

## **Forty-seventh session of the Commission on Population and Development**

**Presentation on the key linkages between population dynamics and the theme  
for the 2014 annual ministerial review**

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**New York, 9 April 2014**

Mr. Chairman,  
Distinguished delegates,  
Ladies and gentlemen,

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It is an honour to make a short presentation on key linkages between population dynamics and the theme of the 2014 Annual Ministerial Review.

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I will focus on five examples of how population dynamics address on-going and emerging challenges for meeting the MDGs and for sustaining development gains in the future. The examples are on population growth, persistent gaps in reproductive health, shifts in the age structure of populations, international migration and the increasing demand for population data.

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Population growth plays a crucial role in both planning for health service expansion and monitoring progress. Consider three key indicators under MDG5 for the sub-Saharan Africa region. The bars on the left of the chart show change from 1990 to 2011 in the MDG indicators of antenatal care, skilled birth attendance and

contraceptive prevalence. The bars on the right tell a different story in terms of the increase in the absolute numbers of the relevant population receiving the health service.

Progress in the region either stagnated in terms of expanding coverage of antenatal care (reaching about half of all pregnant women in 2011) or had minimal progress over the same period in coverage of skilled birth attendance (from 42 per cent in 1990 to 48 per cent in 2011). However, the absolute number of births for which mothers received care substantially increased (for example, rising from 9 million to 16 million births receiving skilled care during delivery).

Contraceptive prevalence was low in 1990, but more than doubled from 12 per cent of married or in-union women using any method of contraception to 27 per cent in 2011. Yet the absolute number of married or in-union women estimated to be using contraceptives in the region nearly quadrupled over the same period, from 10 million in 1990 to 37 million in 2011.

These examples are a clear indication of the considerable challenges posed by population growth on efforts to deliver basic health services to scale as well as a marker of real progress in the region to meet ever increasing numbers in need of those services.

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The gaps in achieving universal access to reproductive health cut across almost all countries, regardless of population growth.

The relevance of the ICPD Programme of Action and its key actions for further implementation are helpful in this regard. Among the key actions adopted by the General Assembly in 1999 was to reduce the gap between contraceptive use and the

proportion of individuals expressing a desire to delay or limit childbearing (often measured as the unmet need for family planning).

The minimal benchmark was a 50 per cent reduction by 2005. Among the 194 countries shown here, just 13 countries worldwide (the points below the dashed line in the figure) are expected to meet this minimal benchmark even by 2015; that is, to reduce the level of unmet need for family planning by half from levels in 1990. For many countries, contraceptive use is not keeping pace with the growth in demand.

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Another example of the link between population dynamics and sustaining development gains in the future is the shift in the age structure from young to old, driven mainly through fertility decline.

The population aged 60 years or over has shown a consistent increase in both number and proportion of the world's population. Their number is expected to more than double by 2050, to more than 2 billion and, by 2047, older persons aged 60 years or over are projected to outnumber children. Most of the growth will take place in less developed regions, where the coverage of formal social protection systems for older people is generally limited.

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This shift in the age structure will also produce a “window of opportunity” for potential economic growth that depends, in part, on the kinds of investments in young people's education, training and job opportunities that are aligned with the MDG targets on productive employment, education and eliminating gender disparities in all levels of education.

This figure shows economic support ratios over time for more developed and less developed regions. Economic support ratios account for productivity at the different ages. A higher ratio indicates more equivalent workers per consumer and a lighter burden of dependency than a lower support ratio. The support ratio in the less developed regions has been rising so far, and is projected to reach a high level by 2050, where each worker is supporting him or herself and one other person's consumption in that population.

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While not part of the MDGs, international migration is expected to shape future population change and sustain development gains in a growing number of countries.

Globally, 7 out of every 10 international migrants originate in developing countries (the orange and red portions of the chart). Of these, half moved between countries in the South (that is, the red portion of the chart). Remittances by migrants are often invested in human capital, health and education in particular. Migrants also fill gaps in the labour market, create jobs and can help offset some of the effects of population ageing.

The costs of migration must be mentioned as well, including high recruitment fees; non-transferable diplomas, skills and social security entitlements; the emigration of skilled workers; and cases of abuse and exploitation.

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Underlying each of the preceding examples are population data. There is an oft-quoted line that "If you don't know where you're going, any road will take you there." Population data help us understand where we are headed, and the MDGs have brought more attention to the importance of data for monitoring progress.

Population data are required for accurate estimates for many of the MDG indicators. Censuses are primary sources for population data. Yet 11 countries have had three or fewer censuses since 1950. Vital statistics are important and strides are being made by some countries to draw on mobile technology to extend the coverage and accuracy of recording births and deaths.

Surveys can help fill the gap in data availability, though even with surveys there remain challenges in the quality, frequency, bias and representativeness of the data in addition to different estimates one can obtain from different methods applied to the same data.

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These are just a few of many relevant examples of the linkages between population and challenges for meeting the MDGs and for sustaining development gains in the future. The work of the Commission this week, 20 years after Cairo and looking beyond 2014, will undoubtedly provide other valuable contributions on population to inform intergovernmental discussions at the Annual Ministerial Review this year.

Thank you.