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POPULATION COUNCIL

The International Conference on Population and Development
Plenary Session

IMPERATIVES FOR THE FUTURE

Looking back, moving forward

Creating the Future we Want

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It is a pleasure and an honour to address you today on behalf of the Population Council. When our Council began our work 40 years ago, the population of the world was 2.6 billion, and the world was adding over

60 million people per year, infant mortality was high and expected life span in the developing world was closer to 40 than 50- Population issues were seen as an amalgam of demographic and health sciences; women were not much mentioned, or much in evidence as health care deliverers, program managers or policy makers.

Today the total global population has doubled and the world adds close to 100 million per sear. But the expected life span has risen in the developing world by close to t0 years and infant mortality has fallen sharply. This proves that progress is both possible and rapid when there is general agreement on priority and importance. This conference will provide the world with the clear statement that population is about education, the role of women and a whole range of factors. Our tusk in the next two decades is to accelerate progress in these areas as we have with infant mortality and life spun. • 'We must commit ourselves to this task in such a way that when we next meet in this Conference, we will he able to talk about maternal mortality in the same light.

A. Although we have a long way to go we have also come a long way. Let me use the Council's words of 30 years ago to describe the situation that existed 40 years ago

of the leaders or the public, at home abroad; there were no governmentally supported programs; here was little systematic knowledge about people's attitudes toward opulation mutters; there was almost no experience with field programs to implement family planning; there were few trained personnel in the developing countries and few facilities for training in population; only the conventional contraceptive technology was available...; there was

no central organization with information and experience over the whole range of population interests.

B. How has it changed:

- 1. First decade Population was Dernography + health interventions. The foundation of future work was principally dedicated to training people around the world to understand what was happening in their countries.
- 2. Second decade saw the development and expansion of family planning programs whole concepts had to be invented, applied and changed in the light of experience
- 3. Third decade saw the universalization of family planning programs, some technology change and information/communication techniques factored in.
- 4. By the Fourth decade, important movernent to broaden family planning to include reproductive health elements had begun. The first steps to consider population issues in the light of developmental progress were also underway.
- 5. And now as Population work begins its fifth decade it is very clear that it will be the decade about Women, their life situations, and how their health including reproductive health elements could be better reflected in family planning programes. Since there is universal agreement that family planning must be voluntary and nun coercive. we must also now deal seriously with the question of how the needs of women, wishes •)f families, including desired family size interacts with the objectives of governments.

C. In short, Mr. Chairman, as we look at the breadth, the scope and the complexity of the

document before us, we realize that our field has come a very long way in a relatively short time. We note the richness of the Cairo document and how in touches the vast panorama of issues important to human beings. At the Council we are very proud to have been vital part of this field as it has grown.

- I. : But now we must move forward into the fifth decade. If we want to reconcile some of the emerging and already quite clearly visible areas which will challenge this forward movement, there are four imperatives of action. The council's research results have been set out in documents available at the Conference Population growth and our Caring Capacity; Reconsidering the Rationale, scope and quality of family planning programs, Gender Inequality and Demographic Behavior. We offer these to the Conference as guidance tools for the post Cairo decade.
- A. Creating the future: Population policy
 - 1. Every country needs a Population policy.
- a. what for? A consistent process by which demographic and related health and welfare developments within societies are examined and faced up to. If below replacement level fertility, or aging or the adequacy of social measures are the principle population issues; they should be studied and made known. In high fertility and rapid growth countries there needs to be public awareness discussion of the policy issues.
 - b. what elements does Population Policy include in high fertility

societies .

I believe that this Cairo Conference will be seen as the time when nations of the world gave formal recognition that family planning programes cannot and must not be a Governments sole population policy. I will go further - preoccupation with fertility reduction has adversely affected the quality of family planning programs and has contributed to adverse effects on clients. and caused the growing level of concern - occasionally climbing to outrage among women's health advocates. In the decade ahead it should be the goal of every country to define a broad based population policy emphasizing the contribution that investments in various social ant economic sectors can make toward voluntary fertility dec line and the improvement of individual health and welfare.

- c. In particular, we must make a serious distinction between.
- (1) Unwanted fertility which together with unmet need provide the world with the major existing opportunity to respond to women's needs and meeting their demands to reduce unwanted fertility, create a major demographic impact.

There is a growing awareness that these services; if provided within a framework that meets the needs of the (:client will both !satisfy those needs and increase the use of services by the clientele they seek to attract.

(2) Wanted fertility on the other hand, together with family size desire are mirrors of each society, together with the economic and social challenges it faces. These do not respond to family planning service availability in the direct fashion that communities with unmet need use services. Wanted fertility changes in response to changes in infant

mortality, women's access to the cash economy, girls education and a host of other factors.

(3) momentum describes the interaction of a young population age structure and short intervals between ;:generations. Record numbers of young people entering the childbearing years over the next two decades even if they hold small family ideals - will result in considerable population expansion.

The onset and pacing of childbearing can be altered through socially desirable measures, primarily, but not only through girls education d. Governments that adopt demographic goals as part of their pupulation policy should vest responsibility for achieving them in the full range of social and economic instrumentalities at their disposal. This is why Population polices opposed to family planning polled must be taken on at a central level in Governments. Family planning matters are properly the purview of health ministries; population goals respond to quite other policy instruments and must be managed and organized accordingly.

- B. Women of the future: the girl today
- 1. This Conference has marked a watershed in the recognition by the international community that the status and situation of women, in particular their education are major determinants of social progress and fertility change. We now need to see some reflection of this clarity of vision in budget and planning documents.
- 2. Once governments start to look at this issue seriously they will realize that we cannot start with women. In the next decade, the realization will grow that we must focuces on girls. We need to address son preference and the effect it has on young girls, their health, their

educational prospects and their probable fertility goals.

Short intervals between generations are a result of the pressures on young women to be sexually active and to bear children early as a means of finding social acceptance and economic security. Societies that wish to expand the intervals between generations will have to offer alternatives. Girls education once again comes to the fore. The Council will be working to find out who drops out of school, at what age and why. To what extent do girls drop out because of gender inequities in education i.e. poor quality of girls' education (including inadequate teachers, lack of attention paid to girls and gender bias in text books), inadequate facilities for girls sexual harassment, parental disinclination to invest in girls schooling etc... And then, if we have the will, we can develop effective policies.

C. Balancing the future: Bringing men in

There are three areas in which we need to end the isolation in which the first four decades of population work has too often left men.

1. Council work convinces us that men will accept a role in family planning if the

counseling services. facilities and gender of the providers are appropriate - about the same constellation of factors that we find for women. as we have done for decades to work out the best quality of care for women, we will accelerate our work for the next decade to find out how to engage men and we will share this knowledge with the world.

2. Men need better contraceptive choice. While this is widely accepted for women. it has

not been taken seriously for men. The Council, primarily with USAID support, is very proud to be working on male hormonal and vaccine based contraceptives which will add enormously to the choice that men will have in the future.

- 3. Finally, and perhaps the greatest challenge, there needs to he a great deal of work on the male role in parenting. Societies where male responsibility for the children they have fathered implies no economic or social responsibilities tend to he very high fertility societies indeed.
- II. Securing the future: Investing in knowledge
- A. The Cairo conference will make its mark by setting out how the world will populaton issues henceforth. There are some real priorities as we embark on this task.
- the data in this field is so insufficient that in far too many cases
 we do not know very

much about the real situation within countries or the effect of family planning or other population program elements. This needs to be addressed if we want to assure that resources are being well directed.

2. the world very much needs and we at the Council are prepared to work on a new

generation of contraceptives. Men are not well served, nor are lactating women. While millions of women prefer contraception controlled by health providers, there is a strong and growing demand for equally effective

contraception, but under the control of women. And most important, we must devise contraception which protects women and therefore their families against disease.

III. The current demographic juncture is fascinating and full of promise. This is the decade in which for the first time ever the number of births, year over year, will decline. This is the first decade in which more than half the world's women use modern contraception. This is the decade in which both traditional family sizes have dropped worldwide by more than 2 children per family. This is the decade in which the world has begun to integrate better care for women's health and wellbeing with family planning. This is the decade in which we will - by our attention or inactivity decide whether we will reach out to millions of families with services and improvements in their life situations - and consequently decide what the ultimate global population will be and when it will be reached. Let us reach out not just to our world but to our shared future.

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