



RETURN OF THE POPULATION GROWTH FACTOR



REPORT SUMMARY

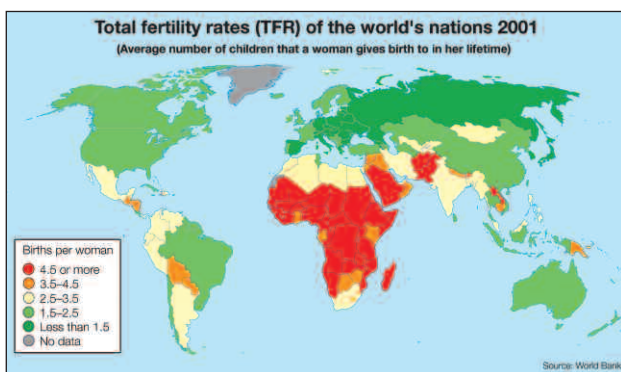
Report of Hearings by the
All Party Parliamentary Group on Population,
Development and Reproductive Health

Westminster, London
January 2007

POPULATION AND THE MILLENNIUM DEVELOPMENT GOALS

A report on the impact of global population growth on the Millennium Development Goals (MDGs) has been published by the UK All Party Parliamentary Group on Population, Development and Reproductive Health (the Group).

These MDGs were established in 2000 through the United Nations by 189 governments as crucial targets of socio-economic and environmental progress to be achieved by 2015.



The Report concludes that they will be difficult or impossible to achieve with current levels of population increase in the least developed countries.

In 1950 global population was 2 billion. It now stands at 6.5 billion – and is likely to rise to between 8 and 10.5 billion by 2050.

The great majority of this growth will take place in the poorest countries, particularly in sub-Saharan Africa and parts of Asia.

Key Findings of the Report

The MDGs failed to take into account the population growth factor. This has significant negative impacts on socio-economic development, human health, regional stability and the environment.

Poverty alleviation – No country, with the exception of a few oil-rich states, has risen from poverty whilst still having high fertility rates - which also impact directly on levels of maternal and child mortality.

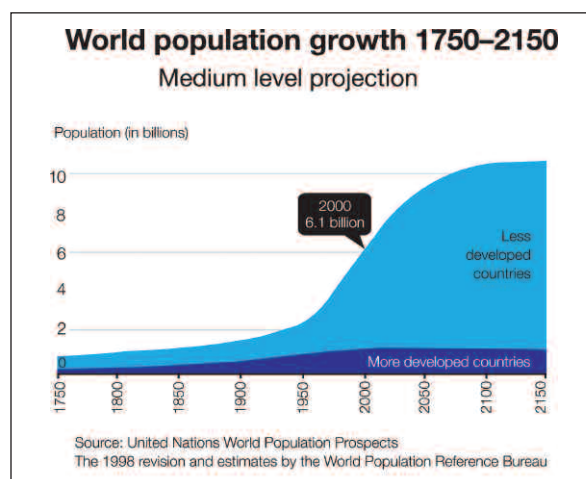
Climate change – While the greatest proportion of emissions currently comes from developed countries, which must urgently address the impact of their consumption levels, most of the increase in greenhouse gases will come from carbon-fuelled developing economies where population is growing.

Conflict – High rates of population growth can contribute to potential for civil conflict, where they involve pressure on limited land or water resources, mass migration and high rates of youth unemployment.

Migration – Poverty and population growth are closely related to increased migration. According to the Stern Review the effects of climate change in developing countries, when combined with population growth, will exert significant pressure on migration rates.
(Independent Report for UK Treasury)

Economic growth – If lower birth rates can be achieved, this can lead to lower dependency ratios and enable greater savings, investment and productivity per capita – as has happened in East Asia. This in turn provides more resource for healthcare and education.

In many regions, the MDGs are not attainable without greater focus on slowing population growth, through making voluntary family planning universally accessible and empowering women to access reproductive health services.



Decisions made now can influence whether population levels in 2050 are at the UN high projection of 10.5 billion, the medium of 9 billion or the low of 7.8 billion.

The Economic Value of Family Planning

In developing countries where the birth rate has fallen, between 25 to 40% of economic growth is attributable to demographic change [UN Population Fund], making family planning a highly effective investment.

The Impacts of Population Increase

Below are some of the main impacts of population increase, set against each of the Millennium Development Goals.

MILLENNIUM DEVELOPMENT GOAL	IMPACT OF POPULATION GROWTH
Goal 1 ERADICATE EXTREME POVERTY AND HUNGER	<ul style="list-style-type: none"> The rapid pace of population growth in much of Africa and some other parts of the world means, despite global efforts, we are not succeeding in keeping the number of people living in extreme poverty stable. <i>(UNFPA)</i> In sub-Saharan Africa and parts of South Asia the number of people living on less than \$1 per day is rising. Slower population growth permits greater investment in education, health and skills for employment, helping to lift nations out of poverty.
Goal 2 ACHIEVE UNIVERSAL PRIMARY EDUCATION	<ul style="list-style-type: none"> Two million extra teachers per year are needed just to maintain existing standards of education, assuming class sizes of 40. Under 50% of pupils complete primary level in sub-Saharan Africa.
Goal 3 PROMOTE GENDER EQUALITY AND EMPOWER WOMEN	<ul style="list-style-type: none"> Women with numerous pregnancies and life-long childcare find it difficult to participate in education, employment and politics. Girls currently comprise only 26% of secondary students in sub-Saharan Africa. Although women's ability to control their fertility is by itself not sufficient to gaining their full empowerment and gender equality, it is the first and most important step. <i>(World Health Organisation)</i>
Goal 4 REDUCE CHILD MORTALITY (UNDER 5 YEARS OLD)	<ul style="list-style-type: none"> There is a direct correlation between high fertility and high child mortality rates. <i>(UN Economic Commission for Africa)</i> Fewer, wider spaced births can reduce infant mortality by over 60% <i>(Department for International Development – UK Government)</i>
Goal 5 IMPROVE MATERNAL HEALTH	<ul style="list-style-type: none"> One woman dies every minute from pregnancy related issues, yet 41% of pregnancies globally are unwanted. By preventing these, maternal mortality could fall 35% <i>(Department for International Development – UK Government)</i>
Goal 6 COMBAT HIV/AIDS, TUBERCULOSIS, MALARIA & OTHER DISEASES	<ul style="list-style-type: none"> Progress is being made, but disease is exacerbated by poverty, itself aggravated by population growth which also dilutes available healthcare resources. For HIV positive women who do not want children, family planning offers an effective way of reducing the number of cases of vertical transmission of the virus from mother to infant.
Goal 7 ENSURE ENVIRONMENTAL SUSTAINABILITY	<ul style="list-style-type: none"> Climate change will be aggravated. Degradation of farmland, deforestation, loss of species and habitats will accelerate. The UN estimates that two thirds of the world's population will face moderate to high water shortages by 2025. The impact of high consumption levels in the developed world contributes greatly to environmental problems. However rapid population growth in many developing countries will very significantly exacerbate these problems, and they must be supported in their efforts to grow sustainably.

The Hearings Process

The All Party Parliamentary Group comprises over 70 parliamentarians drawn from both the House of Commons and the House of Lords. All the main political parties are included.

In 2006 the Group commissioned a Hearings process on population growth. This process is used to inform politicians and decision takers in the UK - and internationally - about important issues.

Evidence was submitted to the Hearings by nearly 50 organizations from all over the world. They included UK and overseas government departments, United Nations agencies, the World Bank and a wide range of Non Governmental Organizations, charities and academic bodies.

Representing a Broad Consensus

Views on the adverse impact of population increase are shared across the less developed world.

Among governments of the 50 least developed nations, 80% felt their population growth was too high – none felt it was too low. (UN Dept of Economic & Social Affairs 2005)

Addressing Unmet Need

Between 125 and 200 million people would like to be able to control their fertility. Many of them live in extreme poverty. They are denied a basic right of empowerment in their lives.

It is estimated that only 10% of funding needed from

developed nations for family planning is actually being provided, at a time when unmet need is increasing.

Largely because of political and religious pressures, together with lack of emphasis on the adverse impact of population increase on poverty alleviation, over the last 10-15 years family planning programmes have stalled in many parts of the world.

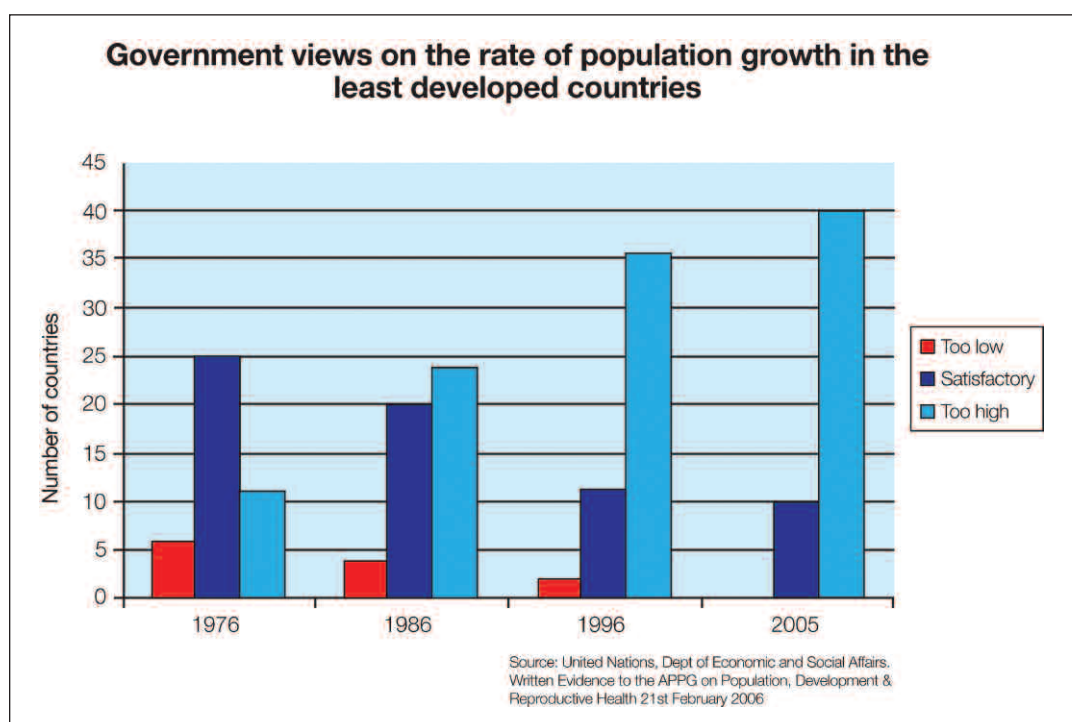
Key Recommendations

The Report concludes that universal access to family planning, as proposed in 1994 at the International Conference on Population and Development, is crucial to achieving the MDGs.

It calls for a range of urgent measures:

- 10% of development aid allocated for population and reproductive health services
- Availability of contraceptive supplies to be a priority
- Elimination of barriers to use of family planning
- More cost-effective use of available finance
- Support for prioritisation and monitoring of resource allocation
- Greater cooperation between development, environment and health organizations

The United Nations has now approved a new target under MDG 5 - universal access to reproductive health care by 2015. The UK Parliamentary Group welcome this and look forward to final confirmation.



Evidence for the Hearings was submitted by:

African Foundation for Population and Development (AFPODEV), Nigeria

African Population and Health Research Centre (APHRC)

Benevolent Organisation for Development Health and Insight (BODHI), Australia

Bixby Centre for Reproductive Health Research and Policy, San Francisco

Catholics for a Free Choice

Centre for Alternative Technology

Chair of the National Assembly on Population Welfare, Pakistan

Chief Scientific Adviser to HM Government, UK

Commonwealth Medical Trust (Commat)

European Commissioner for Development and Humanitarian Aid

Gramin Vikas Trust, India

Help Age International

Homeless International

International Council on Management of Population Programmes (ICOMP)

International Monetary Fund (IMF)

International Planned Parenthood Federation (IPPF)

Karen Newman, International Development Consultant (personal capacity)

London School of Economics (LSE) Department of Social Policy, UK

London School of Hygiene and Tropical Medicine (LSHTM)

Marie Stopes International (MSI)

Marion van Schaik, Dutch Ministry of Social Affairs (personal capacity)

National Population & Family Planning Commission, China

Optimum Population Trust (OPT)

Overseas Development Institute (ODI)

PATH Foundation Philippines, Inc

Population Action International (PAI)

Planet 21

Population and Sustainability Network (PSN)

Professor Chris Rapley, British Antarctic Survey (personal capacity)

Syracuse University, USA

The Global Fund to Fight AIDS, Tuberculosis and Malaria

The Population Institute, USA

UK Department for International Development (DfID)

UK Department for Environment, Food and Rural Affairs (DEFRA)

UN Department of Economic and Social Affairs (DESA)

UN Economic Commission for Africa

UN Environment Programme

UN Food and Agriculture Organisation (FAO) - Gender and Population Division

UN High Commissioner for Human Rights

UN High Commissioner for Refugees

UN Office of the High Representative for the Least Developed Countries, Landlocked Developing Countries and Small Island Developing States (UN-OHRLLS)

UN Population Fund (UNFPA)

University of California, Berkeley, USA

University of Edinburgh, School of Biological Sciences, Scotland

University of Sussex, Poverty Research Unit, UK

World Bank, Washington USA

World Health Organisation (WHO) Geneva

To read and download copies of the full Report:

www.appg-popdevrh.org.uk

For further information on the Report:

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