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**UNFPA** 

**PANELISTS:** Joe Lauria, The Boston Globe

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MODERATOR: Tony Jenkins

#### **Population, Education and Poverty**

World population is expected to increase from 6.4 billion today to 8.9 billion by 2050. Most of that growth will take place in the world's poorest countries, but UN agencies dealing with population issues are not talking about restricting population growth. Ever since the 1994 Cairo Conference on Population and Development, the focus has been on a human-rights approach: empowering women to make choices about their reproductive health.

What role does education play in helping women with their reproductive health – and can it help reverse the spread of AIDS? What kinds of services are needed to make sure that complications in childbirth don't kill a woman every sixty seconds? How are religious teachings and cultural traditions accommodated when working in the field of population and reproductive health?

These are some of the topics addressed by Thoraya Obaid, the Executive Director of UNFPA, in this edition of World Chronicle.

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**ANNOUNCER:** From the United Nations in New York, an interview programme on major global issues. This is **World Chronicle.** And here is the host of today's **World Chronicle.** 

JENKINS: Hello I'm Tony Jenkins and welcome to World Chronicle. No woman should be left to die for lack of reproductive health services – yet every minute of every day somewhere in the world a woman is risking her life in childbirth. Will this problem be solved in the next ten years – or will it just get worse? Is education the key to making a real difference in reproductive health around the world? Or is better health needed first – to enable more women and girls to pursue an education? These are just some of the questions we'll be discussing today with Thoraya Obaid, Executive Director of the United Nations Population Fund, UNFPA. Ms. Obaid, welcome to the programme. Listening to our intro., listening to your speeches, going to the UNFPA website we see the issues that are raised time and time again: women's health care, women's health reproductive rights, gender equality, HIV/AIDS, discrimination. What we actually hear is very little about the issue of population and population growth – and given that the world is supposed to add another 1.5 billion people in the next 45 years – why is that? Why don't we hear you talking about those numbers?

OBAID: I have to begin by saying that in 1994 when the conference on Population Development took place in Cairo, it changed the whole dialogue. We're not talking about numbers anymore, we're talking about the rights of people - of women, to determine the number and spacing of their children. And if they have the proper education and services available they will make the correct decisions that will balance their resources, their life, and the number of children they have. And therefore, the dialogue has shifted to looking at the rights of women in terms of health and reproductive rights. This will influence as a by product – the size of the population that you're talking about.

**JENKINS:** Well..., so in other words, that may help stabilize the population of the world – I guess we'll get into that in a moment. As you can see, we're joined today in the studio by two fellow panelists: Joe Lauria, correspondent for The Boston Globe...and Oyiza Adaba, of Africa Independent television. Oyiza.

**ODABA:** I would like to talk about the US cut in funding for the UNFPA for the last three years in a row now. How does your organization plan to remedy this situation? – one - and two, what alternatives do you have towards the short fall of these funds?

**OBAID:** Well we're starting with the hot questions right away [laughter]. Usually it is whenever there is a republic in government. UNFPA does get cuts in its budget – specifically

because of our programme in China – we have a programme in China. The arrangement when we have a democratic government from a democratic party is that we take the U.S. money, we deduct from it the amount of money that we use in China – which is around 3 million – which is peanuts, and we put the U.S. money in a separate account which we are accountable to the government. Now, this year in 2001, when the United States decided to...not the Congress, the Congress did allocate the funds – it's an administration decision – decided not give us the money - we suffered in 2001. We had to freeze programmes - we could not start programmes. As we moved along...2004 – you'll be surprised to know – we had the highest income for UNFPA since it was established in 1969 and we had the largest number of contributors. We grew from 92 member states contributing in 2001 – we have now 166 contributors and the growth is in programme countries, developing countries.

**JENKINS:** Correct me if I'm wrong, the United States I think cut – was it 34 million dollars?...

**OBAID:** ... Yes, it's about 12 percent...

**JENKINS:** ....12 percent. So have these new states that have been rushing in to so generously... have they more than compensated for that?

**OBAID:** That's exactly. In 2004 we compensated....and as I said... it was the highest income without the US money.

**JENKINS:** Was that a rebuke to the United States from these other countries, do you think?

**OBAID:** It was an expression of commitment by countries that the population issues, the empowerment of women, HIV/AIDS, adolescence... are a critical issue for development and they have come in. And as you know, our major supports are other western countries – they provide about 98-97 percent of all income.

**LAURIA:** I don't think you are saying that you can do without the United States? They certainly are not going to leave you alone. Is that right?

**OBAID:** We can never do without the United States – no. And we had continuous dialogue with the State Department. We still hope that the United States will be able to come in and support us in the future time. Meanwhile, we're still discussing what possibilities there are...

**LAURIA**: At what level do you speak at the State Department?

**OBAID:** Well, at the level of the Assistant Secretary of State basically. There is a department for population and refugees and that's our official counterpart.

**LAURIA:** You said it began in 1969 – UN Population Fund. So from '69 to '94 you dealt with these Malthusians numbers about population?

**OBAID:** Yes.

**LAURIA:** Almost exclusively? Was there no talk about women's....

OBAID: No, no, no...of course...no, no, no. When UNFPA was established, we talked about population growth, issues of urbanization and so on and so on – but within that, the issue of family planning – was central. What happened in Cairo is that issue of the ability... instead of having targets and saying – you have to have smaller families and so on... which is a form of coercion, the discussion has moved into human rights... that women are the ones to determine – the women and their partners – the number and spacing of their children. And so the discussion from 1994 on has changed into the human rights arena and not the Malthusian issues.

**ODABA:** With fertility rate on the decline, how is it that we're looking at 2050 like Tony rightly pointed out, at a population of 8.9 billion?

Developing countries... many average... in the developing countries it has gone from six children to about three – so it is a success in that sense. However, where you will have the population growth by 2050 as you quoted, it's mostly in the poorest and least developed countries. Where the health system is failing, the educational system is failing, there is no support system for families and there is no access to reproductive health services and family planning and so on. And then of course, the other area of growth would be India and China – because even if they have one that's a great deal. But the emphasis for us is the least developed countries and our hope is to ensure that they will have the proper services to be able to plan their families as we all call for.

**JENKINS:** The theme for this year's World Population Day is "Equality". We'll talk about why that is – and what it means in terms of population and health issues after this.

#### **UNFPA VIDEO BEGINS:**

**NARRATION:** It doesn't matter whether you're first or second, unless you're always second. Ten years ago, 179 governments committed to improve women's status. UNFPA works to improve women's lives.

#### **VIDEO ENDS:**

**JENKINS:** So why that shift? Is the fact that we're looking at another one and a half billion people not a catastrophe for the planet? And if so, why aren't we talking about it directly? Or is it that you're saying – for example – you tell me how focusing on the discussion on equality does anything to help reduce the possibility or eventuality of us adding another one and a half billion people to the planet.

OBAID: You know...the discussion on the rights of women and equality did not come just by itself, it's part of a whole global movement to talk about human rights. Now human rights is the main theme – the global universal theme. And within that is the issue of the rights of women has come out. We know from history that women and families as a whole want less children, there problem is that they don't have the services that will allow them to have less children than what they are having with the services. So if they are provided with these services, the impact on that will be on the issue of population growth. We know that.

**JENKINS:** So when you talk about equality, you're talking about equality of access to health care services for example.

**OBAID:** ....and to education.

**JENKINS:** You're also talking about equality within the home – the right of the wife, the women to say no to her husband – no I don't sex, no I don't want more children. Is that part of the whole discussion too?

**OBAID:** That's what we call reproductive rights. Yes, the right of women to determine also her relationships, her sexual relationships within the family and with partners as well.

**JENKINS:** Have you done any polling to see whether it's the men or women who tend to like the idea of having more kids to work with them in the fields?

**OBAID:** Actually I recently read reports and it's both ways and it's also many more. Not only to work more as a work force but in many traditional societies having children – especially boys, is a cultural value.

**JENKINS:** ... A symbol of power – machismo...

**OBAID:** ....Exactly and for women, it's a social protection.

**JENKINS:** We're poor weak things... we need so many symbols...Joe

LAURIA: As you know, the big discussion in the building is reform of this organization. Washington has a few ideas of their own too – sometimes conflicting with what the Secretary-General wants – probably what you might want...One could argue to be fair, that there's a lot of overlap here. Things that you are discussing probably touch on the World Health Organization, the UN Development Programme, UNAIDS, World Food Programme certainly UNIFEM. How could you justify a stand-alone organization – yours now... if you are dealing with these issues that these other organization are dealing with.

OBAID: Actually, luckily, I would not be really a stand alone organization in the sense that WHO for us is our reference point for medical protocols and issues related to reproduction health. We depend on WHO to give us the definitions, the protocols and we are the operational arm let's say – to implement that in the field. That's one. WHO deals with diseases of all kinds, focusing on reproduction health as it relates to population issues, so they're very focused there. We are the only international organization – multilateral – that is dealing with the issue of population. UNIFEM deals with the empowerment of women and focuses on the empowerment of women and more into the area of political participation. We work with UNIFEM...

**LAURIA:** ....You talked about that too, I've seen you make speeches about that...

**OBAID:** ....Political participation just as an advocacy, but the one who does the actual training for example for elections and so on is UNIFEM. But we work with UNIFEM on gender base violence. Where here, the issues of reproduction and as well as violence, as well as rights interact. So in all of these organizations we have common areas where we work together and meet regularly to streamline these relationships.

**ADABA:** Religious organizations and population growth – Catholicism, Islam and the Jewish religion for example, have these organizations aided or marred your progress as an organization?

OBAID: We have different experiences. UNFPA has a history of working with local leader, cultural leaders, and religous leaders at the country level. And we also established what is called the Population Research Centre which is in the Islamic University in Cairo, Al Azhar University. It's a research center that was producing work with us on population issues, reproductive health issues in Islam, how do you view it, how do you work with it. More recently since I joined I have activated that relationship with religious leaders in particular and I'll give you an example. We just finished establishing an inter-network of Muslim religious leaders in

Africa who made a statement and commitment to the Cairo Agreement on reproduction health, the rights of women to determine their family, because within Islam the issue of family planning is not controversial. And we are planning to have another network of Christian leaders and eventually it will be an inter-faith for Africa, especially on issues related to HIV/AIDS prevention. In Latin America at the country level, I just came up two months ago from Honduras, and I met with the inter-faith group in Honduras, it had Episcopalian, Evangelicals and Catholics and it's a network of religious leaders for prevention – which is harder because you're talking about the ABC: Abstinence, Be faithful, Condom use. And among them there is an agreement – the Catholic Church said, I will advocate for ABC but I cannot provide condoms. So the Evangelical and the Episcopalian will be the ones to provide the counseling and referral for condoms. So we are reaching a stage of cooperation there.

**JENKINS:** This is World Chronicle and we're talking about population and health as they relate to education and poverty. Our guest is Thoraya Obaid, the Executive Director of the UN Population Fund, UNFPA. Let's take a look at this report.

## **LOAS VIDEO BEGINS:**

NARRATION: Loas is a landlocked country in South East Asia where most of the population is under the age of 25. Many of these young people live in rural areas where unwanted pregnancies – and complications in childbirth – are common. And then there's the threat of AIDS – HIV infection rates are still relatively low, compared to neighboring Cambodia and Vietnam, but raising. Reaching the remote village isn't easy, but local authorities, with help from UNFPA – the United Nations Population Fund – are ferrying mobile health clinics to more than 100 locations in Southern Loas.

#### Dr. Mynt Mynt Sein

**UNFPA:** "When we get there, we give reproductive health, mainly for maternal and child health."

**NARRATION:** Health services that are vital in villages like Phonton, were a young mother faces a six-hour walk to reach the nearest clinic...where schoolchildren have no school to go to after 3<sup>rd</sup> grade...and where the only place for teenagers to learn about safe sex and good parenting is through outreach programmes like these."

## **VIDEO ENDS:**

**JENKINS:** Interesting. Did you want to follow-up on where you were before? Because this business of education is crucial and I thought you were heading along...

**ODABA:** ....Absolutely, absolutely. Catholics for example, and I am one, do not encourage the use of condoms and family planning. Now how do you get into... how do you break down all these barriers because these are clearly obstacles in your way in achieving your desired effects.

OBAID: I agree with you and that's why in this kind of network and coalition we're trying to find common space, respecting the space of each other and who can take the agenda further? So if the Catholic church says this is my space, the other churches say we can take it and move it further here, and then we have a referral system to the non-religious sector, ngos, the government and so on, to actually provide the services that the others cannot provide. With the size of HIV and with the size of ....well, we have the largest as you know... youngest population in human history and they all are becoming sexually active very early. And therefore, with this kind of composition of population - and here we have the population dynamic issue - we need to address their needs and there needs are basically to avoid unwanted pregnancies, to delay actually having sex at an early age, and then offering the services themselves. So we have a balance between counseling, guidance and the actual services.

**JENKINS:** You make it sound as if with a wink and a nod you're average Roman Catholic priest on the ground is in essence, finding a way to dance around the scriptures of his supreme spiritual leader, the Pontiff in Rome...

**OBAID:** ...No, no, no...Not a wink or an eye - it's hard work, it's very hard work [all laugh]. But basically, the whole principle that we say is that religious leaders want the same thing we want in a sense, which is serving the poorest and disadvantaged population. So we have to find a way to work together respecting how far they can go. As I said, the Catholic church can not and will not promote or provide condoms, but there has to be others who will do it and we have to have a referral system to get young people there.

**LAURIA:** I have a question that I can split into three parts - I'll just give you the first one quickly. You mentioned in my previous question that you do field work, you get information from WHO. Give me some examples of the kind of field work that you do – some information you get from WHO.

**OBAID:** With WHO? O.k., WHO for example, basically... the relationship with WHO is now with the whole coalition on maternal and neo-natal health and infant health. We are part of that coalition - it's lead by WHO and so...

**LAURIA:** How do you go into the ground? Do you have governments cooperating with you? For example, on the fistula problem, do you governments helping, blocking you? How do you actually get on the ground? Who do you send there?

**OBAID:** We have offices on the ground, and the difference between UNFPA and some other agencies is that we work through nationals, we work through governments and ngos. Usually if you visit our offices you will find one international – maximum two - and the rest are national staff. So we have people on the ground who link with the ministry of health, ministry of education, whatever, and we work with them. But you also have the UN country team. There is for example the country team on HIV that has UNAIDS...

**LAURIA:** ...So you send people out to a remote village in Botswana to see if there is a women suffering from fistula...

**OBAID:** ...We don't send. We work with government centres or government services to help them go out and provide the services.

**LAURIA:** O.k., now the third part is about multinational corporations. They probably have more influence on some of these countries than the governments do. Do you work with them? Do they provide health care when they outsource these jobs? Do you work with the companies as well or is it only with governments and ngos?

**OBAID:** You mean private sectors?

**LAURIA:** Private sectors.

**OBAID:** We work with private sectors to a certain extent but our work mostly is with ngos and the government. I'll give you an example now of this. The sector-wide approach on health is in India...

LAURIA: ...Yes.

**OBAID:** We are part of that coalition of donors – it's the World Bank, it's the government, it's UNFPA - and together we have put our resources... and we have a common agenda. To work in some of the states that are poor that has a high maternity mortality and so on, to be able to strengthen the health system and to deliver the services to the people.

**LAURIA:** Some of the funds you have... you give to local governments and ngos to actually implement programmes...that's how it happens?

**OBAID:** ... According to a certain set programme that has been written...

**LAURIA:** ...And you might lobby a company to provide health care for workers

there?

**OBAID:** We don't work in that sense with a private sector. No, our work with the private sector...we are very careful because there is a conflict of interest because the ones that are interested in us are pharmaceuticals.

JENKINS: You know there was a documentary recently on public television here in the United States that showed how teenagers in Lubbock, Texas – a school district that gives no sex education in its classrooms – had one of the highest rates of unwanted teen pregnancies in the country...What are the potential consequences of similar policies in poor countries where the population is exploding? We'll talk more about that after this.

#### **UNFPA VIDEO BEGINS:**

**NARRATION:** It took all of time for world population to reach 2 billion in 1927. Then, less than a lifetime to go from 2 to 6 billion. Today there are over 1 billion young people between 15 and 24 years of age, their decisions about the size and spacing of their families will shape the 21<sup>st</sup> century. To make informed choices they need education, jobs and health care including reproductive health care, and family planning.

#### **VIDEO ENDS:**

**JENKINS:** So let's talk about this issue of education. You emphasized education a great deal. Do you have evidence that simply raising the education level of girls will automatically lead to them having smaller families down the road?

**OBAID:** If you look again at population figures you will see that there is a correlation between the size of the family, the level of education and employment even. Employment makes it...pushes it even further. So there is good proof to show that if a girl finishes even primary education it does make a difference, not only in the number – in the quality of life of the family and of the children.

**ADABA:** Still, I would like to stay on education still. Would you agree that the shift in the focus in terms of training, highly skilled health workers would help, rather than focusing on the women or the little girls in school?

**OBAID:** We have to do all. We have to...because part of focusing on little girls is to have them have the correct behaviour to understand the issuesID 1 Tfia5aes d 1 Tdialtmorathsp, showoa

levels - at the basic education level - where girls can read and write and become educated and not only because it's good...but because it's a human right. Education is a human right. And also we work with birth attendants, nurses and so on - to be able to have a good medical core that can focus on issues of reproductive health.

JENKINS: You know, we talked earlier about this business of the shift in priority from absolute population numbers to this broad-based human rights approach. It struck me that when the United Nations put together their Millennium Development Goals five years ago, these targets for everything that we are suppose to aim for across the world: reducing poverty, improving access to education, access to healthcare and that sort of thing – one target, one figure that is nowhere to be found. Which - you might have thought, would be a fundamental one – would be what our target population would be? Why is it? Do you talk to countries, do you go to a country and say... look, you know – in absolute terms – you've got a problem. Your population is growing too fast. Is this a target we should aim for? Has all talk like that simply dropped?

**OBAID:** Yes, there is no talk about size of population, what we speak to governments about is how we can help them to decrease their population and to manage the population that they have. But certainly targets and quotas are against the whole concept of the International Conference on Population and Development.

**JENKINS:** is it just not politically correct? Or is it just not useful? What is it?

**OBAID:** No, it means you are forcing people to pre-determine you as a state, pre-determining what families should have and that's not human rights.

**LAURIA:** Well in your 2004 State of the World Population report, you mentioned ten years after Cairo there are all these problems – I was going to mention a few of them – to assess where they are now and why isn't there improvement. But you do say that while fertility is falling, the population will increase from 6.4 billion today to 8.9 billion by 2050. So you are concerned about numbers? It is a problem.

**OBAID:** Yes, we're talking about how to deal with it. Whether we go and say... you are suppose to have two children because your population will go there, or whether we say, we create an environment where partners – women and men, women in particular because they are less educated in power – are empowered, are healthy, have access to reproduction health and family planning service, and by creating all these services that are accessible, affordable

and reachable, they will make the decisions, they prefer to have smaller families and therefore, their personal choices will impact on the size of the population.

**LAURIA**: So you are going to try and get the number right. What about underpopulation? Germany is a country where there aren't enough people to take care of the old people.

OBAID: Europe is mostly is like that. Again, when we talk to our European friends and we talk about the issue there – the focus is on the issue of the elderly – the aging population and what's happening. We don't work of course in Europe because they are donors, but that is happening in some of the Asian countries where you do have an increasing aging population. But again, the fact that the population has decreased or there are less young people, it's because it's a personal choice. People have made their choices, and the emphasis throughout development paradigm for the last fifteen years is on the whole issue of choices. Democracy is about choices.

**JENKINS:** We have ten seconds left but I think basically what you are saying to those who think it is counter-intuitive for you to help more women have healthier babies to fight against AIDS and what have you – which they might say...well what are you doing to arrest the greater growth of the population? You're saying essentially treat people like decent human beings.

OBAID: Give them their rights...

JENKINS: ...Give them their rights...

OBAID: ...And they will make the correct decision...

JENKINS: ...And the population will stabilize...

OBAID: ...Because it's a desire to have smaller families.

JENKINS: That's all the time we have. Our guest today has been Thoraya Obaid, Executive Director of the United Nations Population Fund, UNFPA. She was interviewed by Joe Lauria of The Boston Globe, and Oyiza Adaba of Africa Independent Television. I'm Tony Jenkins thank you for joining us, we invite you to be with us for the next edition of **World** Chronicle.

**ANNOUNCER:** Electronic transcripts of this programme may be obtained free of charge by contacting World Chronicle at the address on your screen:

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