

ASIAN CAUCUS
Topic C: Dealing with the Effects of
Overpopulation

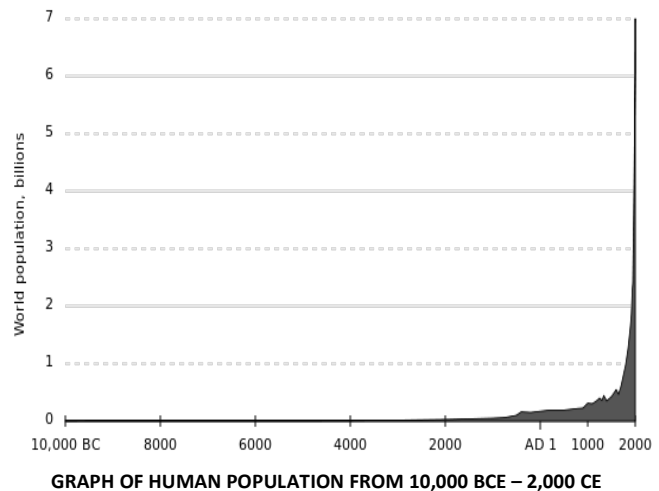
Chair: Justice Howard
Vice-Chair: Leandro Campos
SALMUN 2014

INDEX

| | |
|-----------------------------|----|
| Background Information..... | 2 |
| Timeline..... | 9 |
| Key Terms..... | 10 |
| Guiding Questions..... | 11 |
| Further Research..... | 12 |

Background Information

Since the end of the Black Death, around 1350, the human population has been growing continuously, with the most significant increase in the past 50 years. Medical advancements and increases in agricultural productivity are the main reasons behind this

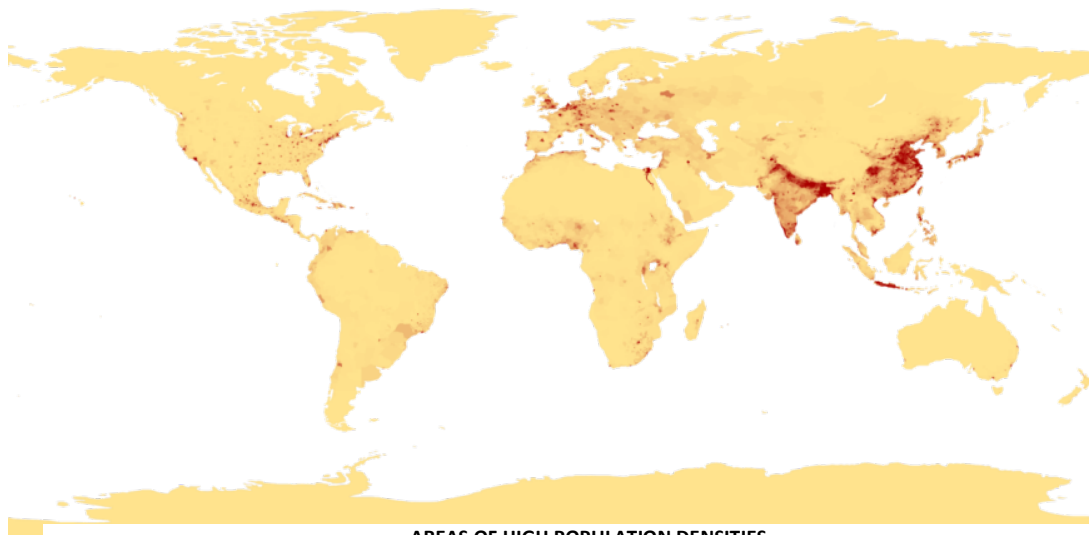


exponential growth. As of August 2014, the United States Census Bureau and the United Nations estimate the global population to be 7.183 billion. However, most scientists estimate that Earth's carrying capacity under existing conditions is around 4 billion. Recent projections indicate that the population is expected to reach between 8 and 10.5 billion between the year 2040 and 2050. In May 2011, the United Nations increased the medium variant projections to 9.3 billion for 2050 and 10.1 billion for 2100. The recent rapid increase in human population over the past centuries has raised major concerns. The InterAcademy Panel Statement on Population Growth has stated that many environmental problems, such as rising levels of atmospheric carbon dioxide, global warming, and pollution, are aggravated by the population expansion. Other problems associated with overpopulation include the increased demand for resources such as fresh water and food, starvation and malnutrition, consumption of natural resources (such as fossil fuels) faster than the rate of regeneration, and deterioration in

living conditions. Further increase in population also accentuates income inequality, since there is more demand for resources.

WHAT ROLE DOES ASIA PLAY IN THIS ISSUE?

Asia is the most populous continent, with its 4.3 billion inhabitants accounting for 60% of the world population. The world's two most populated countries alone, China and India, together constitute about 37% of the world's population. By 2050, Asia is expected to have a population of about 5.3 billion people. Therefore, Asian countries should develop methods to control their population growth rates, keeping in mind that limiting population can have negative economic effects.



CHINA`S ONE-CHILD POLICY AND OTHER BIRTH CONTROL METHODS

In an attempt to control China`s increasing population growth, Chinese leader Deng Xiaoping established the one-child policy in 1979. Although designated a "temporary measure," it continues a quarter-century after its establishment. The policy limits couples to one child. Fines, pressures to abort a pregnancy, and even forced

sterilization accompanied second or subsequent pregnancies. It is not an all-encompassing rule because it has always been restricted to ethnic Han Chinese living in urban areas. Citizens living in rural areas and minorities living in China are not subject to the law. However, the rule has been estimated to have reduced population growth by as much as 300 million

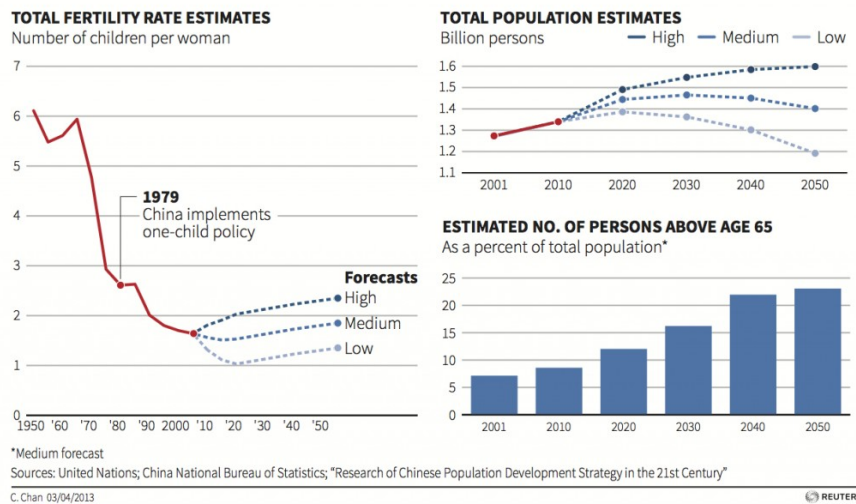
people over its first twenty years. This rule however, has caused neglect for female infants since the Chinese culture still values males over

females. Abortion, abandonment, and even infanticide have been known to occur to female infants. Normally, 105 males are naturally born for every 100 females. The result of such family planning has resulted in the disparate ratio of 114 males for every 100 females among babies from birth through children four years of age.

Now, after decades of the implementation of the one-child policy, there are millions of Chinese without siblings. A special provision, popularly labelled as the two-child policy, allows couples composed of two people without siblings to have two children of their own, thus preventing a dramatic population decrease.

China's one-child policy and population estimates

Projections show China's population could peak in the next two decades and its elderly population may hit 360 million by 2030

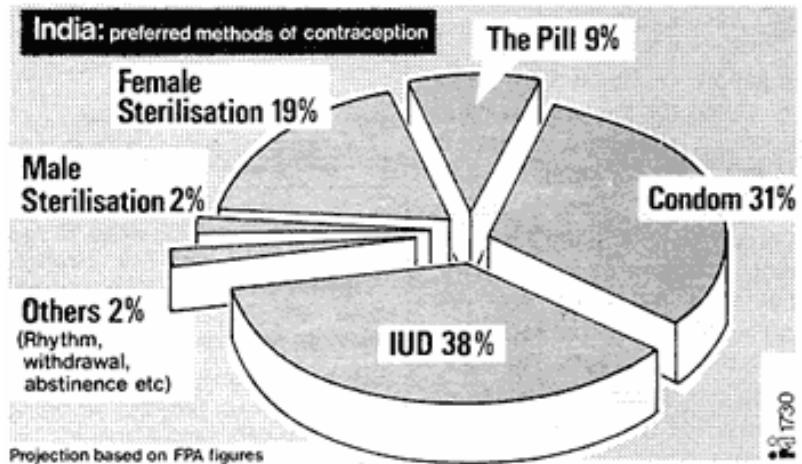


IUDs, sterilization, and abortion (legal in China) are still China's most popular forms of birth control. However, over the past few years, China has provided more education and support for alternative birth control methods.

INDIA`S BIRTH CONTROL METHODS AND FAMILY PLANNING

The Indian Government sponsors many family planning efforts in order to control fertility rates. In the 1965-2009 period, contraceptive usage has more than tripled (from 13% of married women in 1970 to 48% in 2009) and the fertility rate has more than halved (from 5.7 in 1966 to 2.6 in 2009), but the national fertility rate is still high enough

to cause long-term population growth. India adds up to 1,000,000 people to its population every 15 days. Low female literacy levels and a lack of widespread availability



of birth-control methods are limiting the usage of contraception in India. The vast majority of married Indians (76% in a 2009 study) reported significant problems in accessing a choice of contraceptive methods. In 2009, 48.3% of married women were estimated to use a contraceptive method, while more than half of all married women did not. About three-fourths of these were using female sterilization, which is by far the most prevalent birth-control method in India. Condoms, at a mere 3% were the next most prevalent method. Studies have indicated that increased female literacy is correlated strongly with a decline in fertility. Female literacy levels are an independent strong

predictor of the use of contraception, even when women do not otherwise have economic independence. Female literacy levels in India may be the primary factor that helps in population stabilization, but they are improving relatively slowly: a 1990 study estimated that it would take until 2060 for India to achieve universal literacy at the current rate of progress.

OTHER NATIONS` BIRTH CONTROL POLICIES

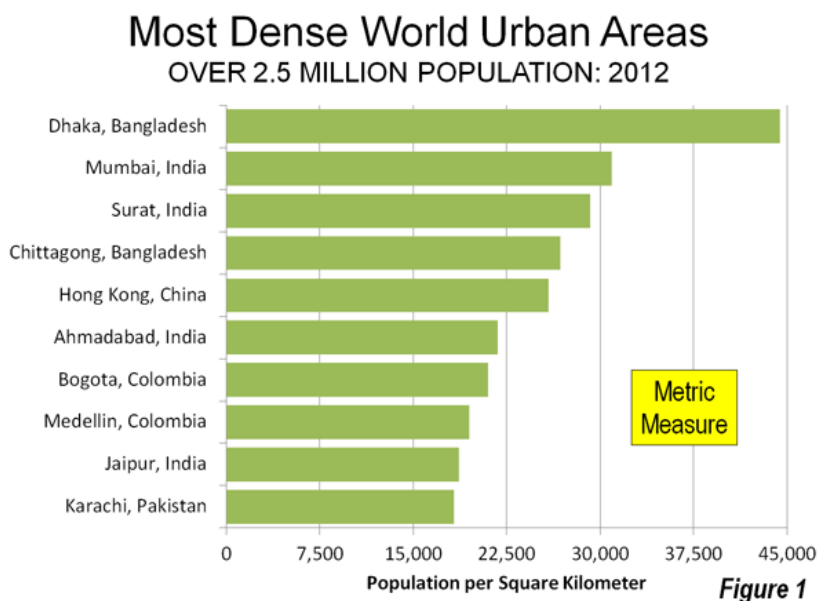
Singapore has undergone two major phases in its population control: first to slow and reverse the baby boom in the Post-World War II era; then from the 1980s onwards to encourage couples to have more children as the birth rate had fallen below the replacement-level fertility. In addition, during the interim period, the eugenics policies were adopted. The anti-natalist policies flourished in the 1960s and 1970s: initiatives advocating small families were launched and developed into the “Stop at Two” program, pushing for two-children families and promoting sterilization. In 1984, the government announced the “Graduate Mothers' Scheme”, which favored children of more well-educated mothers; the policy was however soon abandoned due to the outcry in the general election of the same year. Eventually, the government became pro-natalist in the late 1980s, marked by its Have Three or More plan in 1987.



Bangladesh has the third largest population in South Asia, after India and Pakistan. The population now stands at 142.3 million people, nearly double the country’s 1974 statistic and 18 million more than 10 years ago. This level of growth is approximately equivalent to an annual population growth rate of 1.34% over the past decade. The population density has increased from 834 to 964 people per square kilometer.

For the most part, increased literacy, social awareness and urban influence have alleviated the potential negative effects (i.e., significant increase in unemployment or birth rates) of Bangladesh’s population growth over the past 10 years, but these trends must be maintained in tandem with population control and family planning programs. Institutes like the country’s Directorate General of Family Planning are very understaffed. Policy implementation and monitoring must be prioritized to ensure the success of the country’s population control programs.

The Government of Bangladesh drafted a population policy in 2009 seeking to introduce and promote the concept of a single-child family by 2015, but it has not taken assertive enough strides to achieve



that goal. There are further reports highlighting the inadequacy and, in some cases inactivity, of efforts to improve access to family planning services for urbanites, particularly the urban poor. Since 1998, it is claimed that the Health and Family Welfare Ministry has had no urban family planning activities. An unnamed report cited in The Daily Star, in Dhaka, more than 250 Dhaka City Corporation employees in the family welfare department have had no work for the last 13 years; strange then that they have still been paid regular wages in that period.

The Government of Bangladesh has coined two popular family planning slogans: “Two is good enough – boy or girl” and “One child is good, but no more than two”. The key to population control is to improve the social status of women. In



OVERCROWDED TRAIN IN DHAKA, BANGLADESH

Bangladesh, women have limited legal and political rights and, in many cases, they also have an incomplete education. The population census does show a trend whereby the sex ratio is slowly closing: it has narrowed from 100.4 males to 100 females a decade ago to the current ratio of 100.3 males to 100 females. Empowering young women with education and job opportunities will help them to challenge more traditional perceptions against family planning and to have a say in how many children they will have.

Timeline

July 1927: Indian professor Raghunath Dhondo Karve publishes a magazine where he continually discusses issues of society's well-being through population control through use of contraceptives to prevent unwanted pregnancies and induced abortions. He proposes that the Indian Government should take up a population control program, but is met with opposition.

1951: India launches the national family planning program, the world's first governmental population stabilization program.

1970: Indira Gandhi, Prime Minister of India, implements a forced sterilization program. Officially, men with two children or more have to submit to sterilization, but many unmarried young men, political opponents and ignorant, poor men are also believed to be sterilized. This program is still remembered and criticized in India, and is blamed for creating a public aversion to family planning, which hampered Government programs for decades.

1970: 13% of married women in India use modern contraceptive methods.

1979: Chinese leader Deng Xiaoping establishes the one-child policy.

1996: India's national family planning program is estimated to have averted 168 million births.

1997: 35% of married women in India use modern contraceptive methods.

2009: 48% of married women in India use modern contraceptive methods.

2050: Asia is expected to have a population of about 5.3 billion people.

Key Terms

Overpopulation: occurs if the number of people in a group exceeds the carrying capacity of a region occupied by that group.

Carrying Capacity: the maximum population size of the species that the environment can sustain indefinitely, given the food, habitat, water and other necessities available in the environment.

Fertility Rate: the ratio of live births in an area to the population of that area; expressed per 1000 population per year.

One-Child Policy: policy established in 1979 by the Chinese government that limits couples to one child.

Contraception: the deliberate use of artificial methods or other techniques to prevent pregnancy as a consequence of sexual intercourse.

Sterilization: contraceptive method that makes an organism barren or infertile.

IUD (intrauterine device): small, "T-shaped" device inserted into the uterus to prevent pregnancy.

Quality of Life (QOL): the general well-being of individuals and societies. QOL has a wide range of contexts, including the fields of international development, healthcare, politics and employment.

Urbanization: the social process whereby cities grow and societies become more urban

Guiding Questions

- Why is overpopulation an issue? What are the consequences of overpopulation?
- What are the causes of overpopulation?
- How should the international community address overpopulation? Should the efforts to stabilize population be generalized or targeted at some specific countries?
- What are the best methods to mitigate overpopulation? Which strategies work best: coercive or constructive?
- Should there be national population targets? Should nations be penalized in some way if they don't meet those targets?
- Why should nations sacrifice their economic development in order to limit their populations?

Further Research

Causes, effects and solutions of overpopulation:

<http://urbanpoverty.intellecap.com/>

<http://www.overpopulation.org/>

<http://www.conserve-energy-future.com/causes-effects-solutions-of-overpopulation.php>

http://howmany.org/environmental_and_social_ills.php

Overpopulation in Asia:

<http://southasiainvestor.blogspot.com.br/2010/07/overpopulation-causes-environmental.html>

China:

http://www.nytimes.com/2013/05/22/opinion/chinas-brutal-one-child-policy.html?_r=0
(one-child policy)

<http://countrystudies.us/china/34.htm>

India:

<http://www.nyu.edu/projects/sanger/webedition/app/documents/show.php?sangerDoc=142181.xml>

<http://www.d.umn.edu/~lars1521/India&birthcontrol.htm>

Other birth control methods:

<http://www.eastasiaforum.org/2013/05/07/contraception-a-family-planning-imperative/>

<http://www.plannedparenthood.org/health-info/birth-control>