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30 YEARS OF USAID EFFORTS IN POPULATION AND HEALTH DATA COLLECTION

World Fertility Survey: Origin And Development Of The WFS

By

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First, I wish to thank Martin Vaessen, Duff Gillespie, and Dick Cornelius for the invitation to speak here today. Secondly, I wish to remember our many valiant colleagues who helped create the USAID population program - Bill Boynton, Randy Backlund, Keyes McManus, Joe Speidel, Jerry Bowers, Liz Maguire, Gary Merritt, Bob Grant, Hal Pedersen, Bert Johnson, Irene Walker, Mimi Burch, Jim Brackett, and many more. Thirdly, I wish to salute all of you here today, still actively advancing USAID's population program. Somehow you have managed to persevere, despite many obstacles, on the long journey toward universal reproductive freedom. Though the world has come a long ways forward on the reproduction freedom trail these last 30 years, yet roughly half the world's people are still oppressed by unwanted, excessive reproduction. And where corrosive rampant excess fertility still continues - as in Afghanistan, Somalia, Rwanda, Liberia, and the Sudan - abject poverty and inescapable hopelessness breeds hatred and terrorism. Family planning action programs must be strengthened, especially in Africa, so that these poor people, too, may share this world's bounty.

Today our focus is upon the improved measurement of population, health, and development in the less developed world achieved by data collection programs accomplished with USAID assistance during the last 30 years.

While USAID traditionally provided assistance for the improvement of demographic and health data through a PASA with the Census Bureau, and by diverse directly-funded data collection projects - as will be detailed by Cornelius - it was by the creation and implementation of the World Fertility Survey and the follow-on Demographic Health Survey and Measure Surveys 1,2,3 that USAID exercised world leadership during the last 30 years to convert the LDC data-poor condition to its present data-rich condition.

Every large enterprise needs a confluence of favorable factors for their creation, and a timely spark to set in motion the events that ultimately produce the mighty enterprise. For the 30 Years of USAID Efforts in Population and Health Data Collection, with which we are concerned today, I believe ignition occurred on the 10th of June, 1971, as follows:

When it became known that the Congress was increasing AID 's population budget from \$100 million in FY 1971 to \$125 million in FY 1972, Technical Assistance Bureau leaders, in a preliminary discussion of FY 1972 population budget plans with Office of Population principals, on June 10, 1971, urged that additional social science research initiatives be funded during the coming fiscal year.

Later that afternoon, as I sat with my feet upon my desk in Rosslyn, Virginia, reflecting upon what new social science research initiatives the Office of Population, USAID, might best undertake during FY 1972, I asked myself the question: "In the whole field of social science research, what studies have proved truly useful for guidance of population and family planning programs?" Then, suddenly, it came to mind that if we had sound data from national surveys of fertility and fertility control behavior in many developing countries analogous to the data from the quinquennial U.S. surveys of "Growth of American Families," a vast improvement would be achieved in our knowledge of fertility levels and trends and the varying effectiveness of family planning programs in the developing world

I was immediately excited by the vision of what needed to be done and by the concept of creating a major project to undertake nationally representative sample surveys in many countries I then met with Joe Speidel, Chief of our Research Division, communicating to him my idea and enthusiasm for a "World Fertility Survey. " We soon sketched a plan for obtaining budgetary support, and within days submitted an initial FY 1972 budget request to Joel Bernstein, Technical Assistance Bureau Chief, requesting \$2 million for the start-up phase of a World Fertility Survey.

That launched USAID bureaucratic action toward development of the World Fertility Survey, a far-flung and complex enterprise, involving many agencies and countries, in a fifty million dollar enterprise during a dozen years. A detailed description of the structure, development, and findings of the WITS can be accessed on my Web site, www.ravenholt.com. Not only did it break much new ground in the field of international surveys, but it became the template for massive follow-on survey activities, especially the Demographic Health Survey (DHS), ably directed by Martin Vaessen during many years, and now Measure DHS Plus Survey No. 1.

Here I must mention the outstanding work done by Dick Cornelius, in monitoring USAID's investments in WFS and DHS during twenty years. He was ever the capable, wise, personable, and persevering glue in the WFS-DHS=CPS era. No one could have done it better. Likewise we must recognize the work of Duff Gillespie, whose consistent support, from various key positions, in the many decisions made along the way, managed to maintain a high level of support for USAID's data collection projects during many years. They deserve a big hand!

Martin Vaessen and the DHS staff have done a great work in adapting the revolutionary changes in computer technology to the survey and printing field. Being on the DHS mailing list, hardly a week goes by but what I receive another large report of the findings from another country survey! Dick Cornelius will give you the details on how USAID's data collection efforts developed during his long tenure as project monitor.

In conclusion, I wish to mention several WFS-DHS-CPS accomplishments:

- The strategy for USAID's family planning program, which we devised and published in 1968 - making the most effective means of fertility control readily available to poor women and couples throughout the less developed world (Exhibit 1) - has guided this far-flung program throughout; and WFS-DHS surveys have confirmed that all countries strongly implementing such programs have rapidly curbed their birth rates.
- The World Fertility Survey pioneered the concept and practice of a survey consisting of many national surveys linked by a central organization providing standardized methods, financial and technical assistance, collation and analysis of pooled data, with publication and dissemination of comparative findings. It broke much new ground and succeeded outstandingly.
- The WFS, CPS and DHS surveys transformed the LDC fertility and family planning results field from a data poor to a data rich condition. Many vital findings were put to immediate use for policy modification and program guidance. Many more insights were gleaned from accumulated data through additional second stage and third stage analyses. And WFS and CPS surveys done during the 1970s served as templates' and baselines for follow-on surveys done during succeeding decades.
- Because of USAID's successful support of well-designed surveys during the last 30 years, we have gained comprehensive knowledge of fertility levels and trends throughout the less developed world, as seen in the attached tables. Thirty years ago, Table 1, we had only guestimate knowledge of fertility levels and trends in many less developed countries; whereas, now, Table 2, we have reasonably accurate data for virtually all countries of the world; and whenever more is needed, well-tested sample surveys are rapidly done.
- Tables 1 and 2 reveal a pervasive downward shift in crude birth rates in the less developed countries to much lower rates during the three decades when USAID's population/family planning assistance program provided comprehensive contraceptive and financial assistance. In 1972, nineteen countries had birth rates of more than 50 births per 1000 population - very close to their traditional reproductive patterns; now, only Niger has a birth rate over 50. The move to lower fertility is pervasive, with 16 European countries now having less

than 10 births per 1000 population. Downward shifts in fertility have occurred in every continent, most powerfully in Asia and Latin America, and least powerfully in Africa; where 32 countries still have birth rates above 40 - more than 4 times the European rate of 10. Many countries have moved to lower birth rates with great speed: Thailand, with a birth rate level of 28 in 1972, is now at the level of 14; South Korea, also an early recipient of USAID assistance, is at the level of 13; both were early participants in the World Fertility Survey; and China - with 1.3 billion people - is now at the level of 13; less than the US level of 15, and nearing the European level of 10. These countries have demonstrated that fertility can be rapidly decreased *before* development by sound family planning programs, which then serve to pull the development cart forward.

- Poor countries with six or more births per family and birth rates above 40 per 1000 population cannot develop: because *child development costs (the cost of raising a child from birth to independence) approximates 10 times the per capita GNP* - leaving no savings nor energies for development. With rapid control of fertility, as in China, South Korea, and Thailand, resultant savings and energies are naturally directed at development - and the economy zooms! Africa must greatly improve its practice of birth control if it is to have any opportunity for development and any expectation of peace and growing prosperity.

I salute and commend all of you in the audience who have contributed to USAID's world-leading 30-year population/health data collection program - one of the principal works of USAID's population/family planning assistance program - which, with consistent Congressional support during the last 35 years, has contributed so greatly to curbing excess fertility in the less developed world - a quarter billion non-births -- that it ranks with the Marshall Plan for the reconstruction of Europe as the greatest works of United States foreign assistance since World War II.

Resources divided by Population equals The Human Condition!

Table 1

BIRTH RATES OF COUNTRIES, BY CONTINENT AND LEVEL: 1972

CONTINENT	BIRTHS PER 1,000 POPULATION											
	Less than 15	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50 or more			
AFRICA				Mauritius 25 St. Helena 28	Gabon * Reunion 32 Seychelles 32	Cameroon * Cape Verde 36 Egypt 37 Equatorial Guinea * Lesotho *	Comoro Islands 44 Congo, People's Republic of * The Gambia * Mauritania * Mozambique * Portuguese Guinea * Ivory Coast * South Africa 40 South West Africa * Spanish Sahara * Tunisia 40 Zaire *	Botswana * Burundi * Central African Republic * Chad * Ghana * Guinea * Kenya * Libya * Malaysia * Republic * Morocco * Nigeria * Senegal * Sierra Leone * Somalia * Southern Rhodesia * Sudan * Swaziland * Tanzania * Uganda * Upper Volta *	Algeria * Angola * Dahomey * Ethiopia * Liberia * Mali * Niger * Rwanda * Sao Tome and Principe * Togo * Zambia *			
	ASIA	Hong Kong 19 Japan 19	Taiwan (China) 24 Cyprus 22 Ryukyu Islands 22 Singapore 23	China ¹ People's Republic of 25 Israel 28 Korea, Republic of *	Macao * Viet Nam, North * Sri Lanka, Republic of 30	Brunei 38 India * Malaysia * Thailand * Turkey *	Burma, Socialist Republic of the * Union of * Khmer Republic * Korea, North * Kuwait * Laos * Lebanon * Mongolia 40 Philippines * Portuguese Timor * Vietnam, South *	Bangladesh * Bhutan * Gaza Strip * Indonesia * Iraq * Jordan * Maldives * Nepal * Pakistan * Qatar * Sikkim * Syrian Arab Republic *	Afghanistan * Bahrain * Iran * Oman * Saudi Arabia * United Arab Emirates * Yemen (Aden) * Yemen (San'a) *			
		OCEANIA		Australia 22 New Zealand 23			Fiji 30 Guam 34	American Samoa 36 New Caledonia 36 Tonga *	British Solomon Islands * Cook Islands 41 Gilbert and Ellice Islands * New Hebrides * Papua New Guinea * Trust Territory of the Pacific Islands * Western Samoa *	French Polynesia *		
		LATIN AMERICA	Canal Zone 17 Falkland Islands 17 Islar (Malvinas) 16	Argentina 21 Barbados 22 Montserrat 22 Netherlands Antilles * Trinidad and Tobago 24 Uruguay 22	Antigua 28 Bahamas 28 British Virgin Islands 29 Cayman Islands 27 Chile 25 Cuba * Granada, State of 28 Guadeloupe 28 Martinique 25 Puerto Rico 26 St. Christopher-Nevis-Anguilla 25	Costa Rica 32 French Guiana * Jamaica 34 St. Vincent & the Grenadines 33 Turks & Caicos Islands 32	Brazil * Dominica 36 Guyana 36 Panama 36	Belize * Bolivia * Colombia * Ecuador * El Salvador 42 Guatemala 42 Haiti * Mexico 43 Peru * Surinam 41 Venezuela *	Dominican Republic * Honduras * Nicaragua * Paraguay * St. Lucia 49 U.S. Virgin Islands 46			
			NORTH AMERICA		Canada 18 United States 16	Bermude 21 Greenland 24		St. Pierre and Miquelon 30				
			EUROPE	Austria 14 Belgium 14 Finland 13 Germany, East 12 Germany, Federal Republic of 11 Luxembourg 12 Sweden 14 Switzerland 14	Andorra 18 Bulgaria 15 Channel Islands 15 Czechoslovakia 17 Denmark 15 Faeroe Islands 19 France 17 Greece 16 Hungary 15 Isle of Man 15 Italy 17 Malta 17 Monaco 19 Netherlands 16 Norway 17 Poland 17 Romania 19 San Marino 18 Spain 19 U.S.S.R. 18 United Kingdom 15 Yugoslavia 18	Gibraltar 22 Iceland 22 Ireland 23 Liechtenstein 20 Portugal 20			Albania 35			

¹ Birth registration data relatively incomplete. Levels shown here are estimates based on sample surveys, censuses, and other sources.

² Source: Personal communication to R. T. Ravenholt, Director, Office of Population, Bureau for Population and Humanitarian Assistance, Agency for International Development.

Table 2
BIRTH RATES OF COUNTRIES, BY CONTINENT AND LEVEL: 2000

BIRTHS PER 1000 POPULATION										
CONTINENT	Less than 10	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50+
AFRICA 37.6			Mauritius 16 Seychelles 18 Tunisia 17	Algeria 23	Egypt 27 Libya 28 Morocco 25 So. Africa 25 Zimbabwe 29	Botswana 30 Gabon 32 Ghana 32 Kenya 34 Lesotho 33 Mauritius 34	Cameroon 37 Cape Verde 37 Cen Afr Rep. 38 Cote Ivore 36 Djibouti 39 Namibia 35 Senegal 38 Sudan 36	Benin 41 Burundi 43 Congo 44 Equa. Guinea 43 Eritrea 43 Ethiopia 40 Guinea 47 Gambia 42 Madagascar 43 Mayotte 40 Mozambique 43 Nigeria 41 Rwanda 42 Sao Tome 43 Swaziland 41 Tanzania 40 Togo 40 Zambia 42	Angola 48 Burkina Faso 48 Chad 49 Comoros 47 D.R. Congo 46 Guinea 47 Guinea-Bis. 45 Liberia 49 Malawi 46 Mali 49 Sierra Leone 49 Somalia 48 Uganda 48 W. Sahara 46	Niger 55
ASIA 20.6	Armenia 8 Georgia 9 [Hong Kong] 7 Japan 9	Azerbaijan 14 China 13 Cyprus 12 Singapore 12 South Korea 13 Taiwan 11 Thailand 14	Iran 18 Kazakhstan 15 North Korea 18 Sri Lanka 18 Tajikistan 19 Turkmenistan 18 UAE Emirates 18 Viet Nam 19 UAE Emirates 18	Bahrain 22 Brunei 22 Indonesia 23 Israel 21 Kyrgyzstan 20 Lebanon 23 Malaysia 24 Mongolia 20 Turkey 22 Uzbekistan 22	Bangladesh 28 Cambodia 28 India 26 Jordan 28 Myanmar 28 Philippines 28 Syria 31	Bhutan 34 East Timor 32 Kuwait 32 Oman 33 Pakistan 33 Qatar 31 Syria 31	Iraq 37 Laos 39 Nepal 35 Saudi Arabia 35	Afghanistan 42 Maldives 40 Palestin. Terr. 42 Yemen 44		
OCEANIA 17.9		Australia 13 N. Zealand 14 Norfolk 11	Niue 18 Pitcairn Is. 15 Xmas Island 16	Cocos 20 Cook Island 23 Fr Polynesia 21 Guam 24 Nauru 23 N. Caledonia 21 N. Marianas 20 Palau 21 Tuvalu 21 Wallis & Fut. 22	Am. Samoa 26 Fiji 25 Marshall Is. 26 Tonga 27	Fed. St. Micro. 32 Kiribati 32 Papua-N. Guin 34 Tokelau 33 W. Samoa 30	Vanatu 36	Solomon Is. 41		
LATIN AMERICA 23.1		Anguilla 14 Cuba 14 Martinique 14 Trinidad 14 US Virgin Is. 13	Argentina 19 Aruba 17 Bahamas 18 Barbados 15 Br. Virgin Is. 16 Cayman Is. 15 Chile 18 Dominia 16 Grenada 19 Guadalupe 17 Montserrat 17 Neth. Antilles 17 Puerto Rico 15 St Lucia 18 St Vincent 19 Uruguay 16	Antigua 22 Brazil 20 Costa Rica 21 Colombia 24 Guiana 21 Jamaica 20 Panama 21 St Kitts 20	Belize 29 Bolivia 32 Dominican R 26 Ecuador 28 Fr. Guiana 27 Mexico 26 Peru 26 Suriname 24 Turks/Caicos 27 Venezuela 25		Guatemala 36			
NORTHERN AMERICA 14.2		Bermuda 13 Canada 11 St. P S M 14	USA 15 Greenland 17							
EUROPE 10.1	Austria 9 Belarus 9 Bulgaria 9 Czech 9 Estonia 9 Germany 9 Italy 9 Latvia 8 Lithuania 9 Moldova 9 Russia 9 Slovenia 9 Ukraine 8	Andorra 11 Belgium 11 Bosnia 12 Channel Is. 12 Croatia 10 Denmark 12 Faroe Is. 11 Finland 11 France 13 Greece 10 Hungary 10 Ireland 14 Isles of Mann 11 Lichtenstein 12 Luxembourg 13 Macedonia 14 Netherlands 13 Norway 13 Poland 10 Romania 10 Slovakia 10 Sweden 10 Switzerland 10 United K'dom 11	Albania 17 Faroes 15 Gibraltar 16 Iceland 15	Monaco 20						

By R.T. Ravenholt, using latest data from the Population Reference Bureau, May 2002; and with help from John Chao and Scott Radloff.