



**Mr. Vladimir Petrovsky  
Director General , United Nations Office in Geneva**

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## **6 Billion A time for choices**

Ladies and Gentlemen,  
Dear Friends

Today is a historical day for humankind. Let us bear in mind, that it took all of time for the world population to reach 2 billion in 1927, and then less than a lifetime to arrive at 6 billion. World population has doubled since 1960. But let us not forget that reaching 6 billion is not only a quantitative but also a qualitative landmark. People today live longer and healthier lives than any generation before. But six billion is also a great challenge. Today, there are over a billion young people between 15 and 24 years of age. Their decisions will determine how many people will be on the planet by 2050 and beyond. Most importantly, let us not forget that 6 billion is not about numbers, but all about people.

Women are having fewer children than ever before in response to the spread of education, improvements in health conditions and their enhanced status in society. Consequently population growth has slowed to 2.4 to 1.3 per cent in the last 30 years. Large families in the recent past, mean that there are many more women of childbearing age. Global population is still rising by about 78 million people a year, with half the world under 25 years of age - the parents of the next generation.

All of these historic changes affect both women and men, but women clearly have a larger stake in being able to control their childbearing period. In fact, the ability of women to have the number of children they want, when they want is central to the quality of women's lives and has important consequences for the future of the world.

Most population growth is taking place in the world's poorest and least-prepared countries. Whether population growth continues to slow and whether it is accompanied by increasing well-being or increasing hardship will depend on the decisions made and action taken in the next decade - and in particular on action to increase education, promote gender equality and ensure the universal exercise of the right to health - including reproductive health.

It is important to keep in mind that the cumulative effects of continuing poverty, gender discrimination, HIV/AIDS, environmental change and shrinking resources for development have the potential to wipe out the benefits of lower birth rates.

Fortunately, there is a global consensus on what needs to be done. At the 1994 International Conference on Population and Development (ICPD), held in Cairo, 179 countries agreed that population and development are inextricably linked, and that empowering women and meeting their needs for education and health are necessary for balanced development. Advancing gender equality, eliminating violence against women and ensuring women's ability to control their own fertility must be the cornerstones of population and development policies.

A demographic transition from high to low fertility and mortality is under way and has already occurred in much of the world. This is due in part to improvements in preventive health and medical care which have dramatically reduced mortality. Infant mortality, for example, has fallen by two thirds. Global life expectancy has risen from 46 to 66 years in the past half-century, but progress varies widely within regions and countries. Simply raising a woman's age from 18 to 23 through education and empowerment, would in itself reduce population momentum by over 40 percent.

In the early 1950s, couples in developed countries were having an average of 2.8 children; today the average is 1.6. In the less-developed regions, fertility rates have dropped from 6.2 children per woman in 1950 to slightly less than 3 today, and are projected to fall to less than 2.1 by 2045.

Overall, due to improved health care and increased options, global fertility rates have declined more rapidly than expected. The Population Division of the United Nations Department for Economic and Social Affairs now projects that world population will be around 8.9 billion in 2050, rather than the 9.4 billion predicted in 1996. However, the news is not all good: about one third of the reduction in long-range projections is due to increasing mortality rates in sub-Saharan Africa and parts of the Indian subcontinent due to HIV/AIDS, which is spreading faster than previously anticipated.

In 29 African countries, the average life expectancy at birth is currently seven years less than it would have been without AIDS.

How to provide food and water for a growing population remains another vital concern. Global per capita grain output has been stagnant for more than a decade and crop land is shrinking. Access to water will also be critical.

The need for universal access to quality reproductive health care is as pressing as ever. Just as important is the creation of social, cultural and economic conditions in which women and men can make free and informed choices about their lives.

More than 585,000 women in developing countries die each year and at least 7 million women suffer infection or injury as a result of pregnancy; 70,000 women die from unsafe abortions. Up to half of the nearly 175 million pregnancies each year are unwanted or ill-timed. Over 350 million women do not have access to a range of safe and effective contraceptive methods. Nearly half of the 130 million births annually are not assisted by a trained delivery attendant.

Contraceptive use in developing countries increased by 1.2 per cent annually between 1990 and 1995, but the needs of 20-25 per cent of couples are still not being met. Unmet need is highest in sub-Saharan Africa (29 per cent).

NGOs, parliamentarians, religious leaders, the private sector and community groups have key roles to play in carrying out the Cairo agenda. Many governments are working more closely with civil society partners in designing programmes and providing services, especially for hard-to-reach sectors of the population.

The goals of the ICPD are universally accepted as necessary to promote human rights and personal well-being, fight poverty and improve national and global security. Yet funding is falling short and governments now face critical decisions about whether they will commit the resources to realize their vision.

It was estimated in Cairo that \$17 billion would be required annually by the year 2000 for population and reproductive health activities, about two thirds (\$11.3 billion) from within developing countries and one third (\$5.7 billion) from international donors.

As of 1997, developing countries were spending about \$7.7 billion annually, but five large countries (China, India, Indonesia, the Islamic Republic of Iran and Mexico) accounted for a large majority of that total. Most other developing countries, particularly the 51 least developed, had neither the public resources nor private income to meet their domestic needs.

International assistance in 1997 was less than \$2 billion - far short of the goal.

Unless funding increases substantially, the shortfall could spell continued high rates of unwanted pregnancy, abortion, maternal and child deaths, and an even faster spread of HIV/AIDS. The shortage of funding also means that progress towards human rights and equality in health care will be slower than ever.

The decision to allocate the necessary resources to control population growth in the next decade will determine how fast the world adds the next billion people and the billion after that. In the words of the Secretary General, "it calls for a greater effort by all countries to address the shortfall in resources needed to implement the commitments made in Cairo."

I have spoken to you a lot today in statistics, dollar amounts and figures in regards to what is required to curb population growth and make our planet a better home for all of us. I should mention however, that perhaps the most important element of all in achieving our objectives is that each of us truly alter her/his mindset. For as we travel towards the horizon of the new Millennium in our inter-galactic spaceship, it is important to recall that it is not only the pilot but also the passengers who determine the outcome of our great journey. It is therefore up to all the members of our human family to do her/his part.

Thank you for your attention.