

Studies in Family Planning

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Declaration of Population

On Human Rights Day, December 10, 1966, Secretary General U Thant of the United Nations issued a Declaration on Population developed on the initiative of Mr. John D. Rockefeller 3rd, Chairman of the Board, Population Council, and signed by the heads of state of twelve countries.

STATEMENT OF THE SECRETARY-GENERAL

Today I have received a declaration on population growth and human dignity and welfare signed by the Heads of State of Colombia, Finland, India, Malaysia, the Republic of Korea, Morocco, Nepal, Singapore, Sweden, Tunisia, the United Arab Republic and Yugoslavia. I have been requested to circulate this statement in connexion with Human Rights Day, the celebration of the Anniversary of the United Nations Declaration of Human Rights, and it seems to me appropriate to do so inasmuch as freedom from hunger, the right to medical services and the right to education are already considered to be basic human rights. Accordingly I take this occasion to emphasize that population growth is not only an important factor in the rate at which nations can attain their economic goals, but that the size of the family is a fundamental human problem which must be based on the decisions of responsible parents concerned with the dignity and well-being of their children.

In my view, we must accord parents the right to determine the numbers of their children a place of importance at this moment in man's history. For, as one of the consequences of backwardness, rates of population growth are very much higher in the poor two-thirds of the world than they are among the more privileged countries and it is being increasingly realized that, over the two or three decades immediately ahead, when present world-wide efforts to raise food production will not have yielded the fullest results, the problem of growing food shortage cannot be solved without in many cases a simultaneous effort to moderate population growth.

We recognize and fully respect the problems of faith and conscience which many still face in relation to the means designed to achieve this objective. But on this Human Rights Day, I feel bound to call attention to a declaration expressing con-

cern with the quality of human life as well as with the number of human beings on earth.

STATEMENT BY HEADS OF STATE

The peace of the world is of paramount importance to the community of nations, and our governments are devoting their best efforts to improving the prospects for peace in this and succeeding generations. But another great problem threatens the world—a problem less visible but no less immediate. That is the problem of unplanned population growth.

It took mankind all of recorded time until the middle of the last century to achieve a population of one billion. Yet it took less than a hundred years to add the second billion, and only thirty years to add the third. At today's rate of increase, there will be four billion people by 1975 and nearly seven billion by the year 2000. This unprecedented increase presents us with a situation unique in human affairs and a problem that grows more urgent with each passing day.

The numbers themselves are striking, but their implications are of far greater significance. Too rapid population growth seriously hampers efforts to raise living standards, to further education, to improve health and sanitation, to provide better housing and transportation, to forward cultural and recreational opportunities—and even in some countries to assure sufficient food. In short, the human aspiration, common to men everywhere, to live a better life is being frustrated and jeopardized.

As heads of governments actively concerned with the population problem, we share these convictions:

We believe that the population problem must be recognized as a principal element in long-range national planning if governments are to achieve their economic goals and fulfill the aspirations of their people.

We believe that the great majority of parents desire to have the knowledge and the means to plan their families; that the opportunity to decide the number and spacing of children is a basic human right.

We believe that lasting and meaningful peace will depend to a considerable measure upon how the challenge of population growth is met.

We believe the objective of family planning is the enrichment of human life, not its restriction; that family planning, by assuring greater opportunity to each person, frees man to attain his individual dignity and reach his full potential.

Recognizing that family planning is in the vital interest of both the nation and the family, we, the undersigned, earnestly hope that leaders around the world will share our views and join with us in this great challenge for the well being and happiness of people everywhere.

Dr. Carlos Lleras Restrepo, President of Colombia

Dr. D. Urho Kekkonen, President of Finland

Mrs. Indira Gandhi, Prime Minister of India

General Chung Hee Park, President of the Republic of Korea

Tunku Abdul Rahman, Prime Minister of Malaysia

His Majesty King Hassan II of Morocco

His Majesty King Mahendra of Nepal

Lee Kwan Yew, Prime Minister of Singapore

Tage Erlander, Prime Minister of Sweden

Habib Bourguiba, President of Tunisia

Gamal Abdel Nasser, President of the United Arab Republic

Marshal Josip Broz-Tito, President of Yugoslavia

STATEMENT BY JOHN D. ROCKEFELLER 3RD

The announcement by Secretary General U Thant that the Heads of State of twelve countries have signed a declaration of concern and conviction about the population problem is historic in man's struggle to create for himself a life of quality. My sincere hope is that other national leaders will respond positively to this declaration and endorse the principles it contains.

As the Secretary General points out, it is particularly appropriate that this declaration is issued on Human Rights Day, for the effective opportunity to decide the number and spacing of one's children is a fundamental right of man that has not been adequately recognized.

These twelve national leaders, who have recognized the seriousness of this sensitive problem and are actively facing up to it, deserve our admiration and respect. I am convinced that the commitment of these leaders will give heart and encouragement to the many who are uncertain as to their course.

Statements on Population Policy

IN RECENT YEARS a number of countries have initiated steps to deal with the problem of undue population growth. In most cases this development has been based upon official population policies, embodied in laws or pronouncements of various kinds. We devote this issue of the Bulletin to such policy statements.

The readers of this Bulletin will appreciate that no direct inferences about programmatic success can be drawn from such policy statements, which are by nature only statements of intent. But in most instances such statements have led to some organized plan of implementation. In any case, they are the official statements of positions currently expressed by the indicated countries. We also include some statements from the United Nations and related organizations.

Barbados

Report of the Joint Committee Appointed by the Two Houses of the Legislature to Examine the Question of Over-population in Barbados and to Make Recommendations for Dealing with This Problem, *Supplement to Official Gazette*, August 26, 1954.

"After most careful and exhaustive consideration the Committee is satisfied that a system of Family Planning under the aegis of the Government is a solution that offers some hope. . . .

"It is recommended that Family Planning Clinics be set up and be operated directly by the Department of Medical Services and with the assistance of other Departments, particularly those of Social Welfare and Education. At these clinics the relevant information should be given to any enquirers. . . .

"The advent of Health Centres provides a perfect opportunity for starting family planning. The ultimate purpose of these Centres is not merely preventative treatment and the saving of lives but to contribute to the long range well being of the entire population. This cannot be achieved in any better way than by bringing about a drop in the birth rate, thus assuring the Island of fewer but healthier citizens living in greater economic security. . . . It may even be that the first objective of the health programme should be the development of means whereby the birth rate is reduced as rapidly as modern science and services have reduced the death rate. . . .

"It is recommended that the Government be asked to supply the necessary funds to set up family planning clinics at

the appropriate centres and to pay the expenses for a short period of an Adviser who should be obtained through the good offices of the International Planned Parenthood Federation.

"The Committee is completely convinced that this problem can no longer be left to the sporadic and unorganized efforts of a few individuals and that the Government must take action. The issue is clear cut. It is manifestly impossible for the Island to feed, house, clothe, educate and provide work for eleven additional people every day, year after year."

Ceylon

Provisional Scheme for a Nationwide Family Planning Programme in Ceylon, 1966-1976.

"The population of Ceylon is fast increasing. . . .

"These figures reveal that a serious situation will be created within a few years. In order to cope with it a Family Planning programme on a nationwide scale should be launched by the Government. The TARGET of that programme should be to reduce the Crude Birth Rate by at least one-third during a 10-year period."

V. T. Herat Gunaratna, (Director of Health Services, Ministry of Health), 1966. *Ceylon: Administrative Aspects of Family Planning Programme.*

"It is generally accepted that 14% of the population of developing countries are women in the productive age group. It is the target therefore to educate these women to plan their families so that every child is a wanted child. . . .

We do not claim that these are all the national policy statements that now exist throughout the world. To the contrary, we assume that there are others of this character and we shall be grateful if they are brought to our attention for subsequent use. As such statements are forthcoming, we shall be glad to include them in subsequent issues of this Bulletin.

We are indebted to Professor Ronald Freedman, Director of the Population Studies Center at the University of Michigan, who first suggested that such an issue be put together; to Mrs. Dorothy Nortman, Research Associate, and Miss Olivia Schieffelin, Research Assistant, of The Population Council, who collected and checked these statements; and to the several people who provided or cleared the country statements.

"The Cabinet decided in July, 1965 that the Preventive Health Service of the Department of Health Services should include Family Planning in its programme of work."

Chile

Natality Regulation in the National Health Service. Official Circular #988 (issued by Dr. Francisco Mardones Restat, Director General de Salud), January 14, 1966.

Recommendations of Special Commission of the Chilean National Health Service to advise the Service on Birth Control Policy.

"It is recommended that:

1. natality regulation activities be developed in the country and that they be incorporated into the regular maternal and child health programs of the National Health Service.
2. pertinent measures be adopted, both technical and administrative, that will permit the programs to operate under the responsibility of the National Health Service, in accordance with its structure and its by-laws, in cooperation with the community and in applying a methodology that is technically effective, acceptable to the majority of couples, and that guarantees individual choice according to the conscience and dignity of the family.
3. coordinate by means of agreements and to request and accept collaboration of organizations, teaching or philanthropic, national or foreign which might be indispensable to the conduct of the programs, but with the knowledge that the

Service would have control of the execution of actions.

4. maintain the highest grade of coordination at the ministerial and intersectoral level, that could permit adequate plans for natality regulation in accordance with the general policy of the Government, and related to family, population, and global development of the country."

Mainland China

Premier Chou En-lai: Statement in interview with Edgar Snow, in Conakry, Guinea, in 1964. (*New York Times*, February 3, 1964).

"... We do believe in planned parenthood, but it is not easy to introduce all at once in China and it is more difficult to achieve in rural areas, where most of our people live, than in the cities.

"The first thing is to encourage late marriages. . . .

"Since the Second World War Japan has achieved a remarkable decline to [a population growth rate of] about 1 per cent. We have sent people to Japan to study means and results there. Our present target is to reduce population growth to below 2 per cent; for the future we aim at an even lower rate.

"However, I do not believe it will be possible to equal the Japanese rate as early as 1970—for some of the reasons mentioned. For example, with improved living conditions over the past two years, our rate of increase again rose to 2.5 per cent! Therefore our emphasis on planned parenthood is entirely positive; planned parenthood, where there is increased production of goods and services, is conducive to raising the people's standard of living. That is why we have been very carefully studying it during the past few years."

Colombia

Carlos Lleras Restrepo: Acceptance speech on his nomination as candidate for Presidency, November 27, 1965. He took office in August 1966.

"There is at present a general awareness of the fact that economic development and social change will be defeated, or at best will be too slow, if population continues to increase at the present rates. The problem is becoming more acute every day and therefore we must set forth a population policy without delay."

On his establishing the Advisory Committee on Population, January 4, 1966.

"The undertaking of population studies, specially in relation to Family Planning, is a recent occurrence in Colombia. Nevertheless they are being conducted in a rigorously scientific fashion under the guidance of the Division on Population Studies of the Colombian Association of Schools of Medicine. Already there is an awareness of what has been called very appropriately 'the problem of population overgrowth.' This problem, clearly demonstrated by increasing population rates, becomes more acute with the spreading of preventive medicine and Public Health measures. The word 'overgrowth' is most fitting when compared with the increase in gross product, investments and job opportunities, or in relation to the appalling existing conditions in education, housing and public transportation, as well as social problems arising as a consequence of internal migration.

"Population growth influences every branch of Government activity; consequently, a policy must be established in order to modify its trend through the appropriate means. . . .

"I urge you to suggest concrete recommendations on a national population program and on the role of Government Agencies, consonant with present scientific knowledge on Family Planning; also on communication of and motivation for the program and the technique of population research."

El Salvador

Statutes of the Demographic Society of El Salvador, Ministry of the Interior, *Official Gazette*, v. 199, No. 102, June 4, 1963.

"Article 3—In order to fulfill its purposes, the Society will:

a) Conciliate all types of demographic and social studies that should affect the national and individual economy and its implications on the social and political stability of the country.

b) Promote marriage as the basis of family unity and protection.

c) Extend sex education so that it should be accessible to the greatest number of people.

d) Establish educational campaigns for the prevention of abortion.

e) Promote or establish special clinics to lend medical assistance in problems of sterility, fertility, pre-nuptial and marriage

orientation, and to give aid and counsel to those who solicit them.' "

Honduras

Dr. José Antonio Peraza, Minister of Public Health and Social Welfare: *Speech at the Opening of the First Seminar on "Population, Economic Development and Family Planning," Tegucigalpa, 12 to 18 June, 1966.*

"The Ministry of Public Health and Social Assistance of Honduras desires to take advantage of the valuable information and important conclusions of the Seminar in order to put into effect its project to establish an extensive maternal and child health service throughout the country in which family planning will form an integral part of the preventive medical services."

India

Prime Minister Indira Gandhi, *policy address to the nation, June 1966.*

"We must move ahead purposefully with the Fourth Plan. Planning has to be meticulous, implementation quicker and more efficient. . . . We must press forward with family planning. This is a programme of the highest importance."

Government of India, Planning Commission: *Memorandum on the Fourth Five Year Plan, October 1964.*

"One of the most important tasks of the Fourth Plan will be to organise a concerted drive to control the growth of population through family planning. In the Fourth Plan provision has been raised to Rs. 95 crores from Rs. 27 crores in the Third Plan. It is to be clearly understood that as the movement gathers momentum and the techniques of family planning find wider acceptance, more funds may be needed and should be provided. Special stress may be given to the sterilization programme in order to achieve quick results. Steps are being taken to increase indigenous production in order to meet the increasing demand for contraceptives. Large organizations, such as industrial undertakings, government offices, etc. should be utilised as media for intensive work on family planning. It is obvious that success in this campaign will bring rich dividends by way of improvement of both health and living standards."

(NOTE: 1 crore = 10 million rupees. In

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(NOTE: 1 crore = 10 million rupees. In

June 1966 the rupee was devalued from \$21 to \$1335.)

Government of India, Planning Commission: "Family Planning," *Annual Plan 1966-67*, March 1966.

"The family planning programme is one of the high priority programmes in 1966-67. The allocation for the programme has been raised from about Rs. 8 crores in 1965-66 to over Rs. 15 crores in 1966-67. . . . The importance of family planning in the context of economic development of the country has been recognised. The programme, which originated during the First Plan period, has been reorganised in the Third Plan. In order to achieve our goal of reducing the birth rate to 25 per 1,000 as expeditiously as possible, it is necessary to introduce greater speed and efficiency in the implementation of Family Planning Programme. . . . The three main objectives of the programme have now been identified as adoption of small family size norm by the general population, wide-scale knowledge about contraceptive methods and widespread availability of contraceptive supplies and services."

Government of India, Planning Commission: *Letter to State Planning Secretaries*, May 21, 1966.

"Assistance of recurring expenditure which is now being given to the State Governments (for Family Planning) at the rate of 75% of the total expenditure, will be increased to 90%."

Iran

Planning Division, Plan Organization: *Outline of the Third Plan 1341-1346* (dates correspond approximately to 1962-1967), 1344 (1965).

". . . The declining death rate and the likelihood of a higher population growth rate will reduce the pace of increase in per capita income. Thus for both economic and general welfare considerations, in the next decade or two family planning should be popularized and it should constitute one of our important welfare programmes in the future plans."

Jamaica

Five-Year Independence Plan 1963-1968.

". . . The government will seek to bring about a greater awareness of the implications of rapid population growth and population pressure in the island, and of the national problems arising, as well as the effects of excessive child bearing on the lives and prospects of individuals.

"The government will encourage the spread of information on and techniques for the spacing or limitation of families for the benefit of those persons who desire them. . . .

"There is to be an integrated program of research into areas fundamental to planning and to the evaluation of the progress of the long term development program. Productivity research and population research units are to be established."

Minister of Health, *Announcement*, June 1966.

"In pursuance of the objective of making family planning facilities available to all those who wish it, the Minister announces that a Family Planning Unit has now been established in the Ministry of Health. . . .

"The purpose of establishing a special unit for Family Planning with a Medical Director and Family Planning Officer is to intensify activities and give a greater sense of direction to this vital programme.

"The Family Planning Programme involves a wide variety of activities. There are the scientific and clinical aspects, the dissemination of information to the public, where to go, from whom to get advice, the form of family planning arrangements that are best suited for the particular individual—the educational, religious and welfare aspects. All of these have to be coordinated and the Unit will be the central administrative force so that the efforts of Medical Officers, nurses, welfare officers and Governmental and voluntary agencies may be galvanized towards the common goal. This is a vast and challenging field and I consider that for such a programme to have continuing and sustained effect a special Unit is necessary for superintending this work. . . .

"The Family Planning Unit will cooperate with existing non-government agencies who have been working in the field. All known medically acceptable methods will be made available at hospitals and clinics. Already courses have been held for our public health nurses and the programme of training will be intensified in future so as to embrace a wide spectrum of health and welfare officers. The opportunity must be given to every Jamaican who wishes to do so, to limit the size of their family. It must be emphasized that there is no compulsion nor will there be any coercion on the part of Government. It is left to the individual to decide within the dictates of his own conscience and beliefs."

Japan

Ministry of Health and Welfare: "Family Planning Promotion Activities," *Health and Welfare White Paper for 1964*, September 1965.

"Activities for the promotion of family planning have been conducted as a basis of building happy homes and also to decrease induced abortions which are apt to give harmful effects on the health of the mother. . . . At present, Eugenic Protection Consultation Offices attached to the 815 Health Centers are carrying major responsibility in the activities, conducting individual and mass education programs. . . . For those who are in lower income brackets and desire to practice contraception, contraceptive materials have been supplied since 1955 free of charge or at half the ordinary cost with the necessary expenses borne by the State and local public agencies."

Eugenic Protection Law, July 1963.

"Article 1. The object of this Law is to prevent the increase of the inferior descendants from the eugenic point of view and to protect the life and health of the mother as well.

"Article 3. The physician may exercise the eugenic operation, at his discretion, on a person who falls under any of the following items, with the consent of the person in question and the spouse. . . . If the mother has several children and her health condition seems to be seriously affected by each occasion of delivery.

"Article 14. The physician designated by the Medical Association, which is a corporate juridical body established in the prefectural district as a unit, (hereinafter called the 'designated physician') may exercise artificial interruption of pregnancy, at his discretion, to the person who falls under any of the following items, with the consent of the person in question or the spouse . . . [such as] a mother whose health may be affected seriously by continuation of pregnancy or by delivery from the physical or economic viewpoint."

Kenya

Government of Kenya, *Development Plan, 1964-1970*.

"One factor having a profound affect on both the analysis of past performance and the assessment of the economy's potential for growth is the rate of population growth. The 1962 census, in conjunction with that of 1948, suggests that the rate of population growth in Kenya is among the highest

in Africa and indeed in the world. That rate of increase is now estimated at 3 per cent per annum and indications are that the population will continue to grow at that rate in the near future. This is significant for economic analysis and planning in two ways. First, the output of the economy must increase by more than 3 per cent per annum if income per capita is to increase at all. Second, the expanding population increases the size of the labor force. . . . Unfortunately Kenya has a large reservoir of unemployment and increasing population makes the task of reducing unemployment more difficult. . . . As 51 per cent of the population is under 16 years of age, the burden on today's wage earners is great and the problem of providing employment for future potential wage earners is increased."

Korea

Ministry of Health and Social Affairs, *Progress Report: Family Planning in Korea, 1964*.

"On November 13, 1961, at the 69th meeting of the Supreme Council for National Reconstruction, Government leaders of Korea determined to eliminate or modify all problems limiting economic gains and the improvement of living standards, recognized the handicap of excessive natural population growth and approved the plan submitted by the Ministry of Health and Social Affairs for the development of a program whereby contraceptive information, supplies, and clinic services would be made available to all married couples wishing to limit the number or spacing of their children. Family planning was adopted as a national policy, and its goals were included as a part of the Five Year Development Plan. . . . Reduction in the natural increase rate of population growth estimated at 2.9% in 1960 to about 2% by the end of 1971 is the overall objective of the family planning action program."

Malaysia

First Malaysia Plan 1966-1970, 1965.

"The main objectives of the Plan are . . . to lay the groundwork for less rapid population growth by instituting an effective programme of family planning. . . .

"Reduction of the birth rate is an additional goal and one which is closely related to the primary economic objective of raising income levels. . . . Family plan-

ning offers an opportunity to influence the birth rate and sharply accelerate the pace at which levels of welfare rise. . . .

"A new policy to be adopted under the First Malaysia Plan is the implementation of a positive programme for family planning.

". . . Family planning is of vital importance from the point of view of mothers' health and child care and will be implemented in conjunction with the extension of medical facilities and public health. Family planning services will be made available to those who desire it. . . .

"A concentrated effort will be made to popularize family planning. . . . Voluntary organizations, government departments and mass media communications will be utilized to help carry out the education and promotional work of family planning."

Mauritius

His Excellency the Governor: *Speech at the Opening of the Session of the First Legislative Assembly, March 15, 1966.*

"There is no panacea for the problem of unemployment, the solution of which depends on the expansion of the whole economy: an essential condition, however, is a check on the rate of growth of the population and the Government is confident that this can be achieved by means of a sustained campaign of education in family planning."

Morocco

King Hassan II, *Royal Decree No. 180-66, 10th Jumada I 1386 (August 26, 1966) concerning the creation of a High Commission and Local Commissions for population control.*

"Article 1—With a view to enlarging and coordinating the policy adopted by the Government in the field of demographic increase, to oversee its implementation and to control its execution, the following are appointed:

"on the national plan, a high commission of population of which the headquarters will be at Rabat,

"on the local plan, prefectural or provincial commissions of population.

THE HIGH COMMISSION

"Article 2—The high commission of population will be composed of: the minister of public health, President, the minister of justice or his representative, the minister of foreign affairs or his representative, the

minister of development charged with National Promotion and the Plan or his representative, the minister of the interior or his representative, the minister of national education, of arts, of youth and sports or his representative, the minister of finance or his representative, the minister of agriculture and agrarian reform or his representative, the minister of urbanization and housing or his representative, the minister of Islamic affairs or his representative, the minister of labor and social studies or his representative, the minister of information or his representative.

"The high commission of population may add, as consultant, any person or any representative of an organization of which the advice may be useful to it.

"The secretariat of the commission is vouched for by the Minister of Public Health.

"Article 3—The high commission of population will meet at least once every three months by convocation of the president.

"Decisions will be made by a majority vote of the members present. In case of a tie, the vote of the president will rule.

"A joint report of its work and the work of the local commissions will be sent annually to the Prime Minister.

"The debates and decisions of the high commission shall be contained in the minutes approved in meeting and signed by the president, one copy of which is to be transmitted to each member of the commission.

"Article 4—To accomplish its mission, the high commission of population may undertake and pursue all research, inquiries and studies; receive all documents and reports of related administrations; assemble and circulate all technical and scientific documents necessary; convoke in special session the representatives of local commissions.

LOCAL COMMISSIONS

"Article 5—Local commissions are to be established at the seat of government of the prefecture or of the province. They will consist of:

"The governor or his representative, President; a representative of the minister of development in charge of the national promotion and of the plan; the provincial or prefectural delegate of national education; a representative of the minister of agriculture and of agrarian reform; the provincial or prefectural inspector of labor; the delegate of the minister of information.

"Article 6—The local commissions will meet either at the discretion of their presidents, or at the request of the high commission of which they will carry out the instructions.

"Their assignments and the rules of their functioning shall be determined by decision of the Minister of Public Health.

"Article 7—The ministers mentioned in article 2 of this royal decree are each charged, insofar as it concerns him, with the execution of the present royal decree which will be published in the Official Bulletin."

Pakistan

The Third Five Year Plan, 1965-70.

"The enormous rate of population growth caused by a falling death rate without a corresponding decline in the birth rate in recent decades, has virtually swallowed up whatever economic progress Pakistan was able to achieve during the first 12 years of its Independence, allowing very little increase in per capita income. . . . If the current trend of a declining death rate and a high birth rate continues, the population may increase at even faster rates in future, and be a hindrance to the efforts for improving the living standards of the people. . . . The task of arresting the rate of population growth has, therefore, assumed much greater significance and urgency and should receive utmost attention during the Third Plan. . . .

"A broad-based programme is envisaged utilizing all the information and knowledge that has been obtained from our past experience. The programme will have three main aspects:

- (i) Education and motivation of the general population through professional personnel and people in influential positions.
- (ii) Distribution of supplies.
- (iii) Provision of service facilities . . .

"All the public and private agencies and institutions will be utilized specially those that come in direct contact with the people. . . .

"Since the success of the Family Planning Programme is vital to attain economic viability this programme has been assigned high priority in the Plan . . . Family Planning must be more in the nature of a movement than a programme, so that ultimately a planned limited family becomes a way of life. . . .

"To meet this challenge, the Third Plan accords a very high priority to family plan-

ning within the health sector, and includes a family planning programme which in financial terms is nine times that in the Second Plan. . . .

"A separate Division of Family Planning has been created to ensure the expeditious implementation of programmes in this field.

"The Third Plan provides for an allocation of Rs. 166 million for this purpose—Rs. 80 million in East Pakistan, Rs. 75 million in West Pakistan and Rs. 11 million for the Centre.

"The principal objective of the new programme is to bring down the birth rate from 55 per thousand to 45 per thousand."

Peru

Ministry of Public Health and Social Welfare, Presidential Decree, December 5, 1964.

" . . . The Population and Development Study Center is created. . . .

"The goals and purposes of the Population and Development Study Center are: (1) promote, orient and carry out studies and investigations on the development of the Peruvian population. . . . (2) . . . promote the publication of scientific knowledge and of statistical and other information related to demographic phenomena, and, to the tendencies of the Peruvian population . . . (3) promote academic and technical activities in order to accomplish evaluation, analysis and use of the results of population census and other data and similar information in order to prepare programs of action with which to confront the problems of population and of economic and social development as integral parts of the National Development Program."

Singapore

Republic of Singapore, Acts Supplement No. 9, January 7, 1966.

"There shall be constituted in Singapore a body to be known as 'The Singapore Family Planning and Population Board,' which shall be a body corporate and shall have perpetual succession and a common seal.

"It shall be the function and duty of the Board (a) to act as the sole agency for the promotion and dissemination of information pertaining to family planning in Singapore; (b) to initiate and undertake population control programmes; (c) to stimulate interest in demography in Singapore;

and (d) to advise the Government on all matters relating to family planning and population control. . . ."

Taiwan

Department of Health, Ten-Year Health Plan 1966-1975, October 1964.

"Family Planning Program:

"In view of the wide acceptance of the intrauterine device for contraception by married women and its effectiveness and efficiency as experienced in the current pre-pregnancy health program, an island-wide action program will be undertaken. It aims at reduction of the current total fertility rate . . . by 50% in ten years. . . .

"Responsibilities of Public Health Department:

"Although the governmental responsibilities in connection with the program are limited to the education and motivation of people, with the actual services mainly provided by the voluntary organizations and private practitioners, leadership of the PHD for its organization and promotion is essential.

"Justification for the program:

"(1) It will ensure the optimum rate of growth of population, thus reducing the population pressure on land.

"(2) It will change the age composition of population, so that the dependency burden of the population will be drastically lowered.

"(3) It will promote the health of mothers through reasonable spacing of births and the reduction of induced abortions.

"(4) It will promote the health and welfare of children through more adequate maternal care, better nutrition, and better education.

"(5) It will raise the standard of living and improve family happiness.

"(6) The cost of operation of the program is reasonable. The ratio benefit to investment will be high."

Tunisia

M. Fathi Zouhir, Secretary of State for Public Health: Speech, 16 April 1965.

Family Planning in Tunisia: "To limit births in order to balance demographic growth with the increase of available wealth.

"Tunisia finds herself at grips with a population growth rate that threatens to cancel out the gigantic efforts she has been making for several years to develop her

economy and raise the level of living of her inhabitants.

"This population growth results from a particularly high birth rate and a constantly low mortality resulting from the improvement of housing, of sanitation, and of public health services. . . .

"An experimental program of family planning was launched a year ago in Tunisia to study the reactions of the population in this field and to test the contraceptive methods known throughout the world.

"Even before one reaches the phase of evaluation of this program, one can state that, with the prompting of President Bourguiba, the population shows a more and more pressing desire to practice contraception with the most appropriate methods.

"In the light of evidence that will follow, it seems important, therefore, to make a decision on the policy to follow up and to provide the means capable of being mobilized in order to administer this policy. . . .

"Preventing [the birth of babies who will die in childhood] leads to a double advantage for Tunisia.

- 1) It spares the mothers of families suffering and useless sacrifices.
- 2) It allays demographic problems and eliminates one of the principal obstacles to the country's economic and social development."

President Habib Bourguiba: Speech on "Woman's Day," August 12, 1966.

"Man is now aware of the fact that he has a hand over realities and that he can modify them at will. . . .

"By instituting family planning, our principal aim was to assure an equilibrium between population increase and the increase of national production. . . .

"The last census has shown an increase rate of 2.2 or 2.3 which does not justify our apprehensions. The Tunisian population is increasing at a reasonable rate.

"If there are some particularly prolific couples . . . , there is also everywhere a large number of confirmed bachelors or childless homes. . . .

". . . all these couples hostile to procreation do not fulfill their duties to the nation.

". . . We must have children to prevent our population from becoming aged.

"Family planning consists of avoiding an anarchic and disordinate increase of population. It must not lead to an unrea-

sonable decrease in births. Action must not only be taken with homes where births multiply with anarchy, but also with men who are avoiding the creation of families."

Turkey

Turkish Law Concerning Population Planning, Official Gazette, April 15, 1965.

"Article 1. Population Planning means that individuals can have as many children as they wish, whenever they want to. This can be ensured through preventive measures taken against pregnancy. . . .

"Article 2. Divulging the necessity of Family Planning to the public and the training, education, and application connected with it, shall be carried out with the collaboration of military, official and volunteer organizations according to the regulations prepared by the Ministry of Health and Social Welfare.

"For this purpose the Ministry of Health and Social Welfare is authorized to establish special organizations and to take measures to distribute freely, or sell at a lower price, or have sold at a lower price to the needy, contraceptive materials and drugs. . . ."

United Arab Republic

President Nasser: Draft of the National Charter, 21 May 1962.

"The objective set by the Egyptian people, through the revolution, to double their national income, at least once every ten years, was not a mere slogan. It was the result of calculating the amount of the force required to face underdevelopment and rush for progress, *keeping in mind the increasing rise of the population.*

"*This increase constitutes the most dangerous obstacle that faces the Egyptian people in their drive towards raising the standard of production in their country in an effective way.*

"While the *attempts at family planning*, with the aim of facing the problem of the increasing population, *deserve the most sincere efforts* supported by modern scientific methods, the need for the most rapid and efficient drive towards the increase of production necessitates that this problem should be taken into consideration in the process of production, regardless of the effects which may result from the experiment of family planning.

"When the village reaches the civilized standard of the town particularly in the field of culture, the individual's awareness

for planning will start. This awareness will be able to confront *the most difficult problem which faces and threatens planning*: namely the problem of the *continuous increase of the population.*

"Deep awareness of the necessity of planning in the individual's life is the decisive solution to the problem of the continuous increase of the population. This awareness will change the individual's feeling of submission to Fate as regards the problem, and replace it with a feeling of responsibility that drives the individual to plan the family economy."

Decree No. 4075-1965 of the President of the United Arab Republic about the Establishing of the High Council for Family Planning, November, 1965.

"Item One: To establish a high council called 'The High Council for Family Planning' in the city of Cairo, which will enjoy an independent personality.

"Item Two: This Council deals with the following: Total planning of family planning programmes in the Republic, creating a schedule for the execution, supervising, following up and evaluation of the execution. Studying, encouraging and coordinating all population affairs, medical, statistical, social and economical along with scientific research connected with family planning. Organizing cooperation between all organizations taking part in these programmes.

"Item Three: This Council consists of the following members: The Prime Minister, Chief; The Minister of Public Health; The Minister of Higher Education; The Minister of National Guidance; The Minister of Planning; The Minister of State for Prime Ministers Affairs; The Minister of State for Local Administration; The Deputy Minister of Wakfs [welfare organizations] and Social Affairs; and The Head of the Central Agency for Mobilization and Statistics. The Prime Minister has the right of adding one or several other members interested in family planning. The Council has the right to form from its own or outside members, constant or temporary committees for studying matters of the Council. In case the Prime Minister is absent, the Minister of Public Health heads the Council. The Council meets at least twice a month by initiative of its head. The decisions of the Council are put into effect only after the approval of the Prime Minister or head Deputy.

"Item Four: The Council forms a general secretariat from the Minister of Pub-

lic Health, The Minister of National Guidance and The Deputy Minister of Wakfs and Social Affairs, which forms the necessary administrative apparatus.

"Item Five: The decisions of the Council after approval, are final and obliging to all ministries, governorates, public organizations and companies and all organizations having any activities in family planning.

"Item Six: The Council will have a separate budget from funds supplied by the state or gifts and grants that are accepted by the Council.

"Item Seven: The Council is freed from all rules and regulations applied in other governmental departments, particularly the labor laws, salaries and overtimes.

"Item Eight: This decree is to be published in the official paper."

United States

President Johnson, in his State of the Union Address before Congress, January 4, 1965.

"I will seek new ways to use our knowledge to help deal with the explosion in world population and the growing scarcity in world resources."

President Johnson: *Message on World Health and Education*, February 2, 1966.

"To cooperate in worldwide efforts to deal with population problems.

"By 1970, there will be 300 million more people on this earth. A reliable estimate shows, that at present rates of growth, the world population could double by the end of the century. The growing gap—between food to eat and mouths to feed—poses one of mankind's greatest challenges. It threatens the dignity of the individual and the sanctity of the family.

"We must meet these problems in ways that will strengthen free societies—and protect the individual right to freedom of choice.

"To mobilize our resources more effectively, I propose grants to:

"1. Expand Research in Human Reproduction and Population Dynamics.

"We are supporting research efforts through the Department of Health, Education, and Welfare, AID and the World Health Organization. I am requesting funds to increase the pace and scope of this effort. The effort to be successful will require a full response by our scientific community.

"2. Enlarge the training of American and foreign specialists in the population field.

"We are supporting training programs and the development of training programs through the Department of Health, Education, and Welfare and AID. We will expand these programs at home and abroad.

"3. Assist family planning programs in nations which request such help.

"Here at home, we are gaining valuable experience through new programs of maternal and infant care as well as expansion of private and public medical care programs.

"Early last year we made clear our readiness to share our knowledge, skill and financial resources with the developing nations requesting assistance. We will expand this effort in response to the increasing number of requests from other countries."

John W. Gardner, Secretary of Health, Education, and Welfare: *Memorandum to Heads of Operating Agencies*, January 1966.

"Subject: Departmental Policy on Population Dynamics, Fertility, Sterility and Family Planning.

"The policy of this Department is to conduct and support programs of basic and applied research on the above topics; to conduct and support training programs; to collect and make available such data as may be necessary to support, on request, health programs making family planning information and services available; and to provide family planning information and services, on request, to individuals who receive health services from operating agencies of the Department.

"The objectives of the Departmental policy are to improve the health of the people, to strengthen the integrity of the family and to provide families the freedom of choice to determine the spacing of their children and the size of their families.

"Programs conducted or supported by the Department shall guarantee freedom from coercion or pressure of mind or conscience. There shall be freedom of choice of method so that individuals can choose in accordance with the dictates of their consciences.

"The Department will make known to State and local agencies that funds are available for programs of the sort described above, but it will bring no pressure upon them to participate in such programs.

"Each agency shall assure the effective carrying out of this policy, the regular evaluation of programs and the reporting of information on programs to this office.

"The Assistant Secretary for Health and Scientific Affairs will serve as the focal point for Departmental policy and program coordination; will review and evaluate policies and programs; will conduct liaison with other Departments; and will cooperate with interested public and private groups."

Agency for International Development (AID): *Statement on Population Program*, February 1965.

"This circular is intended to report recent developments and bring A.I.D. personnel up-to-date in the population field.

"On January 4, 1965, President Lyndon B. Johnson said in his State of the Union Message: 'I will seek new ways to use our knowledge to help deal with the explosion of world population and the growing scarcity of world resources.' The statement has met with wide approval domestically in the United States as indication of the continuing responsible concern of our Government for one of the most profound problems of our times. Since the concern of A.I.D. missions is immediate and direct, this circular is intended to review recent related developments and to bring A.I.D. personnel up-to-date in the population field. . . .

THE ROLE OF A.I.D.

"In A.I.D., we are beginning to receive an increasing volume of informal requests for information and assistance in relation to this problem.

"A.I.D. has, of course, long given assistance in the development of health services and the training of health personnel. Assistance has also been given in developing official statistics, including population censuses and vital statistics. In addition to requests in these fields, A.I.D. has had requests for technical assistance in training of family planning workers and financial assistance for the purchase of vehicles and education equipment to be used in family planning programs.

"Since 1962 A.I.D. has encouraged the collection and analysis of population growth data and study of attitudes about family planning. Requests for information and assistance in family planning have been referred to appropriate private agencies.

"In the past year A.I.D. missions have begun to respond directly to requests for information. AID/W furnished A.I.D. missions with general reference materials and technical publications dealing with a wide range of subjects from demography to family planning. The Population Reference and Research Branch was organized in the Health Service of the Office of Technical Cooperation and Research (TCR). It has served as the A.I.D. focal point for information and coordination in the population field. The Office of Research and Analysis has considered several population research projects and one has recently been approved by the Research Advisory Committee. The Office of Program Coordination has been working closely with TCR and the Regional Bureaus on the development of program policies. The Latin America Bureau created a Population Unit in its Institutional Development Office and requested each LA A.I.D. Mission to appoint a high official to be responsible for population matters. Consultants have been appointed in the demographic, economic, medical, and public health aspects of the population field.

"At present, it is important that each A.I.D. mission assign one of its officers, as LA missions have done, to become familiar with the problems of population dynamics and program developments in the country and to keep the Mission Director, Country Team personnel and AID/W appropriately advised.

"A.I.D. does not advocate any particular method of family regulation. As noted earlier, freedom of choice should be available.

"Requests for assistance in this field, as in others, will continue to be considered only if made or approved by appropriate host government authorities. Such assistance would, in any case, merely be additive to the host country's own efforts and assistance from other sources.

"Requests for assistance will be handled, as in any other field, on a case by case basis. *We are prepared to entertain requests for technical assistance.* Where appropriate, the requests will continue to be referred to private agencies. We are prepared to receive and consider requests for commodity assistance, but A.I.D. will not consider requests for contraceptive devices or equipment for manufacture of contraceptives. Experience has made it clear that the cost of these latter items is not a stumbling block in countries that are developing effective programs. Other items

could be provided by A.I.D., such as vehicles and education equipment for use in maternal and child health and family planning programs. We are also prepared to receive requests to assist in local currency financing of such programs.

"The Population Reference and Research Branch is and will continue to be the focal point for agency information on population affairs. Selected population reference material will from time to time be sent by the Branch for transmission to A.I.D. missions.

CONCLUSION

"In conclusion, the immediate impact and long term implications of world population increases are sobering and are recognized as such by our government, by other governments of the world, and by private leaders concerned with human welfare. The problem is complex. Simple, instant solutions neither exist nor are in sight. Under any circumstances, population programs must always be concerned with far more than technical services and every effort must be made to achieve social conditions favoring responsible parenthood. It is our objective to move ahead constructively, with careful and deliberate consideration of all the economic, social and human relations issues involved."

Office of Economic Opportunity ("Poverty Program"): *Community Action for Health: Family Planning*, July 1966.

"The availability of family planning services is a basic element of personal health services.

"The poor have had limited access to most health services. This has been especially true of family planning services, since public health departments and public hospitals—the main providers of health care for the poor—have frequently been slow to make such services available.

"Studies show that poor parents want fewer children than they are having. Family planning programs enable poor persons to reduce their dependency and to achieve mastery over an important area of their own lives—important objectives of all the programs of the Office of Economic Opportunity.

"The planned spacing of children can be an important aid in maintenance of the economic well-being as well as the health of families. Unwanted children coming one after another can hobble a low-income family trying to improve its status. These children, furthermore, run the greatest

risk of forming a succeeding generation of poverty-stricken adults. A community which assures everyone an opportunity to obtain family planning services is taking a major step toward eliminating a significant cause of poverty."

Robert S. McNamara, Secretary of Defense: *Policy Statement*, October 1966.

"The enactment of the Military Medical Benefits Amendments of 1966 removes the restrictive language previously contained in chapter 55 of title 10, United States Code, dealing with the types of health care which may be provided under the Dependents' Medical Care Program. Consequently, family planning services provided by civilian physicians to eligible dependents on an outpatient basis are covered under the program effective October 1, 1966.

"The portions of the Act cited above which deal with care provided dependents in military medical facilities take effect on January 1, 1967. Accordingly, it is desired that the policy outlined below be placed in effect on that date at all medical facilities under your jurisdiction.

"Family planning services and supplies, including counseling and guidance, shall be provided in accordance with sound medical practice, and subject to the availability of space and facilities and the capabilities of the medical staff, to any eligible dependent wife upon her request."

Venezuela

Third Venezuelan Congress on Public Health: March 1966: *Statement* (The Congress has a semi-official character).

Conclusions

"1. The birth statistics as well as the mortality statistics are not fully reliable due to the under-enumeration that affects them and shows evidence of the malfunction of the Civil Registrar of Venezuela.

"2. However, there is valid evidence for us to affirm that the birth rate in Venezuela is one of the highest in the world and by virtue of the differential in fertility rates, this growth operates to a large extent at the expense of the less fortunate social class.

"3. The country is not fully aware of this phenomenon nor of its consequences. There are indications that the higher educated class has spontaneously adopted effective methods of birth control.

"4. The private and public sectors have not been successful in forming a coordinated policy directed to guarantee the

population the elements necessary for their minimum security and welfare, and in particular, the participation of the private sector has been very limited.

"5. The needs of an insufficiently prepared population cannot be satisfied by the presently assigned resources and this obstructs the development of the country and manifests itself in difficulties which are evident in all levels of the Public Administration.

"6. The presence of deterioration in the family institution is evident, and if it advances equally in all social classes it is most probable that it may occur and have the gravest consequences on the economically weak sector of the population.

"7. Sufficient studies in order to determine the suitable birth rate for the country have not been undertaken. However, valid reasons exist to accept that an exaggerated birth rate could obscure the progress and jeopardize the organization of society.

Recommendations—Proposals

"1) The promulgation of the Civil Registrar Law is urgent to substitute the anachronism of the existing one and so that the Ministry of Justice, once in possession of such a legal instrument can bring about, as soon as possible, the projected reorganization.

"2) The National Development Plan must contemplate simultaneously the measures of economic growth and the compatible rates of demographic growth. Therefore it is necessary that the development plan take into consideration the phenomenon of demographic growth.

"3) The development policy must include a population policy, without which the former would not be realistic nor complete. The establishment of a population policy requires continuous, variable and profound studies which would embrace not only the resultant phenomenon, but also sociological, cultural, and anthropological factors and all aspects that affect the attitudes of the population. For this it is necessary to:

a) coordinate on a national scale all resources presently available,

b) stimulate the teaching and investigation of the demographic phenomenon in the universities as well as the scientific institutions,

c) strengthen the organizations that concern themselves with the administration and study of the problem and especially the Division of Population of the Ministry

of Health and Social Assistance and the Office of Demographic Analysis of the Ministry of Development.

"4) The strengthening and protection of the family must be supported by an adequate legislation and bring this about by means of suitable systems. Consequently, family planning as a medical-social instrument must have the following objectives:

a) education, particularly in respect to the responsibility of the father, the capacity for love and affection and security for the children,

b) the regulation of the progeny in accordance with the free determination of the conscience of the parents and

c) the promotion of fertility in sterile marriages.

"5) The formation of a clear and firm national conscience about the demographic problem and its integral development is urgent. It cannot be expected that only the elevation of the general level of education would fill this void.

"6) Faced with the actual demands for advice and services for medical-social problems of fertility, the official medical services must be able to offer such help, together with the practical means of application to the persons who spontaneously request them."

United Nations and Related Organizations

United Nations General Assembly, *Resolution sponsored by Denmark, Ecuador, Finland, Ghana, India, Iraq, Jamaica, Kenya, Kuwait, Malaysia, Nepal, Netherlands, Norway, Nigeria, Pakistan, Rwanda, El Salvador, Singapore, Sweden, Syria, Turkey, United Arab Republic, United Kingdom of Great Britain and Northern Ireland, United States of America and Yugoslavia, December 1966.*

"The General Assembly,

"Recalling its resolution 1838 (XVII) of 13 December 1962 on population growth and economic development and the Economic and Social Council resolutions 933 C (XXXV) of 5 April 1963 on intensification of demographic studies, research and training and 1048 (XXXVII) of 15 August 1964 on population growth and economic and social development as well as resolution 1084 (XXXIX) of 30 July 1965 on work programme and priorities in the field of population,

"Recalling World Health Assembly resolutions 18.49 and 19.43 on the health aspects of world population,

"Taking note of the resolution 3.252 of the General Conference of the United Nations Educational, Scientific and Cultural Organization and the paragraphs 842-844 of the Work Programme for 1967-1968 the United Nations Educational, Scientific and Cultural Organization on the subject of education and information related to population growth,

"Recalling the inquiry by the Secretary-General among Governments on problems resulting from the interaction of economic growth and population change and the Secretary-General's report which reflected a wide variety of population problems,

"Commending the Economic and Social Council and the Secretary-General for convening the World Population Conference in Belgrade, Yugoslavia, from 30 August to 10 September 1965 in which a large number of specialists in demography and related fields from developing countries were able to participate,

"Taking note of the non-technical summary of the World Population Conference,

"Noting the steps taken by the organizations concerned in the United Nations system to co-ordinate their work in the field of population,

"Concerned over the growing food shortage in the developing countries which is due in many cases to a decline in the production of food-stuffs relative to population growth,

"Recognizing the need for further study of the implications of the growth, structure and geographic distribution of population on economic and social development including national health, nutrition, education and social welfare programmes carried out at all levels of government activity,

"Believing that demographic problems require the consideration of economic, social, cultural, psychological and health factors in their proper perspective,

"Recognizing the sovereignty of nations in formulating and promoting their own population policies with due regard to the principle that the size of the family should be the free choice of each individual family,

"1. Invites the Economic and Social Council, the Population Commission, the regional economic commissions, the Economic and Social Office in Beirut and the specialized agencies concerned to study the proceedings of the World Population Conference, 1965 when pursuing their activities in the field of population;

"2. Notes with satisfaction the decisions of the World Health Organization to include in its programme of activities the study of the health aspects of human reproduction as well as the provision of advisory services upon request within its responsibilities under World Health Assembly resolution 19.43 and of the United Nations Educational, Scientific and Cultural Organization to stimulate and provide assistance towards scientific studies covering the relations between development of education and population;

"3. Requests the Secretary-General:

(a) to pursue within the limits of available resources the implementation of the work programme covering training, research, information and advisory services in the field of population in the light of the recommendations of the Population Commission in the report of its thirteenth session as endorsed by the Economic and Social Council in its resolution 1084 (XXXIX) and the considerations set forth in the preamble of the present resolution;

(b) to continue his consultations with the specialized agencies concerned in order to ensure that the activities of the United Nations system of organizations in the field of population are effectively co-ordinated;

(c) to present as envisaged in the Economic and Social Council resolution 1084 (XXXIX) to the Population Commission at its fourteenth session proposals with regard to the priorities of work for periods of two years and of five years within the framework of the long-range programme of work in the field of population;

"4. Calls upon the Economic and Social Council, the Population Commission, the regional economic commissions, the Economic and Social Office in Beirut and the specialized agencies concerned to assist when requested in further developing and strengthening national and regional facilities for training, research, information and advisory services in the field of population bearing in mind the different character of population problems in each country and region and the needs arising therefrom."

United Nations Economic and Social Council, Thirty-ninth session, *Agenda item 19*, 30 July 1965.

"The Economic and Social Council . . . endorses the recommendations of the Population Commission . . . with regard to the increase and improvement of demographic statistics, the strengthening of regional demographic training and re-

search centres, and other activities to increase the supply of technically trained personnel in the developing countries, expansion and intensification of research and technical work, widening of the scope and increase of the amount of technical assistance in population fields available to Governments of developing countries upon their request. . .

"Invites the regional economic commissions . . . to give consideration to possibilities of modifying and expanding their programmes of activities in the population fields. . .

"Calls to the attention of the General Assembly the need to provide the necessary resources . . . to carry out the intensified and expanded programme of activities in the fields of population. . .

"Requests the Secretary-General: . . . to provide . . . advisory services and training on action programmes in the field of population at the request of Governments desiring assistance in this field."

United Nations Children's Fund, *Draft Resolution on Family Planning*, May 1966.

"*The Executive Board*

"Having received the report of the Executive Director on the possible role of UNICEF in family planning (E/ICEF/L.1259), which was prepared in compliance with the request of the Board at its June 1965 session;

"Having received the resolution WHA 19.43 of the Nineteenth Session of the World Health Assembly;

"Taking into account the points of view expressed by members of the Executive Board in their discussion on this subject:

"1. *Expresses* its appreciation to the Executive Director for his report;

"2. *Decides* to defer action on the recommendations of the Executive Director until the 1967 session of the Board;

"3. *Requests* the advice of the UNICEF/WHO Joint Committee on Health Policy on the best way in which UNICEF might participate in programmes of family planning, with particular reference to the technical aspects. In so doing the Executive Board requests the UNICEF members of the Joint Committee on Health Policy to be guided by the following principles:

a) UNICEF assistance shall be given in response to government requests, as part of a country's health services and not as a separate category of assistance;

b) UNICEF assistance shall be limited

to the usual forms of aid that have been approved by the Executive Board for many years, such as training of personnel, provision of vehicles, and MCH supplies and equipment;

c) UNICEF shall not take any responsibility for the organization and administration of the governmental programme relating to family planning;

d) UNICEF shall request the technical advice of WHO and the Bureau of Social Affairs of the United Nations Secretariat in connection with any such assistance."

World Health Organization, *Eighteenth World Health Assembly*, May 1965.

"The Eighteenth World Health Assembly,

"Having considered the report of the Director-General on Programme Activities in the Health Aspects of World Population which might be developed by WHO;

"Bearing in mind Article 2 (1) of the Constitution which reads: 'to promote maternal and child health and welfare and to foster the ability to live harmoniously in a changing total environment';

"Noting Resolution 1048 (XXXVII) adopted by the Economic and Social Council at its thirty-seventh session, August 1964;

"Believing that demographic problems require the consideration of economic, social, cultural, psychological and health factors in their proper perspective;

"Noting that the United Nations Population Commission at its thirteenth session, April 1965, attached high priority to the research and other activities in the field of fertility;

"Considering that the changes in the size and structure of the population have repercussions on health conditions;

"Recognizing that problems of human reproduction involve the family unit as well as society as a whole, and that the size of the family should be the free choice of each individual family;

"Bearing in mind that it is a matter for national administrations to decide whether and to what extent they should support the provision of information and services to their people on the health aspects of human reproduction;

"Accepting that it is not the responsibility of WHO to endorse or promote any particular population policy; and

"Noting that the scientific knowledge with regard to the biology of human reproduction and the medical aspects of fertility control is insufficient,

1. APPROVES the report of the Director-General on Programme Activities in the Health Aspects of World Population which might be developed by WHO;
2. REQUESTS the Director-General to develop further the programme proposed:
 - (a) in the fields of reference services, studies on medical aspects of sterility and fertility control methods and health aspects of population dynamics; and
 - (b) in the field of advisory services as outlined in Part III, paragraph 3, of his report, on the understanding that such services are related, within the responsibilities of WHO, to technical advice on the health aspects of human reproduction and should not involve operational activities; and
3. REQUESTS the Director-General to report to the Nineteenth World Health Assembly on the programme of WHO in the field of human reproduction."

World Health Organization, *Nineteenth World Health Assembly*, May 1966.

"The Nineteenth World Health Assembly,

"Having considered the report presented by the Director-General in accordance with resolution WHA18.49;

"Bearing in mind Article 2 (1) of the Constitution;

"Noting the part played by economic, social and cultural conditions in solving population problems and emphasizing the importance of health aspects of this problem;

"Noting the resolution 1084 (XXXIX) of the Economic and Social Council, the discussions at the Second World Population Conference and the subsequent discussion during the twentieth session of the United Nations General Assembly;

"Noting that several governments are embarking on nation-wide schemes on family planning;

"Noting that the activities of WHO and its Scientific Groups have already played their part in collecting and making available information on many aspects of human reproduction;

"Recognizing that the scientific knowl-

edge with regard to human reproduction is still insufficient; and

"Realizing the importance of including information on the health aspects of population problems in the education of medical students, nurses, midwives and other members of the health team,

1. NOTES with satisfaction the report presented by the Director-General;
2. REAFFIRMS the policy statements contained in the consideranda of resolution WHA18.49;
3. APPROVES the programme outlined in Part III of the Director-General's report in pursuance of the operative part of resolution WHA18.49;
4. CONFIRMS that the role of WHO is to give Members technical advice upon request, in the development of activities in family planning, as part of an organized health service, without impairing its normal preventive and curative functions; and
5. REQUESTS the Director-General to report to the Twentieth World Health Assembly on the work of WHO in the field of human reproduction."

United Nations Educational, Scientific and Cultural Organization.

Resolution submitted by Sweden, Ceylon, Denmark, India, Iraq, Kenya, Tunisia, United Arab Republic, United States of America, Norway, Netherlands, and Yugoslavia to the General Conference of the United Nations Educational, Scientific, and Cultural Organization and adopted at the Fourteenth Session, November 1966.

Education and evaluation of population

"The General Conference,

"Considering the close interrelationship between the development of education and the evolution of population,

"Recalling that world population at present grows with 70 million people a year and that most of this increase falls upon the developing countries, many of which show a rate of increase approaching or even exceeding three per cent,

"Noting that in spite of all efforts to combat illiteracy the number of illiterates has increased during the first half of the Development Decade in absolute terms, due primarily to the population explosion,

"Being aware that the growth of training and educational facilities is also likely to be surpassed by the growth of the number of school-aged children,

"Recognizing the individual's right of decision in accordance with religious be-

lief, personal conviction and cultural tradition,

"Noting again that a steadily growing number of governments are convinced that the unlimited population growth must be checked and that men and women must be given knowledge how to decide on family size.

"Recalling the ECOSOC resolution 1084 (XXXIX) of 3 July 1965 on work programmes and priorities in population fields which, inter alia, invited the Specialized Agencies to modify and expand their programmes of activities in the population field,

"Bearing in mind the increasing attention paid to the problems of population and family planning by several executing agencies of the United Nations Development Programme such as the Food and Agriculture Organization and the World Health Organization, and by the World Bank and Unicef,

"Being aware of the specific responsibilities of Unesco for questions concerning illiteracy, adult education, teacher training and research in the social sciences,

"Considering that Unesco could make a first valuable contribution in this field by studying the relations between the development of education and evolution of population,

"Requests the Director-General to appoint a special committee with limited membership, to define Unesco's responsibilities in the population field, and to consider, in particular, the following fields for Unesco action:

- (a) to carry out sociological studies on social, cultural, and other factors influencing attitudes for family planning,
- (b) to function as a clearing house for exchange of sociological research and knowledge in the field of family planning,

"Further requests the Director-General to report to the Executive Board on the results of this undertaking. . . ."

THE POPULATION COUNCIL

245 Park Avenue, New York, New York 10017

The Population Council is a foundation established in 1952 for scientific training and study in population matters. It endeavors to advance knowledge in the broad field of population by fostering research, training, and technical consultation and assistance in the social and bio-medical sciences.

John D. Rockefeller 3rd,
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