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Glossary

Abortion rate.—The estimated number of abortions per 1,000 women aged **14 to 44** in a given year.

Age-sex structure.—The composition of a population as determined by the number or proportion of males and females in each age category. The age-sex structure of a population is the cumulative result of past trends in fertility, mortality, and migration. Information on age-sex composition is an essential prerequisite for the description and analysis of many other types of demographic data. (See also *population pyramid*.)

Amenorrhea.—The absence or suppression of menstruation; normal before puberty, after the menopause, during pregnancy and lactation.

Antinatalist policy.—The policy of a government, society, or social group to slow population growth through efforts to limit the number of births.

Artificial insemination.—Introduction of semen into the uterus or oviduct by other than natural means.

Baby boom.—The period following World War II from 1947 to 1961 marked by a dramatic increase in fertility rates and in the absolute number of births in the United States, Canada, Australia, and New Zealand.

Barrier method.—A contraceptive method that establishes a barrier between the joining of sperm and ovum; e.g., condom, diaphragm, cervical cap.

Basal body temperature method.—See *periodic abstinence methods*.

Billings method.—See *periodic abstinence methods*.

Birth interval.—The length of time that has elapsed between one live birth and the next, or between marriage and the first live birth, or between the time of last live birth and the time of inquiry; normally measured in months. In contrast to pregnancy intervals, live birth intervals may include pregnancies that did not end in live births; for example, a live birth interval could be a live birth, followed by a stillbirth, followed by another pregnancy resulting in a live birth. The live birth interval would include the entire period between the two live births. (See *pregnancy interval*.)

Birth rate (or crude birth rate).—The number of births per 1,000 population in a given year. Not to be confused with growth rate.

Census.—A canvass of a given area, resulting in an enumeration of the entire population, and the compilation of demographic, social, and economic information pertaining to that population at a specific time. (See also *survey*.)

Childbearing years.—The reproductive age span of women, assumed for statistical purposes to be 15 to 44 in the United States. In other countries, the range is often set at 15 to 49.

Cohort.—A group of people sharing a common temporal demographic experience who are observed through time. For example, the birth cohort of 1900 would be the people born in that year.

Completed fertility rate.—The number of children born per woman in a cohort of women by the end of their childbearing years.

Conception.—Generally the beginning of pregnancy, but in a theological context sometimes the point at which a new life, in the sense of a new soul, begins. Conception is usually equated with the fertilization of the ovum by the sperm, but is sometimes equated with the implantation of the fertilized ovum in the uterine lining. The exact definition is of some significance when attempts are made to classify fertility planning methods as either contraceptive or abortifacient.

Consensual union.—Cohabitation by an unmarried couple for an extended period of time.

Crude birth rate.—See *birth rate*.

Continuation rate.—The proportion of those adopting a method of contraception who continue with it for a given period.

Contraceptive.—An agent or device used to prevent conception.

Contraceptive failure rate.—The ratio of the number of conceptions occurring during a given period to the number of person months lived by a group of women or couples during which contraception or a particular contraceptive is used.

Contraceptive prevalence rate.—A measure of the extent of contraceptive practice among the population at risk of conception, calculated as the ratio of the number of women known or supposed to be practicing contraception at a

- given time to the total number of eligible women (generally those fecund, nonpregnant, married women) in that population.
- Death rate (or crude death rate).**—The number of deaths per 1,000 population in a given year.
- Demographic transition.**—The historical shift of birth and death rates from high to low levels in a population. The decline of mortality usually precedes the decline in fertility, resulting in rapid population growth during the transition period.
- Demography** (Greek, demos [people] graphic [study]).—The scientific study of human populations, including their size, composition, distribution, density, growth, and other demographic and socioeconomic characteristics, and the causes and consequences of changes in these factors.
- Dependency ratio.**—The ratio of the economically dependent part of the population to the productive part; arbitrarily defined as the ratio of the elderly (those 65 years and over) plus the young (those under 15 years of age) to the population in the “working ages” (those 15 to 64 years of age).
- Depo-Provera.**—See *injectable contraceptives*.
- Doubling time.**—The number of years required for a population of an area to double its present size, given the current rate of population growth.
- Effectiveness.**—Clinical or theoretical effectiveness is measured by the failure rate of contraceptive methods under conditions as close to ideal as possible, usually under skilled supervision, with care taken to see that they are invariably and correctly used. Use effectiveness is measured by the failure rate of contraceptive methods when used by the general population, without careful medical supervision, so that failures may be due to intermittent or incorrect use. Demographic effectiveness is measured by measuring changes in the fertility of a population after a particular fertility planning method or program has been introduced.
- Emigration.**—The process of leaving one country to take up residence in another.
- Emigration rate.**—The number of emigrants departing an area of origin per 1,000 population at that area of origin in a given year.
- Estrogen.**—Any natural or *artificial* substance that induces estrogenic activity; more specifically the estrogenic hormones estradiol and estrone produced by the ovary; the female sex hormones.
- Exponential growth.**—A constant rate of growth applied to a continuously growing base over a period of time; for example, a savings account increasing at compound interest; a snowball gathering mass; a population growing at 3.0 percent annually.
- Failure rate.**—See *contraceptive failure rate*.
- Fallopian tube.**—The tube or duct that extends laterally from the lateral angle of the uterus, terminating near the ovary. It serves to convey the ovum from the ovary to the uterus and spermatozoa from the uterus towards the ovary.
- Family planning.**—The conscious effort of couples to regulate the number and spacing of births. Family planning usually connotes the use of contraception to avoid pregnancy, but also includes efforts of couples to induce pregnancy.
- Fecundity.**—The physiological capacity of a woman, man, or couple to produce a live child.
- Fertility.**—The actual reproductive performance of an individual, a couple, a group, or a population.
- Fertility rate.**—See *general fertility rate*.
- Fertilization.**—Penetration of an ovum by a spermatozoon. Usually occurs in the fallopian tube, following ovulation in the menstrual cycle, and is usually considered to be the moment of conception as it is the time when the two sex cells unite.
- General fertility rate.** (also referred to as fertility rate)---The number of live births per 1,000 women aged 15 to 44 years in a given year. (see also implantation.)
- Gonadotropin.**—A substance having affinity for or a stimulating effect on the gonads. There are three varieties: anterior pituitary, chorionic from human pregnancy urine, and chorionic from the serum of pregnant mares.
- Gossypol.**—A derivative of the cottonseed plant known to induce infertility in males; now being tested as a male contraceptive in China.
- Growth rate.**—The rate at which a population is increasing (or decreasing) in a given year due to natural increase and net migration, expressed as a percentage of the base population.
- Immigration.**—The process of entering one country from another to take up permanent residence.

Implantation.—Process whereby a fertilized ovum burrows into the lining of the uterus on its arrival there, and attaches itself firmly. Successful implantation is essential to the future development of the fetus and is sometimes considered as the true moment of conception.

Infant mortality rate.—The number of deaths to infants under 1 year of age in a given year per 1,000 live births in that year.

Infertility.—Failure, voluntary or involuntary, to produce live born children on the part of an individual, a couple, or a population.

Injectable contraceptives.—The most commonly used injectable progestins, given at 3-month intervals, are Depo-Provera (DMPA) or medroxy-progesterone acetate, and norethindrone enanthate.

integration. —In the family planning context, integration refers to linkage of family planning services delivery with some other program, usually health, MCH, or other rural development activity (electrification, agriculture, nutrition, parasite control). The linkage is at either the administrative or the service end. At the administrative level it is the creation of an umbrella organization with administrative control over a large array of services; at the service level, specialized services are linked at the point of service delivery.

In vitro.—Outside the living organism and in an artificial environment.

Less developed country.—For purposes of this report, all countries, territories, or areas in Latin America and the Caribbean, all in Africa other than the Republic of South Africa, all in Asia other than Japan and the U. S. S. R., and all in Oceania other than Australia and New Zealand. LDCs tend to be characterized by low per capita gross domestic product (GDP), a low share of manufacturing in GDP, low rates of annual increase in total GDP, low proportions of people with basic training or technical skills, and low literacy rates among those 15 or older. (See *more developed country*.)

Life expectancy.—The average number of additional years a person would live if current mortality trends were to continue. Most commonly cited as life expectancy at birth.

LRF analogs.—Numerous analogs (chemically different but reactively similar to the parent sub-

stance) of the luteinizing hormone releasing factor (LRF), a hypothalamus-controlled secretion from the anterior pituitary gland, are under study as contraceptives and agents to treat infertility. Both long-acting agonists (stimulators) and antagonists involve inhibition of ovulation; luteolysis; and inhibition of spermatogenesis and testosterone secretion. Possible routes of administration include subcutaneous, intramuscular, sublingual, rectal, intravaginal, and intranasal.

Marital fertility rate.—Number of legitimate live births per 1,000 married women aged 15 to 44 in a given year.

Maternal mortality rate.—The number of deaths to women due to pregnancy and childbirth complications per 100,000 live births in a given year.

Menarche.—The beginning of menstruation; i.e., the first menstrual period. This occurs during puberty but does not signify the beginning of full adult fecundity as ovulation may be irregular or absent for some time.

Menopause. —Cessation of menstruation; i.e., the last menstrual period or the end of a reasonably regular menstrual pattern. After the menopause is completed a woman is permanently sterile.

Migration.—The movement of people across a specified boundary for the purpose of establishing a new permanent residence. Divided into international migration (migration between countries) and internal migration (migration within a country).

Mini-laparotomy. —Female sterilization procedure in which the fallopian tubes are ligated or cauterized through a small abdominal incision.

Mini-pill.—Oral contraceptive containing no estrogen and generally less than 1 mg of a progestational agent.

Morbidity. —The frequency of disease and illness in a population.

More developed country.—For purposes of this report, all countries of Europe, North America (Bermuda, Canada, Greenland, St. Pierre and Miquelon, and the United States), Australia, New Zealand, Japan, and the U.S.S.R. (See *less developed country*.)

Mortality.—Death as a component of population change.

Natural family planning.—See *periodic abstinence*.

Natural fertility.—The fertility of persons or populations in which deliberate control of childbearing (through use of abstinence, contraception, induced abortion, sterilization, etc.) is not practiced. Sometimes used loosely to signify the maximum fertility biologically possible; i.e., that of a normal healthy person or group of persons engaging regularly in sexual intercourse during the reproductive span with no attempt to restrict childbearing. The fertility of such populations will be determined by such factors as marriage customs, breastfeeding practices, and similar social and economic factors, and will therefore probably fall short of the biological maximum of fertility.

Natural increase.—The surplus (or deficit) of births over deaths in a population in a given time period.

Negative population growth.—A net decrease in the size of a population.

Net migration.—The net effect of immigration and emigration on an area's population in a given time period, expressed as increase or decrease.

Net migration rate.—The net effect of immigration and emigration on an area's population, expressed as increase or decrease per 1,000 population of the area in a given year.

Oral contraceptives.—Various progestinestrogen or progestin compounds in tablet form taken sequentially by mouth; the 'pill.' Estrogenic and progestational agents have contraceptive effects by influencing normal patterns of ovulation, ovum transport, implantation, or placental attachment.

Ovulation.—The release of an ovum from the ovary during the female menstrual cycle.

ovulation method.—See *periodic abstinence methods*.

Parity.—The number of live births a woman has had; a woman of zero parity has had no live births, a woman of parity one has had one live birth, etc.

Periodic abstinence methods.—Contraceptive methods that rely on timing of intercourse to avoid the ovulatory phase of a woman's menstrual cycle; Natural Family Planning. The Basal Body Temperature (BBT) method uses daily tem-

perature readings to identify the time of ovulation; in the ovulation or Billings method, women are taught to identify the relationships of changes in cervical mucus to fertile and infertile days; the Sympto-Thermal method charts both changes in temperature and cervical mucus and teaches recognition of other symptoms of ovulation (i.e., intermenstrual pain).

The "pill."—See *oral contraceptives*.

Population.—A group of objects or organisms of the same kind.

Population density.—population per unit of land area; for example persons per square mile, or persons per square kilometer of arable land.

Population distribution.—The patterns of settlement and dispersal of population.

Population increase.—The total population increase resulting from the interaction of births, deaths, and migration in a population in a given period of time.

Population momentum.—The tendency for population growth to continue beyond the time that replacement level fertility has been achieved because of a relatively high concentration of people in the childbearing years.

Population policy.—Explicit or implicit measures instituted by a government to influence population size, growth, distribution, or composition.

Population projection.—Computation of future changes in population numbers, given certain assumptions about future trends in the rates of fertility, mortality, and migration. Demographers often issue low, medium, and high projections of the same population, based on different assumptions of how these rates will change in the future,

Population pyramid.—A special type of bar chart that shows the distribution of a population by age and sex. Most countries fall into one of three general types of pyramids: 1) Expansive—a broad base, indicating a high proportion of children and a rapid rate of population growth; 2) Constrictive—a base that is narrower than the middle of the pyramid, usually the result of a recent rapid decline in fertility; and 3) Stationary—a narrow base and roughly equal numbers in each age group, tapering off at the older ages, indicating a moderate proportion of children and a slow or zero rate of growth.

Pregnancy interval.—Length of time that has elapsed between the end of one pregnancy and the end of the next, or between marriage and the end of the first pregnancy or between the end of the last pregnancy to occur and the time of inquiry; normally measured in months (See *birth interval*).

Prevalence rate.—See *contraceptive prevalence rate*.

Progesterone.—A steroid hormone obtained from the corpus luteum, adrenals, or placenta. It is responsible for changes in uterine endometrium in the second half of the menstrual cycle preparatory for implantation of the blastocyst, development of maternal placenta after implantation, and development of mammary glands.

Progestin.—A corpus luteum hormone that prepares the endometrium for the fertilized ovum. This word is now used to cover a large group of synthetic drugs that have a progesterone-like effect on the uterus.

Pronatalist policy.—The policy of a government, society, or social group to increase population growth by attempting to raise the number of births.

Prosta#and in .—Refers to a group of naturally occurring, chemically related long-chain fatty acids that have certain physiological effects (stimulate contraction of uterine and other smooth muscles, lower blood pressure, affect action of certain hormones).

Rate of natural increase.—The rate at which a population is increasing (or decreasing) in a given year due to a surplus (or deficit) of births over deaths, expressed as a percentage of the base population.

Replacement level fertility.—The level of fertility at which a cohort of women on the average are having only enough daughters to “replace” themselves in the population. By definition, replacement level is equal to a net reproduction

rate of 1.00. The total fertility rate is also used to indicate replacement level fertility; in the United States today a TFR of 2.12 is considered to be replacement level. (See *zero population growth*).

Reproductive age.—See *childbearing years*.

Sex ratio.—The number of males per 100 females in a population.

spermicide.—An agent that kills spermatozoa.

stable population.—A population with an unchanging rate of growth and an unchanging age composition, because birth and death rates have remained constant over a sufficiently long period of time.

Stationary population.—A stable population with both a zero growth rate (because the birth rate equals the death rate) and an unchanging age composition.

Steroid hormones.—See *estrogen, progesterone*.

Survey.—A canvass of randomly selected persons or households in a population usually used to infer demographic characteristics or trends for a larger segment or all of the population, (See also *census*.)

sympto-thermal method.—See *periodic abstinence methods*.

Total fertility rate (TFR).—The average number of children that would be born alive to a woman (or group of women) during her lifetime if she were to pass through her childbearing years conforming to the age-specific fertility rates of a given year.

Use effectiveness.—See *effectiveness*.

Vasectomy.—Surgical sterilization of a male by occlusion of the vas deferens.

Zero population growth.—A population in equilibrium, with a growth rate of zero, achieved when births plus immigration equal deaths plus emigration.

SOURCES: E. Grebenik and A. Hill, *International Demographic Terminology: Fertility, Family Planning and Nuptiality* (Liege, Belgium: International Union for the Scientific Study of Population, 1974), IUSPP Papers No. 4.

Arther Haupt and Thomas T. Kane, *Population Handbook* (Washington, D. C.: Population Reference Bureau, Inc., 1978).

Acronyms and Abbreviations

AID	— Agency for International Development	IUD	— Intrauterine device
AVS	— Association for Voluntary Sterilization	IUSSP	— International Union for the Scientific Study of Population
BBT	— Basal Body Temperature Method (See Glossary)	JHPIEGO	— Johns Hopkins Program for International Education in Gynecology and Obstetrics
CBD	— Community based distribution (of contraceptives)	KAP	— Knowledge, attitudes, and practice (of contraception)
CDB	— Contraceptive Development Branch, CPR, NICHD	LDC	— Less developed country (See Glossary)
CPR	— Center for Population Research, NICHD	LH	— Luteinizing hormone
CPS	— Contraceptive Prevalence Survey	LRF(LHRH)	— Luteinizing hormone releasing factor (See Glossary)
CRS	— Commercial retail sales (of contraceptives)	MCH	— Maternal and child health
DES	— Diethylstilbestrol	MDC	— More developed country (See Glossary)
DHHS	— Department of Health and Human Services (formerly Health, Education and Welfare)	MWRA	— Married women of reproductive age
DMPA	— Depo-Provera (See Glossary)	NDA	— New Drug Application (FDA)
FAO	— Food and Agriculture Organization	NFP	— Natural family planning (See Glossary)
FDA	— Food and Drug Administration	NGO	— Nongovernmental organization
FPIA	— Family Planning International Assistance	NICHD	— National Institutes of Child Health and Human Development
FSH	— Follicle stimulating hormone	NIH	— National Institutes of Health
GNP	— gross national product	PARFR	— Program for Applied Research on Fertility Regulation
IBRD	— International Bank for Reconstruction and Development	PMA	— Pharmaceutical Manufacturers Association
ICCR	— International Committee for Contraception Research, Population Council	PIACT	— Program for the Introduction and Adaptation of Contraceptive Technology
IDA	— International Development Association	PRC	— People's Republic of China
IEC	— Information, Education, and Communication	R&D	— Research and development
IEM	— Information, Education, and Motivation (See China report, app. A)	TFR	— Total fertility rate (See Glossary)
IDRC	— International Development Research Center	UN	— United Nations
IFRP	— International Fertility Research Program	UNDP	— United Nations Development Programme
ILO	— International Labor Organization	UNFPA	— United Nations Fund for Population Activities
IPPF	— International Planned Parenthood Federation	WFS	— World Fertility Survey
		WHO	— World Health Organization