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DATE: September 7, 1984
TO: PHN Staff
FROM: Barbara K. Herz, PHNPR
EXTENSION: 61584
SUBJECT: Mexico International Population Conference - August 5-14, 1984

Attached for your information are:

1. Brief summary of events at the Mexico International Population Conference;

2. The "Mexico City Declaration" adopted at the Conference; and

3. The Report of the Main Committee with 88 actual recommendations also adopted by consensus at the Conference.

Attachments cleared with and cc: Mr. Jeremy Warford

BHerz:lcj
INTERNATIONAL POPULATION CONFERENCE
Mexico City
August 5-14, 1984

1. The United Nations convened the second International Population Conference in Mexico City August 5-14. Dr. Rafael Salas, Executive Director of UNFPA, served as Secretary General of the Conference and Mr. P.S. Menon, Acting Director of the U.N. Population Division, served as Deputy Secretary General. The Conference involved some 140 governments, 80 non-governmental organizations and more than a dozen specialized agencies.

2. The second conference came ten years after the first, at Bucharest, and was designed to reaffirm the World Population Plan of Action adopted at Bucharest and specify additional steps needed to carry out that Plan. At Bucharest debate raged over whether birth rates could be reduced faster by focusing on family planning or on development that would generate demand for family planning. Few developing countries were enthusiastic about family planning. But by the time of the Mexico Conference most informed opinion held that both family planning and broader development mattered—that they reinforced each other in reducing birth rates. This evolution in thinking, which had been reflected in the design of more recent population programs, was evident in Mexico.

3. The Conference was quite successful. It adopted by consensus a Report (containing 88 recommendations) and a Declaration on Population and Development reflecting considerable agreement on four basic and linked points:

   a) Since population size and growth affect development progress and the sharing of its benefits, population policies covering fertility, mortality and morbidity, and migration must be part of development strategies;

   b) Development strategies can build interest in smaller families particularly by easing the most severe poverty, extending women’s education and employment opportunities, and improving maternal and child health (mortality reduction targets were included and fertility reduction targets were encouraged);

   c) All people have a right to information, education, and means to plan their families. Family planning services (along with other basic health care) should be strengthened to make a practical reality of this right. Providing a variety of family planning methods through community-based outreach should be emphasized. Governments may often take the lead in providing such services particularly in poorer countries, but the private commercial sector and NGOs all have major roles to play. Associated biomedical and operational research should be expanded. Resulting child spacing, it was stressed, will improve maternal and child health; and

   ..../2
d) It will require increased resources from developing countries as well as the donor community to extend family planning information and services and support associated research.

The United Nations family and the broader donor community were all asked to increase their support for population activities—and for development strategies and programs that will affect population growth and, of course, quality of life.

4. It was agreed that abortion should not be promoted as a family planning method and that appropriate steps should be taken to help women avoid abortion and to provide humane treatment for women who have had abortions.

5. Two political issues related to disarmament and to occupation and settlement of territory threatened consensus on the Recommendations for a time. A compromise was finally reached permitting the adoption of the Report.

6. In his address to the Conference, President Clausen explained the Bank's intention to discuss development-population linkages in our policy dialogue, to emphasize female education and employment and other development programs that build interest in smaller families, and to double Bank population/health lending and support related research efforts. He also encouraged other donors and developing countries to do more to extend family planning services and information. The President's speech was welcomed warmly. It facilitated highly productive conversations between Bank staff, other donors and present and potential borrowers. WDR was also well received; a press briefing was held on it and over 700 copies were distributed.

7. More generally, the Conference generated widespread interest in population and family planning (press coverage was extensive) and provided an international consensus that individual countries can cite and use when determining their own population policies and programs. More concrete follow-up steps are now under discussion. These will include reviews of progress by the United Nations, but the most important follow-up will be in the country policies and programs that emerge. To be effective, these should involve not only "population programs" as such but the entire strategy of development as it bears on desired family size and on resulting patterns of fertility and mortality. Thus follow-up will have to include better analysis of demographic-economic links as well as stronger efforts to shape development programs with population objectives in mind and more vigorous support of family planning services. For the Bank in particular, follow-up will include closer cooperation with UNFPA, other major donors, and NGOs; analysis of the impact of development on population trends in.
different countries; intensified PHN project development; and consideration of direct Bank support for biomedical or other research. We will also incorporate discussion of the Conference and its implications for our lending program in the forthcoming seminars on WDR.

8. We attach the Mexico City Declaration on Population and Development. Copies of the Recommendations are available from Barbara Herz, Ext. 61584.
INTERNATIONAL CONFERENCE ON POPULATION
Mexico City, August 1984

MEXICO CITY DECLARATION ON POPULATION AND DEVELOPMENT

Draft text proposed by the 29 States listed below represented on the General Committee*

* Austria, Bangladesh, Brazil, Bulgaria, Burundi, Cameroon, China, Cuba, France, Ghana, Hungary, India, Iraq, Italy, Japan, Malaysia, Mexico, Netherlands, Pakistan, Peru, Senegal, Spain, Sri Lanka, Sudan, Sweden, Tunisia, Union of Soviet Socialist Republics, United Republic of Tanzania, and Zambia.
MEXICO CITY DECLARATION ON POPULATION AND DEVELOPMENT

1. The International Conference on Population met in Mexico City from 6 to 14 August 1984, to appraise the implementation of the World Population Plan of Action, adopted by consensus at Bucharest, ten years ago. The Conference reaffirmed the full validity of the principles and objectives of the World Population Plan of Action and adopted a set of recommendations for the further implementation of the Plan in the years ahead.

2. The world has undergone far-reaching changes in the past decade. Significant progress in many fields important for human welfare has been made through national and international efforts. However, for a large number of countries it has been a period of instability, increased unemployment, mounting external indebtedness, stagnation and even decline in economic growth. The number of people living in absolute poverty has increased.

3. Economic difficulties and problems of resource mobilization have been particularly serious in the developing countries. Growing international disparities have further exacerbated already serious problems in social and economic terms. Firm and widespread hope was expressed that increasing international co-operation will lead to a growth in welfare and wealth, their just and equitable distribution and minimal waste in use of resources, thereby promoting development and peace for the benefit of the world's population.

4. Population growth, high mortality and morbidity, and migration problems continue to be causes of great concern requiring immediate action.

5. The Conference confirms that the principal aim of social, economic and human development, of which population goals and policies are integral parts, is to improve the standards of living and quality of life of the people. This Declaration constitutes a solemn undertaking by the nations and international organizations gathered in Mexico City to respect national sovereignty to combat all forms of racial discrimination including apartheid, and to promote social and economic development, human rights and individual freedom.

6. Since Bucharest the global population growth rate has declined from 2.03 to 1.67 per cent per year. In the next decade the growth rate will decline more slowly. Moreover, the annual increase in numbers is expected to continue and may reach 90 million by the year 2000. Ninety per cent of that increase will occur in developing countries and at that time 6.1 billion people are expected to inhabit the Earth.

7. Demographic differences between developed and developing countries remain striking. The average life expectancy at birth, which has increased almost everywhere, is 73 years in developed countries, while in developing countries it is only 57 years and families in developing countries tend to be much larger than elsewhere. This gives cause for concern since social and population pressures may contribute to the continuation of the wide disparity in welfare and the quality of life between developing and developed countries.
8. In the past decade, population issues have been increasingly recognized as a fundamental element in development planning. To be realistic, development policies, plans and programmes must reflect the inextricable links between population, resources, environment and development. Priority should be given to action programmes integrating all essential population and development factors, taking fully into account the need for rational utilization of natural resources and protection of the physical environment and preventing its further deterioration.

9. The experience with population policies in recent years is encouraging. Mortality and morbidity rates have been lowered, although not to the desired extent. Family planning programmes have been successful in reducing fertility at relatively low cost. Countries which consider that their population growth rate hinders their national development plans should adopt appropriate population policies and programmes. Timely action could avoid the accentuation of problems such as overpopulation, unemployment, food shortages, and environmental degradation.

10. Population and development policies reinforce each other when they are responsive to individual, family and community needs. Experience from the past decade demonstrates the necessity of the full participation by the entire community and grass-roots organizations in the design and implementation of policies and programmes. This will ensure that programmes are relevant to local needs and in keeping with personal and social values. It will also promote social awareness of demographic problems.

11. Improving the status of women and enhancing their role is an important goal in itself and will also influence family life and size in a positive way. Community support is essential to bring about the full integration and participation of women into all phases and functions of the development process. Institutional, economic and cultural barriers must be removed and broad and swift action taken to assist women in attaining full equality with men in the social, political and economic life of their communities. To achieve this goal, it is necessary for men and women to share jointly responsibilities in areas such as family life, child-rearing and family planning. Governments should formulate and implement concrete policies which would enhance the status and role of women.

12. Unwanted high fertility adversely affects the health and welfare of individuals and families, especially among the poor, and seriously impedes social and economic progress in many countries. Women and children are the main victims of unregulated fertility. Too many, too close, too early and too late pregnancies are a major cause of maternal, infant and childhood mortality and morbidity.

13. Although considerable progress has been made since Bucharest, millions of people still lack access to safe and effective family planning methods. By the year 2000 some 1.6 billion women will be of childbearing age, 1.3 billion of them in developing countries. Major efforts must be made now to ensure that all couples and individuals can exercise their basic human right to decide freely, responsibly and without coercion, the number and spacing of their children and to have the information, education and means to do so. In exercising this right, the best interests of their living and future children as well as the responsibility towards the community should be taken into account.
14. Although modern contraceptive technology has brought considerable progress into family planning programmes, increased funding is required in order to develop new methods and to improve the safety, efficacy and acceptability of existing methods. Expanded research should also be undertaken in human reproduction to solve problems of infertility and subfecundity.

15. As part of the overall goal to improve the health standards for all people, special attention should be given to maternal and child health services within a primary health care system. Through breast-feeding, adequate nutrition, clean water, immunization programmes, oral rehydration therapy and birth spacing, a virtual revolution in child survival could be achieved. The impact would be dramatic in humanitarian and fertility terms.

16. The coming decades will see rapid changes in population structures with marked regional variations. The absolute numbers of children and youth in developing countries will continue to rise so rapidly that special programmes will be necessary to respond to their needs and aspirations, including productive employment. Aging of populations is a phenomenon which many countries will experience. This issue requires attention particularly in developed countries in view of its social implications and the active contribution the aged can make to the social, cultural and economic life in their countries.

17. Rapid urbanization will continue to be a salient feature. By the end of the century, 7 billion people, 48 per cent of the world's population, might live in cities, frequently very large cities. Integrated urban and rural development strategies should therefore be an essential part of population policies. They should be based on a full evaluation of the costs and benefits to individuals, groups and regions involved, should respect basic human rights and use incentives rather than restrictive measures.

18. The volume and nature of international migratory movements continue to undergo rapid changes. Illegal or undocumented migration and refugee movements have gained particular importance; labour migration of considerable magnitude occurs in all regions. The outflow of skills remains a serious human resource problem in many developing countries. It is indispensable to safeguard the individual and social rights of the persons involved and to protect them from exploitation and treatment not in conformity with basic human rights; it is also necessary to guide these different migration streams. To achieve this, the co-operation of countries of origin and destination and the assistance of international organizations are required.

19. As the years since 1974 have shown, the political commitment of Heads of State and other leaders and the willingness of Governments to take the lead in formulating population programmes and allocating the necessary resources are crucial for the further implementation of the World Population Plan of Action. Governments should attach high priority to the attainment of self-reliance in the management of such programmes, strengthen their administrative and managerial capabilities, and ensure co-ordination of international assistance at the national level.
20. The years since Bucharest have also shown that international co-operation in the field of population is essential for the implementation of recommendations agreed upon by the international community and can be notably successful. The need for increased resources for population activities is emphasized. Adequate and substantial international support and assistance will greatly facilitate the efforts of Governments. It should be provided wholeheartedly and in a spirit of universal solidarity and enlightened self-interest. The United Nations family should continue to perform its vital responsibilities.

21. Non-governmental organizations have a continuing important role in the implementation of the World Population Plan of Action and deserve encouragement and support from Governments and international organizations. Members of Parliament, community leaders, scientists, the media and others in influential positions are called upon to assist in all aspects of population and development work.

* * * *

22. At Bucharest, the world was made aware of the gravity and magnitude of the population problems and their close interrelationship with economic and social development. The message of Mexico City is to forge ahead with effective implementation of the World Population Plan of Action aimed at improving standards of living and quality of life for all peoples of this planet in promotion of their common destiny in peace and security.

23. IN ISSUING THIS DECLARATION, ALL PARTICIPANTS AT THE INTERNATIONAL CONFERENCE ON POPULATION REITERATE THEIR COMMITMENT AND REDEDICATE THEMSELVES TO THE FURTHER IMPLEMENTATION OF THE PLAN.
AGENDA ITEM 6

ADOPTION OF THE REPORT OF THE CONFERENCE

Report of the Main Committee
Rapporteur: Miss Mercedes B. Concepción

1. At its first plenary meeting, on 6 August 1984, the Conference established, under rule 45 of the rules of procedure, the Main Committee and allocated to it item 5. At the same meeting, the Conference elected by acclamation Dr. Frederick Sai (Ghana) as Presiding Officer of the Main Committee.

2. At its first meeting on 6 August, the Committee elected the following officers:

Deputy Presiding Officers: Mr. Luis King (Ecuador), Mr. León Tabah (France) and Mr. Józef Pajestka (Poland).

Rapporteur: Miss Mercedes B. Concepción (Philippines).

3. The Committee had before it the following documents:

(a) Recommendations for the further implementation of the World Population Plan of Action: note by the Secretariat (E/CONF.76/5 and Corr.1 (Chinese only));

(b) Recommendations of the regional commissions for the further implementation of the World Population Plan of Action at the regional level: report of the Secretary-General (E/CONF.76/6 and Corr.1 (Chinese, English, French, Russian and Spanish only)).

4. The Committee decided to concentrate its work on the formulation of the recommendations for the further implementation of the World Population Plan of Action, taking as the basis of its work the text prepared by the Preparatory Committee contained in document E/CONF.76/5.
5. The Committee considered document E/CONF.76/5 and amendments thereto (E/CONF.76/MC/L.6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 25, 26, 27, 28, 29, 30, 31, 32, 33, 35, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 58, 59, 60, 67, 68, 69, 70, 71, 72 and 73) proposed by a number of delegations in the course of its 14 meetings held from 6 to 13 August 1984.

6. At its 14th meeting held on 13 August 1984, the Committee adopted by a vote* the text of the recommendations for the further implementation of the World Population Plan of Action, contained in document E/CONF.76/L.3 (and addenda) and submitted it for adoption to the Conference.**

7. The text of the Draft Recommendations for the further implementation of the World Population Plan of Action is reproduced in the annex to this report.

* The vote was 51 in favour, 1 against with no abstentions.

** The following delegations made reservations: India, Ukrainian Soviet Socialist Republic and the Union of Soviet Socialist Republics to recommendation 3, Sweden to recommendation 13 (e) and India and Mexico to recommendation 88.
## Annex

**RECOMMENDATIONS FOR THE FURTHER IMPLEMENTATION OF THE WORLD POPULATION PLAN OF ACTION**

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1. During the years since the United Nations World Population Conference in 1974, the World Population Plan of Action has served as a guide to action in the field of population for Governments, for international organizations and for non-governmental organizations. The consensus of Bucharest has facilitated international cooperation and helped to bring population issues to the forefront. The principles and objectives of the Plan have shown themselves to remain valid and are reaffirmed.

2. However, the demographic, social, economic and political conditions of the world have changed considerably. In many developing countries the demographic situation has improved since 1974; fertility has declined, morbidity has diminished, infant mortality has declined and life expectancy has increased. There have also been improvements in the social sphere. In many developing countries school enrolment and literacy rates have increased, and access to health services has improved. For the developing countries as a whole, there has been an increase in per capita calorie supply, though in some regions, such as Africa, per capita calorie supply has not improved. Economic trends have, however, been less encouraging. Although per capita income did not grow as rapidly since 1974 as in the previous 10 years, it was nonetheless true that per capita income did grow moderately in a number of developing countries during that period. During the latter part of the decade, however, many developing countries experienced little or no growth in per capita income, and many experienced actual declines in per capita income with the result that the gap between the per capita incomes of many developed and most developing countries widened during the period. Moreover, while progress has been made in achieving some goals of the World Population Plan of Action, other goals have not been met. Some important gaps in knowledge have been filled and new issues have emerged to challenge the international community. Therefore, as foreseen at Bucharest, some of the goals and recommendations of the Plan now call for modification, complementing and further refining. Though the community of nations has made considerable progress in the pursuit of the goals of the World Population Plan of Action, there is still a great need for continuation and acceleration in these efforts to realize those goals, as they have been refined at Mexico City in August 1984.

3. With respect to some major issues raised in the Plan, the following facts and trends deserve special mention:

(a) Though the global rate of population growth has declined slightly since 1974, the world population has increased by 770 million during the decade, and 90 per cent of that increase has occurred in the developing countries. Furthermore, the annual additions to the world's population are increasing in size. Moreover, in many countries of Africa, Latin America and Asia growth rates have increased owing to mortality declines not accompanied by equivalent declines in fertility;

(b) At the global level, and in virtually all countries, the level of mortality has fallen. However, the targets set by the World Population Plan of Action have not been met. At the same time, new approaches in the form of primary health care have been widely adopted;
(c) At the global level, fertility declined substantially but, as with population growth, the changes in some regions were far greater than in others. For national and sub-national groups in populations and sub-populations representing about one fourth of the world's population, no decline of fertility was observed. The fertility changes were associated with progress in socio-economic development, with continuing changes in the status of women, with changes in family structure in some regions, and with the increased availability of family planning services.

(d) Improvements in the status of women have been promoted by the World Population Plan of Action and the plans and programmes generated under the aegis of the United Nations Decade for Women. However, persisting inequalities between women and men are evident in the higher incidence of poverty, unemployment and illiteracy among women, the limited range of employment categories and the uneven share of home and family responsibilities borne by women. At the same time, it is increasingly recognized that socio-economic development is curtailed without the active participation of women in all fields of activity.
(e) Access to and knowledge of family planning have come to be much more widely permitted and supported by Governments as a contribution to maternal and child health, to the human rights of individuals and couples, and as a demographic measure. Nevertheless, data from the World Fertility Survey for developing countries indicate that, among women who wanted no more children and were exposed to the risk of pregnancy, on average over half were not using contraception;

(f) As a result of demographic trends, the population structures have changed. In particular, the aging of populations and changes in household and family structure and composition have continued;

(g) In most regions of the world, urban populations continued to increase far more rapidly than total populations. In some developed countries, however, there was a trend towards deconcentration. Rapid urban population growth has become a matter of growing policy concern to most Governments, particularly in the developing regions in which the urban unemployment level remains extremely high. In some regions, the continuing high levels of rural population growth renders rural development difficult;

(h) Persistent disparities among countries, particularly in population and economic development as also the felt needs of some host countries, have increased the potential of further international migration. These migrant workers do contribute to the economic development of receiving countries. However, the direction, magnitude and the type of international migration flows is a matter of concern to some countries;

(i) The flows of refugees are increasing in different regions of the world and are also a matter of increasing concern;

(j) Problems relating to involuntary migration have also increased;

(k) The overall social and economic development of the developing countries and the implementation of effective measures to deal with population trends in the period 1974-1984 have been greatly hampered by the serious effects of the international economic crisis on the economies of the developing countries. In the majority of developing countries, increases in population and its aspirations have contributed to increasing imports versus exports - food in particular. Furthermore, existing population programmes have been greatly affected by a shortage of adequate resources from both national and international sources;

(l) In many countries population has continued to grow rapidly, aggravating such environmental and natural resource problems as soil erosion, desertification and deforestation, which affect food and agricultural production. The mechanisms to deal effectively with these problems are still in an incipient stage in many countries. There is, however, increasing awareness of the need to take into account natural resources and the quality of the environment along with social and economic factors;

(m) In the years since 1974 there have been a number of hopeful developments. New agricultural technologies, including the green revolution, have made it possible to better meet the needs of growing populations. Progress in molecular biology has potential for influencing both levels of fertility and mortality and
the development of communication satellites may greatly advance mass education, including education directly related to population issues. The economic and social consequences of these advances raise serious ethical questions and may have a fundamental impact on the future of society.

4. The principles and objectives of the World Population Plan of Action affirm that the principal aim of social, economic and cultural development, of which population goals and policies are integral parts, is to improve the standards of living and quality of life of the people. Achieving this goal requires co-ordinated action in population with all socio-economic fields; thus, population trends must be co-ordinated with trends of economic and social development. In helping to achieve this co-ordination, the World Population Plan of Action should become an essential component of the system of international strategies for the promotion of economic development, the quality of life, human rights and fundamental freedoms.

5. The Plan affirms that the consideration of population problems cannot be limited to the analysis of population trends, since population variables influence development and are influenced by them. The present population situation in developing countries is related, inter alia, to unequal processes of socio-economic development, which are intensified by inequities in international relations, and by related disparities in standards of living.

6. It remains true that the basis for an effective solution of population problems is, above all, socio-economic transformation and, therefore, population policies must always be considered as a constituent element of socio-economic development policies and never as substitutes for them. However, even if social and economic development is slow or lacking, family planning programmes may have an impact on the level of fertility.

7. While the importance of integrating women into the development of society has been recognized by many Governments, much remains to be done to fulfil the recommendations adopted in 1974 by the World Population Conference as elaborated in 1975 by the World Conference of the International Women's Year, and in 1980 by the World Conference of the United Nations Decade for Women. The Plan, as well as other important international instruments, stressed the urgency of achieving the full integration of women in society on an equal basis with men and of abolishing any form of discrimination against women. In order to provide women with the freedom to participate fully in the life of the society, it is equally necessary for men to share fully with women responsibilities in the areas of family planning, child-rearing and all other aspects of family life. The achievement of these objectives is integral to achieving development goals, including those related to population policy.

8. To achieve the goals of development, the formulation of national population goals and policies must take into account the need to contribute to an economic development which is environmentally sustainable over the long run and which protects the ecological balance.
9. The interdependence among countries has become ever more manifest and requires that national and international strategies pursue an integrated and balanced approach to population, resources, environment and development at national and international levels, by ensuring that the developing countries of the world achieve a significant improvement in their living standard and in the quality of their lives through economic and social transformation.

10. As the world enters a second decade after the World Population Conference of 1974, major challenges and problems in the area of population that are of primary concern to the international community and which are particularly relevant to the economic and social progress of the developing countries are:

   (a) The task of reducing poverty, expanding employment and assuring the right to work by encouraging economic growth, which includes measures for the just distribution of wealth;

   (b) The continued need to further promote the status of women and the expansion and advancement of their roles;

   (c) The annual increments in population, which are projected to grow larger throughout the decade;

   (d) The rate of population growth, which remains high in developing countries, and which, for many countries, may even rise in the coming years;

   (e) Changes in population structures, particularly in relation to aging of populations, changes in household and family structure and composition, and the growth of the working-age populations in developing countries where economies are not growing adequately;

   (f) High levels of infant and maternal mortality, and the important differential mortality between regions, countries, social groups and sexes;

   (g) The persistence of fertility rates substantially higher or lower than those desired by Governments and peoples in some countries;

   (h) The unmet needs for family planning in many countries, which unless they are addressed will grow even greater as the number of couples of reproductive age increases substantially during the coming decade;

   (i) The disequilibrium between rates of change in population and changes in resources, environment and development;

   (j) The persistence of high rates of internal migration, new forms of mobility, high rates of urbanization, and the concentration of population in large cities in developing countries where these phenomena have negative consequences for development;

   (k) The importance and diversity of international migration and its consequences for countries of origin and destination and the necessity for co-operation between these countries in this field;

   (l) The need of finding solutions to all problems related to refugees, whose numbers are increasing;
(m) The increasing number of persons who lack sufficient food, pure water, shelter, health care, education and the other facilities required to achieve full human potential;

(n) The consequences of progress in agricultural technology and in genetic engineering, which may lead to essential changes in the character of our societies;

(o) The relatively high proportion of young people in the populations of the developing countries and the problems and consequences attendant to this which, unless addressed, will assure that populations will continue to grow for many decades to come;

(p) The need to strengthen the capacities of developing countries in data collection, analysis and utilization and the development of appropriately trained personnel in the population area;

(q) The need for increased national and international support to implement the Plan, in particular, adequate multilateral resources to support the efforts of developing countries.

II. The Plan and the following recommendations for its further implementation should be considered within the framework of other intergovernmental strategies and plans. In this respect, they reaffirm the principles and objectives of the Charter of the United Nations, the Universal Declaration of Human Rights (General Assembly resolution 217 A (III)), the International Covenants on Human Rights (General Assembly resolutions 2200 A (XXI), annex), the Declaration on Social Progress and Development (General Assembly resolution 2542 (XXIV)), the Declaration and the Programme of Action on the Establishment of a New International Economic Order (General Assembly resolutions 3201 (S-VI) and 3202 (S-VI)), the Charter of Economic Rights and Duties of States (General Assembly resolution 3281 (XXX)), and the International Development Strategy for the Third United Nations Development Decade (General Assembly resolution 35/56, annex) and General Assembly resolutions 34/75 and 35/46 on the declaration of the 1980s as the Second Disarmament Decade. In addition, the following declarations, plans of action and other relevant texts that have emanated from intergovernmental meetings must be stressed because of their relevance to the objectives of the World Population Plan of Action:

(a) United Nations Declaration on the Rights of the Child (1959); h/


(c) Universal Declaration on the Eradication of Hunger and Malnutrition (Rome, 1974); e/

(d) World Plan of Action for the Implementation of the Objectives of the International Women's Year (Mexico City, 1975) f/ and Programme of Action for the Second Half of the United Nations Decade for Women (Copenhagen, 1980); g/

(e) Lima Declaration and Plan of Action on Industrial Development and Co-operation (Lima, 1975); h/
(f) Declaration of Principles and Programme of Action adopted by the Tripartite World Conference on Employment, Income Distribution and Social Progress and the International Division of Labour (Geneva, 1976);  

(g) Vancouver Declaration on Human Settlements, 1976;  

(h) Plan of Action to Combat Desertification (Nairobi, 1977);  

(i) Mar del Plata Action Plan adopted by the United Nations Water Conference (Mar del Plata, 1977);  

(j) Declaration of Alma-Ata adopted by the International Conference on Primary Health Care (Alma-Ata, 1976);  

(k) Programme of Action to Combat Racism and Racial Discrimination (Geneva, 1978);  

(l) Buenos Aires Plan of Action for Promoting and Implementing Technical Co-operation among Developing Countries (Buenos Aires, 1978);  

(m) Declaration of Principles and Programme of Action of the World Conference on Agrarian Reform and Rural Development (Rome, 1979);  

(n) Vienna Programme of Action on Science and Technology for Development (Vienna, 1979);  

(o) Global Strategy for Health for All by the Year 2000, adopted by the World Health Assembly in its resolution WHA 34.36 of 22 May 1981 and endorsed by the General Assembly in its resolution 36/43 of 19 November 1981;  

(p) Nairobi Programme of Action for the Development and Utilization of New and Renewable Sources of Energy (Nairobi, 1981);  

(q) Substantial New Programme of Action for the 1980s for the Least Developed Countries (Paris, 1981);  

(r) International Plan of Action on Aging (Vienna, 1982).
I. PEACE, SECURITY AND POPULATION

12. Being aware of the existing close links between peace and development, it is of great importance for the world community to work ceaselessly to promote, among nations, peace, security, disarmament and co-operation, which are indispensable for the achievement of the goals of humane population policies and for economic and social development. Creating the conditions for real peace and security would permit an allocation of resources to social and economic rather than to military programmes which would greatly help to attain the goals and objectives of the World Population Plan of Action.

II. RECOMMENDATIONS FOR ACTION

13. Many of the following recommendations are addressed to Governments. This is not meant to preclude the efforts or initiatives of international organizations, non-governmental organizations, private institutions or organizations, or families and individuals where their efforts can make an effective contribution to overall population or development goals on the basis of strict respect for sovereignty and national legislation in force.

A. Socio-economic development and population

14. The World Population Plan of Action recognizes explicitly the importance of the interrelationships between population and socio-economic development and affirms, inter alia, that "the basis for an effective solution of population problems is, above all, socio-economic transformation" (para. 1) and that "population policies are constituent elements of socio-economic development policies, never substitutes for them" (para. 14 (d)). Consequently, the Plan of Action includes a number of recommendations dealing with socio-economic policies, the contents of which fully deserve reaffirmation and further development. The following recommendations reflect the view that if national and international policies are not adopted and implemented to increase the overall resources and the share of the world's resources going to the very poor, it will be extremely difficult for many countries to achieve the levels of fertility and mortality that they desire. The recommendations reflect the importance to be attached to an integrated approach towards population and development, both in national policies and at the international level. The recommendations also reflect the view that, although the actions of the developing countries are of primary importance, the attainment of the goals and objectives stipulated in the International Development Strategy for the Third United Nations Development Decade will require appropriate policies by the developed countries and by the international community which support the efforts of the developing countries to achieve those objectives.

Recommendation 1

Considering that social and economic development is a central factor in the solution of population and interrelated problems and that population factors are very important in development plans and strategies and have a major impact on the attainment of development objectives, national development policies, plans and programmes, as well as international development strategies, should be formulated on the basis of an integrated approach that takes into account the interrelationships between population, resources, environment and development. In this context, national and international efforts should give priority to action programmes integrating population and development.
Recommendation 2

National and international efforts should give high priority to the following development goals included in the International Development Strategy for the Third United Nations Development Decade: the eradication of mass hunger and the achievement of adequate health and nutrition levels, the eradication of mass illiteracy, the improvement of the status of women, the elimination of mass unemployment and underemployment and the elimination of inequality in international economic relations. To achieve these goals, it is further recommended that Governments should take population trends fully into account when formulating their development plans and programmes.

Recommendation 3 *

In order to promote the broadly based socio-economic development that is essential to achieving an adequate quality of life as well as national population objectives and to respond effectively to the requirements posed by demographic trends, all countries are urged to co-operate in efforts to achieve the above objectives and to accelerate development, particularly in developing countries, inter alia, through policies to lower barriers to trade, to increase multilateral and bilateral development assistance, to improve the quality and effectiveness of this assistance, to increase real income earnings from the export of commodities to solve the problems arising from the debt burden in a significant number of developing countries, to increase the volume and improve the terms of international lending, and to encourage various sources of investment and, wherever appropriate, entrepreneurial initiatives. To respond to the needs of populations for employment, food self-sufficiency, and improvements in the quality of life and to increase self-reliance, productive investment should be increased, appropriate industries should be encouraged and substantial investments should be fostered in rural and agricultural development.

Recommendation 4

In countries in which there are imbalances between trends in population growth and resources and environmental requirements, Governments are urged, in the context of overall development policies, to adopt and implement specific policies, including population policies, that will contribute to redressing such imbalances and promote improved methods of identifying, extracting, renewing, utilizing and conserving natural resources. Efforts should be made to accelerate the transition from traditional to new and renewable sources of energy while at the same time maintaining the integrity of the environment. Governments should also implement appropriate policy measures to avoid the further destruction of the ecological equilibria and take measures to restore them.

* While joining the consensus the delegations of the Union of Soviet Socialist Republics and the Ukrainian Soviet Socialist Republic stated that:

"They cannot accept the unbalanced wording in recommendation 3, which implies underestimation of the role that the state sector is playing in socio-economic development as reflected in relevant United Nations documents."
B. The role and the status of women

15. The World Population Plan of Action (paras. 15 (a), 32 (b), 42 and 43) as well as other important international instruments - in particular the 1975 Mexico City Plan of Action, the 1980 Copenhagen Programme of Action for the United Nations Decade for Women and the Convention on the Elimination of All Forms of Discrimination Against Women - stress the urgency of achieving the full integration of women in society on an equal basis with men and of abolishing any form of discrimination against women. Comprehensive strategies to address these concerns will be formulated at the 1985 Nairobi Conference which is being convened to review and appraise the Achievements of the United Nations Decade for Women.

16. In view of the slow progress made since 1974 in the achievement of equality for women, the broadening of the role and the improvement of the status of women remain important goals that should be pursued as ends in themselves. The achievement of genuine equality with respect to opportunities, responsibilities and rights would guarantee that women could participate fully with men in all aspects of decision-making regarding population and development issues that affect their families, communities and countries.

17. The ability of women to control their own fertility forms an important basis for the enjoyment of other rights; likewise, the assurance of socio-economic opportunities on an equal basis with men and the provision of the necessary services and facilities enable women to take greater responsibility for their reproductive lives. The following recommendations take into account the need for actions to ensure that women can effectively exercise rights equal to those of men in all spheres of economic, social, cultural and political life, and in particular those rights which pertain most directly to population concerns.

Recommendation 5

Governments are strongly urged to integrate women fully into all phases of the development process, including planning, policy and decision-making. Governments should pursue more aggressively action programmes aimed at improving and protecting the legal rights and status of women through efforts to identify and to remove institutional and cultural barriers to women's education, training, employment and access to health care. In addition, Governments should provide remedial measures, including mass education programmes, to assist women in attaining equality with men in the social, political and economic life of their countries. The promotion of community support and the collaboration, at the request of Governments, of non-governmental organizations, particularly women's organizations, in expediting these efforts should be given paramount importance.
Governments should ensure that women are free to participate in the labour force and are neither restricted from, nor forced to participate in, the labour force for reasons of demographic policy or cultural tradition. Further, the biological role of women in the reproductive process should in no way be used as a reason for limiting women's right to work. Governments should take the initiative in removing any existing barriers to the realization of that right and should create opportunities and conditions such that activities outside the home can be combined with child-rearing and household activities.

Governments should provide women, through education, training and employment, with opportunities for personal fulfilment in familial and non-familial roles, as well as full participation in economic, social and cultural life, while continuing to give due support to their important social role as mothers. To this end, in those countries where child-bearing occurs when the mother is too young, Government policies should encourage delay in the commencement of child-bearing.

Interested Governments should make efforts to raise the age of entry into marriage in countries in which this age at marriage is still quite low.

Governments should promote and encourage, through information, education and communication, as well as through employment legislation and institutional support, where appropriate, the active involvement of men in all areas of family responsibility, including family planning, child-rearing and housework, so that family responsibilities can be fully shared by both partners.

All Governments which have not already done so are strongly urged to sign and ratify the Convention on the Elimination of All Forms of Discrimination against Women.

C. Development of population policies

18. The World Population Plan of Action urges that population policies should not be considered substitutes for socio-economic development policies but rather be integral components of those policies (para. 2). In formulating population policies, Governments may aim to affect one or more of the following population trends and characteristics, among others, population growth, morbidity and mortality, reproduction, population distribution, internal international migration and population
structure. The Plan also recognizes the sovereignty of nations in the formulation, adoption and implementation of their population policies (para. 14), consistent with basic human rights and responsibilities of individuals, couples and families (para. 17).

Recommendation 11

Governments are urged to adopt population policies and social and economic development policies that are mutually reinforcing. Such policies should be formulated with particular attention to the individual, the family and community levels, as well as to other factors at the micro-level and macro-level. Special emphasis needs to be given to linkages between population trends, labour supply and demand, the problems of unemployment and the creation of productive employment. Governments are urged to share their experience in integrating population policies into other social and economic development policies.

Recommendation 12

Governments are encouraged to provide adequate resources and, where appropriate, to adopt innovative measures for the implementation of population policy. To be effective and successful, population programmes and development activities should be responsive to local values and needs, and those directly affected should be involved in the decision-making process at all levels. Moreover, in these activities, the full participation of the community and concerned non-governmental organizations, in particular, women's organizations, should be encouraged.

D. Population goals and policies

1. Population growth

19. United Nations population projections, as assessed in 1982,* indicate that, between 1984 and the end of the present century, the growth rate of the world population will decline more slowly than during the past 10 years. This is partly due to the fact that, as a consequence of high fertility levels in the past, the number of women of child-bearing age (15-49) will continue to grow rapidly. Although, according to the medium variant projections, the total fertility rate during this period is expected to decline from 3.6 to 3.0 children per woman, the annual rate of growth is projected to reach only 1.5 per cent. For the world as a whole, the present annual increment of 78 million is projected to increase to 89 million by 1995-2000. Thus, in the 16 years from 1984 to 2000, the world population is expected to increase by 1.3 billion, from 4.8 billion in 1984 to 6.1 billion in 2000.

20. These global perspectives conceal significant demographic differences existing at the regional as well as the country levels. According to the United Nations

* The United Nations demographic estimates or projections are being revised every two years.
estimates, the current total fertility rates range from 5.4 children per woman for Africa, 4.7 for South Asia, 4.1 for Latin America, 2.3 for East Asia, to 1.9 for Europe and North America. During the remainder of the present century these differences are not expected to narrow significantly. Moreover, these projections assume a continuation of present efforts and policies without which uninterrupted declines in both fertility and population growth cannot be achieved. The World Population Plan of Action invites countries to consider adopting population policies, within the framework of socio-economic development, which are consistent with basic human rights and national goals and values (para. 17). It is in the light of this provision and the above-mentioned trends that the following recommendation is made.

**Recommendation 13**

Countries which consider that their population growth rates hinder the attainment of national goals are invited to consider pursuing relevant demographic policies, within the framework of socio-economic development. Such policies should respect human rights, the religious beliefs, philosophical convictions, cultural values and fundamental rights of each individual and couple, to determine the size of its own family.

**2. Morbidity and mortality**

(a) **Goals and general guidance for health policies**

21. The World Population Plan of Action set targets for those countries with the highest mortality levels for 1985 and noted the progress necessary for each region to attain an average life expectancy of 62 years by 1985 and 74 years by 2000 (paras. 22 and 23). Recommendation 14 below updates the targets for countries with higher mortality levels and challenges countries with intermediate or lower mortality levels to continue and strengthen their efforts for the improvement of health and the reduction of mortality in the context of overall population and development planning. The targets are feasible, provided a commitment is made and resources are well allocated. Their achievement requires that communities become increasingly involved in efforts to promote their health and welfare, that all agencies and institutions of government be involved in this endeavour, and that each programme be evaluated. The achievements of these targets will also require that countries will not be subject to aggression (para. 24 (f)). The attainment of reduced levels of morbidity and mortality is in accordance with the Declaration of Alma Ata, endorsed by the General Assembly in its resolution 34/58 of 29 November 1979.
Recommendation 14

All Governments, regardless of the mortality levels of their population, are strongly urged to strive to reduce morbidity and mortality levels and socio-economic and geographical differentials in their countries and to improve health among all population groups, especially among those groups where the morbidity and mortality levels are the highest. Countries with higher mortality levels should aim for a life expectancy at birth of at least 60 years and an infant mortality rate of less than 50 per 1,000 live births by the year 2000. Countries with intermediate mortality levels should aim to achieve a life expectancy at birth of at least 70 years and an infant mortality rate of less than 35 per 1,000 live births by the year 2000. The lower mortality countries should continue their efforts to improve the health of all population groups and to reduce mortality even further, in keeping with their social and economic capacities. Levels, trends and differentials in mortality should be monitored in order to evaluate the success of programmes in achieving these goals.

Recommendation 15

Governmental, intergovernmental, parliamentary and non-governmental organizations should involve the community in all possible ways in the planning, implementation and evaluation of health improvement programmes.

Recommendation 16

The promotion and preservation of health should be the explicit concern of all levels and branches of government. It is strongly urged, therefore, that governmental action in the area of mortality and health should go beyond the health sector and involve all relevant sectors of national and community development. All development programmes should be monitored and analysed by the Government concerned in order to assess and to improve their impact on health.

(b) Infant, child and maternal morbidity and mortality

22. The World Population Plan of Action (paras. 24 and 32 (a)) gives special attention to measures aimed at reducing foetal, infant and early childhood mortality, and related maternal morbidity and mortality. The following recommendations give more precise guidelines for the implementation of the Plan, in accordance with the objective of the Global Strategy for Health for All by the Year 2000, which was adopted by the World Health Assembly and endorsed by the General Assembly in its resolution 36/43 of 19 November 1981.

Recommendation 17

Governments are urged to take immediate steps to identify the underlying causes of morbidity and mortality among infants and young children and develop special programmes to attack these conditions. Strategies to be considered include emphasis on mother and child health services within primary health care, the introduction and support of a package of specific intervention measures, and
massive community-wide education and mobilization to support these. Special efforts should be made to reach under-served and deprived populations in rural areas and urban slums. The international community should take concerted action to support national efforts to this end.

**Recommendation 18**

All efforts should be made to reduce maternal morbidity and mortality. Governments are urged:

(a) To reduce maternal mortality by at least 50 per cent by the year 2000, where such mortality is very high (higher than 100 maternal deaths per 100,000 births);

(b) To provide prenuptial medical examinations;

(c) To provide prenatal and perinatal care with special attention to high-risk pregnancies and ensure safe delivery by means of trained attendants, including traditional birth attendants, as culturally acceptable;

(d) To give special emphasis in nutritional programmes to the needs of pregnant women and nursing mothers;

(e) To take appropriate steps to help women avoid abortion, which in no case should be promoted as a method of family planning, and whenever possible, provide for the humane treatment and counselling of women who have had recourse to abortion;

(f) To support family planning as a health measure in maternal and child health programmes as a way of reducing births too early or too late in the mother's life, of increasing the interval between births and of diminishing higher birth orders, and by giving special consideration to the needs of those in the post-partum and/or breast-feeding period.

* While joining the consensus the Swedish representative made the following statement:

"In the opinion of the Swedish delegation, effective contraception liberates women from unwanted pregnancies and induced abortions and improves considerably the health of both mothers and children. Prevention of unwanted pregnancies must always be the principal aim. However, illegal abortions performed under unsafe medical conditions represent a very serious health hazard in many countries.

"The Swedish delegation regrets very much that an amendment was adopted to delete the word "illegal" from recommendation 13 (e) old numbering/ which suggests that this Conference failed to recognize the importance of this very serious problem. The Swedish delegation would like to reiterate that a major step towards the elimination of illegal abortions is to provide all women in the world with access to legal and safe abortions."
(g) To encourage community education to change prevailing attitudes which countenance pregnancy and childbearing at young ages, recognizing that pregnancy occurring in young adolescents, both married and unmarried, has adverse effects on the morbidity and mortality of both mother and child.

Recommendation 19

Governments are urged, as a special measure, to take immediate and effective action, within the context of primary health care, to expand the use of techniques such as child growth monitoring, oral rehydration therapy, immunization and appropriate birth spacing, which have the potential to achieve a virtual revolution in child survival. All available communication channels should be used to promote these techniques. The important role of the family, especially of mothers, in the area of primary health care should be recognized.

Recommendation 20

Governments are urged to promote and support breast-feeding. Information should be widely disseminated on the nutritional, immunological and psychological benefits of breast-feeding, as well as its influence on child spacing. Nursing mothers, especially those in the labour force, should be provided with appropriate maternal benefits, including day-care facilities, access to proper food supplements for themselves, and complementary weaning foods for their infants, in order to ensure adequate nutrition throughout infancy and early childhood. Governments which have accepted it should be urged to take the necessary steps to implement the International Code of Marketing of Breast-Milk Substitutes, as adopted by the 34th World Health Assembly (resolution WHA 34.22).

Recommendation 21

Governments are strongly urged to take all necessary measures, including, whenever they consider it useful, utilizing the services of non-governmental organizations, to increase the level of education attained by women as an end in itself and because of its close link to child survival and spacing. In countries where there are still many illiterate women, a supplementary effort should be made to extend mass education programmes.

(c) Adult morbidity and mortality

23. The levels of adult morbidity and mortality and their major causes are still of concern for many Governments in both developing and developed countries. The World Population Plan of Action recognizes the importance of improving health conditions for the working-age population and stresses the need for the eradication of infectious and parasitic diseases (para. 24 (d) and (e)). In countries where infectious and parasitic diseases have reached low levels of incidence, chronic and non-infectious conditions still require urgent attention. As personal health practices and behaviour affect health, dissemination of the relevant information is important so that people can act on the basis of full information.
Recommendation 22

Governments of countries where mortality is still high are urged, with adequate international support, to implement intensive programmes to control infectious and contagious diseases, provide as far as possible sufficient potable water and adequate sanitation facilities, and implement other elements of primary health care for both adults and children.

Recommendation 23

Governments, assisted by intergovernmental and non-governmental organizations, are urged to provide individuals and families with all relevant information on the ways in which personal behaviour or practices affect health, and to ensure that the necessary resources are available for them to act on the basis of this information. In this context, they are strongly urged to initiate or strengthen preventive action programmes to reduce the consumption of tobacco, alcohol, drugs and other products potentially dangerous to health.

Recommendation 24

Governments are urged to take necessary preventive or corrective measures to eliminate the negative consequences for health that characterize many occupations.

Recommendation 25

Governments are urged to promote the best conditions for family formation and family life, ensuring, inter alia, that children enjoy the most favourable environment for their physical, psychological and social development.

3. Reproduction and the family

24. The World Population Plan of Action recognizes the family, in its many forms, as the basic unit of society and recommends that it should be given legal protection and that measures should be taken to protect both the rights of spouses and the rights of children in the case of the termination or dissolution of marriage and the right of individuals to enter marriage only with their free and full consent (para. 39). It also recommends that all children, regardless of the circumstances of their parentage, should enjoy equal legal and social status and the full support of both parents (para. 40). The family is the main institution through which social, economic and cultural change affects fertility. While the family has undergone and continues to undergo fundamental changes in its structure and function, the family continues to be recognized as the proper setting for mutual love, support and companionship of spouses, as the primary determinant of the survival of children born into it, as the first agent of the socialization of future generations, and in many societies as the only supporting institution for the aged. The family is also an important agent of social and political and cultural change. Therefore, in the design and implementation of fertility policies, Governments must respect individual rights while at the same time giving full recognition to the important role of the family.

25. The World Population Plan of Action recognizes, as one of its principles, the basic human right of all couples and individuals to decide freely and responsibly the number and spacing of their children (para. 14 (f)). For this right to be realized,
couples and individuals must have access to the necessary education, information and means to regulate their fertility, regardless of the overall demographic goals of the Government (paras. 28 and 29 (a)). While this right is widely accepted, many couples and individuals are unable to exercise it effectively, either because they lack access to information, education and/or services or because although some services are available, yet an appropriate range of methods and follow-up services are not. Indeed, data from the World Fertility Survey for developing countries indicate that on average over one fourth of births in the year prior to the Survey had not been desired. In addition, the decline in the prevalence of certain traditional practices, such as prolonged breast-feeding and post-partum abstinence, has increased the relative importance of non-traditional family planning as a tool for the proper spacing of births.

26. While the Plan also stresses the responsibility of individuals and couples in exercising their right to choose, the experience of the past 10 years suggests that Governments can do more to assist their people in making their reproductive decisions in a responsible way (para. 14 (f)). Any recognition of rights also implies responsibilities; in this case, it implies that couples and individuals should exercise this right, taking seriously into consideration their own situation, as well as the implications of their decisions for the balanced development of their children and of the community and society in which they live. The following recommendations reaffirm the provisions of the World Population Plan of Action and suggest specific measures for the attainment of the objectives of the Plan in these areas.

Recommendation 26

Governments should, as a matter of urgency, make universally available information, education and the means to assist couples and individuals to achieve their desired number of children. Family planning information, education and means should include all medically approved and appropriate methods of family planning, including natural family planning, to ensure a voluntary and free choice in accordance with changing individual and cultural values. Particular attention should be given to those segments of the population which are most vulnerable and difficult to reach.

Recommendation 27

Governments and intergovernmental and non-governmental organizations are strongly urged in accordance with national policies and priorities to allocate the necessary resources to family planning services, where these services are inadequate and are not meeting the needs of a rapidly growing population of reproductive age.

Recommendation 28

Governments are urged to improve the quality and enhance the effectiveness of family planning services and of the monitoring of those services, including appropriate follow-up. Coverage should be extended as rapidly as possible to all couples and individuals of both sexes, particularly in rural areas. Family planning services should be made available through appropriate and practicable channels, including integrated health-care programmes (especially maternal and child health and primary health care), community-based distribution, subsidized commercial

/...
retail sales, and, in particular, local distribution through retail outlets where health infrastructure and health referral services exist. Also, Governments should bear in mind the innovative role which non-governmental organizations, in particular women's organizations, can play in improving the availability and effectiveness of family planning services. All countries should ensure that fertility control methods conform to adequate standards of quality, efficacy and safety.

Recommendation 29

Governments are urged to ensure that adolescents, both boys and girls, receive adequate education, including family-life and sex education, with due consideration given to the role, rights and obligations of parents and changing individual and cultural values. Suitable family planning information and services should be made available to adolescents within the changing socio-cultural framework of each country.

Recommendation 30

Governments are urged to ensure that all couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so; the responsibility of couples and individuals in the exercise of this right takes into account the needs of their living and future children and their responsibilities towards the community.

Recommendation 31

Legislation and policies concerning the family and programmes of incentives and disincentives should be neither coercive nor discriminatory and should be consistent with internationally recognized human rights as well as with changing individual and cultural values.

Recommendation 32

Governments which have adopted or intend to adopt national fertility goals should translate these goals into specific policies and operational steps that are clearly understood by the citizens.

Recommendation 33

Governments that have adopted or intend to adopt fertility policies are urged to set their own quantitative targets in this area. Countries implementing family planning programmes should establish programme targets at the operational level, respecting the basic right of couples and individuals to decide freely and responsibly the number and spacing of their children, taking into account the needs of their living and future children and their responsibilities, exercised freely and without coercion, towards the community.

Recommendation 34

Family policies adopted or encouraged by Government should be sensitive to the need for:

* Mass, decentralized and subsidized distribution of contraceptives to all existing commercial outlets.
(a) Financial and/or other support to parents, including single parents, in the period preceding or following the birth of a child, as well as the period during which parents assume the major responsibility for the care and education of children;

(b) A strengthening of child welfare services and child-care provisions;

(c) Maternity and paternity leave for a sufficient length of time to enable either parent to care for the child, with adequate remunerative compensation and without detriment to subsequent career prospects and basic communal facilities that will enable working parents to provide care for children and aged members of their families; and

(d) Assistance to young couples and parents, including single parents, in acquiring suitable housing.

Recommendation 35

Governments wishing to decrease fertility levels should adopt development policies that are known to reduce the level of fertility, such as improved health, education, integration of women and social equity. Governments that view the level of fertility in their countries as too low may consider financial and other support to families to assist them with their parental responsibilities and to facilitate their access to the necessary services. Such policies should not restrict access to education, information and services for family planning.

4. Population distribution and internal migration

27. The World Population Plan of Action makes a number of recommendations in regard to population distribution and internal migration that are of continuing relevance (paras. 44-50). The Plan recommends that population distribution policies should be integrated with economic and social policies. In formulating and implementing migration policies, Governments are urged to avoid infringing the right of freedom of movement and residence within States, to promote more equitable regional development, to locate services and industry so as to promote interpersonal equity as well as efficiency, to promote networks of small and medium-sized cities, and to improve economic and social conditions in rural areas through balanced agricultural development. In addition, the Plan recommends that migrants should be provided with information on economic and social conditions in urban areas, that employment creation, systems of land tenure and the provision of basic services should be improved in rural areas and that Governments should share experiences relevant to their policies. The area of population distribution and internal migration is still one of great concern to many Governments. The following recommendations provide the means for the further implementation of the Plan of Action.

Recommendation 36

Population distribution policies must be consistent with such international instruments as the Geneva Convention relative to the Protection of Civilian Persons in Time of War (1949), wherein article 49 prohibits individual or mass forcible transfers from an occupied territory and forbids the occupier from transferring parts of its own civilian population into the territory it occupies. Furthermore, the establishment of settlements in territories occupied by force is illegal and condemned by the international community.
Recommendation 37

Governments are urged to base policies aimed at influencing population distribution on a comprehensive evaluation of costs and benefits to individuals, families, different socio-economic groups, communities, regions and the country as a whole. Population distribution goals (e.g., target growth rates for primate cities or rural population retention goals) should be pursued to the extent that they help to achieve broader societal goals, such as raising per capita incomes, increasing efficiency, making the distribution of income more equitable, protecting the environment and improving the quality of life. In so doing, Governments should ensure that the rights of indigenous and other groups are recognized.

Recommendation 38

Governments are urged, in formulating population distribution policies, to take into account the policy implications of various forms of population mobility (e.g., circular, seasonal, rural-rural, and urban-urban, as well as rural-urban), to consider the direction, duration and characteristics of these movements and the interrelationships between territorial mobility and levels and characteristics of fertility and mortality.

Recommendation 39

Governments are urged to review their socio-economic policies to minimize any adverse spatial consequences, as well as to improve the integration of population factors in territorial and sectoral planning, particularly in the sectors concerned with human settlements.

Recommendation 40

Governments wishing to minimize undesired migration should implement population distribution policies through incentives, rather than migration controls, which are difficult to enforce and may infringe on human rights.

Recommendation 41

Governments which have adopted, or intend to adopt a comprehensive urbanization policy, should seek to integrate such policies into the overall development planning process, with the aim of achieving, inter alia, a reduction in current high migration to capital cities and other large urban centres, the development of medium-sized towns and a reduction of rural-urban and regional inequalities. Developed countries and the international community should extend the necessary assistance to developing country efforts in this direction.

Recommendation 42

Governments should support programmes of assistance, information and community action in support of internal migrants and should consider establishing networks of labour exchanges that could allow potential migrants to have adequate information about social conditions and about the availability of employment in receiving areas.
Recommendation 43

Rural development programmes should be primarily directed towards increasing rural production and efficiency, raising rural incomes and improving social conditions and rural welfare, particularly among small peasant producers and rural women. Governments should therefore improve the accessibility of basic social services and amenities to scattered populations, regularize land ownership, facilitate access to credit, new technology and other needed inputs, and adopt pricing policies geared to the needs of small holders. Appropriate measures must be taken to carry out agrarian reform as one of the important factors which increases agricultural production and promotes the development of rural areas.

Recommendation 44

Governments should adopt effective policies to assist women migrants, especially those who are agricultural workers, as well as women, children and the elderly left behind unsupported in rural areas. Governments are also urged to pay special attention to the difficulties of adaptation encountered in urban areas by migrant women of rural origin and to take appropriate measures to counteract these difficulties.

5. International migration

(a) General guidelines for formulating international migration policies

28. The general validity of the recommendations made in the World Population Plan of Action with respect to international movements is reaffirmed (paras. 51-62). However, recent developments regarding the trends of international migration flows demand greater attention from the international community, especially with regard to certain types of migrants such as documented migrant workers, undocumented migrant workers and refugees. The guidelines set out below give due consideration to the basic fact that international migration is of concern to both the receiving countries and the countries of origin, particularly when the migration of skilled persons is involved. They reflect the bearing that international migration may have on the process of establishing a New International Economic Order and recognize that the effective safeguarding of the basic human rights and fundamental freedoms of all migrants, without discrimination on the basis of race, culture, religion or sex, is an essential prerequisite for the realization of their positive contributions to the host society.

Recommendation 45

International migration policies should respect the basic human rights and fundamental freedoms of individuals as set out in the Universal Declaration of Human Rights, x/ the International Covenant on Economic, Social and Cultural Rights, the International Covenant on Civil and Political Rights y/ and other pertinent international instruments. In keeping with these documents receiving countries should adopt measures to safeguard the basic human rights of all migrants in their territory and to ensure the respect of their cultural identity. Measures should also be taken to promote the mutual adaptation of both immigrant groups and the population of the receiving country.
Recommendation 46

In formulating policies on international migration, Governments of receiving countries should take into account not only their own country’s economic and social needs but also the well-being of the migrants concerned and their families and the demographic implications of migration. Governments of countries of origin concerned with the continuing outflow of skilled workers and professionals should seek to retain those workers as well as encourage their return through, inter alia, the encouragement of an economic environment favourable to the expansion of employment opportunities. To redress the existing imbalance of skills, Governments should try to identify alternative skill resources. Governments should formulate national and international measures to avoid brain-drain from developing countries and to obviate its adverse effects. While pursuing these purposes in a manner consistent with respect for human rights, Governments are invited to conduct, inter alia, consultations or negotiations, on either a bilateral or a multilateral basis, with the support, upon request, of competent international organizations.

Recommendation 47

High priority should be placed on the rehabilitation of expelled and homeless people who have been displaced by natural and man-made catastrophes. In all cases, Governments are urged to co-operate fully in order to guarantee that the parties involved allow the return of displaced persons to their homes and ensure their right to possess and enjoy their properties and belongings without interference.

(b) Documented migrant workers

29. The World Population Plan of Action calls for the proper treatment of migrant workers and their families (paras. 55 and 56), whose migration has been promoted by countries facing labour shortages and who are referred to hereafter as “documented migrant workers”. The Plan also addresses the concerns of countries of origin (para. 54) and suggests concerted action at the bilateral and multilateral levels (paras. 54 and 62). In 1979, recognizing that, despite the efforts made by the States involved, documented migrant workers were still not able to exercise their rights as defined by the relevant international instruments, the General Assembly called for the elaboration of an international convention on the protection of the rights of all migrant workers and their families (resolution 34/172 of 17 December 1979). Many of the following recommendations reflect the contents of the draft of this Convention. It is hoped that upon adoption of the Convention, it may serve as a guideline for the treatment of migrant workers and their families.

Recommendation 48

Governments of receiving countries should work towards extending to documented migrant workers and accompanying members of their families, whose situation with regard to stay and employment in the receiving country is regular, treatment equal to that enjoyed by their own nationals with regard to the enjoyment of basic rights, including the equality of opportunity and treatment in respect of working conditions, social security, participation in trade unions and access to health, education
and other social services. In achieving this aim, Governments are invited to use as guidelines all relevant international instruments, in particular, the ILO Convention concerning Migration for Employment (Revised) 1949 (No. 97) and the ILO Convention concerning Migrations in Abusive Conditions and the Promotion of Equality of Opportunity and Treatment of Migrant Workers, 1975 (No. 143), part II. aa/

Recommendation 49

Governments of receiving countries that have not already done so are urged to consider adopting appropriate measures to promote the normalization of the family life of documented migrant workers in the receiving country through family reunion. Demographic and other considerations should not prevent Governments from taking such action.

Recommendation 50

Countries of origin and receiving countries should undertake information and education activities to increase the awareness of migrants regarding their legal position and rights and to provide realistic assessments of the situation of migrants, including the availability of job opportunities. Receiving countries should recognize the right of migrants to form associations so that they may participate more effectively in the receiving society while maintaining their cultural identity.

Recommendation 51

Governments of countries of origin and of receiving countries should encourage and promote the widest dissemination, inter alia, through the mass media, of information aimed at promoting public understanding of and preventing any activity prejudicial to the contribution of documented migrant workers to economic development and cultural interchange.

(c) Undocumented migrants

10. The World Population Plan of Action recommends that Governments bear in mind humanitarian considerations in treating undocumented migrants* (para. 56). Owing to the irregularity of their situation, undocumented migrants are particularly vulnerable to exploitation and mistreatment. It is therefore urgent that their basic human rights and fundamental freedoms be universally recognized and that they enjoy international protection as well as the protection of receiving countries within the framework of bilateral conventions. The widest recognition of the rights of all migrant workers and the effective safeguarding of these rights will tend to discourage exploitation of undocumented migrants, particularly exploitation in the

*For the purpose of the following guidelines, undocumented migrants are persons who have not fulfilled all the legal requirements of the State in which they find themselves for admission, stay or exercise of economic activity.
sphere of employment, by employers who wish to reap the benefits of unfair competition. \(^{b3/}\)

**Recommendation 52**

All measures adopted or implemented by countries of departure and of arrival to reduce the illegal entry, stay or employment of undocumented migrants (including amnesties, other regularization schemes, border controls and deportations) should respect their basic human rights.

**Recommendation 53**

In formulating laws and regulations to limit undocumented migration, Governments of receiving countries are invited to consider the guidelines set forth in the ILO Convention concerning Migrations in Abusive Conditions and the Promotion of Equality of Opportunity and Treatment of Migrant Workers, 1975 (No. 143), part I. \(^{c}/\) To be effective, such laws and regulations should address the treatment not only of the undocumented migrants themselves but also of those persons inducing or facilitating undocumented migration.

(d) **Refugees**

31. The World Population Plan of Action addresses the problems of refugees (para. 53). Since its adoption in 1974, refugees have been a source of growing concern to the international community because of their increasing numbers, the fact that a large proportion of them are from the vulnerable groups - women, children and the aged - and particularly because most refugees originate and relocate in developing countries, which have had to cope with the added economic and social burdens imposed by them. This concern has resulted in programmes by developing countries, as well as by third countries of resettlement, generally developed countries, to alleviate the dislocations associated with the influx of refugees. There seems to be broad agreement that through international co-operation within the framework of the United Nations an attempt should be made to avert the causes of new flows of refugees, having due regard to the principle of non-intervention in the internal affairs of sovereign States. In view of the existing situation, the recommendations set out below emphasize the need for continued international co-operation in finding durable solutions to the problem of refugees and for the provision of support and assistance to countries of first asylum.

**Recommendation 54**

States that have not already done so are invited to consider acceding to the international instruments concerning refugees, in particular, to the 1951 Convention \(^{d/}\) and the 1967 Protocol \(^{e/}\) relating to the Status of Refugees.

**Recommendation 55**

Governments and international agencies are urged to find durable solutions to problems related to refugees and refugee movements and to work towards the elimination of the causes of these problems. Governments, international organizations and non-governmental organizations are urged to continue to promote the protection of refugees and to provide support and assistance to first asylum countries in
satisfying the basic needs of refugees. Efforts towards the creation of conditions in which voluntary repatriation may take place should be pursued and assistance should be provided in rehabilitating returnees. The basic freedoms and human rights of returnees and their families should be guaranteed and assistance should be provided in developing opportunities for a return to a normal and productive way of living. In situations where neither voluntary repatriation nor resettlement in third countries appears to be feasible, Governments, international organizations and non-governmental organizations are urged to provide support and assistance to the countries of first asylum in developing the capacity of the national economic and social infrastructure to sustain and, subject to the full approval of the host countries, to integrate refugees.

6. Population structure

32. The World Population Plan of Action (paras. 63-67) takes particular note of changing population age structures resulting from sustained demographic change, and of the effect of such changes on socio-economic development and on family and household structures. Closely linked issues such as employment for rapidly expanding working age groups, shifts from agricultural to non-agricultural occupations and health needs of particular age and sex groups are dealt with elsewhere in the present document. In countries where fertility levels are high, the large absolute and relative number of children and youth, is a continuing burden for social and economic development, including educational development. On the other hand, the aging of population has become an important issue in developed countries, and an emerging one in those developing countries experiencing declines in fertility in the recent past. The rising proportion of aged in these populations is imposing an economic burden with respect to national expenditures for social security and social services. It is noted, however, that the aged can make significant contributions to society. The following recommendations note the above and contain proposals to foster the growth and value of all age and sex groups in the community.

Recommendation 56

Governments and the international community should continue to bear in mind the considerations that led to the designation of the International Year of the Child, as well as the recommendations of the World Population Plan of Action with respect to age distribution, giving due attention to the full range of needs of children.

Recommendation 57

Governments, specialized agencies of the United Nations system and other concerned intergovernmental and non-governmental organizations are invited to intensify their efforts in the execution of specific programmes related to youth, duly taking into account the situation, the needs, the specific aspirations of youth and the Specific Programme of Measures and Activities to be undertaken before and during the International Youth Year endorsed by the General Assembly. ff/

Recommendation 58

Governments are urged to reaffirm their commitment to the implementation of the International Plan of Action on Aging. w/ In this context, further efforts should
be made to analyse the issue of aging, particularly its implications for overall development, social services, medical care and other related fields, and on the basis of such data, Governments are urged to take appropriate measures to secure the welfare and safety of older people, paying particular attention to the situation and the needs of older women. Governments and international agencies should increase their efforts and activities with a view to improving care for the aged within the family unit. Moreover, Governments should view the aging sector of the population not merely as a dependent group, but in terms of the active contribution that older persons have already made and can still make to the economic, social and cultural life of their families and community.

Recommendation 59

In planning for economic and social development, Governments should give appropriate consideration to shifts in family and household structures and their implications for requirements in different policy fields.

E. Promotion of knowledge and policy

1. Data collection and analysis

The recommendations of the World Population Plan of Action regarding data collection and analysis (paras. 72-77) continue to be both valid and urgent and thus every effort for their full implementation is reaffirmed. The collection and analysis of population and related statistics is an indispensable basis for a full and accurate understanding of population trends and prospects, formulating population and development plans and programmes and for monitoring effectively the implementation of these plans and programmes. During the past decade considerable progress has been achieved in the field of data collection and analysis. For example, nearly all countries carried out a population census; well-designed fertility and other surveys were carried out in many developed and developing countries; efforts aimed at improving continuing national survey-taking capabilities were initiated in a number of developing countries; and major advancements were made in the development of methods for use in the analysis of incomplete data. However, a number of critical gaps in official statistics remain, including those related to the classification of data for urban agglomerations. In view of these developments and future requirements priority attention should be given to the following recommendations.

Recommendation 60

Governments are urged to develop durable capabilities for data collection, processing and analysis, including needed computer facilities, to provide reliable and timely information in support of population and other development programmes. They are also urged to accord priority to the development of national and regional population information systems. Required assistance should be provided to developing countries by the international community to develop these activities.
Recommendation 61

Governments are urged to monitor population trends and to assess future demographic prospects and their implications on a regular basis. Inasmuch as population projections provide basic tools for economic and social development planning, efforts should be made to prepare statistics relevant for this purpose. Co-ordination and co-operation in this work within and between countries should be promoted.

Recommendation 62

Governments are urged to ensure that population and related data are tabulated and published separately by sex, along with other demographic, social and economic variables, so that the situation of women is rendered clearly and in order to measure the impact on women of changes that will ensue from implementation of the World Population Plan of Action.

Recommendation 63

Governments are encouraged to tabulate and publish data about minority groups to assist in assessing the impact of the World Population Plan of Action on such groups.

Recommendation 64

Because migration statistics is the least developed area of current demographic statistics, Governments may consider undertaking a comprehensive programme of migration statistics, in line with national priorities, focusing on such areas of concern as (1) internal migration, (2) urbanization and (3) international migration. It is also recommended that migration should be studied in the context of the family. To this end, Governments should consider ways of strengthening their national population censuses, sample surveys or administrative record systems in order to obtain needed migration data and estimates. Countries of origin and of destination are urged to exchange such pertinent statistical data, through the relevant United Nations authorities and other competent international organizations, when appropriate.

Recommendation 65

All countries are requested to participate in the 1990 World Population and Housing Census Programme and endeavour to improve further their censuses, giving particular attention to the timely publication of census results in order to assist, inter alia, in the evaluation of population trends and development at all levels. Required assistance should be provided to developing countries by the international community in support of these activities.

Recommendation 66

Governments, in collaboration with appropriate international organizations, are urged to establish or strengthen national sample survey programmes that can provide, in conjunction with data from other sources, a continuous flow of integrated statistics in support of population and other development programmes, and to build
enduring capabilities for conducting surveys. It is recommended, in particular, that surveys should be carried out periodically on fertility, family planning, health of mothers and children, mortality and migration and that technical assistance should be made available from international sources.

Recommendation 67

Governments are urged, in the collection, analysis and dissemination of statistical data, and in the context of national laws and practices, to ensure that confidentiality and privacy of the individual are safeguarded.

Recommendation 68

Governments are urged to collect, compile and publish on a timely basis the full range of vital statistics, as well as other demographic and related social and economic statistics needed to plan and evaluate population and health programmes, including family planning programmes. To this end, Governments should establish or strengthen civil registration systems and make use of well-designed sample surveys, special studies and available administrative reporting systems, such as population registers.

2. Research

34. The World Population Plan of Action (paras. 78-80) gives great emphasis to research activities in population and identifies a list of research priorities related to the theoretical, operational and policy-oriented aspects of population analyses. Throughout the course of the review and appraisal of the World Population Plan of Action, in each of the expert group meetings convened as part of the preparations for the International Conference on Population, 1984, as well as in all other review activities, the continuing need for research both to fill gaps in knowledge and to support programmatic activity was made evident. Increased research efforts together with the necessary institutional and financial support are made necessary by changes in the social and economic contexts within which population policies are formulated and implemented. Similarly, changes in population policies and in demographic conditions themselves and new research findings, including changes in contraceptive technology, call for an expansion of research activities.

Recommendation 69

Governments and funding agencies are urged to allocate increased resources for research in human reproduction and fertility regulation, including biomedical research, in order to improve the safety and efficacy of existing family planning methods, to develop new methods (including those for males), to develop better methods of recognizing the female fertile period and to address problems of infertility and subfertility, including those caused by environmental pollution. Such research should be sensitive to the varying acceptability of specific methods in different cultures. Other important aspects requiring increased research efforts and support include epidemiological research on the short- and long-term adverse and beneficial medical effects of fertility regulating agents. Modernization and updating of the official requirements for the preclinical and clinical assessment of new fertility regulating agents and a strengthening of the research capabilities of developing countries in the above areas are also urgently needed.
Recommendation 70

Governments and intergovernmental and non-governmental organizations should give priority to service and operational research, including (a) acceptability of programmes and methods; (b) programme design and implementation; (c) management of programmes, including training of personnel, monitoring, logistics and impact evaluation; and (d) effectiveness of programmes, including information on planning the number of children. To increase the acceptance and to improve the design of family planning service programmes, priority should be given in the social research area to determinants and consequences of fertility. However, substantive priorities should continue to reflect country needs. The allocation of research tasks should be pragmatically divided among institutions that operate at the national, regional or global levels, in order to make the least possible use of available resources.

Recommendation 71

Governments and intergovernmental and non-governmental organizations should provide required assistance for the development and continued effectiveness of research capabilities, especially at the country level, as well as at the regional and global levels. Arrangements to facilitate the exchange of research findings within and between regions should also be further strengthened. Results of such research should be used in the implementation of action programmes, which in turn should have adequate built-in evaluation procedures.

Recommendation 72

In setting population research goals, Governments and intergovernmental and non-governmental organizations should endeavour to make them relevant to policies and programmes, with the objective of making innovations in policy formulation, implementation and evaluation. Special emphasis should be given to research on the integration of population processes with socio-economic development, considering not only applied but also theoretical and methodological topics.

3. Management, training, information, education and communication

35. The World Population Plan of Action contains a series of recommendations on management, training, information, education and communication in the field of population (paras. 81-93). Since its adoption, the need for the further development of management in all fields related to population has been acknowledged, both nationally and regionally, in order to enhance the effectiveness of population programmes. In view of the importance of considering the changing demographic situations as well as the interrelationships between population and development in the formulation of population policies and measures, training programmes in population and population-related studies need to be further strengthened. There is also a growing awareness of the supportive roles in population policies and programmes of dissemination of population information and of population education at national, regional and global levels. The following recommendations relate to these activities.
Recommendation 73

Governments and intergovernmental and non-governmental organizations should increase their support to the management of population programmes. They should also expand training programmes in population fields, particularly in the areas of demography, population studies, survey research, management, family life, sex education, maternal and child health, family planning and reproductive physiology. Such efforts should focus on action-oriented training, reflecting the milieu of the area, country or region concerned. Local-level training should be supplemented by programmes of technical co-operation among the developing countries and between the developed and the developing countries, so that they can learn from each other's experience. Development and expansion of national and regional population training institutes and facilities should be encouraged and strengthened. Special attention should also be given to the need to train those who will be involved in training activities. In order to ensure increased participation of women in the design, management, implementation and evaluation of population programmes, special attention shall be given to the need to include women in all training activities.

Recommendation 74

Governments, with the assistance, as appropriate, of intergovernmental and non-governmental organizations, should continue to explore innovative methods for spreading awareness of demographic factors and for fostering the active involvement and participation of people in population policies and programmes and to intensify training of national personnel who are engaged in information, education and communication activities (including the management and planning of those activities), in developing integrated communication activities and education strategies, utilizing mass media and community-level and interpersonal communication techniques.

Recommendation 75

Governments are invited to develop an adequate corps of trained persons for effective formulation and implementation of integrated population and development policies, plans and programmes at all levels. In this regard, increased efforts must be made by Governments and training institutions both at national and international levels, to further facilitate the integration of population studies into the training curricula for policy-makers and executives who plan and implement development programmes.

Recommendation 76

Governments and intergovernmental organizations are urged to make more effective use of available population data and, for this purpose, to promote forums for assessing the priorities in the population fields, based on the results of population data and studies, and for considering their reorientation, as necessary; moreover, national and international support should be increased with a view to improving the dissemination and exchange of information at the national levels.
11. RECOMMENDATIONS FOR IMPLEMENTATION

A. Role of national Governments

36. The World Population Plan of Action underscores the primary role of national Governments in the formulation, implementation and achievement of the principles and objectives of the Plan (paras. 96-99). The experience of the last decade has demonstrated the variety of policy approaches that can be effective when designed and implemented by national Governments with due regard for their particular political, social, cultural, religious and economic conditions. However, many factors, including issues related to the lack of definite commitment, inadequate resources, ineffective co-ordination and implementation and insufficient data, have limited the effectiveness of national Governments in the implementation of their national population policies. The following recommendations emphasize specific means whereby national Governments can enhance the effectiveness of population policies within the context of the guidelines as articulated in the Plan of Action.

Recommendation 77

Governments are urged to attach high priority to the attainment of self-reliance in the management of their population programmes. To this end, Governments are invited:

(a) To establish monitoring and evaluation systems and procedures as an important managerial tool for policy making and programming;

(b) To strengthen the administrative and managerial capability needed for effective implementation of population programmes;

(c) To ensure that international assistance is provided under arrangements and requirements that are adapted to the administrative resources of the recipient country, and that such assistance is co-ordinated at the national level in a manner that will facilitate effective and efficient programmes;

(d) To involve communities more actively in the planning and implementation of population programmes.

Recommendation 78

Governments are encouraged to continue to utilize technical co-operation among developing countries; subregional, regional and interregional co-operation should be encouraged.

B. Role of international co-operation

37. The World Population Plan of Action outlines the supportive role of the international community in providing technical and financial assistance to achieve the goals of the Plan (paras. 100-106). Since Bucharest, international co-operation activities of multilateral and bilateral agencies and inter-governmental and non-governmental organizations have achieved a number of notable successes in...
attaining these goals. Technical assistance among developing countries has also become increasingly effective. As noted in the Review and Appraisal of the World Population Plan of Action, the needs of developing countries for assistance in population have increased dramatically. Although the resources available have more than doubled in nominal terms, this increase has not been sufficient either to keep pace with the demand or to compensate for erosion due to inflation. The developing countries themselves are allocating increasing shares of development expenditure for population programmes. The need for assistance for population programmes as for all development programmes continues to grow. The recommendations in this section encourage further assistance for development and population, both to enlarge programmes where effective use of resources has been demonstrated and to initiate new activities.

Recommendation 79

The international community should play an important role in the further implementation of the World Population Plan of Action. For this purpose, among other things, adequate and substantial international measures of support and assistance should be provided by developed countries, other donor countries and intergovernmental and non-governmental organizations.

Recommendation 80

Organs, organizations and bodies of the United Nations system and donor countries which play an important role in supporting population programmes, as well as other international, regional and subregional organizations, are urged to assist Governments at their request in implementing these recommendations. Of no less importance will be the review of existing criteria for setting co-operation priorities, bearing in mind considerations of regional equity and the proper balance between the various phenomena in the field of international co-operation.

Recommendation 81

The international community should give particular emphasis to:

(a) Initiation and expansion of research and action programmes;

(b) Institutionalization of the integration of population planning in the development process;

(c) Improving the status and strengthening the role of women and providing appropriate financial and technical support for it in population programmes;

(d) Biomedical and social science research;

(e) Collection and analysis of needed data;

(f) Identification of successful programmes, ascertaining those factors accountable for their success and disseminating such information to those developing countries initiating programmes;

(g) Implementation of monitoring and evaluation systems in order to ascertain the effectiveness and impact of programmes and their continued responsiveness to community needs.
(h) Promotion of exchanges between countries with common experiences;
(i) Education and training in population matters.

Recommendation 82

Governments are urged to increase the level of their assistance for population activities in the light of continuing needs in the field and the increasing commitment of developing countries, with a view to reaching the goals set for this purpose in the International Development Strategy for the Third United Nations Development Decade. In this context, governments of developed countries and other donor countries are urged to allocate increased contributions for population and population-related programmes in accordance with national goals and priorities of recipient countries. Further, this increase should not be detrimental to the levels of economic development assistance in other areas.

Recommendation 83

In view of the leading role of the United Nations Fund for Population Activities on population matters, the Conference urges that the Fund should be strengthened further, so as to ensure the more effective delivery of population assistance, taking into account the growing needs in this field. The Secretary-General of the United Nations is invited to examine this recommendation, and submit a report to the General Assembly on its implementation as soon as possible but not later than 1986.

Recommendation 84

National non-governmental organizations are invited to continue, in accordance with national policies and laws, their pioneering work in opening up new paths and to respond quickly and flexibly to requests from governments, inter-governmental and international non-governmental organizations, as appropriate, for further implementation of the World Population Plan of Action. Governments are urged, as appropriate, within the framework of national objectives, to encourage the innovative activities of non-governmental organizations and to draw upon their expertise, experience and resources in implementing national programmes. Donors are invited to increase their financial support to non-governmental organizations.

Recommendation 85

Members of parliament, the scientific community, the mass media, and others in influential positions are invited, in their respective areas of competence, to create an awareness of population and development issues and to support appropriate ways of dealing with these issues.

Recommendation 86

Policy makers, parliamentarians, and other persons in public life are encouraged to continue to promote and support actions to achieve an effective and integrated approach to the solution of population and development problems by arousing public awareness and working towards the implementation of national population policies and programmes. The United Nations Fund for Population Activities and the other international organizations concerned are invited to continue providing support for such actions.
Recommendation 87

The General Assembly, the Economic and Social Council, the Governing Council of the United Nations Development Programme and legislative and policy-making bodies of the specialized agencies and other intergovernmental organizations are urged to examine and support the recommendations for the further implementation of the World Population Plan of Action and to include population questions among their major priorities.

C. Monitoring review and appraisal

Recommendation 88*

The monitoring of population trends and policies and review and appraisal of the World Population Plan of Action should continue to be undertaken by the Secretary-General of the United Nations, as specified in the Plan. The monitoring of multilateral population programmes of the United Nations system aimed at further implementation of the World Population Plan of Action should be undertaken by the Secretary-General of the United Nations, through appropriate arrangements. The next comprehensive and thorough review and appraisal of progress made towards achieving the goals and recommendations of the World Population Plan of Action will be undertaken in 1989.

* While joining the consensus the Mexican representative made the following statement:

"The Mexican delegation expressed its reservation concerning the text of recommendation 88, noting that it is not for the Secretary-General to keep the implementation of population programmes funded by multilateral assistance under review, as this is exclusively the prerogative of Governments. In this sense, the Secretary-General may only keep under review the use of the assistance provided by United Nations agencies to governmental programmes in regard to population."
Notes


b/ General Assembly resolution 386 (XIV).


h/ See A/10112, chap. IV.


o/ General Assembly resolution 34/24, annex.


Notes (continued)


x/ General Assembly resolution 217 A (III).

y/ General Assembly resolution 2200 A (XXI), annex.


bb/ See, in this connection, the draft Convention on the Protection of the Rights of All Migrant Workers and Their Families (A/C.3/38/WG.1/CRP.2/Rev.1), preambular paragraph 18 and proposed preambular paragraph 19, and the report of the Working Group on its meetings during the thirty-sixth session of the General Assembly (A/C.3/36/10), para. 25.


ff/ General Assembly resolution 36/28.
The United Nations has organized an International Population Conference to be held August 6-14 in Mexico City. You are scheduled to speak during the morning of August 7th; we suggest you spend the rest of the day meeting key people attending the Conference and perhaps visiting one of Mexico City's good family planning programs if you would like to. (We will propose precise arrangements shortly.) Most governments will send ministerial-level delegations including health specialists and people with broader development interests. We still have few names, but the heads of family planning programs in China, India, and Indonesia, among others, will attend.

The Conference comes ten years after the World Population Conference in Bucharest. It will consider what more needs to be done to implement the "World Plan of Action" adopted in Bucharest and to agree on goals for national and international action. At Bucharest debate raged over whether birth rates could be brought down most rapidly by concentrating on family planning or on development that built demand for smaller families. (That particularly involves improving women's opportunities and improving children's realistic prospects for education and jobs.) Few developing countries outside Asia were enthusiastic about family planning. Since then fairly broad consensus has been reached that both family planning and development matter — and developing countries in all regions have sharply increased requests for population assistance. (Most still goes to the large Asian countries, but many African governments are initiating family planning services as part of maternal and child health care.) But population assistance from DAC countries still comes to only about $370 million annually; total population assistance (including the Bank's) approaches $500 million, about 1.4% of all Official Development Assistance from DAC countries.

In FY83 the Bank only disbursement about $40 million in population lending, though much health lending also supported family planning. More projects are being developed, however. As part of an effort involving donors and developing countries to increase attention to population, the Bank aims at least to double its population and related health lending in the next few years, focusing on Asia and Africa. The opportunity is there; it is a question of working with governments to develop practical projects. The Bank often provides family planning as part of government programs to extend basic maternal and child health care since family planning is itself key health measure and often needs some health-system backup. (Such programs cost only a few dollars per capita annually.) We support family planning in other contexts too. We will help provide clinics, equipment, contraceptives and medicines, training, management advice — basically whatever a country needs, considering what it and other donors do. We also support research on population growth and its consequences and causes. We assist NGOs in some prospects with government.

Mexico itself has achieved rapid reduction in birth rates following vigorous government support for family planning. By 1970 Mexico's population was growing at about 3.2% annually (doubling every 22 years or so), the birth rate was about 45 per 1000 inhabitants, and families averaged about six children. But development progress had brought some interest in smaller families. (By 1982 about half of Mexico's girls as well as boys were in secondary school, child mortality had dropped to half its mid-1960s level, and women's labor-force participation had expanded.) In 1973 the government passed a law integrating population into national development planning and began to strengthen government-sponsored family planning programs. Private programs especially in the Northern cities and commercial efforts have also grown. Today roughly 40% of Mexican couples practice family planning, the birth rate has dropped to about 32 per thousand, and the population growth rate has fallen to about 2.5% a year. Families now average about 4.6 children. Much remains to be done — reportedly about one-fifth of Mexican women want no more children but lack ready access to good family planning services. And Mexico City is projected to grow from 17 million today to some 31 million by the year 2000. But Mexico's experience recently is promising — and shows what can be done when development does start to build demand for smaller families and family planning is offered to help realize that demand.
The United Nations Fund for Population Activities (UNFPA) has organized an International Population Conference to be held August 6-14 in Mexico City. You are scheduled to speak during the morning of August 7th; we suggest you spend the rest of the day meeting key people attending the Conference and perhaps visiting one of Mexico City’s good family planning programs if you would like to. (We will propose precise arrangements shortly.) Most governments will send ministerial-level delegations including health specialists and people with broader development interests. We still have few names, but the heads of family planning programs in China, India, and Indonesia, among others, will attend.

The Conference comes ten years after the World Population Conference in Bucharest. It will consider what more needs to be done to implement the “World Plan of Action” adopted in Bucharest and to agree on goals for national and international action. At Bucharest debate raged over whether birth rates could be brought down most rapidly by concentrating on family planning or on development that built demand for smaller families. (That particularly involves improving women’s opportunities and improving children’s realistic prospects for education and jobs.) Few developing countries outside Asia were enthusiastic about family planning. Since then fairly broad consensus has been reached that both family planning and development matter — and developing countries in all regions have sharply increased requests for population assistance. (Most still goes to the large Asian countries, but many African governments are initiating family planning services as part of maternal and child health care.) But population assistance from DAC countries still comes to only about $370 million annually; total population assistance (including the Bank’s) approaches $500 million, about 1.4% of all Official Development Assistance from DAC countries.

In FY83 the Bank only disbursed about $40 million in population lending, though much health lending also supported family planning. More projects are being developed, however. As part of an effort involving donors and developing countries to increase attention to population, the Bank aims at least to double its population and related health lending in the next few years, focusing on Asia and Africa. The opportunity is there; it is a question of working with governments to develop practical projects. The Bank often provides family planning as part of government programs to extend basic maternal and child health care since family planning is itself a key health measure and often needs some health-system backup. (Such programs cost only a few dollars per capita annually.) We support family planning in other contexts too. We will help provide clinics, equipment, contraceptives and medicines, training, management advice — basically whatever a country needs, considering what it and other donors do. We also support research on population growth and its consequences and causes. We assist NGOs in some prospects with government.

Mexico itself has achieved rapid reduction in birth rates following vigorous government support for family planning. By 1970 Mexico’s population was growing at about 3.2% annually (doubling every 22 years or so), the birth rate was about 45 per 1000 inhabitants, and families averaged about six children. But development progress had brought some interest in smaller families. (By 1982 about half of Mexico’s girls as well as boys were in secondary school, child mortality had dropped to half its mid-1960s level, and women’s labor-force participation had expanded.) In 1973 the government passed a law integrating population into national development planning and began to strengthen government-sponsored family planning programs. Private programs especially in the Northern cities and commercial efforts have also grown. Today roughly 40% of Mexican couples practice family planning, the birth rate has dropped to about 32 per thousand, and the population growth rate has fallen to about 2.5% a year. Families now average about 4.6 children. Much remains to be done — reportedly about one-fifth of Mexican women want no more children but lack ready access to good family planning services. And Mexico City is projected to grow from 17 million today to some 31 million by the year 2000. But Mexico’s experience recently is promising — and shows what can be done when development does start to build demand for smaller families and family planning is offered to help realize that demand.
TO:  Mr. Emmerich M. Schebeck, PHND1  
FROM: Susan A. Stout, PHNPR'SAS  
EXTENSION: 60478  
SUBJECT: Sudanese Delegation to Mexico City

1. It is my understanding (from a conversation of about a month ago) that three of the six members of the Sudanese delegation to Mexico City are members of the National Population Committee with whom I have worked intensively over the last four years. Assuming that the delegation has not changed in the intervening weeks, you might find the following comments on the individuals and their interests useful.

2. Mrs. Nafisa Ahmed El Amin, President, National Population Committee, Member of Parliament and President, Women's Federation of the Sudanese Socialist Union (SSU). Mrs. Nafisa has played an active role in Sudanese politics throughout her life and is an elected member of parliament from Khartoum province. As President of the Women's Federation of the SSU, she is Sudan's most prominent female politician and plays an active and visible role in domestic policy issues, particularly as regards women's family health issues. As of December, she was a member of the Executive Committee of the SSU. She has strong links to the Ministries of Health, Education and Social Affairs. She represents a moderate-centrist wing of the Women's Federation and has been an aggressive advocate for strengthened GOS commitment to population policy and family planning programs, particularly in the last 5 years. As its President, she provided leadership and backing for the re-establishment of the National Population Committee (NPC) in 1981 and for the NPC's Second National Population Conference held in April 1982. In this role, she was successful in securing a donation of SL25,000 from the President for the conduct of the Conference and to support limited follow up activities by the NPC. Although not technically trained in the population field, she is articulate on the health rationale for family planning and keenly aware that there is a need for a formal population policy by the GOS. She will be an informative source on the Sudanese political environment (e.g., the significance of the President's recent statement on population policy) and on the private/voluntary/NGO movement in population. She is not, however, in an executive position and will not be particularly useful on technical aspects of health or family planning services in the Sudan beyond some institutional concerns of the NPC itself (see below) and her familiarity with most of those now active in family planning efforts in Sudan.
3. Mr. Omar El Taj, Director, Department of Statistics, Ministry of Finance and Economic Planning. Mr. El Taj is a senior civil servant and has been the Director of the DOS for many years. He is very supportive of strengthened population policy and family planning and played an active role in the development of the National Population Committee. The Department of Statistics, under his leadership, successfully conducted the Sudan Fertility Survey and the most recent 1983 Census including managing all aspects of WFS and UNFPA financial and technical assistance for these efforts. Mr. El Taj has attended at least one AID sponsored seminar on population and is well-informed about the issues. His principle concerns are (obviously) improving the collection and use of demographic data. In this context, I understand that the DOS has recently lost several key staff (a perennial problem for all parts of the civil service) and that this is exacerbating the already slow pace of the analysis and dissemination of the 1983 census. Though USAID and the US Census Bureau were discussing ways to bridge the gap early last spring, you might find it useful to explore this issue further with El Taj, particularly since relatively minor amounts of technical assistance might greatly speed the processing of the census data and provide necessary background material for a PHN sector review. Mr. El Taj should also have considerable insight into perceptions of the relevance of population growth within the Ministry of Finance and Economic Planning and can report fully on institutional capabilities within Sudan. He also has some creative ideas on the use of a series of task forces, possibly organized by the NPC, for the preparation and further development of a GOS population policy although no resources have yet been located for such an effort.

4. Mr. Abdel Aziz Farah, Ph.D., is a competent published demographer, trained at the University of Pennsylvania with a special interest in fertility and infant mortality. He is currently the Resident Advisor for Columbia University’s operations research project in Sudan. This AID funded project, managed by the University of Khartoum, is testing (with positive results) the feasibility of delivering family planning services through community based distribution by village midwives. Aziz is a very active member of the NPC and has strong political connections as well. (He is reputedly a cousin of President Nimeri.) Because of his considerable experience in the US and connections to major donor groups, Nafisa and others in the NPC tend to rely on his judgment and advice. Aziz will be able to give you a good sense of the demand for family planning in Sudan, political constraints and, many ideas on possible ways for the Bank to contribute. Incidentally, he is a co-author (with Dr. Joe Wray and Ms. Deborah Maine) for a background paper on the effects of high fertility on child spacing and the consequent health benefits of family planning that PHNPR has commissioned for the SSA project.

5. The National Population Committee: The NPC was originally established as a voluntary agency to assist in preparations for the
Bucharest Conference in 1974. Following Bucharest, the NPC essentially dissolved for lack of financial resources and technical staff. The NPC was re-established in 1981 with limited outside support (via an AID policy support project) and as noted above, limited government support. Its membership includes representatives of the major voluntary agencies working in family planning (Sudan Family Planning Association, etc.), women's groups, leading research institutions and Ministries of Health, Education and Social Welfare as well the Department of Statistics. The objectives of the NPC are to raise awareness of the need for population policy in the Sudan, provide a mechanism for coordinating various groups and agencies interested in population and family planning, and to conduct and disseminate population related research. The NPC's technical secretariat is based at the Economic and Social Research Council, one of 4 divisions of the semi-autonomous, cabinet level National Research Council. Although limited AID intermediary support for the NPC was channeled through the ESRC from 1980-1983, there is not now any source of support and it is my understanding that the NPC is now re-considering institutional arrangements for the future. Until these arrangements are resolved it is not likely that the NPC can be an effective promotional body for population policy and family planning. On the other hand, by virtue of its membership, purpose and enthusiasm of many of the individuals involved, the NPC has the potential for growing into a significant institutional resource for improving population policy and family planning should appropriate technical and financial assistance become available.

6. **Possible Next Steps:** Although the President of Sudan has recently made pronatalist statements, it is significant that the network of senior Sudanese officials and technical personnel interested in population and family planning was tapped for participation in the Mexico City conference. As I believe these individuals will share with you, there may well be opportunities for encouraging and nurturing these early efforts. Assisting in the analysis of the census, for instance, could be a useful entree into further population sector work, the NPC could, in time, become useful as a base for further in-country policy development, and the operations research project provides an important base for further identification and evaluation of appropriate systems for strengthening the delivery of FP/MCH services in the Sudan. I would, of course, be happy to explore any of these issues further with you at your convenience.

cc: Mr. J. Warford, PHNPR

SStout:lcj
1. The United Nations convened the second International Population Conference in Mexico City August 5-14. Dr. Rafael Salas, Executive Director of UNFPA, served as Secretary General of the Conference and Mr. P.S. Menon, Acting Director of the U.N. Population Division, served as Deputy Secretary General. The Conference involved some 140 governments, 80 non-governmental organizations and more than a dozen specialized agencies.

2. The second conference came ten years after the first, at Bucharest, and was designed to reaffirm the World Population Plan of Action adopted at Bucharest and specify additional steps needed to carry out that Plan. At Bucharest debate raged over whether birth rates could be reduced faster by focusing on family planning or on development that would generate demand for family planning. Few developing countries were enthusiastic about family planning. But by the time of the Mexico Conference most informed opinion held that both family planning and broader development mattered—that they reinforced each other in reducing birth rates. Successful national family planning programs in Thailand and Indonesia and smaller efforts elsewhere—even in difficult economic and social circumstances—plainly showed that family planning had an impact in and of itself. Yet development progress particularly in Latin America and East Asia also demonstrably affected family size, particularly by improving women's education and employment opportunities and thus raising the "opportunity cost" to women of many children and of women's traditional roles. Family planning programs were later designed with more sensitivity to what affects demand for children and hence for family planning—family planning was provided in closer conjunction with other basic maternal and child health care and with more attention to cultural, social, and economic circumstances. "Outreach" programs (public and private) bringing such services closer to the people proved a real breakthrough. This evolution was evident in Mexico.

3. The Conference was quite successful. It adopted by consensus a Report (containing 88 specific recommendations) and a Declaration on Population and Development reflecting considerable agreement on four basic and linked points:

   a) Since population size and growth often affect development progress and the sharing of its benefits, population policies covering fertility, mortality and morbidity, and migration must be part of development strategies;

   b) Development strategies can build interest in smaller families particularly by easing the most severe poverty, extending women's education and employment opportunities, and improving maternal and child health (mortality reduction targets were included and fertility reduction targets were encouraged);
c) All people have a human right to information, education, and means to plan their families. Family planning services (along with other basic health care) should be strengthened to make a practical reality of this right. Providing a variety of family planning methods through community-based outreach should be emphasized. Governments may often take the lead in providing such services particularly in power countries, but the private commercial sector and NGOs all have major roles to play. Associated biomedical and operational research should be expanded. Resulting child spacing, it was stressed, will improve maternal and child health.

d) It will require increased resources from developing countries as well as the donor community to extend family planning information and services and support associated research.

The United Nations family and the broader donor community were all asked to increase their support for population activities—and for development strategies and programs that will affect population growth and, of course, quality of life.

4. It was agreed that abortion should not be promoted as a family planning method and that appropriate steps should be taken to help women avoid abortion and to provide humane treatment for women who have had abortions.

5. Two political issues related to disarmament and to occupation and settlement of territory threatened consensus on the Recommendations for a time. A compromise was finally reached permitting the adoption of the Report.

6. In his address to the Conference, President Clausen explained the Bank's intention to discuss development-population linkages in our policy dialogue, to emphasize female education and employment and other development programs that build interest in smaller families, and to double Bank population/health lending and support related research efforts. He also encouraged other donors and developing countries to do more to extend family planning services and information. The President's speech was welcomed warmly. It facilitated highly productive conversations between Bank staff, other donors and present and potential borrowers. WDR was also well received; a press briefing was held on it and over 700 copies were distributed.

7. More generally, the Conference generated widespread interest in population and family planning (press coverage was extensive) and provided an international consensus that individual countries can cite and use when determining their own population policies and programs. More concrete follow-up steps are now under discussion. These will include reviews of progress by the United Nations, but the most important follow-up will be in
the country policies and programs that emerge. To be effective, these should involve not only "population programs" as such but the entire strategy of development as it bears on desired family size and on resulting patterns of fertility and mortality. Thus follow-up will have to include better analysis of demographic-economic links as well as stronger efforts to shape development programs with population objectives in mind and more vigorous support of family planning services. For the Bank in particular, follow-up will include closer cooperation with UNFPA, other major donors, and NGOs (particularly the worldwide network of national family planning associations loosely bound together in the International Planned Parenthood Federation); discussion with Regions and other Departments on how development activities may impinge on population trends; intensified PHN project development, building on past projects or on new expressions of interest from senior government officials attending the Conference from such countries as Mexico, Brazil, Senegal, Ghana, Nigeria, Tanzania, Kenya, and many of the large Asian countries; and consideration of direct Bank support for biomedical or other research. We will also incorporate discussion of the Conference and its implications for our lending program in the worldwide seminars on WDR.

BHerz:lcj
September 4, 1984
John:

Please handle.

(Shahid and I have made comments directly to Julian)

Re 7/25 memo Birdsall to Michalopoulos "Comments on Clausen's Mexico City Speech"

Deadline/Follow-Up date:

Signature: H.G. van der Tak.

Date: July 26, 1984
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**REMARKS:**

For needs (she says in hand coming anxiety to public)

| **FROM**: | **ROOM NO.**: E836 | **EXTENSION**: 78844 |
OFFICE MEMORANDUM

DATE July 25, 1984

TO Mr. Costas Michalopoulos, VPERS

FROM Nancy Birdsall, CPDRM

EXTENSION 60176

SUBJECT Comments on Clausen's Mexico City Speech

1. The speech certainly has the right tone and spirit. (I am copying these comments directly to Julian Grenfell.)

The Bank's Role

2. My chief concern is with the discussion of what the Bank is doing and will do:

   P.6. "We will increase lending for female education and for programs to improve women's income-earning capacity." I would prefer wording like: "We will strengthen our emphasis on lending for basic education, especially for women, and on encouraging policy reforms that will widen women's educational and employment options."

   It is not clear to me what the existing phrasing really means. It may come off as sounding hypocritical -- unless changes are envisioned in Bank lending policy which I would find surprising and controversial.

   P.10. Regarding NGOs and future Bank research, can the text be more specific? Where (Kenya the only example?) does the Bank provide support for NGOs? How might the Bank cooperate with NGOs in the future? "We...are actively exploring ways of cooperating" is too vague to be credible. Same on research; one good example would be better than what looks like cheap talk. On contraceptive research, listeners will wonder what exactly are the relations between the Bank and WHO on this. How long will it take to make a financial commitment and how much will be committed? My impression is there is skepticism out there about the Bank's commitment to population programs; statements that are vague may only lead to snickering.

   On doubling of lending, will this be largely in health? If so, the text should say so, and repeat why that's reasonable. Again, I would prefer a specific statement such as "We now have in the pipeline X number of projects for health and family planning in Africa, which will mean an increase in our lending commitment by X millions by 1990."

Other Quibbles

3. P.6. What are "production-oriented programs"? People might interpret this as employment generation schemes which I doubt the Bank supports.
P.7. Top paragraph. Bangladesh a poor example. Use Colombia only if change of wording from "Strong government support ..." to "Widespread access to family planning services ...".

P.7. Bottom. Ch.7, WDR, emphasizes three strategies: (i) better access through outreach and greater emphasis on subsidizing private sector distribution; (ii) improving quality by providing more methods and good follow-up of clients; and (iii) ensuring social acceptability through community programs and local participation. Add to existing list follow-up of clients, to safeguard health and to reduce discontinuation. Subsidizing the private sector could also be added to the list. (But see below; all this could be eliminated, to make the speech shorter.)

P.8. Where did the "less than 40 percent of couples have access" come from? Is there really adequate data on access to say this? An alternative is to give country figures on unmet need for family planning services; these figures are compelling because they refer to people who want no more children or want to space births: 33 to 41 percent of couples in Bangladesh; up to 46 percent in Peru; up to 30 percent in the Philippines (WDR, p. 131 -- for other countries, Table 3, p. 196).

P.8. Say what private health care "providers" are: doctors, midwives, traditional practitioners, etc.

P.9. $500 million for population and only $100 million for health. Wow! This will strike many as the wrong ratio, and needs to be explained.

P.9. Medical backup is necessary for many of the modern effective contraceptives -- another reason why health and family planning go together.

P.9. Delete "will", line 6 of paragraph 2.

P.9. Clarify "on a declining basis". I assume it means over time within each project -- not that the Bank is doing it less and less.

4. To make the speech shorter (a necessity I understand from Julian Grenfell):

PP.4-5. On the economic policy dialogue. Make shorter by simply saying Bank helps countries cope with the short-term consequences of rapid population growth, through a wide range of macroeconomic policies as well as in education, labor markets, etc.
P.7. The second paragraph and four keys to effective family planning programs could go. It's off the subject of what the Bank is doing and will do. Similarly with bottom paragraph of p. 8.

cc: Julian Grenfell
    John North
    Barbara Herz

NBirdsall: gc/ae
**FOR THE 10:00 MEETING ON MONDAY, JULY 23RD, IN MR. NORTH'S OFFICE.**
Address
As Prepared for Delivery
By

A. W. Clausen, President
The World Bank
and
International Finance Corporation

at the
International Population Conference

Mexico City, Mexico
August 7, 1984
Mr. President,
Mr. Secretary-General;
Distinguished Delegates:

I am grateful for the opportunity to address this plenary session of the International Population Conference.

The World Bank's deep interest in the issues confronting this distinguished forum is well known. The link between population growth and economic and social development is a reality that none of us can afford to brush aside. The past hundred years have brought to this globe extraordinary economic and technological progress, and vast increases in population. It is time now to use our economic gains and our accumulated wisdom to better the human condition. A world in which the most spectacular growth is in human numbers at a bare survival level is not the right world for us to be bequeathing to future generations. Better is demanded of us than that.
The evidence is overwhelming that too rapid population growth frustrates efforts to raise living standards, particularly in the developing world, and threatens the environment we all share. There must therefore be a continuing effort to contain population growth if pervasive poverty is to be eased and development achieved. But it must be contained through policies and programs that are humane, non-coercive, and sensitive to the rights and dignity of individuals. We believe that the international community has no alternative but to cooperate, with a sense of urgency, in this endeavor. And we believe that the objectives of this endeavor can indeed be achieved.

That is what this great gathering in Mexico City is all about. This morning, therefore, I would like to tell you how we at The World Bank will join in this endeavor.

Ten years ago in Bucharest, at the first International Conference on Population, the World Plan of Action, which this Conference is reviewing, was drawn up after a vigorous debate; a debate over whether birth rates could be brought down more rapidly by concentrating on family planning, or by concentrating on development that built demand for smaller families.
That is a false dichotomy. Rapid reductions in population growth, and indeed rapid improvements in living standards, plainly require a combination of economic and social development with family planning. We have set out our reasons for so concluding in our World Development Report 1984, published just four weeks ago. I humbly commend it to you.

Let me now focus on how the Bank, as part of the donor community, can support an effective combination of these two approaches.

We believe that donors can assist in three key ways, bearing in mind that particular donors will naturally emphasize the types of assistance that suit them best.

1. through the dialogue they conduct with recipient governments, sharing understanding of population trends, their causes and their consequences;

2. through supporting aspects of development into which population consensus can be built, such as education for women, and improved economic security for the poor; and

3. through assisting in the extension and improvement of family planning and other basic health care services.
The World Bank can, and does, seek to provide effective assistance through each of these approaches.

The economic policy dialogue which The World Bank conducts with its borrowing member countries is the linchpin of its lending program. In it we are giving increasing attention to the consequences of rapid population growth. Those consequences vary, depending on the institutional, economic, cultural, and demographic setting. But most countries find that rapid population growth makes the choice between higher consumption now and the investment needed for higher consumption in the future very stark indeed. Likewise they face the pressing problem of large increases in their labor forces, alarming overcrowding of their cities, strains on basic services, and the threat to an already precarious balance between limited natural resources and a growing population. Technical change may bring some alleviation. But such change is neither free nor predictable.

Frustrated development expectations, environmental stress, strain on maternal and child health, limitations on women's opportunities -- all owing much to high population growth rates, are obvious issues for any dialogue about development strategy. But the value of the dialogue depends on the depth of understanding of the problems. The Bank is therefore stepping up its research into the consequences of high population growth rates on the development effort.
The second key way in which the Bank can help is to support those aspects of development which most influence fertility. Why do poor parents say they cannot afford few children while richer, better educated parents say they cannot afford many? Poor parents, especially mothers, depend, faute de mieux, on children for old-age support, protection and help. But we see development generate interest in smaller families as parents' expectations for their children increase and as their own economic and social choices expand. Reducing parents' dependence on children and widening opportunities for women are two objectives much to be encouraged. But how can the objectives be affordably achieved?

Alleviation of the severest poverty, for example by improving small-far productivity, is a high priority. So is basic education, particularly for girls; the provision to women of more technology, credit, and productive inputs; and stronger savings institutions. This requires making education and production-oriented programs more affordable -- while opening them more to women. These things are worth supporting in their own right. But their impact on family size is another solid reason for emphasizing them. We will increase lending for female education and for programs to improve women's income-earning capacity.
Third, the Bank can assist in extending and improving family planning and health services. Basic health care not only serves humanitarian ends, it improves productivity. And family planning demonstrably improves maternal and child health. It also makes a demographic difference in widely different settings. As already cited in this forum, vigorous government support for family planning here in Mexico has helped reduce population growth from 3.2% in 1970 to about 2.4% today. Colombia, Korea, Singapore, and Thailand are among others who can claim comparable successes.

Family planning can be effectively introduced in widely different settings if service programs are carefully designed. We have seen this work in all quarters of the globe; it has certainly worked here in Mexico. And what are the keys to effectiveness? They include:

1. offering a variety of family planning methods;

2. delivering services not just at clinics but through active "outreach" programs rooted in individual communities;

3. providing other basic health care to improve maternal and child health.
4. structuring programs that are manageable and culturally sensitive.

Demand for family planning services outruns supply in many countries in the developing world. Almost everywhere there are couples having more children than they want, or would want had they more information about, and access to, easier fertility control. Today, no more than 40 percent of couples in the developing world outside the People's Republic of China have access to adequate family planning services. An estimated 65 million couples in the developing world, many of them poor inhabitants of remote areas, do not want more children, but shun whatever age-old family planning methods may be available to them.

These are the dimensions of the challenge.
Most family planning services in developing countries are provided by governments through "primary health care" programs focusing on maternal and child health. But private organizations are active in many countries and, in Latin America, provide services on a wide scale. Private health-care providers and pharmacies reach urban and even rural areas, particularly in the better off countries. But, as a practical matter, governments must be the main source of support in poor countries, where private incomes cannot yet sustain much by way of commercial services, and where nongovernmental organizations must rely on uncertain support from abroad.

The World Bank has often helped governments extend health care with family planning as a component. Family planning and other basic maternal and child health care make a natural package. But family planning can often be underemphasized. We therefore also support more focused family planning programs, some independent of the health system. In the last fourteen years the Bank has committed some $500 million for population projects. And over $100 million for health projects. Many of the health projects include family planning. A strengthening of the health system is often necessary to extend family planning, particularly where health care facilities are scarce and where clients are reluctant to use family planning without firmer evidence that their children will survive.
In our population and health lending, The World Bank begins by working with countries to identify objectives and requirements for various resources. We may then help coordinate formally or informally with other donors to ensure that requirements are met through a sensible division of labor. We ourselves will help meet a variety of needs -- clinics and equipment, medicines and contraceptives, training and local recurring costs (but on a declining basis), technical and management assistance, and efforts to test better ways to deliver health and family planning services.

We know well the outstanding record of non-governmental organizations (NGOs) in this field, and we encourage continuing and growing support for them from the developing countries and the donor community. We provide modest support for NGOs through our projects with governments, and we are actively exploring ways of cooperating further with them.

In the meantime, we are exploring opportunities to support further research: on the consequences of population growth; on social and economic forces that influence population growth; on improved methods of family planning; and on more effective service delivery.
In short, The World Bank intends to do more, and do it more effectively, in the population field. Requests for population assistance are rising; and we mean to respond. With a major focus on Africa and Asia, we plan to at least double our population and related health lending over the next few years. The opportunity is there, and we look forward to cooperating with governments, with other donors, with other U.N. organizations, especially UNFPA, and with private organizations in the design and implementation of effective population policies and programs as requested by our member governments.

With the increase in demand, and with the continuing development of effective approaches to family planning, we have concluded in our World Development Report that population assistance could usefully triple, or even quadruple, between now and the end of the century. Population assistance is now about $500 million annually, about 1 percent of official development aid. Yet this small effort supports about 25 percent of all family planning costs in developing countries, and about 50 percent of family planning programs outside China. A quadrupling of population assistance could raise the annual level to some $2 billion by the year 2000. Even such a relatively small increase in donor assistance could, given effective policies in developing countries, make a vast difference to population growth, to maternal and child health, and thus to the future we share.
But a few donors cannot be expected to carry the bulk of the burden. The whole donor community must help. The developed world has had access to good family planning services for some time now. And it is well enough known that such services cost little. If donors and developing countries were each to make minimal adjustments in their budget allocations, the international community would have the resources to make such services available to most people in the developing world as well.

If we can make that commitment here in this forum, we shall have taken a giant step towards securing sustained economic and social development in the developing world.

Thank you.
Date: July 12, 1984

To: Mr. Vahram Nercissiantz
From: Stephen Denning

Extension: 61561

Subject: Mr Clausen's itinerary in Mexico

1. As we agreed yesterday, I am attaching for your review a revised version of the itinerary for Mr Clausen's visit. You will note that:

- the donors' breakfast on August 7 has become a donors' lunch on August 7, and the borrowers' lunch on August 7 has become a breakfast on August 9. This frees up the morning of August 7, so that Mr Clausen can concentrate on the speech.

- a variety of times and attendees will need to be established and confirmed as we go along.

2. In terms of the Bank participants in Mexico, there will definitely be an unusually number of staff around, though for rather different purposes:

To accompany Mr and Mrs Clausen: Mr North ) For the Conference  
Ms Herz )  

Mr Steckhan: For the Mexico discussions  
Mr Greening: For the CIMMYT visit  

To meet approximately 100 delegations attending the Conference  
Mr Denning  
Ms Husain  
Mr Schebeck  
Mr Loh  
Dr Kanagaratnam  

To present WDR:  
Ms Birdsall  
Mr McGreevey  

If there are any problems with this planned attendance, we ought to discuss them now.
3. We ought to add, I think, a sentence to the brief indicating what position Mr Clausen ought to take, in the event that the Government expresses interest in Bank financial assistance in the population sector. My suggestion would be:

The Bank would be willing to consider financial assistance to the population sector, if officially requested by the Government, though we should be careful not to appear to be "pushing" our help in a sector where a previous Government felt that Bank financing might be counter-productive.

cc Ms Herz o/r, Mr Southworth

#2:clausen2
sd
## ITINERARY AND PROGRAM OUTLINE

**VISIT TO MEXICO - AUGUST 6 TO 10, 1984**

For Mr Clausen

<table>
<thead>
<tr>
<th>DATE</th>
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<th>EVENT</th>
<th>REMARKS</th>
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<tbody>
<tr>
<td>August 6</td>
<td>??</td>
<td>Leave Washington by flight ???</td>
<td>Flight to be chosen</td>
</tr>
<tr>
<td>(Monday)</td>
<td>??</td>
<td>Arrival Mexico City</td>
<td>Mr North and Ms Herz and representative of Mexico will meet flight</td>
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<tr>
<td>??</td>
<td>(6 p.m.?)</td>
<td>Arrival at Hotel Camino Real</td>
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<td></td>
<td>Private dinner</td>
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<tr>
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<td>Private breakfast</td>
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<tr>
<td>(Tuesday)</td>
<td>9.30 a.m.</td>
<td>Leave Hotel Camino Real</td>
<td>Mr. North will accompany</td>
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<tr>
<td></td>
<td>10.00 a.m.</td>
<td>Arrive Conference</td>
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<tr>
<td></td>
<td>11.00 a.m.</td>
<td>Deliver speech (approx)</td>
<td>Timing of speech depends on timing of previous five speakers</td>
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<tr>
<td></td>
<td>1.30 p.m.</td>
<td>Host lunch at Camino Real Hotel (or Champs Elysee Restaurant?? in Zona Rosa)</td>
<td>Mr North and Ms Herz will attend</td>
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<td>3.00 p.m.</td>
<td>Free time</td>
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<td></td>
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<td>Field visit to CIMMYT being arranged by CGIAR</td>
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<td>Private lunch</td>
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<td></td>
<td>??</td>
<td>Meeting with President de la Madrid</td>
<td>Mr Steckhan will accompany</td>
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<td></td>
<td>??</td>
<td>Meeting with Mr Silva Costa Secretary of Finance</td>
<td>Mr Steckhan will accompany</td>
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<td></td>
<td>??</td>
<td>Dinner hosted by Mr Silva Costa</td>
<td>Mr Steckhan will accompany (??)</td>
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<tr>
<td>August 9</td>
<td>8.00 a.m.</td>
<td>Host a breakfast at Hotel Camino Real for about 12 heads of delegations from key countries (eg China, India, Mexico, Kenya etc)</td>
<td>Mr North and Ms Herz will accompany</td>
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<td></td>
<td>9.30 a.m.</td>
<td>Free time</td>
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<td></td>
<td>12.00 noon</td>
<td>Visit to family planning clinic</td>
<td>Mr Steckhan and Ms Herz will accompany</td>
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<td></td>
<td>4.00 p.m.</td>
<td>Return to Camino Real Hotel (free time)</td>
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<td>??</td>
<td>Dinner at the Swedish Embassy for heads of delegations</td>
<td>Mr North will accompany ??</td>
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<tr>
<td>August 10</td>
<td>??</td>
<td>Leave Hotel Camino Real for airport</td>
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<td></td>
<td>??</td>
<td>Departure for ?? Washington</td>
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**ITINERARY AND PROGRAM OUTLINE**

**VISIT TO MEXICO - AUGUST 6 TO 10, 1984**

For Mrs Clausen

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<td>ten delegates from key donor countries</td>
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#2: clausen
sd
July 11, 1984

Files

Jeremy J. Warford, Chief, PHNPR

61581

Mexico Conference — Barbara Herz’s Itinerary

Barbara Herz has agreed to interrupt a long-planned vacation to attend the International Population Conference in Mexico. She is coordinating the Bank’s participation and helping accompany Mr. Clausen. We think she should get to Mexico in the afternoon of August 5th since Mr. Clausen arrives August 6th. Since Barbara will be in Jackson, Wyoming, on vacation, she will pay for part of the Washington-Jackson-Mexico-Washington trip. The minimum cost to Barbara involves an itinerary bringing her to Mexico at night on August 5th. We have asked her to take an earlier itinerary that will bring her to Mexico in the afternoon, and the Department will absorb the extra cost. (This amounts to having the Department pay Jackson-Mexico-Washington.)

Cleared with and cc: Mr. Stephen Denning

BHerz:lcj
June 26, 1984

TO: Mr. Herman van der Tak, OPSVP

FROM: Julian Grenfell, Chief, Speechwriting Unit, IPA

SUBJECT: Mr. Clausen's Nairobi Speech

Herewith the latest draft of the speech. I have given careful consideration to the useful comments that I received from twelve individual sources. The majority were for additions to an already long text, so I have had to make some hard but, I hope, fair and sensible decisions about what to incorporate and what to reject.

A few points remaining to be resolved:

(a) I am not sure that we have effectively reflected Mr. Stern's only point: that "the projected levels of population cannot happen while countries maintain stable political/social/economic systems. The question is, therefore, how do we avoid these numbers from coming to be? How, in a systematic, human way can we avoid them happening?"

(b) Is there nothing we can say about future trends in population and health lending by the Bank?

(c) We need to select two or three suitable tables for the printed text (Nancy Birdsall).

We need to get an agreed text to Mr. Clausen this Thursday. I will therefore need by Wednesday c.o.b. your comments on this draft. For obvious practical reasons, I would like to receive PHN's comments in consolidated form.

Many thanks for your cooperation.

cc: Messrs. J. North (PHN); F. Vogl (IPA)
    Mesdames B. Herz (INDSP); N. Birdsall (CPDRM)

Attachment
Address
As Prepared for Delivery
By

A. W. Clausen, President
The World Bank
and
International Finance Corporation

before the
Population and Family Planning Seminar

Nairobi, Kenya
July 11, 1984
Mr. Vice President,

Your Excellencies,

Ladies and Gentlemen:

I am honored and delighted by your invitation to address this distinguished gathering. It is always a pleasure to come to this wonderful country, and I wish to thank you warmly, Mr. Vice President, for giving me this opportunity to share with you today some thoughts on the subject of population growth and development.

As all of us here agree, it is a subject of vast importance and undeniable urgency. While the effects of fast population growth may vary widely, depending on the institutional, economic, cultural, and demographic setting, all the evidence points overwhelmingly to the conclusion that it slows development in the developing countries. And the poor of these countries are the principal victims of the slowdown.

As I believe we can also agree: it is a problem that is insufficiently understood in many quarters of the globe. One wonders why. Even under optimistic assumptions, we contemplate the developing world's population of today more than doubling by the year 2050. In what conditions will those 8.4 billion people be forced to live? If live they can. And what if our assumptions about the decline in the average number of children born to women of child-bearing age are proven too optimistic? How many more billions will be added?
Unless we confront this dilemma today, there will be poverty-stricken people in tomorrow's developing world in increasing numbers and indescribable misery.

Our gathering here today is one more demonstration of the deep concern and commitment of President Arap Moi, of you, Mr. Vice President, and of the government of Kenya, to meet the challenge of rapid population growth in your own country. There is indeed an unbreakable link between population growth rates on the one hand and the rate of economic and social development on the other. You have boldly recognized that link, and we wish you well in your determined efforts not to let the pace of the former undermine the prospects of the latter.

But we should not be content just to wish you well. The World Bank is determined to support the broad spectrum of initiatives which you and the peoples of all developing nations are taking in the struggle against poverty. And here in Kenya we are especially anxious to help you in the population field by supporting your Family Planning Program in particular and your primary level health services and your education services in general. We are much encouraged that you have asked us to be one of your partners in this endeavor. We will do all we can to make that participation as helpful to you as possible.
You will readily understand why The World Bank, devoted as it is to the promotion of economic and social development in the developing countries, should be profoundly concerned with the population issue. Population growth is a key issue in development. And we are reaffirming our recognition of that basic fact by devoting the major part of the 1984 World Development Report, published today, to this problem. In humbly commending it to you, I would like to address the principal issues it raises concerning the problem. Complex as the problem is, the message I wish to convey about it can be clearly stated in three parts.

First, rapid population growth is a central development problem. And continuing rapid growth on an ever larger base will mean lower living standards for hundreds of millions of people. The main cost of such growth, borne principally by the poor in developing countries, has been, and will continue to be, lost opportunities for improving people's lives.
Second, proposals for reducing population growth raise difficult questions about the proper domain of public policy. Family and fertility are areas of life in which the most fundamental human values are at stake. Public policy inevitably influences private decisions about family size. The question is: are there public policies to reduce fertility which can be translated into quick, effective public action appropriate to an area where private rights are paramount? Our answer is a firm "yes."

Third, in the past two decades, and especially in the past ten years, many developing countries have shown that effective measures can be taken to reduce fertility. Experience has therefore taught us that policy can and does make a difference.

Let me now expand on these three themes. And as a preface to what I want to say first about rapid population growth as a development problem, let me say something about past and future population growth in the developing world.
The second half of the twentieth century stands out in history as a period of remarkable population growth. Through most of the first half of this century, population growth was at the historically rapid rate of one percent. But then it accelerated to twice that rate, and between 1950 and today, the world's population has nearly doubled, from 2.5 billion to almost 4.8 billion.

Until the twentieth century, prosperity and population increase went hand-in-hand. But in this century, and particularly since 1950, population growth has been faster where income is low, and concentrated in developing countries. Of the 1984 world population increase of about 80 million, more than 70 million will be added in developing countries, which now contain about three-quarters of the global population.

The delinking of population growth and prosperity occurred in part as public health and improved communications brought mortality down even where gains in living standards were small. A combination of continued high fertility and much reduced mortality has led to population growth of between 2 and 4 percent a year in most developing countries as compared with one percent a year in most developed countries.
The stark facts are that growth at three percent per year means that in seventy years population grows eightfold; at one percent a year it merely doubles. No group of people appreciates the implications of this better than we who are assembled here today in a country where the population growth rate has been estimated this year at almost four percent. That is most probably the highest rate in the world, and one that would double Kenya's population about every eighteen years.

For developing countries as a group, population growth rates have slowed somewhat, from a peak of 2.4 percent in 1965 to about 2 percent today. But further decline in population growth in developing countries will not come automatically. Much of the slow-down so far can be attributed to China, where fertility is already low -- close to an average of two children per family. Most families in other developing countries now have at least four children; in rural areas five or more.

For parts of South Asia and the Middle East, forecasts of a lower rate of population growth are based more on hope than on present trends. For much of Africa, population growth rates are actually rising, and could rise still further.
In Africa, many if not most couples say they want more children than in fact they are having, whereas mortality, though high, can be expected to decline. For example, The World Fertility Survey's findings on Kenya indicated a strong desire for large families. Relating to the period 1977-78, only 17 percent of then married women stated that they wanted no more children. Among those with eight living children, only 48 percent wanted no more. The mean desired family size was 7.2. All this suggests that in Kenya the unmet demand for family planning services is low, and a substantial decline in fertility can only occur if desired family size falls.

We should be aware, moreover, of the effects of what we call "population momentum." This simply means that growth rates will remain high in developing countries for several decades, even if couples have fewer children. Absolute annual increases in population are likely to rise to over 80 million people a year. And they will remain that high through the end of this century since the baby "bulge," which resulted from high fertility and falling mortality twenty years ago, has itself now entered childbearing age.
Let me stress that population projections should not be treated as predictions, but as illustrations of what can happen given reasonable assumptions. If the assumptions underlying the standard projections of The World Bank are correct, world population would rise from almost 4.8 billion today to almost 10 billion by the middle of the next century.

The population of today's developed countries would grow from about 1.2 billion today to 1.4 billion in 2050 -- an increase of some 16 1/2 percent. But the countries we currently classify as developing would see their total population grow from 3.6 billion to 8.4 billion, an increase of 133 percent.

By the time the world population stabilized at over 11 billion in about the year 2150, the population of India would be 1.8 billion, making it the most populous nation on earth. And Kenya's population would have risen from 19.7 million today to a staggering 160 million, a situation surely as impermissible as it is unimaginable. And as a group, the countries of South Asia and Sub-Saharan Africa -- today's poorest countries with the fastest population growth -- would account for about 60 percent of the world's people, compared with about 35 percent today.
These are awe-inspiring projections. And yet, in some respects, the assumptions underlying these projections may well be optimistic. Maybe fertility will not have fallen to replacement level in all developing countries by the year 2045. And maybe -- even though a lesser factor in high population growth -- mortality will not continue to fall rapidly. Even with rapid income growth and advances in literacy in the next two decades, the poorer countries of Africa and South Asia are not likely to reach the income and literacy levels that triggered fertility declines in such countries as Brazil, Korea, and Malaysia in the 1960s. Yet their fertility is projected to decline significantly. But even with those declines their population will more than double in the next fifty years.

One might well ask whether, for some countries, fertility really can decline that fast. And whether, even if it does, it is not in some cases already too late. Could not rising unemployment and increasing landlessness simply overwhelm social and political institutions? And plunge countries into irreversible chaos?
Even under an alternative projection of still more rapid fertility decline -- a decline such as achieved in China, Colombia, and Thailand in the past two decades -- population growth could remain great in most developing countries. Kenya would still have a growth rate around 2 1/2 percent in the year 2000, and India and Brazil around 1 1/2 percent. In the long run, many countries may wish to reduce population growth rate to less than one percent, which is already China's goal. But the alternative projections of rates of fertility decline make one thing painfully clear: for the next several decades, most developing countries will need to make a concerted effort just to reduce population growth to a rate closer to one percent.

We must accept the likelihood that population growth will accelerate in Africa because mortality still has far to fall and can be brought down fairly rapidly. Widespread introduction of family planning in Africa, however, will take time.

To sum up this brief demographic overview:
It has been almost two decades since the peak of population growth in developing countries was passed. But the turnaround to a reduced rate of growth has been slow, and has been far from pervasive. Increases in population size are projected to mount for at least another two decades. In many countries of the developing world, populations will triple in size by the year 2050, even assuming substantial declines in fertility.

Thus, two decades after the turnaround, the slow pace of change and its uneven incidence point more than ever to rapid population growth as a central development problem.

Now let us return to the first of our three principal messages: that rapid population growth is a development problem. Why does it put a brake on development? There are three main reasons.

First, it exacerbates the difficult choice between higher consumption now and the investment needed to bring higher consumption in the future. Resources per person are lower the faster population grows, making investment in "population quality" difficult. Yet ultimately the key to development is people who are more educated and skilled.
For example, in most developing countries, the high fertility and falling infant mortality of the mid-1960s mean that about 40 percent of populations are aged fifteen or younger. Countries such as Malawi face a doubling or tripling of their school-age population by the end of the century. With rapid fertility decline could come savings of more than 50 percent by the year 2015 in the school system, savings that could be used to improve the quality of schooling.

The same is also true of jobs. High-fertility countries face large increases in their labor forces. As an example, Nigeria's high fertility in the 1970s guarantees that its working-age population will double by the end of this century. Kenya can expect an even larger increase, whereas China will experience a rise of no more than 45 percent.

Second, in many countries increases in population threaten what is already a precarious balance between natural resources and people, as here in Kenya. Where populations are still highly dependent on agriculture, continuing large increases in population can contribute to overuse of limited natural resources, such as land, mortgaging the welfare of future generations.
In many parts of Africa, strains on natural resources are already acute -- for example in this country, in Burundi, Malawi, eastern Nigeria, Rwanda, and parts of the Sahel region. But countries rich in natural resources do not escape the problem of rapid population growth. To exploit their natural resources, countries such as Angola, Ivory Coast, Nigeria, Zaire, and Zambia need extra skills, as well as heavy investment in roads and storage and distribution systems -- a more difficult goal if population is growing rapidly.

In part, the problem arises because rapid population growth slows the transfer of labor out of low-productivity agriculture into modern agriculture and other modern jobs. In many countries, much of the huge projected increases in the labor force will have to be absorbed in agriculture, a difficulty which today's developed countries never faced during the period of their economic transformation. Here in Kenya, assuming a 4 percent annual increase in the number of jobs outside agriculture, and an immediate start of fertility decline, 70 percent of the labor force will still be going into agriculture forty years from now, and their number will be twice what they are today. With farm size already averaging only about three acres of prime arable or equivalent land, we are bound to ask how Kenya can sustain such numbers.
Elsewhere in Africa, in parts of China, Bangladesh, and Indonesia, population pressure has already forced people to work harder just to maintain household income in traditional agriculture. But the problem is not just continuing low income for many families. When undue stress is placed on traditional agricultural systems and the environment is damaged, the economic well-being of the poor is particularly threatened. Here in Kenya, as elsewhere, women have to go farther and farther to find wood and water. In Addis Ababa, Ethiopia, the price of increasingly scarce wood for fuel has risen tenfold during the 1970s and now claims up to 20 percent of household incomes. In lowland areas surrounding the Ganges in southern Asia, population growth and competition for land have forced many people to live too close to the river, in the path of annual floods.
Third, rapid population growth is creating urban economic and social problems that risk becoming wholly unmanageable. Cities in developing countries are growing to a size for which there is no prior experience anywhere. Between 1950 and 1980 the proportion of urban dwellers in developing countries in cities of more than 5 million increased from 2 to 14 percent, growing at a rate of 15 percent a year. Brazil's Sao Paulo, which by the year 2000 could well be the world's second largest city after Mexico City, was smaller in 1950 than either Manchester, Detroit, or Naples. London, the world's second largest city in 1950, will not even be ranked among the twenty-five largest by the end of the century. The rise in urban population, 60 percent of which is due to natural increase, poses unprecedented problems of management even to maintain, let alone improve, the living conditions of city dwellers.

In the light of these disturbing facts about the impact of rapid population growth on development, must we conclude that the population brake on development in the Third World can nowhere be released?
Countries in which education levels are already high, where much investment in transportation and communications is already in place, and where political and economic systems are relatively stable -- these countries are better equipped to cope with the problem of rapid population growth. This is true whether or not their natural resources are limited or their countries already crowded, such as in economically rising East Asian countries like Korea and Singapore. But these tend also to be countries in which population growth is now slowing.

Those countries where there is rapid population growth could also cope with the problem if the right economic and social adjustments could be made fast enough, if technical change could be guaranteed, and if rapid population growth itself inspired technical change. But such growth, if anything, makes adjustment more difficult. It brings at best only the gradual adaptation which is typical of agriculture, maintaining but not increasing per capita output. It is the rich countries, where population growth rates are slow, that are the architects of technological change. And their interest is in labor-saving, not labor-using, innovations.

While the effects of rapid population growth may vary widely, depending on the institutional, economic, cultural, and demographic setting, the evidence points overwhelmingly to the conclusion that it slows development.
Policies to reduce population growth can help accelerate development, particularly when combined with the right macroeconomic and sectoral policies. Trade and exchange rate policies that do not penalize labor, and the dismantling of institutional barriers to job creation, would ease employment problems. Correct pricing policies in agriculture and more resources allocated to rural credit, agricultural research and extension, would help increase agricultural output. But failure to address the population problem will itself reduce the set of macroeconomic and sectoral policies that are capable of implementation. And it would permanently foreclose some long-run development options.

This brings us to our second message: there are appropriate policies to slow population growth.

It is the poor, with little education, low and insecure income, and poor health and family planning services who have many children. Yet it is also the poor who are the principal losers as rapid population growth hampers development. This seeming paradox provides the starting point for understanding the need for, and the designing of, appropriate policies to reduce fertility.
These are but three of the many factors encouraging large families. Add to that the limited information about, and access to, modern and safe means of contraception, and we can well understand why high fertility among the poor is so prevalent.

However, parents and children do not always gain where there are many children. Inadequate access to land, or the poor health of the children, often as a result of closely spaced births, can confound the parents' expectations.

Thus, if parents have many children in the hope of economic gain, the first step in reducing fertility must inevitably be to work towards the reduction of their poverty and of the uncertainty about their own future. In this sense, the persistence of high fertility in today's developing countries is a symptom of lack of access to services that the industrial world more or less takes for granted:

- to health services, which reduce the need for many births to insure against infant and child mortality;

- to education, which would raise parents' hopes for their children and would broaden a woman's outlook;
to social security and other forms of insurance for old age;

to consumer goods and social opportunities that compete with child-bearing;

and to family planning services, which provide the means to limit births.

The general components of the solution to high fertility would therefore seem clear enough. But in countries where there is as yet no national policy on population size and no family planning effort supported by the government, there remains the question of the justification of government action to encourage people to have fewer children. As I said at the outset, family and fertility are areas of life in which the most fundamental human values are at stake. And governments need to be very sure that public policy has a place in such private areas.

I would like to suggest, therefore, two broad justifications for government action.
The first is that a government owes a duty to society as a whole. It cannot remain indifferent to the gap that exists between an individual couple's hopes for private gain from having many children and the prospects for social gains for the community as a whole. "We wish to benefit from a large family" the couple may say, "but we wish our neighbors would have fewer children so that ours would face less competition for land and jobs." It is not easy to persuade a couple to give up the possible private benefits of many children, when its sacrifice alone would provide only miniscule benefits to other families' children and grandchildren. One family's restraint will have little effect on the availability of land; but, as governments are all too aware, many children born of many families will.

Governments are expected to have longer time horizons than their individual constituents and to weigh the interests of future generations against those of the present. They have to bear in mind not only the pressure on land and jobs that results from high fertility rates. They must also weigh the fact that health and education costs of children are heavily subsidized by the public sector, and that high fertility constrains the amount of resources available for investment, and hence for future income growth.
But can high fertility be reduced so long as the individual couple’s wish for itself is in conflict with its wish for society as a whole? What is needed, in effect, is that people, with the full complicity of the government, make a contract with each other: "if each of us has fewer children, we can rely on government support for nationwide measures to improve access to family planning services and to create incentives for their use, thus ensuring that everybody makes the same decision. That way we and all our children will enjoy a better chance in life."

By encouraging and supporting such a social contract, the government frees each individual couple from its need to decide in isolation to produce more children than it would want if others were limiting their family size.

That is the first justification for government action.

The second justification is that people may have more children than they want, or would want had they more information about, and access to, easier fertility control. They may lack, or disbelieve, information about falling child mortality; about the benefits to existing children of limiting family size; about the health risks to both mother and children of too many and too closely spaced births. The very idea of planning pregnancies may be unknown, and even if they know about family planning, couples may not know how to practise it.
Here the government's role as the disseminator of information and services is critical. It can encourage the wider provision of modern contraceptives by private suppliers. But in many countries where distribution systems are poor, health care inadequate, and demand unknown and possibly limited, governments will need to play a more direct role, subsidizing or even organizing contraceptive services.

There are an estimated 65 million couples in developing countries, many of them poor inhabitants of remote rural areas, who do not want more children, but who do not use any contraception. This is often for lack of access to effective contraceptives. This unmet need for family planning services is the strongest possible argument for government support of programs that can enhance the welfare of the parents and give their children a better chance in life.

By enabling couples to have only as many children as they want, governments can slow population growth. But access to family planning might not alone be enough to bring privately and socially desired fertility into balance. Governments may want to consider financial and other incentives and disincentives. Incentives may be defined as payments to individual couples or groups to delay or limit childbearing, or to use contraceptives. Disincentives are the withholding of social benefits from those whose family size exceeds a desired norm.
Incentives and disincentives provide individuals with direct and voluntary trade-offs between the number of children and possible rewards and penalties. Incentives compensate individuals for the economic and social losses of delaying births or having fewer children. Those who accept payment for not having children do so because they find this trade-off worthwhile; they are compensated for some of the public savings from lower fertility. Similarly with disincentives. Those who chose to pay the higher costs of additional children compensate society as a whole for that private benefit. Thus incentives and disincentives afford a choice. But choice will be preserved only if programs are well-designed and carefully implemented.

The third message is that we know from experience that public policy can and does make a difference. Many developing countries have already shown that fertility can be reduced substantially, and over a short period of time.
In today's developed countries, as development progressed, fertility fell. But current rates of population growth are so much greater in the developing world than they were at comparable income levels in today's developed countries. Thus many developing countries cannot afford to wait for fertility to decline spontaneously. And they need good family planning services -- not abortion -- to achieve it. It is encouraging, therefore, that some developing countries have already shown that fertility can be brought down significantly.

It was once assumed that reducing fertility in developing countries would require a typical sequence of economic advance: urbanization, industrialization, a shift from production in the household to factory production, incomes rising to levels enjoyed by today's developed countries. This view seemed to be confirmed by the fertility declines of the 1960s, particularly in the industrializing economies of Korea, Singapore, and Hong Kong. But fertility declines beginning in other developing countries in the late 1960s, and spreading to more in the 1970s, came with a different kind of development: education, health, the alleviation of poverty, and government effort to assure widespread access to family planning services. Declines in birth rates since 1965 have been much more closely associated with adult literacy and life expectancy than with GNP per capita. For example, despite high average incomes, rapid industrialization, and fast economic growth,
birth rates fell less in Brazil and Venezuela between 1965 and 1975 than in Sri Lanka, Thailand, and Turkey where income gains and social services were more evenly distributed.

The association of social development -- including gains in literacy and life expectancy -- with low fertility is not surprising. When children have a better chance of surviving and of enjoying a wider range of opportunities, their parents are willing to devote more time and money to educating them, and then have fewer of them. And as education brings an increase in opportunities for women outside the home, those opportunities substitute for the benefits of having many children.

Social development, however, comes only gradually, and other complementary policies of later marriage and longer breast-feeding can reduce the birth rate. But the experience of many developing countries shows that public support for family planning programs really can lower fertility quickly.

When family planning services are widespread and affordable, fertility has declined more rapidly than social and economic progress alone would predict.
Fertility has fallen faster and to lower levels in Colombia, where family planning programs received government support starting in the late 1960s, than in Brazil, a richer country where central government involvement is minimal. It has fallen more in Egypt and Tunisia, countries with demographic objectives, than in their richer neighbor, Algeria.

The evidence is clear that two policies to reduce fertility are central. One is more widespread education, especially for women; the other is easier contraception.

In all countries, women who have completed primary school have fewer children than those with no education. And everywhere the number of children declines regularly -- and usually substantially -- as the education of mothers increases above the primary school level. The differences can be large; about four children between the highest and lowest groups in Colombia, for example.

Education delays marriage for women, either because marriage is put off during schooling, or because educated women are more likely to work or to take time to find suitable husbands. Educated women are also more likely to know about and adopt new methods of birth control. Here in Kenya, 22 percent of those with nine or more years of education use contraception, as opposed to only 7 percent with five or fewer years of education.
Improving both boys' and girls' educational opportunities can have an immediate payoff in terms of lower fertility of their parents. Once they know that schooling will open up new opportunities for their children, the parents accept the risk of having fewer children in order to invest more in each one. Evidence from household surveys in India, Egypt, and Nigeria show that parents have fewer children when education is readily available.

African governments should therefore not weaken their commitment to basic education for all, especially for women, despite current financial strains. The commitment to primary education here in Africa is strong indeed. But the indispensability of more education to less fertility should spur African governments to act even more determinedly on that commitment.
The second central policy is making access to contraception easier. Fertility declines have everywhere been eventually tied to increasing use of contraception. Cross-country analysis has shown that, for the average country, previous fertility decline accounted for 33 percent of the total fall in fertility between 1965 and 1976; socioeconomic change accounted for 27 percent. But family planning effort accounted for more than either: 40 percent. Clearly, programs providing publicly subsidized information and access to modern contraceptive methods can reduce fertility.

But family planning is also a health measure. In much of Africa, where the health of children and mothers is relatively poor compared to other regions, child spacing of at least two years can reduce child mortality by about 15 percent. It can also significantly reduce maternal mortality. And in addition to child spacing for health, family planning programs can help adolescents, including young newlyweds, to avoid first births that come too early for young women. In Africa's circumstances, in particular, the provision of safe and effective family planning services can discourage recourse to abortion or other traditional family planning methods that may be relatively unsafe or unworkable.
Some eighty-seven countries in the developing world, representing about 95 percent of its population, now provide such publicly subsidized family planning programs. Tremendous progress has been made in improving couples' access to information and services. But much more needs to be done. Nearly all programs fail to reach most rural people; even in the towns and cities the quality of services is often poor and discontinuation rates high. In many countries the potential of the private sector to provide family planning services has hardly been tapped; in others the gap in services provided privately can be filled only by enlarging public programs.

Twenty-six countries have yet to introduce family planning programs. Almost half of these are in Africa, where incomes are the lowest in the world, population growth is the highest, and the potential benefits from family planning may be the greatest.
About 40 percent of all couples in the developing world now use some form of contraception, ranging from 70 percent in China and Singapore to less than 10 percent in most of Africa. But in all countries surveyed, the number of women of childbearing age who want no more children exceeds the number practising contraception. About $2 billion is currently spent on public family planning programs in developing countries each year. In most countries it is less than $1 per capita (about $21 per user). To fill unmet needs today of women who would like to space or limit births but who are not practising contraception would require another $1 billion.

In the next two decades, program spending will need to rise even further, because of the growing number of women of childbearing age, and the increasing proportion of them who are likely to want to use modern contraceptives. If developing countries are to achieve a rapid decline in fertility, leading to a developing world population of 6.5 billion in the middle of the next century, an estimated $7.6 billion (in 1980 US dollars), or $1.66 per capita, would be needed in the last year of this century. The standard decline, leading to a developing world population of 8.4 billion in 2050, would require $5.6 billion a year at the end of this century, or $1.14 per capita. The estimated per capita expenditure on population programs in developing countries today is 62 cents. That can be compared with government spending per capita of about $7 on all health programs in developing countries in 1982.
The figures make it clear: relatively small increases in government spending could go a long way toward meeting the projected financial requirement for supplying family planning services. And that could make the difference between 6.5 billion and 8.4 billion people in the developing world by the year 2050.

The same is true for external assistance. International aid for population programs has two major objectives: to assist governments and private organizations in providing family planning, information, and services, and to assist governments in developing population policies as part of their overall development strategy.

Only about 1 percent of official development aid now goes for population assistance, and less for family planning. It supports about 25 percent of all family planning costs in developing countries, and about 50 percent of family planning programs outside China. Assuming these proportions did not change, population assistance would need to triple its current level by the year 2000 to achieve standard fertility decline, or quadruple it for the rapid decline. A quadrupling would raise annual population assistance from about $500 million in 1981 to $2 billion (in 1980 dollars) by the end of the century. Few could dispute that relatively small increases in donor assistance can, given effective policies in developing countries, make a vast difference in population change, and significantly improve maternal and child health. Those relatively small increases must be forthcoming.
Since Sweden made its first population grant in 1968, donors have transferred more than $7 billion in population aid. Although its contribution has been falling in real terms since 1972, the United States remains the biggest supporter of population programs, providing, along with private U.S. foundations, about 40 percent of all aid for population. Japan is the second largest donor. Canada, the Federal Republic of Germany, the Netherlands, and Norway have all increased their share of the total. Donor assistance is provided both directly to country programs and through multilateral and non-governmental organizations, of whom the two largest are the United Nations Fund for Population Activities (UNFPA) and the non-governmental International Planned Parenthood Federation (IPPF).

The World Bank also has an active role to play in support of population activities. The Bank places special emphasis on support for efforts to reduce fertility, offering its support in three ways:

- by improving understanding, through its economic and sector work and through policy dialogue with member countries, of the consequences for development of faster or slower population growth;
by helping support development strategies that naturally build demand for smaller families, especially by improving women's opportunities in education and income generation;

and by helping supply safe, effective, and affordable family planning and other basic health services focussed on the poor in both urban and rural areas.

Over a period of fourteen years, the Bank has committed some $355 million for population projects, and ______ for health projects. Its operations grew in real terms by more than 5 percent per year between 1977 and 1983, despite the fact that the terms of its finance are not as easy as most population assistance, which is in grant form. Meanwhile, the Bank cooperates with other U.N. organizations, especially UNFPA and the World Health Organization (WHO), in research and analysis requested by member governments.

Small increases in spending, as I have noted, can make a big difference. Sustained progress, however, requires not just donor funds. It requires a firm commitment on the part of the international community to population progress as a critical part of the overall development effort. And the strongest commitment must be made by the governments of the developing countries themselves.
Religious and cultural characteristics cannot be ignored in designing an effective policy to reduce fertility. But they do not rule out effective action. In every part of the developing world during the past decade, some governments have made significant progress in developing a policy to reduce population growth. And where progress has been made, it has been because governments, setting explicit demographic goals, have been employing a wide range of policies, direct and indirect, to reduce the attractions of high fertility.

An effective policy requires the participation of many ministries, and clear direction and support from the most senior levels of government. It requires the collection of reliable data and expert analysis of it to identify rapid population growth and project its consequences. Such information is critical to generating and sustaining the political commitment of leaders to slow growth. And strong institutions are needed to translate that political commitment into effective policy and action.

Let me now sum up.
Ten years ago, at the World Population Conference in Bucharest, a debate raged about the relative merits of development and family planning programs as alternative ways of slowing population growth. It is now clear that the dichotomy is false. Accumulating evidence on population change in developing countries shows that it is the combination of social development and family planning that is so powerful in reducing fertility.

But further fertility decline, and the initiation of decline where it has not begun, will not come automatically. In rural areas and among the less educated, desired family size will not be reduced much without sustained improvements in living conditions. The gap between the private and social gains of high fertility, itself the product of poverty, calls out for government action, especially in areas relating to women, that merit government action anyway.

But measures to raise living standards do not quickly bring about fertility reductions. The need is to act now in education, primary health care, and improving women's opportunities so as to bring a sustained decline in fertility over the long run. In the meantime, too many couples still do not benefit from adequate family planning services. Family planning programs, successful as they have been, have by no means reached their full potential. Action there will provide an immediate payoff.
In concluding, let me stress the central message on population growth in the World Bank's 1984 World Development Report.

Economic and social progress helps slow population growth; but at the same time rapid population growth hampers economic development. It is therefore imperative that governments act simultaneously on both fronts. For the poorest countries, development may not be possible at all unless slower population growth can be achieved soon. In the better-off developing countries, continuing high fertility, especially among poor people could prolong indefinitely the long wait for development to improve measurably the quality of their lives.

No one would argue that slower population growth alone will assure progress. But the evidence in the World Development Report seems conclusive. Poverty and rapid population growth reinforce each other. Therefore the international community has no alternative but to cooperate, with a sense of urgency, in an effort to slow population growth if development is to be achieved.
World population has grown faster and to higher numbers, than Malthus would ever have imagined. But so have world production and income. If we can correct the current mismatch between population and income-producing ability, a mismatch that leaves many of the world's people in a vicious circle of poverty and high fertility, we may yet evade the doom which Malthus saw as inevitable. It is not inevitable that history will vindicate his dire prediction of human numbers outrunning global resources. We have a choice.

But that choice must be made now. Opportunity is on our side. But time is not.

Thank you.
As requested, I attended the afternoon follow-up meeting to Bellagio held at the Humphrey Building. In attendance with me were: Mr. Robert McNamara; Mr. Nyle Brady (USAID); and Drs. William Foege (CDC); Ralph Henderson (WHO); Steve Joseph (UNICEF); D.A. Henderson (Johns Hopkins University); Jonas Salk (Salk Institute); Philippe Stoeckel (Foundation for the Advancement of Immunization Research); and Jim Sarn (USAID).

The group was visibly impressed by the opening presentation (largely a replay of our morning session) by Dr. Foege, who chaired the session, on achievements to date in developing accelerated childhood immunization programs in Colombia and Senegal, and proposed efforts in India. Discussion focused largely on four main areas:

a. Next Steps and Dr. Foege's Role Therein

The group endorsed proposals to assist Senegal in finalizing their immunization plan (e.g., establishment of a headquarters office by Rockefeller and provision of a vehicle and operations officer cum management advisor by UNICEF), and to identify potential sources of the $6 million external financing required by Colombia over the next three years (after which the program is reportedly to be self-sufficient) to increase childhood immunization coverage levels from 40% to 90%.

It was felt that action on additional countries requesting support (e.g., Nigeria, Kenya) should be reserved for a later phase to avoid diffusion of Task Force energy in this critical "take-off" period.

Much discussion ensued on the scope of Dr. Foege's responsibilities and to whom he is accountable. Notably, the Bank's and to a lesser degree UNDP's insistence, as presented by Dr. R. Henderson, on a defined terms of reference and rigidly structured position for Dr. Foege, leaving resource mobilization to others "better qualified," contrasted sharply with the "fluid, free spirit, risk-taking, chief executive officer, dual architect and fund-raiser" role the afternoon participants argued was essential to the success of his work. The majority, led by Mr. McNamara, were adamant that program generation and fund-raising responsibilities were integrally and critically linked and must be assigned directly and immediately to just one individual, namely Dr. Foege in his capacity as executive director of the Task Force. The designation of UNICEF as lead agency was viewed as a positive step to provide Dr. Foege a defined locus of administrative accountability and support. However, several meeting participants still obviously view
themselves in a steering role, and while Dr. Salk’s suggestion to create a policy advisory board to formally guide the five agency Task Force (four UN agencies plus Rockefeller) was not endorsed by the group for the present, it is likely to surface again as the initiative gets underway and some of the original "principals" search for a role.

b. Program Design and Financing
Mr. McNamara and Mr. Brady shared the Bank’s position, as you stated in the morning and I reiterated at the afternoon session, that the immunization plans to evolve from this process must be not only technically sound but sensitive to long-term external and domestic resource availability. Contrasting the originally proposed 5-year, $18 million vertical EPI program in Senegal with its annual $20 million public budget for health, I underscored the critical need to ensure any efforts supported by this initiative were sustainable and did not undermine ongoing, already heavily externally financed, primary health care activities. Within this context, I indicated the Bank’s willingness, per my earlier discussion with Dr. M. Jancloes, to explore the possibility of utilizing some of the Senegal rural health project financing for pre-investment studies to evaluate alternative program designs. The participants concluded that much more work was required on the Senegal plan before firm financial commitments could be mobilized.

While it was agreed that the country must assume the primary "brokerage" role, the general feeling was that the relatively small amount of funding required to boost immunization coverage in Colombia and Senegal could and should be easily raised (with Mr. McNamara virtually guaranteeing it). Additionally, WHO and UNICEF requested that the Task Force consider establishing a revolving fund for vaccines purchase in the Africa region to facilitate timely supply flows.

c. Establishment of a Vaccine Research Committee
Establishment of a vaccine research committee, as discussed at Bellagio, was assigned high priority. Dr. Foege urged that at a minimum any additional research efforts be coordinated with work of WHO’s Scientific Advisory Group of Experts (SAGE) and the USAID-supported National Academy of Sciences, Institute of Medicine Advisory Group on Vaccine Research which are currently identifying priorities in the areas of basic and delivery system-oriented vaccine research, respectively. Dr. Joseph cautioned against any formal institutional linkages with the IOM, however, because of possible perceptions of US domination of this effort among potentially important donors. It was concluded that the best approach would be to review the SAGE and IOM recommendations at the September 1984 Calgary meeting which will have broad international representation with a view toward preparing a formal vaccine research agenda and related budget for presentation to donors at Bellagio II.

In this context, Dr. Foege asked that you inform him, as the Senegalese Government allegedly has requested, whether the funds reportedly available in the Bank financed rural health project due to recent devaluations could be earmarked for immunization, once the plan is finalized.
d. Preparations for Bellagio II

Lamenting that none of the sponsoring UN agencies had been willing to "take charge" of the initial Bellagio meeting, resulting in entirely inadequate preparations and relatedly lack of essential donor support for the initiative, Mr. McNamara voiced group consensus that much better groundwork must be laid with the donor community prior to convening Bellagio II. The group enthusiastically endorsed Dr. Foege's suggestion that he prepare a short information bulletin on his post-Bellagio work, including status of the three country immunization plans, for wide dissemination to Bellagio I participants as well as other potential private and public sector donors. Dr. Foege reported that a few philanthropists had already indicated interest in contributing, provided that the money be placed in a separate, non-UN agency fund. WHO and UNICEF asked that all potential contributors be informed of existing mechanisms within their special accounts to earmark funds and retain donor visibility. Nevertheless, all those attending this meeting who had participated in Bellagio in March still supported the idea of a special "child health" fund, although the consensus at Bellagio had been against the creation of new aid channels.

Additionally, Mr. McNamara and Dr. Joseph urged that Dr. Foege commence "diplomatic" visits within the next six months to widen the net of key potential sources of assistance. It was recommended that special efforts be targeted specifically on the "disappointingly diffident" Scandinavian participants at Bellagio I and the Soviet Union. Highlighting the critical role of the Soviets in the eradication of smallpox, numerous participants stated that Soviet cooperation in the immunization effort could reap substantial benefits not only politically (e.g. avoidance of opposition) and technically but also substantively via the potential supply of vaccines to developing countries. To enable the three country immunization programs to report on a full year of hopefully solid progress, viewed as essential to lure donors, it was further recommended that Bellagio II be postponed until the fall of 1985.

3. Overall, Drs. Foege, Joseph and R. Henderson used the afternoon session to castigate the Bank for endangering the promising rapid expansion of immunization programs in the developing world by what they saw as an insistence on tight "bureaucratic" controls over Task Force administration and operations. On several occasions I indicated that we shared their desire to accelerate this child health initiative, but sought to ensure that it was cast within a viable, sustainable, nationally relevant framework. You had, of course, in the morning meeting stressed the importance of having an agreed clear statement of what the four agencies and Rockefeller wanted to achieve and of how they, in association with Dr. Foege, would go about it. Nevertheless, the "principals" at least feigned preparation to unseat the Bank within the Task Force unless we demonstrate willingness to fall in line and participate "with faith," not closely circumscribing Dr. Foege's role. Given the obvious current differences of opinion, if an accurate official summary of the Bellagio proceedings is not produced soon, it may be useful if you circulated to the agencies the Bank's understanding of key agreements reached at Bellagio, e.g. no separate "pot" to finance the initiative, and our suggestions vis-a-vis the technical
design and resource mobilization in preparation for the next inter-agency meeting, now scheduled for July 20th.

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