The Population Division of the Department of Economic and Social Affairs has prepared the official United Nations estimates and projections of the world’s population since 1951. The 2006 Revision of the World Population Prospects is the twentieth round of such revisions. The official estimates and projections prepared by the Population Division are used throughout the United Nations system as the basis for activities requiring population information. The 2006 Revision updates the 2004 Revision by incorporating the results of additional censuses from the 2000 round and recent specialized surveys providing data for the estimation of recent fertility and mortality levels. Population estimates and projections are an important input for the estimation of several of the indicators used to assess the progress made in achieving the internationally agreed development goals, including the Millennium Development Goals (MDGs).

According to the 2006 Revision, the world population will likely increase from 6.7 billion in 2007 to 9.2 billion in 2050. Most of the expected increase will be absorbed by the less developed regions, while the population of the more developed regions will hardly change.

As a result of declining fertility and increasing longevity, the populations of a growing number of countries are ageing rapidly. Between 2005 and 2050, half of the increase in the world population will be accounted for by a rise in the population aged 60 years or over, whereas the number of children (persons under age 15) will decline slightly. Furthermore, in the more developed regions, the population aged 60 or over is expected nearly to double (from 245 million in 2005 to 406 million in 2050) whereas that of persons under age 60 will likely decline (from 971 million in 2005 to 839 million in 2050).
The 2006 Revision confirms the diversity of demographic dynamics among the different world regions. While the population at the global level is on track to surpass 9 billion by 2050 and hence continues to increase, that of the more developed regions is hardly changing and will age markedly. As already noted, virtually all population growth is occurring in the less developed regions and especially in the group of the 50 least developed countries, many of which still have relatively youthful populations that are expected to age only moderately over the foreseeable future. Among the rest of the developing countries, rapid population ageing is expected.

Underlying these varied patterns of growth and changes in the age structure are distinct trends in fertility and mortality. Below-replacement fertility prevails in the more developed regions and is expected to continue to 2050. Fertility is still high in most of the least developed countries and, although it is expected to decline, it will remain higher than in the rest of the world. In the rest of the developing countries, fertility has declined markedly since the late 1960s and is expected to reach below-replacement levels by 2050 in the majority of them.

Between 2005 and 2050, half of the increase in the world population will be accounted for by a rise in the population aged 60 years or over, whereas the number of children (persons under age 15) will decline slightly.

Mortality in the established market economies of the developed world is low and continues to decline, but it has been stagnant or has even increased in a number of countries with economies in transition, largely as a result of deteriorating social and economic conditions and, in some cases, because of the spread of HIV. Mortality is also decreasing in the majority of developing countries, but in those highly affected by the HIV/AIDS epidemic, mortality has been increasing.

The HIV/AIDS epidemic continues to spread. The number of countries with a significant number of infected people in the 2006 Revision is 62, up from 60 in the 2004 Revision and 53 in the 2002 Revision. Although HIV prevalence in some countries has been revised downward since 2004 on the basis of newly available nationally representative data, the toll of the disease continues to be high and is expected to remain so, despite projected reductions in the prevalence of HIV/AIDS.

Lower projected levels of HIV prevalence depend on the realization of the commitments made by Governments in the 2000 Millennium Declaration¹ and the 2001 United Nations Declaration of Commitment on HIV/AIDS². In particular, the projected population trends depend on achieving a major increase in the proportion of AIDS patients who get antiretroviral therapy to treat the disease and on the success of efforts to control the further spread of HIV. In the 2006 Revision, the 62 countries considered to be highly affected by the HIV/AIDS epidemic include 40 located in Africa. In projecting the effect of the disease, it is assumed that by 2015, 31 of the most affected countries will manage to provide antiretroviral treatment to 70 per cent or more of the persons suffering from AIDS. In the rest of the affected countries, treatment levels are expected to be lower, reaching between 40 per cent and 50 per cent by 2015. It is further assumed that persons receiving treatment survive, on average, 17.5 years instead of the 10 years expected in the absence of treatment. Mainly as a result of these assumptions and owing to the downward revision of the prevalence of HIV/AIDS in countries where nationally representative data on the epidemic have become available, an estimated 32 million fewer deaths are projected to occur during 2005-2020 in the 62 countries most affected by the epidemic according to the 2006 Revision than would have occurred if death rates were the same as in the 2004 Revision. These changes also contribute to make the population projected to 2050 larger according to the 2006 Revision than according to the 2004 Revision (9.2 billion vs. 9.1 billion).

The urgency of realizing the reductions of fertility projected is brought into focus by considering that, if fertility were to remain constant at the levels estimated for 2000-2005, the population of the less developed regions would increase to 10.6 billion instead of the 7.9 billion projected by assuming that fertility declines.

Realization of the medium variant projections contained in the 2006 Revision is also contingent on ensuring that fertility continues to decline in developing countries. According to the 2006 Revision, fertility in the less developed countries as a whole is expected to drop from 2.75 children per woman in 2005-2010 to 2.05 in 2045-2050. The reduction

¹ See General Assembly Resolution A/Res/55/2.
² See General Assembly Resolution A/Res/S-26/2.
expected in the group of 50 least developed countries is even sharper: from 4.63 children per woman to 2.50 children per woman. To achieve such reductions, it is essential that access to family planning expands in the poorest countries of the world. The urgency of realizing the reductions of fertility projected is brought into focus by considering that, if fertility were to remain constant at the levels estimated for 2000-2005, the population of the less developed regions would increase to 10.6 billion instead of the 7.9 billion projected by assuming that fertility declines. That is, without further reductions of fertility, the world population could increase by twice as many people as those who were alive in 1950.

Other key findings resulting from the comprehensive review of past worldwide demographic trends and future prospects presented in the 2006 Revision are summarized below.

1. In July 2007, the world population will reach 6.7 billion, 547 million more than in 2000 or a gain of 78 million persons annually. Assuming that fertility levels continue to decline, the world population is expected to reach 9.2 billion in 2050 and to be increasing by about 30 million persons annually at that time, according to the medium variant.

2. Future population growth is highly dependent on the path that future fertility takes (figure 1). In the medium variant, the total fertility of the world declines from 2.55 children per woman today to slightly over 2 children per woman in 2050. If fertility were to remain about half a child above the levels projected in the medium variant, world population would reach 10.8 billion by 2050. A fertility path half a child below the medium variant would lead to a population of 7.8 billion by mid-century. That is, at the world level, continued population growth until 2050 is inevitable even if the decline in fertility accelerates.

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**Figure 1. Population of the world, estimates and projection variants, 1950-2050**

![Figure 1](image)
3. Because of its low and declining rate of population growth, the population of developed countries as a whole is expected to remain virtually unchanged between 2007 and 2050, at about 1.2 billion, according to the medium variant. In contrast, the population of the 50 least developed countries will likely more than double, passing from 0.8 billion in 2007 to 1.7 billion in 2050. Growth in the rest of the developing world is also projected to be robust, though less rapid, with its population rising from 4.6 billion to 6.2 billion between 2007 and 2050 according to the medium variant.

The population of the 50 least developed countries will likely more than double, passing from 0.8 billion in 2007 to 1.7 billion in 2050.

4. Slow population growth brought about by reductions in fertility leads to population ageing, that is, it produces populations where the proportion of older persons increases while that of younger persons decreases. In the more developed regions, 20 per cent of the population is already aged 60 years or over and that proportion is projected to reach 33 per cent in 2050. In developed countries as a whole, the number of older persons (persons aged 60 or over) has already surpassed the number of children (persons under age 15) and by 2050 the number of older persons is expected to be more than double the number of children in developed countries (see figure 2).

5. Population ageing is less advanced in developing countries. Nevertheless, the populations of a majority of them are poised to enter a period of rapid population ageing. In developing countries as a whole, just 8 per cent of the population is today aged 60 years or over but by 2050, 20 per cent of their population is expected to be in that age range.

6. Globally, the number of persons aged 60 years or over is expected nearly to triple, increasing from 673 million in 2005 to over 2 billion by 2050. In more developed regions the number of persons aged 60 or over will increase from 245 million to 406 million; in less developed regions, their number will more than triple, from 428 million in 2005 to 1.6 billion in 2050 (see figures 2 and 3). By then, the number of people aged 60 and over in the less developed regions will be roughly the same as the number of children under age 15 (see figure 3). Today, 64 per cent of persons aged 60 or over live in developing countries and nearly 80 per cent are expected to do so in 2050.

7. A feature of ageing populations is that the numbers of older persons increase faster the higher the age range considered. Thus, whereas the number of persons aged 60 or over is expected to triple, that of persons aged 80 or over (the oldest-old) is projected to increase nearly five-fold, from 88 million in 2005 to 402 million in 2050. Today, about half of the oldest-old live in developing countries and that share is expected to reach 71 per cent in 2050.

Globally, the number of persons aged 60 years or over is expected nearly to triple, increasing from 673 million in 2005 to over 2 billion by 2050.

8. Although the populations of all countries are expected to age over the foreseeable future, the populations of countries where fertility is still high will remain relatively young and will increase rapidly. High population growth rates prevail in a number of developing countries, the majority of which are least developed. Between 2005 and 2050, the populations of Afghanistan, Burundi, the Democratic Republic of the Congo, Guinea-Bissau, Liberia, Niger, Timor-Leste and Uganda are projected to increase at least threefold.

The pervasiveness of population ageing is reflected by the fact that 93 countries are projected to have median ages above 40 years in 2050, 48 of which are developing countries.

9. In sharp contrast, the populations of 46 countries or areas, including Germany, Italy, Japan, the Republic of Korea, most of the successor States of the former USSR and several small island States are expected to be smaller in 2050 than in 2005.

10. Population growth remains concentrated in the populous countries. During 2005-2050, eight countries are expected to account for half of the world’s projected population increase: India, Nigeria, Pakistan, the Democratic Republic of the Congo, Ethiopia, the United States of America, Bangladesh and China, listed according to the size of their contribution to global population growth.
11. The median age, that is, the age that divides the population in two equal halves, is an indicator of population ageing. At the world level, the median age is projected to increase from 28 to 38 years between 2005 and 2050. Europe has today the oldest population, with a median age of nearly 39 years that is expected to reach 47 years in 2050.

12. The median age is higher in countries having low fertility for long periods. In 2005, the median age in 13 developed countries or areas was higher than 40 years. The pervasiveness of population ageing is reflected by the fact that 93 countries are projected to have median ages above 40 years in 2050, 48 of which are developing countries.

Figure 2. Population of more developed regions by broad age group, estimates and medium variant, 1950-2050
Figure 3. Population of less developed regions by broad age group, estimates and medium variant, 1950-2050

A Population Database containing the results presented in *World Population Prospects: The 2006 Revision* is available on the United Nations Population Division’s website at www.unpopulation.org. The data in digital form can also be purchased on CD-ROM. For additional information and pricing, please visit the United Nations Division’s website or contact the office of Ms. Hania Zlotnik, Director, Population Division, DC2-1950, United Nations, New York, NY 10017, USA; Telephone: +1-212-963-3179, Fax: +1-212-963-2147; http://www.unpopulation.org.
WALL CHART ON WORLD ABORTION POLICIES 2007

The United Nations Population Division has issued an updated wall chart on abortion policies (previous versions of the wall chart were issued in 1994 and 2001). World Abortion Policies 2007 (Sales No. E.07.XIII.6) provides up-to-date and objective information on the legal status of induced abortion for the 195 Member States and non-Member States of the United Nations. To complement this information, data on abortion rates, total fertility and maternal mortality are also provided.

In the overwhelming majority of countries, 97 per cent, abortion is legally permitted to save the woman’s life.

The wall chart shows that in the overwhelming majority of countries, 97 per cent, abortion is legally permitted to save the woman’s life. Other grounds on which abortion is legally permitted are: to preserve the physical health of the woman (67 per cent of countries); to preserve mental health (64 per cent); in case of rape or incest (48 per cent); in case of foetal impairment (45 per cent); for economic or social reasons (34 per cent), and on request (28 per cent). In five countries, abortion is not permitted. Grounds on which abortion is permitted vary greatly between development groups. Developed countries tend to have less restrictive policies. Thus abortion is permitted upon request in 67 per cent of developed countries, compared to 15 per cent of developing countries. Similarly, 78 per cent of developed countries permit abortion for economic or social reasons, in contrast to 19 per cent of developing countries. The exception to this trend is abortion to save the woman’s life. In this case, 96 per cent of developed countries and 97 per cent of developing countries permit abortion.

Abortion is permitted upon request in 67 per cent of developed countries and in 15 per cent of developing countries.

Another feature of abortion policies is that they have generally become less restrictive over time. Since the mid-1990s, more than 50 countries have modified the grounds on which abortion can be legally performed. In the majority of these countries, the grounds on which abortion can legally be performed have increased.

Other key findings:

- Of the 66 countries for which data on abortion rates are available, 26 countries have rates ranging from 10 to 20 abortions per 1,000 women aged 15 to 44; 17 countries have abortion rates above 20 abortions per 1,000 women, and 23 countries have abortion rates below 10 abortions per 1,000 women. The countries with the highest abortion rates are, for the most part, the successor States of the former USSR.

- The use of contraception has been increasing steadily since the 1970s. Worldwide, 61 per cent of women who are married or in union use some form of contraceptive method and 54 per cent use a modern contraceptive method. In the less developed regions, contraceptive prevalence averages currently 59 per cent among women who are married or in union and in the more developed regions the equivalent figure is 69 per cent.

- During 2000-2005, total fertility was estimated to be 2.9 births per woman in the less developed regions and 1.6 births per woman in the more developed regions. However, total fertility is greater than 5 births per woman in 35 of the 148 developing countries. Overall, the countries with fertility higher than 5 births per woman account for 10 per cent of the world population.

- In 2000, the maternal mortality ratio in the less developed regions was 442 maternal deaths per 100,000 live births. In contrast, it averaged just 20 maternal deaths per 100,000 live births in the more developed regions. Of the estimated 529,000 maternal deaths worldwide in 2000, 68,000 deaths were reported to be caused by the complications of unsafe abortion.

WORLD FERTILITY DATA 2006 AND WORLD MARRIAGE DATA 2006: CD-ROMs

The United Nations Population Division has released two CD-ROMs entitled World Fertility Data 2006 and World Marriage Data 2006. Both CD-ROMs present data for countries or areas with at least 100,000 inhabitants in 2000. The data presented were derived from civil registration, population censuses and nationally representative sample surveys. For each country or area, data are presented for two dates: an earlier date centred around 1970 and a more recent date centred around 2000.

The CD-ROM entitled World Fertility Data 2006 contains data on fertility indicators organized in two datasets. The first presents period fertility indicators, such as the annual number of births, the crude birth rate, age-specific fertility rates, total fertility, the mean age at childbearing, the mean age at first birth, and extramarital births as a percentage of all births. The second dataset includes indicators relative to different cohorts, such as the average number of children ever born by age group, childless women as a percentage of all women by age group, or the proportion of women with three children or more among all women by age group. The values of the indicators presented are derived directly from the original data sources and have not been adjusted in any way for deficiencies in those sources.

The group of developing countries that excludes the least developed countries and that accounted for 69 per cent of the world population in 2000 is the largest contributor to the global reduction of fertility.

The data compiled confirm that fertility declined in most countries having total fertility estimates for the two periods considered. Thus, the median of all the total fertility estimates available dropped from 5.3 children per woman around 1970 to 2.6 children per woman around 2000. The smallest relative reduction in total fertility occurred in the least developed countries, whose median values dropped from 6.8 children per woman around 1970 to 5.4 children per woman around 2000, a 21 per cent reduction. In 2000, the least developed countries accounted for just 11 per cent of the world population and, consequently, their contribution to the global fertility decline was small. The rest of the developing countries, which accounted for 69 per cent of the world population in 2000, were the largest contributors to the global reduction of fertility. Thus, their median fertility levels dropped from 5.5 children per woman around 1970 to 2.8 children per woman around 2000, a reduction of 49 per cent. The developed countries, which in 2000 accounted for 20 per cent of the world population, already had fairly low total fertility around 1970, with a median value of just 2.3 children per woman. Nevertheless, nearly all of them experienced further reductions in fertility, reaching and maintaining levels that, over the long run, would be incapable of ensuring the replacement of generations. Around 2000, the median level of total fertility among developed countries was a low 1.4 children per woman.

The data available confirm that marriage is being increasingly postponed, especially in developed countries.

The World Marriage Data 2006 CD-ROM contains data on marriage indicators that are organized in two datasets. The first presents period marriage indicators such as the annual number of marriages, the crude marriage rate, the annual number of divorces, the crude divorce rate, and the mean age at first marriage. The second dataset contains marriage indicators referring to cohorts and other measures derived from them, including the percentage of persons who have never been married, those married or in union, those divorced or separated, those widowed, and those who have ever been married, each by sex and age group. The derived measures include the singulate mean age at marriage (SMAM).

The data available confirm that marriage is being increasingly postponed, especially in developed countries. Postponement tends to be more marked among women than among men and, consequently, the difference in the mean ages at first marriage between men and women has been declining. Focusing on the female SMAM, its median values increased by 6.9 years among the developed countries and by 1.8 years in the developing countries between the period centred in 1970 and that centred in 2000. At the same time, the ratio of the male to the female median values of the SMAM declined from 1.14 to 1.08 among the developed countries and from 1.17 to 1.12 in the
developing countries, indicating the declining difference between the two.

The two CD-ROMs are available for purchase by writing to the office of Ms. Hania Zlotnik, Director, Population Division, DC2-1950, United Nations, New York, N.Y. 10017, USA; Telephone: +1-212-963-3179, Fax:+1-212-963-2147. For prices and order forms, please consult the Population Division’s website at www.unpopulation.org.

PROCEEDINGS OF THE UNITED NATIONS EXPERT GROUP MEETING ON THE SOCIAL AND ECONOMIC IMPLICATIONS OF CHANGING POPULATIONS AGE STRUCTURES

The Proceedings of the United Nations Expert Group Meeting on the Social and Economic Implications of Changing Population Age Structures have been released. The Meeting was held in Mexico City, Mexico, from 31 August to 2 September 2005, and resulted from the collaboration between the United Nations Population Division and the Consejo Nacional de Población (CONAPO) of Mexico with the support of the National Institutes of Aging (NIA) of the United States. The proceedings of the Meeting include a report of the deliberations and edited versions of the contributed papers.

The meeting highlighted the important variations in population age structures at the international level. Participants noted that most developed countries had begun the transition to low fertility, early in the twentieth century if not before, and currently had relatively high and increasing proportions of older persons. In contrast, most developing countries had started the transition to lower fertility in the 1960s or later and several still had relatively young populations. However, because the transition to low fertility had been very fast in many developing countries they would undergo a faster ageing process than their counterparts in the developed world. Having established these facts, the meeting proceeded to discuss the social and economic implications of population ageing, including regional specificities and more general aspects, such as the rising proportion of women among the elderly and the vertical extension of families brought about by increasing longevity.

Several of the papers presented stressed that the economic changes associated with population ageing varied according to policy environment. While in some countries the period when the support ratio (the ratio of the number of persons of working age to the number of children and older persons) increased had been accompanied by higher economic growth, in others the potential opportunity to increase savings and investment that an increasing support ratio brought had not been used effectively. Participants agreed, therefore, that the “demographic dividend” associated with an increasing support ratio represented just a potential for enhanced economic growth, which might be diminished or even negated by unfavourable policies. In countries that had realized the greatest benefits from the demographic dividend, the period of increasing support ratios had invariably been accompanied by significant investments in building human capital through education. To realize the demographic dividend it was also important to increase employment and provide decent jobs for the growing population of working age. Indeed, a rise in the number and proportion of job seekers might at times be viewed more as a challenge than as a bonus.

In countries that had realized the greatest benefits from the demographic dividend, the period of increasing support ratios had invariably been accompanied by significant investments in building human capital through education.

The meeting also considered the idea that population ageing could potentially produce a “second demographic dividend”, even if the support ratio ceased to increase and the proportion of older persons continued to increase. A number of papers suggested that, as people realize they will most likely live longer than in previous generations, their incentive to save in order to defray consumption in old age increases. Hence, population ageing has the potential to increase savings and wealth, a process that would deepen investment and accelerate economic growth. However, as with the “first demographic dividend”, realization of the “second demographic dividend” would depend on adopting the right policies to promote savings and investment. Empirical studies were under way to ascertain to what extent a second demographic
dividend was indeed being accrued by countries that were already far advanced in the transition to an older population. The case of Japan was the focus of one of the papers presented at the meeting.

The papers included in the proceedings of the meeting indicate that most authors concur in considering that population ageing will affect labour market institutions and policies. In order to adapt to some of the likely consequences of population ageing, migrant workers may be admitted in order to address labour imbalances but there is agreement that immigration cannot be considered as “a solution” for a decreasing labour force. Other responses discussed at the meeting include promoting the labour force participation of women and delaying the effective age at retirement by encouraging more people to work until the legal retirement age and by increasing that retirement age.

As people realize they will most likely live longer than in previous generations, their incentive to save to defray consumption in old ages increases. Hence, population ageing has the potential to increase savings and wealth, a process that would deepen investment and accelerate economic growth.

The impact of population ageing on social security is already being felt in many developed countries where pension systems are reaching maturity. In developing countries, the most pressing issue is to extend coverage to excluded population groups, especially workers in the informal sector, women who often lack a continuous employment history, rural agricultural workers and migrants. In many recently reformed pension systems in Latin America, coverage and contribution rates remain low and administrative fees are high. In developing countries lacking universal pension coverage, many older persons rely on transfers from their children or other relatives. Estimates of intergenerational transfers in selected countries indicate that they are substantial and include both important public and private components. The papers presented include analyses using generational accounting procedures, which suggest that significant intergenerational imbalances exist in some countries, such as Argentina and Brazil.

In most countries, informal support transfers are frequent between family members of different generations. Although studies in developing countries have found a preponderance of older persons receiving monetary transfers and material goods from their children, significant proportions of older people, especially the “younger-old”, also provide material support to their children. In addition, older persons often provide care to grandchildren as well as other practical and emotional support.

A major concern for policymakers is whether the provision of formal support serves to “crowd out” rather than to complement family support for those needing assistance. The issues are complex, since there are many dimensions of “care”, which differ in the degree to which family and formal services can be substitutes of one another. There is evidence from both developed and developing countries that family members continue to provide assistance even when formal assistance is available, and that needy older persons are likely to benefit from having both types of assistance. A full consideration of the issues also requires attention to the needs of caregivers and the costs to them, including opportunity costs, of providing care. Programmes allowing older persons to remain economically and physically independent would also reduce stress on the family. Efforts to promote the social integration of older persons and ensure that support is available for those who cannot count on their families for such support need to be redoubled.

In developing countries lacking universal pension coverage, many older persons rely on transfers from their children or other relatives.

Funding of health care for an ageing population is also a serious challenge. The “Seguro Popular”, the operative arm of Mexico’s System of Social Protection in Health, provides a model for a novel approach to the health challenges posed by the changing causes of death related to population ageing in middle-income developing countries. The programme aims at extending health insurance to people lacking coverage, including older persons. Thanks to the programme, the proportion of households affected by high health expenditures that can have catastrophic effects on family budgets has decreased markedly.

Lack of reliable and comparable information on the health status of older persons in developing
countries hinders the development of appropriate policy responses in relation to health and health costs. Progress in this regard was documented in a paper considering the results of surveys on health status of the elderly conducted in the cities of seven countries in Latin American and the Caribbean. The surveys go beyond self-reported health assessments, which are not always an appropriate basis for international comparisons. By making allowance for the use of biomedical testing for the measurement of biomarkers in the sampled population and collecting simultaneously information on health status using standard questionnaires, the surveys have the potential of providing crucial information for the study of health trends and differentials.

In sum, the Proceedings of the United Nations Expert Group Meeting on the Social and Economic Implications of Changing Population Age Structures provide a comprehensive and rich overview of the major challenges facing societies that are undergoing population ageing and of the possible strategies to address them. For access to this publication please visit the Population Division’s website at www.unpopulation.org.

WORLD POPULATION AGEING 2007

The second edition of the report entitled World Population Ageing was released in 2007. This edition updates the first one released in 2002, in conjunction with the Second World Assembly on Ageing, and in an effort to provide users with comprehensive information on population ageing, it incorporates a number of new variables. As the first edition did, the 2007 version provides a description of global trends in population ageing and includes a series of indicators of the ageing process presented by development groups, major areas, regions and countries or areas. This report provides the demographic basis for the follow-up activities of the Second World Assembly on Ageing.

The report shows that the world’s older population is growing at a considerably faster rate than the total population. Worldwide, the percentage of the population aged 60 years or over has increased from 8 per cent in 2050 to 11 per cent in 2007 and is projected to reach 22 per cent in 2050. There has been and will continue to be considerable variation in the timing, levels and patterns of population ageing among major areas and countries. In developed countries as a whole, the proportion of older persons already exceeds that of children and by 2050 it is expected to be double that of children. In the less developed regions, which are at an earlier stage in the process of population ageing, the proportion of older persons is still low but will be rising rapidly over the coming decades. The median age, that is, the age that divides a population in two equal halves, is currently over 13 years higher in developed countries as a whole than in the less developed regions. Although the highest proportions of older persons are found in developed countries, the population aged 60 or over is growing more rapidly in the less developed regions. As a consequence, the older population will be increasingly concentrated in the less developed regions.

The report draws attention to the increasing proportion of potential beneficiaries of health and pension funds (mainly persons aged 65 or over) relative to the proportion of potential contributors (persons in the working ages of 15 to 64), a trend that will impose heavier demands on the working-age population if a stable flow of benefits to the older population is to be maintained.

People in their 50s or 60s will increasingly find themselves responsible for the care of one or more close family members aged 80 or over.

The report documents key characteristics of the older population. For instance, the older population is itself undergoing a process of demographic ageing so that, in most countries, the population aged 80 or over is growing faster than the population in any other age group, a difference that is expected to continue until at least 2050. Although the population aged 80 or over constitutes a small proportion of the total population, the number of persons involved is increasingly significant, especially in developing countries. As more people survive to very advanced ages, the ratio of parents to children will increase, implying that people in

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1 The demographic data used in World Population Ageing 2007 are taken from the 2004 Revision of the official United Nations world population estimates and projections (Sales No. E.05.XIII.5 and E.05.XIII.6).
their 50s or 60s will increasingly find themselves responsible for the care of one or more close family members aged 80 or over.

Because women live longer than men, older women greatly outnumber older men in most countries, especially among people aged 80 or over. Globally, women aged 60 or over outnumber men of the same age by approximately 70 million. Because older men are much more likely than older women to be married, they are more likely than older women to receive assistance from their spouse when health fails. In contrast, a significantly higher proportion of older women than older men live alone and need to turn to family members other than spouses or to public institutions for support when health fails. An important issue of policy concern is therefore to prevent the social isolation and economic deprivation of older women living alone.

Because women live longer than men, older women greatly outnumber older men in most countries, especially among people aged 80 or over. Globally, women aged 60 or over outnumber men of the same age by approximately 70 million.

In developing countries, high levels of illiteracy are still prevalent among older people, especially women: about half of all persons aged 65 or over in developing countries and less than 35 per cent of women in that age group know how to read and write. Lower levels of educational attainment are generally associated with worse health and economic status within the older population.

Globally, the labour force participation of older persons has remained stable over the past two decades and is considerably higher in developing countries than in developed countries. Nearly everywhere, however, the trend has been towards declining levels of economic activity among older men and increasing levels among older women, so that the share of women among older workers has risen. In most developing countries the statutory pensionable age is the same for women as for men. In contrast, in most developed countries, the pensionable age remains higher for men than for women, although women have a higher life expectancy than men. For both men and women, pensionable ages tend to be higher in developed than in developing countries.

In most developed countries, the pensionable age remains higher for men than for women, although women have a higher life expectancy than men.

The wealth of information contained in the report provides a useful basis for assessing world trends in population ageing as well as some of its social and economic consequences. It thus provides a crucial input for the review of progress made since the Second World Assembly on Ageing was convened in 2002. For more information on the report, please write to the office of Ms. Hania Zlotnik, Director, Population Division, DC2-1950, United Nations, New York, N.Y. 10017, USA; Telephone:+1-212-963-3179, Fax:+1-212-963-2147, or consult the Population Division’s website at www.unpopulation.org.

WORLD ECONOMIC AND SOCIAL SURVEY 2007: DEVELOPMENT IN AN AGEING WORLD (WESS)

The 2007 edition of the World Economic and Social Survey was devoted to the special theme of Development in an Ageing World. The Development Policy and Analysis Division of the Department of Economic and Social Affairs of the United Nations Secretariat relied on the Population Division for the preparation of chapters on the demographic and health aspects of population ageing.

Population ageing reflects the major achievements made in reducing fertility and mortality worldwide and is inevitable.

The report stresses that, because population ageing is already having and is expected to have a profound impact on economic and social development globally, adopting appropriate policy responses in time could significantly ease adaptation to an older society and harness the potential benefits associated with long-term changes in population age structures. Because of the sustained reductions of fertility experienced by most populations, the proportion of persons of working age eventually decrease while that of older persons continues to increase. Furthermore, the labour force itself grows older. These changes will
occur everywhere, but are most advanced in developed countries.

In most developing countries, where the reductions of fertility started in the late 1960s, the proportion of the population of working age is still growing while the proportion of children is decreasing. These trends produce a favourable demographic situation because, provided sufficient employment may be generated for the growing number of persons of working age, a society needs to spend relatively less on children and may be able to invest more, thus speeding economic growth.

However, as the report notes, in many developing countries the process of population ageing is taking place at a much faster pace and at lower income levels than it did in developed countries, making it more difficult for them to adapt to higher proportions of older persons. Furthermore, although, proportionately, developed countries have older populations than developing countries, there is a growing concentration of older persons in developing countries. By 2050, it is expected that almost 80 per cent of all persons aged 60 or over will live in developing countries (Figure 4).

![Figure 4. Size and distribution of world population aged 60 years or over by groups of countries, 1950, 1975, 2005, 2025, 2050](image)

While several measures to address the possible negative consequences of population ageing on economic growth have been suggested (including increasing the admission of young international migrants or outsourcing jobs), measures geared toward stimulating productivity growth may have to carry the most weight, the Survey concludes. In most cases, strategies to increase productivity would need to be coupled with measures aiming to stem the fall in labour supply by raising the labour force participation of women and older workers. According to the Survey, in developed countries, between 60 per cent and 85 per cent of the productivity increase required to maintain a given rate of output growth would be offsetting the likely negative effects of slow labour force growth.

International migration by itself is unlikely to prevent the reduction of the labour force in developed countries because the number of migrants that would have to be admitted to achieve this objective would be too high. It would be even more unlikely to use migration to offset the projected increases in the old-age dependency ratio. The European Union, for instance, would require a constant net inflow of 13 millions immigrants per year over the next 50 years to reach that objective, while Japan and the United States would each have...
Population ageing will also affect the income security of older persons and the financial viability of pension systems. Job outsourcing to off-shore locations may alleviate labour shortages by shifting production abroad, but it will not reduce the pressure on pension systems because it does not lead to the necessary expansion of the contributory base in the home country.

Living standards often decline for people at older ages and 80 per cent of the world population lacks adequate protection in old age against health problems, disability and income risks. In developing countries alone, an estimated 342 million older persons currently lack adequate income security and that number is expected to rise to 1.2 billion by 2050 if the current coverage of pension systems is not expanded.

Even for low-income countries, a universal social pension offering benefits equivalent to the international extreme poverty line ($1 a day) seems to be affordable.

Poverty levels among older persons tend to be high in countries lacking comprehensive formal pension systems. The introduction of old-age pensions or cash transfers to older persons has been a powerful strategy to reduce poverty in old age, both in developing and developed countries. Even for low-income countries, a universal social pension offering benefits equivalent to the international extreme poverty line ($1 a day) seems to be affordable (figure 5). However, expanding coverage remains a major challenge for the poorest countries.

**Figure 5. Simulated costs for developing countries of universal social pensions designed to keep older persons out of extreme poverty, 2005 and 2050**

In countries where pension coverage is extensive, pension programmes are under pressure not only because of increased longevity but often also because of a combination of other factors, including faulty programme design, mismanagement, insufficient economic growth or inadequate employment generation. In those cases, reforms are urgently needed to make sure that existing programmes can meet their future obligations.
The design of pension systems and their reform need to be based on a broad approach, argues the Survey. Pension systems have to be tailored to country-specific conditions. In doing so, pension systems can be conceived as consisting of several pillars, each designed to meet the specific needs of a particular segment of the population. Financial sustainability is an important guiding principle in the design of a pension system, but it is not the only one. Its major goal should be to provide minimum economic security for all. Hence, it should promote solidarity and ensure accessibility to and the adequacy of benefits. Given these considerations and the varied set of actions to improve pension systems, the Survey concludes that demographic dynamics do not, by themselves, pose an insoluble problem in regard to providing old-age pensions.

Population ageing also poses challenges to national health care systems. For developed countries, ageing may imply rising health costs and the need for planning to maintain adequate levels and quality of health and long-term care for the growing population of older persons. Developing countries face a bigger challenge because they must both ensure access to basic health care to their relative young populations while at the same time taking steps to satisfy the increasing demand for health services for older people. Despite these challenges, the Survey concludes that the demographic impact on health spending over the next 40 years would account for no more than a few percentage points of gross domestic product. Factors other than population ageing are more important in driving up the future cost of health care, including changes in the health-seeking behaviour of individuals, inefficiencies in the delivery of health services, introduction of new medical technologies, and increases in the prices of pharmaceuticals and health insurance policies.

The demographic impact on health spending over the next 40 years will account for no more than a few percentage points of gross domestic product.

Population ageing will definitely influence health care expenditures, but need not consume unsustainably large shares of national income in the future. The composition of health care spending will have to undergo substantial changes as demand for medical and long-term care services increases. It is important to focus on life- and cost-saving public health interventions that can be effective in reducing medical costs over the long run. Such interventions include measures to prevent or discourage smoking and excessive drinking, or to promote physical exercise and a healthy diet. By reducing the risks of developing debilitating chronic illnesses in later life, such as cancer, diabetes and cardiovascular diseases, these interventions can contribute significantly to keep health costs in check.

The World Economic and Social Survey 2007 emphasizes that the challenges posed by rapid population ageing, while large, can be effectively addressed through well-focused policies that do not impose excessive strain on available resources. The Survey calls on Governments and the international community to redouble efforts to take account of population ageing and its consequences in their development plans and to work towards the realization of the objectives of the Madrid International Plan of Action on Ageing.

The major conclusions of the Survey can be summarized as follows:

- Population ageing reflects the major achievements made in reducing fertility and mortality worldwide and is inevitable.
- Policies to increase fertility and immigration could slow the pace of population ageing but will not avoid it.
- The negative effects of slower labour force growth can be offset by increasing both overall labour productivity and the labour force participation of women and older workers.
- Improved working conditions for older persons can extend their working life and enhance their contribution to and participation in the economy.
- Old-age pension systems are most effective if they incorporate several pillars focusing on the needs of specific sectors of the population and provide minimum income security on a universal basis to keep older persons out of poverty.
- Health and long-term care systems need to be reformed and adapted to meet the needs of ageing populations. Health costs will likely rise in the coming decades, but population ageing is unlikely to be the principal factor driving up costs. Health and long-term care costs may be
contained by focusing on effective interventions to prevent the early onset of debilitating, chronic illness, as well as by measures that limit the rising costs of pharmaceuticals, medical treatments and long-term care, particularly by facilitating home-based care.

For further information on the World Economic and Social Survey 2007 please visit the website http://www.un.org/esa/policy/wess.

RESOLUTIONS ADOPTED BY THE COMMISSION ON POPULATION AND DEVELOPMENT IN APRIL 2007

Resolution 2007/1
Changing age structures of populations and their implications for development

The Commission on Population and Development,

Recalling the Programme of Action of the International Conference on Population and Development,\(^1\) in particular chapter VI on population growth and structure, and the key actions for the further implementation of the Programme of Action,\(^2\) in particular section II B on changing age structure and ageing of the population,

Recognizing that the implementation of the Programme of Action of the International Conference on Population and Development and the key actions for its further implementation are integrally linked to global efforts to eradicate poverty and achieve sustainable development and that the achievement of the goals of the Programme of Action is consistent with and makes an essential contribution to the achievement of the internationally agreed development goals, including the Millennium Development Goals,

Recalling the Political Declaration and the Madrid International Plan of Action on Ageing, 2002,\(^3\) General Assembly resolution 58/134 of 22 December 2003 on the roadmap for the implementation of the Madrid Plan of Action and Assembly resolutions 59/150 of 20 December 2004, 60/135 of 16 December 2005 and 61/142 of 19 December 2006 on the follow-up to the Second World Assembly on Ageing,

Recalling also the relevant provisions on changing age structures of populations and their implications for development contained, inter alia, in the Copenhagen Declaration on Social Development,\(^4\) the Programme of Action of the World Summit for Social Development,\(^5\) the Beijing Declaration and Platform for Action and their periodic reviews, and the Durban Declaration and Programme of Action adopted by the World Conference against Racism, Racial Discrimination, Xenophobia and Related Intolerance on 8 September 2001,\(^7\)

Recalling further the United Nations Millennium Declaration\(^8\) and the 2005 World Summit Outcome,\(^9\)

Recalling General Assembly resolution 60/265 of 30 June 2006 on the follow-up to the development outcome of the 2005 World Summit, including the Millennium Development Goals and the other internationally agreed development goals; and resolution 61/16 of 20 November 2006 on strengthening of the Economic and Social Council,

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5 Ibid., annex II.
6 Report of the Fourth World Conference on Women, Beijing, 4-15 September 1995 (United Nations publication, Sales No. E.96.IV.13), chap. I, resolution 1, annexes I and II.
7 See A/CONF.189/12 and Corr.1, chap. I.
8 See General Assembly resolution 55/2.
9 General Assembly resolution 60/1.
Recalling also the World Programme of Action for Youth to the Year 2000 and Beyond, General Assembly resolution 60/2 of 6 October 2005 on policies and programmes involving youth and previous Assembly resolutions related to the rights of the child,

Recalling further the Political Declaration on HIV/AIDS of 2 June 2006,

Recognizing that all populations of the world are undergoing a historically unique transition from high levels of fertility and mortality to low levels of fertility and mortality, known as the demographic transition, which has strong effects on the age structure of populations, and cognizant of the fact that countries are at different stages of this transition, with some countries still experiencing high levels of fertility,

Recognizing also that in the first stage of the demographic transition, when mortality is falling, the proportion of children increases, that in the second stage, when both fertility and mortality are falling, the proportion of adults of working age increases, and that in the third stage, when fertility and mortality reach low levels, only the proportion of older persons increases,

Recognizing further that the second stage of the demographic transition presents a window of opportunity for development and that the translation of this window of opportunity into benefits for development requires national policies and an international economic environment conducive to investment, employment, sustained economic development and further integration and full participation of developing countries in the global economy,

Acknowledging that population ageing is taking place at a much faster pace in developing than in developed countries, giving the former less time to adjust to the increasing number of older persons, making it difficult to mobilize resources for their support,

Noting that children and youth constitute nearly half of the population of developing countries and that two thirds of the world’s older persons live in developing countries,

Reaffirming that gender equality and the promotion and protection of the full enjoyment of all human rights and fundamental freedoms for all are essential to advance development, including for tackling the development implications of changing age structures,

Reaffirming also that development is a central goal in itself and that sustainable development in its economic, social and environmental aspects constitutes a key element of the overarching framework of United Nations activities,

Reaffirming further the three priority directions agreed in the Madrid International Plan of Action on Ageing: older persons and development; advancing health and well-being into old age; and ensuring enabling and supportive environments,

Noting with concern that poverty is one of the major threats to people’s well-being, especially children, the young and older persons,

Bearing in mind that women constitute the majority of older persons in almost all societies and that their share of the population increases with advancing age,

Recognizing that a heavy disease burden, especially in many developing countries, in particular the HIV/AIDS pandemic, affects population dynamics, shortens life expectancy and slows economic growth through lost productivity and other factors that undermine development,

Recognizing also the important role of all families in meeting the many challenges posed by the changing age structures of populations,

Taking note with appreciation of the reports of the Secretary-General on world population monitoring and on the monitoring of population programmes, both of which focus on the changing age structures of populations and their implications for development, and taking note also of the report of the Secretary-General on the flow of financial resources for assisting in the implementation of the Programme of Action of the International Conference on Population and Development,

1. Reaffirms the Programme of Action of the International Conference on Population and

Development\(^1\) and the key actions for its further implementation;\(^2\)

2. **Stresses** that since countries are at different stages of the demographic transition and experience different social and economic conditions, development and policy implications vary from country to country depending on their level of social and economic development;

3. **Encourages** Governments, the United Nations system and other relevant international organizations to assist developing countries in assessing the possible impact of changing population age structures and in building capacities to respond to the challenges and opportunities resulting from changing population age structures;

4. **Reaffirms** the commitments to and emphasizes the need to fully implement the global partnership for development set out in the United Nations Millennium Declaration,\(^8\) the Monterrey Consensus of the International Conference on Financing for Development\(^15\) and the Plan of Implementation of the World Summit on Sustainable Development,\(^16\) (“Johannesburg Plan of Implementation”) and to enhance the momentum generated by the 2005 World Summit in order to operationalize and implement, at all levels, the commitments set out in the outcomes of the major United Nations conferences and summits, including the 2005 World Summit, in the economic, social and related fields;

5. **Stresses** the importance of mainstreaming a gender perspective in policy and planning processes at all levels and the need to eliminate discrimination on the basis of gender and age, including the elimination of all forms of violence against women of all ages, and of ensuring equal rights and their full enjoyment by women of all ages;

6. **Recognizes** that investing in young people is an urgent development priority and that it will contribute to the achievement of the internationally agreed development goals, including the Millennium Development Goals;

7. **Reaffirms** the resolve, expressed in the United Nations Millennium Declaration,\(^8\) to ensure that, by 2015, children everywhere, boys and girls alike, are able to complete a full course of primary schooling, **urges** Governments to provide young people with opportunities for obtaining further education, acquiring skills and participating fully in all aspects of society, with a view, inter alia, to improving their productive employment and helping them to lead self-sufficient lives, and **recalls** that a knowledge-based society also requires that policies be instituted to ensure life-long access to education and training;

8. **Expresses its concern** that at the present time developing countries have a large number of persons reaching old age with minimal literacy and numeracy, which limits their capacity to earn a livelihood and may thus influence their enjoyment of health and well-being;

9. **Reaffirms** the Dakar Framework for Action on Education for All\(^17\) adopted at the World Education Forum in 2000, and underlines the importance of the Education for All partnership as a tool to achieve the Millennium Development Goal of universal primary education by 2015;

10. **Calls upon** Governments to take action to create an enabling environment at all levels to increase labour market participation, including special efforts to raise the participation of women, older persons, youth and disadvantaged groups, such as the long-term unemployed and persons with disabilities, in order to reduce the risk of exclusion or dependency in later life;

11. **Stresses** the importance of fully mobilizing the active population through family-friendly policies that support parents and legal guardians in combining work and parental roles;

12. **Invites** countries with ageing populations to promote measures to address this situation, including with family-friendly policies;

13. **Encourages** Governments to apply policies that support gender equality, protect the

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\(^{16}\) Report of the World Summit on Sustainable Development, Johannesburg, South Africa, 26 August-4 September 2002 (United Nations publication, Sales No. E.03.II.A.1).

human rights of older persons, particularly older women, and assist abused older persons;

14. Also encourages Governments, in cooperation with relevant stakeholders, including civil society, to enhance, through appropriate mechanisms the self-reliance of older persons, including: where appropriate, the promotion of a continued participation in working life, if desired, inter alia, by promoting a new approach to retirement that takes the needs of the employees, as well as the employers into account, in particular by applying the principle of flexible retirement policies and practices while maintaining acquired pension rights; the creation of conditions that promote the quality of life of older persons and enable them to work and live independently in their own communities as long as possible or desired; the provision of continuing education and the encouragement of life-long learning; and the ensuring of equal access to high-quality health and social services;

15. Calls upon Governments to develop and implement policies aimed at ensuring that all persons have adequate economic and social protection during old age and to strive to ensure the integrity, sustainability, solvency and transparency of pension schemes and, where appropriate, disability insurance, while paying attention to their intergenerational impacts so that the burden is not chiefly borne by certain generations;

16. Invites Governments, mindful of economic obstacles that may exist in some developing and other countries, to facilitate the accumulation of assets through personal savings and investments by individuals in order to cover consumption at older ages by setting up or promoting appropriate institutional mechanisms, if they do not already exist, and to ensure effective monitoring of such mechanisms;

17. Invites Governments to develop comprehensive strategies to meet the increasing demand for long-term care for older persons, including by adopting and implementing measures that assist families in providing basic care and support for their older members, taking into account the need to ensure that women and girls are not disproportionately burdened;

18. Recalls the worldwide need to expand educational opportunities in the field of geriatrics and gerontology for all health professionals who work with older persons and to improve information and training for health professionals and para-professionals on the needs of older persons, and in this context acknowledges the need to enhance international cooperation;

19. Urges Governments to promote healthy living at all ages and in all spheres of health, including sexual and reproductive health, in particular the improvement of maternal, child and adolescent health, and efforts to reduce maternal and child mortality, and to take steps to prepare health-care systems to meet the challenges posed by changing age structures;

20. Notes that HIV/AIDS affects the structure of the population in many developing countries, notably in Africa, and poses significant challenges to the economic and social stability in the most affected countries, and encourages Governments to address the rising rates of HIV infection among young people to ensure HIV-free future generations through the implementation of comprehensive, evidence-based prevention strategies, responsible sexual behaviour, including the use of condoms, evidence- and skills-based, youth-specific HIV education, mass-media interventions and the provision of youth-friendly health services;

21. Recognizes the gravity of the public health problems afflicting many developing countries and least developed countries, especially those resulting from HIV/AIDS, tuberculosis, malaria and other communicable diseases, and encourages Governments to adopt measures that address these challenges;

22. Stresses the importance of the collection, analysis and dissemination of data and population statistics disaggregated by age and sex on all aspects of policy formulation by all countries, and encourages the relevant entities of the United Nations to support national efforts in capacity-building, especially those of developing countries and countries with economies in transition;

23. Calls upon the relevant United Nations agencies, funds and programmes to continue promoting partnerships at the national and international levels to promote a holistic package of gender-sensitive interventions to ensure the well-being of young people and improve their life prospects, inter alia, by enhancing their educational attainment, promoting healthy lifestyles and safeguarding
their health, including sexual and reproductive health, and by supporting young people’s social engagement and participation, including in activities to reduce poverty and marginalization;

24. **Reaffirms** that each country must take primary responsibility for its own development and that the role of national policies and development strategies cannot be overemphasized in the achievement of sustainable development;

25. **Calls upon** Governments, taking into account the development situation in each country, to promote both intergenerational equity and solidarity by taking into account the implications of the changing age structures of the population in medium- and long-term development planning and by considering the age-related consequences of social and economic policies;

26. **Welcomes** the increased resources that will become available as a result of the establishment of timetables by many developed countries to achieve the target of 0.7 per cent of gross national product for official development assistance by 2015 and to reach at least 0.5 per cent of gross national product for official development assistance by 2010 and, pursuant to the Programme of Action for the Least Developed Countries for the Decade 2001-2010, 18 0.15 per cent to 0.20 per cent for the least developed countries no later than 2010, and urges those developed countries that have not yet done so to make concrete efforts in this regard in accordance with their commitments;

27. **Also welcomes** recent efforts and initiatives to enhance the quality of aid and to increase its impact, including the Paris Declaration on Aid Effectiveness, and calls for concrete, effective and timely action in implementing all agreed commitments on aid effectiveness, with clear monitoring and deadlines, including through further aligning assistance with country strategies, building institutional capacities, reducing transaction costs and eliminating bureaucratic procedures, making progress on untying aid, enhancing the absorptive capacity and financial management of recipient countries and strengthening the focus on development results;

28. **Acknowledges** that for developing countries that cannot generate sufficient resources, the lack of adequate funding remains the chief constraint to the full implementation of the Programme of Action of the International Conference on Population and Development;

29. **Notes** that recent increases in the flow of financial resources for assisting in the implementation of the Programme of Action have been primarily a result of the increased funding for HIV/AIDS activities, expresses concern that funding for family planning, which has been steadily decreasing, is below the suggested target level, and therefore emphasizes the importance of a continued mobilization of the required resources to implement the Programme of Action by the international community, including Governments of both donors and developing countries;

30. **Requests** the Secretary-General to continue his substantive work on the changing age structures of populations, including levels, trends, determinants, consequences and policies, giving due attention to their implications for development.

**RECENT PUBLICATIONS**


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18 A/CONF.191/13, chap. II.