
UNIT 1 INTRODUCTION TO POPULATION

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1.0 OBJECTIVES

After reading this unit, you will be able to:

- define the terms related to population dynamics;
- explain the meaning and concept of sustainable development;
- define Human Development; and
- explain population and sustainability within a human rights framework.

1.1 INTRODUCTION

For studying population, one has to get into details of size, growth, distribution and composition of the population. There are various processes through which size and composition of population change. The processes are nuptiality or

marriages, reproduction or births, mortality or deaths; migration of people from one place to another (both within a country and different countries) and social mobility leading to changes in social stratification (primarily caused by changes in education, work and occupation). Size composition and processes of population affect society and social institutions directly or through economic and environmental factors. The term size refers to the total number of people inhabiting an area. Composition refers to classification of population according to characteristics like age, sex and marital status. Some specific characteristics of population such as rural-urban location or geographical divisions are studied under the aegis of population distribution.

Size, growth, composition and distribution of population are interrelated. In a territory of given size, population cannot increase indefinitely. Therefore, as we will see later size of population determines at what rate the population would be growing. Composition of population also affects the growth of population. In turn rate of growth affects the composition of population. Most of the rapidly growing populations are younger than the declining populations or populations growing at a very slow pace. Rate of growth also affects the distribution directly and indirectly. One reason behind this is that all the regions and groups in a country do not grow at the same rate, while some regions and groups may grow at a fast pace others may grow only at a slow pace or even decline, leading to spatial and social class differences in growth rate of population. In most countries, therefore, the governments are not only concerned about overall growth rate of population, but also about size, distribution and composition.

1.1.1 Population Size

As said earlier, the term size refers to what is the total number of people inhabiting an area. This area may be the world as a whole, a nation, a region, a locality or a ward within a locality. The number includes both males and females and all age groups. Population density refers to number of individuals living per unit area. It is expressed as population per square kilometre.

The following table gives the population in India and for different states from the 2011 Census.

Table 1.1: Population Density and Size in India and States

India/State/ Union Territory	Population Density (Persq.Km)	Total population		
		Persons	Males	Females
India	382	1210193422	623724248	586469174
Jammu & Kashmir	124	12548926	6665561	5883365
Himachal Pradesh	123	6856509	3473892	3382617
Punjab	550	27704236	14634819	13069417
Chandigarh	9252	1054686	580282	474404
Uttarakhand	189	10116752	5154178	4962574
Haryana	573	25353081	13505130	11847951
NCT of Delhi	11297	16753235	8976410	7776825
Rajasthan	201	68621012	35620086	33000926
Uttar Pradesh	828	199581477	104596415	94985062

Bihar	1102	103804637	54185347	49619290
Sikkim	86	607688	321661	286027
Arunachal Pradesh	17	1382611	720232	662379
Nagaland	119	1980602	1025707	954895
Manipur	122	2721756	1369764	1351992
Mizoram	52	1091014	552339	538675
Tripura	350	3671032	1871867	1799165
Meghalaya	132	2964007	1492668	1471339
Assam	397	31169272	15954927	15214345
West Bengal	1029	91347736	46927389	44420347
Jharkhand	414	32966238	16931688	16034550
Odisha	269	41947358	21201678	20745680
Chhattisgarh	189	25540196	12827915	12712281
Madhya Pradesh	236	72597565	37612920	34984645
Gujarat	308	60383628	31482282	28901346
Daman & Diu	2169	242911	150100	92811
Dadra & Nagar Haveli	698	342853	193178	149675
Maharashtra	365	112372972	58361397	54011575
Andhra Pradesh	308	84665533	42509881	42155652
Karnataka	319	61130704	31057742	30072962
Goa	394	1457723	740711	717012
Lakshadweep	2013	64429	33106	31323
Kerala	859	33387677	16021290	17366387
Tamil Nadu	555	72138958	36158871	35980087
Puducherry	2598	1244464	610485	633979
Andaman & Nicobar Islands	46	379944	202330	177614

Source: *Census, 2011*

1.1.2 Population Growth

Population growth refers to growth in human populations. Population Growth rate shows percent change in population of an area and is expressed on per year basis. It is computed from quinquennial and decennial censuses of population. Suppose the population of a country is 100,345 in year 1991 and it has risen to 120619 in year 2001, then the decadal growth rate of the population is $\{(120619-100345)/100345\} * 100$ i.e., 20.20 percent. One per year basis it may be defined as 2.02 percent per year (average annual rate of growth). In advanced technical discussions in place of simple growth rate, exponential growth rate is preferred. This is computed by using the following formula:

$$P_t = P_0 e^{rt}$$

Where P_t refers to population at time t . P_0 to population at time 0, r to rate of growth and t to time. For short time it does not matter much whether you use the decadal growth rate method or exponential growth rate method. The former assumes a discrete change in population size, the latter a continuous change.

Table 1.2: Decadal Growth Rate of Population in India and States

India/states/UT	Decadal growth rate(%)
India	17.64
Jammu & Kashmir	23.71
Himachal Pradesh	12.81
Punjab	13.73
Chandigarh	17.10
Uttarakhand	19.17
Haryana	19.90
NCT of Delhi	20.96
Rajasthan	21.44
Uttar Pradesh	20.09
Bihar	25.07
Sikkim	12.36
Arunachal Pradesh	25.92
Nagaland	-0.47
Manipur	18.65
Mizoram	22.78
Tripura	14.75
Meghalaya	27.82
Assam	16.93
West Bengal	13.93
Jharkhand	22.34
Odisha	13.97
Chhattisgarh	22.59
Madhya Pradesh	20.30
Gujarat	19.17
Daman & Diu	53.54
Dadra & Nagar Haveli	55.50
Maharashtra	15.99
Andhra Pradesh	11.10
Karnataka	15.67
Goa	8.17
Lakshadweep	6.23
Kerala	4.86
Tamil Nadu	15.60
Puducherry	27.72
Andaman & Nicobar Islands	6.68

Source: *Census, 2011*

1.1.3 Population Composition

Among various characteristics of population, age and sex composition are the most important ones.

1.1.3.1 Sex Ratio

Sex composition of population is commonly studied by calculating sex ratio which is defined as the number of females per thousand males (in Indian context). Improvement in sex ratio is often seen as indicative of empowerment of women.

Sex Ratio= (Number of Females/Number of Males)*1000

Table 1.3: Sex Ratio in India and States, 2011

India/states/UT	Sex Ratio
India	940
Jammu & Kashmir	883
Himachal Pradesh	974
Punjab	893
Chandigarh	818
Uttarakhand	963
Haryana	877
NCT of Delhi	866
Rajasthan	926
Uttar Pradesh	908
Bihar	916
Sikkim	889
Arunachal Pradesh	920
Nagaland	931
Manipur	987
Mizoram	975
Tripura	961
Meghalaya	986
Assam	954
West Bengal	947
Jharkhand	947
Odisha	978
Chhattisgarh	991
Madhya Pradesh	930
Gujarat	918
Daman & Diu	618
Dadra & Nagar Haveli	775
Maharashtra	925
Andhra Pradesh	992
Karnataka	968
Goa	968
Lakshadweep	946
Kerala	1084
Tamil Nadu	995
Puducherry	1038
Andaman & Nicobar Islands	878

Source: *Census, 2011*

1.1.3.2 Child Sex Ratio

In India population scientists also calculate sex ratio for age group 0-6. This is known as Child Sex Ratio. This has special significance. Low sex ratio for the age group 0-6 suggests that either there is practice of female foeticide or there is neglect of female babies due to which they have higher mortality than

males. Percentage of young, aged less than 15 years and percentage of old population, aged 65 and more are of common interest to population scientists. Increase in population of aged 65 and more leads to ageing of population and it results mainly from declining fertility. Ratio of population of old to population of young multiplied by 100 or 1000 is called "Dependency ratio". Ratio of population aged 80+ to population 65+ indicates ageing among the aged. Dependency ratio is closely related to labour force participation rate which is expressed as the number of workers (including those looking for work) as a ratio of the total population.

Table 1.4: Child Sex Ratio in India and States, 2011

India/states/UT	Child Sex Ratio
India	914
Jammu & Kashmir	859
Himachal Pradesh	906
Punjab	846
Chandigarh	867
Uttarakhand	886
Haryana	830
NCT of Delhi	866
Rajasthan	883
Uttar Pradesh	899
Bihar	933
Sikkim	944
Arunachal Pradesh	960
Nagaland	944
Manipur	934
Mizoram	971
Tripura	953
Meghalaya	970
Assam	957
West Bengal	950
Jharkhand	943
Odisha	934
Chhattisgarh	964
Madhya Pradesh	912
Gujarat	886
Daman & Diu	909
Dadra & Nagar Haveli	924
Maharashtra	883
Andhra Pradesh	943
Karnataka	943
Goa	920
Lakshadweep	908
Kerala	959
Tamil Nadu	946
Puducherry	965
Andaman & Nicobar Islands	966

Source: *Census, 2011*

1.1.4 Population Distribution

It is a more general term than composition. It refers to any statistical classification of population according to a given characteristic. The most commonly used types of population distribution are urban-rural and spatial distribution of population. It is obtained by calculating percentage of total population living in urban areas and in different geographical regions.

Percent urban = $\frac{\text{urban population}}{\text{total population}} \times 100$

Percent of population living in Odisha = $\frac{\text{Population of Odisha}}{\text{total population}} \times 100$

Table 1.5: Rural Urban Distribution of Population and Proportion of Rural and Urban Population-India/State/Union Territory: Census 2011

India/States/UT	Population			Population (in%)	
	Total	Rural	Urban	Rural	Urban
India	1210193422	833087662	37705760	68.84	31.16
Jammu & Kashmir	12548926	9134820	3414106	72.79	27.21
Himachal Pradesh	6856509	6167805	688704	89.96	10.04
Punjab	27704236	17316800	10387436	62.51	37.49
Chandigarh	1054686	29004	1025682	2.75	97.25
Uttarakhand	10116752	7025583	3091169	69.45	30.55
Haryana	25353081	16531493	8821588	65.21	34.79
NCT of Delhi	16753235	419319	16333916	2.50	97.50
Rajasthan	68621012	51540236	17080776	75.11	24.89
Uttar Pradesh	199581477	155111022	44470455	77.72	22.28
Bihar	103804637	92075028	11729609	88.70	11.30
Sikkim	607688	455962	151726	75.03	24.97
Arunachal Pradesh	1382611	1069165	313446	77.33	22.67
Nagaland	1980602	1406861	573741	71.03	28.97
Manipur	2721756	1899624	822132	69.79	30.21
Mizoram	1091014	529037	561977	48.49	51.51
Tripura	3671032	2710051	960981	73.82	26.18
Meghalaya	2964007	2368971	595036	79.92	20.08
Assam	31169272	26780516	4388756	85.92	14.08
West Bengal	91347736	62213676	29134060	68.11	31.89
Jharkhand	32966238	25036946	7929292	75.95	24.05
Odisha	41947358	34951234	6996124	83.32	16.68
Chhattisgarh	25540196	19603658	5936538	76.76	23.24
Madhya Pradesh	72597565	52537899	20059666	72.37	27.63
Gujarat	60383628	34670817	25712811	57.42	42.58
Daman & Diu	242911	60331	182580	24.84	75.16
Dadra & Nagar Haveli	342853	183024	159829	53.38	46.62

Maharashtra	112372972	61545441	50827531	54.77	45.23
Andhra Pradesh	84665533	56311788	28353745	66.51	33.49
Karnataka	61130704	37552529	23578175	61.43	38.57
Goa	1457723	551414	906309	37.83	62.17
Lakshadweep	64429	14121	50308	21.92	78.08
Kerala	33387677	17455506	15932171	52.28	47.72
Tamil Nadu	72138958	37189229	34949729	51.55	48.45
Puducherry	1244464	394341	850123	31.69	68.31
Andaman & Nicobar Islands	379944	244411	135533	64.33	35.67

Source: *Census, 2011*

Changes in spatial distribution of population, i.e., percent of population living in different states or regions may be caused by differential in fertility or mortality or the process of migration (movement of people) from one state or region to another for education, employment, marriage or other reasons. Population distribution, as defined above, can be compared between different countries/societies; as it makes the numbers in any category of study free from the effect of size of total population.

Check Your Progress 1

Note: a) Use the space below for your answer.

b) Compare your answers with those given at the end of the unit.

1) What are the different parameters used to describe population?

.....

2) What is population growth? What are the various ways to describe it?

.....

3) What is population distribution? What are the various ways to describe population distribution?

.....

1.2 SUSTAINABLE DEVELOPMENT

Sustainable development is development that meets the needs of the present without compromising the ability of future generations to meet their own needs. It contains within it two key concepts:

- *the concept of needs, in particular the essential needs of the world's poor, to which overriding priority should be given; and*
- *The idea of limitations imposed by the state of technology and social organization on the environment's ability to meet present and future needs."*

All definitions of sustainable development pre-suppose that we see the world as a system—a system that connects space; and a system that connects time. When you think of the world as a system over space, you grow to understand that air pollution from North America affects air quality in Asia, and that pesticides sprayed in Argentina could harm fish stocks off the coast of Australia. When you think of the world as a system over time, you start to realize that the decisions our grandparents made about how to farm the land continue to affect agricultural practice today; and the economic policies we endorse today will have an impact on urban poverty when our children are adults.

We also understand that quality of life is a system, too. It's good to be physically healthy, but what if you are poor and don't have access to education? It's good to have a secure income, but what if the air in your part of the world is unclean? And it's good to have freedom of religious expression, but what if you can't feed your family?

The concept of sustainable development is rooted in this sort of systemic thinking. It helps us understand ourselves and our world. The problems we face are complex and serious—and we can't address them in the same way as we created them. But we *can* address them.

1.3 HUMAN DEVELOPMENT: KEY CONCEPTS AND DEFINITIONS

Human development has moved to the centre of the global development debate. It is being incorporated in the development strategy of the world. Now it is in the core of the UN's International Development Strategy. Human development as a concept is broad and comprehensive. But it is guided by simple idea – people always come first. The real objective of development is to increase people's choices. Income is one aspect of these choices – and an extremely important one- but it is not the sum total of human existence. Health, education, a good physical environment and freedom are also important.

The concept of human development was largely developed by UNDP. Since 1990 the UNDP is publishing annual report known as Human Development Report which is of immense use for students, teachers, researches as well as policy makers. These reports are so popular that many countries and even some states of India have prepared similar reports. The National Human Development Report, 2001 was prepared by Planning Commission of India. Most of the states have also prepared similar report.

Human development is defined as a process of enlarging people's choices. In principle these choices can be infinite and change over time. But at all level of development the three essentials are to lead long and healthy life, to acquire knowledge and to have access to the resources needed for a decent standard of living.

If these choices are available, other opportunities will become accessible. However, additional choices such as political, economic and social freedom, opportunities to be creative and productive, enjoying personal self esteem/respect and human rights could also be there. These choices can be met by ensuring equal and sustainable opportunities to all in the society and empowerment of people so that they participate in and benefit from development processes.

The term 'human development' refers to the process of widening people's choices and ensuring well being. Thus, Human Development has two sides:

- Formation of Human capabilities such as improved health, knowledge and skill.
- To make use the acquired capabilities for productive purposes, leisure, and for being active in cultural, social and political affairs.

The major elements in concept of Human Development are:

Productivity

- People must be able to increase their productivity
- People must be able to participate fully in the process of income generation and remunerative employment

Equity

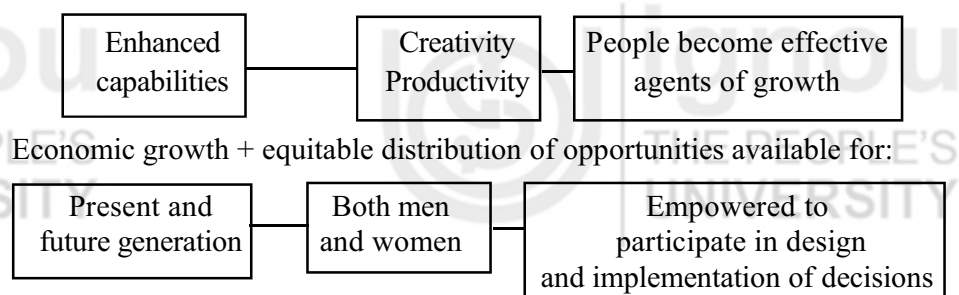
- People must have access to equal opportunities
- All barriers to economic and political opportunities should be eliminated
- People should be able to participate in and benefit from, these opportunities.

Sustainability

- Access to opportunities must be ensured for present as well as future generations
- All forms of capital -physical, human and environmental should be replenished.

Empowerment

- Development must be by people not only for them.
- People must participate fully in the decisions and processes that shape their lives.



Human Development is much broader than the conventional economic development.

- Economic Growth is a subset of Human Development. Economic Growth models deal with expanding GNP rather than enhancing the quality of human lives.

- Welfare approaches look at human beings as beneficiaries and not as agents of change in development.
- Human Development brings together the production and distribution of commodities and the expansion and use of human capabilities.
 - Human Resource Development (HRD) treats human beings as an input in production process - a means rather than an end.
 - Basic Needs Approach (BNA) focuses on providing material goods and services to deprived population groups rather than enlarging human choices in all fields.

Human development approach analyses all issues in society; economic growth, trade, employment, political freedom or cultural values - from people's perspective.

Thus, enlarging choices is the crux of Human development and it therefore has within its fold Gender Equity. Human Development is impossible without gender equity. If women are excluded - lopsided development will occur because nearly one half of the population is not being accounted for. Sustainable Human Development implies engendering the development paradigm because: Human Development if not stimulated is endangered.

Some of the conclusions and policy messages of human development are:

- Average progress in human development conceals large disparities within developing countries- between urban and rural areas, between men and women, between rich and poor.
- The link between economic growth and human progress is not automatic.
- Developing countries are not so poor to pay for human development and take care of economic growth.
- A significant reduction in population growth rate is absolutely essential for visible improvements in human development and vice-versa.
- A participatory approach including the involvement of NGOs is crucial for any strategy for sustainable human development, as well as balanced population stabilization.

1.3.1 Measuring Human Development

The UNDP has developed a number of composite indices for measurement of human progress and deprivations. Some of these indices are

- 1) Human Development Index (HDI)
- 2) Human Poverty Index –1 (HPI-1)
- 3) Gender Related Development Index (GDI)
- 4) Gender Empowerment Measure (GEM)

The HDI is summary measure of human development. It measures the average achievements in country in three basic dimensions of human development, namely, health, knowledge and the standard of living. The indicators used in quantifying the above dimension are given below.

- A long and healthy life, measured by life expectancy at birth.
- Knowledge, measured by the adult literacy rate (with two-thirds weight) and the combined primary, secondary and tertiary gross enrolment ratio (with one-third weight).

- A decent standard of living, as measured by GDP per capita (PPP US\$).

The computation of HDI involves two steps.

Step 1: Compute Dimensional Index of education, health and income

Step 2: Human Development Index = $\frac{1}{3}$ (Dimensional Index of Health + Dimensional Index on Education + Dimensional Index on Income).

To calculate these dimension indices – the life expectancy, education and GDP indices- minimum and maximum values (goal posts) are chosen for each underlying indicator.

Performance in each dimension is expressed as a value between 0 and 1 by applying the following general formula:

$$\text{Dimension Index} = \frac{\text{Actual value} - \text{Minimum Value}}{\text{Maximum value} - \text{Minimum value}} = \frac{X_i - X_{\min}}{X_{\max} - X_{\min}}$$

Where X max is the maximum value

X min is the minimum value

X_i is the value of i-th observation

The HDI is then calculated as a simple average of the dimension indices.

Table 1.6 : Indictors for Calculating the HDI

Indicator	Maximum value	Minimum value
Life expectancy at birth (years)	85	25
Adult literacy rate	100	0
Combined gross enrolment ratio (%)	100	0
GDP per capita (PPP US\$)	40000	100

Check Your Progress 2

Note: a) Use the space below for your answer.

b) Compare your answers with those given at the end of the unit.

- 1) What is Human Development and how it is measured?

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1.4 CONTEXTUALIZING POPULATION AND SUSTAINABILITY WITHIN A HUMAN RIGHTS FRAMEWORK

Several events in the past have given a road-map to link population and the idea of sustainability with human issues especially human development and human rights.

1.4.1 International Conference on Population & Development (ICPD), 1994 - Watershed in the History of Population Thinking

It is only since 1994, after the International Conference on Population and Development (ICPD) at Cairo, Egypt, there has been a dramatic change in thinking on population issues. In fact ICPD was a watershed in the history of thinking on population issues. Indeed it would not be an exaggeration to suggest that ICPD was a sort of a New World Population Order. It brought about a significant shift in frameworks, strategies and approaches relating to population and public policy issues. ICPD delegates reached a consensus that the equality and empowerment of women is a global priority. It approached this not only from the perspective of universal human rights, but also as an essential step towards eradicating poverty and stabilizing population growth. A woman's ability to access reproductive health and rights is cornerstone of her empowerment. It is also the key to sustainable development. A total of 179 governments including India signed up to the ICPD Programme of Action which set out to

- Provide universal access to family planning and sexual and reproductive health services and reproductive rights;
- Deliver gender equality, empowerment of women and equal access to education for girls;
- Address the individual, social and economic impact of urbanization and migration;
- Support sustainable development and address environmental issues associated with population changes.

The programme of action and benchmarks added at the ICPD +5 reviews went on to inform the eight Millennium Development Goals. The ICPD represented a “quantum leap” for population and development policies as it involved a paradigm shift from the earlier emphasis on Population Control and Demography to Sustainable Development and recognition of the need for Reproductive Health (RH) and Reproductive Rights (RR). It became clear that population was no longer about numbers, figures and statistics but about people and improving their quality of life. It was also agreed that no method specific targets imposed from above, no force, no coercion, no incentives and disincentives are required, because incentives and disincentives are either coercive or ultimately tend to be coercive and are in fact counterproductive. Coercion infringes upon human rights and inhibits human development. The ICPD Programme of Action (PoA) placed “individuals” in the centre of development with a focus on building pillars of Human Development, Human Rights, Gender Equity and Equality.

The central theme of the ICPD was to forge a balance between population, sustained economic growth and sustainable development. The objective of the agreement reached at the Cairo Conference was to raise the quality of life and enhance well-being and to promote human development. The Programme of Action (PoA) rightly emphasized the need to integrate population concern fully into development strategies and planning, taking into account the inter-relationship of population issues with goals of poverty eradication, food security,

adequate shelter, employment and basic services (like health and education) for all.

Two fundamental changes have occurred in recent times in conceptualizing and implementing Population Policies. First is to ensure that Population Policies and Programmes address the root cause of high fertility such as persistent gender disparities in access to education, health, employment and other productive resources. The second is to expand existing Family Welfare Programme beyond contraceptive delivery to include a range of Reproductive Health Services with a greater emphasis on quality of care and individual's right.

Now the focus has become broader and holistic and different in nature. Earlier, Total Fertility Rate (TFR) and Contraceptive Prevalence Rate (CPR) used to be the fixation of most population programmes as they also served as indicators of success. ICPD replaced them with quality of care, informed choice, gender factor, women's empowerment and accessibility to a whole gamut of reproductive health services.

In fact, the International Conference on Population and Development (ICPD) was a milestone in the history of population and development as well as the history of women's rights. It heralded a paradigm shift in the approach to population and development, placed women's equity and equality centre stage and introduced the importance of rights based programming.

1.4.2 National Population Policy, 2000: Conceptualization

This change in thinking, concept and understanding naturally implied a logical change in policies and strategies. Many countries had taken steps to integrate population concerns with their development strategies. In 2000, India announced its National Population Policy (NPP) which takes its basic philosophy from ICPD-PoA and focuses on improving quality of life as the means to achieve population stabilization.

The ICPD has been instrumental in forwarding the notion that population and development programs recognize that the concept of reproductive health care encompasses more than just family planning services. Moreover, it declares that reproductive health and reproductive rights cannot be realized without a concomitant fulfilment of women's human rights. That both sets of rights are interlinked and must be advocated in tandem and that empowering woman is crucial to successful population and development programmes are ideas mainstreamed by the ICPD.

The reference to reproductive health and rights within the debates on population and development that have occurred post-ICPD underscore its influence on subsequent conferences and international documents. The strength of the ICPD's reproductive health approach can also be found in the 2000 Millennium Development Declaration, which however, pays significant attention to highlighting selective issues of reproductive health.

Although the National Population Policy (NPP), 2000 doesn't explicitly talks about reproductive rights, India's commitment to ICPD declaration and the Plan of Action (PoA) indicates the willingness on part of the government to look at Reproductive Health from the perspective of individual's right to access health information and services and individual decision making based

on informed choice. It is true that nowhere in the NPP there is mention of reproductive rights or human rights; but when it comes to reproductive health, the ICPD-PoA has clearly identified a number of areas where these rights are translated into information, education, services, and counselling in issues such as family planning, ante-natal care, safe delivery, post natal care, infertility, abortion, RTIs/ STIs, including AIDS. In discussing the unmet Reproductive Health needs of different population, the PoA recognizes vulnerable and marginalized groups as women, girls, adolescents and elderly.

Drawing from the ICPD – PoA, the most positive feature of the NPP is that it resolutely affirms the commitment of government towards “voluntary and informed choice and consent of citizens while availing of reproductive health care services, and continuation of the target free approach in administering family planning services”. These commitments for human rights and the freedom and dignity of women were translated into a non-targeted family welfare programme, which rightly abjures incentives and disincentives. National Population Policy is the affirmation and articulation of India’s commitment to International Conference on Population and Development (ICPD) agenda. It forms the blueprint for Population and Development Programmes in the Country. It was at the Cairo Conference, that for the first time, a consensus was reached among many countries, including India, which, was a remarkable development in many ways. The ICPD in 1994 successfully adopted a Programme of Action, which constituted a paradigm shift in thinking and action on population issues globally. Though India is yet to fully incorporate the provisions of this convention in its domestic laws, but by virtue of the country being a signatory to this international convention, civil society has a moral right to ask the government not to deviate from its commitment to the ICPD agenda. The National Population Policy, which was formulated and announced in February 2000, is the first ever comprehensive and holistic population policy of the country. The NPP envisages overall economic and social development as the goal to improve the quality of life of the people, to enhance their well being and to provide them with opportunities and choices with a comprehensive, holistic and multi-sectoral agenda for ‘population stabilisation.’ It envisions population stabilisation as a function of accessible and affordable reproductive health; increased coverage and outreach of primary and secondary education; assured availability of basic amenities like sanitation, safe drinking water and housing; women empowerment with enhanced access to education and employment; and infrastructure development like roads and communication. Thus, it promotes open information, awareness, empowerment and development based approach and sums up ‘population stabilisation’ as a multi-sectoral endeavour. In principle, it unequivocally rejects the targets and the incentive/disincentive approaches and provides for a Target-Free Approach (TFA).

The NPP is gender sensitive and incorporates a comprehensive holistic approach to the health and education needs of women, female adolescents and girl child. A primary theme running through the NPP is provision of quality services and supplies and arrangement of a basket of choices i.e. people must be free and enabled to access quality health care, make informed choice and adopt measures for fertility regulation best suited to them.

The Cairo Consensus forged at the 1994 International Conference on Population and Development (ICPD) is underpinned by human rights principles. The

ICPD and ICPD +5 placed population, reproductive health and gender equality in a human rights-based framework linked to human development and sustained economic growth.

A human rights-based approach to programming differs from the basic needs approach in that it recognizes the existence of rights. It also reinforces capacities of duty bearers (usually governments) to respect, protect and guarantee these rights.

In a rights-based approach, every human being is recognized both as a person and as a right-holder. A rights-based approach strives to secure the freedom, well-being and dignity of all people everywhere, within the framework of essential standards and principles, duties and obligations. The rights-based approach supports mechanisms to ensure that entitlements are attained and safeguarded.

Governments have three levels of obligation: to respect, protect and fulfil every right.

- To *respect* a right means refraining from interfering with the enjoyment of the right.
- To *protect* the right means enacting laws that create mechanisms to prevent violation of the right by state authorities or by non-state actors. This protection is to be granted equally to all.
- To *fulfil* the right means to take active steps to put in place institutions and procedures, including the allocation of resources to enable people to enjoy the right. A rights-based approach develops the capacity of duty-bearers to meet their obligations and encourages rights holders to claim their rights.

Rights are indivisible, interdependent and interrelated. The human rights-based approach focuses on those who are most vulnerable, excluded or discriminated against. The human rights-based approach constitutes a framework of action as well as a methodological issue. This approach is also expected to achieve results: sustained progress towards respect of human rights, development, peace, security, and eradication of poverty, population stabilization with gender equity and equality and achievement of the Millennium Development Goals.

1.4.3 Reproductive Rights and Reproductive Health

Reproductive health is a state of complete physical, mental and social well-being in all matters relating to the reproductive system and to its functions and processes. It implies that people have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this is the right of men and women to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, as well as other methods of their choice for regulation of fertility, which are not against the law, and the right of access to health-care services that will enable women to go safely through pregnancy and childbirth. Reproductive health care also includes sexual health, the purpose of which is the enhancement of life and personal relations.

Reproductive rights embrace certain human rights that are already recognized in national laws, international human rights documents and other relevant UN

consensus documents. These rights rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. They also include the right of all to make decisions concerning reproduction free of discrimination, coercion and violence. Full attention should be given to promoting mutually respectful and equitable gender relations and particularly to meeting the educational and service needs of adolescents to enable them to deal in a positive and responsible way with their sexuality.

All countries are called upon to strive to make reproductive health accessible through the primary health-care system to all individuals of appropriate age as soon as possible and no later than 2015.

Reproductive health-care programmes should be designed to serve the needs of women, including adolescents, and must involve women in the leadership, planning, decision-making, management, implementation, organization and evaluation of services. Innovative programmes must be developed to make information, counselling and services for reproductive health accessible to adolescents and adult men. Such programmes must both educate and enable men to share more equally in family planning, domestic and child-rearing responsibilities and to accept major responsibility for the prevention of STDs.

Check Your Progress 3

- Note:** a) Use the space below for your answer.
 b) Compare your answers with those given at the end of the unit.

1) What are the key highlights of the ICPD, 1994 Programme of Action?

.....

2) Describe the key strategies applying human right standards to Reproductive health?

.....

1.5 LET US SUM UP

Population growth refers to the increase in number of individuals at a given place. Population is governed by several factors such as population density, population distribution, etc. Several factors such as sex ratio, birth rate, death rate, etc. determine the population at any given place. The current unit precisely details the meanings of population growth, the causes behind and explains what sustainable development is. Population growth and sustainable development within a Human Rights Framework highlights the significant contributions made by ICPD, 1994 and NPP, 2004. It is also ascertained that the reproductive health should be guaranteed to all the women in order to produce healthy citizens for a healthy society.

1.6 KEY WORDS

Population Growth : It is the change in the total number of people living in an area over a time. Population growth is effected by birth rate, death rate and migration.

Sustainable Development : Sustainable development refers to the development *that meets the needs of the present without compromising the ability of future generations to meet their own needs.*

Human Development Index : Human Development Index measures the average achievements in country in three basic dimensions of human development, viz. health, knowledge and the standard of living.

1.7 REFERENCES AND SUGGESTED READINGS

- 1) Asha Bhende & Tara Kanitkar: Principles of Population Studies
 - 2) Premi, M. K: An Introduction to Social Demography
 - 3) Srivatsava, O.S: A Text Book of Demography
 - 4) Bhaskar, D. Misra: An Introduction to the Study of Population
 - 5) Population Foundation of India, Advocacy Papers on Population Issues.
 - 6) A.K. Shiv Kumar, Pradeep Panda ,Rajani R. Ved, Hand Book of Population and Development in India.
 - 7) A.K. Shiv Kumar, Readings in Human Development: Concepts, Measures and Policies for a Development Paradigm
 - 8) Human Development Report,2013.The United Nations, International Conference on Population and Development,1994,Programme of Action
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1.8 ANSWERS TO CHECK YOUR PROGRESS

Check Your Progress Exercise 1

- 1) Your answer must include the following points:
 - Size, growth, distribution and composition of population
- 2) Your answer must include the following points:
 - Increase in number of individuals.
 - Decadal growth, exponential growth rate.
- 3) Your answer must include the following points:
 - Rural-urban distribution.

Check Your Progress Exercise 2

- 1) Your answer must include the following points:
 - Enlarging people's choices. Captures three vital parameters-health, education and income.
 - Human Development Index (HDI): Human Poverty Index-1 (HPI-1), Gender Related Development Index (GDI), Gender Empowerment Measure (GEM)

Check Your Progress Exercise 3

- 1) Your answer must include the following points:
 - Sustainability and human rights perspectives of ICPD-POA.
- 2) Your answer must include the following points
 - Creating an enabling environment for policy formulations
 - Widening access to RH services.