the cycles of census activity.

Table 15. Expenditures for population assistance by channel of distribution, 1982-1991  $\underline{a}/$ 

Channel of distribution	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991
				Thous	ands of cur	Thousands of current US dollars	llars			
Bilateral	101 587	98 565	134 383	161 406	129 336	145 297	163 330	208 437	231 325	286 487
					Percentage	e of total				
	28	28	32	34	36	36	29	40	38	39
				Thous	ands of cur	Thousands of current US dollars	llars			
Multilateral $\underline{b}$ /	153 897	153 267	171 878	182 641	105 070	112 129	161 755	142 822	169 646	249 376
					Percentage	Percentage of total				
	42	43	40	39	30	28	29	28	28	34
				Thous	Thousands of cur	current US dollars	llars			
NGOS C/	111 761	100 933	118 936	125 170	121 022	149 813	242 029	165 813	200 822	196 022
					Percentage	e of total				
	30	29	28	27	34	37	43	32	33	27
				Thous	ands of cur	Thousands of current US dollars	llars			
Total <u>d</u> /	367 246	352 766	425 198	469 216	355 427	407 241	567 113	517 072	601 794	731 885
Source: UNFPA, <u>Global Population Assistance Report, 1982-1991</u> (New York, United Nations Population Fund, 1993), table 4.	A, <u>Global P</u> c	opulation A	ssistance Re	eport, 1982	-1991 (New	York, Unite	d Nations P	opulation F	und, 1993),	p. 18,
$\frac{a}{a}$ The administrativin the expenditure figures		e costs entail shown.	ed in the p	rovision of	assistance	e were not a	scertained	and may or	may not be	included
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 $\frac{b}{b}$  The multilateral category does not include the World Bank, as the Bank's expenditure data for population activities were not available to the survey.

Non-governmental organizations. <u>o</u>

Figures may not add up to totals and percentages may not add up to 100 per cent owing to rounding.

	Programme area	1982	1985	1989	1990		
1.	Basic data collection	6.1	2.9	5.1	4.1		
2.	Population dynamics	5.3	4.6	5.3	5.8		
3.	Policy formulation/evaluation	3.1	3.0	3.3	4.9		
4.	Policy implementation	0.3	0.4	0.5	0.1		
5.	Family planning programmes	59.3	64.0	69.7	59.5		
б.	Communication and education	5.4	б.5	13.2	14.5		
7.	Special programmes	1.2	1.2	1.6	3.2		
8.	Multisector	5.8	5.0	0.3	6.3		
9.	Not specified	13.5	12.4	1.0	1.7		
	Total	100.0	100.0	100.0	100.0		
		Total expenditure in millions of US dollars					
		376.7	483.2	510.3	590.1		

Table 16. Total donor expenditures by programme area, 1982-1990

(Percentage)

Sources: UNFPA, Global Population Assistance Report, 1982-1985 (New York, UNFPA, 1988), table 5; Global Population Assistance Report, 1982-1989 (New York, UNFPA, 1991), table A; and unpublished data provided by UNFPA.

## Table 17. UNFPA's expenditures by programme area, 1975-1991

	Programme area	1975	1982	1985	1989	1991	
1.	Basic data collection	20.1	17.3	7.5	11.6	9.1	
2.	Population dynamics	5.9	12.0	11.0	12.9	11.7	
3.	Policy formulation/evaluation	4.7	6.9	6.1	7.7	9.2	
4.	Policy implementation	0.0	0.8	0.5	0.1	0.1	
5.	Family planning programmes	48.3	39.9	50.4	44.7	43.7	
6.	Communication and education	11.0	10.9	13.4	16.9	17.0	
7.	Special programmes	2.1	1.2	1.1	3.6	6.0	
8.	Multisector	7.9	11.0	10.0	2.5	3.1	
	Total	100.0	100.0	100.0	100.0	100.0	
		Total expenditure in millions of US dollars					
		61.4	104.9	128.2	157.4	171.8	

(Percentage)

<u>Sources</u>: UNFPA, <u>Report on the Monitoring of Multilateral Population</u> <u>Assistance</u> (New York, UNFPA, 1989), table 4; and UNFPA's annual reports for 1990 and 1992.

359. UNFPA was directed by the UNDP Governing Council to allocate 80 per cent of its annual country programme resources to priority countries by 1994. Priority countries qualify for priority status if they first meet a gross national product per capita requirement, then fall within established threshold levels for two of the following five criteria: absolute annual population increase; infant mortality; fertility; female literacy; and agricultural population per hectare of arable land. This assures that UNFPA concentrates its assistance on activities in countries most in need of support. This strategy also assures that UNFPA support to national programmes is consistent over time yet flexible enough to meet changing population programme needs, which are assessed by UNFPA with independence from external political considerations.

360. It is important to acknowledge again some of the major achievements in the field of technical cooperation during the past two decades. Among them was the recognition, among the donor community and Governments in the developing countries, that population was an important component of the development equation, and that technical cooperation was a key complement to national efforts but never a substitute for them. The donor community has been respectful of the sovereign right of countries to define their national population programmes and the neutrality exhibited by multilateral assistance has been highly appreciated by developing countries. Technical cooperation

activities have been better employed by countries having a strong political commitment and institutional support, including the competence to coordinate such assistance, as well as the appropriate provision of local human and budgetary resources. Many examples illustrate that technical cooperation was rendered more productive where national Governments worked in strong partnership with the private sector, community organizations and other grass-roots non-governmental organizations.

361. To meet future needs, just in the area of human reproduction, additional resources are required for expanding services to respond to the unmet demand for family planning, and particularly for creating the social and economic conditions that are more conducive to reducing the demand for additional children. However, under the present situation of tight budgets and shrinking foreign assistance, it is also essential that those resources be used effectively. Adequately estimating resource requirements and planning their effective utilization require accounting for a variety of programme elements, in terms of what they will contribute to the satisfaction of unmet needs and what they will cost. Among the best strategies for mobilizing resources for expansion of services and for utilizing those resources effectively will be those that build on the growing stock of information on unmet needs and so expand the concept of unmet need as to address issues of improving service quality and outreach to currently underserved groups. It is important to take into account that the future expansion of services should satisfy both current unmet needs and the future demand generated by the improvement in the quality of current services and the adoption of better strategies. Indeed, the pressures of increased numbers to be served, combined with the budget squeezes in which many developing countries now find themselves, could erode service quality and further swell the pool of the underserved.

362. Increased funding is fundamental to the response; but even more so are careful assessments of resource requirements that are convincing to those who control the allocation of scarce budgetary and development assistance funding. The Amsterdam Declaration of 1989 called for a doubling of the level of annual global funding of population and reproductive health programmes in the developing countries, from US\$ 4.5 billion to US\$ 9 billion by the end of the 1990s. Some progress has been made in moving towards this goal, but it is still far from clear that it will be reached. Future technical cooperation is crucial for achieving the population goals and objectives agreed upon by the international community. Such future financial assistance is currently estimated to represent about one third of the total cost of the major components of population programmes in the developing countries.

363. In the context of the preparatory activities for the 1994 International Conference on Population and Development, it has been estimated that the total annual cost of four basic packages of population activities would be (in 1993 United States dollars) US\$ 13.2 billion in the year 2000 and US\$ 17.0 billion in 2015, decomposed as follows:

(a) A core package composed of family planning commodities and service delivery; many components of primary health care and maternal and child health; information, education and communication activities; family planning training;

and management information activities. Cost: US\$ 10.2 billion in the year 2000 and US\$ 13.8 billion in 2015;

(b) An expanded package for reproductive health care going beyond the usual components of family planning programmes but still feasible in the context of primary health care: education and services for prenatal, normal delivery and postnatal care; prevention and treatment of reproductive health conditions, including infertility; information, education and counselling on human sexuality, sexual and reproductive health, and responsible parenthood; and referral of sexually transmitted diseases and HIV/AIDS. Cost: US\$ 1.2 billion in the year 2000 and US\$ 1.4 billion in 2015;

(c) A third package of activities for the prevention of sexually transmitted diseases (including HIV infection) consisting of mass media and school education programmes and expanded condom distribution. Cost: US\$ 1.3 billion in the year 2000 and US\$ 1.5 billion in 2015;

(d) A fourth package of activities that include population data collection, analysis and dissemination, and policy formulation. Cost: US\$ 220-670 million per annum (depending on the decennial population census cycle).

## Issue No. 28: Strengthening the population programme of the United Nations system

364. Since its inception, the United Nations has been involved in a variety of population actions. During the past two decades, more than 20 units, bodies and organizations of the United Nations system have been carrying out activities that include, <u>inter alia</u>, data collection, research and analysis, dissemination of information, training, provision of technical cooperation and financial assistance, and monitoring and evaluation of projects and programmes. Such activities are coordinated by the Economic and Social Council and for this purpose, the Council is advised by the Population Commission. The Population Commission was established in 1946 and its terms of reference remained almost unchanged until the 1974 World Population Conference, when the Council requested the Commission to examine on a biennial basis the implementation of the Plan of Action and to contribute to its quinquennial review and appraisal. After the 1984 International Conference on Population, the Council reaffirmed the role of the Commission as the principal intergovernmental body to arrange for studies and advise the Council on population matters. <u>86</u>/

## Population activities of the United Nations system

365. Within the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat, there are two important units: the Population Division and the Statistical Division. The Population Division, which is the technical secretariat of the Population Commission, is in charge of monitoring world population trends and policies through the study of mortality, fertility, internal and international migration and urbanization, and other demographic phenomena, as well as of coordinating the quinquennial review and appraisal of the progress made in achieving the goals and objectives of the Plan

of Action. It also estimates and projects population size and structure, examines the relationships among population change, resources, the environment and socio-economic development, participates in technical cooperation activities, and houses the coordinating unit of the global Population Information Network (POPIN) mentioned in para. 243 above. The Statistical Division, which is the technical secretariat of the Statistical Commission, collects, compiles and disseminates demographic statistics produced by Governments; it also prepares handbooks and technical studies, and participates in technical cooperation activities.

366. A trust fund for population activities was established in July 1967 by the Secretary-General; two years later, it was renamed the United Nations Fund for Population Activities (UNFPA) and was put under the administration UNDP. At present, the Fund supports population programmes in 137 countries and territories and has field offices, each headed by a country director, in 58 of them. Assistance at the country level is being provided, in most cases, as part of a country programme that defines the objectives and strategy for UNFPA assistance in the framework of national population and development objectives. Those country programmes, which used to be based on a "needs assessment" exercise, have been developed since 1988 on the basis of a Programme Review and Strategy Development (PRSD) exercise. UNFPA also funds regional and interregional activities and services that supplement and complement activities at the country level. For example, the Fund extends technical assistance and advisory services to country programmes through its recently established Country Support Teams (CSTs) system. That system, which became operational in 1992, comprises eight multidisciplinary teams located in the developing regions. Participating in the CSTs system are the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat, the regional commissions, ILO, FAO, UNESCO, WHO and non-governmental organizations.

367. Each of the five regional commissions has a population unit whose programme of work includes research and analysis, dissemination of information and, in some cases, also technical cooperation. The specific contents vary according to the characteristics of each region and are supervised by the corresponding regional intergovernmental body. Some of the regions have adopted regional programmes or plans of action that are reviewed every 10 years and may be conceived as the regional variants of the World Population Plan of Action.

368. Other programmes and bodies of the United Nations include in their programmes of work population-related activities. The United Nations Centre for Human Settlements (Habitat) assists countries in some actions that have implications for the distribution of population over the territory concerned. UNICEF cooperates with countries in their activities pertaining to the protection of children and participates in family planning actions that are part of maternal and child health programmes. The United Nations Conference on Trade and Development (UNCTAD) includes in its programme of work activities related to the situation of migrant workers and other population matters related to international trade. UNEP has been involved in research and analysis on the relationships among population, resources and the environment. After the 1992 United Nations Conference on Environment and Development, it was planned that UNEP and the Department for Policy Coordination and Sustainable Development of the United Nations Secretariat would strengthen their efforts in this area.

UNHCR is in charge of providing protection to refugees, finding durable solutions to their problems and dispensing assistance towards self-sufficiency and emergency relief. Finally, the World Food Programme (WFP), in addition to its many activities that have a clear impact on morbidity and mortality levels, has many programmes that include components affecting fertility or migration patterns.

369. Some of the specialized agencies undertake population activities and their work is coordinated by the Economic and Social Council. Their activities include, in general, research and analysis, technical cooperation, and dissemination of information. ILO conducts research on the demographic aspects of employment and social security, provides information on family planning and other population-related matters, and assists Governments in formulating/implementing their population policies, as well as in establishing their population units. FAO provides advice and technical assistance to countries on matters related to rural populations; its programme of work also includes research and analysis, and population education and communication aimed at creating awareness. UNESCO concentrates its work on the creation of awareness about population issues and assists countries in their population information, education and communication programmes. WHO assists countries in the provision of family planning within maternal and child health-care systems, education and training for health workers, research and training in human reproduction, development of technologies in maternal and child health care, and promotion of breast-feeding and the use of appropriate weaning foods and nutrition programmes. The United Nations Industrial Development Organization (UNIDO) has in its programme of work activities related to population, such as the local production of contraceptives. Finally, the World Bank provides financial assistance in the field of population, directly or through its concessional lending affiliate, the International Development Association (IDA), in the form of credits and loans to borrowers. The Bank also conducts research in and analysis of population and economic conditions at the global level and in those developing countries in which population and development are matters of concern.

#### <u>Coordination</u>

370. There are various mechanisms that ensure the harmonization, cooperation and coordination of population activities within the United Nations system. The Committee for Programme and Coordination (CPC), a standing committee of the Economic and Social Council, and the principal subsidiary body dealing with matters related to planning, programming and coordination, assists both the Council and the General Assembly in their sector-by-sector examination of the programme of work of the United Nations to guarantee the harmonization and complementarity of the different activities. CPC also proposes guidelines and recommends actions to appropriate units and organizations on their programmes of work and carries out assessments of legislative decisions on matters pertaining to coordination of activities. Population is one of the topics that has been included in the programme of work of CPC. After the 1984 International Conference on Population (Mexico City), it was agreed that relevant portions of the report of UNDP's Governing Council (the same body overseeing UNFPA's programme) should be made available to the Population Commission and vice versa.

371. ACC was established in 1947 as an inter-agency structure to ensure harmonization, cooperation and coordination within the United Nations system. It is composed of the executive heads of the agencies, programmes and organs of the system and is chaired by the Secretary-General himself. An ACC Subcommittee on Population functioned between 1968 and 1977 as an inter-agency coordinating entity but was abolished in 1977, as a result of the restructuring of the social and economic sectors of the United Nations system. Nevertheless, in 1979 ACC established the Ad Hoc Inter-agency Working Group on Demographic Estimates and Projections. As part of the preparatory work of the 1984 and 1994 population conferences, ACC established ad hoc task forces for those conferences.

372. Other important coordinating mechanisms in the field of population include the Inter-Agency Consultative Committee (IACC) which was established by UNFPA in 1970 to discuss the Fund's programmes, policies, procedures and coordination issues; and the Joint Consultative Group on Policy (JCGP), which was established in 1981 by the executive heads of UNICEF, UNDP, UNFPA and WFP to promote the consideration of child survival, family planning and the needs of vulnerable groups in their programmes of work. JCGP has been very active in other areas such as women and development, structural adjustment, training of personnel, and programme collaboration and coordination in Africa (including the sharing of common premises and services).

373. Population has been recognized as one of the fields where the United Nations has been relatively successful. In spite of the controversial character of population issues, the United Nations has served as a forum for open debate on such issues and the negotiation of common strategies. Through its programme of research and analysis, it has accomplished pioneering work in the development of new methodologies for demographic analysis, and, particularly, in creating awareness of the key role that population variables play in social and economic development. Its activities in technical cooperation and financial assistance have been appreciated by developing countries because of the neutral character of multilateral assistance and the high quality of the services provided. Population is one area where effective coordination has been demonstrated within the United Nations system. Since the role of the United Nations in the field of population has been recognized by the international community and the public in general, and because of the growing interest of countries in this area, the population programme of the United Nations needs to be strengthened.

374. Although the Population Commission guides only the work programme of the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat, it also receives periodic reports from UNFPA, as well as reports on the activities of the United Nations system (including the World Bank) and intergovernmental and non-governmental organizations. Furthermore, at every session of the Commission representatives of the regional commissions, programmes and bodies, and the specialized agencies make statements on their organization's activities. This de facto arrangement has facilitated the work of the Economic and Social Council with respect to its coordination function within the system, although <u>de jure</u> the Commission does not have such a mandate. Therefore, the strengthening of the population programme of the United Nations also requires the strengthening of the

### XIV. PARTNERSHIP WITH NON-GOVERNMENTAL SECTORS

375. It is widely recognized that many of the socio-economic issues that are part of the work programme of the United Nations at present were covered in the pioneering activities of non-governmental organizations before the United Nations decided to confront them. Non-governmental organizations have been established on a voluntary basis by individuals or groups interested in a particular issue. Their purposes are diverse: Some of them are professional associations (for example, of public health workers); others are groups consisting of a particular segment of the population (for example, the elderly and women); others are affiliate members of a specific religion or political orientation; some are interested in a particular humanitarian cause (for example, the Red Cross); others are organizations devoted to teaching, conducting research or disseminating information.

376. Non-governmental organizations can be local, national or international, or they can belong to the profit-oriented private sector. Those having an international status may have national or local affiliates, but majority of them perform their activities within the boundaries of their country. Those in the private sector, including national and transnational corporations and their representative associations, play a valuable role in the social and economic development of the world. In many instances, they have the capability and capacity to produce and deliver goods and services in an efficient manner. They are able to use available communications facilities to conduct a dialogue with their staff and the public, and to take voluntary initiatives in the social sphere. The Charter of the United Nations (Article 71) deems that the Economic and Social Council may make suitable arrangements for consultation with non-governmental organizations that are concerned with matters within its competence. For this purpose, the Council has established a series of mechanisms and procedures for the granting of consultative status to such organizations.  $\underline{87}$ / In this task, the Council is assisted by the Committee on Non-Governmental Organizations.

# Issue No. 29: Strengthening the partnership with non-governmental sectors

377. In the field of population, many non-governmental organizations have been conducting research, creating awareness and providing services well in advance of many Governments and intergovernmental organizations. On many occasions, once national Governments had decided to act in a particular field, non-governmental organizations worked in partnership with the public sector in the delivery of services and implementation of programmes. Such collaboration has been instrumental in ensuring that national policy goals are achieved. Non-governmental organizations have also acted as catalysts for change, often serving as a voice for previously unrecognized concerns, reaching underserved groups, setting quality standards more responsive to the needs of beneficiaries, and developing innovative and cost-effective approaches.

378. Many of the non-governmental organizations that participate in the work of the United Nations have an international character and are not-for-profit. Nevertheless, in the field of population, at both the international and

particularly the national levels, there is a substantive number of for-profit organizations that have contributed greatly to the understanding of population issues and to the implementation of programmes, through contract work performed for government agencies as well as for other non-governmental organizations and for the United Nations system. In many countries, population activities have benefited from the strengthening of the private sector; the private, profitoriented sector is in many cases contributing to the development of local financial, managerial and technological capacity for the production and distribution of commodities and services in an effective and cost-efficient manner. In such instances, an increasing number of Governments are tending to rely more on the effectiveness of the private sector, thus creating new forms of partnership.

379. Another cluster of non-governmental organizations that are receiving increased attention is that consisting of local community organizations. Some of them have been created by the public sector, while others came into existence through a decision taken by the communities themselves. In terms of their character, they exhibit a wide range extending from simple kinship structures to more complex political, social, economic, religious and educational groups. Because their existence usually transcends the short life duration of other types of organizations, for local communities, particularly those that are isolated from the mainstream of national life, they are an important (if not the only) source of social cohesion, thereby providing support to the needs of families and individuals. Finally, considering their proximity to the grass roots of society, local community organizations are an important link with local Governments and other non-governmental organizations, thus forming part of the network that constitutes the fabric of society.

380. Taking into account the mutual benefits obtained from the closer collaboration between non-governmental organizations and the United Nations, as a follow-up to the Mexico City International Conference on Population, the Economic and Social Council requested the Secretary-General to prepare periodic reports on the work of intergovernmental and non-governmental organizations in the implementation of the World Population Plan of Action. Such reports, which cover a large number of organizations, have provided the Population Commission and the Council with valuable information on the characteristics and scope of the organizations, their human and financial resources, and their areas of work.

381. The significant financial contribution of non-governmental organizations to population activities is another illustration of their particular interest in this area. Data presented in table 15 indicate that during the period 1982-1991, of the total expenditures for population assistance (US\$ 1,532.3 million) one third was channelled through international non-governmental organizations, of which about US\$ 400 million (26 per cent) was committed directly by the non-governmental organizations themselves. <u>88</u>/ Such figures constitute just a small visible part of the iceberg because they refer only to international non-governmental organizations: If the contribution made by national, and particularly local, non-governmental organizations were added to those figures, the total would be significantly higher.

382. The report of the Secretary-General on the work of intergovernmental and non-governmental organizations in the implementation of the World Population

Plan of Action (E/CN.9/1994/7), prepared for submission to the Population Commission at its twenty-seventh session (March 1994), includes a listing of 135 international non-governmental organizations that carry out important population activities; close to half of them are not in consultative status with the Economic and Social Council, either because they have not applied for such status or because they are for-profit organizations, although their activities are very close to the goals of the Plan of Action. Among the organizations that should be mentioned because of their significant contribution to the population field are:

 (a) The International Planned Parenthood Federation (IPPF), which was established in 1952, and is the largest international private voluntary organization. It affiliates independent family planning associations in over 135 countries;

(b) The Population Council, which was also created in 1952, and is involved in biomedical research in the field of human reproduction, social science research, and technical cooperation in family planning and other population-related programmes;

(c) The International Union for the Scientific Study of Population (IUSSP), which was established in 1924, and is the leading international professional association for individuals in the field of population. It groups close to 2,000 professionals from 124 different countries.

383. Recognizing the pioneering role and the important contribution of non-governmental organizations, the Plan of Action invited them to collaborate in the implementation of the Plan of Action and urged Governments to utilize fully the support of intergovernmental and non-governmental organizations (para. 96). The International Conference on Population (Mexico City) not only recognized and commended the contributions of non-governmental organizations but also emphasized the involvement of those organizations and urged Governments to encourage the innovative activities of non-governmental organizations and to draw upon their expertise, experience and resources in implementing national programmes (recommendation 84). Therefore, enhancing the partnership with non-governmental organizations will generate mutual benefits for local and national Governments, the United Nations and the non-governmental organizations themselves.

#### XV. MONITORING, REVIEW AND APPRAISAL

## Issue No. 30: Monitoring, review and appraisal

# Monitoring of population trends, policies and programmes

384. The World Population Plan of Action recommended that a monitoring of population trends and policies should be undertaken continuously as a specialized activity of the United Nations and reviewed biennially by the appropriate bodies of the United Nations system (para. 107). The Mexico City recommendations added that the monitoring of multilateral population programmes of the United Nations system aimed at the further implementation of the World Population Plan of Action should be undertaken by the Secretary-General of the United Nations, through appropriate arrangements (recommendation 88). <u>89</u>/

385. Since the initiation of the population programme of the United Nations in 1946, the monitoring of population trends has always been undertaken. Regarding the monitoring of population policies, it is important to mention that the first United Nations Population Inquiry among Governments was made in 1963-1964 with 53 Governments and the Holy See responding on their perceptions and policies. The results were instrumental in triggering a series of actions that were initiated by the Population Commission (March 1965), endorsed by the Economic and Social Council (July 1965), and finally ratified by the General Assembly, authorizing, <u>inter alia</u>, the provision of assistance for national family planning programmes; <u>90</u>/ but it was only after 1974 that the United Nations received the mandate to conduct the monitoring of trends and policies in a systematic manner.

386. Within the United Nations, the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat is responsible for conducting and reporting on the monitoring of population trends and policies biennially, in collaboration with other units, bodies and organizations of the United Nations system. The first in the series of monitoring reports was prepared and published in 1977 and succeeding reports in 1979, 1981, 1983, 1987, 1989 and 1991. A concise version of the report is also prepared and published biennially. The report usually includes a wide range of information about basic population variables and the views and policies adopted by national Governments on such topics as population growth and size; mortality; fertility; urbanization; internal and international migration; and the main structural elements, namely, sex, age, labour force participation, demographic dependency and groups of special social and economic importance. The report also includes information on the interrelationships between population and other areas such as employment, women, food and nutrition, and socio-economic development and the environment. During the past bienniums, the report also contained a more detailed treatment of a special topic such as key issues in fertility and mortality; population trends and policies among the least developed countries; age structure; and refugees. Major sources of information include the outcome of demographic assessments, demographic research and studies, the findings of the United Nations Population Inquiries among Governments (the seventh of which has just been completed), and other relevant information available in the Population Policy Data Bank maintained by the Population Division.

387. Concerning the monitoring of multilateral population programmes of the United Nations system, it is important to take into account that since the United Nations received the mandate to participate in technical cooperation activities and to provide financial assistance, a series of mechanisms have been established for that purpose. The Mexico City International Conference on Population requested the Secretary-General to undertake the monitoring of multilateral population programmes of the United Nations system aimed at the further implementation of the World Population Plan of Action. In his report on the follow-up to General Assembly resolution 39/228 (A/41/179-E/1986/18), the Secretary-General recommended that UNFPA continue to monitor the multilateral population programmes and projects that it funds. The first report on

multilateral population assistance was prepared in 1989 (E/1989/12), the second in 1991 (E/CN.9/1991/8) and the third in 1994 (E/CN.9/1994/6).

388. Also, as a follow-up to the Mexico City recommendations, the Economic and Social Council requested the Secretary-General to submit periodic overviews of the activities of the United Nations system in the field of population and periodic reports on the activities of intergovernmental and non-governmental organizations in the implementation of the Plan of Action (Council resolutions 1985/4, 1986/7 and 1987/72).

389. With these reports, the United Nations governing bodies and national Governments have a general overview of the level of implementation of the Plan of Action. More exactly, these reports provide information on population trends and tendencies, governmental views on these trends, and activities that have been undertaken by Governments, by the United Nations system and by other intergovernmental organizations, as well as by non-governmental organizations. Information concerning bilateral assistance, as mentioned above, is periodically collected by UNFPA and by OECD.

#### Review and appraisal of the World Population Plan of Action

390. The Plan of Action also specifies that a comprehensive and thorough review and appraisal of progress made towards achieving the goals and recommendations of the Plan of Action should be undertaken every five years by the United Nations system, and that the findings of such systematic evaluations should be considered by the Economic and Social Council with the object of making, whenever necessary, appropriate modifications of the goals and recommendations of the Plan (para. 108). The International Conference on Population simply reiterated this specification.

391. Following the above provisions, the Population Division of the Department for Economic and Social Information and Policy Analysis of the United Nations Secretariat has had the responsibility of coordinating the four assessments that have been undertaken. The first (1979) was conducted with the assistance of an Ad Hoc Group of Experts on Review and Appraisal of the World Population Plan of Action; the findings of the Fourth Population Inquiry among Governments, along with input from the regional commissions, the specialized agencies and other United Nations bodies and organizations, contributed to the assessment, mainly through the aforementioned Subcommittee on Population of ACC. The results were presented to the Population Commission and the Economic and Social Council, and the Council approved the findings and adopted 16 recommendations for the further implementation of the Plan.  $\underline{91}/$ 

392. The Economic and Social Council decided that the 1984 population conference should be devoted to the discussion of selected issues of the highest priority, with the aim of contributing to the process of review and appraisal of the World Population Plan of Action and to its further implementation. <u>92</u>/ Inter-agency participation for preparing the report was provided through the ACC Ad Hoc Task Force for the Conference mentioned above. The report was submitted to the Preparatory Committee for the Conference and their comments were used to prepare a revised version that was presented to the International Conference on Population. Later on, on the basis of the deliberations held at the Conference, a final version was prepared.  $\underline{93}$ / The Conference produced 88 recommendations for the further implementation of the Plan of Action.

393. The third assessment was produced in 1989. It concentrated on a selected number of 31 issues. This time, inter-agency participation was provided by the former Consultative Committee on Substantive Questions (Programme Matters) of ACC. The results of the Sixth Population Inquiry among Governments were an important source of information, as well as the responses from intergovernmental and non-governmental organizations. The Population Commission recommended the approval of the report and the adoption of 13 recommendations by the Council.  $\underline{94}/$ 

394. From the above presentation, it follows that important progress has been made in the directions set forth in the Plan of Action. The findings of the present report permit a conclusion using the same words employed by the Economic and Social Council after reviewing the findings of the third review and appraisal of the Plan of Action; the Council concluded that the World Population Plan of Action was an international instrument that served as a standard reference and continued to rest firmly on a global consensus, and that although there were many reasons for such achievements, it was important to emphasize the benefits that resulted from bringing together the political will of Governments and the scientific and professional skills of many units of the United Nations and of numerous academic centres and professional associations and other non-governmental organizations. <u>95</u>/

Notes

<u>1</u>/ Report of the United Nations World Population Conference, 1974, <u>Bucharest, 19-30 August 1974</u> (United Nations publication, Sales No. E.75.XIII.3), chap. I.

<u>2</u>/ See <u>Review and Appraisal of the World Population Plan of Action</u> (United Nations publication, Sales No. E.79.XIII.7); <u>Review and Appraisal of the</u> <u>World Population Plan of Action: 1984 Report</u> (United Nations publication, Sales No. E.86.XIII.2); and <u>Review and Appraisal of the World Population Plan of</u> <u>Action: 1989 Report</u> (United Nations publication, Sales No. E.89.XIII.11).

3/ See <u>Report of the International Conference on Population, 1984, Mexico</u> <u>City, 6-14 August 1984</u> (United Nations publication, Sales No. E.84.XIII.8 and corrigenda), chap. I, sect. B (III and IV).

<u>4</u>/ <u>Official Records of the Economic and Social Council, 1989, Supplement</u> <u>No. 6</u> (E/1989/24, paras. 11-21.

5/ See "Report of the ACC Ad Hoc Task Force for the International Conference on Population and Development, 1994" (ACC/1992/22), para. 17; and "Report of the ACC Ad Hoc Inter-Agency Meeting for the International Conference on Population and Development" (ACC/1993/17), para. 10.

<u>6</u>/ <u>World Population Monitoring, 1991</u>, Population Studies, No. 126 (United Nations publication, Sales No. E.92.XIII.2).

7/ World Population Monitoring, 1993 (United Nations publication, forthcoming).

8/ Economic and Social Council resolution 1981/87, para. 3.

<u>9</u>/ General Assembly resolution 45/199, of 21 December 1990, annex (General Assembly resolutions 1710 (XVI) and 1715 (XVI) on the first United Nations Development Decade were adopted on 19 December 1961. Assembly resolution 2626 (XXV) on the International Development Strategy for the Second United Nations Development Decade was adopted on 24 October 1970. The International Development Strategy for the Third United Nations Development Decade is contained in Assembly resolution 35/56 (adopted 5 December 1980), annex).

<u>10</u>/ See <u>Review and Appraisal ... 1984 Report</u> ... chap. I, introductory paragraphs.

 $\underline{11}$  / See General Assembly resolution S-18/3 of 1 May 1990, annex, para. 2.

12/ General Assembly resolution 41/128 of 4 December 1986, annex.

<u>13</u>/ See <u>Review and Appraisal ... 1984 Report</u> ... chap. I, section on "Food and Agriculture".

14/ See <u>Review and Appraisal ... 1989 Report</u> ... chap. I, para. 8.

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<u>15</u>/ For a full assessment, see FAO/WHO, <u>Nutrition and Development: A</u> <u>Global Assessment, International Conference on Nutrition</u> (Rome, December 1992).

<u>16</u>/ <u>Our Common Future. The Report of the World Commission on Environment</u> and <u>Development</u> (Oxford and New York, Oxford University Press, 1987).

<u>17</u>/ <u>Report of the International Forum on Population in the Twenty-first</u> <u>Century, Amsterdam, the Netherlands, 6-9 November 1989</u> (New York, United Nations Population Fund, 1990), annex.

18/ The Challenge to the South: The Report of the South Commission (New York, Oxford University Press, 1990).

<u>19</u>/ <u>Report of the United Nations Conference on Environment and</u> <u>Development, Rio de Janeiro, 3-14 June 1992</u>, vol. I, <u>Resolution Adopted by the</u> <u>Conference</u> (United Nations publication, Sales No. E.93.I.8 and corrigendum), resolution 1, annex II.

<u>20</u>/ Ibid., paras. 5.5, 5.17 and 5.43.

<u>21</u>/ See document A/45/327, para. 76.

22/ See document E/C.7/1991/8, in particular para. 82.

23/ See <u>Report of the International Conference on Water and the</u> <u>Environment: Development Issues for the Twenty-first Century,</u> 26-31 January 1992, Dublin, Ireland. The Dublin Statement and Report of the <u>Conference</u> (Geneva, World Meteorological Organization, 1992).

24/ General Assembly resolution 41/170, para. 8.

25/ General Assembly resolution 217 (III) A.

26/ See Report of the ... Conference on Environment ..., para. 24.1.

<u>27</u>/ See <u>Report of the World Conference on Human Rights</u>, Vienna, <u>14-25 June 1993</u> (A/CONF.157/24 (part I)).

<u>28</u>/ For the World Plan of Action for the Implementation of the Objectives of the International Women's Year, see <u>Report of the World Conference of the</u> <u>International Women's Year, Mexico City, 19 June-2 July 1975</u> (United Nations publication, Sales No. E.76.IV.1), chap. II, sect. A.

29/ General Assembly resolution 34/180 of 18 December 1979, annex.

<u>30</u>/ See <u>Report of the World Conference of the United Nations Decade for</u> <u>Women: Equality, Development and Peace, Copenhagen, 14 to 30 July 1980</u> (United Nations publication, Sales No. E.80.IV.3 and corrigendum). 31/ Report of the World Conference to Review and Appraise the Achievements of the United Nations Decade for Women: Equality, Development and Peace, Nairobi, 15-26 July 1985 (United Nations publication, Sales No. E.85.IV.10), chap. I, sect. A.

<u>32</u>/ See <u>The World's Women, 1970-1990</u>: <u>Trends and Statistics</u> (United Nations publication, Sales No. E.90.XVII.3).

33/ "Report of the Secretary-General on priority themes: equality: elimination of <u>de jure</u> and de facto discrimination against women" (E/CN.6/1992/7), para. 5.

 $\underline{34}$ / The singulate mean age at marriage is a good estimate of the average age at marriage obtained from census figures and independent of differences in the age distribution of the population.

<u>35</u>/ <u>World Population Prospects: The 1992 Revision</u> (United Nations publication, Sales No. E.93.XIII.7).

<u>36</u>/ See <u>World Population Monitoring, 1993</u> (United Nations publication, forthcoming).

37/ See the Standard Rules on the Equalization of Opportunities for Persons with Disabilities, contained in General Assembly resolution 48/96, annex.

38/ See General Assembly resolution 47/75.

<u>39</u>/ See <u>First Call for Children</u> (New York, United Nations Children's Fund, 1990), or A/45/625, annex, for the World Declaration on the Survival, Protection and Development of Children and the Plan of Action for Implementing the World Declaration on the Survival, Protection and Development of Children in the 1990s, adopted at the World Summit for Children, held in New York in September 1990.

<u>40</u>/ See <u>Report of the World Assembly on Ageing, Vienna, 26 July to</u> <u>6 August 1982</u> (United Nations publication, Sales No. E.82.I.16), chap. VI, sect. A, containing the International Plan of Action on Ageing.

41/ See World Population Monitoring, 1993 ... .

<u>42</u>/ See <u>Patterns of Fertility in Low-fertility Settings</u> (United Nations publication, Sales No. E.92.XIII.11), table. 1.

<u>43</u>/ See <u>Population and Human Rights</u>: <u>Proceedings of the Expert Group</u> <u>Meeting on Population and Human Rights, Geneva, 3-6 April 1989</u> (United Nations publication, Sales No. E.91.XIII.8).

<u>44</u>/ See <u>Abortion Policies: A Global Review</u>, vol. I, <u>Afghanistan to France</u> (United Nations publication, Sales No. E.92.XIII.8); vol. II, <u>Gabon to Norway</u> (United Nations publication, Sales No. E.94.XIII.2); and vol. III, <u>Oman to</u> <u>Zimbabwe</u> (United Nations publication, forthcoming).

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<u>45</u>/ Ibid.

46/ See World Population Monitoring, 1993 ... .

47/ The estimates of contraceptive availability are approximate, based on country-specific estimates provided by knowledgeable observers (see <u>World</u> <u>Population Monitoring, 1993</u>).

<u>48</u>/ Ibid.

49/ Ibid.

50/ UNFPA, "Future contraceptive requirements and logistics management needs", paper presented at the Expert Group Meeting on Family Planning, Health and Family Well-being (Bangalore, 26-30 October 1992).

51/ See document E/CONF.84/PC/6.

52/ See document E/CONF.84/PC/7.

53/ The figures on life expectancy at birth and infant mortality rates are taken from <u>World Population Prospects: The 1992 Revision</u>.

54/ Ibid., chap. III, sect. G (a).

55/ See Economic and Social Council resolution 1989/92, annex, sect. B, recommendation 6. That resolution is contained in <u>Review and Appraisal ...</u> 1989 Report ... .

56/ See <u>Review and Appraisal ... 1989 Report</u> ..., para. 35.

57/ See World Bank/WHO/UNFPA. <u>Preventing the Tragedy of Maternal Deaths:</u> <u>Report on the International Safe Motherhood Conference, Nairobi, Kenya,</u> <u>February 1987</u> (Washington, D.C., World Bank, 1987).

58/ See World Population Prospects: The 1992 Revision ... chap. III.

59/ See General Assembly resolution 43/15.

<u>60</u>/ The data used in this discussion are from <u>World Urbanization</u> <u>Prospects: The 1992 Revision</u> (United Nations publication, Sales No. E.92.XIII.11).

<u>61</u>/ Unlike the World Population Plan of Action or the recommendations, resolutions and decisions adopted by the International Conference on Population (Mexico City), ILO conventions are international legal instruments that enter into force and become binding upon ratification by the States parties to such conventions. In effect, they become part of the States' laws and thus overrule contrary domestic laws. Moreover, their application is supervised by an independent international committee of experts.

62/ General Assembly resolution 45/158 of 18 December 1990, annex.

 $\underline{63}/$  See General Assembly resolution 428 (V) of 14 December 1950, annex, para. 6 (A) (ii).

 $\underline{64}$  / See OAU Convention Governing the Specific Aspects of Refugee Problems in Africa, 1969 (1001 UNTS 45).

<u>65</u>/ Refugee statistics available to UNHCR as at 30 June 1992 (EC/1992/SC.2/CRP.27). The Executive Committee of the Office of the United Nations High Commissioner for Refugees recently stated (A/AC.96/804, para. 32 (r)) that it recognized the difficulties associated with the compilation of refugee statistics but, given the importance of such statistics especially for gender-sensitive programme planning, urged UNHCR to pursue the proposals as set out in its Information Note on UNHCR's Refugee Statistics (EC/1992/SC.2/CRP.16).

<u>66</u>/ <u>Official Records of the General Assembly, Forty-seventh Session,</u> <u>Supplement No. 12A</u> (A/47/12/Add.1).

67/ General Assembly resolution 47/105, para. 3.

<u>68</u>/ Ibid., para. 9.

<u>69</u>/ <u>Report of the United Nations Conference on Environment and</u> <u>Development</u>, ..., para. 40.18.

 $\underline{70}$ / Other periodic publications of the United Nations that systematically include substantive analyses of population issues are the annual <u>World Economic</u> <u>Survey</u> and the <u>Report on the World Social Situation</u>.

71/ Report of the United Nations Conference on Environment and Development, Rio de Janeiro, 3-14 June 1992, vol. I, Resolutions Adopted by the Conference (United Nations publication, Sales No. E.93.I.8 and corrigendum), resolution 1, annex I.

<u>72</u>/ According to the British Broadcasting Corporation, between 1985 and 1991 the number of television receivers had increased by 57 per cent in Latin America, by 81 per cent in sub-Saharan Africa, by 95 per cent in the Arab world, by 168 per cent in China (tripling in six years), and by 1,639 per cent in India (almost doubling every year).

 $\underline{73}/$  See Report of the International Forum on Population in the Twenty-first Century ... .

<u>74</u>/ See General Assembly resolution 44/210, para. 2.

75/ United Nations publication, Sales No. E.90.XVII.3.

76/ Review and Appraisal ... 1989 Report ..., para. 65.

<u>77</u>/ See <u>Report of the International Forum on Population in the Twenty-</u> <u>first Century</u> ..., p. 9.

78/ "Kilimanjaro Programme of Action for African Population and Self-Reliant Development" (E/ECA/CM.10/14, annex II). This document was adopted by the Second African Population Conference and endorsed by the Economic Commission for Africa, at its nineteenth session, held from 26 to 30 April 1984. The Programme of Action was also the African contribution to the 1984 International Conference on Population (see E/CONF.76/6, annex V).

<u>79</u>/ "Report of the Third African Population Conference, Dakar, Senegal, 11-12 December 1992" (E/CONF.84/PC/13), annex, annex II.

 $\underline{80}/$  See the Denpasar Declaration on Population and Development (A/48/746, annex (III), adopted at the Ministerial Meeting on Population of the Non-Aligned Movement, Bali, 9-13 November 1993.

81/ General Assembly resolution 44/211, para. 25.

<u>82</u>/ Economic and Social Council resolution 1989/92, annex, recommendation 13 (reproduced in <u>Review and Appraisal ... 1989 Report</u> ... .

 $\underline{83}$ / This information refers to the aggregate situation of the group of developing countries. The countries belonging to the ECLAC region usually give a higher priority to cooperation in the field of population redistribution than countries belonging to other regions.

<u>84</u>/ UNFPA, <u>Global Population Assistance Report, 1982-1991</u> (New York, UNFPA, 1993), p. 18.

85/ Ibid., table 3, and addendum, tables A.2 and A.3.

<u>86</u>/ Economic and Social Council resolution 1985/4 of 28 May 1985, para. 1. See also Council resolutions 3 (III) of 3 October 1946 and 150 (VII) of 10 August 1948; and decisions 87 (LVIII) and 89 (LVIII) of 6 May 1975.

87/ See Economic and Social Council resolution 1296 (XLIV) of 23 May 1968.

<u>88</u>/ Data obtained from UNFPA, <u>Global Population Assistance Report</u>, 1982-1991 ..., table 2.

<u>89</u>/ Concerning recommendation 88 of the Mexico City International Conference on Population, the Governments of Mexico and India stated that while joining the consensus, they considered that it was not for the Secretary-General to keep the implementation of population programmes funded by multilateral assistance under review, as this was exclusively the prerogative of Governments. In that sense, the Secretary-General might only keep under review the use of the assistance provided by United Nations agencies (footnote to recommendation 88).

<u>90</u>/ See the report of an ad hoc committee of experts to the Population Commission (E/CN.9/182); Economic and Social Council resolution 1084 (XXXIX) of 30 July 1965; and General Assembly resolution 2211 (XXI) of 17 December 1966.

<u>91</u>/ See Council resolution 1979/32 of 9 May 1979 and <u>Review and Appraisal</u> of the World Population Plan of Action (1979 report) ... .

 $\underline{92}/$  See Economic and Social Council resolution 1981/87 of 25 November 1981, para. 2.

<u>93</u>/ <u>Review and Appraisal ... 1984 Report</u> ... .

94/ Economic and Social Council resolution 1989/92 of 28 July 1989.

<u>95</u>/ Ibid., annex, para. 2.

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