

# **Demographic Explosion in Bangladesh: Policy Prescriptions and Future Outlook**

Fakrul Ahsan

Division Chief

General Economics Division (GED)

Bangladesh Planning Commission

# Introduction

- The relationship between population and development depends on three demographic variables: Population size, rates of changes, and age structure
- Any development effort should take into account the parameters of population for the sustained economic growth and welfare of the society.
- Since people in a society are both producers as well as consumers, any development process should consider the demographics of population, i.e., its structure, composition, distribution, behavior pattern, attitude, values, norms, beliefs, practices and the whole life-style pattern.

## Population Size and Its Growth in Bangladesh

<b>Year</b>	<b>Population (in million)</b>	<b>Growth rate</b>	<b>Density per Sq. Km.</b>
<b>1700</b>	<b>17</b>	<b>-</b>	<b>-</b>
<b>1750</b>	<b>19</b>	<b>0.20</b>	<b>-</b>
<b>1800</b>	<b>17</b>	<b>0.40</b>	<b>-</b>
<b>1850</b>	<b>20</b>	<b>0.30</b>	<b>-</b>
<b>1901</b>	<b>29</b>	<b>0.69</b>	<b>214</b>
<b>1911</b>	<b>32</b>	<b>0.94</b>	<b>225</b>
<b>1921</b>	<b>33</b>	<b>0.60</b>	<b>241</b>
<b>1931</b>	<b>36</b>	<b>0.74</b>	<b>285</b>
<b>1941</b>	<b>42</b>	<b>1.70</b>	<b>299</b>
<b>1951</b>	<b>44</b>	<b>0.50</b>	<b>374</b>
<b>1961</b>	<b>55</b>	<b>2.26</b>	<b>518</b>
<b>1974</b>	<b>76</b>	<b>2.48</b>	<b>609</b>
<b>1981</b>	<b>90</b>	<b>2.32</b>	<b>755</b>
<b>1991</b>	<b>111</b>	<b>2.17</b>	<b>876</b>
<b>2001</b>	<b>131</b>	<b>1.54</b>	<b>936</b>
<b>2005</b>	<b>138</b>	<b>1.42</b>	<b>987</b>

Sources: M. Obaidullah, n.d.; Bangladesh Bureau of Statistics, 1994 and 2006.

# Age Composition of Population in Bangladesh

Year	Broad Age Groups			Dependency Ratio
	0-14 Yrs.	15-59 Yrs.	60+ Yrs.	
1911	42.3	53.3	4.4	88
1921	42.3	53.6	4.1	87
1931	41.9	54.9	3.2	82
1941	41.4	55.1	3.5	82
1951	42.2	53.5	4.4	87
1961	46.0	48.8	5.2	105
1974	48.0	46.3	5.7	116
1981	46.7	47.8	5.5	109
1991	45.1	49.5	5.4	102
2001	39.4	54.9	5.7	76
2005	37.9	55.9	6.2	79

Source: BBS, 1994, 1999 & 2006

# Distribution of Population in Bangladesh

Census Year	Urban Population		Average Annual Growth Rate
	In million	Percent	
1901	0.7	2.4	-
1911	0.8	2.5	1.39
1921	0.9	2.6	0.85
1931	1.1	3.0	2.00
1941	1.5	3.7	3.59
1951	1.8	4.3	1.69
1961	2.6	5.2	3.75
1974	6.3	8.8	6.62
1981	13.2	15.2	10.63
1991	22.5	20.1	5.43
2001	28.6	23.1	3.15

# Changes in Demographic Components- Fertility, Mortality and Migration

Year	CBR	CDR	IMR	MMR	Life Expectancy at Birth
1974	48.3	19.4	153	-	46.2
1981	34.6	11.5	112	-	56.0
1991	31.6	11.2	92	4.7	56.1
2001	18.9	4.8	66	3.9	61.0
2005	20.8	5.8	52	3.2	65.1

# Trends in TFR and CPR in Bangladesh

	1975	1989	1991	1994	1997	2000	2004	2007
	BFS	BFS	CPS	BDHS	BDHS	BDHS	BDHS	BDHS
TFR	6.3	5.1	4.3	3.4	3.3	3.3	3.0	2.7
CPR	7.7	30.8	39.9	44.6	49.2	53.8	58.1	55.8

TFR: Total Fertility Rate

CPR: Contraceptive Prevalence Rate

BFS: Bangladesh Fertility Survey

CPS: Contraceptive Prevalence Survey

BDHS: Bangladesh Demographic and Health Survey

# Future Implications of the population characteristics in Bangladesh

- Bright sides: reduction in growth rate, fertility levels, mortality levels, proportion of young population, rise in expectation of life at birth, literacy rate, contraception prevalence rate, age at marriage and level of urbanization.
- Dark sides: a large population of about 150 million, a huge built-in momentum in the population, a growing old age population, and very low man - land ratio, high proportion of rural exodus and relatively higher rates of infant and maternal mortality.

# Future Implication cont:

- The projected population size will be about 170 million by 2020.
- More elderly population and higher dependency ratio.
- Urban population is expected to be about 40% of the total population by 2020.
- Poverty situation of the country will probably worsen, especially in the rural areas.
- Water and sanitation problems, soil erosion, air pollution, deforestation, wetland loss, and degradation of the coastal environment could worsen further.
- High impact of population momentum, i.e., more child births.
- According to FAO's estimate, only with high input of all kinds Bangladesh will not be able to support about 178M people. This figure will be attained around 2020, which implies the exhaustion of the carrying capacity of Bangladesh, if the population of Bangladesh is not planned and managed properly.
- HIV/AIDS and STDs/STIs would be looming at 2020 in the thick of the world's most densely populated area called Bangladesh.

# Demographic Challenges and Policy Prescription

- Although Bangladesh is the seventh most populous country in the world, with the highest population density and a relatively low per capita income, the country's demographic and economic indicators have recorded considerable improvements. These changes are a result of some promising policies, strategies and interventions taken by the governments, either independently or in collaboration with international agencies. Nevertheless, we many have challenges going forward

# Demographic challenge cont:

- Fertility is still playing major role in population growth. With the current rates of fertility and mortality, the population size is expected to be about 280 million before it stabilizes.
- The dropout rate in contraceptive use is more than 50 per cent.
- The unmet need is 18 per cent.
- There is a high regional disparity in the TFR and CPR.
- Male participation is very low.
- Maternal mortality and infant mortality rates are high.
- Only 15 per cent of child births take place at health facilities, and just 18 per cent of births are delivered by the trained personnel.
- The average female age at marriage is very low, despite the legal age of 18 for a woman to get married.
- The adolescent fertility rate is one of the highest in the world; 60% of adolescent girls becoming mothers before they reach 19.
- The population aged over 60 years will reach staggering proportions by 2051.
- Numbers of elderly people will increase six-fold by mid-century, while numbers in the working ages will less than double.

# Demographic Challenges cont

- An unbridled influx of people from rural areas and the resultant unplanned urbanization poses a double challenge: reducing the sustainable economic growth potential for rural areas on the one hand, and creating hazards in urban areas and making cities more difficult to live in on the other. Slums account for more than 35 per cent of the population in all major Bangladeshi cities. A recent study and mapping of slums indicates that they are growing at over 7% per annum, implying a doubling time of less than a decade. This frightening scenario requires an immediate strengthening of urban planning and economic actions to slow the pace of movement away from rural areas.

# Government's Policy targeter

- The government's current major policy targets are to:
  - Reduce TFR from 2.7 to 2.2.
  - Increase CPR from 56% to 80%.
  - Reduce unmet demand of eligible couples for FP supplies from 17.6% to 10%.
  - Reduce discontinuation rate of contraceptive rate from 56.5% to 20%.
  - Strengthen programme planning, monitoring, and co-ordination among government agencies on population policy.

# Policy target cont:

- However, the goal of achieving a TFR of 2.2 could be revised. With the current TFR of 2.7, the TFR for wanted fertility is 1.9. This suggests that if all the unmet need is met, the country already has a much lower TFR than the TFR (2.2) to be achieved by 2015. The TFR target should be no higher than 1.7 if a rapid arrest of population growth is to be achieved.
- Achieving replacement level fertility by 2015 will add 2 million people. To raise the CPR to 80 per cent, the nation does not have to wait until 2021. What is needed is a reduction in the drop-out rate. It is estimated that if all unmet need (18 per cent) is met, the CPR will rise to 74 per cent even in 2010-11. So targets of achieving replacement fertility could be set for 2013, rather than 2015, and for the TFR to reach 1.7 by 2021.

# Strategies to implement the policy

- Government may take responsibility for all educational expenses of the child from the couple having one child.
- Ensuring employment to the single child according to his/her qualifications in government/NGO/private organizations.
- Ensuring free government medical treatment to the single child until he/she reaches maturity.
- Introduction of social pension for the parents of a single child in case of need.
- Discriminate against parents of more than two children in terms of VGD/VGF or other safety net programmes.

# Strategies cont:

- A one child per couple policy has to be adopted as soon as possible.
- Incentives for voluntary permanent methods of birth control may be further strengthened.
- An increase in the contraceptive prevalence rate has to be determinedly conducted through door-to-door service providers.
- Advocacy should be strengthened for male participation in permanent and other methods.
- The social safety net for the elderly should be strengthened.

# Future Outlook for Population Planning

## **Population and Sustainable Development**

- Poverty alleviation
- Human resource development
- Generation of productive employment opportunity
- Sustainable environmental protection
- Health and Family welfare
- Safe motherhood and family planning
- Empowerment of Women
- **Elimination of Gender Discrimination**
  - Reproductive rights and adolescent reproductivity
  - Education and employment of women
  - Legal and institutional development
  - Men's involvement in the broader social perspective
  - Gender equality and equity
  - Gender policy and mainstreaming
  - Socio-cultural context of gender and gender-based violence

# Future Outlook of PP cont:

## **Migration and Urbanization**

- Internal migration and urbanization
- Refugees and displaced person
- Climate change and disaster management
- Urban poverty and health
- Training and development of urban youth
- Urban planning and management
- RTIs, STDs and HIV/AIDS

## **Good Governance and Civil Society**

- Planning, management and reforms
- Coordination between GO and NGOs intensified
- Transparency and accountability
- Community planning and management
- Legal and institution protection for children and women
- Advocacy and communication
- Family formation and life cycle

# Conclusion

- Since people are the centre place of development, planning should be conceived at the local level, for and by the people. Specific emphasis should be placed on growth and investment by both private and public sector as a vehicle for economic growth and alleviation of poverty.
- There appears to exist a relative lack of commitment to population management through converting the raw population into human capital.
- Coordination between two wings of the Ministry of Health and Family Welfare-Health and FP, must be improved, particularly at the field level
- A strong coordination and monitoring body should be created and given greater authority and autonomy. The National Population Council, chaired by the Prime Minister, can be extended to the grassroots level, and include representatives from elected bodies, the local administration, social and political leadership, civil society and other stakeholders.

*Thank You*