

Status of Women

Advancement of the economic and social status of women, and most particularly women's education, is highly important in fertility decline. It gives them more ability and willingness to make choices about family size, more receptivity to innovation including family planning methods, and economic alternatives to early marriage. If their society no longer confines them exclusively to traditional childbearing roles and little else, they tend to marry later and opt for fewer children. Female education beyond the bare minimum as well as improved health services reduces infant mortality, and improves children's and mothers' conditions generally; this can eventually bring down birth rates by giving parents less reason to guard against the possibility of non-survival of their offspring.

Contraception -- Knowledge and Access

The UN "medium variant" population projection is based on the perhaps bold assumption that contraceptive use in developing countries will increase from its present level of about 51 or 52% to 59% by 2000, and 73% by 2025. There has already been remarkable progress: the rate was well below 10% in 1960, and 45% in 1983. Knowledge of at least some modern contraceptive methods depends partly on age and education, but is now quite widespread in the Third World, except in sub-Saharan Africa. Yet access to such methods and willingness actually to use them varies greatly; in Pakistan, for example, contraceptive prevalence is still under 10%. But broadly speaking, there is now **great unmet demand in developing countries.** Properly designed family planning programs, accordingly, are well accepted and increasingly effective in lowering fertility rates in most areas; the problem is rather one of inadequate national and international resources.

Uneven or Counterbalancing Factors

But generalisations are risky. **Fertility can differ between economically similar regions of the same country (including Canada).** It has dropped in some poorer countries or areas, e.g. Sri Lanka or the states of South India, with little economic progress (although with greatly improved status of women); in richer neighbours, e.g. Philippines or North India, rates remain much higher. Greece and Oman have roughly the same GNP per capita; fertility is 1.5 in the one, and 7.2 in the other. **In some places, political factors actually encourage population growth:** examples are Arabs in the occupied territories, reacting to Israeli numerical superiority and the arrival of settlers; certain smaller tribes in Kenya which see themselves as endangered if they do not maintain their relative strength; and some far-left groups in Latin America which depict birth control as a plot to keep down the numbers of the oppressed.

AIDS, despite its devastating effects in a number of areas, will probably bring down population growth in sub-Saharan Africa by no more than about 0.5% annually