

## LECTURE 13

### POPULATION CONTROL

#### *Objectives*

The learner should be able to explain how population can be controlled at individual, national and international levels.

#### **13.1 Population Control**

Human population control is the practice of artificially altering the rate of growth of a human population. Historically, human population control has been implemented by limiting the population's birth rate, usually by government mandate, and has been undertaken as a response to factors including high or increasing levels of poverty, environmental concerns, religious reasons, and overpopulation. While population control can involve measures that improve people's lives by giving them greater control of their reproduction, some programs have exposed them to exploitation.

Population control is any methodology used to control the type, location and number of people that inhabit the earth. Public debate is strictly limited however to non-coercive means in achieving any one of these goals, especially with regards to population reduction. An important example of this would be allowing people the free choice on procreative matters. By using various methodologies both economic and administrative and educational to dissuade people from having more children than needed, a stable population base can be created. It should be noted here that the prevailing viewpoint of the world's decision makers is that Population control and environmental devastation are linked and the former contributes heavily to the latter. This view is foundational to understand the policies that are formulated to combat, what is viewed by policy makers as a runaway population explosion.

Population control may use one or more of the following practices although there are other methods as well;

- Contraception
- Abstinence
- Reducing infant mortality so that parents do not increase their family size to ensure at least some survive to adulthood

- Abortion
- Improving status of women causing departure from traditional sexual division of labour.
- Emigration
- Immigration reduction
- Sterilization

The only socially and psychologically acceptable solution available to policy makers when discussing reducing the world's population is education.

Population education has several objectives:

- To impact knowledge on population characteristics and basic demographic concepts.
- To help learners understand the implications of population characteristics on the natural and socioeconomic environment
- To help learner develop skills to analyze population-related issues and problems
- To help learners develop skills to participate in population policy formulation
- To help learners develop responsible attitudes concerning family well being, population programs, use of natural resources as well as the improvement of the environment.

While other methods are debated they are rarely employed or even discussed with any real publicity. These include various methods of taxation and other forms of financial disincentives. These methods are important to note because barring success of the educational solution track, the financial/administrative disincentives administrative will probably become more likely as a method of reducing populations. However, this method is only really available where there is some degree of wealth and a fairly well developed governmental institutions capable of enforcing such a regimen. These are the regions that are the primary target of the so called population control agenda; remote, poor, economically underdeveloped regions of the world. Thus, if global policy makers are to have any success in their war on population (people), other methods must be employed.

### 13.2 Suggested Population Control Measures at Individual, National and International Levels

Level of Control	Suggested Measures	Remarks
<b>Individual Level</b>	<ul style="list-style-type: none"> <li>• Embracing family planning measures that include:               <ul style="list-style-type: none"> <li>➤ Appropriate birth spacing, with emphasis on fewer children, 2-3</li> <li>➤ Tubal ligation for females</li> <li>➤ Ovariohysterectomy for females</li> <li>➤ Vasectomy for men</li> <li>➤ Use of contraceptive pills</li> <li>➤ Use of condoms in coitus</li> <li>➤ Withdrawal technique during coitus</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Measures must be accompanied by corresponding improved child and maternal health care services to reduce infant and child mortalities which is a major incentive for high birth rate in less developed countries</li> <li>• Some measures e.g. vasectomy in men although very effective are punitive and permanent, with negative connotation on male ego, hence shunned</li> </ul>
	<ul style="list-style-type: none"> <li>• Empowering people, especially women through education.</li> <li>• Abandon retrogressive cultural practices e.g. disregard for the girl child, in favor of boys</li> </ul>	<ul style="list-style-type: none"> <li>• Educated women tend to focus on their careers and have little time for bearing many children. Infant and child mortality rates are lower among educated households hence less motivation for large number of children to enhance survival rates of children</li> </ul>

	<ul style="list-style-type: none"> <li>• Delayed marriages</li> <li>• Sensitization on small family sizes through peer and role model influence</li> </ul>	<ul style="list-style-type: none"> <li>• The belief that a household must have a boy child for inheritance and lineage maintenance has led many families to have several children and they seek chance for the boy child.</li> <li>• Career minded individuals often marry late; with less motivation to sire many children</li> <li>• Peer pressure strongly influences behavioral changes in society, both positively and negatively.</li> </ul>
<p><b>National Level</b></p>	<ul style="list-style-type: none"> <li>• National government can roll out a country wide family planning programme as a policy</li> <li>• National governments may also introduce incentives for small family sizes and penalties for big family sizes. For instance, tax relief measures based on family sizes could help discourage or encourage the desire to bear children.</li> <li>• National Governments can also rollout poverty eradication programmes to create opportunities for income, better living conditions and access to healthcare and education services</li> <li>• National government should also</li> </ul>	<ul style="list-style-type: none"> <li>• A major campaign in the late early 1990s in Kenya has helped to reduce birth rates from an all time high of 4% to just 3.6%. National campaigns and sensitization through maternal healthcare programmes focus on the benefits of smaller healthier families.</li> <li>• In Germany where the population growth is less than 1%, parents are induced to bear children through child maintenance allowances. China for instance has a policy of 1 child per household.</li> </ul>

	<p>develop comprehensive resettlement scheme programmes</p> <ul style="list-style-type: none"> <li>• National governments should strictly enforce laws and policies regulating immigration</li> <li>• Create employment opportunities through concrete national development plans that expand the growth of the economy, create jobs and enhance incomes</li> <li>• Improve healthcare services to reduce infant, child and maternal mortalities through comprehensive national health care programmes as part of the Millennium Development Goals.</li> <li>• Reclaim unproductive land for settlement of squatters to enhance productivity and improve living standards</li> </ul>	<p>Violating the policy attracts penalties in form of higher tax burden</p> <ul style="list-style-type: none"> <li>• Poverty is the single most important cause of high population growth rates. Population demographics indicate that poorer households, especially in developing countries have higher birth rates</li> <li>• Settlement schemes with improved access to services discourages rural-urban migration that results in slums</li> <li>• Uncontrolled entry of aliens increases a country's population and put pressure on basic services. For instance, Kenya has registered entry of over 2 million Somalis in just a decade due lax immigration laws enforcement.</li> <li>• The Kenya Household Demographic and Health Survey reports indicate that high income households have lower birth rates.</li> <li>• High infant, child and maternal mortality rates, especially among poor</li> </ul>
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		<p>communities is a justification for higher birth rates as a survival strategy</p>
<p><b>International Level</b></p>	<ul style="list-style-type: none"> <li>• Lobbying for funding from developed nations to support population management programmes. These include <ul style="list-style-type: none"> <li>○ Family planning programmes</li> <li>○ Poverty eradication programmes</li> </ul> </li> <li>• Sharing of technological advances in birth control measures</li> <li>• Research on diseases to reduce death rates</li> <li>• International collaboration to enforce immigrations laws</li> <li>• Anti-dumping laws and regulations that ban dumping of fake or ineffective fertility control drugs in developing countries</li> </ul>	<ul style="list-style-type: none"> <li>• Increasing population growth in developing countries has assumed global significance hence the need rational for developed countries to support population management through agencies such as the United Population Fund Agency (UNFPA).</li> <li>• Technological information sharing and research can be done through technological transfer mechanisms incorporated in foreign aid</li> <li>• This can be done through joint policing of borders and international waters</li> <li>• Many sub-standard and or fake contraceptives have been dumped in developing countries with disastrous consequences on the health of users.</li> </ul>

*Reflection questions*

Discuss the successes and failures of family planning in Kenya.

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