Written submission by Population Matters in response to International Development Committee Inquiry on SDGs

About Population Matters
1. Population Matters is a charity that addresses population numbers and their effects on environmental sustainability. We see population growth as a major contributor to pollution, climate change, dwindling natural resources and many other problems. To address these problems, we promote improved family planning and better sex education, both of which lead to smaller and thus more sustainable families.

Executive Summary
- DFID should prioritise SDG 3 (ensure health and wellbeing) and SDG 5 (achieve gender equality and women’s empowerment).
- DFID should specifically prioritise targets 3.7 and 5.6 (ensure universal access to family planning and sexual and reproductive health services and rights).
- These goals and targets should be prioritized because they can help lower fertility rates and limit unsustainable population growth, which has negative consequences for almost every SDG.
- Through prioritising goals 3 and 5, DFID and the UK government could target the entire SDG framework.
- Limiting population growth is also a cost-effective means of targeting the SDGs.
- These priorities should not be country specific because all countries benefit from sustainable population levels and because ensuring environmental sustainability requires a global approach to reducing population growth.
- DFID and the UK government should consider population issues in all aspects of development and increase funding for family planning and sexual and reproductive health and rights to 10 per cent of development assistance.
- The SDGs, like the MDGs, will be unachievable at current rates of population growth.

Which SDGs should DFID prioritise?
2. DFID should prioritize:
- Goal 3: Ensure healthy lives and promote wellbeing for all at all ages
- Goal 5: Achieve gender equality and empower all women and girls

3. DFID should specifically prioritise the following targets:
- Goal 3, Target 7: By 2030 ensure universal access to sexual and reproductive health care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes
- Goal 5, Target 6: Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the ICPD and the Beijing Platform for Action and the outcome documents of their review conferences

4. These goals and targets should be prioritized because:
- They can help lower fertility rates and thus reduce the rapid population growth that limited the success of the MDGs and is expected to continue. This growth will negatively impact almost every SDG. By focusing on goals 3 and 5, DFID could
effectively target the entire SDG framework and ensure that the mistakes of the MDGs are not repeated.

- Goals 3 and 5 are also cost-effective. The Copenhagen Consensus Centre, a think-tank that conducts research on which SDGs should be targeted, have shown that these goals and targets represent some of the best value for money of all the SDGs – they estimate that for every $1 spent on sexual and reproductive health services and family planning, governments can expect an estimated $120 in economic benefits.\(^1\)

**How the UK government can prioritize these goals:**
5. The International Planned Parenthood Federation and the UK All-Party Parliamentary Group on Development, Population and Reproductive Health recommend that Donor governments:
   - Dedicate at least 0.1 per cent of their GNI to global health financing
   - Increase funding for family planning and SRHR to 10 per cent of official development assistance and 10 per cent of national development budgets
   - Devote at least five per cent of their GDP to national health financing
   - Consider the impact of population dynamics on all aspects of development
   - Adopt time-bound implementation schedules and binding targets with clear deadlines and UN monitoring for all the above commitments\(^2,3\)

**Should the priorities be country specific or an overarching strategy of SDG priorities applied to all partner countries?**
6. These priorities should not be country specific:
   - All countries benefit from prioritizing these goals and all have a responsibility to provide family planning services and to promote women’s empowerment and sexual and reproductive health and rights. Unsustainable population levels also contribute to climate change, environmental degradation and resource depletion, so a global approach to reducing population growth is required to ensure environmental sustainability.

**How there could be a more coherent approach with other donors towards the SDGs with donors specialising on specific areas for example Education or WASH to reduce duplication etc.**
7. No response

**How DFID could have a more strategic approach on how it uses contractors, multilaterals, NGOs and its own bilateral country offices to deliver on the SDGs.**
8. No response

**Which SDGs should other UK Government departments focus on?**
9. The Department of Health should prioritise goal 3 in other countries and the Foreign Office should prioritize goals 3 and 5 and support other governments to do the same.
Population Growth
10. Total world population has increased by approximately two billion since 1990 and, according to UN projections, is expected to increase by one billion by 2030. The majority of this increase has been, and will continue to be, in developing countries. This rapid growth will have serious implications for the SDGs.

11. This submission will outline how rapid population growth affects the SDGs and thus demonstrate that by lowering fertility rates through prioritizing SDGs 3 and 5 DFID could cheaply and effectively target the entire SDG framework.

SDG 1. End poverty in all its forms everywhere
12. In Sub-Saharan Africa, the absolute numbers of people in poverty are increasing. A recent study by Population Matters found that poverty reduction strategies are failing in many countries due to high fertility rates and rapid population growth, while DFID has found that these factors pose obstacles to poverty reduction as serious as that from HIV/AIDS. This submission will outline later how rapid population growth can impact poverty reduction through limiting available job opportunities, exacerbating conflict and straining limited resources.

13. While the UN claims that the percentage of the world population living in extreme poverty has halved since the introduction of the MDGs in 2000, this is mainly due to the incredible economic successes of China and India. In most developing countries, population levels have substantially increased but income levels have not. This problem will be worsened by current population growth trajectories because the greater the population size, the greater the increase in income required to improve individual standards of living.

SDG 2. End hunger, achieve food security and improved nutrition and promote sustainable agriculture
13. There are currently 795 million people in the world (one in nine) suffering from hunger and malnutrition. Countries that are failing to adequately feed their populations now will face a much greater challenge when there are one billion more people on the planet. Even if the world can meet this increased demand for food, the intensity of food production may put excessive strain on the environment and already dwindling natural resources.

SDG 3. Ensure healthy lives and promote wellbeing for all at all ages
14. Under this goal there are several targets that are affected by high fertility rates:

14.1. Reduce the global maternal mortality ratio to less than 70 per 100,000 live births:
   - Lowering fertility rates and population growth reduces the number of children being born and therefore the numbers of women dying from pregnancy and childbirth. This approach is cheaper than current UN approaches to reducing maternal mortality, which emphasise increasing the amount of skilled medical professionals available to assist in childbirth. This is a costly and difficult approach, as it requires continuous spending on medical training and even wealthy nations can have trouble ensuring enough doctors and nurses. On the other hand, providing family planning services is much cheaper and also eliminates the future costs associated with caring for and educating foregone children.
14.2. End preventable deaths of newborns and children under-5 years of age:

- Low fertility rates can affect infant and child mortality, as children in smaller families are more likely to both receive better nutrition\textsuperscript{xiv} and to be immunized.\textsuperscript{xv} Women with smaller families are more likely to be educated and this is also associated with lower infant and child mortality.\textsuperscript{xvi}

14.3. End the epidemics of AIDS and other communicable diseases:

- HIV/AIDS is often spread from mother to child during pregnancy. DFID claim that family planning thus offers an effective way of reducing the number of cases of disease transmission.\textsuperscript{xvii} It is also a cheaper approach than providing anti-retroviral treatment for a lifetime, or several lifetimes in cases of intergenerational disease transmission.\textsuperscript{xviii}

- The spread of communicable diseases is also affected by population dynamics. One of the key factors in the unprecedented scale of the 2014 Ebola outbreak was the fact that disease made it to urban areas with high population densities.\textsuperscript{xix} The numbers living in urban areas have increased from 2.3 billion in 1990 to 2.9 billion in 2014 and this trend is expected to continue\textsuperscript{xx} and will impact future disease prevention.

14.4 Achieve universal health coverage:

- Providing health care to every person would be a difficult task even at current population levels. It will therefore be much more difficult, and require significantly more resources, when global population levels have increased by one billion.

SDG 4. Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

15. The UN has identified the rapid growth of the global school age population as a major threat to achieving SDG 4, as many States will struggle to provide enough schools, a problem that is currently being experienced even in wealthy nations.\textsuperscript{xxi}

16. The UN has also identified household resources as a key determinant in school attendance in poor countries. Thus low fertility rates and smaller families make it more likely that parents will be able to send children to school. Studies have also shown that, when parents are forced to decide which children go to school, it is often daughters that are kept at home.\textsuperscript{xxii} This negatively affects SDG target 4.4 on eliminating gender disparities in education and SDG 5.

SDG 5. Achieve gender equality and empower all women and girls

17. High fertility rates and insufficient access to family planning services have a huge impact on gender equality and women’s empowerment. Hundreds of millions of women worldwide lack the means to choose when they have children and how many they will have.\textsuperscript{xxiii} This means that much more of their lives will be spent rearing unintended children and risking death or disability through pregnancy or childbirth related complications. This limits their ability to work outside of the home, to pursue education and to participate in public life.\textsuperscript{xxiv} The UN has found that women’s empowerment rises as fertility rates fall.\textsuperscript{xv}
SDG 6. Ensure availability and sustainable management of water and sanitation for all

SDG 7. Ensure access to affordable, reliable, sustainable and modern energy for all

18. In order to achieve these SDGs under conditions of high population growth, countries can either somehow continuously increase spending to augment the supply of these services or invest in family planning to reduce demand. Considering that many countries currently lack the resources to provide their populations with clean energy, water and sanitation services, reducing demand may be the only feasible approach.

SDG 8. Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

19. Targets 8.5 and 8.6 under this goal aim to provide full and productive employment for everyone, including young people. There were similar targets under the MDGs but unemployment has increased by 54 million since 1990 and only 4 in 10 young men and women worldwide have jobs. Population growth has dramatically outpaced job creation and, at current population projections, this problem will worsen unless there is unprecedented job creation across the world’s poorest economies. Limited job opportunities can increase the prevalence of poverty and conflict.

SDG 11. Make cities and human settlements inclusive, safe, resilient and sustainable

20. The first two targets under this goal are concerned with providing safe and affordable housing and transport and tackling the problem of slums. This goal is increasingly important, as more and more people are living in urban areas and the absolute numbers of people living in slums are increasing. Rapid population growth plays an important role in both these trends so this goal will be much more difficult to achieve at current population projections.

SDG 13. Take urgent action to combat climate change and its impacts

21. Every person contributes to our collective carbon footprint. Therefore SDG 13 will be much more difficult to achieve if populations continue to increase by 80 million people annually.

22. Lowering fertility rates through family planning services and SRHR is also a cost effective method of reducing carbon emissions. A 2009 report by Population Matters entitled "Fewer Emitters, Lower Emissions, Less Cost", found that the cost per tonne of carbon abated through family planning is £4 whereas low-carbon technologies average £19. These figures do not include the additional benefit that family planning abates the carbon that would have been emitted by a non-existent person’s non-existent descendants in perpetuity.
SDG 12. Ensure sustainable consumption and production patterns
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SDG 14. Conserve and sustainably use the oceans, seas and marine resources for sustainable development
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SDG 15. Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss

23. As population has increased since 1990, global carbon emissions have increased by 50%, marine fish stocks have fallen by 20%, 5.2 million hectares of forest have been lost every year since 2000 and a substantial proportion of animal and plant species have declined in both population numbers and distribution.*** Changing these patterns of consumption, production and waste and protecting the natural environment will be made much more difficult with one billion more people demanding food, fuel and other natural resources.

SDG 16. Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

24. Targets 16.1 and 16.3 under SDG 16 are concerned with reducing conflict and violence and promoting stability and the rule of law. Studies have found that the risk of conflict is proportional to a country’s population*** and evidence from government reports in the UK and the US have identified population as a key factor in extremism and political instability.***,*** Thus current population projections make these targets unrealistic. Sub Saharan Africa, for example, is already ravaged by conflict and its population is expected to almost double by 2050. This will have devastating economic as well as human costs for the continent.

Conclusion

25. In 2007, the UK All-Party Parliamentary Group (APPG) on Population, Development and Reproductive Health reviewed extensive evidence submitted by development academics, professionals and organizations on the impact of population growth on development. They concluded that, ‘the evidence is overwhelming: the MDGs are difficult or impossible to achieve with the current levels of population growth in the least developed countries and regions.’

26. This submission has demonstrated that the APPG’s conclusion is as true for the SDGs as it was for the MDGs. DFID and other policymakers must learn from the past. They must recognise the impact of population dynamics on development and prioritise SDGs three and five and targets 3.7 and 5.6 in order to lower fertility rates and limit rapid population growth. This way, the entire SDG framework can be targeted and made achievable.

27. This approach is essential to achieving the SDGs and will also make it much cheaper to do so. The cost of meeting the global unmet need for family planning will be less than perpetually increasing spending to provide food, energy, health, water, housing, education and basic services to an ever expanding population.
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5 Ibid
6 World Bank Poverty Data http://povertydata.worldbank.org/poverty/region/SSA
10 Ibid
11 Marie Stopes International Data http://mariestopes.org/data-research/infographics/family-planning-helps-reduce-maternal-deaths
15 FAO Report http://www.fao.org/docrep/w0073e/w0073e03.htm
20 Ibid
xxii Plan Canada Report
xxv Ibid
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