

# NEW HORIZONS FOR FAMILY PLANNING: CHALLENGES FOR THE 1990s

A Presentation Developed

by

The OPTIONS II Project of The Futures Group

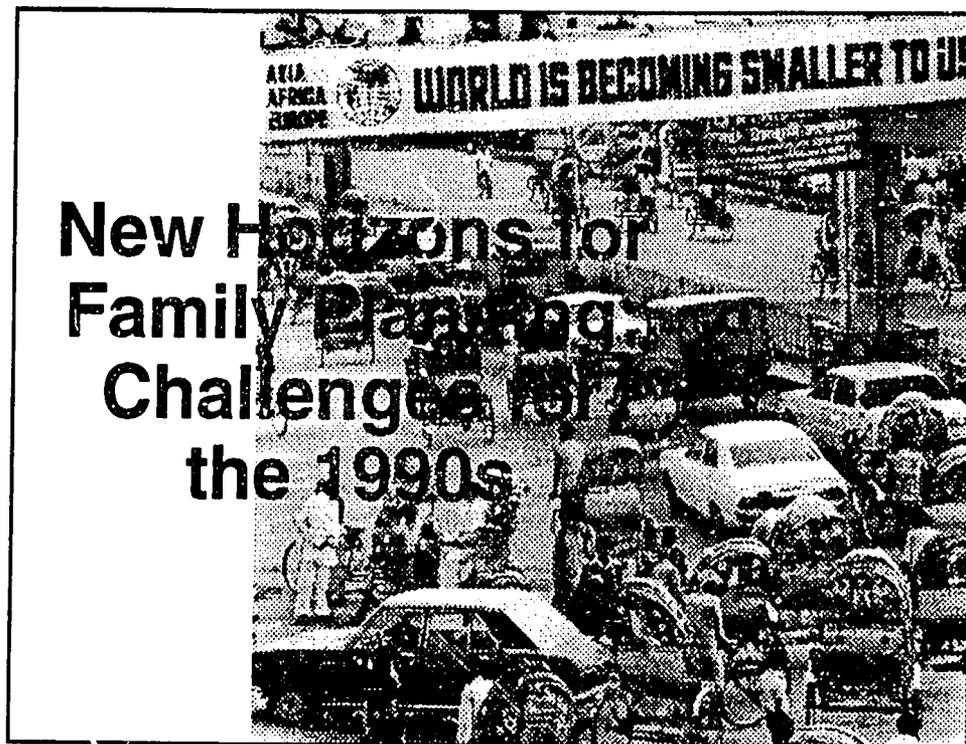
in collaboration with

International Planned Parenthood Federation

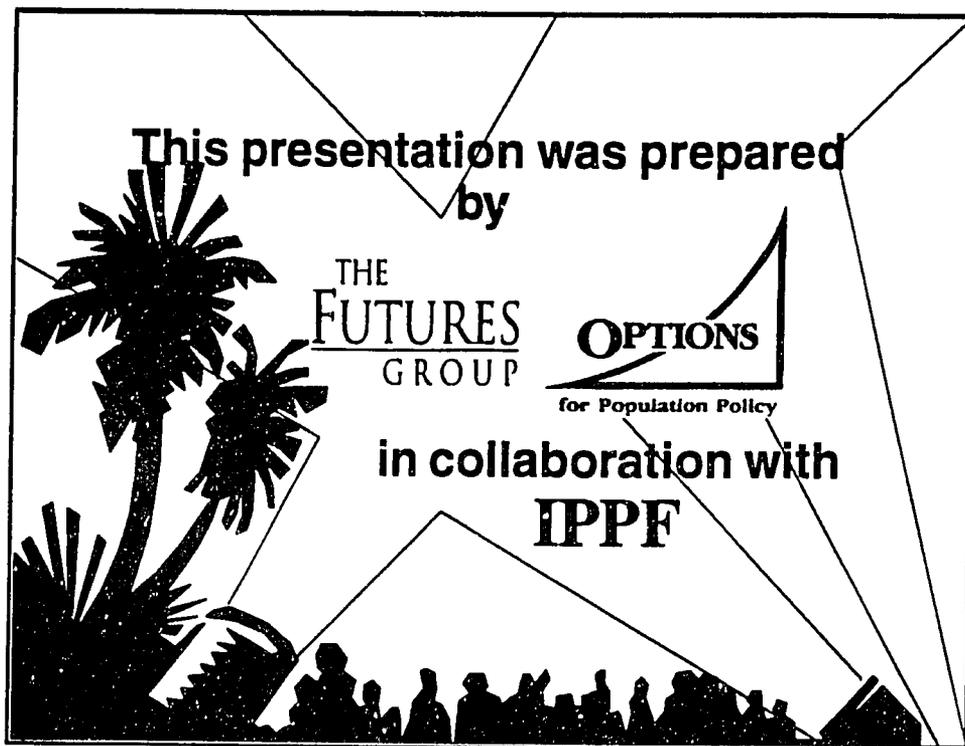
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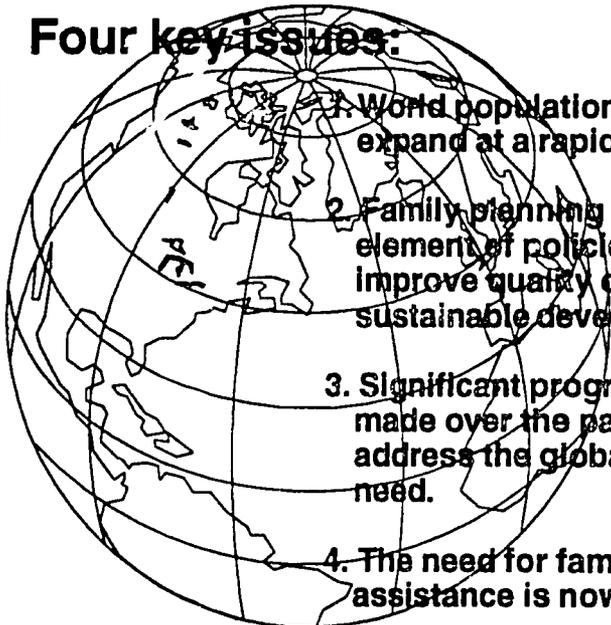
This presentation will focus on how increased funding for population and family planning programs in developing countries can bring about lower population growth. Stabilizing world population is a challenge facing all nations -- no single government or individual is exempt from experiencing the impact of our expanding population.



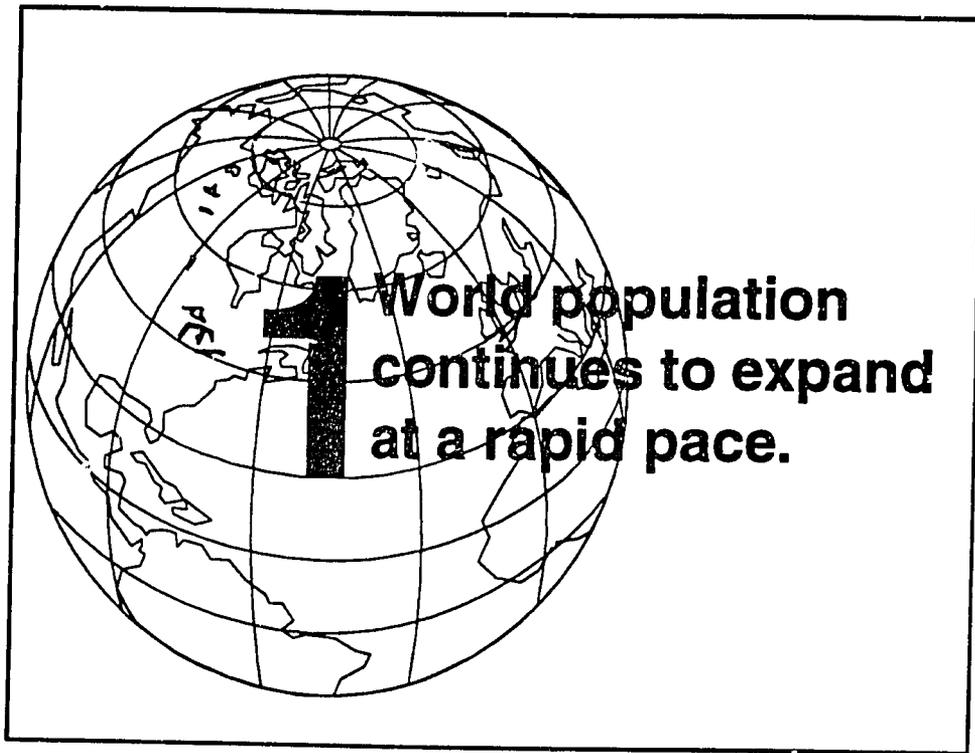
This 20 minute presentation was developed by the OPTIONS II Project of The Futures Group, in collaboration with the International Planned Parenthood Federation. The OPTIONS II Project is a five-year project funded by the U.S. Agency for International Development. The project helps developing countries formulate and implement policies that mobilize and effectively allocate resources for expanding family planning services.

The Futures Group is a private international consulting firm specializing in international health and population.

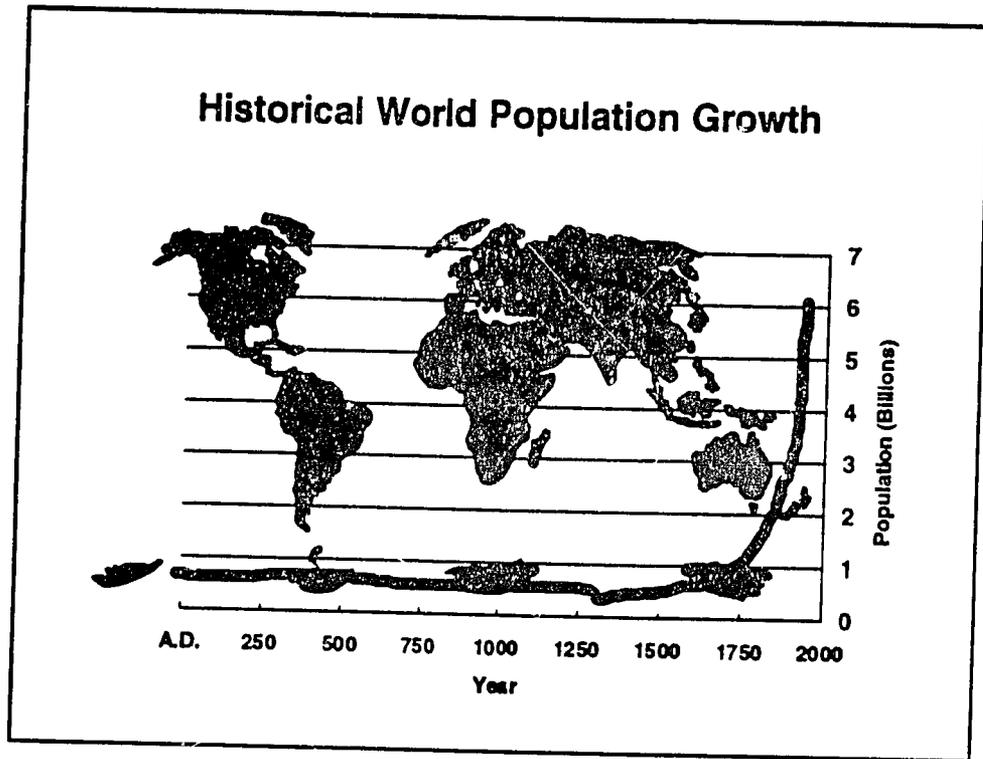
## **Four key issues:**

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- 1. World population continues to expand at a rapid pace.**
  - 2. Family planning is an essential element of policies designed to improve quality of life and foster sustainable development.**
  - 3. Significant progress has been made over the past 30 years to address the global family planning need.**
  - 4. The need for family planning assistance is now greater than ever.**

Highlighted in this presentation are four key issues which are critical to efforts to stabilize world population growth and increase access to family planning as we approach the 21st century.

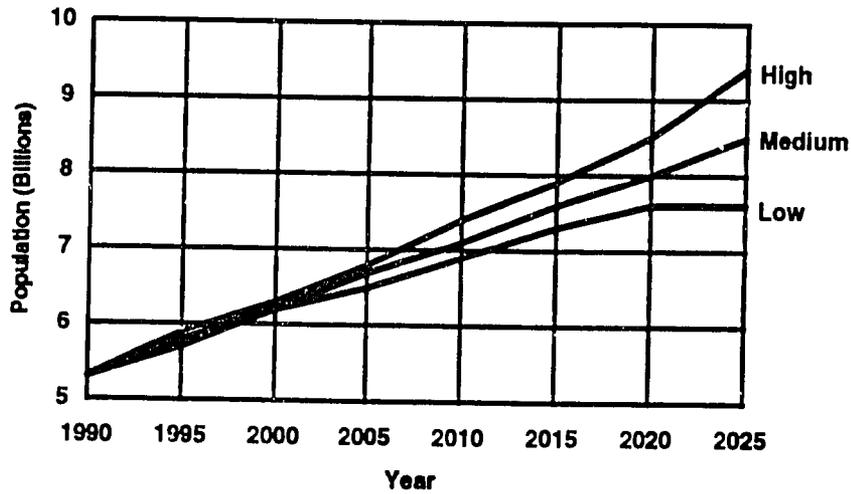


The first key issue is that world population continues to expand at a rapid pace.



The dramatic increase in population beginning about 1800 is not due to increased birth rates, but to lower death rates resulting from improved sanitation, nutrition, and health care. The population is now growing rapidly, adding another billion people every 11 to 13 years. The rate of growth is declining, but the actual number of people will continue to increase for several years. This is due to the young age structure of the population in the parts of the world where population is growing most rapidly -- developing countries.

### World Population Projections, 1990 - 2025

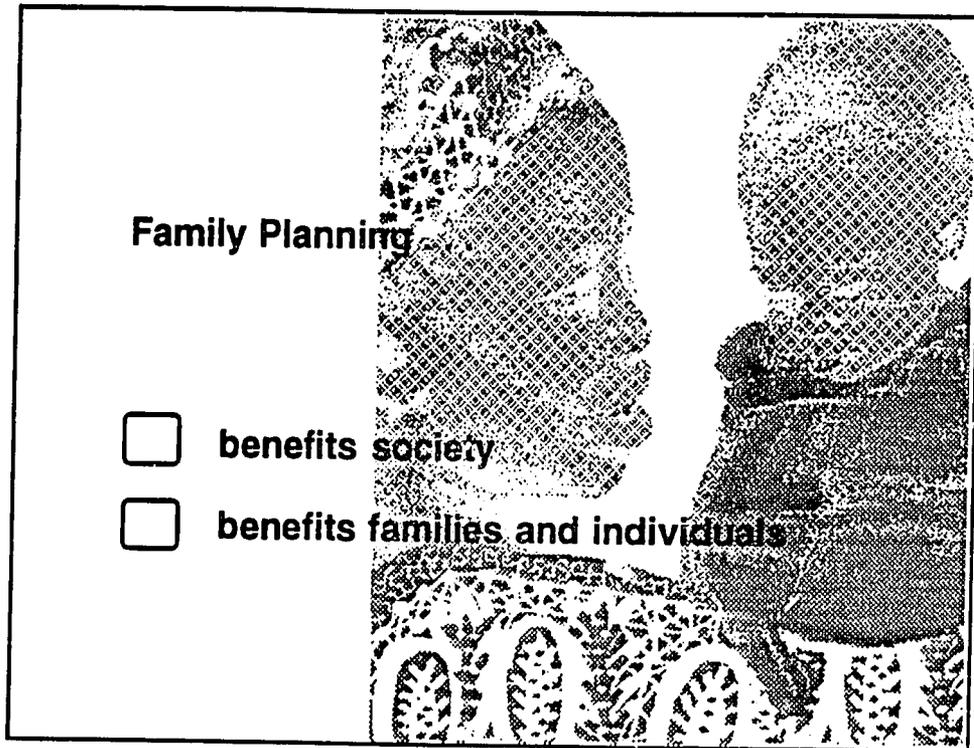


Looking ahead, the tremendous challenge in reducing world population growth can best be understood by looking at 3 projections of world population developed by the United Nations. While all of these projections include significant decline in the total fertility rate, they each illustrate different assumptions about the speed of this decline.

The projections show that world population will grow from approximately 5.3 billion in 1990 to approximately 8.5 billion in 2025, an increase of 3 billion people in 35 years assuming the "most likely course of events". (This medium assumption is based on achieving replacement level by the middle of next century.)

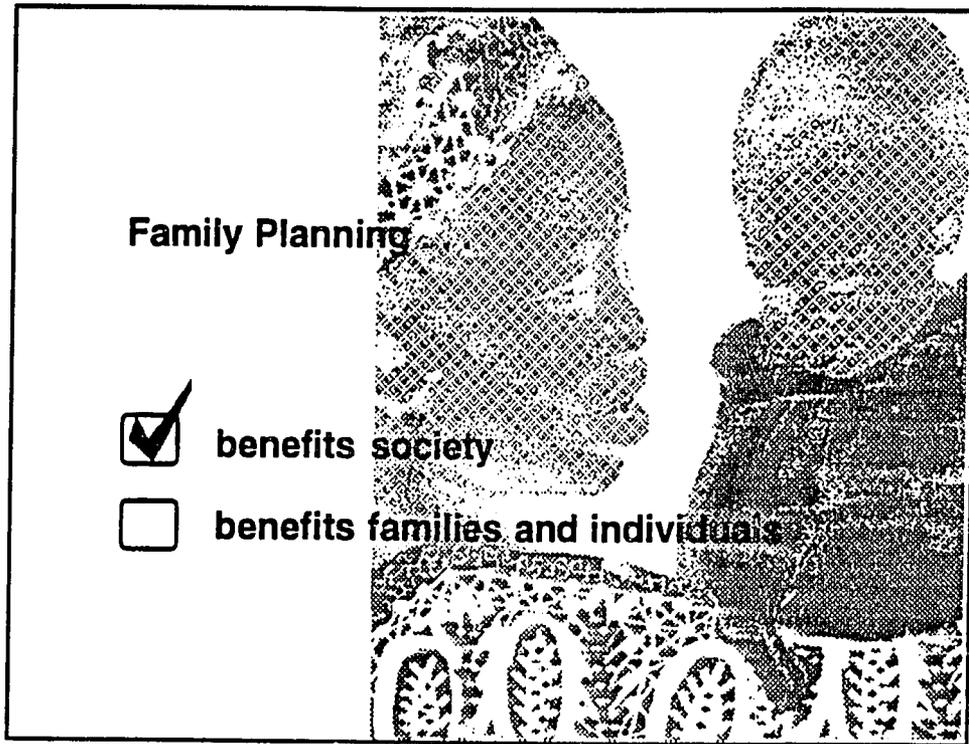


The second key issue is that family planning is an essential element of policies designed to improve quality of life and foster sustainable development.

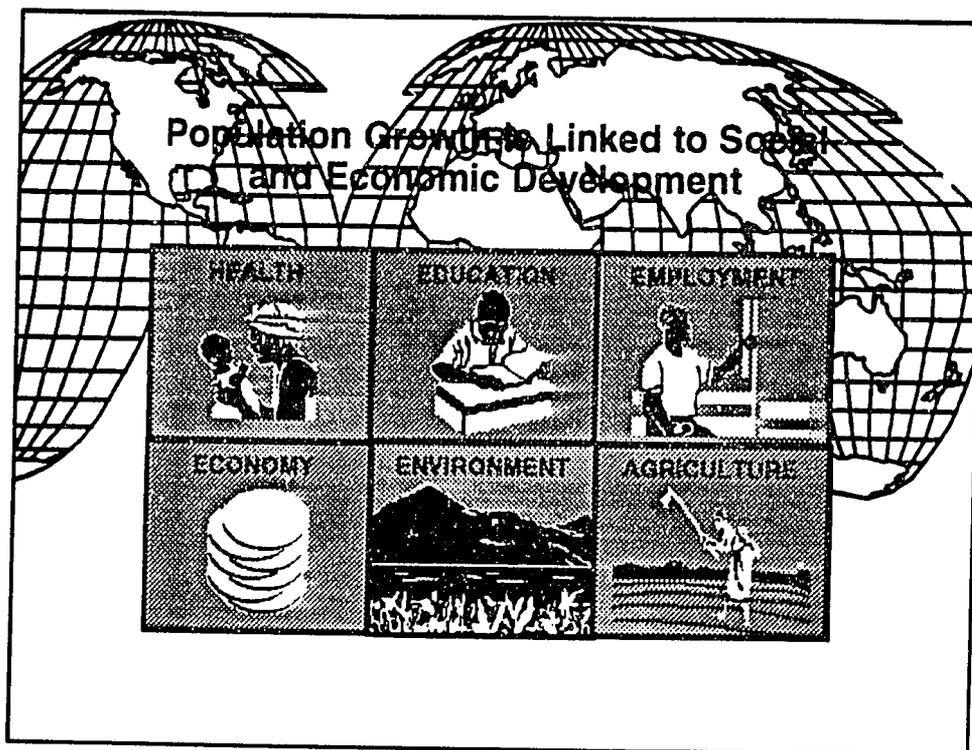


Population assistance, through family planning programs, directly affects fertility behavior.

Family planning benefits society as well as families and individuals.

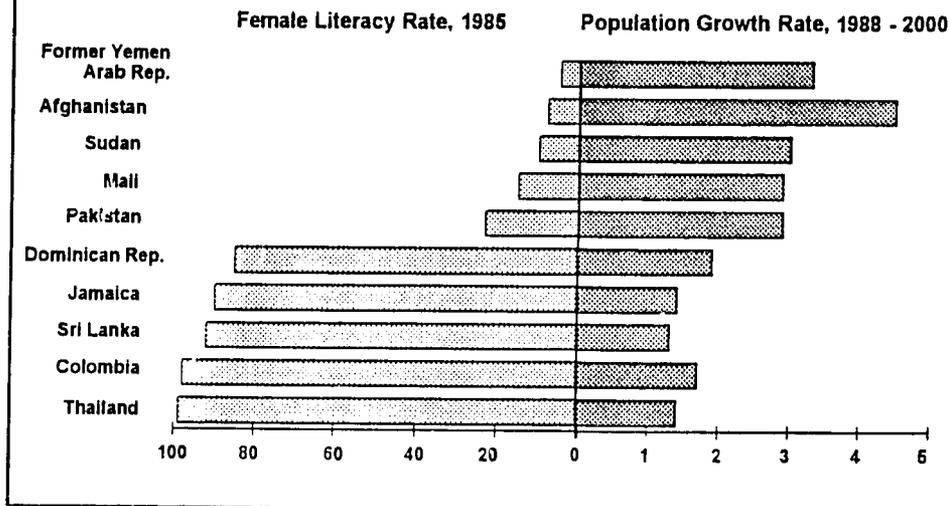


First let's look at how family planning benefits society.



Population growth is linked to sustainable economic development in terms of reaching national goals in health, education, employment, per capita income, environment, and agriculture.

## Women's Literacy and Population Growth



A slower population growth rate can result in increased education and job opportunities and greater access to social services.

As this graph depicts, there is a close connection between education and fertility: the more education women have, the more likely they are to have small families.

# Global Water Supply

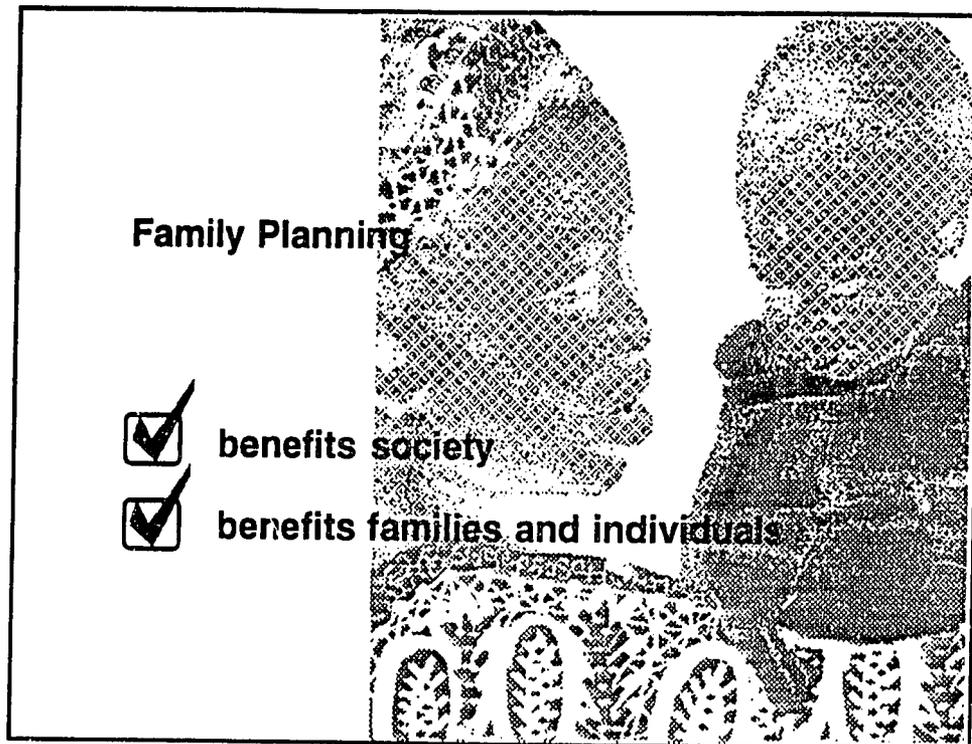


 Water stressed areas

 Water scarcity

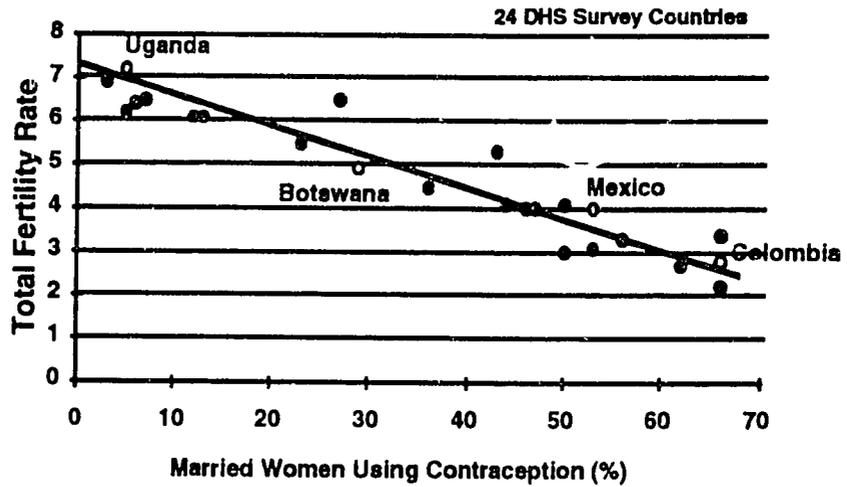
Conversely, rapid population growth threatens the global standard of living and availability of necessary resources. For example, as this graphic illustrates, the global water supply is currently stressed, and efforts to improve water supplies are being nullified by population growth.

Hence, family planning benefits society because it slows the rate of population growth, allowing for slower consumption of limited natural resources and more universal and improved social services.



Family planning also benefits families and individuals because it enables women around the world to freely choose the number and timing of their children.

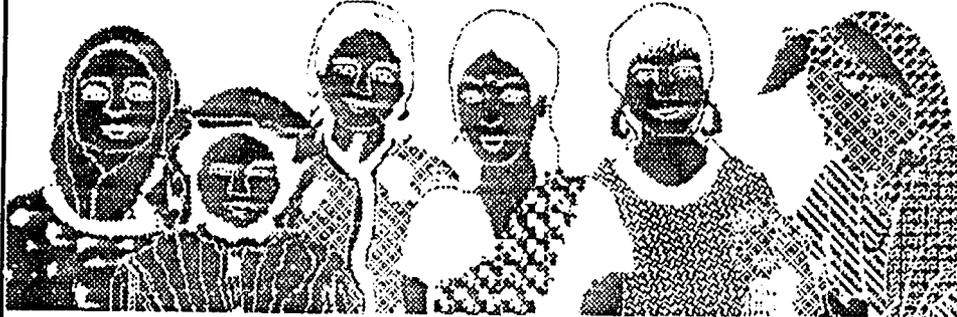
### Contraceptive Prevalence and Total Fertility Rate, 1986 -1990



We can see the impact of family planning on family size by looking at a graph comparing contraceptive use with the total fertility rate in selected countries. The y-axis shows the total fertility rate, or the average number of births a woman will have during her lifetime. The x-axis shows the percent of married women using some form of contraception.

As the percent of women using contraception in a country increases, the average number of children women have decreases. In Uganda, for example, less than 10% of married women are using some method of family planning, and, on average, women are bearing 7 children. In Colombia, on the other hand, over 60% of married women are using family planning, and women are having fewer than 3 children. It is clear that use of contraception has a direct impact on family size.

## **Family Planning can improve women's reproductive health**



- **by reducing transmission of STDs through increased use of condoms and spermicides**
- **by reducing reliance on abortion**
- **by decreasing the number of high-risk births**
- **by reducing maternal mortality**

Family planning also improves women's reproductive health by decreasing transmission of sexually transmitted diseases through increased use of condoms and spermicides, by reducing reliance on abortion, by decreasing the number of high-risk births, and by reducing maternal mortality.

**Central Asian Republics**  
**Trends in Fertility, Contraceptive Use, and Abortion**  
**(1990 Estimates)**

	Total Fertility Rate	Estimated Current Use of Modern Methods	Percentage of Pregnancies Terminating in Abortion
<b>Uzbekistan</b>	<b>4.0</b>	<b>5%</b>	<b>23%</b>
<b>Kazakhstan</b>	<b>2.7</b>	<b>26%</b>	<b>49%</b>
<b>Kyrgyzstan</b>	<b>3.7</b>	<b>11%</b>	<b>38%</b>
<b>Tajikistan</b>	<b>5.0</b>	<b>3%</b>	<b>20%</b>
<b>Armenia</b>	<b>4.1</b>	<b>12%</b>	<b>25%</b>

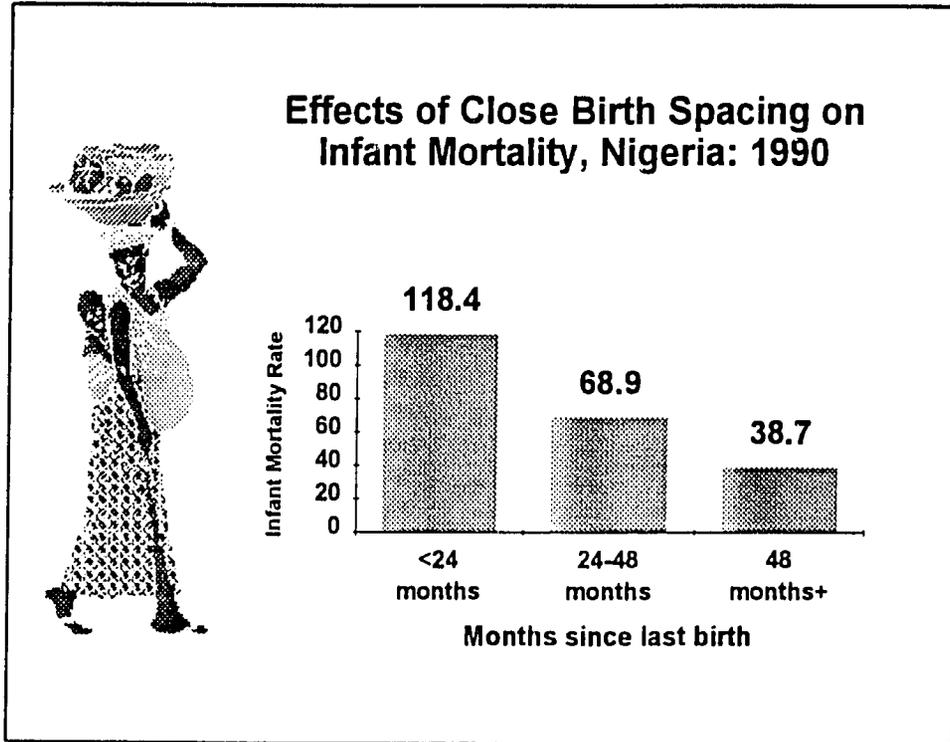
The incidence of induced abortion varies around the world, but some of the highest proportions are found in the Newly Independent States, where abortion serves as a primary method of conscious fertility control.

In five Central Asian Republics, between 20 to 49% of all pregnancies are terminated by abortion. In the case of Kazakhstan for example, nearly half of all pregnancies are terminated.



- In 1990 an estimated 500,000 women died of causes related to pregnancy and childbirth.
- Family planning alone could prevent between 25 and 40 percent of these deaths.

In 1990 an estimated 500,000 women died of causes related to pregnancy and childbirth. Family planning alone could prevent between 25 and 40 percent of these deaths by reducing the total number of children born, changing the ages at which women bear children, or increasing the length of time between births.



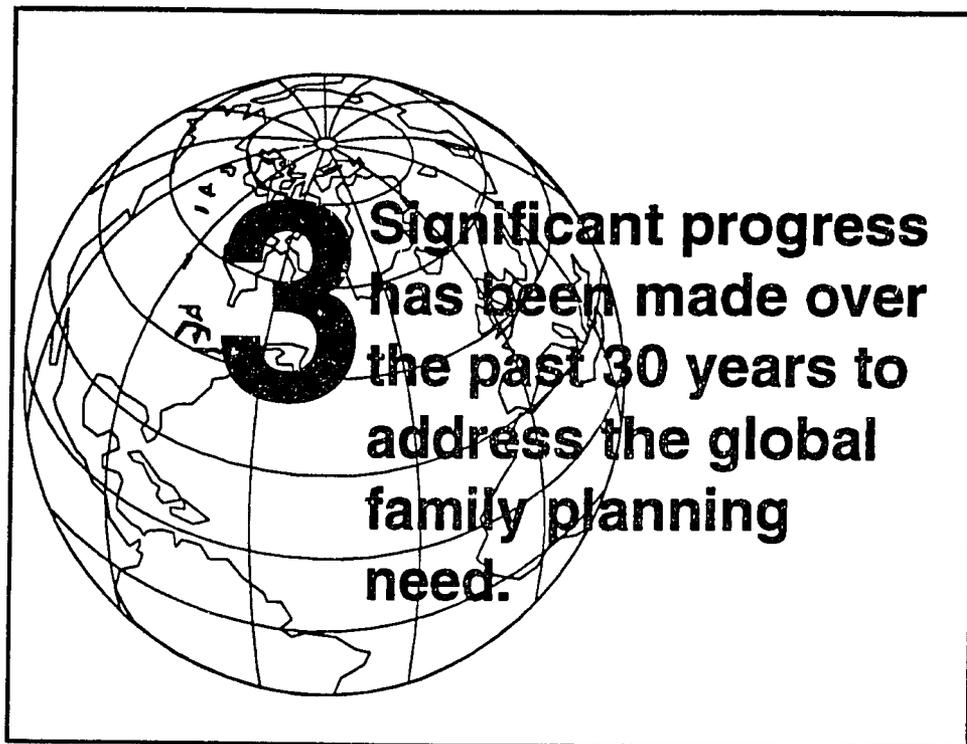
Using family planning to space births provides important benefits to mothers and children.

As you can see in this example for Nigeria, infant mortality rates are extremely high when a child is born less than 24 months after the previous birth. Infant mortality drops as the length of the birth interval (the number of months separating the births of two siblings) increases. This is because the longer the birth interval the more time the child has to be nourished and grow, and the more time the mother has to regain her strength.

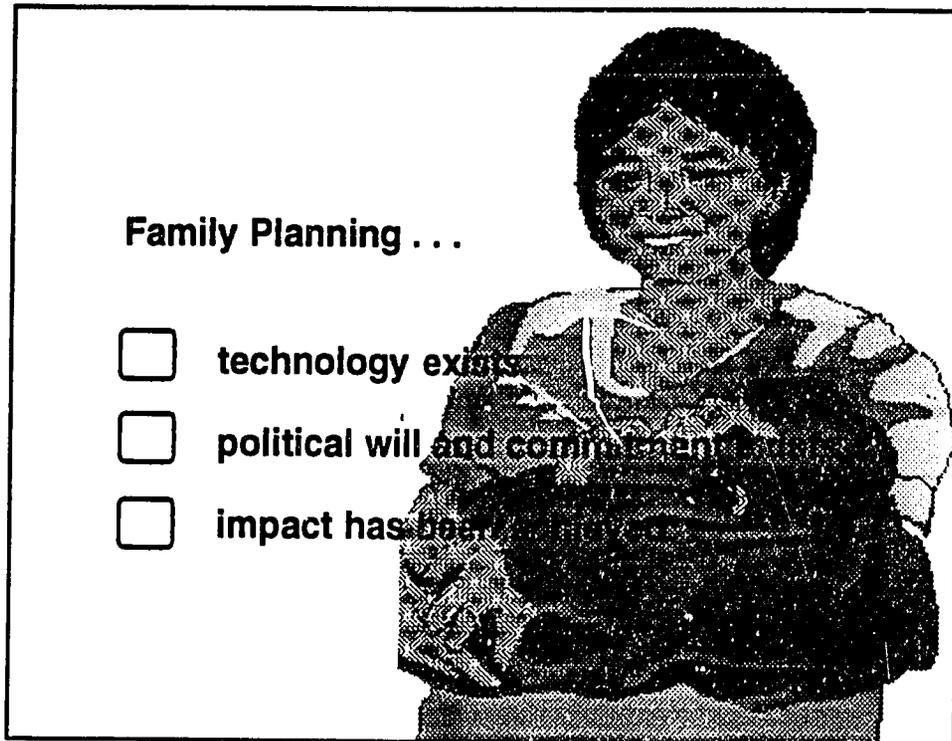


**At least 125 million women  
in the developing world currently wish to  
limit or space their births, but do not have  
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information and supplies.**

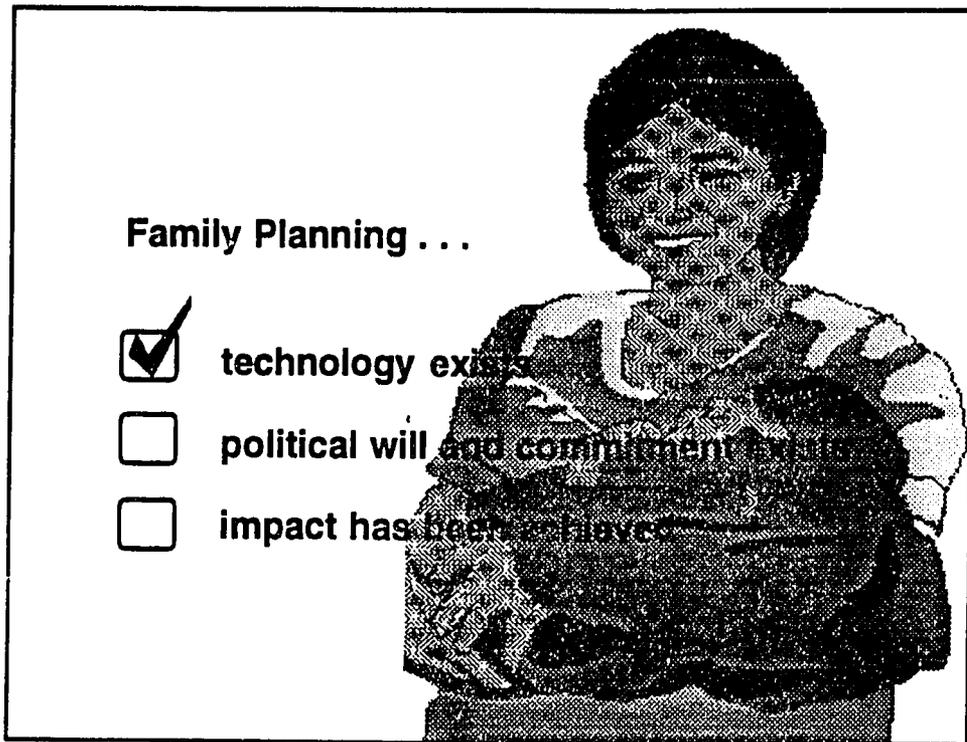
However, at least 125 million women in the developing world currently wish to limit or space their births, but unfortunately do not have access to family planning services, supplies, and information.



Nonetheless, thanks to the efforts of host-country governments and donors, significant progress has been made over the past 30 years to address the global family planning need.

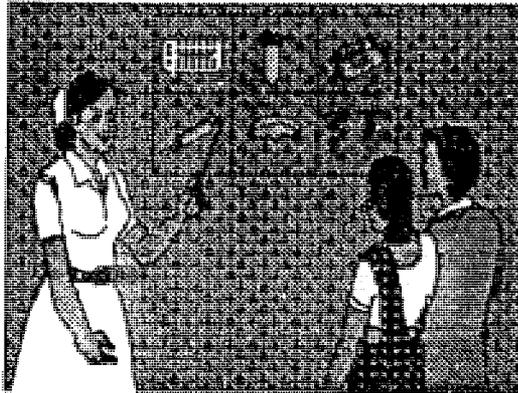


Progress has occurred as a result of improvements in contraceptive technology, political commitment to the development of family planning programs and increased resources provided to meet the demand for family planning.

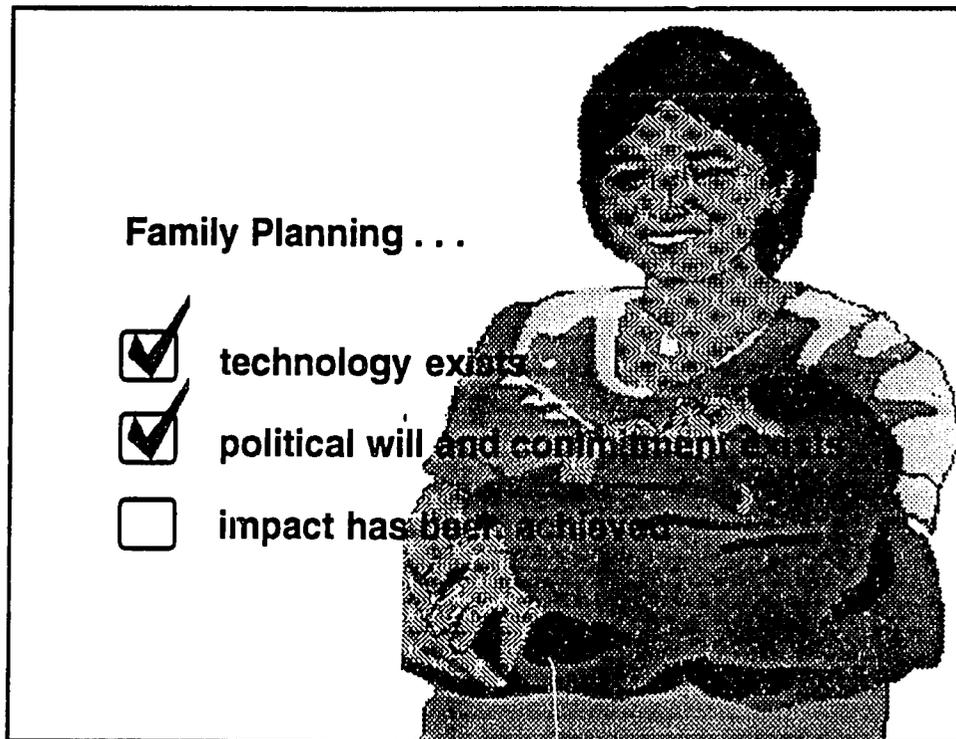


Family planning technology exists.

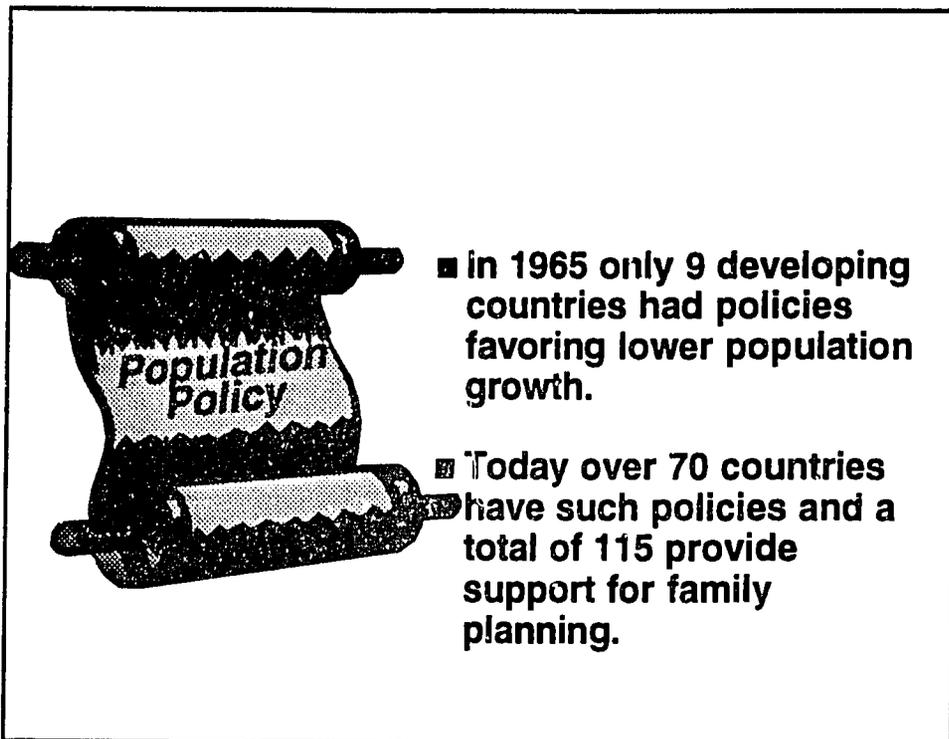
## **Family Planning Technology Exists**



**A variety of modern contraceptive methods are available. These methods are known to be safe and effective. There is a method to meet the needs of any woman or man.**

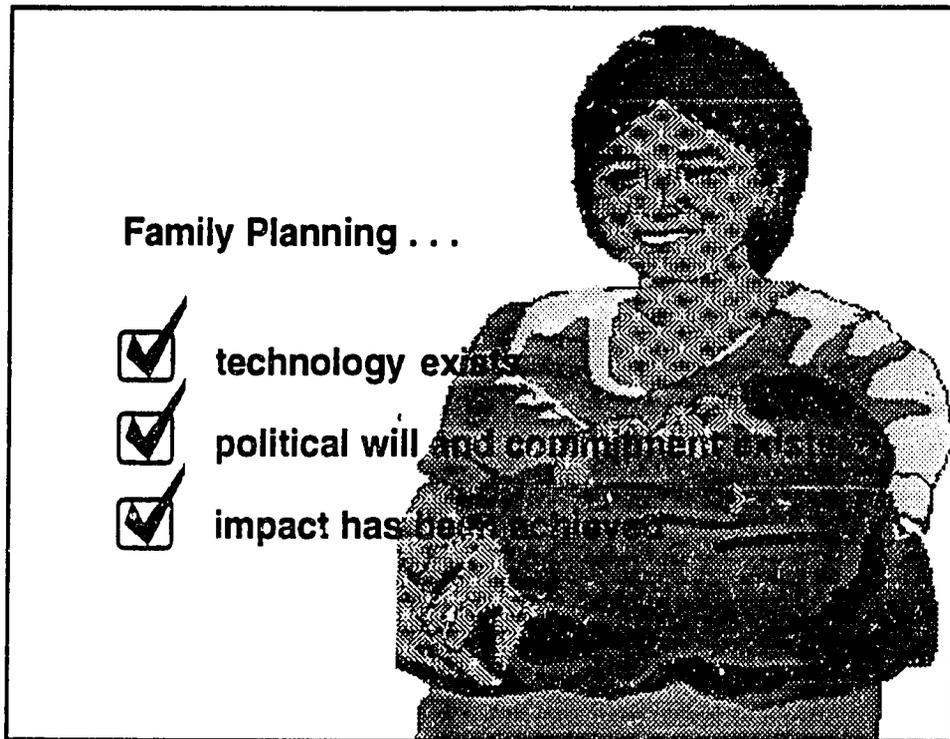


Political will and commitment to family planning programs are present in countries all around the world.



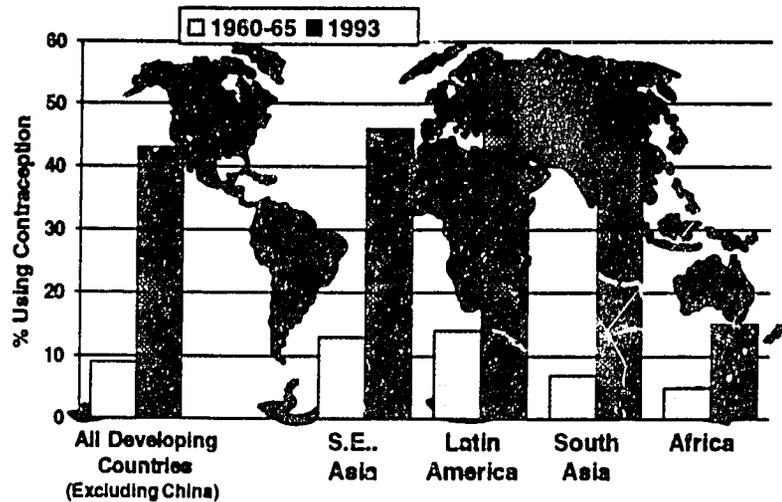
The policy environment supporting population activities and family planning programs has improved significantly between 1965 and the early 1990s. In 1965, only nine developing countries had policies favoring lower population growth. Now more than seven times that number have explicit policies that favor slowing population growth. In total, 115 countries currently support family planning programs.

Political will must be reflected in the resources provided to meet the demand for family planning.



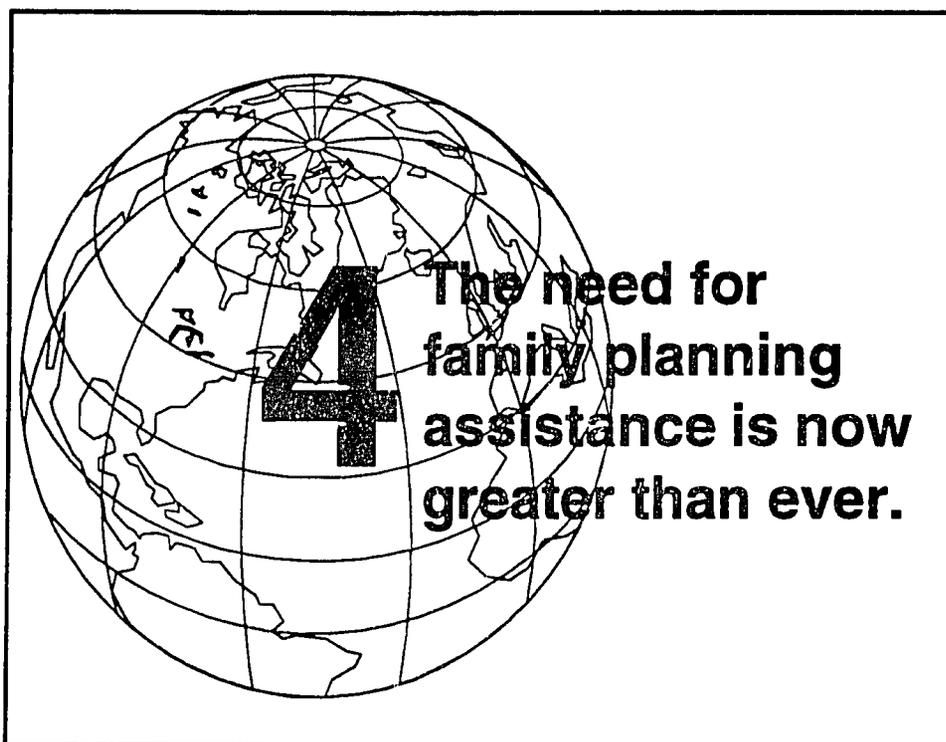
Family planning has shown significant impact in slowing population growth.

## Contraceptive Prevalence Trends by Region



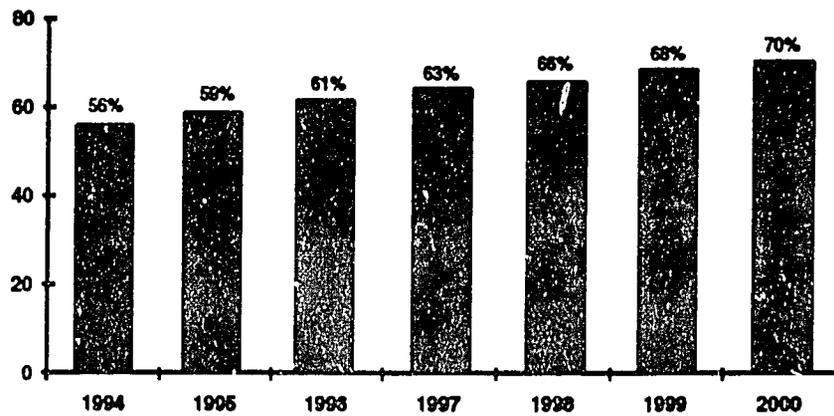
Since 1965, when family planning programs first began, developing countries have achieved significant progress toward increasing contraceptive use.

This trend is most pronounced in Latin America where contraceptive prevalence has reached an average level of 57%, resulting in a decline in fertility from just over 5 children per woman to approximately 3 children per woman. Similar achievements can be found in parts of Asia, yet Africa lags far behind.



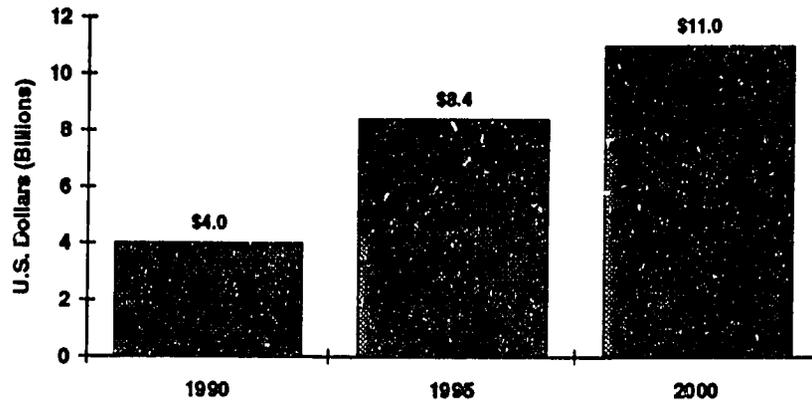
The need for family planning assistance is now greater than ever. Contraceptive needs will explode in the 1990s as a result of the large number of young people worldwide.

### Contraceptive Prevalence Projections for Developing Countries: 1994 - 2000



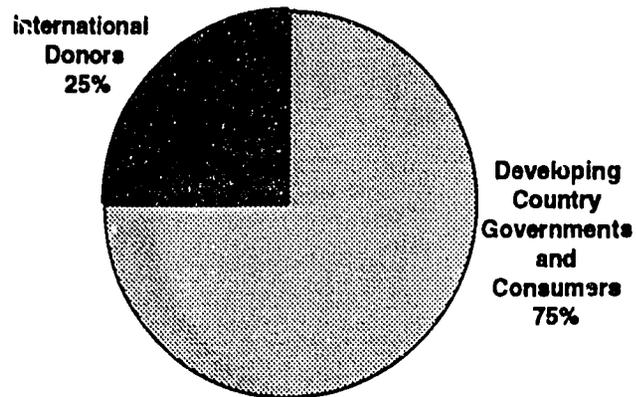
To serve the unmet need for family planning and to stabilize world population below the 10 billion level, an average of two children per woman will have to be reached early in the next century. This means that 70% of all women will need to use modern contraception by the year 2000.

## Required Expenditures



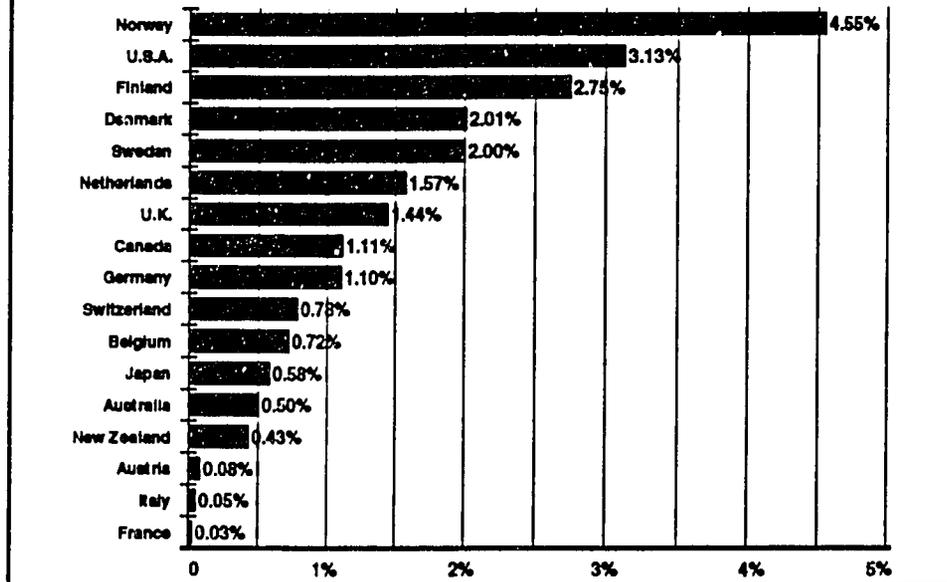
To make the 2-child family a reality by the year 2000, the number of family planning users will have to increase from about 300 - 350 million in 1990 to roughly 700 million by the end of the decade. The annual expenditures on family planning in developing countries will need to increase from \$4 billion in 1990 to approximately \$11 billion by the year 2000 (constant 1990 dollars).

### Source of Funding for Family Planning Programs: 1990



Donor support has been lagging in light of the increasing number of women of childbearing age in developing countries. Of the \$4 billion spent on family planning in 1990, only about \$1 billion was contributed by donors. The remaining 75% was provided by governments and consumers in the developing world.

### Population Assistance as a Share of Overall Development Assistance, by Donor Country: 1991

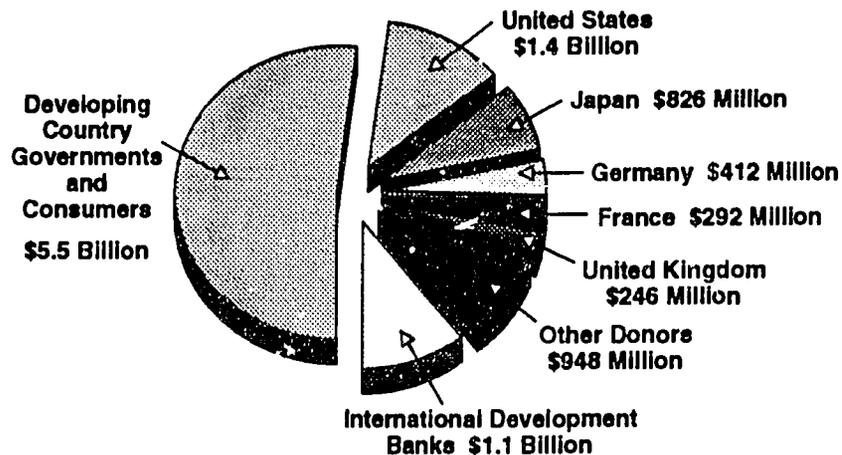


Furthermore, when examining the amount of population assistance provided by donor countries as a portion of overall development assistance, the percentage allocated to family planning programs is extremely low. In fact, in 1991 the donor countries spent (on average) only one percent of foreign aid on population.

For example, of the \$11 billion spent by Japan on development assistance, only \$40 million was allocated to population programs. In New Zealand, overall development assistance was \$1 billion, of which only \$420,000 was allocated to population programs.

## Year 2000 Model Family Planning Budget by Source

Total \$ 11 Billion



In order to achieve the goal of universal access to family planning services by the year 2000, wealthier donor nations will need to assume a larger share of the financial burden--that is, they will need to boost current contributions by increasing the amount of foreign aid allocated to family planning.

With over 75% of the world's population but less than 15% of the world's income, developing countries will not be able to raise the necessary funds and resources alone. While developing countries should be able to increase their current expenditures to pay for about half of the \$11 billion needed by the year 2000, the other \$5.5 billion will need to be drawn from donor contributions.

Developing countries and donors, however, must work together. The political and financial commitment of both is essential to achieve universal access to voluntary family planning as well as early population stabilization.

**We Can Accomplish More  
If We Work Together**



Stabilized and sustainable growth can only be attained if sufficient resources are available to meet demand. Donors can do more. Governments can do more. NGOs can do more.

Let's work together to face the family planning challenges as we approach the 21st century.

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