

Help Ensure Every Child Born is Wanted

Policy Area Overview

The sustainable development goals (SDGs) set out by the UN in 2015 will drive the global development agenda on social, economic and environmental issues for the next 15 years. Out of the stated goals, none specifically refer to population policies. Yet coherent and sustainable population policies, including universal access to sexual and reproductive health rights, are necessary to achieve the majority of the development goals outlined. The Global Policy Action Plan (GPACT) recognises these links, and this paper elaborates on the necessity of coherent and future-proof population policies.

Problems posed by ‘business-as-usual’

As of July 2014 the world population stood at 7.244 billion. By 2050 it is expected to reach 9.6 billion. These incredible figures offer both opportunities and challenges which must be faced up to by current and future generations.

Population, the management of it, and interrelated policies, has an impact on nearly all aspects of human life and development. Poverty, food security, education, sexual equality and climate change are but a few of these areas. Our current trajectory is set for catastrophe. To meet 2050’s world population food production would have to increase by 70%. Carbon dioxide levels will double, causing the global temperature will rise by 2.5°C as a result of the carbon dioxide increase alone. 70% of people will live in cities and slums (UNDP). The United Nations’ 2013 Human Development Report warns that, unless urgent action is taken to tackle environmental challenges, up to 3.1 billion people could be placed into extreme poverty. Clearly, ‘business-as-usual’ is not an option.

The issue of assumptions: current population policy failures

There are two conventional wisdoms upon which the vast majority of public policy on population is based. The first states that larger families are bad, particularly for children’s welfare, and that there is a causative connection between larger families and poverty. Famously expressed by Thomas Malthus in his 1798 work *An Essay on the Principle of Population*, and more recently by Jeffrey Sachs in *Common Wealth*, the basic assumption is that limited fixed resources leads to competition and hampers economic growth. Further support can be found in Nobel Prize Winner Gary Becker’s concept of a “quality-quantity trade-off”. Becker argues that between siblings there is competition for resources such as parental attention, time and money. More siblings would then produce more competition. Supposing that quality here is a normal good, then for higher quality children parents must become richer, leading to a trade-off of fewer children for a higher quality. Studies show that children in poorer larger families tend to be less educated, physically smaller and access less wealth throughout their lives (Montgomery and Lloyd, 1999). The preference for families to have a greater number of children notwithstanding of quality should therefore be taken into account when considering population policy.



During the Emergency period in India, Sanjay Gandhi drove a campaign to lower fertility rates, characterised by the popular slogan, “A small family is a happy family”. The resulting hugely unpopular sterilisation campaign is widely believed to be the reason Indira Gandhi lost the 1971 election. Family planning has since become a taboo subject in India.

The difficulty with basing population policies on this first assumption is that, while it appears self-explanatory, it is not strictly true. Contrary to Malthus’ assumptions, the majority of resources themselves are not inherently fixed, with technological innovation allowing for greater production function. A larger population leads to a greater probability of innovation, as does the incentive produced by the pressure of population-induced problems. Economist Michael Kremer has demonstrated a positive linear link between the number of people and population growth - the opposite of a Malthusian graph (Kremer, 2003). In terms of population policy, this understanding suggests that population increase can be seen as an opportunity to develop variable resources sustainably. Most importantly, this encourages prioritising the challenges produced by the strain increased population puts on fixed resources - namely relating to the environment and global ecosystems.

The second precept of population policy is that the poor are unable to control their fertility, due to a lack of understanding, or a lack of access to family planning. Throughout the world, family planning is in a dire state. In 2012 there were 222 million women with an unmet need for contraception. Annually, 74 million women worldwide become unintentionally pregnant (WHO). Expanding access to contraceptive services and the provision of sexuality education is at the forefront of research by institutions such as the World Health Organisation and Guttmacher Institute.

Barriers to service uptake predominantly relate to a lack of access, availability and acceptance. Affirmative action to reduce the number of unintentional pregnancies could prevent 60% of maternal deaths and 57% of child deaths (WHO). In 2008, it is estimated that 21.6 million unsafe abortions took place globally, 98% of which were in developing countries. Almost 13% of all maternal deaths are due to unsafe abortion (Sedgh, 2012). Beyond unwanted pregnancies, every year 529,000 women die in delivery and pregnancy (IPPF).

Yet, studies investigating the steep fertility decline in Colombia between the 1960s and the 1990s found that extensive government programmes providing access to family planning only accounted for a tenth of fertility reduction (Miller, 2005). While family planning education and access to contraception are important, they do not play a large role in keeping families smaller. The main determinants of family size appear to be related to social factors and the cost-benefit analysis of having sex.

Population, sexual and reproductive rights

Up to a third of pregnancies are unwanted and 120 million couples do not have access to the contraceptive and family planning services they need (WHO). Yet conversations about sexual and reproductive rights are a fierce battleground. Beliefs that such rights undermine the traditional family, as well as encourage abortion and sexual promiscuity are common. Whether these beliefs are true, or even whether it matters if they are, are a distraction from productive public policies. As it currently stands; 3 million children die within the first week of life, 38 million people are HIV positive and each year 340 million people contract sexually transmitted infections (DFID). Moreover, improving sexual and reproductive health is a highly cost-effective development investment with both social and economic benefits, such as accelerating progress in combatting extreme poverty, education and hunger.

The access to and availability of contraception is clearly an important issue to confront in population policy. An unmet need for family planning is only part of the story. Three quarters of women in sub-Saharan Africa need but do not have access to family planning (DFID). Voluntary family planning saves lives through the reduction of unintended pregnancies, unsafe abortions, child mortality and improved maternal health. It also helps alleviate poverty by empowering women to finish their education and participate in the labour market.

It is important not to confuse a desire for family planning and contraceptive services, and their availability, with access. A lack of education, gender-based discrimination and cultural or religious opposition all act as barriers to access. At a national level, many countries seek to limit family planning through law, as can be seen in Iran's 2015 plans to outlaw voluntary sterilisation and restrict access to contraceptives. At the level of the individual family, statistics show that women desire fewer children than men (Westoff, 2010). Qualitative studies indicate that women frequently hide contraceptive use from their partners and that women are less likely to seek family planning services when given access with their husbands (Biddlecom and Bolaji, 1998).

The issue of the women's empowerment is much more significant in population policies than is normally recognised. Therefore, within the family bargaining power becomes important. In modern, patriarchal society the decision-maker is usually a man. A woman's bargaining power is typically affected by property rights, divorce policy, marriage markets, her independent resources, ability to earn her own income and her education level. Policies which directly affect the bargaining power of women within the family dynamic should therefore have an impact on family size. When thinking about the achievement of a sustainable global population, the empowerment of women should be a key consideration for policymakers.

Placing women at the forefront of population policies

Starting even from before birth there is a issue of missing women. Selective female infanticide and the denial or low prioritisation of food and healthcare to the girl child has been practiced for thousands of years, as a result of the lower status accorded to female children. Boys are breastfed for longer than girls and receive more food, healthcare and vaccinations (Jayachandran and Kuziemko, 2010). As a result, fewer girls than boys survive to adulthood and there is an estimated 450 million adult women in developing countries stunted as a result of childhood malnutrition.

Besides disparity in the mortality rate distorting the population, the malnutrition of girls contributes to national economic losses. The children of malnourished women are more likely to be born with a low birth weight, suffer from stunting, cognitive impairment, developmental problems and greater susceptibility to illness and disease — all hindering their development into productive members of society.

For the women themselves, malnutrition leads to a higher risk of complications during pregnancy, increased maternal mortality, increased susceptibility to infection and increased likelihood of transmitting

HIV. Moreover, malnutrition undermines a woman's capacity to participate actively in the labour force and care for her family, with a ripple effect throughout the national economy (Ransom and Elder, 2003).

Prior to the issue of discriminatory treatment and its impact on population, policies need to analyse the impact of sex-selective abortion and selective female infanticide. The generally higher income potential of men, greater capacity of boys to support their parents in old age and the custom of providing a dowry to girl children are all commonly cited as reasons behind the practices. In India, despite laws against sex-selective abortion, slogans such as "Spend 100 rupees now and save 10,000 later", alluding to future dowry costs, can be found brazenly advertising the procedure.

Famously, China's One Child policy, begun in 1978/9, allowed parents to have only one child. Birthing a second resulted in heavy fines, as well as the child being denied basic rights such as schooling, healthcare and housing. As pointed out by economist Amartya Sen in his 1990 article, *100 million missing women*, preference for sons has resulted in a huge disparity between the number of women and men in China. Besides the infanticide Sen explicitly comments on, rising technology has also allowed for an increase in sex-selective abortion. Current estimates are that there are 30 million more men than women in China.

This population disparity has very real social and economic consequences. Economist Lena Edlund estimates that for every 1% increase in China's sex ratio there is a 6% increase in the rates of violent and property crime. Moreover, in the areas of China with the greatest male-biased sex ratios we see a rise in alcoholism, drug abuse, gambling and the kidnapping and trafficking of women (Ransom and Elder, 2003).

The impact on population of selective female infanticide and the loss of women resulting from denial and neglect of food and healthcare cannot be underestimated. Declining numbers of girls available for marriage has correlated with a rise in illegal trafficking of women as well as increased rape and assault statistics. Besides the resulting human anguish, such actions also hamper the development of a productive society.

Another topic correlated with declining numbers of marriageable women is that of child marriage and forced marriage. With 15 million girls married before the age of 18 annually and two million girls under 15 giving birth every year, the practice of early marriage poses a real problem to the development of a sustainable global population (ICRW). There is an array of sexual and reproductive health risks stemming from early, undesired and unprotected sexual activity. The associations between early pregnancy and increased maternal and neonatal mortality and disability are well documented. A child born to a girl under the age of 18 has a 60% greater chance of dying in the first year of life than one born to an older mother. Furthermore, there are social costs to early marriage. High illiteracy rates among girls, greater risk of domestic and sexual violence, early divorce, prostitution and reduced participation in the labour force have all been repeatedly documented in studies (Ibid). Conversely, for each additional year in school a woman's first child is delayed by six to ten months (Murphy and Carr, 2007).

The treatment of children throughout the world can be seen as a response to their perceived value. Investment in the education and healthcare of a child requires both time and money; resources that many parents do not have, or are unwilling to provide. The reality of violence against children throughout the world is a challenge to the development of a sustainable and equitable global population. Violence against children is prevalent all over the world, with the risk of violence exacerbated by poverty. Studies indicate that 60% of children in Zambia, Morocco and Uganda have experienced physical punishment from family members. Of these, 16% reported that the most recent punishment left scars on their body. Moreover, 14% of children in Uganda and 5% of children in Morocco report experiencing deliberate neglect. In Swaziland, one third of women report experiencing some form of sexual violence as a child (ACPF).

The forms of mental, psychological, sexual and physical violence experienced by children do not take place in a vacuum. Hindering the health and development of children, the effects of violence can last well into adulthood, increasing both the risk of further victimisation and becoming a perpetrator of violence (WHO). A 2014 study by the Overseas Development Institute estimated the global economic impact and cost as a

consequence of psychological, sexual and physical violence against children could be as high as \$7 trillion. Both socially and economically, violence against children has a devastating effect, vital to be taken into account for sustainable population policies.

Population and the Global Policy Action Plan

The Global Policy Action Plan (GPACT) provides a best policy guide for policymakers worldwide. Within the plan, policy reforms are interlinked to promote human development, a healthy planet, peace and security.

Population issues present a challenge interlinked with other thematic areas of the GPACT and mean that successful and future-just population policies will have ripple effects in the other necessary steps towards a shared and sustainable global future. As the first reform advocated within the GPACT, responsible governance is vital in ensuring that population policies are sustainable, equitable and consider marginalised members of society such as women and children.

A belief in the importance of equity and dignity is at the heart of sustainable population policy. Building a sustainable future with fair conditions and better quality of life for the world's citizens is the key motivation behind the planning of such policies. Consequently, it is important that basic rights and responsibilities are protected. Sexual equality, the protection of children from violence and the eradication of child and forced marriage have particular relevance in terms of population policies. Similarly, the safeguarding and promotion of sexual and reproductive health rights enables full participation of women in social life, the labour market and education. Moreover, access to contraceptive services allows women and men to make informed decisions about their family life and therefore is critical to breaking the intergenerational transmission of poverty.

As another key area within the GPACT, problems posed to national and international peace and security by an excess of men resulting from gender discrimination and selective female infanticide should not be underestimated. As the world currently stands, wars and unnecessary military spending incur monumental costs while people lack basic food security, education and healthcare. Action to re-direct military spending should be directly beneficial to population policy as it allows resources to be invested for social and environmental benefit instead.

As a policy area within the GPACT, climate stability and the spread of renewable energy is essential in ensuring future populations are sustainable. Rising populations are expected to increase global consumption of non-renewable resources as well as live in an urban environment, meaning that a transition to renewable energies and regenerative cities is vital. Moreover, maintaining healthy ecosystems in the face of the growing pressures from an increased population is indispensable in ensuring a sustainable future.

A common wealth, where governments work towards an improved quality of life and a more equitable distribution of wealth requires a fundamental rethink of modern policy framework. In regards to population policy, increased social security and employment prospects will have a ripple effect as maternal health improves, family size decreases and an understanding of the economic contribution of women grows.

As the final topic within the GPACT, sustainable population policies offer an opportunity to develop entrepreneurship: both as a result of the increased population from which to draw skills in enterprise and design, as well as the impetus for creative solutions posed by the pressures of a growing global population.

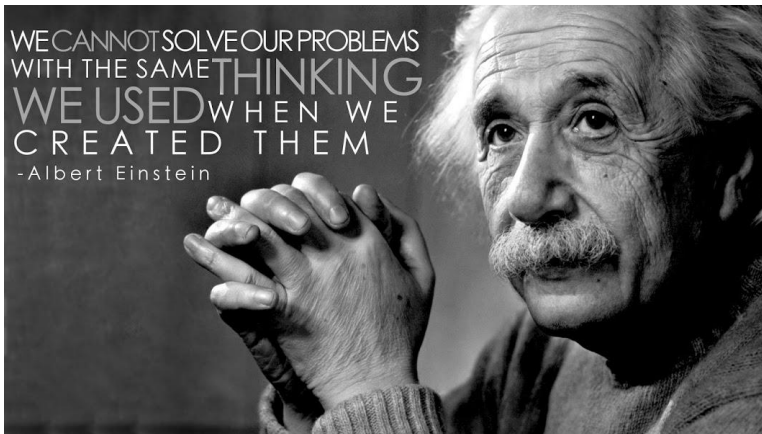
Population and future-just policy solutions

The vision of Future Justice advocated by the World Future Council suggests that policies designed fairly for the common good and to protect long-term interests will ensure the sustainability of the world's population. Intergenerational equity is vital in the development of population policies, as is a rejection of the concept of 'welfare' by which GDP growth is employed as the chief measure of success.

Future-just policy accepts and confronts population problems to lead to effective, adaptive solutions. It recognises that "economic health" in terms of GDP is not the same as economic value and human development. Population policies which follow the Seven Principles for Sustainable Development Law will ensure that the rise of the global population converts challenges into opportunities. Additional human resources can improve the world's human development, health, peace and security. Encouraging such steps through the recognition of existing policy solutions will allow for the dissemination of proven solutions, expanding both their reach and scope. The world's growing population is an urgent challenge. Embracing future-just policy solutions is the opportunity.

Resources:

World Population Clock <http://www.worldometers.info/world-population/>



References:

CPF (The African Child Policy Forum). (2014) *The African Report on Violence Against Children*. Addis Ababa: ACPF.

Becker, G. (1960) *Demographic and Economic Change in Developed Countries*. Princeton: Princeton University Press.

Biddlecom, A. and Bolaji M.F. (1998) Covert Contraceptive Use: Prevalence, Motivations, and Consequences. *Studies in Family Planning*. 29 (4).

DFID (Department for International Development). (2004) *Sexual and reproductive health and rights*. London: DFID.

Edlund, L., Hongbin, L., Junjian, Y., Junsen, Z. (2013) More Men, More Crime: Evidence from China's One-Child Policy. *The Review of Economics and Statistics*. 95 (5).

ICRW (International Center for Research on Women). (2007) *Child Marriage Fact sheets*. Washington D.C. : ICRW

Kremer, M. (1993) Population Growth and Technological Change: One Million B.C. to 1990. *The Quarterly Journal of Economics*. 108 (3).

Malthus, T. (1798) *An Essay on the Principle of Population*. Reprint. London: The Electronic Scholarly Publishing Project, 1998.

Miller, G. (2010) Contraception as Development? New Evidence from Family Planning in Colombia. *The Economic Journal*. 120 (545).

Montgomery, M. and Lloyd CB. High fertility, unwanted fertility, and children's schooling. In: Bledsoe CH et al., eds., (1999) *Critical Perspectives on Schooling and Fertility in the Developing World*. Washington, DC: National Academy Press.

Murphy, E. and Carr, D. (2007) *Powerful Partners: Adolescent Girls' Education and Delayed Childbearing*. *Population Reference Bureau*. [Accessed 12 March 2015].

Pereznieto, P., Montes A., Routier, S. and Langston, L. (2014) The costs and economic impact of violence against children. London: ODI

Ransom, E. and Elder, K. (2003) Nutrition of Women and Adolescent Girls: Why It Matters. *Population Reference Bureau*. [Accessed 12 March 2015].

Sachs, J. (2009) *Common Wealth: Economics for a Crowded Planet*. 2nd ed. London: Penguin Books

Sedgh, G., Singh, S., Henshaw, SK., Bankole., A. (2012) Induced abortion worldwide in 2008: levels and trends. *Lancet*. 379 (9816).

Seema, J. and Kuziemko, I. (2011) Why do Mothers Breastfeed Girls Less Than Boys? Evidence and Implications for Child Health in India. *The Quarterly Journal of Economics*. 126 (3)/

Sen A. (1990) More Than 100 Million Women Are Missing. *The New York Review of Books*. December 20.

Westoff, C. (2010) Desired Number of Children: 2000-2008. *DHS Comparative Reports*. (25).

WHO (World Health Organisation). (2006) Preventing Child Maltreatment: A Guide to Taking Action and Generating Evidence. Geneva: WHO.