

## Country Profiles for Population and Reproductive Health: Policy Developments and Indicators 2005

# 2:

The vast and culturally diverse Asia and the Pacific region is home to 60 per cent of the world's people. It encompasses the huge, rapidly industrializing economies of China and India, the remote, mountainous communities of Nepal and Bhutan and the small Pacific island countries. In the past two decades, spurred on by the International Conference on Population and Development (ICPD) Programme of Action and the Millennium Development Goals (MDGs), the region has made great progress on both the social and economic fronts. But this overall progress marks wide disparities and stark contrasts. Hundreds of millions of people have been lifted out of poverty, yet hundreds of millions of others struggle to survive on less than \$1 a day. Two out of every three people living in extreme poverty live in the Asia and the Pacific region.

The biggest demographic challenge and opportunity of the region is its enormous population of youth. More than half of the world's young people — some 850 million between the ages of 10 and 24 — live in Asia and the Pacific. In some parts of South and South-east Asia, young people make up between one third and one half of the population. This demographic surge of people entering their productive and reproductive years offers great potential for development — if countries invest wisely in the education, health, skills and economic opportunities of youth.

Asia is also home to the majority of the world's older people. People over the age of 60 made up about 9.3 per cent of the region's population in 2005 and are projected to account for almost 15 per cent by 2025. This emerging issue has major ramifications, as the developing countries of Asia and the Pacific still do not have systems of social protection in place, particularly old age security and health insurance for the elderly.

Several Asian countries began addressing population issues decades ago. As a result, population growth rates in the region peaked in the late sixties and early seventies and have been falling ever since. The population growth rate for Asia and the Pacific is now close to the world's average (1.21 per 1,000 population), with some countries having reached fertility levels of 2.1 or below. However, high fertility in some countries, especially in South and West Asia, continues to outpace economic and development gains and stall poverty reduction efforts. The large percentage of young people means that the region will continue to grow for years to come, although some Pacific island countries are losing population and capacity, due to migration.

Urbanization is occurring at an unprecedented pace, bringing with it both problems and possibilities. Nearly 40 million people in the region, many of them women and young people, migrate each year to urban areas in search of economic opportunity. The majority end up living in slum-like conditions characterized by insecure tenure, inadequate housing and a lack of access to water or sanitation. Within the next 15 years, 18 of the projected 27 megacities (urban areas with more than 10 million people) will be in Asia, and over half of the people will live in slums and informal settlements. This urbanization poses serious environmental threats, including high levels of water and air pollution and attendant health risks.

The 2004 tsunami, which claimed the lives of some 300,000 people and displaced whole communities, called attention to the region's acute vulnerability to natural disaster, which is exacerbated by the large numbers of people in crowded cities located in earthquake zones and dense rural settlements in low-lying flood plains. Small islands in the region are already affected by rising sea levels. Few of these countries, however, have the infrastructure for emergency preparedness or the capacity to deal with the social upheaval that follows a major catastrophe.

Although empowering, educating and improving the reproductive health of women are keys to achieving the targets of the ICPD and the MDGs, gender disparities persist in the areas of health, literacy, education, political participation, income and employment. As a result, many women, especially those who are impoverished, are prevented from exercising their human rights and realizing their full potential. Their families, communities and countries miss out as well. Although most countries in the region have signed or ratified the UN Convention on the Elimination of All Forms of Discrimination against Women, not all ensure equal rights for women in their own constitutions. Gender-based violence remains widespread and has only recently been recognized as a significant public health and development concern. A strong preference for sons in some countries has led to pre-natal sex selection or neglect of infant girls, with the result that least 60 million girls are 'missing' in Asia, with potentially serious social consequences.

Considerable progress has been made in closing gender gaps in education in South-east Asia and Bangladesh. Many countries in the region have made significant progress in promoting reproductive health and taking a rights-based approach in the provision of

# Asia and the Pacific

information and services, as called for at the ICPD. However, poor access to reproductive health services in many countries, especially for the poor and those living in remote areas, compromises the well-being and productivity of women and undermines efforts to achieve the targets set by the ICPD and the MDGs. Through some countries (e.g. Vietnam) have narrowed differentials in access to reproductive health services between richer and poorer segments of society, many countries continue to have inequitable distributions of services access and quality. The poor are least able to implement their family size and spacing choices effectively and to deliver their children safely. The high rates of maternal and infant mortality in some countries underscore extreme inequities in health care: In Afghanistan, Bhutan, Cambodia, India, Lao PDR, Nepal, Papua New Guinea and Timor-Leste, maternal mortality ratios exceed 400 per 100,000 live births. These countries, as well as Myanmar, Pakistan and the Philippines, also have large unmet needs in the areas of family planning and reproductive health.

HIV prevention is an urgent reproductive health challenge. Until recently, HIV prevalence in most countries in the region had been restricted to high-risk groups involved in injecting drug use and sex work. There is now a serious threat of the virus quickly spreading to the general population. The Asia and Pacific region has more than 6.5 million people living with HIV/AIDS, some 5 million in China and India alone. Without far-reaching interventions, epidemiologists believe the virus could spread rapidly, creating a new epicentre of the global AIDS pandemic in the next decade and undoing years of development progress. Cambodia, Myanmar and Thailand are already dealing with serious epidemics, but Thailand has shown that it is possible to reverse the spread of the infection with large-scale, sustained and concerted programming.

The situation demands a scaling up AIDS advocacy, prevention and treatment efforts. However, several factors have muted an effective response in some countries, including denial of the problem, stigma and discrimination against those living with the infection, and lack of resources and political commitment. Tackling the issue is further complicated by the increasing volume of migration and by the trafficking of women and youth for the sex industry, especially in the Mekong area.

The large proportion of young people in the region could also help fuel an epidemic, especially because the reproductive health needs of young people have been overlooked in many countries. A major initiative to prevent HIV, and address other sexual and reproductive health concerns of young people, was launched in early 2003 with funding from the European Union. The Reproductive Health Initiative for Youth in Asia covers projects for both urban and rural youth in seven South and Southeast Asian countries (Bangladesh, Cambodia, Lao PDR, Pakistan, Nepal, Sri Lanka and Viet Nam). All have prioritized HIV prevention and emphasize gender equality.

The UN Millennium Project refers to East and South-east Asia as having shown 'tremendous progress' in the reduction of poverty, hunger and gender inequality, and many countries in this subregion are on target to reach most of the MDGs. Their social and economic progress was associated with investments in reproductive health, including family planning, and education, as well as the 'demographic bonus' of a large cohort of young people entering the workforce. This demographic window is now opening for South Asia, offering the possibility for improving lives and reducing poverty on a large scale, if governments strengthen their investments in human capital and reduce inequities. Slow progress (and a backsliding for some health targets) suggests that greater efforts will need to be made if the Pacific island countries are to achieve the MDGs.

# Afghanistan

## Overview

Over two decades of war, ethnic conflict and drought have led to widespread human suffering and massive displacement of Afghanistan's almost 30 million people. As one of the least developed countries, Afghanistan's health status is among the poorest in the world.

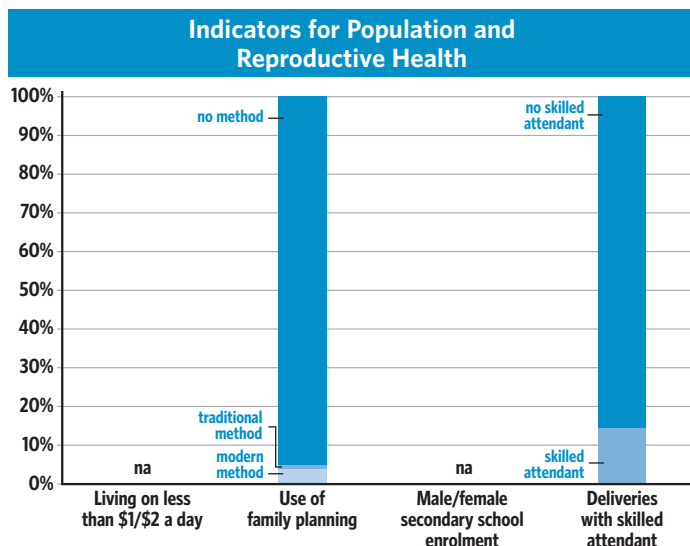
Life expectancy at birth is 47 years, among the lowest. Infant, child and maternal mortality rates are excessively high. The maternal mortality ratio, for instance, is 1,900 deaths per 100,000 live births. Communicable diseases are prevalent and continue to be one of the major causes of death. Poverty, limited access to safe water, poor sanitation, malnutrition and low levels of education contribute to the deterioration of human health.

Under the draft National Health Policy, the Ministry of Public Health (MOPH) is determined to achieve the goal of "health for all". In order to reduce maternal deaths and disabilities, the policy facilitates access to a full range of affordable reproductive health services, especially maternal care and treatment of obstetric emergencies.

The lack of data is one of the major constraints facing the health system. At the request of the MOPH, UNFPA supported an assessment of reproductive health care throughout the country, undertaken by the Japanese NGO Health and Development Services (HANDS). The data will be used to determine needs and assistance priorities.

Under the National Development Framework, quality education has been emphasized as the foundation for poverty reduction and economic growth. Improving access to the educational system for women and girl children has become a priority.

The Afghanistan Census of Population and Housing, under the direction of the Afghan Central Statistical Office with financial and technical support from UNFPA, will take place in two phases. The first phase, the household listing exercise, has been completed, facilitating logistical planning for the recent elections. The data also provided much-needed information for development policies and strategies. The final phase will include the full census.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	7,546.9	15,404.1
Population in Thousands, Female	7,059.5	14,458.9
Population Growth Rate, %	na	4.1
Crude Birth Rate per 1,000 Population	51.4	47.7
Crude Death Rate per 1,000 Population	20.8	18.7
Urban Population, %	18.2	24.3
Sex Ratio at Birth, Male Births per Female Births	1.06	1.06
Women 15-49, %	44.0	44.0
Total Fertility Rate per Woman 15-49	7.95	7.51
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	3.6
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	4.8
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 1,700	1,900
MMR, Lower Bound	● ▲ na	470
MMR, Upper Bound	● ▲ na	3,500
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	60.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 153.0	145.4
Under Age 5 Mortality Rate, Total	● ▲ 257	244
Under Age 5 Mortality Rate, Female	● ▲ na	283
Under Age 5 Mortality Rate, Male	● ▲ na	278
Life Expectancy at Birth, Total, Years	● ▲ 45.1	46.9
Life Expectancy at Birth, Female, Years	● ▲ 45.3	47.1
Life Expectancy at Birth, Male, Years	● ▲ 44.9	46.6
Median Age of Total Population	● ▲ 17.1	16.7
Population 60 Years and Over, %	● ▲ 4.7	4.4
Dependency Ratio	● ▲ 94	97

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>3.10</b>	<b>5.43</b>	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	97.0/121.0
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	na
Gross Domestic Product Growth Rate, Annual %	na	na
Income Group per World Bank Classification	na	Low income
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ 21	13
Antenatal Care, At Least One Visit, %	8	16
Deliveries Attended by Skilled Attendants, %	●▲ 8	14
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	na	na
Illiteracy Rate, % of Population 15 and Over, Female	na	na
Illiteracy Rate, % of Population 15 to 24, Male	na	na
Illiteracy Rate, % of Population 15 to 24, Female	na	na
Ratio of Girls to Boys, Primary Education	▲ 0.52	0.52
Ratio of Girls to Boys, Secondary Education	▲ na	na
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	120
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	63
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	24
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	na
Children Underweight Under 5, Male, %	na	50
Children Underweight Under 5, Female, %	na	45
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	70.0
Refugees, Number	60,000	7
Internally Displaced Persons, Number	na	82,067
Asylum Seekers, Number	na	32
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	18.7	19.2
Age-Specific Fertility Rate per 1,000 Women, 15-20	161.0	122.5
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	na	25.3
Mean Age at Marriage, Female	na	17.8
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	87.7
Labor Force Participation Rate, 15-64, Female	na	48.9
Seats in Parliament Held by Women, %	3.0	3.0
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	4,155.0
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	45.4
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	34.8/6.9
No Education, Primary, %	10.7
Highest Level of Education, %	42.8
Provincial Low/High, %	0.4/60.1 Sar I Pol/Jalalabad City
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	16.7/5.3
No Education, Primary, %	3.2
Highest Level of Education, %	5.3
Provincial Low/High, %	0.2/56.4 Paktika/Herat City
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	14.0
Highest Level of Education, %	6.5
Provincial Low/High, %	13.2/13.9 South-Eastern/Eastern
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Bangladesh

## Overview

Bangladesh, with an estimated population of almost 142 million, is the largest of the least developed countries. The contraceptive prevalence rate increased from 45 per cent in 1994 to 54 per cent in 2000. Despite this, the total fertility rate has remained almost constant for nearly a decade, and is now at 3.7 lifetime births per woman. The Health and Population Sector Programme, begun in 1998, ended in 2003. In a major policy change, the government introduced the Health, Nutrition, and Population Sector Program for 2004-2006, under which field activities in population and health are managed separately.

Other pressing concerns include diversifying the contraceptive method mix, ensuring safe deliveries and improving the quality of care. By early 2004, a successful pilot initiative trained over 300 skilled birth attendants in 15 districts.

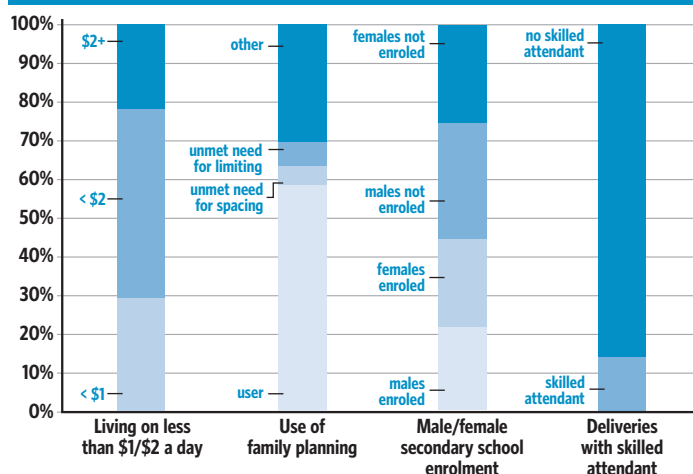
The government aims to reduce its current 1.8 per cent annual population growth rate in an effort to promote sustainable socio-economic development and reduce poverty. UNFPA and others continue to provide support to the government in carrying out nationwide behavior change communication programmes on issues such as safe motherhood and the prevention of HIV/AIDS.

Bangladesh is a country with low HIV prevalence but high vulnerability given rising prevalence rates among sex workers and cases of hepatitis C in injecting drug users. National commitment to HIV/AIDS prevention is strong and the World Bank, along with other donors, is providing support.

In 2003, the government finalized the Interim Poverty Reduction Strategy Paper. Most of the Millennium Development Goals were incorporated into the strategy, including the elimination of gender disparities in primary and secondary education, reducing maternal mortality, eliminating gender-based violence, and reducing infant and child mortality. Ensuring the availability of reproductive health services was included.

The government continues to: focus on maintaining contraceptive security, including emergency contraception; address adolescent fertility, which remains high; and improve access to maternal and emergency obstetric care. It also set up the first pilot fistula centre in the country with a dedicated operation theater and recovery ward.

### Indicators for Population and Reproductive Health



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	53,602.4	72,459.0
Population in Thousands, Female	50,444.2	69,363.2
Population Growth Rate, %	na	1.8
Crude Birth Rate per 1,000 Population	35.2	32.5
Crude Death Rate per 1,000 Population	12.2	7.6
Urban Population, %	19.8	25.0
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	48.6	52.3
Total Fertility Rate per Woman 15-49	4.37	3.67
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	43.4
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	53.8
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 850	380
MMR, Lower Bound	● ▲ na	320
MMR, Upper Bound	● ▲ na	450
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	36.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 95.9	54.2
Under Age 5 Mortality Rate, Total	● ▲ 124	72
Under Age 5 Mortality Rate, Female	● ▲ na	90
Under Age 5 Mortality Rate, Male	● ▲ na	85
Life Expectancy at Birth, Total, Years	● ▲ 54.6	63.7
Life Expectancy at Birth, Female, Years	● ▲ 55.0	64.6
Life Expectancy at Birth, Male, Years	● ▲ 54.4	62.8
Median Age of Total Population	● ▲ 19.2	22.1
Population 60 Years and Over, %	● ▲ 5.1	5.7
Dependency Ratio	● ▲ 79	64

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>0.80</b>	<b>2.84</b>	<b>2.16</b>	<b>46.21</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	2.5/3.2
No Education, Primary	3.8
Highest Level of Education	2.5
Provincial Low/High	2.6/4.3 Khulna/Sylhet
Poorest/Richest Quintile	3.8/2.2

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	64.6/72.9
No Education, Primary	82.7
Highest Level of Education	49.2
Provincial Low/High	54.9/101.4 Chittagong/Sylhet
Poorest/Richest Quintile, %	92.9/57.9

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	139.7/72.4
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	110.0/142.0
Poorest/Richest Quintile	187.0/91.0

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	26.9/35.4
No Education, Primary, %	55.1



SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	1,786
Gross Domestic Product Growth Rate, Annual %	4	6
Income Group per World Bank Classification	na	Low income
Population Below \$1/Day, %	▲ na	29.1
Population Living Below National Poverty Line, %	▲ na	49.8
Share of Income or Consumption by Poorest Quintile	na	3.9
Access to Improved Water Supply, %	▲ 78	75
Antenatal Care, At Least One Visit, %	na	49
Deliveries Attended by Skilled Attendants, %	●▲ 7	14
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	74.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	55.5
Illiteracy Rate, % of Population 15 and Over, Male	56	48
Illiteracy Rate, % of Population 15 and Over, Female	76	67
Illiteracy Rate, % of Population 15 to 24, Male	49	41
Illiteracy Rate, % of Population 15 to 24, Female	67	57
Ratio of Girls to Boys, Primary Education	▲ 0.81	0.96
Ratio of Girls to Boys, Secondary Education	▲ na	0.99
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	94
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	98
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	45
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	50
Children Underweight Under 5, Male, %	na	46
Children Underweight Under 5, Female, %	na	50
Stunted Children under 5, Severe, %	na	18
Wasted Children under 5, Severe, %	na	1
Undernourished People, %	35.0	32.0
Refugees, Number	245,000	19,792
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	8
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	20.4	20.3
Age-Specific Fertility Rate per 1,000 Women, 15-20	168.0	120.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	25.5	25.5
Mean Age at Marriage, Female	18.0	18.0
Married by 18, Percent, Female, 25-49	na	82.5
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	22.0
HIV Prevalence, 15-24, Total	▲ na	0.0
HIV Prevalence, 15-24, Female	▲ na	0.0
HIV Prevalence, 15-24, Male	▲ na	0.0

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	0.2
Gender Empowerment Measure, Rank	na	76.0
Malnourished Women, %	na	52.0
Labor Force Participation Rate, 15-64, Male	na	89.8
Labor Force Participation Rate, 15-64, Female	na	57.2
Seats in Parliament Held by Women, %	10.0	2.0
Female Legislators, Senior Officials and Managers, %	na	8.0
Female Professional and Technical Workers, %	na	25.0

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	12,173.8
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	27.4
Unmet Need for Family Planning, Spacing, %	● na	5.1
Unmet Need for Family Planning, Limiting, %	● na	6.3
Unmet Need for Family Planning, Total, %	● na	11.3
Unmet Need for Family Planning, Thousands	● na	4235.4

Highest Level of Education	22.4	
Provincial Low/High, %	22.4/24.6	Sylhet/Khulna
<b>Deliveries Attended by Skilled Attendants:</b>		
Urban/Rural, %	29.6/9.4	
No Education, Primary, %	4.4	
Highest Level of Education, %	55.2	
Provincial Low/High, %	10.6/21.2	Rajshahi/Khulna
Poorest/Richest Quintile, %	3.5/42.1	
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>		
Urban/Rural, %	51.6/46.0	
No Education, Primary, %	48.3	
Highest Level of Education, %	49.1	
Provincial Low/High, %	22.0/57.8	Sylhet/Rajshahi
Poorest/Richest Quintile, %	37.4/50.2	
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>		
Poorest/Richest Quintile, %	43.4/57.4	
<b>Unmet Need for Family Planning, Limiting:</b>		
Poorest/Richest Quintile, %	10.0/5.1	
<b>Unmet Need for Family Planning, Spacing:</b>		
Poorest/Richest Quintile, %	10.3/5.4	

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>		
Poorest/Richest Quintile, %	13.2/41.8	
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>		
Poorest/Richest Quintile, %	27.4/38.0	
<b>Children Underweight Under 5, Severe:</b>		
Urban/Rural, %	12.0/13.0	
No Education, Primary, %	17.0	
Highest Level of Education, %	3.0	
Provincial Low/High, %	8.3/16.2	Khulna/Chittagong
Poorest/Richest Quintile, %	24.5/9.9	
<b>Girls 6-10 Who Currently Attend School:</b>		
Poorest/Richest Quintile, %	65.1/84.0	
<b>Boys 6-10 Who Currently Attend School:</b>		
Poorest/Richest Quintile, %	61.3/89.6	
<b>Malnourished Women:</b>		
Poorest/Richest Quintile, %	64.5/32.6	
<b>Antenatal Care, At Least One Visit:</b>		
Poorest/Richest Quintile, %	19.4/69.8	

# Bhutan

## Overview

With high fertility and declining mortality rates, Bhutan's population is growing by 2.2 per cent per year. Since the country introduced national development plans in 1961, Bhutan has placed people at the centre of its development agenda. This approach has led to striking improvements in the quality of life for Bhutanese.

Although no explicit population policy exists, a chapter on Population and Development was introduced in the 8th Five Year Plan (1997-2002). The government's policy approach includes strong political commitment to reduce population growth, improve and expand the primary health care network, deliver quality reproductive health care at the grass root level, and expand maternal and child health services.

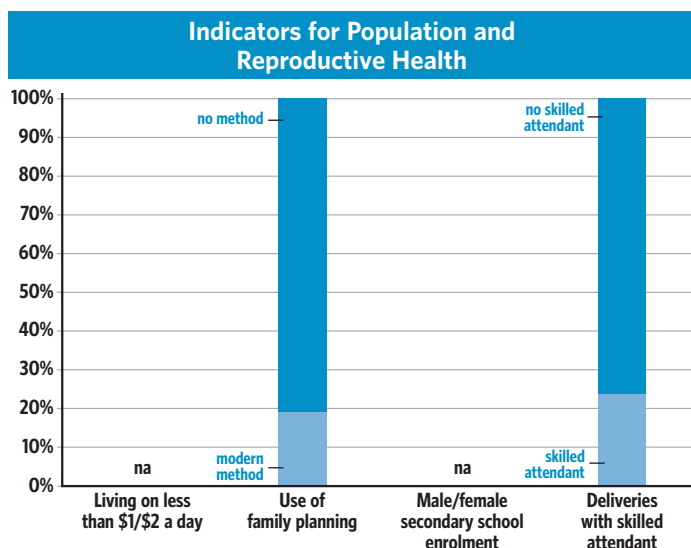
*The Royal Decree on Population Planning*, issued by the King, was followed by a nationwide campaign with the slogan "Small Family, Happy Family."

In implementing these policies, specific strategies have been developed to: raise awareness of and improve access to comprehensive reproductive health services, including a wider range of contraceptives; create special programmes for adolescents; and promote community involvement.

With more than 40 per cent of the population of 2.1 million below the age of 15, programmes addressing the special needs of young people increasingly are given high priority in the health and education sectors.

HIV/AIDS is still at an early stage, however the rate of new infections is accelerating. A recent Royal Decree issued by the King strengthens the country's commitment to take preventive measures against its spread.

Ratification of international agreements such as the UN's Convention on Elimination of all forms of Discrimination Against Women (CEDAW) and Convention on the Rights of the Child underscore the value attached to the status of women and children. Gender needs and interests are mainstreamed in all aspects of the 9th Five Year Plan. Some specific strategies include: improvement of maternal and child health; catering to the special needs of girl students; and creation of favourable employment conditions for women, enabling them to pursue careers while raising children.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	830.4	1,095.7
Population in Thousands, Female	811.3	1,066.9
Population Growth Rate, %	na	2.2
Crude Birth Rate per 1,000 Population	38.8	36.0
Crude Death Rate per 1,000 Population	13.6	8.3
Urban Population, %	5.5	9.1
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	46.2	48.3
Total Fertility Rate per Woman 15-49	5.66	4.75
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	18.8
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	18.8
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 1,600	420
MMR, Lower Bound	● ▲ na	110
MMR, Upper Bound	● ▲ na	780
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	38.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 91.5	51.8
Under Age 5 Mortality Rate, Total	● ▲ 129	77
Under Age 5 Mortality Rate, Female	● ▲ na	78
Under Age 5 Mortality Rate, Male	● ▲ na	82
Life Expectancy at Birth, Total, Years	● ▲ 53.6	63.8
Life Expectancy at Birth, Female, Years	● ▲ 54.7	65.0
Life Expectancy at Birth, Male, Years	● ▲ 52.7	62.6
Median Age of Total Population	● ▲ 19.2	20.1
Population 60 Years and Over, %	● ▲ 5.9	7.0
Dependency Ratio	● ▲ 83	75

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>4.15</b>	<b>11.06</b>	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	na
Gross Domestic Product Growth Rate, Annual %	na	7
Income Group per World Bank Classification	na	Low income
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ 34	62
Antenatal Care, At Least One Visit, %	na	na
Deliveries Attended by Skilled Attendants, %	●▲ 11	24
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	na	na
Illiteracy Rate, % of Population 15 and Over, Female	na	na
Illiteracy Rate, % of Population 15 to 24, Male	na	na
Illiteracy Rate, % of Population 15 to 24, Female	na	na
Ratio of Girls to Boys, Primary Education	▲ na	0.86
Ratio of Girls to Boys, Secondary Education	▲ na	na
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	19
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	22
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	12
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	9
Children Underweight Under 5, Male, %	na	20
Children Underweight Under 5, Female, %	na	17
Stunted Children under 5, Severe, %	na	15
Wasted Children under 5, Severe, %	na	1
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	18.6	21.2
Age-Specific Fertility Rate per 1,000 Women, 15-20	77.0	32.5
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	na	na
Mean Age at Marriage, Female	na	na
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	91.2
Labor Force Participation Rate, 15-64, Female	na	59.6
Seats in Parliament Held by Women, %	na	9.3
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	247.4
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	36.1
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na



# Brunei Darussalam

## Overview

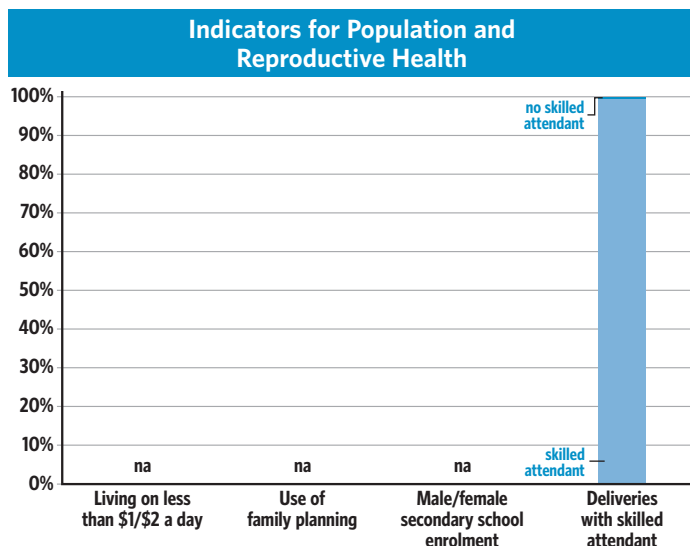
Oil-rich Brunei Darussalam has an estimated population of 374,000. Close to one-fifth of the population (18 per cent) are between 15 and 24 years of age, while just 5 per cent are ages 60 and over. The country is predominately urban, with about 78 per cent of the population living in towns and cities. Life expectancy at birth is 79 years for women and 75 for men.

The total fertility rate dropped from a high of 5.4 lifetime births per woman in the early and mid 1970s to 2.8 per woman in 2005. The government, however, does not provide contraceptives. The maternal mortality ratio is low, just 37 deaths per 100,000 live births, while 99 per cent of deliveries take place with skilled attendants.

Over the past three decades, Brunei has registered major improvements in the rates of infant and under-five mortality. Infant mortality has dropped from 54 deaths per 1,000 live births in 1975, to 14 deaths in 1985, and six in 2005. Under-five mortality rates have followed a similar pattern: the current rate is seven deaths per 1,000 live births.

In response to a 2003 United Nations inquiry, the government views its population growth rate, at 2.2 per cent per year, as satisfactory. There is concern, however, about the level of immigration, as 31.2 per cent of the population is foreign born.

The people of Brunei Darussalam enjoy free medical and health care, which is provided by government hospitals, health centres and clinics throughout the country. In remote areas that are not accessible or are difficult to reach, primary health care is provided by the Flying Medical Services. Private and military hospitals also augment government facilities.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	135.9	193.7
Population in Thousands, Female	121.1	180.2
Population Growth Rate, %	na	2.2
Crude Birth Rate per 1,000 Population	27.7	25.3
Crude Death Rate per 1,000 Population	3.4	2.8
Urban Population, %	65.8	77.6
Sex Ratio at Birth, Male Births per Female Births	1.06	1.06
Women 15-49, %	55.8	60.0
Total Fertility Rate per Woman 15-49	3.23	2.76
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	30.5
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	43.6
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 60	37
MMR, Lower Bound	● ▲ na	22
MMR, Upper Bound	● ▲ na	53
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	4.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 9.6	5.8
Under Age 5 Mortality Rate, Total	● ▲ 9	7
Under Age 5 Mortality Rate, Female	● ▲ na	6
Under Age 5 Mortality Rate, Male	● ▲ na	8
Life Expectancy at Birth, Total, Years	● ▲ 73.8	76.7
Life Expectancy at Birth, Female, Years	● ▲ 76.2	79.3
Life Expectancy at Birth, Male, Years	● ▲ 72.0	74.6
Median Age of Total Population	● ▲ 23.4	26.2
Population 60 Years and Over, %	● ▲ 4.1	4.7
Dependency Ratio	● ▲ 59	49

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
2.74	336.26	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	na
Gross Domestic Product Growth Rate, Annual %	na	na
Income Group per World Bank Classification	na	High income: non OECD
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ na	na
Antenatal Care, At Least One Visit, %	100	100
Deliveries Attended by Skilled Attendants, %	●▲ 97	99
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	9	5
Illiteracy Rate, % of Population 15 and Over, Female	21	10
Illiteracy Rate, % of Population 15 to 24, Male	2	1
Illiteracy Rate, % of Population 15 to 24, Female	2	0
Ratio of Girls to Boys, Primary Education	▲ na	0.90
Ratio of Girls to Boys, Secondary Education	▲ na	0.99
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	106
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	106
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	87
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	92
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	<0.1
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	18.8	17.9
Age-Specific Fertility Rate per 1,000 Women, 15-20	40.5	29.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	28.0	28.0
Mean Age at Marriage, Female	25.1	25.1
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	84.2
Labor Force Participation Rate, 15-64, Female	na	49.4
Seats in Parliament Held by Women, %	na	na
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	36.2
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	27.4
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Cambodia

## Overview

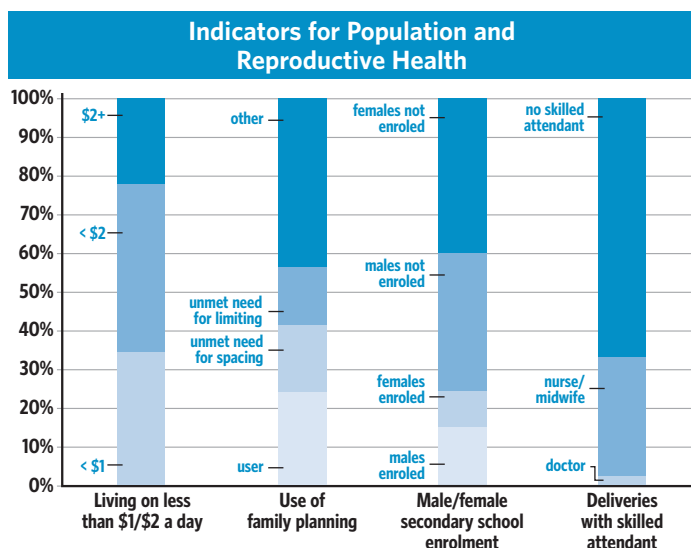
Cambodia, with a population of 14 million, is one of Asia's least developed countries. It is struggling with high rates of maternal and infant mortality and faces a large unmet need for family planning. In 2000, the maternal mortality ratio was estimated at 450 deaths per 100,000 live births, while the infant mortality rate is 91 deaths per 1,000 live births. The contraceptive prevalence rate for modern methods among women ages 15-49 years is only 18.5 per cent. A full one-third of women of reproductive age want to plan their families but are unable to do so because of an acute lack of information and services.

HIV prevalence among adults is 2.6 per cent, one of the highest rates in Asia. Prevention campaigns have brought about a reduction in the rate of new infections. However, widespread poverty and gender inequality are exacerbating the effects of the pandemic.

Cambodia's National Population Policy, launched in 2004, recommends action in the ten priority areas, including taking account of the links between high fertility and high population growth and poverty. The policy is facilitating the availability and use of accurate population data in the design of more effective development programmes.

Although there is no stated policy on adolescent reproductive health, the government is supporting organizations that reach out to young people. A large Adolescent Reproductive and Sexual Health Initiative, funded by the European Commission and implemented by UNFPA, is addressing major adolescent reproductive health issues, including life skills education and HIV/AIDS prevention activities.

The Health Sector Strategic Plan for 2003-2007 addresses the Millennium Development Goals (MDGs), the government's Poverty Reduction Strategy Paper and the Second Socio-Economic Development Plan. The Strategic Plan specifies which MDGs the Ministry of Health is committed to achieving by 2007. Specific targets related to safe motherhood include: reducing the maternal mortality ratio to 305 deaths per 100,000 live births; and increasing the modern contraceptive prevalence to 35 per cent among currently married women aged 15-49 years.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	4,632.1	6,800.9
Population in Thousands, Female	5,105.8	7,270.1
Population Growth Rate, %	na	2.0
Crude Birth Rate per 1,000 Population	43.7	36.8
Crude Death Rate per 1,000 Population	13.5	10.4
Urban Population, %	12.6	19.7
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	46.8	50.9
Total Fertility Rate per Woman 15-49	5.55	4.63
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	18.5
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	23.8
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 900	450
MMR, Lower Bound	● ▲ na	260
MMR, Upper Bound	● ▲ na	620
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	40.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 113.6	91.1
Under Age 5 Mortality Rate, Total	● ▲ 170	133
Under Age 5 Mortality Rate, Female	● ▲ na	99
Under Age 5 Mortality Rate, Male	● ▲ na	115
Life Expectancy at Birth, Total, Years	● ▲ 54.3	57.0
Life Expectancy at Birth, Female, Years	● ▲ 56.2	60.5
Life Expectancy at Birth, Male, Years	● ▲ 52.3	53.4
Median Age of Total Population	● ▲ 17.9	20.3
Population 60 Years and Over, %	● ▲ 4.6	5.6
Dependency Ratio	● ▲ 90	68

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>2.10</b>	<b>5.60</b>	<b>1.18</b>	<b>3.01</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	3.1/4.2
No Education, Primary	4.5
Highest Level of Education	2.9
Provincial Low/High	2.1/6.3 <small>Phnom Penh/Mondol Kiri, Rotanak Kiri</small>
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	72.3/95.7
No Education, Primary	102.5
Highest Level of Education	60.3
Provincial Low/High	37.6/169.8 <small>Phnom Penh/Mondol Kiri, Rotanak Kiri</small>
Poorest/Richest Quintile, %	109.7/50.3

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	154.8/63.6
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	38.0/54.0
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	7.2/8.5
No Education, Primary, %	13.3

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	2,189
Gross Domestic Product Growth Rate, Annual %	na	8
Income Group per World Bank Classification	na	Low income
Population Below \$1/Day, %	▲ na	34.1
Population Living Below National Poverty Line, %	▲ na	36.1
Share of Income or Consumption by Poorest Quintile	na	2.9
Access to Improved Water Supply, %	▲ na	34
Antenatal Care, At Least One Visit, %	na	44
Deliveries Attended by Skilled Attendants, %	●▲ na	34
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	46.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	50.9
Illiteracy Rate, % of Population 15 and Over, Male	22	18
Illiteracy Rate, % of Population 15 and Over, Female	51	38
Illiteracy Rate, % of Population 15 to 24, Male	19	15
Illiteracy Rate, % of Population 15 to 24, Female	34	22
Ratio of Girls to Boys, Primary Education	▲ na	0.86
Ratio of Girls to Boys, Secondary Education	▲ na	0.55
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	130
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	117
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	31
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	20
Children Underweight Under 5, Male, %	na	53
Children Underweight Under 5, Female, %	na	36
Stunted Children under 5, Severe, %	na	22
Wasted Children under 5, Severe, %	na	4
Undernourished People, %	43.0	38.0
Refugees, Number	na	76
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	46
Estimated HIV Prevalence, 15-49, Total	na	2.6
Estimated HIV Prevalence, 15-49, Male	na	3.6
Estimated HIV Prevalence, 15-49, Female	na	1.5

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	18.5	24.2
Age-Specific Fertility Rate per 1,000 Women, 15-20	113.0	46.5
Median Age at First Sexual Intercourse, Female, 25-49	na	19.9
Mean Age at Marriage, Male	na	na
Mean Age at Marriage, Female	na	na
Married by 18, Percent, Female, 25-49	na	28.0
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	64
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	62.0
HIV Prevalence, 15-24, Total	▲ na	1.7
HIV Prevalence, 15-24, Female	▲ na	2.5
HIV Prevalence, 15-24, Male	▲ na	1.0

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	0.4
Gender Empowerment Measure, Rank	na	69.0
Malnourished Women, %	na	20.7
Labor Force Participation Rate, 15-64, Male	na	82.3
Labor Force Participation Rate, 15-64, Female	na	76.2
Seats in Parliament Held by Women, %	na	10.9
Female Legislators, Senior Officials and Managers, %	na	14.0
Female Professional and Technical Workers, %	na	33.0

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	1,293.2
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	28.8
Unmet Need for Family Planning, Spacing, %	● na	17.4
Unmet Need for Family Planning, Limiting, %	● na	15.2
Unmet Need for Family Planning, Total, %	● na	32.6
Unmet Need for Family Planning, Thousands	● na	1171.7

Highest Level of Education	5.9
Provincial Low/High, %	4.2/19.8
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	57.2/28.0
No Education, Primary, %	19.3
Highest Level of Education, %	65.8
Provincial Low/High, %	12.0/88.9
Poorest/Richest Quintile, %	14.7/81.2
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	23.2/17.6
No Education, Primary, %	15.7
Highest Level of Education, %	23.1
Provincial Low/High, %	9.2/29.0
Poorest/Richest Quintile, %	12.5/25.4
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	19.0/10.2
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	19.6/9.7

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	9.1/13.2
No Education, Primary, %	15.1
Highest Level of Education, %	8.4
Provincial Low/High, %	8.0/19.0
Poorest/Richest Quintile, %	16.7/5.6
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	44.6/86.5
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	46.6/87.0
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	24.3/16.8
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	21.9/79.6

# China



## Overview

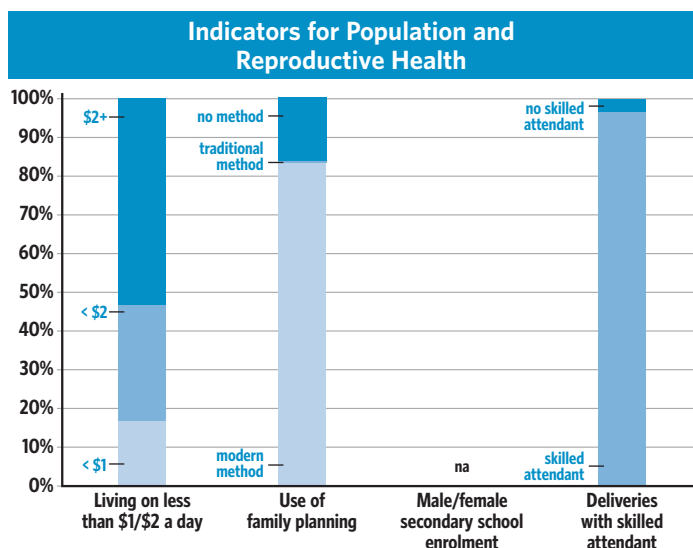
The Law of Population and Family Planning of the People's Republic of China went into effect in 2002, introducing client-centred and service-oriented approaches to reproductive health services.

Introduction of the law has been considered among the most critical factors influencing the future direction of population policy as well as the provision of family planning services. The law spells out rights and responsibilities for clients, service providers and family planning officials, as well as providing for sexual health education for students. Most provinces have also formulated their own regulations. A client-centred, quality reproductive health approach, pioneered in 32 counties with UNFPA assistance, has been replicated in over 800 other counties (one third of the country's total), resulting in its incorporation into national policy.

With a total fertility rate of about 2 lifetime births per woman, China has sustained a reduction in population growth over the past three decades. However, the current total population of 1.3 billion is still a key concern. The government views population issues as critical to the country's development.

According to official statistics, HIV/AIDS prevalence is still very low and primarily concentrated among injecting drug users. However, the pandemic is rapidly expanding into the general population. The government has taken measures to address this situation by providing free anti-retroviral drugs for those unable to pay and legalizing the advertisement of condoms. An innovative UNFPA-funded pilot project, using an integrated prevention strategy, is working with government ministries and other partners to target the reproductive age population, including in-school youth, commercial sex workers and migrants.

In 2002, the government declared it had achieved the Millennium Development Goal to reduce the incidence of extreme poverty by half. At the same time new challenges, such as an ageing population, are putting pressure on the social welfare system. In addition to combating poverty among women, the All China Women's Federation has added reproductive health, women's rights and the uneven sex ratio to their priority activities.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	595,934.4	675,852.0
Population in Thousands, Female	559,371.0	639,991.6
Population Growth Rate, %	na	0.6
Crude Birth Rate per 1,000 Population	20.2	16.2
Crude Death Rate per 1,000 Population	7.0	6.9
Urban Population, %	27.4	40.5
Sex Ratio at Birth, Male Births per Female Births	1.10	1.10
Women 15-49, %	55.8	56.5
Total Fertility Rate per Woman 15-49	2.19	1.97
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	80.0	83.3
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	83.0	83.8
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 95	56
MMR, Lower Bound	● ▲ na	28
MMR, Upper Bound	● ▲ na	110
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	21.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 48.6	32.7
Under Age 5 Mortality Rate, Total	● ▲ 56	38
Under Age 5 Mortality Rate, Female	● ▲ na	47
Under Age 5 Mortality Rate, Male	● ▲ na	39
Life Expectancy at Birth, Total, Years	● ▲ 67.6	72.0
Life Expectancy at Birth, Female, Years	● ▲ 69.2	73.9
Life Expectancy at Birth, Male, Years	● ▲ 66.1	70.3
Median Age of Total Population	● ▲ 25.3	32.6
Population 60 Years and Over, %	● ▲ 8.6	10.9
Dependency Ratio	● ▲ 50	41

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>2.00</b>	<b>21.7</b>	<b>1.46</b>	<b>na</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na



SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	4,995
Gross Domestic Product Growth Rate, Annual %	10	10
Income Group per World Bank Classification	na	Lower middle income
Population Below \$1/Day, %	▲ na	16.6
Population Living Below National Poverty Line, %	▲ na	4.6
Share of Income or Consumption by Poorest Quintile	na	1.8
Access to Improved Water Supply, %	▲ 71	77
Antenatal Care, At Least One Visit, %	na	na
Deliveries Attended by Skilled Attendants, %	●▲ 94	97
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	86.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	68.9
Illiteracy Rate, % of Population 15 and Over, Male	13	6
Illiteracy Rate, % of Population 15 and Over, Female	31	18
Illiteracy Rate, % of Population 15 to 24, Male	3	1
Illiteracy Rate, % of Population 15 to 24, Female	7	2
Ratio of Girls to Boys, Primary Education	▲ 0.86	0.92
Ratio of Girls to Boys, Secondary Education	▲ na	0.83
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	115
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	115
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	71
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	69
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	17.0	11.0
Refugees, Number	288,100	299,354
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	43
Estimated HIV Prevalence, 15-49, Total	na	0.1
Estimated HIV Prevalence, 15-49, Male	na	0.2
Estimated HIV Prevalence, 15-49, Female	na	0.1

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	21.8	16.5
Age-Specific Fertility Rate per 1,000 Women, 15-20	6.0	5.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	23.8	23.8
Mean Age at Marriage, Female	22.1	22.1
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	0.1
HIV Prevalence, 15-24, Female	▲ na	0.1
HIV Prevalence, 15-24, Male	▲ na	0.2

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	88.9	90.1
Labor Force Participation Rate, 15-64, Female	79.1	80.3
Seats in Parliament Held by Women, %	21.0	20.2
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	10,589.5
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	2.9
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

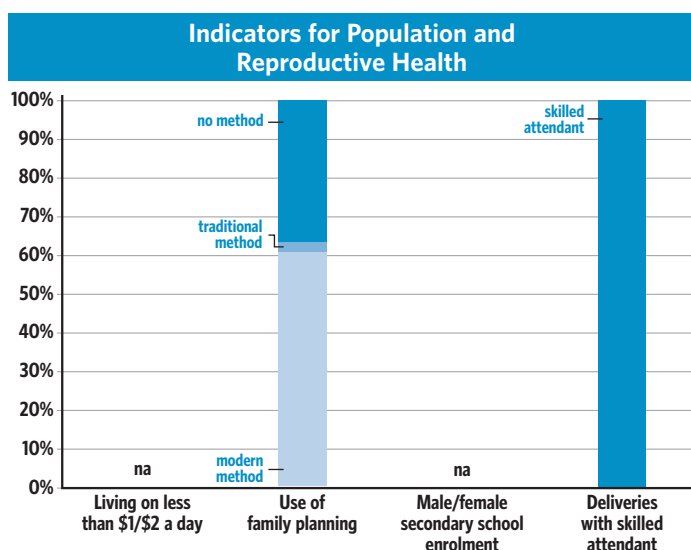
# Cook Islands

## Overview

The Cook Islands is a self-governing state in free association with New Zealand. The 15 islands in the country are geographically divided into two distinct zones—the Northern and Southern Groups. With a population growth rate of -0.64, the population of the Cook Islands has been declining for many years due to emigration. The 2005 residential population is estimated at about 18,000—a decline of about one third over the past 30 years. While emigration has been occurring for many decades, a financial crisis in 1996 resulted in a severe reduction in public services, leading to large-scale emigration of former government workers.

While the population of the main island of Rarotonga has reasonable access to health care, outer islands (especially in the Northern group), are underserved. The government's National Health Strategic Development Plan is striving to achieve quality health services for all. The plan has identified nine national health priorities, including reproductive health, sexually transmitted infections and HIV/AIDS, and child and adolescent health and development. UNFPA-supported studies on adolescent reproductive health attitudes and behaviour and the health needs of women have been conducted. The results will assist in formulating appropriate policies and programmes to address reproductive health and population issues.

Since the International Conference on Population and Development in 1994, an effort has been made to integrate population issues into development strategies. There is no explicit population policy but rather a series of policy interventions to address important demographic-related issues. The government has ratified the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) and acceded to the Convention on the Rights of the Child (CRC). A Healthy Islands Committee has been formed for the purpose of coordinating programmes on health and related developments. Institutional changes have been introduced at the national level to recognize the reproductive rights of women, particularly the freedom to decide the number and spacing of their children.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	na	9.3
Population in Thousands, Female	na	8.7
Population Growth Rate, %	-1.2	-0.6
Crude Birth Rate per 1,000 Population	na	22.4
Crude Death Rate per 1,000 Population	na	6.3
Urban Population, %	na	na
Sex Ratio at Birth, Male Births per Female Births	na	na
Women 15-49, %	na	na
Total Fertility Rate per Woman 15-49	na	3.10
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	60.4
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	63.2
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ na	na
MMR, Lower Bound	● ▲ na	na
MMR, Upper Bound	● ▲ na	na
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	12.0
Infant Mortality Rate per 1,000 Live Births	● ▲ na	8.9
Under Age 5 Mortality Rate, Total	● ▲ na	na
Under Age 5 Mortality Rate, Female	● ▲ na	na
Under Age 5 Mortality Rate, Male	● ▲ na	na
Life Expectancy at Birth, Total, Years	● ▲ na	71.1
Life Expectancy at Birth, Female, Years	● ▲ na	na
Life Expectancy at Birth, Male, Years	● ▲ na	na
Median Age of Total Population	● ▲ na	na
Population 60 Years and Over, %	● ▲ na	na
Dependency Ratio	● ▲ 67	69

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
na	na	0.22	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	na
Gross Domestic Product Growth Rate, Annual %	na	na
Income Group per World Bank Classification	na	na
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ na	95
Antenatal Care, At Least One Visit, %	na	na
Deliveries Attended by Skilled Attendants, %	●▲ na	100
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	na	na
Illiteracy Rate, % of Population 15 and Over, Female	na	na
Illiteracy Rate, % of Population 15 to 24, Male	na	na
Illiteracy Rate, % of Population 15 to 24, Female	na	na
Ratio of Girls to Boys, Primary Education	▲ na	0.86
Ratio of Girls to Boys, Secondary Education	▲ na	1.00
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	na
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	na
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	na
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	na
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	na	na
Age-Specific Fertility Rate per 1,000 Women, 15-20	na	na
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	na	na
Mean Age at Marriage, Female	na	na
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	74.8	82.5
Labor Force Participation Rate, 15-64, Female	46.9	67.1
Seats in Parliament Held by Women, %	na	na
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	na
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	na
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na



## Overview

Fiji's population was estimated at almost 848,000 in 2005, the second largest in the Pacific Islands region after Papua New Guinea. The estimated annual rate of population growth has dropped from 1.2 per cent in 2000 to 0.8 per cent in 2005, largely as a result of the on-going emigration of skilled and professional workers. The loss of skilled personnel is making it difficult to maintain or improve the quality of education and health services.

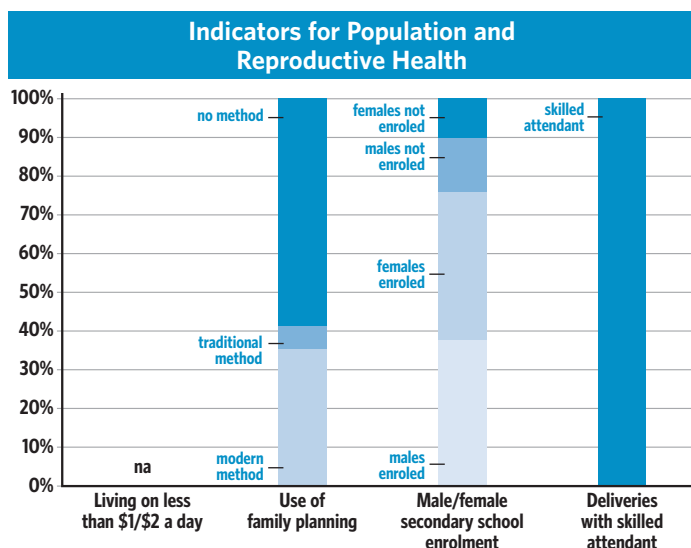
Fiji has experienced three *coup d'états* since 1987, the most recent in 2000. The resulting political instability has discouraged both foreign and domestic investment and reduced per capita economic growth to negligible levels.

There is no explicit population policy in Fiji. Some population-related goals have been included in the government's *Strategic Development Plan 2003-2005*, mainly in the area of reproductive health, but also including rural-urban migration and urban population growth. While there is no explicit reference to ICPD Programme of Action goals in the strategy, the reduction of teenage pregnancy, the prevention of HIV/AIDS and the expansion of adolescent reproductive health facilities are emphasized.

Promoting rural development and alleviating poverty are among the government's strategic priorities. The outer island population has declined as a result of rural-urban migration. Ensuring the provision of minimum and affordable basic services is a specific policy objective.

The health sector is becoming more decentralized within the Ministry of Health. The government aims to provide adequate primary and preventive health services. This includes prevention and control of HIV/AIDS, expanding reproductive health facilities (including adolescent health) and integrating health promotion activities into rural and community health programmes.

The government is committed to: integrating adolescent reproductive health into the Family Life Education Programme and strengthening its implementation; protecting children and youth; developing and promoting gender-sensitive policies; providing quality education and training for all while being responsive to changing needs; and reducing poverty by 5 per cent annually.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	367.4	430.8
Population in Thousands, Female	356.1	416.9
Population Growth Rate, %	na	0.8
Crude Birth Rate per 1,000 Population	28.5	25.9
Crude Death Rate per 1,000 Population	6.1	6.3
Urban Population, %	41.6	53.2
Sex Ratio at Birth, Male Births per Female Births	1.06	1.06
Women 15-49, %	51.5	53.5
Total Fertility Rate per Woman 15-49	3.41	3.06
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	35.1
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	41.0
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 90	75
MMR, Lower Bound	● ▲ na	19
MMR, Upper Bound	● ▲ na	140
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	9.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 34.6	20.7
Under Age 5 Mortality Rate, Total	● ▲ 44	26
Under Age 5 Mortality Rate, Female	● ▲ na	23
Under Age 5 Mortality Rate, Male	● ▲ na	21
Life Expectancy at Birth, Total, Years	● ▲ 66.6	68.2
Life Expectancy at Birth, Female, Years	● ▲ 68.8	70.5
Life Expectancy at Birth, Male, Years	● ▲ 64.6	66.1
Median Age of Total Population	● ▲ 21.3	24.5
Population 60 Years and Over, %	● ▲ 4.9	6.4
Dependency Ratio	● ▲ 69	55

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>2.71</b>	<b>60.72</b>	<b>4.73</b>	<b>400.35</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	2.8/3.7
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	40.0/69.0
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH		1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars		na	5,517
Gross Domestic Product Growth Rate, Annual %		na	5
Income Group per World Bank Classification		na	Lower middle income
Population Below \$1/Day, %	▲	na	na
Population Living Below National Poverty Line, %	▲	na	na
Share of Income or Consumption by Poorest Quintile		na	na
Access to Improved Water Supply, %	▲	79	47
Antenatal Care, At Least One Visit, %		100	100
Deliveries Attended by Skilled Attendants, %	●▲	98	100
Family Planning Programme Effort Index, 1999 (Total Mean Score)		na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)		na	na
Illiteracy Rate, % of Population 15 and Over, Male		8	4
Illiteracy Rate, % of Population 15 and Over, Female		15	7
Illiteracy Rate, % of Population 15 to 24, Male		2	1
Illiteracy Rate, % of Population 15 to 24, Female		2	1
Ratio of Girls to Boys, Primary Education	▲	na	0.93
Ratio of Girls to Boys, Secondary Education	▲	na	na
Primary School Enrolment, Gross % of School Age Population, Male	●▲	na	109
Primary School Enrolment, Gross % of School Age Population, Female	●▲	na	109
Secondary School Enrolment, Gross % of School Age Population, Male	●▲	na	78
Secondary School Enrolment, Gross % of School Age Population, Female	●▲	na	83
Children Underweight Under 5, Male, %		na	8
Children Underweight Under 5, Female, %		na	7
Stunted Children under 5, Severe, %		na	1
Wasted Children under 5, Severe, %		na	1
Undernourished People, %		na	na
Refugees, Number		na	na
Internally Displaced Persons, Number		na	na
Asylum Seekers, Number		na	na
Estimated HIV Prevalence, 15-49, Total		na	0.1
Estimated HIV Prevalence, 15-49, Male		na	na
Estimated HIV Prevalence, 15-49, Female		na	na

ADOLESCENT REPRODUCTIVE HEALTH		1990	Most Recent
Proportion of Population 15-24		18.9	19.3
Age-Specific Fertility Rate per 1,000 Women, 15-20		56.0	36.0
Median Age at First Sexual Intercourse, Female, 25-49		na	na
Mean Age at Marriage, Male		25.3	25.3
Mean Age at Marriage, Female		22.5	22.5
Married by 18, Percent, Female, 25-49		na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲	na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲	na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %		na	na
HIV Prevalence, 15-24, Total	▲	na	na
HIV Prevalence, 15-24, Female	▲	na	na
HIV Prevalence, 15-24, Male	▲	na	na

GENDER EQUALITY		1990	Most Recent
Gender Empowerment Measure, Value		na	0.3
Gender Empowerment Measure, Rank		na	71.0
Malnourished Women, %		na	na
Labor Force Participation Rate, 15-64, Male		na	84.5
Labor Force Participation Rate, 15-64, Female		na	32.8
Seats in Parliament Held by Women, %		na	6.0
Female Legislators, Senior Officials and Managers, %		na	51.0
Female Professional and Technical Workers, %		na	9.0

REPRODUCTIVE HEALTH COMMODITY SECURITY		1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands		na	20.3
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %		na	8.7
Unmet Need for Family Planning, Spacing, %	●	na	na
Unmet Need for Family Planning, Limiting, %	●	na	na
Unmet Need for Family Planning, Total, %	●	na	na
Unmet Need for Family Planning, Thousands	●	na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na



# French Polynesia

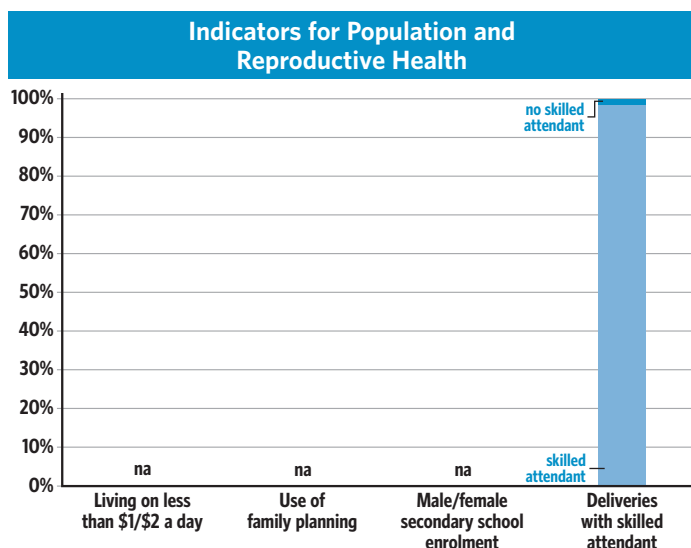
## Overview

In early 2004, the status of French Polynesia was changed from overseas territory to overseas country, giving it an additional degree of autonomy. The total population is 256,600 with 52 per cent living in urban areas. The population is growing by 1.5 per cent per year. Life expectancy at birth is 76 years for women and 71 for men with 8 per cent of the population ages 60 and over.

The delivery of health care services, in both public and private practices, has been significantly strengthened in recent years. However, inadequacies still exist in areas such as staffing.

The total fertility rate has fallen from 3.3 lifetime births per woman in 1990 to 2.8 in 2005. The contraceptive prevalence rate for any method is estimated at 50 per cent, compared with 41 per cent for modern methods. The maternal mortality ratio is 20 deaths per 100,000 live births, with 99 per cent of all deliveries attended by skilled personnel. Immunization coverage is above 90 per cent and the under-five mortality rate is 11 per 1,000 live births.

French Polynesia is moving forward in reaching the targets set by the Millennium Development Goals (MDG). The target for primary school net enrolment has already been surpassed: 95 per cent of all children attend school. Progress has also been made in achieving its MDG target for infant mortality. Since 1990, the infant mortality rate has been cut in half to 8 per 1,000 live births.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	101.7	131.3
Population in Thousands, Female	93.7	125.3
Population Growth Rate, %	na	1.5
Crude Birth Rate per 1,000 Population	27.6	21.5
Crude Death Rate per 1,000 Population	5.3	4.9
Urban Population, %	56.1	51.9
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	52.4	56.1
Total Fertility Rate per Woman 15-49	3.31	2.79
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	40.9
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	50.2
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ na	20
MMR, Lower Bound	● ▲ na	10
MMR, Upper Bound	● ▲ na	40
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	na
Infant Mortality Rate per 1,000 Live Births	● ▲ 14.6	8.4
Under Age 5 Mortality Rate, Total	● ▲ 15	11
Under Age 5 Mortality Rate, Female	● ▲ na	11
Under Age 5 Mortality Rate, Male	● ▲ na	11
Life Expectancy at Birth, Total, Years	● ▲ 69.2	73.5
Life Expectancy at Birth, Female, Years	● ▲ 72.0	76.3
Life Expectancy at Birth, Male, Years	● ▲ 66.9	71.2
Median Age of Total Population	● ▲ 22.1	26.9
Population 60 Years and Over, %	● ▲ 5.3	7.9
Dependency Ratio	● ▲ 63	49

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
na	na	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	24,820
Gross Domestic Product Growth Rate, Annual %	na	4
Income Group per World Bank Classification	na	High income: non OECD
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ na	100
Antenatal Care, At Least One Visit, %	na	na
Deliveries Attended by Skilled Attendants, %	●▲ na	99
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	na	na
Illiteracy Rate, % of Population 15 and Over, Female	na	na
Illiteracy Rate, % of Population 15 to 24, Male	na	na
Illiteracy Rate, % of Population 15 to 24, Female	na	na
Ratio of Girls to Boys, Primary Education	▲ na	na
Ratio of Girls to Boys, Secondary Education	▲ na	na
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	na
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	na
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	na
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	na
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	20.3	19.3
Age-Specific Fertility Rate per 1,000 Women, 15-20	73.5	39.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	29.8	29.8
Mean Age at Marriage, Female	27.6	27.6
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	77.0	77.0
Labor Force Participation Rate, 15-64, Female	51.0	51.0
Seats in Parliament Held by Women, %	na	na
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	14.4
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	18.7
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# India



## Overview

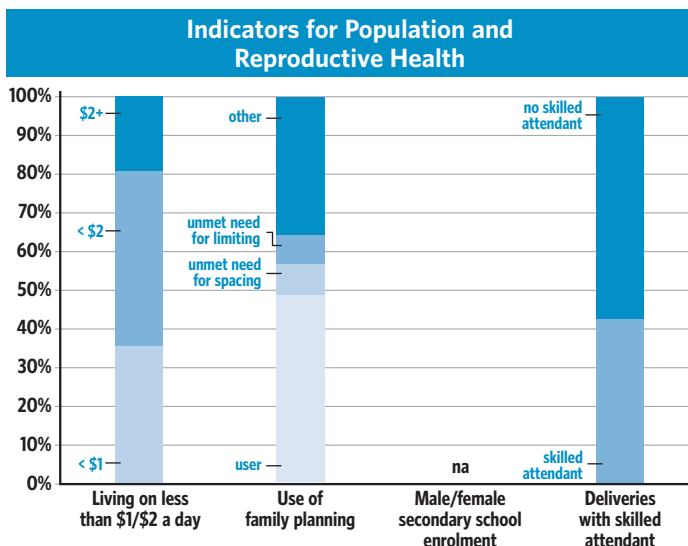
India's huge population, estimated at just over 1.1 billion in 2005, conceals important longer-term trends. Fertility levels in India have been declining steadily over the past several decades, and the total fertility rate now stands at 3.4 births per woman, on average, though with wide regional variations. Population growth rates have declined to 1.5 per cent per year, and nearly half the population of reproductive age uses modern contraceptives. However, with two-thirds of all deliveries taking place at home, the country's maternal mortality ratio remains high at 540 deaths per 100,000 live births.

Though the rural-urban gap in the level of human development continues to be significant, it has been narrowing. The level of poverty is declining slowly, but has not been uniform either across states or across rural and urban areas. The illiteracy rate among women continues to drop.

Despite these positive trends, several issues continue to be of concern. Although India is one of the few countries that initiated HIV prevention activities in the very early stages of the pandemic, awareness about its causes, transmission routes and prevention is low, especially among rural women, and stigma and discrimination against those with HIV remains a serious challenge to prevention efforts. Female child sex ratios have deteriorated in several states and continue to decline. In some states there are 106 boys for every 100 girls.

Issues relating to gender and reproductive rights, gender-based violence, men's involvement and quality of care increasingly are being discussed as part of the policy and programme debate. Given the constitutional mandate, various national policies in India have been formulated to address inequities faced by women, especially their limited access to quality reproductive health care services.

In 2000, the government approved India's National Population Policy, which calls for population stabilization. The policy reiterates a commitment to voluntary and informed choice and the consent of citizens while accessing reproductive health care and family planning services. Several state population policies have also been developed.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	438,573.2	565,777.9
Population in Thousands, Female	410,841.4	537,592.9
Population Growth Rate, %	na	1.5
Crude Birth Rate per 1,000 Population	31.2	27.0
Crude Death Rate per 1,000 Population	11.0	8.5
Urban Population, %	25.5	28.7
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	49.3	51.9
Total Fertility Rate per Woman 15-49	3.98	3.37
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	38.0	42.8
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	43.0	48.2
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 570	540
MMR, Lower Bound	● ▲ na	430
MMR, Upper Bound	● ▲ na	650
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	43.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 89.7	63.7
Under Age 5 Mortality Rate, Total	● ▲ 128	92
Under Age 5 Mortality Rate, Female	● ▲ na	90
Under Age 5 Mortality Rate, Male	● ▲ na	78
Life Expectancy at Birth, Total, Years	● ▲ 58.3	64.0
Life Expectancy at Birth, Female, Years	● ▲ 58.8	65.7
Life Expectancy at Birth, Male, Years	● ▲ 58.1	62.4
Median Age of Total Population	● ▲ 21.7	24.3
Population 60 Years and Over, %	● ▲ 6.8	7.9
Dependency Ratio	● ▲ 69	60

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>1.30</b>	<b>6.39</b>	<b>3.20</b>	<b>73.58</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	2.3/3.1
No Education, Primary	3.5
Highest Level of Education	2.0
Provincial Low/High	1.8/4.6 Goa/Meghalaya
Poorest/Richest Quintile	4.1/2.1

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	49.2/79.7
No Education, Primary	86.5
Highest Level of Education	32.8
Provincial Low/High	16.3/89.0 Kerala/Meghalaya
Poorest/Richest Quintile, %	96.5/38.1

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	141.3/45.5
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	68.0/121.0
Poorest/Richest Quintile	135.0/45.0

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	2,909
Gross Domestic Product Growth Rate, Annual %	6	7
Income Group per World Bank Classification	na	Low income
Population Below \$1/Day, %	▲ na	35.3
Population Living Below National Poverty Line, %	▲ na	28.6
Share of Income or Consumption by Poorest Quintile	na	3.9
Access to Improved Water Supply, %	▲ 75	86
Antenatal Care, At Least One Visit, %	70	65
Deliveries Attended by Skilled Attendants, %	●▲ 75	43
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	65.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	53.5
Illiteracy Rate, % of Population 15 and Over, Male	38	29
Illiteracy Rate, % of Population 15 and Over, Female	64	50
Illiteracy Rate, % of Population 15 to 24, Male	27	18
Illiteracy Rate, % of Population 15 to 24, Female	46	30
Ratio of Girls to Boys, Primary Education	▲ 0.71	0.77
Ratio of Girls to Boys, Secondary Education	▲ na	0.66
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	113
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	106
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	59
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	47
Children Underweight Under 5, Male, %	na	45
Children Underweight Under 5, Female, %	na	49
Stunted Children under 5, Severe, %	na	23
Wasted Children under 5, Severe, %	na	3
Undernourished People, %	25.0	21.0
Refugees, Number	258,400	164,757
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	535
Estimated HIV Prevalence, 15-49, Total	na	0.9
Estimated HIV Prevalence, 15-49, Male	na	1.1
Estimated HIV Prevalence, 15-49, Female	na	0.7

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	19.4	19.1
Age-Specific Fertility Rate per 1,000 Women, 15-20	119.5	71.5
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	na	23.4
Mean Age at Marriage, Female	na	18.7
Married by 18, Percent, Female, 25-49	na	61.6
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	62
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	63
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	0.5
HIV Prevalence, 15-24, Female	▲ na	0.7
HIV Prevalence, 15-24, Male	▲ na	0.3

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	36.2
Labor Force Participation Rate, 15-64, Male	na	87.6
Labor Force Participation Rate, 15-64, Female	na	43.5
Seats in Parliament Held by Women, %	7.0	9.3
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	75,568.3
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	23.1
Unmet Need for Family Planning, Spacing, %	● na	8.3
Unmet Need for Family Planning, Limiting, %	● na	7.5
Unmet Need for Family Planning, Total, %	● na	15.8
Unmet Need for Family Planning, Thousands	● na	42715.5

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	73.3/33.5
No Education, Primary, %	25.4
Highest Level of Education, %	83.4
Provincial Low/High, %	20.6/94.0 Meghalaya/Kerala
Poorest/Richest Quintile, %	16.4/84.4
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	51.2/39.9
No Education, Primary, %	39.2
Highest Level of Education, %	47.1
Provincial Low/High, %	15.5/60.8 Meghalaya/Himachal Pradesh
Poorest/Richest Quintile, %	29.3/54.6
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	10.4/6.1
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	9.5/5.9

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	11.6/19.9
No Education, Primary, %	24.1
Highest Level of Education, %	5.8
Provincial Low/High, %	4.2/25.5 Sikkim/Bihar
Poorest/Richest Quintile, %	28.2/5.3
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	58.1/97.5
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	70.7/97.6
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	50.4/14.5
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	44.1/92.8

# Indonesia

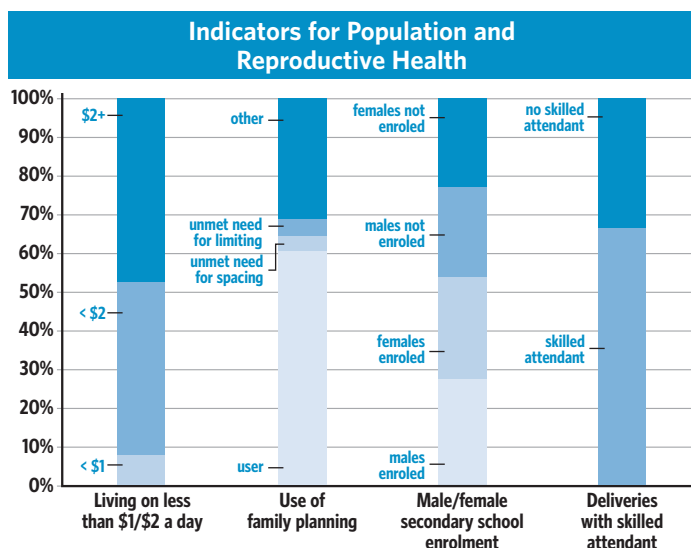
## Overview

At 220 million, Indonesia is the fourth most populous country in the world, with one fifth of the population between the ages of 15 and 24. The total fertility rate (TFR) is 2.7 lifetime births per woman - a 50 per cent decline since the 1970s. The government's development goals include an effort to reach a TFR of 2.2 by the year 2010. Social and health services have been deteriorating due to the prolonged economic crisis, especially for the poor. To provide adequate and efficient services and facilities for all, the government has initiated a social safety net program. The devastating tsunami, which struck Sumatra on 26 December 2004, claimed nearly 200,000 lives and severely damaged the health infrastructure.

Indonesia's maternal mortality ratio remains high at 230 deaths per 100,000 live births. In an effort to reduce it, the Ministry of Health developed the National Strategic Plan on Making Pregnancy Safer, 2001-2010. Another government concern is the rapid increase of HIV/AIDS prevalence, now at 0.1 per cent of the population. In response, a comprehensive National HIV/AIDS Strategy has been launched.

Indonesia's population policy emphasizes the importance of providing client-centred quality reproductive health information and services, and improving family welfare by promoting gender equality. Although the Ministry of Population was abolished in 2002, the Law on Population and Family Welfare of 1992 is being revised in relation to gender, male involvement, adolescent reproductive health, and reproductive rights.

The Indonesia Forum of Parliamentarians on Population and Development, established at the national level and in three provinces, has proven to be effective in raising the awareness and commitment of parliamentarians and local representatives on issues related to reproductive health and gender. The Forum has been instrumental in facilitating laws and policies aimed at achieving the goals of the ICPD Programme of Action. In addition, a National Policy on Reproductive Health has been signed by the Minister of Health and will allow local authorities to develop their own reproductive health strategies.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	90,903.3	111,230.7
Population in Thousands, Female	90,510.5	111,550.8
Population Growth Rate, %	na	1.2
Crude Birth Rate per 1,000 Population	25.7	22.5
Crude Death Rate per 1,000 Population	8.8	7.2
Urban Population, %	30.6	47.9
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	50.8	55.4
Total Fertility Rate per Woman 15-49	3.15	2.67
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	47.1	54.7
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	49.7	57.4
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 650	230
MMR, Lower Bound	● ▲ na	58
MMR, Upper Bound	● ▲ na	440
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	18.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 64.2	38.2
Under Age 5 Mortality Rate, Total	● ▲ 79	48
Under Age 5 Mortality Rate, Female	● ▲ na	46
Under Age 5 Mortality Rate, Male	● ▲ na	59
Life Expectancy at Birth, Total, Years	● ▲ 61.4	67.6
Life Expectancy at Birth, Female, Years	● ▲ 63.3	69.5
Life Expectancy at Birth, Male, Years	● ▲ 59.8	65.8
Median Age of Total Population	● ▲ 21.7	26.5
Population 60 Years and Over, %	● ▲ 6.2	8.4
Dependency Ratio	● ▲ 66	51

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>1.20</b>	<b>9.75</b>	<b>0.94</b>	<b>41.58</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	2.4/2.7
No Education, Primary	2.6
Highest Level of Education	2.5
Provincial Low/High	1.9/4.1 DI Yogyakarta/East Nusa Tenggara
Poorest/Richest Quintile	3.3/2.0

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	32.0/52.0
No Education, Primary	67.0
Highest Level of Education	23.0
Provincial Low/High	14.0/77.0 Bali/Gorontalo
Poorest/Richest Quintile, %	78.1/23.3

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	109.0/29.2
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	41.0/63.0
Poorest/Richest Quintile	75.0/15.0

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	7.3/13.7
No Education, Primary, %	13.6



SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	3,364
Gross Domestic Product Growth Rate, Annual %	6	5
Income Group per World Bank Classification	na	Lower middle income
Population Below \$1/Day, %	▲ na	7.5
Population Living Below National Poverty Line, %	▲ na	27.1
Share of Income or Consumption by Poorest Quintile	na	3.6
Access to Improved Water Supply, %	▲ 42	78
Antenatal Care, At Least One Visit, %	47	95
Deliveries Attended by Skilled Attendants, %	●▲ 44	66
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	82.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	57.2
Illiteracy Rate, % of Population 15 and Over, Male	13	6
Illiteracy Rate, % of Population 15 and Over, Female	27	14
Illiteracy Rate, % of Population 15 to 24, Male	3	1
Illiteracy Rate, % of Population 15 to 24, Female	7	2
Ratio of Girls to Boys, Primary Education	▲ 0.95	0.95
Ratio of Girls to Boys, Secondary Education	▲ na	0.95
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	113
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	111
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	61
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	60
Children Underweight Under 5, Male, %	na	29
Children Underweight Under 5, Female, %	na	24
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	9.0	6.0
Refugees, Number	15,600	233
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	68
Estimated HIV Prevalence, 15-49, Total	na	0.1
Estimated HIV Prevalence, 15-49, Male	na	0.2
Estimated HIV Prevalence, 15-49, Female	na	0.0

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	20.7	19.0
Age-Specific Fertility Rate per 1,000 Women, 15-20	67.5	53.5
Median Age at First Sexual Intercourse, Female, 25-49	18.6	18.6
Mean Age at Marriage, Male	25.2	25.2
Mean Age at Marriage, Female	21.6	21.6
Married by 18, Percent, Female, 25-49	53.5	39.0
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	23
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	78
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	32.0
HIV Prevalence, 15-24, Total	▲ na	0.1
HIV Prevalence, 15-24, Female	▲ na	0.1
HIV Prevalence, 15-24, Male	▲ na	0.1

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	84.2	86.3
Labor Force Participation Rate, 15-64, Female	46.0	53.2
Seats in Parliament Held by Women, %	12.0	8.0
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	10,480.2
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	15.5
Unmet Need for Family Planning, Spacing, %	● 6.3	4.0
Unmet Need for Family Planning, Limiting, %	● 6.4	4.6
Unmet Need for Family Planning, Total, %	● 12.7	8.6
Unmet Need for Family Planning, Thousands	● 5836.9	5266.1

Highest Level of Education	5.7
Provincial Low/High, %	4.2/18.6
North Sumatera/Central Kalimantan	
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	79.0/55.2
No Education, Primary, %	32.4
Highest Level of Education, %	93.8
Provincial Low/High, %	36.4/94.3
East Nusa Tenggara/DKI Jakarta	
Poorest/Richest Quintile, %	21.3/89.2
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	57.0/56.5
No Education, Primary, %	44.8
Highest Level of Education, %	57.8
Provincial Low/High, %	40.9/66.4
Southeast Sulawesi/North Sulawesi	
Poorest/Richest Quintile, %	46.2/56.9
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	6.1/3.7
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	5.9/3.0

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	78.6/95.1
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	76.6/93.3
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	76.6/99.3

# Iran (Islamic Republic of)

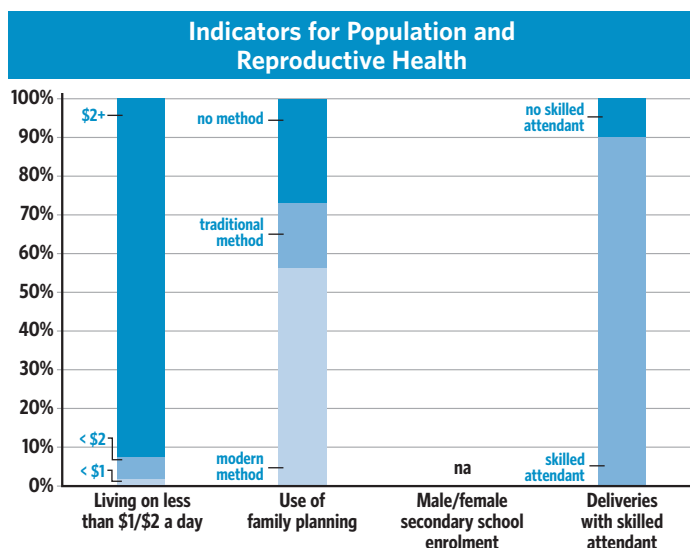
## Overview

Iran is OPEC's second largest oil-producing member and has among the largest gas reserves in the world. The country's GDP per capita increased from \$5,590 in 1999 to \$7,145 in 2003, but there is high unemployment, and low labor force participation by women (11 per cent versus 76 per cent for men). This is due in part to the fact that Iran, with almost 70 million people, is the most populous country in the region, with a large proportion of young people and one of the largest refugee populations in the world.

Iran ranks 99 out of 177 on the Human Development Index. It is making progress towards achieving the ICPD Programme of Action and the Millennium Development Goals (MDGs). Contraceptive prevalence increased to 56 per cent of women of reproductive age by 1997, fertility rates are declining (from 5.0 lifetime births per woman in 1990 to 3.5 in 2005), and 90 per cent of all births are attended by skilled personnel. These trends have contributed to a decline in maternal mortality (from 120 deaths per 100,000 live births in 1990 to 76 in 2000). Infant mortality also dropped by over 50 per cent between 1990 and 2005 (from 61 deaths per 1,000 live births to 31), while childhood mortality fell by almost half. Life expectancy rose from 64.6 years in 1990 to 71.0 in 2005.

Despite the low prevalence of HIV/AIDS (estimated at 0.1 per cent of the 15-49 age group), volunteer counseling and testing services are being integrated into the primary health care system. With UNFPA's assistance, the Centre for Disease Control is developing a framework for assessing HIV/AIDS risks for commercial sex workers and other high-risk groups.

Concern about maternal mortality prompted the government and its partners, including UNFPA, to ensure supplies of contraceptives, including emergency contraceptives, establish safe delivery facilities in existing health centres and health posts in refugee camps and train rural midwives.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	29,041.9	35,249.6
Population in Thousands, Female	27,631.8	34,265.6
Population Growth Rate, %	na	1.1
Crude Birth Rate per 1,000 Population	34.8	19.5
Crude Death Rate per 1,000 Population	7.4	5.2
Urban Population, %	56.3	68.1
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	45.0	58.0
Total Fertility Rate per Woman 15-49	4.97	3.51
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	44.6	56.0
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	64.6	72.9
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 120	76
MMR, Lower Bound	● ▲ na	38
MMR, Upper Bound	● ▲ na	150
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	22.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 60.9	30.6
Under Age 5 Mortality Rate, Total	● ▲ 64	35
Under Age 5 Mortality Rate, Female	● ▲ na	39
Under Age 5 Mortality Rate, Male	● ▲ na	39
Life Expectancy at Birth, Total, Years	● ▲ 64.6	71.0
Life Expectancy at Birth, Female, Years	● ▲ 65.9	72.6
Life Expectancy at Birth, Male, Years	● ▲ 63.6	69.5
Median Age of Total Population	● ▲ 17.7	23.4
Population 60 Years and Over, %	● ▲ 5.7	6.4
Dependency Ratio	● ▲ 93	50

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>2.90</b>	<b>50.27</b>	<b>2.97</b>	<b>191.86</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	1.8/2.4
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	1.4/4.1 Gilan/Sistan & Baluchestan
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	25.2/34.7
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	23.9/32.1
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	7,145
Gross Domestic Product Growth Rate, Annual %	2	7
Income Group per World Bank Classification	na	Lower middle income
Population Below \$1/Day, %	▲ na	<2
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	2.0
Access to Improved Water Supply, %	▲ 89	93
Antenatal Care, At Least One Visit, %	25	93
Deliveries Attended by Skilled Attendants, %	●▲ 70	90
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	71.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	75.8
Illiteracy Rate, % of Population 15 and Over, Male	28	13
Illiteracy Rate, % of Population 15 and Over, Female	46	25
Illiteracy Rate, % of Population 15 to 24, Male	8	3
Illiteracy Rate, % of Population 15 to 24, Female	19	6
Ratio of Girls to Boys, Primary Education	▲ 0.86	0.91
Ratio of Girls to Boys, Secondary Education	▲ na	0.89
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	93
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	90
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	80
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	75
Children Underweight Under 5, Male, %	na	12
Children Underweight Under 5, Female, %	na	10
Stunted Children under 5, Severe, %	na	4
Wasted Children under 5, Severe, %	na	1
Undernourished People, %	5.0	5.0
Refugees, Number	4,150,700	984,896
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	1
Estimated HIV Prevalence, 15-49, Total	na	0.1
Estimated HIV Prevalence, 15-49, Male	na	0.1
Estimated HIV Prevalence, 15-49, Female	na	0.0

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	18.6	25.4
Age-Specific Fertility Rate per 1,000 Women, 15-20	104.0	19.5
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	24.5	24.5
Mean Age at Marriage, Female	21.1	21.1
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	0.0
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	0.3
Gender Empowerment Measure, Rank	na	72.0
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	76.4
Labor Force Participation Rate, 15-64, Female	na	11.2
Seats in Parliament Held by Women, %	2.0	4.1
Female Legislators, Senior Officials and Managers, %	na	13.0
Female Professional and Technical Workers, %	na	33.0

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	5,451.8
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	23.9
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	7.5
Unmet Need for Family Planning, Thousands	● na	1464.1

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	55.2/57.3
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	36.4/69.9
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

## Overview

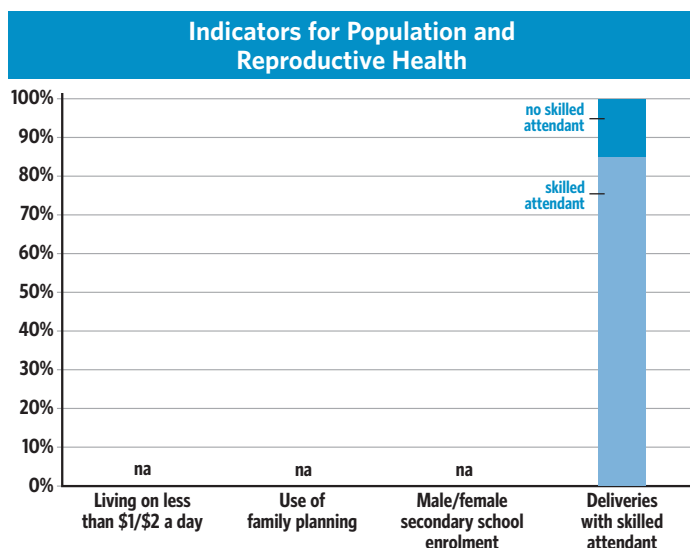
The Republic of Kiribati, independent from Great Britain since 1979, comprises 33 low-lying atolls distributed over a large area of the Pacific straddling the equator. Economic development is constrained by major communication and logistic challenges. Due to its low per capita income, limited human resources, and vulnerability to external forces, Kiribati is classified as a least developed country. Its population was estimated at 92,000 in 2005 with an annual growth rate of 2 per cent by 2005. The most pressing population problem, however, is the high rate of urban growth in the capital of South Tarawa, which reached 5.2 per cent per annum in 2000.

The population is youthful, with 35 per cent below the age of 15. The total fertility rate was 4.4 lifetime births per woman in 2000. In light of this, the government has developed a National Youth Policy.

The government's medium term goals are set out in the National Development Strategy 2004-07. Their principal objective is to improve living standards. The government's vision is to achieve a significant increase in real per capita income, along with steady growth in employment and genuine improvements in education, health, environmental protection and social indicators. Government expenditure on the health sector has grown considerably since independence.

The National Health Plan 2004-2007, identifies 12 priority areas, including: reproductive and sexual health, adolescent and women's health; population and family planning; maternal and child health; and control of communicable diseases, including HIV/AIDS. In order to support the 12 priority areas, the "Village Welfare Group" (VWG) will be strengthened as part of community development efforts in the outer islands. VWGs play a key role in providing health education and health data collection at the household level under the supervision of a public health nurse.

A National Population Plan 2004-2007 has been drafted with the assistance of the Asian Development Bank and is awaiting government approval.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	na	45.7
Population in Thousands, Female	na	46.3
Population Growth Rate, %	na	1.9
Crude Birth Rate per 1,000 Population	na	26.4
Crude Death Rate per 1,000 Population	na	9.0
Urban Population, %	na	na
Sex Ratio at Birth, Male Births per Female Births	na	na
Women 15-49, %	na	na
Total Fertility Rate per Woman 15-49	na	4.40
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	na
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	na
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ na	na
MMR, Lower Bound	● ▲ na	na
MMR, Upper Bound	● ▲ na	na
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	27.0
Infant Mortality Rate per 1,000 Live Births	● ▲ na	43.0
Under Age 5 Mortality Rate, Total	● ▲ na	na
Under Age 5 Mortality Rate, Female	● ▲ na	na
Under Age 5 Mortality Rate, Male	● ▲ na	na
Life Expectancy at Birth, Total, Years	● ▲ na	59.8
Life Expectancy at Birth, Female, Years	● ▲ na	67.3
Life Expectancy at Birth, Male, Years	● ▲ na	58.2
Median Age of Total Population	● ▲ na	na
Population 60 Years and Over, %	● ▲ na	na
Dependency Ratio	● ▲ na	104

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
7.90	48.41	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	na
Gross Domestic Product Growth Rate, Annual %	na	1
Income Group per World Bank Classification	na	Lower middle income
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ na	64
Antenatal Care, At Least One Visit, %	na	88
Deliveries Attended by Skilled Attendants, %	●▲ na	85
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	na	na
Illiteracy Rate, % of Population 15 and Over, Female	na	na
Illiteracy Rate, % of Population 15 to 24, Male	na	na
Illiteracy Rate, % of Population 15 to 24, Female	na	na
Ratio of Girls to Boys, Primary Education	▲ 0.98	0.96
Ratio of Girls to Boys, Secondary Education	▲ na	na
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	103
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	120
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	98
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	111
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	na	na
Age-Specific Fertility Rate per 1,000 Women, 15-20	na	na
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	24.6	24.6
Mean Age at Marriage, Female	21.5	21.5
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	na
Labor Force Participation Rate, 15-64, Female	na	na
Seats in Parliament Held by Women, %	na	na
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	na
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	na
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na



# Korea, Democratic People's Republic of

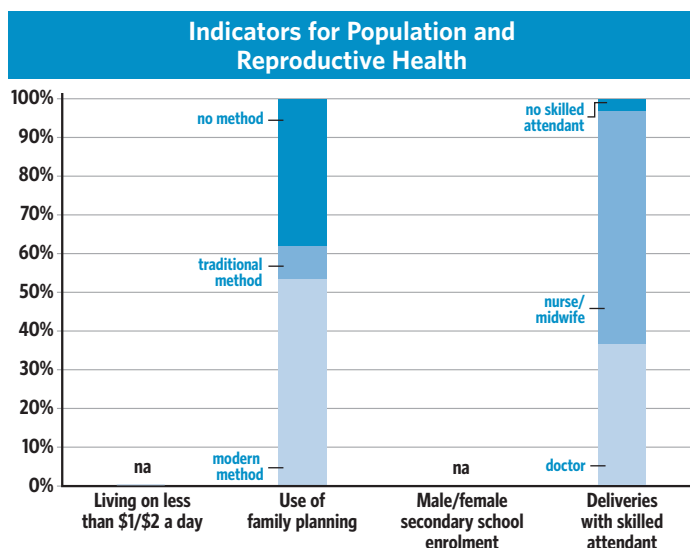
## Overview

The Democratic People's Republic of Korea, with 22.5 million people, does not have an explicit population policy or programme. The total fertility rate (TFR) has declined slightly over the last decade and is presently 2.2 lifetime births per woman. The UNFPA funded 2002 Reproductive Health Survey measured proximate determinants that contribute to a low TFR, such as a moderately high contraceptive prevalence rate, a high level of urbanization and high educational levels for women. However, many indicators point to what may be a recent increase in fertility, perhaps in response to improving living conditions. In 2002, the government initiated a number of new reforms aimed at rehabilitating the economy.

In accordance with the Programme of Action adopted at the International Conference on Population and Development (ICPD), the government is focusing on the need to provide information, counseling and quality services to women of reproductive age, the promotion of gender equality, the reduction of maternal mortality and the health consequences of unsafe abortion. The Ministry of Public Health revised the Reproductive Health Clinical Guidelines and Protocols so they meet international standards. The new guidelines are compulsory for all medical institutions in the country. Procedures are now in place for providing a wide range of reproductive health services, such as contraceptives, maternal and child health, prevention and treatment of STIs and HIV/AIDS, as well as maintaining quality control.

There are still urgent humanitarian needs and the government's priority task is to ensure food security. Moreover, the health and nutritional status of the majority of the population, in particular women and children, remains poor. There have been some improvements, particularly in child nutrition, attributed to feeding programmes.

Although HIV/AIDS is currently not a threat, several risk factors could pose danger in the coming years, including cross border movements, increased international travel, tourism and lack of awareness among the population and health staff. The government is taking measures to prevent HIV/AIDS, including advocacy campaigns and some very limited screening and testing.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	9,933.0	11,232.8
Population in Thousands, Female	9,756.8	11,254.9
Population Growth Rate, %	na	0.5
Crude Birth Rate per 1,000 Population	20.9	18.6
Crude Death Rate per 1,000 Population	8.2	10.7
Urban Population, %	58.4	61.7
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	56.0	54.1
Total Fertility Rate per Woman 15-49	2.42	2.17
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	53.0	58.2
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	61.8	68.6
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 70	67
MMR, Lower Bound	● ▲ na	17
MMR, Upper Bound	● ▲ na	130
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	22.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 38.2	43.4
Under Age 5 Mortality Rate, Total	● ▲ 52	56
Under Age 5 Mortality Rate, Female	● ▲ na	55
Under Age 5 Mortality Rate, Male	● ▲ na	61
Life Expectancy at Birth, Total, Years	● ▲ 65.4	63.7
Life Expectancy at Birth, Female, Years	● ▲ 68.1	66.8
Life Expectancy at Birth, Male, Years	● ▲ 63.0	60.9
Median Age of Total Population	● ▲ 25.7	31.1
Population 60 Years and Over, %	● ▲ 7.3	11.2
Dependency Ratio	● ▲ 46	47

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
3.52	0.23	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	na
Gross Domestic Product Growth Rate, Annual %	na	na
Income Group per World Bank Classification	na	Low income
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ na	100
Antenatal Care, At Least One Visit, %	na	na
Deliveries Attended by Skilled Attendants, %	●▲ na	97
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	55.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	na	na
Illiteracy Rate, % of Population 15 and Over, Female	na	na
Illiteracy Rate, % of Population 15 to 24, Male	na	na
Illiteracy Rate, % of Population 15 to 24, Female	na	na
Ratio of Girls to Boys, Primary Education	▲ na	na
Ratio of Girls to Boys, Secondary Education	▲ na	0.52
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	na
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	na
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	na
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	na
Children Underweight Under 5, Male, %	na	66
Children Underweight Under 5, Female, %	na	54
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	21.8	16.0
Age-Specific Fertility Rate per 1,000 Women, 15-20	3.5	2.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	na	na
Mean Age at Marriage, Female	na	na
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	84.3
Labor Force Participation Rate, 15-64, Female	na	67.0
Seats in Parliament Held by Women, %	20.0	20.0
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	648.9
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	10.2
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	98.3/94.7
No Education, Primary, %	na
Highest Level of Education, %	96.7
Provincial Low/High, %	95.8/97.9 Plain County/Inland City
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	6.3/15.4
No Education, Primary, %	na
Highest Level of Education, %	9.9
Provincial Low/High, %	4.8/15.5 Coast City/Mountainous County
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Korea, Republic of

## Overview

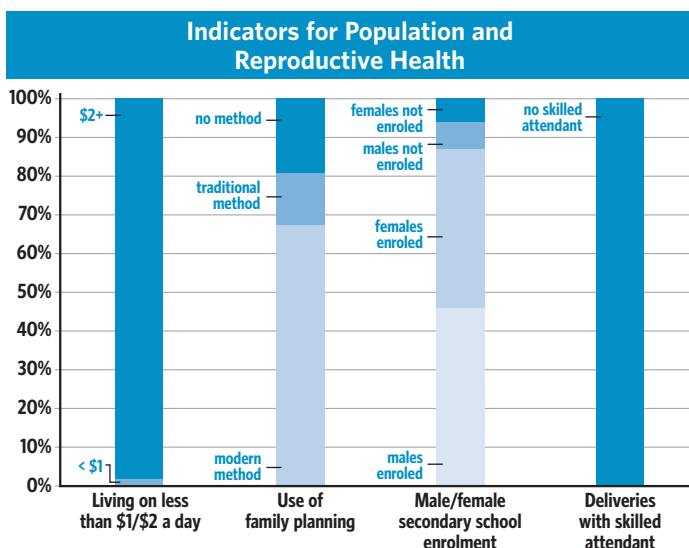
The Republic of Korea has experienced impressive socioeconomic changes during the past three decades. Rapid economic growth and industrialization have accelerated urbanization. Eighty-one per cent of the country's population of 47.8 million lives in urban areas. Tension between the states of the Republic of Korea and the Democratic People's Republic of Korea, and the associated military presence, continues to be a major political issue in the region and a potential source of conflict.

Since the beginning of the first Five-year Economic Development Plan in 1962, the economy and quality of life have improved rapidly. The country's gross national income — US\$ 473.1 billion in 2001 — was the 13th largest in the world.

In recent years, the health and quality of life of the population have improved steadily. There has been a significant rise in life expectancy, in part due to progress in medical services and increases in the number of medical facilities and medical staff. These improvements have also contributed to reductions in infant and maternal mortality. The total fertility rate is 1.4 lifetime births per woman. The extension of health insurance to the entire population has led to greater demands for health care, which has resulted in the need for a larger health workforce and more facilities.

As the elderly population grows and the number of people suffering from chronic degenerative diseases increases, treatment-focused health care policies are being increasingly supplemented by prevention-focused and health promotion policies. These changes have also contributed to decreasing rates of infant and maternal mortality.

The launching in 2003 of the Korean International Foundation for Health and Development (KIFHAD) reflects the country's increasing interest in international health development. KIFHAD's objectives are primarily medical relief and health system support for developing countries, emergency aid for disaster areas, and health care support for the Democratic People's Republic of Korea.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	21,568.2	23,972.7
Population in Thousands, Female	21,301.1	23,844.2
Population Growth Rate, %	na	0.4
Crude Birth Rate per 1,000 Population	16.4	13.7
Crude Death Rate per 1,000 Population	5.9	5.8
Urban Population, %	73.8	80.8
Sex Ratio at Birth, Male Births per Female Births	1.14	1.05
Women 15-49, %	56.9	55.7
Total Fertility Rate per Woman 15-49	1.65	1.43
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	69.5	66.9
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	79.4	80.5
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 130	20
MMR, Lower Bound	● ▲ na	10
MMR, Upper Bound	● ▲ na	40
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	3.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 13.8	3.7
Under Age 5 Mortality Rate, Total	● ▲ 18	5
Under Age 5 Mortality Rate, Female	● ▲ na	6
Under Age 5 Mortality Rate, Male	● ▲ na	8
Life Expectancy at Birth, Total, Years	● ▲ 71.0	77.5
Life Expectancy at Birth, Female, Years	● ▲ 75.3	81.2
Life Expectancy at Birth, Male, Years	● ▲ 67.1	73.8
Median Age of Total Population	● ▲ 26.9	35.1
Population 60 Years and Over, %	● ▲ 7.7	13.7
Dependency Ratio	● ▲ 45	39

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
2.65	305.23	3.27	2422.88

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	17,908
Gross Domestic Product Growth Rate, Annual %	9	3
Income Group per World Bank Classification	na	High income: non OECD
Population Below \$1/Day, %	▲ na	<2
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	2.9
Access to Improved Water Supply, %	▲ 78	92
Antenatal Care, At Least One Visit, %	96	96
Deliveries Attended by Skilled Attendants, %	●▲ 95	100
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	2	1
Illiteracy Rate, % of Population 15 and Over, Female	7	3
Illiteracy Rate, % of Population 15 to 24, Male	0	0
Illiteracy Rate, % of Population 15 to 24, Female	0	0
Ratio of Girls to Boys, Primary Education	▲ 0.94	0.89
Ratio of Girls to Boys, Secondary Education	▲ na	0.92
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	106
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	105
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	90
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	91
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	100	25
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	139
Estimated HIV Prevalence, 15-49, Total	na	<0.1
Estimated HIV Prevalence, 15-49, Male	na	0.1
Estimated HIV Prevalence, 15-49, Female	na	0.0

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	20.4	14.5
Age-Specific Fertility Rate per 1,000 Women, 15-20	4.0	3.5
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	28.5	28.5
Mean Age at Marriage, Female	25.4	25.4
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	0.0
HIV Prevalence, 15-24, Female	▲ na	0.0
HIV Prevalence, 15-24, Male	▲ na	0.0

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	0.4
Gender Empowerment Measure, Rank	na	68.0
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	76.1	77.9
Labor Force Participation Rate, 15-64, Female	50.0	52.8
Seats in Parliament Held by Women, %	2.0	5.9
Female Legislators, Senior Officials and Managers, %	na	5.0
Female Professional and Technical Workers, %	na	34.0

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	-1,056.2
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	-8.6
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Lao People's Democratic Republic

## Overview

The Lao PDR, with 5.9 million people, is one of the poorest countries in Asia, ranking 133 out of 177 countries, according to the 2005 UNDP Human Development Index. Health concerns remain a pressing social issue. Poor access to medical care, the lack of clean drinking water and language barriers preventing the use of health services are major factors affecting health.

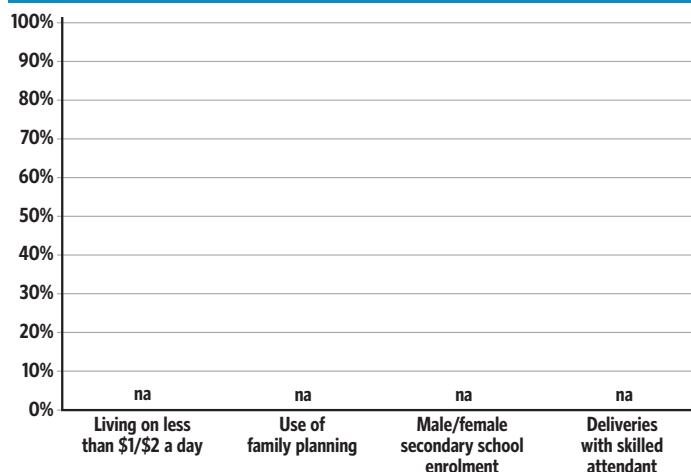
In September 2003, the National Growth and Poverty Eradication Strategy (NGPES), which replaced the Poverty Reduction Strategy Paper, revealed that about 30 per cent of the population lives in poverty. While poverty has steadily been reduced over the past years, the gap between rich and poor is widening and regional variations are evident. Reproductive health is integrated within the primary health care network and particular emphasis is placed on maternal and child health. Reduction of maternal mortality — currently 650 deaths per 100,000 live births — is one of the government's top priorities. Gender issues have also been taken into consideration, including girls' education and gender mainstreaming.

The government is in the process of updating the National Population and Development Policy to incorporate emerging issues such as adolescent reproductive health, HIV/AIDS and reproductive rights, as well as developing a comprehensive reproductive health policy.

The National Reproductive Health Survey 2000, funded by UNFPA, shows that progress has been made in reducing maternal mortality, increasing life expectancy and reducing infant mortality. However, the total fertility rate is 5.2 lifetime births per woman and adolescent fertility remains high. Adolescent reproductive health issues are now more accepted in the country and senior officials recognize young people's needs. UNFPA (with UNICEF) is funding sexual and reproductive health, HIV/AIDS and population education programmes.

While the HIV/AIDS prevalence rate remains low, Lao PDR is becoming increasingly vulnerable to the spread of the disease. The efforts of various donors who support the National Commission for the Control of AIDS have resulted in a high level of awareness among the general population.

### Indicators for Population and Reproductive Health



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	2,052.9	2,964.0
Population in Thousands, Female	2,079.5	2,960.2
Population Growth Rate, %	na	2.2
Crude Birth Rate per 1,000 Population	43.0	38.2
Crude Death Rate per 1,000 Population	17.0	11.9
Urban Population, %	15.4	21.6
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	45.2	48.6
Total Fertility Rate per Woman 15-49	6.05	5.16
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	28.9
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	32.2
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 650	650
MMR, Lower Bound	● ▲ na	160
MMR, Upper Bound	● ▲ na	1,200
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	35.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 110.1	83.8
Under Age 5 Mortality Rate, Total	● ▲ 171	133
Under Age 5 Mortality Rate, Female	● ▲ na	137
Under Age 5 Mortality Rate, Male	● ▲ na	144
Life Expectancy at Birth, Total, Years	● ▲ 49.5	55.5
Life Expectancy at Birth, Female, Years	● ▲ 50.8	56.8
Life Expectancy at Birth, Male, Years	● ▲ 48.3	54.3
Median Age of Total Population	● ▲ 18.0	19.1
Population 60 Years and Over, %	● ▲ 6.1	5.3
Dependency Ratio	● ▲ 91	80

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>1.50</b>	<b>5.17</b>	<b>1.25</b>	<b>7.80</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	2.8/5.4
No Education, Primary	6.2
Highest Level of Education	3.3
Provincial Low/High	4.5/5.4 Central/South
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	41.7/87.2
No Education, Primary	96.1
Highest Level of Education	7.5
Provincial Low/High	75.7/88.1 Central/North
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	49.0/115.0
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	8.8/20.5
No Education, Primary, %	31.2



SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	1,896
Gross Domestic Product Growth Rate, Annual %	4	5
Income Group per World Bank Classification	na	Low income
Population Below \$1/Day, %	▲ na	26.3
Population Living Below National Poverty Line, %	▲ na	38.6
Share of Income or Consumption by Poorest Quintile	na	3.2
Access to Improved Water Supply, %	▲ 28	43
Antenatal Care, At Least One Visit, %	na	27
Deliveries Attended by Skilled Attendants, %	●▲ na	19
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	39.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	30	21
Illiteracy Rate, % of Population 15 and Over, Female	57	41
Illiteracy Rate, % of Population 15 to 24, Male	21	13
Illiteracy Rate, % of Population 15 to 24, Female	39	25
Ratio of Girls to Boys, Primary Education	▲ 0.77	0.83
Ratio of Girls to Boys, Secondary Education	▲ na	0.69
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	124
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	108
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	50
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	37
Children Underweight Under 5, Male, %	na	41
Children Underweight Under 5, Female, %	na	39
Stunted Children under 5, Severe, %	na	20
Wasted Children under 5, Severe, %	na	3
Undernourished People, %	29.0	22.0
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	0.1
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	18.9	20.3
Age-Specific Fertility Rate per 1,000 Women, 15-20	109.5	88.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	na	na
Mean Age at Marriage, Female	na	na
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	0.0
HIV Prevalence, 15-24, Female	▲ na	0.0
HIV Prevalence, 15-24, Male	▲ na	0.0

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	91.1
Labor Force Participation Rate, 15-64, Female	na	77.4
Seats in Parliament Held by Women, %	9.0	22.9
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	610.2
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	33.0
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	40.0
Unmet Need for Family Planning, Thousands	● na	559.7

Highest Level of Education	0.0
Provincial Low/High, %	16.4/20.4 South/North
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	57.8/9.8
No Education, Primary, %	8.6
Highest Level of Education, %	52.1
Provincial Low/High, %	12.2/28.2 North/Central
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	42.3/26.3
No Education, Primary, %	12.5
Highest Level of Education, %	25.2
Provincial Low/High, %	17.7/33.3 South/Central
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	7.9/14.3
No Education, Primary, %	16.6
Highest Level of Education, %	8.5
Provincial Low/High, %	9.2/20.1 North/South
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Malaysia

## Overview

Malaysia has succeeded in reducing poverty to the extent that less than 2 per cent of the population lives on less than one dollar per day. Under the current National Plan, the goal of the poverty eradication programme is to reduce the incidence of poverty to 0.5 per cent by the year 2005.

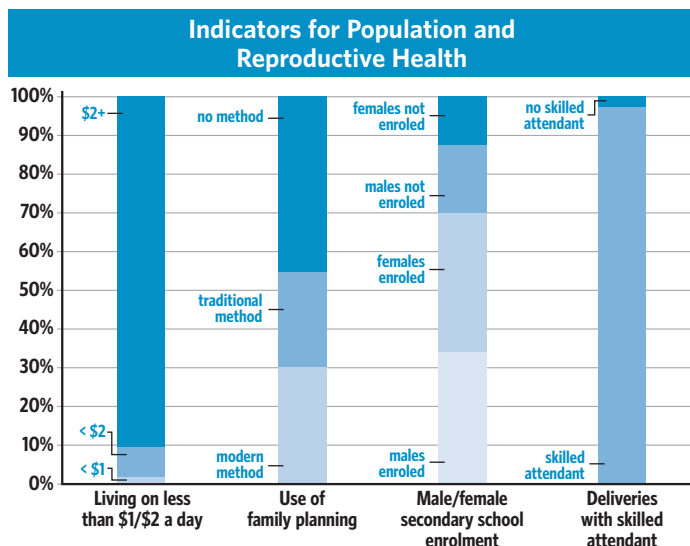
Malaysia's population of 25.3 million is young, with a median age of 24.7 years, according to 2005 figures. However, the welfare of the ageing population is also of concern as life expectancies for females and males are 76.0 and 71.4 years, respectively.

Reproductive health services are contained within the Family Health Programme, but they are also addressed through the Family Development Programme. Clinical services related to family planning are available at nearly all government health facilities established under the Ministry of Health, while menopause, andropause and counseling services are made available at government hospitals and some selected health clinics.

The Ministry of Women and Family Development, established in January 2001, is addressing issues related to population and development, reproductive health, and gender and women's empowerment. In 2004, the Ministry was given added responsibility over a broad range of social issues and it has since been renamed the Ministry of Women, Family and Community Development.

The acceptance of the Reproductive Health Adolescent Module (RHAM), developed with UNFPA funding and spearheaded by FFPAM, a renowned NGO, is evident by the creation of an electronic version, e-RHAM, funded by the government. The RHAM is a comprehensive tool for advocacy and training programmes, addressing sexual and reproductive health including HIV/AIDS, gender concerns and reproductive rights.

For UNFPA, 2004 marked the beginning of the cost sharing arrangement on an equal basis with the government. Three key areas — HIV/AIDS, population ageing and gender-based violence — have been identified, with national counterparts, as strategic issues for the future.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	9,056.4	12,864.6
Population in Thousands, Female	8,789.0	12,482.8
Population Growth Rate, %	na	1.8
Crude Birth Rate per 1,000 Population	30.8	25.5
Crude Death Rate per 1,000 Population	5.4	4.7
Urban Population, %	49.8	65.1
Sex Ratio at Birth, Male Births per Female Births	1.06	1.06
Women 15-49, %	51.7	52.5
Total Fertility Rate per Woman 15-49	3.81	3.21
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	31.4	29.8
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	48.3	54.5
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 80	41
MMR, Lower Bound	● ▲ na	20
MMR, Upper Bound	● ▲ na	81
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	5.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 16.1	9.6
Under Age 5 Mortality Rate, Total	● ▲ 20	12
Under Age 5 Mortality Rate, Female	● ▲ na	11
Under Age 5 Mortality Rate, Male	● ▲ na	15
Life Expectancy at Birth, Total, Years	● ▲ 70.1	73.6
Life Expectancy at Birth, Female, Years	● ▲ 72.3	76.0
Life Expectancy at Birth, Male, Years	● ▲ 68.1	71.4
Median Age of Total Population	● ▲ 21.9	24.7
Population 60 Years and Over, %	● ▲ 5.8	7.0
Dependency Ratio	● ▲ 67	59

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>2.00</b>	<b>78.42</b>	<b>5.25</b>	<b>962.56</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	5.7/14.1	Sarawak/Sabah
No Education, Primary	na	
Highest Level of Education	na	
Provincial Low/High	na/na	
Poorest/Richest Quintile, %	na/na	

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH		1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars		na	9,696
Gross Domestic Product Growth Rate, Annual %		5	7
Income Group per World Bank Classification		na	Upper middle income
Population Below \$1/Day, %	▲	na	<2
Population Living Below National Poverty Line, %	▲	15.5	15.5
Share of Income or Consumption by Poorest Quintile		na	1.7
Access to Improved Water Supply, %	▲	78	95
Antenatal Care, At Least One Visit, %		84	84
Deliveries Attended by Skilled Attendants, %	●▲	92	97
Family Planning Programme Effort Index, 1999 (Total Mean Score)		na	69.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)		na	na
Illiteracy Rate, % of Population 15 and Over, Male		13	7
Illiteracy Rate, % of Population 15 and Over, Female		26	13
Illiteracy Rate, % of Population 15 to 24, Male		5	2
Illiteracy Rate, % of Population 15 to 24, Female		6	1
Ratio of Girls to Boys, Primary Education	▲	0.95	0.95
Ratio of Girls to Boys, Secondary Education	▲	na	1.05
Primary School Enrolment, Gross % of School Age Population, Male	●▲	na	93
Primary School Enrolment, Gross % of School Age Population, Female	●▲	na	93
Secondary School Enrolment, Gross % of School Age Population, Male	●▲	na	67
Secondary School Enrolment, Gross % of School Age Population, Female	●▲	na	74
Children Underweight Under 5, Male, %		na	na
Children Underweight Under 5, Female, %		na	na
Stunted Children under 5, Severe, %		na	na
Wasted Children under 5, Severe, %		na	na
Undernourished People, %		3.0	3.0
Refugees, Number		10,300	442
Internally Displaced Persons, Number		na	na
Asylum Seekers, Number		na	9,205
Estimated HIV Prevalence, 15-49, Total		na	0.4
Estimated HIV Prevalence, 15-49, Male		na	0.7
Estimated HIV Prevalence, 15-49, Female		na	0.1

ADOLESCENT REPRODUCTIVE HEALTH		1990	Most Recent
Proportion of Population 15-24		19.1	18.1
Age-Specific Fertility Rate per 1,000 Women, 15-20		30.5	18.0
Median Age at First Sexual Intercourse, Female, 25-49		na	na
Mean Age at Marriage, Male		na	26.6
Mean Age at Marriage, Female		na	23.5
Married by 18, Percent, Female, 25-49		na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲	na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲	na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %		na	na
HIV Prevalence, 15-24, Total	▲	na	0.4
HIV Prevalence, 15-24, Female	▲	na	0.1
HIV Prevalence, 15-24, Male	▲	na	0.7

GENDER EQUALITY		1990	Most Recent
Gender Empowerment Measure, Value		na	0.5
Gender Empowerment Measure, Rank		na	44.0
Malnourished Women, %		na	na
Labor Force Participation Rate, 15-64, Male		81.9	35.7
Labor Force Participation Rate, 15-64, Female		45.2	39.4
Seats in Parliament Held by Women, %		5.0	16.3
Female Legislators, Senior Officials and Managers, %		na	20.0
Female Professional and Technical Workers, %		na	45.0

REPRODUCTIVE HEALTH COMMODITY SECURITY		1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands		na	1,705.3
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %		na	22.2
Unmet Need for Family Planning, Spacing, %	●	na	na
Unmet Need for Family Planning, Limiting, %	●	na	na
Unmet Need for Family Planning, Total, %	●	na	na
Unmet Need for Family Planning, Thousands	●	na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Maldives



## Overview

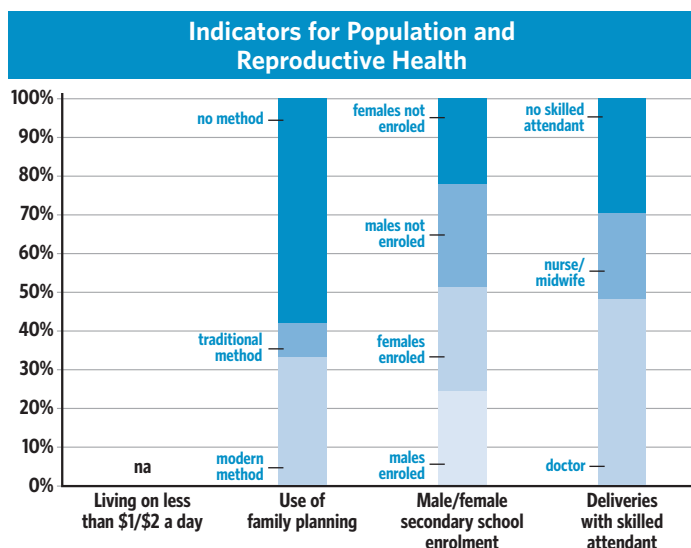
With a population of almost 330,000, the Maldives, one of the world's least developed countries, has made impressive advances in health and education. Increasing life expectancy at birth (67 years for both sexes) and decreasing infant mortality rates (38 infant deaths per 1,000 live births) underscore the progress made in terms of human development. Though the total fertility rate is 5.1 lifetime births per woman, population growth continues to decline. However, the country's skewed population distribution (roughly one-quarter of the population lives on the main island) continues to aggravate development efforts.

The government gives safe motherhood high priority. The maternal mortality ratio has been reduced to 110 deaths per 100,000 live births. Studies show that up to 47 per cent of women had at least one antenatal care visit before delivery.

A number of policy documents and strategic plans provide the frameworks for addressing issues in population and development. These include Vision 2020, which provides broad strategic direction and reflects the Millennium Development Goals. The National Development Plan 2001 to 2005, which includes health and gender factors, forms the basis for poverty reduction strategies. Gender mainstreaming, gender equality and women's empowerment initiatives continued with the launching of the 2003 National Policy on the Equality of Men and Women.

Adolescents make up 22 per cent of the population. Addressing their sexual and reproductive health needs is a challenge. The National Youth Policy of 2003 covers aspects of adolescent reproductive health, including HIV/AIDS and sexually transmitted infections (STIs), as well as family planning.

Although the Maldives is a low prevalence country for STIs, including HIV/AIDS, it is potentially at high risk given factors such as a youthful population, migration patterns, low condom use and growing drug abuse. An initiative has been launched to revise and strengthen the National HIV/AIDS Prevention Policy.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	110.6	169.0
Population in Thousands, Female	105.1	160.2
Population Growth Rate, %	na	2.5
Crude Birth Rate per 1,000 Population	40.9	37.0
Crude Death Rate per 1,000 Population	9.5	5.9
Urban Population, %	25.9	29.7
Sex Ratio at Birth, Male Births per Female Births	1.04	1.04
Women 15-49, %	42.8	49.3
Total Fertility Rate per Woman 15-49	6.32	5.05
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	34.0
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	39.0
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ na	110
MMR, Lower Bound	● ▲ na	28
MMR, Upper Bound	● ▲ na	220
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	37.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 73.6	38.3
Under Age 5 Mortality Rate, Total	● ▲ 90	49
Under Age 5 Mortality Rate, Female	● ▲ na	56
Under Age 5 Mortality Rate, Male	● ▲ na	41
Life Expectancy at Birth, Total, Years	● ▲ 60.3	67.4
Life Expectancy at Birth, Female, Years	● ▲ 59.0	67.1
Life Expectancy at Birth, Male, Years	● ▲ 61.6	67.8
Median Age of Total Population	● ▲ 16.7	18.9
Population 60 Years and Over, %	● ▲ 5.4	5.1
Dependency Ratio	● ▲ 99	79

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>3.98</b>	<b>81.31</b>	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	na
Gross Domestic Product Growth Rate, Annual %	na	9
Income Group per World Bank Classification	na	Lower middle income
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ 70	84
Antenatal Care, At Least One Visit, %	47	47
Deliveries Attended by Skilled Attendants, %	●▲ na	70
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	5	2
Illiteracy Rate, % of Population 15 and Over, Female	5	2
Illiteracy Rate, % of Population 15 to 24, Male	2	1
Illiteracy Rate, % of Population 15 to 24, Female	2	1
Ratio of Girls to Boys, Primary Education	▲ na	0.95
Ratio of Girls to Boys, Secondary Education	▲ na	1.05
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	119
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	117
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	62
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	71
Children Underweight Under 5, Male, %	na	42
Children Underweight Under 5, Female, %	na	44
Stunted Children under 5, Severe, %	na	7
Wasted Children under 5, Severe, %	na	3
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	18.3	21.9
Age-Specific Fertility Rate per 1,000 Women, 15-20	143.0	62.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	23.2	23.2
Mean Age at Marriage, Female	19.1	19.1
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	0.4
Gender Empowerment Measure, Rank	na	62.0
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	78.9	75.7
Labor Force Participation Rate, 15-64, Female	20.5	28.6
Seats in Parliament Held by Women, %	4.0	12.0
Female Legislators, Senior Officials and Managers, %	na	15.0
Female Professional and Technical Workers, %	na	40.0

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	40.7
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	38.1
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na



# Marshall Islands, Republic of

## Overview

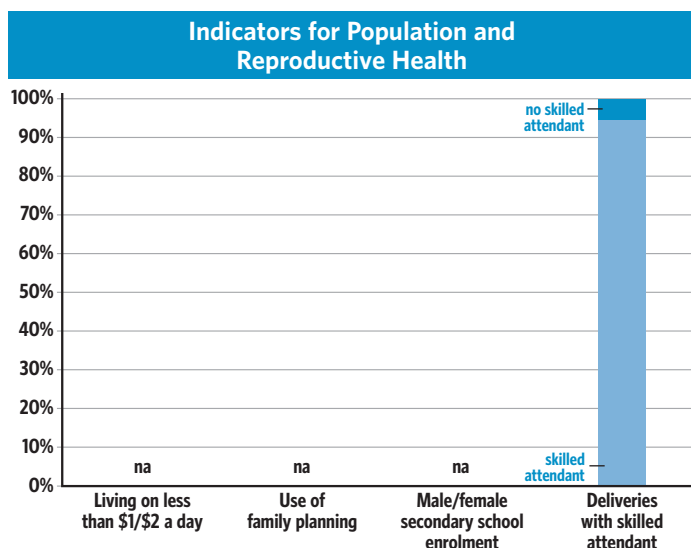
The Republic of the Marshall Islands is made up of a large number of widely scattered coral atolls. The country is politically and economically linked with the United States of America through a "Compact of Free Association", which results in a substantial in-flow of US development assistance. The estimated population in 2005 was 53,000 with an annual growth rate of 1.6 per cent. Although the growth rate has declined in recent years due to emigration, the total fertility rate is 5.7 births per woman, the highest of any Pacific country or territory.

A National Population Policy was developed some years ago and revised in 1995 as a result of the International Conference on Population and Development (ICPD). Progress has been made toward the achievement of many ICPD Programme of Action goals. The Marshall Islands has relatively high levels of adult literacy, school enrolment and life expectancy.

In response to concerns that sexually transmitted infection rates were increasing, a survey on sexual attitudes and practices was conducted with funding from UNFPA. The survey revealed that some young people become sexually active from the age of 13 or 14 and that a number of them are engaging in unsafe sexual practices and lack awareness of the transmission routes of HIV/AIDS.

National priorities include reducing population growth and urban population densities, reducing malnutrition and strengthening the capacity of reproductive health and family planning programmes, with emphasis on adolescent sexual and reproductive health, including the prevention of STIs and HIV/AIDS.

A National Youth Policy has been developed and is being implemented. It emphasizes sexuality education, the promotion and distribution of condoms and youth peer education.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	na	27.1
Population in Thousands, Female	na	25.9
Population Growth Rate, %	4.3	1.6
Crude Birth Rate per 1,000 Population	na	35.0
Crude Death Rate per 1,000 Population	8.9	5.0
Urban Population, %	na	na
Sex Ratio at Birth, Male Births per Female Births	na	na
Women 15-49, %	na	na
Total Fertility Rate per Woman 15-49	na	5.70
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	na
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	na
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ na	na
MMR, Lower Bound	● ▲ na	na
MMR, Upper Bound	● ▲ na	na
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	26.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 56.9	37.0
Under Age 5 Mortality Rate, Total	● ▲ na	na
Under Age 5 Mortality Rate, Female	● ▲ na	na
Under Age 5 Mortality Rate, Male	● ▲ na	na
Life Expectancy at Birth, Total, Years	● ▲ 61.0	67.5
Life Expectancy at Birth, Female, Years	● ▲ 62.6	69.4
Life Expectancy at Birth, Male, Years	● ▲ 59.6	65.7
Median Age of Total Population	● ▲ na	na
Population 60 Years and Over, %	● ▲ na	na
Dependency Ratio	● ▲ na	na

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>7.13</b>	<b>141.33</b>	<b>9.46</b>	<b>570.21</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH		1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars		na	na
Gross Domestic Product Growth Rate, Annual %		na	2
Income Group per World Bank Classification		na	Lower middle income
Population Below \$1/Day, %	▲	na	na
Population Living Below National Poverty Line, %	▲	na	na
Share of Income or Consumption by Poorest Quintile		na	na
Access to Improved Water Supply, %	▲	na	85
Antenatal Care, At Least One Visit, %		na	na
Deliveries Attended by Skilled Attendants, %	●▲	na	95
Family Planning Programme Effort Index, 1999 (Total Mean Score)		na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)		na	na
Illiteracy Rate, % of Population 15 and Over, Male		na	na
Illiteracy Rate, % of Population 15 and Over, Female		na	na
Illiteracy Rate, % of Population 15 to 24, Male		na	na
Illiteracy Rate, % of Population 15 to 24, Female		na	na
Ratio of Girls to Boys, Primary Education	▲	na	0.93
Ratio of Girls to Boys, Secondary Education	▲	na	na
Primary School Enrolment, Gross % of School Age Population, Male	●▲	na	110
Primary School Enrolment, Gross % of School Age Population, Female	●▲	na	103
Secondary School Enrolment, Gross % of School Age Population, Male	●▲	na	75
Secondary School Enrolment, Gross % of School Age Population, Female	●▲	na	76
Children Underweight Under 5, Male, %		na	na
Children Underweight Under 5, Female, %		na	na
Stunted Children under 5, Severe, %		na	na
Wasted Children under 5, Severe, %		na	na
Undernourished People, %		na	na
Refugees, Number		na	na
Internally Displaced Persons, Number		na	na
Asylum Seekers, Number		na	na
Estimated HIV Prevalence, 15-49, Total		na	na
Estimated HIV Prevalence, 15-49, Male		na	na
Estimated HIV Prevalence, 15-49, Female		na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

ADOLESCENT REPRODUCTIVE HEALTH		1990	Most Recent
Proportion of Population 15-24		na	na
Age-Specific Fertility Rate per 1,000 Women, 15-20		na	na
Median Age at First Sexual Intercourse, Female, 25-49		na	na
Mean Age at Marriage, Male		na	na
Mean Age at Marriage, Female		na	na
Married by 18, Percent, Female, 25-49		na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲	na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲	na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %		na	na
HIV Prevalence, 15-24, Total	▲	na	na
HIV Prevalence, 15-24, Female	▲	na	na
HIV Prevalence, 15-24, Male	▲	na	na

GENDER EQUALITY		1990	Most Recent
Gender Empowerment Measure, Value		na	na
Gender Empowerment Measure, Rank		na	na
Malnourished Women, %		na	na
Labor Force Participation Rate, 15-64, Male		na	na
Labor Force Participation Rate, 15-64, Female		na	na
Seats in Parliament Held by Women, %		na	na
Female Legislators, Senior Officials and Managers, %		na	na
Female Professional and Technical Workers, %		na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY		1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands		na	na
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %		na	na
Unmet Need for Family Planning, Spacing, %	●	na	na
Unmet Need for Family Planning, Limiting, %	●	na	na
Unmet Need for Family Planning, Total, %	●	na	na
Unmet Need for Family Planning, Thousands	●	na	na

### Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:

Poorest/Richest Quintile, % na/na

### Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:

Poorest/Richest Quintile, % na/na

### Children Underweight Under 5, Severe:

Urban/Rural, % na/na

No Education, Primary, % na

Highest Level of Education, % na

Provincial Low/High, % na/na

Poorest/Richest Quintile, % na/na

### Girls 6-10 Who Currently Attend School:

Poorest/Richest Quintile, % na/na

### Boys 6-10 Who Currently Attend School:

Poorest/Richest Quintile, % na/na

### Malnourished Women:

Poorest/Richest Quintile, % na/na

### Antenatal Care, At Least One Visit:

Poorest/Richest Quintile, % na/na

# Micronesia (Federated States of)

## Overview

The Federated States of Micronesia consists of four major island groups. The estimated population in 2005 was 110,500 with an annual growth rate of 0.6 per cent. The relatively low population growth rate is due mainly to out-migration to Guam and the U.S. mainland.

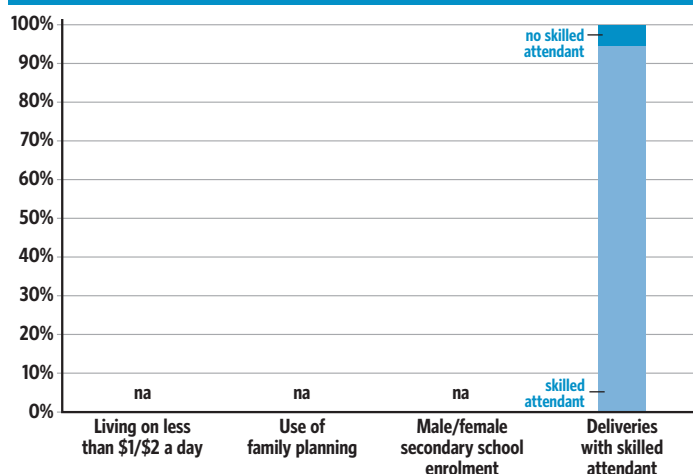
While both the crude birth rate and the total fertility rate are high compared with developed countries, they have been decreasing over the years. The average number of lifetime births per woman has somewhat decreased from 5.0 in 1990 to 4.6 in 2005. This decline is thought to be due to family planning, the education and employment of women and emigration, rather than economic development. However, the TFR varies considerably between states, from 6.0 to 3.3. Women of reproductive age comprised 50 per cent of the population. Average life expectancy at birth is 67 years for males and 69 years for females.

High population growth adversely affects health indicators such as infant and maternal mortality, and offsets economic growth. The maternal mortality ratio is estimated to be 317 per 100,000 live births, while the infant mortality rate is 36 per 1,000 live births. Prenatal care is slowly improving in the state centres and is being expanded to remote areas.

Overall, Micronesia's population is young with 22 per cent between the ages of 15 and 24. To help meet the needs of young people, a regional adolescent reproductive health (ARH) project, supported by UNFPA, strengthens existing school-based clinics by improving ARH counseling and services.

Citizens of the Federated States of Micronesia enjoy a level of health care that is relatively high, compared to the rest of the Pacific Region. The United States Public Health Service provides doctors at the four state hospitals. But Micronesians are taking their place in the system through such programmes as the Medical Officer Training Programme. Overall, 75 per cent of the population has access to health care services.

### Indicators for Population and Reproductive Health



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	49.3	55.6
Population in Thousands, Female	47.0	54.9
Population Growth Rate, %	na	0.6
Crude Birth Rate per 1,000 Population	33.9	27.1
Crude Death Rate per 1,000 Population	6.6	6.0
Urban Population, %	26.4	30.0
Sex Ratio at Birth, Male Births per Female Births	1.07	1.07
Women 15-49, %	46.5	50.0
Total Fertility Rate per Woman 15-49	5.00	4.59
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	na
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	na
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ na	na
MMR, Lower Bound	● ▲ na	na
MMR, Upper Bound	● ▲ na	na
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	12.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 43.5	36.2
Under Age 5 Mortality Rate, Total	● ▲ 54	45
Under Age 5 Mortality Rate, Female	● ▲ na	25
Under Age 5 Mortality Rate, Male	● ▲ na	26
Life Expectancy at Birth, Total, Years	● ▲ 66.2	68.0
Life Expectancy at Birth, Female, Years	● ▲ 66.8	68.7
Life Expectancy at Birth, Male, Years	● ▲ 65.7	67.3
Median Age of Total Population	● ▲ 17.6	19.6
Population 60 Years and Over, %	● ▲ 5.3	4.9
Dependency Ratio	● ▲ 91	74

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
5.73	126.13	4.87	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	na
Gross Domestic Product Growth Rate, Annual %	na	2
Income Group per World Bank Classification	na	Lower middle income
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ na	94
Antenatal Care, At Least One Visit, %	na	na
Deliveries Attended by Skilled Attendants, %	●▲ na	88
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	na	na
Illiteracy Rate, % of Population 15 and Over, Female	na	na
Illiteracy Rate, % of Population 15 to 24, Male	na	na
Illiteracy Rate, % of Population 15 to 24, Female	na	na
Ratio of Girls to Boys, Primary Education	▲ na	1.01
Ratio of Girls to Boys, Secondary Education	▲ na	1.00
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	na
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	na
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	na
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	na
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	20.7	22.3
Age-Specific Fertility Rate per 1,000 Women, 15-20	54.5	33.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	na	na
Mean Age at Marriage, Female	na	na
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	na
Labor Force Participation Rate, 15-64, Female	na	na
Seats in Parliament Held by Women, %	na	na
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	1.8
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	6.3
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Mongolia

## Overview

With a population of just 2.6 million spread out over an area the size of Western Europe, Mongolia is one of the most sparsely populated countries in the world. Its growth rate has dropped to 1.2 per cent per year, while the total fertility rate is 3.2 lifetime births per woman. Nearly one-quarter (22 per cent) of the total population consists of youth aged 15-24.

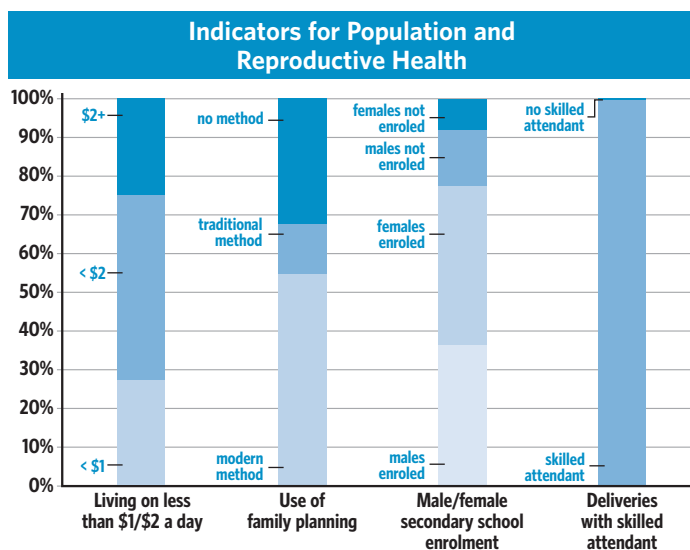
Declining fertility, combined with a relatively high maternal mortality ratio — 110 deaths per 100,000 live births — are priority concerns for the government. Other reproductive health issues include: relatively high abortion rates; increasing numbers of STIs, the rising threat of HIV infections, especially among youth; and poor quality of and lack of access to reproductive health information and services, particularly among rural populations.

The use of modern contraceptives has increased from 46 per cent in 1998 to 54 per cent in 2000. Despite increased awareness of the transmission routes of STIs and HIV/AIDS, only about half of those surveyed knew that a healthy-looking person can have the AIDS virus. According to official health statistics published in 2004, there are only five reported cases of HIV/AIDS in the entire country, but UNAIDS estimates are much higher.

A new Population Development Policy was launched in 2004. It emphasizes people-centred development, human rights, gender equality, and the participation of civil society. The policy addresses demography, poverty, gender, health, education, family development, social welfare, housing, environment, migration to urban areas, and population data and research.

The government's Programme of Action (2004-2008) addresses population and health issues in line with the MDGs. Two major health policy documents — The Health Sector Master Plan (2005-2015) and The Maternal Mortality Reduction Strategy (2005-2010) — are being developed. The Domestic Violence Bill was adopted by parliament in 2004.

The first National MDG Report was launched in October 2004. Under Goal 5, it focuses on reducing maternal mortality by improving access to reproductive health services.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	1,105.8	1,325.5
Population in Thousands, Female	1,110.3	1,321.0
Population Growth Rate, %	na	1.2
Crude Birth Rate per 1,000 Population	32.2	24.3
Crude Death Rate per 1,000 Population	8.8	6.9
Urban Population, %	57.0	57.0
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	47.2	58.5
Total Fertility Rate per Woman 15-49	4.10	3.16
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	54.3
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	67.4
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 65	110
MMR, Lower Bound	● ▲ na	75
MMR, Upper Bound	● ▲ na	150
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	26.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 70.5	54.6
Under Age 5 Mortality Rate, Total	● ▲ 103	79
Under Age 5 Mortality Rate, Female	● ▲ na	83
Under Age 5 Mortality Rate, Male	● ▲ na	88
Life Expectancy at Birth, Total, Years	● ▲ 60.7	64.9
Life Expectancy at Birth, Female, Years	● ▲ 62.6	66.9
Life Expectancy at Birth, Male, Years	● ▲ 59.0	62.9
Median Age of Total Population	● ▲ 18.8	23.7
Population 60 Years and Over, %	● ▲ 5.8	5.7
Dependency Ratio	● ▲ 84	52

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>4.60</b>	<b>18.82</b>	<b>5.95</b>	<b>122.54</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	2.5/3.7
No Education, Primary	3.4
Highest Level of Education	2.8
Provincial Low/High	2.2/3.9 Ulaanbaatar/West
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	54.5/79.4
No Education, Primary	99.7
Highest Level of Education	55.3
Provincial Low/High	45.2/76.8 South/Central & West
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	38.0/72.0
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	5.7/12.9
No Education, Primary, %	10.2



SOCIO-ECONOMIC & HEALTH		1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars		na	1,802
Gross Domestic Product Growth Rate, Annual %		5	5
Income Group per World Bank Classification		na	Low income
Population Below \$1/Day, %	▲	na	27.0
Population Living Below National Poverty Line, %	▲	na	36.3
Share of Income or Consumption by Poorest Quintile		na	2.1
Access to Improved Water Supply, %	▲	66	62
Antenatal Care, At Least One Visit, %		98	97
Deliveries Attended by Skilled Attendants, %	●▲	na	99
Family Planning Programme Effort Index, 1999 (Total Mean Score)		na	38.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)		na	na
Illiteracy Rate, % of Population 15 and Over, Male		2	1
Illiteracy Rate, % of Population 15 and Over, Female		3	1
Illiteracy Rate, % of Population 15 to 24, Male		1	1
Illiteracy Rate, % of Population 15 to 24, Female		1	0
Ratio of Girls to Boys, Primary Education	▲	1.00	1.00
Ratio of Girls to Boys, Secondary Education	▲	na	1.19
Primary School Enrolment, Gross % of School Age Population, Male	●▲	na	100
Primary School Enrolment, Gross % of School Age Population, Female	●▲	na	102
Secondary School Enrolment, Gross % of School Age Population, Male	●▲	na	78
Secondary School Enrolment, Gross % of School Age Population, Female	●▲	na	90
Children Underweight Under 5, Male, %		na	13
Children Underweight Under 5, Female, %		na	13
Stunted Children under 5, Severe, %		na	9
Wasted Children under 5, Severe, %		na	1
Undernourished People, %		34.0	38.0
Refugees, Number		na	na
Internally Displaced Persons, Number		na	na
Asylum Seekers, Number		na	na
Estimated HIV Prevalence, 15-49, Total		na	<0.1
Estimated HIV Prevalence, 15-49, Male		na	na
Estimated HIV Prevalence, 15-49, Female		na	na

ADOLESCENT REPRODUCTIVE HEALTH		1990	Most Recent
Proportion of Population 15-24		20.7	22.2
Age-Specific Fertility Rate per 1,000 Women, 15-20		72.0	53.0
Median Age at First Sexual Intercourse, Female, 25-49		na	na
Mean Age at Marriage, Male		na	na
Mean Age at Marriage, Female		na	na
Married by 18, Percent, Female, 25-49		na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲	na	77
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲	na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %		na	57.0
HIV Prevalence, 15-24, Total	▲	na	na
HIV Prevalence, 15-24, Female	▲	na	na
HIV Prevalence, 15-24, Male	▲	na	na

GENDER EQUALITY		1990	Most Recent
Gender Empowerment Measure, Value		na	0.4
Gender Empowerment Measure, Rank		na	62.0
Malnourished Women, %		na	na
Labor Force Participation Rate, 15-64, Male		na	61.2
Labor Force Participation Rate, 15-64, Female		na	56.1
Seats in Parliament Held by Women, %		2.0	10.5
Female Legislators, Senior Officials and Managers, %		na	30.0
Female Professional and Technical Workers, %		na	66.0

REPRODUCTIVE HEALTH COMMODITY SECURITY		1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands		na	178.8
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %		na	20.9
Unmet Need for Family Planning, Spacing, %	●	na	na
Unmet Need for Family Planning, Limiting, %	●	na	na
Unmet Need for Family Planning, Total, %	●	na	na
Unmet Need for Family Planning, Thousands	●	na	na

Highest Level of Education	8.8
Provincial Low/High, %	4.4/26.3 Ulaanbaatar/South
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	96.9/96.4
No Education, Primary, %	83.3
Highest Level of Education, %	97.1
Provincial Low/High, %	93.9/100.0 Western/Eastern
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	53.5/55.1
No Education, Primary, %	39.7
Highest Level of Education, %	57.9
Provincial Low/High, %	51.5/61.9 Central 2/Southern
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	1.9/3.5
No Education, Primary, %	8.8
Highest Level of Education, %	1.1
Provincial Low/High, %	1.5/4.4 Southern/Eastern
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Myanmar



## Overview

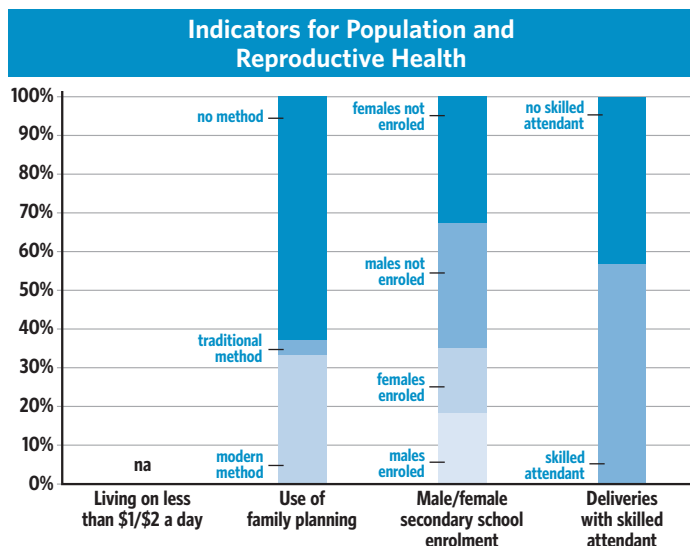
The total population of Myanmar was estimated at 50.5 million in 2005 and is growing by 1 per cent per year. Only 31 per cent of the population is urban, the remainder live in rural areas. Youth constitute about 20 per cent of the total population. Public funding for health and education is among the lowest in the world, at under 0.2% and 0.5% of Gross Domestic Product (GDP), respectively for the period 1999-2000.

Maternal mortality continues to be high in Myanmar, averaging 360 deaths per 100,000 live births in 2000. The potential impact of the HIV/AIDS pandemic on overall maternal mortality is also underestimated at present. According to 1990 data, approximately 76 per cent of women receive antenatal care from nurses and midwives. Doctors provide antenatal care for about 10 per cent of pregnancies, mainly in urban areas. Both quality and content of antenatal care services and postnatal care provided in the public sector vary considerably. The majority of deliveries are performed at home and are attended by a trained medical professional.

The UNFPA Country Office in Myanmar developed four component projects (2002-2005) covering reproductive health services (including adolescent reproductive health), behaviour change communication, data analysis and HIV/AIDS prevention.

Under strengthening of reproductive health services, UNFPA will gradually expand its support to include 100 townships by the end of 2005. One of the key issues addressed is improving accessibility and availability of modern contraceptives in poor communities. Although knowledge of modern contraceptive methods is high, there is a shortage of supplies.

In 2004, the first Reproductive Health Strategic Plan (2004-2008) was launched by the Ministry of Health in collaboration with WHO, UNFPA and UNICEF. It will expand and strengthen partnerships so that reproductive health needs can be addressed in a more effective and comprehensive manner.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	20,309.5	25,083.3
Population in Thousands, Female	20,443.6	25,436.2
Population Growth Rate, %	na	1.0
Crude Birth Rate per 1,000 Population	30.5	26.5
Crude Death Rate per 1,000 Population	12.0	9.4
Urban Population, %	24.8	30.6
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	50.2	55.1
Total Fertility Rate per Woman 15-49	3.99	3.03
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	32.8
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	37.0
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 580	360
MMR, Lower Bound	● ▲ na	91
MMR, Upper Bound	● ▲ na	660
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	40.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 94.2	70.6
Under Age 5 Mortality Rate, Total	● ▲ 140	105
Under Age 5 Mortality Rate, Female	● ▲ na	118
Under Age 5 Mortality Rate, Male	● ▲ na	137
Life Expectancy at Birth, Total, Years	● ▲ 55.8	60.9
Life Expectancy at Birth, Female, Years	● ▲ 58.0	63.9
Life Expectancy at Birth, Male, Years	● ▲ 54.0	58.1
Median Age of Total Population	● ▲ 21.0	25.5
Population 60 Years and Over, %	● ▲ 6.8	7.5
Dependency Ratio	● ▲ 72	52

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>0.40</b>	<b>57.27</b>	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	na
Gross Domestic Product Growth Rate, Annual %	1	10
Income Group per World Bank Classification	na	Low income
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ 33	80
Antenatal Care, At Least One Visit, %	90	76
Deliveries Attended by Skilled Attendants, %	●▲ 94	56
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	37.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	65.0
Illiteracy Rate, % of Population 15 and Over, Male	13	10
Illiteracy Rate, % of Population 15 and Over, Female	26	17
Illiteracy Rate, % of Population 15 to 24, Male	10	8
Illiteracy Rate, % of Population 15 to 24, Female	14	8
Ratio of Girls to Boys, Primary Education	▲ 0.94	0.97
Ratio of Girls to Boys, Secondary Education	▲ na	0.93
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	92
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	92
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	40
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	38
Children Underweight Under 5, Male, %	na	37
Children Underweight Under 5, Female, %	na	35
Stunted Children under 5, Severe, %	na	15
Wasted Children under 5, Severe, %	na	2
Undernourished People, %	10.0	7.0
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	1.2
Estimated HIV Prevalence, 15-49, Male	na	1.7
Estimated HIV Prevalence, 15-49, Female	na	0.7

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	20.2	19.7
Age-Specific Fertility Rate per 1,000 Women, 15-20	45.5	18.5
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	na	24.6
Mean Age at Marriage, Female	na	22.4
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	1.4
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	89.7
Labor Force Participation Rate, 15-64, Female	na	68.3
Seats in Parliament Held by Women, %	na	na
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	2,948.5
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	18.7
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Nepal



## Overview

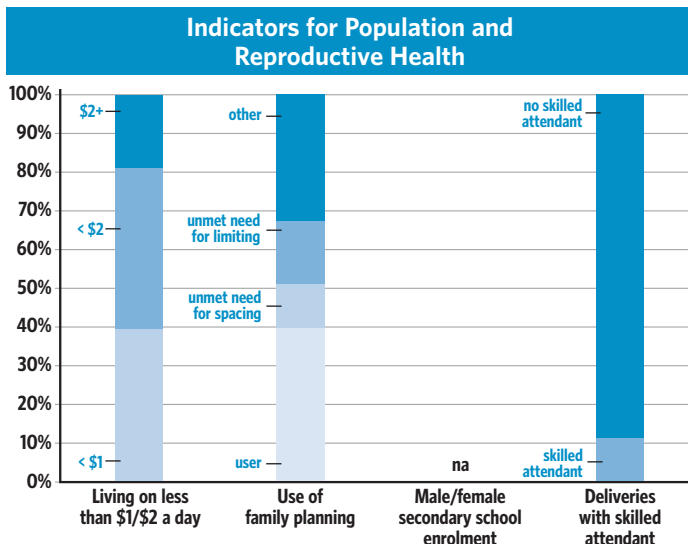
Despite almost 50 years of development efforts, Nepal remains one of the poorest and least developed countries in the world with an estimated population of 27 million in 2005 with 42 per cent of the population living below the national poverty line. The country also faces environmental problems due to increasing population, poverty and dependence on subsistence agriculture. Recent political instability and the deteriorating situation arising from insurgency remain a threat to development efforts.

Illiteracy is also problematic, with rates for men at 35 per cent and twice that for women, at 70 per cent. The total fertility rate is estimated at 4.2 lifetime births per women and maternal mortality ratio is estimated at 740 deaths per 100,000 live births. Women's unequal access to health care and education contribute to the high levels of female mortality and morbidity.

The population is young, with a median age of just 20 years. In the Second Long-Term Health Plan (1997-2017), the government emphasizes developing special programmes for population and reproductive health, including adolescent reproductive health. The National Reproductive Health Strategy and the National Adolescent Health and Development Strategy, identify adolescents as a critical component of the reproductive health package, including the distribution of contraceptives to unmarried adolescents.

The threat of HIV/AIDS is a major concern in the country. The prevalence of HIV infection among sex workers and injecting drug users has increased. A National HIV/AIDS Strategy has been developed.

Poverty reduction has been and continues to be the major focus of the government's policies and programmes. The government expressed its commitment to implement the reform agenda as envisaged by the Poverty Reduction Strategy Paper (Tenth Five-Year Development Plan 2002-2007) including broad-based growth, social sector development and improved governance. The government has also prepared a Health Sector Reform Strategy, now in the initial stages of implementation. The government is preparing a Population Perspective Plan to integrate population, reproductive health and gender concerns into sectoral development policies and programmes.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	9,632.6	13,445.5
Population in Thousands, Female	9,481.5	13,687.1
Population Growth Rate, %	na	2.0
Crude Birth Rate per 1,000 Population	38.5	35.3
Crude Death Rate per 1,000 Population	12.9	8.2
Urban Population, %	8.9	15.8
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	47.1	49.6
Total Fertility Rate per Woman 15-49	5.14	4.22
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	21.8	35.4
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	22.7	39.3
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 1,500	740
MMR, Lower Bound	● ▲ na	440
MMR, Upper Bound	● ▲ na	1,100
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	40.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 98.2	59.5
Under Age 5 Mortality Rate, Total	● ▲ 128	80
Under Age 5 Mortality Rate, Female	● ▲ na	106
Under Age 5 Mortality Rate, Male	● ▲ na	91
Life Expectancy at Birth, Total, Years	● ▲ 54.2	62.5
Life Expectancy at Birth, Female, Years	● ▲ 54.0	62.9
Life Expectancy at Birth, Male, Years	● ▲ 54.5	62.0
Median Age of Total Population	● ▲ 18.9	20.1
Population 60 Years and Over, %	● ▲ 5.4	5.8
Dependency Ratio	● ▲ 83	74

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>1.40</b>	<b>3.23</b>	<b>2.66</b>	<b>25.55</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	2.1/4.4
No Education, Primary	4.8
Highest Level of Education	2.1
Provincial Low/High	3.5/4.7 Western/Mid-western & Far-western
Poorest/Richest Quintile	6.2/2.9

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	50.1/79.3
No Education, Primary	84.6
Highest Level of Education	11.2
Provincial Low/High	60.1/112.2 Western/Far-western
Poorest/Richest Quintile, %	85.5/53.2

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	129.9/67.7
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	72.0/114.0
Poorest/Richest Quintile	143.0/90.0

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	12.6/22.5
No Education, Primary, %	31.5

SOCIO-ECONOMIC & HEALTH		1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars		na	1,418
Gross Domestic Product Growth Rate, Annual %		5	3
Income Group per World Bank Classification		na	Low income
Population Below \$1/Day, %	▲	na	39.1
Population Living Below National Poverty Line, %	▲	na	42.0
Share of Income or Consumption by Poorest Quintile		na	3.2
Access to Improved Water Supply, %	▲	37	84
Antenatal Care, At Least One Visit, %		9	49
Deliveries Attended by Skilled Attendants, %	●▲	6	11
Family Planning Programme Effort Index, 1999 (Total Mean Score)		na	57.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)		na	54.2
Illiteracy Rate, % of Population 15 and Over, Male		53	35
Illiteracy Rate, % of Population 15 and Over, Female		86	70
Illiteracy Rate, % of Population 15 to 24, Male		33	20
Illiteracy Rate, % of Population 15 to 24, Female		73	49
Ratio of Girls to Boys, Primary Education	▲	0.56	0.79
Ratio of Girls to Boys, Secondary Education	▲	na	0.69
Primary School Enrolment, Gross % of School Age Population, Male	●▲	na	126
Primary School Enrolment, Gross % of School Age Population, Female	●▲	na	112
Secondary School Enrolment, Gross % of School Age Population, Male	●▲	na	50
Secondary School Enrolment, Gross % of School Age Population, Female	●▲	na	39
Children Underweight Under 5, Male, %		na	47
Children Underweight Under 5, Female, %		na	47
Stunted Children under 5, Severe, %		na	22
Wasted Children under 5, Severe, %		na	1
Undernourished People, %		18.0	17.0
Refugees, Number		75,500	123,667
Internally Displaced Persons, Number		na	na
Asylum Seekers, Number		na	235
Estimated HIV Prevalence, 15-49, Total		na	0.5
Estimated HIV Prevalence, 15-49, Male		na	0.7
Estimated HIV Prevalence, 15-49, Female		na	0.3

ADOLESCENT REPRODUCTIVE HEALTH		1990	Most Recent
Proportion of Population 15-24		19.2	20.1
Age-Specific Fertility Rate per 1,000 Women, 15-20		125.5	112.5
Median Age at First Sexual Intercourse, Female, 25-49		na	16.9
Mean Age at Marriage, Male		na	21.5
Mean Age at Marriage, Female		na	17.9
Married by 18, Percent, Female, 25-49		na	66.7
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲	na	39
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲	na	81
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %		na	42.0
HIV Prevalence, 15-24, Total	▲	na	0.3
HIV Prevalence, 15-24, Female	▲	na	0.3
HIV Prevalence, 15-24, Male	▲	na	0.3

GENDER EQUALITY		1990	Most Recent
Gender Empowerment Measure, Value		na	na
Gender Empowerment Measure, Rank		na	na
Malnourished Women, %		na	26.7
Labor Force Participation Rate, 15-64, Male		na	92.1
Labor Force Participation Rate, 15-64, Female		na	85.0
Seats in Parliament Held by Women, %		3.0	7.9
Female Legislators, Senior Officials and Managers, %		na	na
Female Professional and Technical Workers, %		na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY		1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands		na	2,755.3
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %		na	31.7
Unmet Need for Family Planning, Spacing, %	●	na	11.4
Unmet Need for Family Planning, Limiting, %	●	na	16.4
Unmet Need for Family Planning, Total, %	●	na	27.8
Unmet Need for Family Planning, Thousands	●	na	1686.8

Highest Level of Education	8.3	
Provincial Low/High, %	16.1/23.8	Western/Central
<b>Deliveries Attended by Skilled Attendants:</b>		
Urban/Rural, %	51.1/10.1	
No Education, Primary, %	6.6	
Highest Level of Education, %	67.8	
Provincial Low/High, %	6.3/15.6	Mid-western/Eastern
Poorest/Richest Quintile, %	3.6/45.1	
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>		
Urban/Rural, %	56.3/33.2	
No Education, Primary, %	33.5	
Highest Level of Education, %	46.4	
Provincial Low/High, %	28.8/37.9	Far-western/Eastern
Poorest/Richest Quintile, %	23.8/55.2	
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>		
Poorest/Richest Quintile, %	29.3/61.1	
<b>Unmet Need for Family Planning, Limiting:</b>		
Poorest/Richest Quintile, %	21.2/9.7	
<b>Unmet Need for Family Planning, Spacing:</b>		
Poorest/Richest Quintile, %	12.3/7.3	

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Children Underweight Under 5, Severe:</b>		
Urban/Rural, %	6.7/13.0	
No Education, Primary, %	15.0	
Highest Level of Education, %	0.7	
Provincial Low/High, %	8.7/15.8	Eastern/Central
Poorest/Richest Quintile, %	16.7/5.0	
<b>Girls 6-10 Who Currently Attend School:</b>		
Poorest/Richest Quintile, %	54.3/92.8	
<b>Boys 6-10 Who Currently Attend School:</b>		
Poorest/Richest Quintile, %	75.0/95.0	
<b>Malnourished Women:</b>		
Poorest/Richest Quintile, %	26.8/14.9	
<b>Antenatal Care, At Least One Visit:</b>		
Poorest/Richest Quintile, %	30.4/79.5	



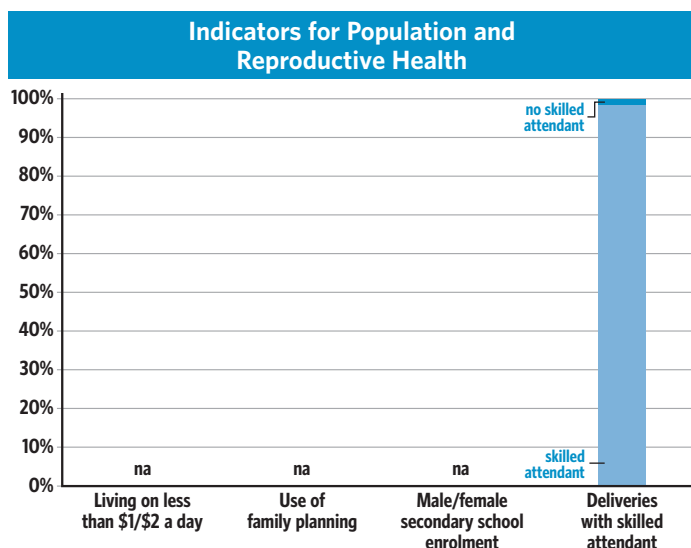
# New Caledonia

## Overview

New Caledonia, an overseas territory of France, enjoys a relatively high standard of living compared with most other Pacific Island countries. Its economic profile is similar to that of a fully industrialized country. The total population is estimated at 236,800, with an annual growth rate of 1.8 per cent. The total fertility rate is 2.6 lifetime births per woman and life expectancy at birth is 78 years for women and 73 years for men.

For many years, emphasis has been placed on maternal and child health, immunization and control and containment of communicable diseases. Currently, the infant mortality rate is 6 deaths per 1,000 live births while the maternal mortality ratio is 10 deaths per 100,000 live births. Today, the disease patterns traditionally associated with consumer societies are appearing — non-communicable diseases are increasing while infectious diseases are declining. HIV/AIDS is of concern to the government, with 15 new cases reported in 2001.

The significant improvement in the health status of the population in recent years can be attributed to economic growth and the quality of health care coverage. The government of the territory has endorsed a policy of "health for all." Various public mechanisms fund social welfare programmes, including national health insurance, family allowances and a pension scheme. Consequently, all the citizens are comprehensively covered for their health and welfare needs. However, there is a constant need to balance the distribution of these resources equally among all segments of the population.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	87.4	121.6
Population in Thousands, Female	83.6	115.3
Population Growth Rate, %	na	1.8
Crude Birth Rate per 1,000 Population	24.2	21.4
Crude Death Rate per 1,000 Population	5.6	5.0
Urban Population, %	59.5	61.6
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	53.2	53.6
Total Fertility Rate per Woman 15-49	2.98	2.64
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	51.9	51.9
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	68.0	68.0
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ na	10
MMR, Lower Bound	● ▲ na	5
MMR, Upper Bound	● ▲ na	20
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	na
Infant Mortality Rate per 1,000 Live Births	● ▲ 13.0	6.3
Under Age 5 Mortality Rate, Total	● ▲ 17	9
Under Age 5 Mortality Rate, Female	● ▲ na	10
Under Age 5 Mortality Rate, Male	● ▲ na	9
Life Expectancy at Birth, Total, Years	● ▲ 70.7	75.5
Life Expectancy at Birth, Female, Years	● ▲ 73.9	78.3
Life Expectancy at Birth, Male, Years	● ▲ 68.3	73.1
Median Age of Total Population	● ▲ 23.8	28.4
Population 60 Years and Over, %	● ▲ 7.0	9.2
Dependency Ratio	● ▲ 58	52

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
na	na	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	22,302
Gross Domestic Product Growth Rate, Annual %	na	2
Income Group per World Bank Classification	na	High income: non OECD
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ na	na
Antenatal Care, At Least One Visit, %	na	na
Deliveries Attended by Skilled Attendants, %	●▲ na	98
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	na	3
Illiteracy Rate, % of Population 15 and Over, Female	na	5
Illiteracy Rate, % of Population 15 to 24, Male	na	na
Illiteracy Rate, % of Population 15 to 24, Female	na	na
Ratio of Girls to Boys, Primary Education	▲ na	na
Ratio of Girls to Boys, Secondary Education	▲ na	na
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	na
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	na
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	na
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	na
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	19.9	16.7
Age-Specific Fertility Rate per 1,000 Women, 15-20	37.5	30.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	30.9	30.9
Mean Age at Marriage, Female	28.4	28.4
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	77.5	77.5
Labor Force Participation Rate, 15-64, Female	49.1	49.1
Seats in Parliament Held by Women, %	na	na
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	14.5
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	20.5
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Pakistan



## Overview

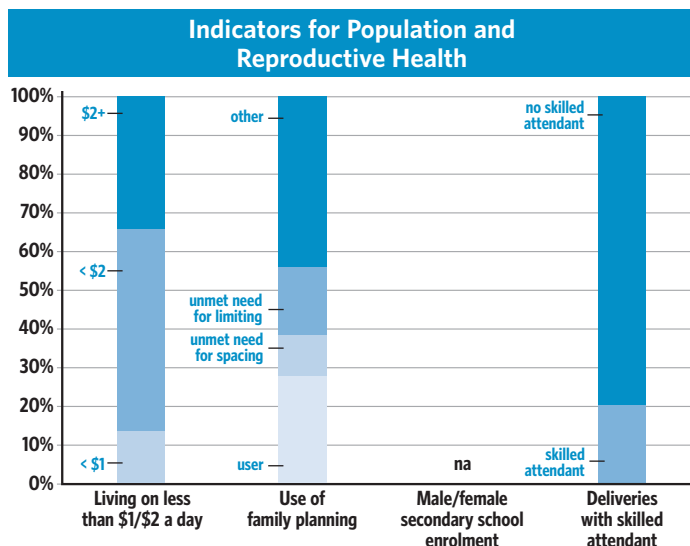
Pakistan, with a population of almost 158 million, is the world's sixth most populous country. The high annual population growth rate of 2.1 per cent remains a cause of concern. The latest Population Policy of Pakistan, introduced in July 2002, aims to achieve population stabilization by 2020 through completion of the demographic transition including reductions in fertility and mortality rates. Integrating population components at all levels of government is key and has been introduced in all civil service institutions in Pakistan. Population education is also being integrated into the formal school curriculum.

The maternal health situation is cause for concern. The maternal mortality ratio is estimated to be 500 deaths per 100,000 births. Over 75 per cent of deliveries take place at home and skilled personnel attend only about 20 per cent of them.

Progress is being made. The development of the first National Maternal Health Policy is under way. Furthermore, a dialogue on maternal health and birth spacing with North Western Frontier Province religious leaders led to the development of a strategy for promoting maternal health. The recruitment of two female gynecologists, supported through UNFPA, to work in remote areas, has seen a significant increase in women utilizing maternal health services.

The Pakistan Reproductive and Family Planning Survey, conducted in 2000-2001, showed a contraceptive prevalence rate of only 28 per cent, but found that 33 per cent of women surveyed were unable to plan their families because services were not available. A new strategic partnership with UNFPA and other donors should revolutionize contraceptive availability and use through a strengthened social marketing programme. In another effort to bring service and demand closer together, female community health workers were trained in administering injectable contraceptives, thus expanding client choices beyond condoms and oral contraceptives.

Population and reproductive health issues have been given significant weight in Pakistan's Poverty Reduction Strategy Paper, which was recently finalized. Government officials have identified population as the single most pressing issue in the country's development.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	57,612.8	81,282.6
Population in Thousands, Female	54,085.7	76,652.5
Population Growth Rate, %	na	2.1
Crude Birth Rate per 1,000 Population	40.7	37.6
Crude Death Rate per 1,000 Population	10.7	7.9
Urban Population, %	30.6	34.8
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	45.1	49.7
Total Fertility Rate per Woman 15-49	6.05	4.89
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	9.0	20.2
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	11.8	27.6
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 340	500
MMR, Lower Bound	● ▲ na	130
MMR, Upper Bound	● ▲ na	940
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	57.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 92.7	74.6
Under Age 5 Mortality Rate, Total	● ▲ 128	107
Under Age 5 Mortality Rate, Female	● ▲ na	135
Under Age 5 Mortality Rate, Male	● ▲ na	121
Life Expectancy at Birth, Total, Years	● ▲ 59.6	63.8
Life Expectancy at Birth, Female, Years	● ▲ 59.8	64.0
Life Expectancy at Birth, Male, Years	● ▲ 59.5	63.6
Median Age of Total Population	● ▲ 18.3	20.0
Population 60 Years and Over, %	● ▲ 5.4	5.8
Dependency Ratio	● ▲ 89	73

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>1.10</b>	<b>4.47</b>	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	3.7/5.4
No Education, Primary	5.1
Highest Level of Education	3.8
Provincial Low/High	4.7/5.4 Punjab & Sindh/Balochistan
Poorest/Richest Quintile	5.1/4.0

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	74.6/102.2
No Education, Primary	98.6
Highest Level of Education	45.8
Provincial Low/High	72.4/104.1 Balochistan/Punjab
Poorest/Richest Quintile, %	88.7/62.5

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	124.5/73.8
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	41.0/79.0
Poorest/Richest Quintile	88.0/44.0

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	9.9/18.7
No Education, Primary, %	22.4

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	1,971
Gross Domestic Product Growth Rate, Annual %	6	6
Income Group per World Bank Classification	na	Low income
Population Below \$1/Day, %	▲ na	13.4
Population Living Below National Poverty Line, %	▲ na	32.6
Share of Income or Consumption by Poorest Quintile	na	3.7
Access to Improved Water Supply, %	▲ 50	90
Antenatal Care, At Least One Visit, %	29	28
Deliveries Attended by Skilled Attendants, %	●▲ 70	20
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	57.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	38.9
Illiteracy Rate, % of Population 15 and Over, Male	51	39
Illiteracy Rate, % of Population 15 and Over, Female	80	68
Illiteracy Rate, % of Population 15 to 24, Male	37	26
Illiteracy Rate, % of Population 15 to 24, Female	69	52
Ratio of Girls to Boys, Primary Education	▲ 0.48	0.55
Ratio of Girls to Boys, Secondary Education	▲ na	0.63
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	80
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	57
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	26
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	19
Children Underweight Under 5, Male, %	na	38
Children Underweight Under 5, Female, %	na	38
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	26.0	19.0
Refugees, Number	1,629,200	1,124,298
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	5,356
Estimated HIV Prevalence, 15-49, Total	na	0.1
Estimated HIV Prevalence, 15-49, Male	na	0.2
Estimated HIV Prevalence, 15-49, Female	na	0.0

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	18.3	21.4
Age-Specific Fertility Rate per 1,000 Women, 15-20	97.0	69.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	26.5	26.5
Mean Age at Marriage, Female	21.7	21.7
Married by 18, Percent, Female, 25-49	42.3	42.3
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	0.1
HIV Prevalence, 15-24, Female	▲ na	0.1
HIV Prevalence, 15-24, Male	▲ na	0.1

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	0.4
Gender Empowerment Measure, Rank	na	64.0
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	87.2	84.6
Labor Force Participation Rate, 15-64, Female	11.8	15.4
Seats in Parliament Held by Women, %	1.0	20.8
Female Legislators, Senior Officials and Managers, %	na	9.0
Female Professional and Technical Workers, %	na	26.0

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	16,304.5
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	33.3
Unmet Need for Family Planning, Spacing, %	● 10.5	10.5
Unmet Need for Family Planning, Limiting, %	● 17.6	17.6
Unmet Need for Family Planning, Total, %	● 28.0	28.0
Unmet Need for Family Planning, Thousands	● 6911.5	10193.4

Highest Level of Education	5.3	
Provincial Low/High, %	13.9/20.5	Northwest Frontier Province/Balochistan
<b>Deliveries Attended by Skilled Attendants:</b>		
Urban/Rural, %	60.6/24.1	
No Education, Primary, %	28.0	
Highest Level of Education, %	78.9	
Provincial Low/High, %	20.4/52.6	Northwest Frontier Province/Balochistan
Poorest/Richest Quintile, %	4.6/55.2	
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>		
Urban/Rural, %	30.1/15.3	
No Education, Primary, %	6.2	
Highest Level of Education, %	25.9	
Provincial Low/High, %	12.6/20.9	Balochistan/Punjab
Poorest/Richest Quintile, %	1.2/23.2	
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Unmet Need for Family Planning, Limiting:</b>		
Poorest/Richest Quintile, %	13.5/15.2	
<b>Unmet Need for Family Planning, Spacing:</b>		
Poorest/Richest Quintile, %	16.5/14.8	

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Children Underweight Under 5, Severe:</b>		
Urban/Rural, %	9.5/16.0	
No Education, Primary, %	16.5	
Highest Level of Education, %	2.5	
Provincial Low/High, %	12.1/23.7	Northwest Frontier Province/Balochistan
Poorest/Richest Quintile, %	20.8/7.3	
<b>Girls 6-10 Who Currently Attend School:</b>		
Poorest/Richest Quintile, %	15.4/86.1	
<b>Boys 6-10 Who Currently Attend School:</b>		
Poorest/Richest Quintile, %	38.9/87.2	
<b>Malnourished Women:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Antenatal Care, At Least One Visit:</b>		
Poorest/Richest Quintile, %	8.1/72.1	

# Papua New Guinea

## Overview

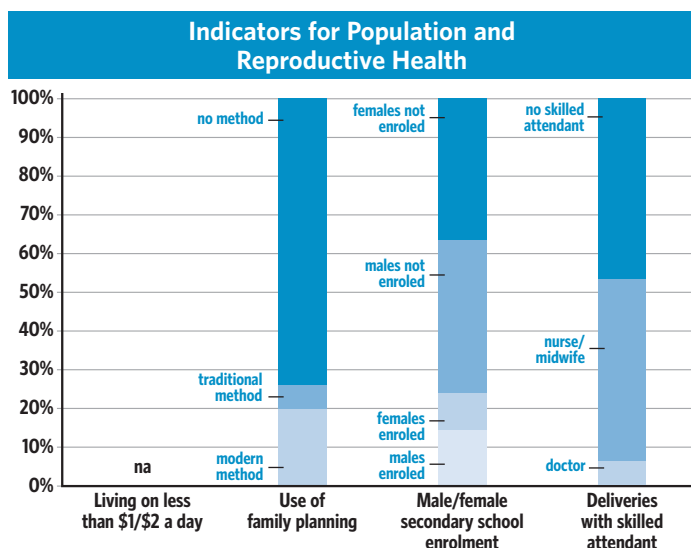
Papua New Guinea's population of 5.9 million is estimated to be growing at 2 per cent per year. The median age is young at 20 years, posing serious socio-economic implications. Total fertility declined from 5.1 lifetime births per woman in 1990, to the current 4.4.

The country's maternal mortality ratio of 300 deaths per 100,000 live births is among the highest in the Western Pacific. Health policies are aimed at improving women's health. Fees have been waived for all antenatal and childbirth services and a Health Sector Improvement Programme (HSIP) has been launched in 2004 to implement the National Health Policy.

The HIV infection rate is the highest in the Pacific Islands region. Parliament recently passed the HIV Prevention and Management Act that provides protection for victims against stigma and discrimination and makes it an offence to knowingly spread the virus. A population education curriculum, including HIV/AIDS topics, is being taught in upper primary grades in half of the provinces.

Education of girls continues to receive support from the government. In 2003, a Gender Education Policy was adopted, reinforcing the National Population Policy strategy to improve the quality of life through general education for all. Legal and policy frameworks demonstrate the government's commitment to human rights, gender equality and women's empowerment, but challenges remain to be addressed.

The Constitution provides for the rights of all citizens to participate in the development of the country. The National Population Policy, approved in October 1998, is grounded in human rights and choice concerning population and family planning. During 2002, a Poverty Reduction Strategy Paper was formulated and forms an integral part of overall development planning. A Medium Term Development Strategy (MTDS) for 2005-2010 has been launched, highlighting high population growth, HIV/AIDS, poor land management and inefficient reproductive health service delivery as barriers to development.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	2,155.8	3,034.7
Population in Thousands, Female	1,958.1	2,852.4
Population Growth Rate, %	na	2.0
Crude Birth Rate per 1,000 Population	38.1	35.9
Crude Death Rate per 1,000 Population	13.1	10.1
Urban Population, %	13.1	13.2
Sex Ratio at Birth, Male Births per Female Births	1.06	1.06
Women 15-49, %	50.8	50.7
Total Fertility Rate per Woman 15-49	5.13	4.36
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	19.6
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	25.9
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 930	300
MMR, Lower Bound	● ▲ na	77
MMR, Upper Bound	● ▲ na	570
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	32.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 83.3	67.2
Under Age 5 Mortality Rate, Total	● ▲ 113	93
Under Age 5 Mortality Rate, Female	● ▲ na	88
Under Age 5 Mortality Rate, Male	● ▲ na	81
Life Expectancy at Birth, Total, Years	● ▲ 52.1	56.1
Life Expectancy at Birth, Female, Years	● ▲ 53.2	56.8
Life Expectancy at Birth, Male, Years	● ▲ 51.4	55.6
Median Age of Total Population	● ▲ 18.8	19.7
Population 60 Years and Over, %	● ▲ 4.3	3.9
Dependency Ratio	● ▲ 78	74

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>3.80</b>	<b>19.44</b>	<b>2.07</b>	<b>95.52</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	4.0/5.0
No Education, Primary	5.0
Highest Level of Education	3.9
Provincial Low/High	4.4/5.3 Highlands/Momase
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	33.7/86.6
No Education, Primary	105.5
Highest Level of Education	40.2
Provincial Low/High	41.0/114.0 Southern/Highlands
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	91.0/73.0
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	13.8/13.9
No Education, Primary, %	23.1



SOCIO-ECONOMIC & HEALTH		1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars		na	2,505
Gross Domestic Product Growth Rate, Annual %		2	3
Income Group per World Bank Classification		na	Low income
Population Below \$1/Day, %	▲	na	na
Population Living Below National Poverty Line, %	▲	na	37.5
Share of Income or Consumption by Poorest Quintile		na	1.7
Access to Improved Water Supply, %	▲	33	39
Antenatal Care, At Least One Visit, %		68	78
Deliveries Attended by Skilled Attendants, %	●▲	20	53
Family Planning Programme Effort Index, 1999 (Total Mean Score)		na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)		na	na
Illiteracy Rate, % of Population 15 and Over, Male		36	27
Illiteracy Rate, % of Population 15 and Over, Female		52	39
Illiteracy Rate, % of Population 15 to 24, Male		26	18
Illiteracy Rate, % of Population 15 to 24, Female		38	25
Ratio of Girls to Boys, Primary Education	▲	0.80	0.83
Ratio of Girls to Boys, Secondary Education	▲	na	0.67
Primary School Enrolment, Gross % of School Age Population, Male	●▲	na	77
Primary School Enrolment, Gross % of School Age Population, Female	●▲	na	69
Secondary School Enrolment, Gross % of School Age Population, Male	●▲	na	27
Secondary School Enrolment, Gross % of School Age Population, Female	●▲	na	21
Children Underweight Under 5, Male, %		na	na
Children Underweight Under 5, Female, %		na	na
Stunted Children under 5, Severe, %		na	na
Wasted Children under 5, Severe, %		na	na
Undernourished People, %		25.0	27.0
Refugees, Number		6,700	7,491
Internally Displaced Persons, Number		na	na
Asylum Seekers, Number		na	306
Estimated HIV Prevalence, 15-49, Total		na	0.6
Estimated HIV Prevalence, 15-49, Male		na	0.8
Estimated HIV Prevalence, 15-49, Female		na	0.4

Highest Level of Education	8.2	
Provincial Low/High, %	12.4/15.6	Highlands/Southern
<b>Deliveries Attended by Skilled Attendants:</b>		
Urban/Rural, %	89.5/45.0	
No Education, Primary, %	36.2	
Highest Level of Education, %	87.1	
Provincial Low/High, %	44.8/69.0	Highlands/Islands
Poorest/Richest Quintile, %	na/na	
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>		
Urban/Rural, %	30.9/16.9	
No Education, Primary, %	14.6	
Highest Level of Education, %	33.5	
Provincial Low/High, %	12.9/29.3	Highlands/Southern
Poorest/Richest Quintile, %	na/na	
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Unmet Need for Family Planning, Limiting:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Unmet Need for Family Planning, Spacing:</b>		
Poorest/Richest Quintile, %	na/na	

ADOLESCENT REPRODUCTIVE HEALTH		1990	Most Recent
Proportion of Population 15-24		21.2	19.6
Age-Specific Fertility Rate per 1,000 Women, 15-20		88.5	58.0
Median Age at First Sexual Intercourse, Female, 25-49		na	na
Mean Age at Marriage, Male		24.6	24.6
Mean Age at Marriage, Female		20.8	20.8
Married by 18, Percent, Female, 25-49		na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲	na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲	na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %		na	na
HIV Prevalence, 15-24, Total	▲	na	0.4
HIV Prevalence, 15-24, Female	▲	na	0.4
HIV Prevalence, 15-24, Male	▲	na	0.3

GENDER EQUALITY		1990	Most Recent
Gender Empowerment Measure, Value		na	na
Gender Empowerment Measure, Rank		na	na
Malnourished Women, %		na	na
Labor Force Participation Rate, 15-64, Male		na	88.7
Labor Force Participation Rate, 15-64, Female		na	68.7
Seats in Parliament Held by Women, %		na	0.9
Female Legislators, Senior Officials and Managers, %		na	na
Female Professional and Technical Workers, %		na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY		1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands		na	561.0
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %		na	30.3
Unmet Need for Family Planning, Spacing, %	●	na	na
Unmet Need for Family Planning, Limiting, %	●	na	na
Unmet Need for Family Planning, Total, %	●	na	na
Unmet Need for Family Planning, Thousands	●	na	na

### Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:

Poorest/Richest Quintile, % na/na

### Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:

Poorest/Richest Quintile, % na/na

### Children Underweight Under 5, Severe:

Urban/Rural, % na/na

No Education, Primary, % na

Highest Level of Education, % na

Provincial Low/High, % na/na

Poorest/Richest Quintile, % na/na

### Girls 6-10 Who Currently Attend School:

Poorest/Richest Quintile, % na/na

### Boys 6-10 Who Currently Attend School:

Poorest/Richest Quintile, % na/na

### Malnourished Women:

Poorest/Richest Quintile, % na/na

### Antenatal Care, At Least One Visit:

Poorest/Richest Quintile, % na/na

# Philippines



## Overview

The Philippine archipelago contains 7,100 islands, but most of the country's 83 million people live on the 10 largest islands. The Philippine population is growing by 1.7 per cent per year.

The Philippine Population Management Programme aims to: assist couples in achieving their fertility goals within the context of responsible parenthood; prevent teenage pregnancies; reduce infant, child and maternal mortality; and contribute to a balance between population distribution and economic activities.

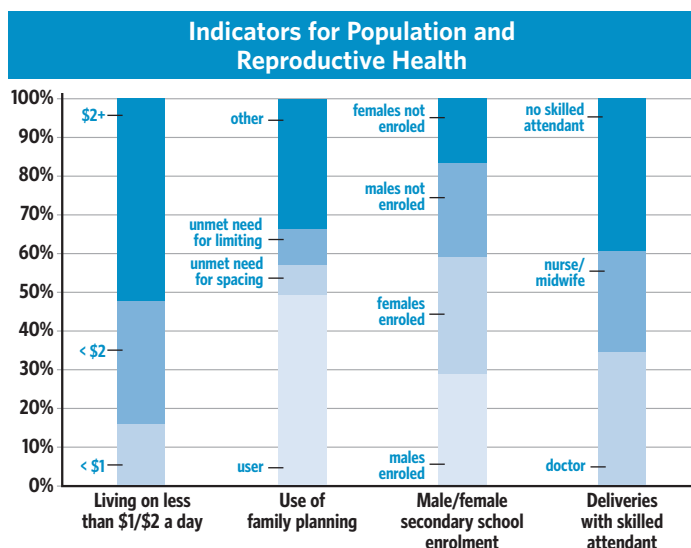
The emphasis on responsible parenthood as opposed to a reproductive rights framework is indicative of the approach taken by the Arroyo government. The President first articulated her position at the Asia Pacific Conference on Reproductive Health in 2001, stressing that family planning technologies should be based on the social and cultural beliefs of those being served. The administration advocates natural family planning, with ambiguous support for funding contraceptive supplies and logistics.

The National Health Insurance Act, which increased access to health care for the poor through social health insurance, expanded its coverage to include modern family planning methods in its roster of eligible health services. The government's decision not to use public funds to procure contraceptives continues to pose threats to their timely availability in the country.

Some modest gains have been achieved in the field of gender rights. The Anti-Trafficking in Persons Act was signed into law addressing the sexual exploitation and abuse of women and children through trafficking. Meanwhile, the Anti-Abuse of Women in Intimate Relationships (AWIR) Bill as well as the Anti-Domestic Violence Bill, are being deliberated in Congress.

Despite the low prevalence of HIV/AIDS, the disease poses a threat to the country. High-risk behavior, such as the low usage rate of condoms, and the rise in sexually transmitted infections, could accelerate the spread of the disease.

Rapid population growth is one of the country's most critical development problems. Without concrete steps to check the prevailing high growth rate, the Philippines is unlikely to achieve its Millennium Development Goals for poverty reduction.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	30,774.6	41,813.7
Population in Thousands, Female	30,329.7	41,240.8
Population Growth Rate, %	na	1.7
Crude Birth Rate per 1,000 Population	32.7	28.4
Crude Death Rate per 1,000 Population	6.8	4.9
Urban Population, %	48.8	62.6
Sex Ratio at Birth, Male Births per Female Births	1.06	1.06
Women 15-49, %	48.7	52.2
Total Fertility Rate per Woman 15-49	4.35	3.59
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	28.2
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	46.5
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 280	200
MMR, Lower Bound	● ▲ na	120
MMR, Upper Bound	● ▲ na	280
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	15.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 47.3	25.7
Under Age 5 Mortality Rate, Total	● ▲ 54	31
Under Age 5 Mortality Rate, Female	● ▲ na	30
Under Age 5 Mortality Rate, Male	● ▲ na	40
Life Expectancy at Birth, Total, Years	● ▲ 65.3	70.9
Life Expectancy at Birth, Female, Years	● ▲ 67.5	73.1
Life Expectancy at Birth, Male, Years	● ▲ 63.4	68.8
Median Age of Total Population	● ▲ 19.2	22.2
Population 60 Years and Over, %	● ▲ 4.9	6.1
Dependency Ratio	● ▲ 79	64

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>1.10</b>	<b>10.62</b>	<b>2.49</b>	<b>98.04</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	3.0/4.3
No Education, Primary	5.3
Highest Level of Education	2.7
Provincial Low/High	2.8/5.0
Poorest/Richest Quintile	6.5/2.1

National Capital Region/ MIMAROPA

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	24.0/36.0
No Education, Primary	65.0
Highest Level of Education	15.0
Provincial Low/High	14.0/44.0
Poorest/Richest Quintile, %	48.8/20.9

Cordillera Admin Region/ MIMAROPA

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	79.8/29.2
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	40.0/74.0
Poorest/Richest Quintile	130.0/12.0

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	23.3/31.3
No Education, Primary, %	45.2

SOCIO-ECONOMIC & HEALTH		1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars		na	4,321
Gross Domestic Product Growth Rate, Annual %		1	4
Income Group per World Bank Classification		na	Lower middle income
Population Below \$1/Day, %	▲	na	15.5
Population Living Below National Poverty Line, %	▲	na	36.8
Share of Income or Consumption by Poorest Quintile		na	2.2
Access to Improved Water Supply, %	▲	81	85
Antenatal Care, At Least One Visit, %		77	94
Deliveries Attended by Skilled Attendants, %	●▲	76	60
Family Planning Programme Effort Index, 1999 (Total Mean Score)		na	57.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)		na	59.8
Illiteracy Rate, % of Population 15 and Over, Male		8	4
Illiteracy Rate, % of Population 15 and Over, Female		9	4
Illiteracy Rate, % of Population 15 to 24, Male		3	1
Illiteracy Rate, % of Population 15 to 24, Female		3	1
Ratio of Girls to Boys, Primary Education	▲	0.95	0.96
Ratio of Girls to Boys, Secondary Education	▲	na	1.05
Primary School Enrolment, Gross % of School Age Population, Male	●▲	na	113
Primary School Enrolment, Gross % of School Age Population, Female	●▲	na	112
Secondary School Enrolment, Gross % of School Age Population, Male	●▲	na	80
Secondary School Enrolment, Gross % of School Age Population, Female	●▲	na	88
Children Underweight Under 5, Male, %		na	na
Children Underweight Under 5, Female, %		na	na
Stunted Children under 5, Severe, %		na	na
Wasted Children under 5, Severe, %		na	na
Undernourished People, %		26.0	22.0
Refugees, Number		6,700	108
Internally Displaced Persons, Number		na	na
Asylum Seekers, Number		na	38
Estimated HIV Prevalence, 15-49, Total		na	<0.1
Estimated HIV Prevalence, 15-49, Male		na	0.0
Estimated HIV Prevalence, 15-49, Female		na	0.0

ADOLESCENT REPRODUCTIVE HEALTH		1990	Most Recent
Proportion of Population 15-24		20.4	20.3
Age-Specific Fertility Rate per 1,000 Women, 15-20		49.0	36.0
Median Age at First Sexual Intercourse, Female, 25-49		na	21.9
Mean Age at Marriage, Male		26.3	26.3
Mean Age at Marriage, Female		23.8	23.8
Married by 18, Percent, Female, 25-49		na	17.4
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲	na	54
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲	na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %		na	67.0
HIV Prevalence, 15-24, Total	▲	na	0.0
HIV Prevalence, 15-24, Female	▲	na	0.0
HIV Prevalence, 15-24, Male	▲	na	0.0

GENDER EQUALITY		1990	Most Recent
Gender Empowerment Measure, Value		na	0.5
Gender Empowerment Measure, Rank		na	37.0
Malnourished Women, %		na	na
Labor Force Participation Rate, 15-64, Male		77.4	84.3
Labor Force Participation Rate, 15-64, Female		40.1	54.8
Seats in Parliament Held by Women, %		9.0	17.2
Female Legislators, Senior Officials and Managers, %		na	58.0
Female Professional and Technical Workers, %		na	62.0

REPRODUCTIVE HEALTH COMMODITY SECURITY		1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands		na	6,759.1
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %		na	26.0
Unmet Need for Family Planning, Spacing, %	●	na	7.9
Unmet Need for Family Planning, Limiting, %	●	na	9.4
Unmet Need for Family Planning, Total, %	●	na	17.3
Unmet Need for Family Planning, Thousands	●	na	3636.5

Highest Level of Education	20.3	
Provincial Low/High, %	21.2/44.2	Western Visayas/MIMAROPA
<b>Deliveries Attended by Skilled Attendants:</b>		
Urban/Rural, %	79.0/40.9	
No Education, Primary, %	11.0	
Highest Level of Education, %	85.9	
Provincial Low/High, %	87.9/87.8	National Capital Region/ National Capital Region
Poorest/Richest Quintile, %	21.2/91.9	
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>		
Urban/Rural, %	33.9/32.8	
No Education, Primary, %	11.7	
Highest Level of Education, %	34.2	
Provincial Low/High, %	11.6/48.0	ARMM/Cagayan Valley
Poorest/Richest Quintile, %	19.6/29.4	
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Unmet Need for Family Planning, Limiting:</b>		
Poorest/Richest Quintile, %	16.8/6.4	
<b>Unmet Need for Family Planning, Spacing:</b>		
Poorest/Richest Quintile, %	12.5/5.6	

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Children Underweight Under 5, Severe:</b>		
Urban/Rural, %	na/na	
No Education, Primary, %	na	
Highest Level of Education, %	na	
Provincial Low/High, %	na/na	
Poorest/Richest Quintile, %	na/na	
<b>Girls 6-10 Who Currently Attend School:</b>		
Poorest/Richest Quintile, %	72.7/96.1	
<b>Boys 6-10 Who Currently Attend School:</b>		
Poorest/Richest Quintile, %	66.1/93.0	
<b>Malnourished Women:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Antenatal Care, At Least One Visit:</b>		
Poorest/Richest Quintile, %	73.1/97.8	



## Overview

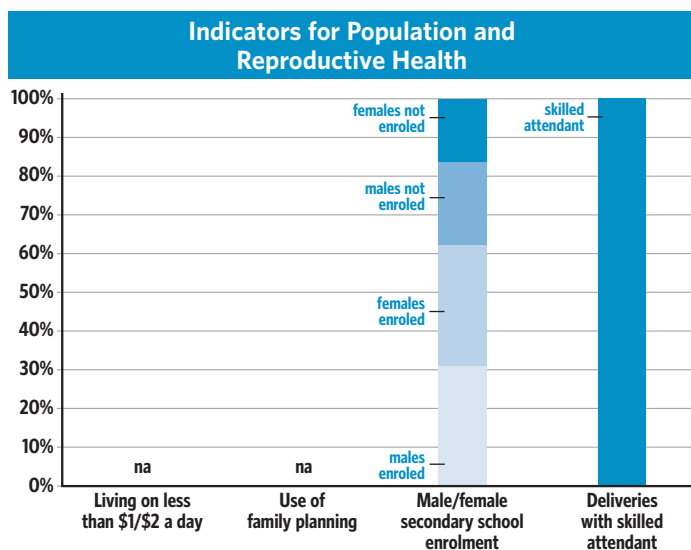
Although considerable economic growth has occurred in recent years, Samoa remains classified as a least developed country (LDC). The 2005 population was estimated at 185,000 with an annual growth rate of .63 per cent. Samoa has the highest rate of natural increase in Polynesia, but this is offset by a high net emigration rate. Emigrants contribute substantially to the economy through remittances, and these help to alleviate poverty—especially in rural areas.

In 2004, Samoa ranked 74th out of 177 countries on the UNDP's Human Development Index. Samoa's development indicators place it among the highest of all Pacific Island countries in social development. In spite of the high emigration rates, the population remains youthful, with over 18 per cent between the ages of 15-24.

Following the International Conference on Population and Development (ICPD) in 1994, more integrated national population and reproductive health policies were developed. A university-based clinic introduced comprehensive adolescent reproductive health counseling and services.

The government gives high priority to education and health in its development strategy. The Ministries of Education and Health, non-governmental organizations, private sector, donors and multilateral lending agencies have coordinated activities to address education and health problems at all levels. An extensive network of women's committees co-manages, with the government, publicly funded rural health services.

The promotion and protection of women's rights, gender equity and women and HIV/AIDS are afforded significant priority by the Samoan government. Women's access to education and achievement in the formal educational system is virtually equal to men's, and women occupy a number of senior positions in the public sector.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	84.7	96.2
Population in Thousands, Female	76.6	88.8
Population Growth Rate, %	na	0.6
Crude Birth Rate per 1,000 Population	34.3	30.6
Crude Death Rate per 1,000 Population	6.8	5.5
Urban Population, %	21.5	22.5
Sex Ratio at Birth, Male Births per Female Births	1.08	1.08
Women 15-49, %	46.8	46.6
Total Fertility Rate per Woman 15-49	4.76	4.34
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	na
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	na
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 35	130
MMR, Lower Bound	● ▲ na	8
MMR, Upper Bound	● ▲ na	30
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	13.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 39.9	24.0
Under Age 5 Mortality Rate, Total	● ▲ 45	29
Under Age 5 Mortality Rate, Female	● ▲ na	29
Under Age 5 Mortality Rate, Male	● ▲ na	34
Life Expectancy at Birth, Total, Years	● ▲ 64.8	70.7
Life Expectancy at Birth, Female, Years	● ▲ 68.4	74.2
Life Expectancy at Birth, Male, Years	● ▲ 61.8	67.8
Median Age of Total Population	● ▲ 18.5	19.4
Population 60 Years and Over, %	● ▲ 6.0	6.5
Dependency Ratio	● ▲ 81	83

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
4.71	66.79	3.19	160.66

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	5,741
Gross Domestic Product Growth Rate, Annual %	na	3
Income Group per World Bank Classification	na	Lower middle income
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ 82	88
Antenatal Care, At Least One Visit, %	52	52
Deliveries Attended by Skilled Attendants, %	●▲ 52	100
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	1	1
Illiteracy Rate, % of Population 15 and Over, Female	3	1
Illiteracy Rate, % of Population 15 to 24, Male	1	1
Illiteracy Rate, % of Population 15 to 24, Female	1	0
Ratio of Girls to Boys, Primary Education	▲ 0.98	0.91
Ratio of Girls to Boys, Secondary Education	▲ na	0.98
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	107
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	104
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	73
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	80
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	22.6	18.3
Age-Specific Fertility Rate per 1,000 Women, 15-20	32.5	32.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	28.0	28.0
Mean Age at Marriage, Female	24.6	24.6
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	80.5	80.5
Labor Force Participation Rate, 15-64, Female	43.2	43.2
Seats in Parliament Held by Women, %	na	6.1
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	5.4
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	11.9
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na



# Singapore

## Overview

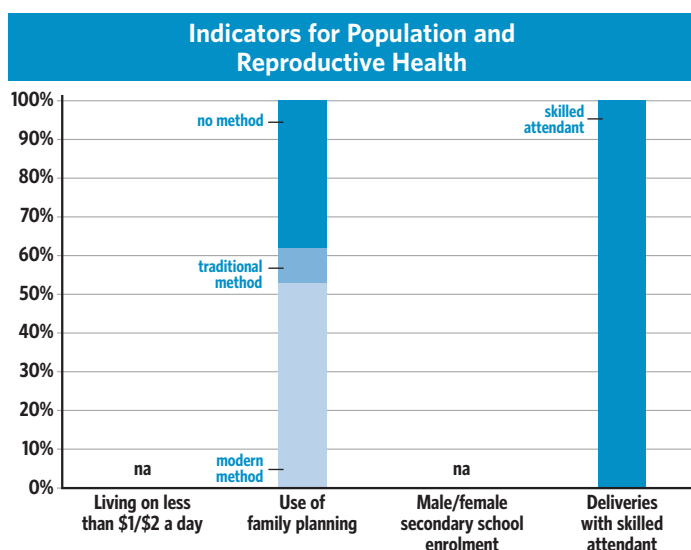
With a total population of about 4.3 million, Singapore is characterized by a highly developed and successful free-market economy, stable prices, and one of the higher per capita gross GDPs in the world. In response to a 2003 United Nations inquiry, the government reported that its annual population growth rate of 1.3 per cent is too low and emigration too high. The government encourages the return of Singaporean nationals. Immigrants make up almost one quarter of the population.

The state of health in Singapore is good by international standards. Rising standards of living, high levels of education, good housing, safe water supply and sanitation and universal access to medical services have all helped to improve the health of Singaporeans.

Singapore has a relatively young population, with 13 per cent between the ages of 15 and 24. On the other hand, 12 per cent of the population is aged 60 and over and projected to increase to 35 per cent by the year 2030. Life expectancy at birth is 81 years for women and 77 for men. Consequently, the ageing of the population, the shrinking size of the working-age population and the threat of HIV/AIDS (especially among youth) are major concerns.

Contraceptive supplies, provided by the Ministry of Health as well as public and private doctors, are readily available to the entire population. The total fertility rate is 1.5 lifetime births per woman with 100 per cent of deliveries attended by skilled personnel. The maternal mortality ratio is 30 deaths per 100,000 live births, while the infant mortality rate is 3 per 1,000 live births, a 50 per cent reduction since 1990.

The government embarked on a family planning programme immediately after independence in 1965. Besides the comprehensive provision of clinical services, the programme includes a wide range of social and fiscal incentives to achieve replacement level fertility. After a decade of below replacement fertility, the government replaced the policy in 1987 with one that is selectively pronatalist.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	1,517.8	2,177.2
Population in Thousands, Female	1,498.6	2,148.4
Population Growth Rate, %	na	1.3
Crude Birth Rate per 1,000 Population	17.4	13.9
Crude Death Rate per 1,000 Population	5.0	5.2
Urban Population, %	100.0	100.0
Sex Ratio at Birth, Male Births per Female Births	1.07	1.07
Women 15-49, %	62.6	53.9
Total Fertility Rate per Woman 15-49	1.74	1.52
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	53.0
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	62.0
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 10	30
MMR, Lower Bound	● ▲ na	20
MMR, Upper Bound	● ▲ na	41
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	1.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 6.5	3.0
Under Age 5 Mortality Rate, Total	● ▲ 7	4
Under Age 5 Mortality Rate, Female	● ▲ na	4
Under Age 5 Mortality Rate, Male	● ▲ na	4
Life Expectancy at Birth, Total, Years	● ▲ 74.7	79.0
Life Expectancy at Birth, Female, Years	● ▲ 77.3	80.9
Life Expectancy at Birth, Male, Years	● ▲ 72.5	77.1
Median Age of Total Population	● ▲ 29.3	37.5
Population 60 Years and Over, %	● ▲ 8.4	12.2
Dependency Ratio	● ▲ 37	39

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>1.30</b>	<b>271.49</b>	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH		1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars		na	24,480
Gross Domestic Product Growth Rate, Annual %		7	1
Income Group per World Bank Classification		na	High income: non OECD
Population Below \$1/Day, %	▲	na	na
Population Living Below National Poverty Line, %	▲	na	na
Share of Income or Consumption by Poorest Quintile		na	1.9
Access to Improved Water Supply, %	▲	100	100
Antenatal Care, At Least One Visit, %		95	95
Deliveries Attended by Skilled Attendants, %	●▲	100	100
Family Planning Programme Effort Index, 1999 (Total Mean Score)		na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)		na	na
Illiteracy Rate, % of Population 15 and Over, Male		6	3
Illiteracy Rate, % of Population 15 and Over, Female		17	9
Illiteracy Rate, % of Population 15 to 24, Male		1	0
Illiteracy Rate, % of Population 15 to 24, Female		1	0
Ratio of Girls to Boys, Primary Education	▲	0.90	0.90
Ratio of Girls to Boys, Secondary Education	▲	na	na
Primary School Enrolment, Gross % of School Age Population, Male	●▲	105	105
Primary School Enrolment, Gross % of School Age Population, Female	●▲	102	102
Secondary School Enrolment, Gross % of School Age Population, Male	●▲	71	71
Secondary School Enrolment, Gross % of School Age Population, Female	●▲	66	66
Children Underweight Under 5, Male, %		na	na
Children Underweight Under 5, Female, %		na	na
Stunted Children under 5, Severe, %		na	na
Wasted Children under 5, Severe, %		na	na
Undernourished People, %		na	na
Refugees, Number		100	1
Internally Displaced Persons, Number		na	na
Asylum Seekers, Number		na	2
Estimated HIV Prevalence, 15-49, Total		na	0.2
Estimated HIV Prevalence, 15-49, Male		na	0.3
Estimated HIV Prevalence, 15-49, Female		na	0.1

ADOLESCENT REPRODUCTIVE HEALTH		1990	Most Recent
Proportion of Population 15-24		18.7	12.7
Age-Specific Fertility Rate per 1,000 Women, 15-20		8.0	5.5
Median Age at First Sexual Intercourse, Female, 25-49		na	na
Mean Age at Marriage, Male		29.8	29.8
Mean Age at Marriage, Female		27.0	27.0
Married by 18, Percent, Female, 25-49		na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲	na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲	na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %		na	na
HIV Prevalence, 15-24, Total	▲	na	0.2
HIV Prevalence, 15-24, Female	▲	na	0.2
HIV Prevalence, 15-24, Male	▲	na	0.1

GENDER EQUALITY		1990	Most Recent
Gender Empowerment Measure, Value		na	0.6
Gender Empowerment Measure, Rank		na	20.0
Malnourished Women, %		na	na
Labor Force Participation Rate, 15-64, Male		78.3	82.7
Labor Force Participation Rate, 15-64, Female		48.4	56.3
Seats in Parliament Held by Women, %		5.0	16.0
Female Legislators, Senior Officials and Managers, %		na	26.0
Female Professional and Technical Workers, %		na	43.0

REPRODUCTIVE HEALTH COMMODITY SECURITY		1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands		na	-9.9
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %		na	-0.9
Unmet Need for Family Planning, Spacing, %	●	na	na
Unmet Need for Family Planning, Limiting, %	●	na	na
Unmet Need for Family Planning, Total, %	●	na	na
Unmet Need for Family Planning, Thousands	●	na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Solomon Islands

## Overview

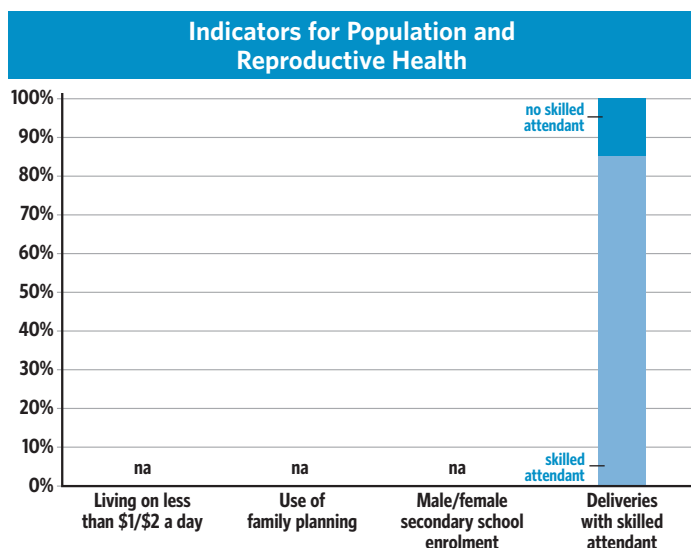
The Solomon Islands had an estimated population of almost 478,000 in 2005 with an annual growth rate of 2.5 per cent. With very little external migration, population growth in the Solomon Islands is entirely a function of natural increase. While fertility has declined in recent years, the total fertility rate in 2005 was 4.7 lifetime births per woman – a level surpassed by only one other Pacific Island country. Social indicators in the Solomon Islands do not compare favourably with other Pacific Island countries. Maternal mortality remains high (130 deaths per 100,000 live births), while the reported contraceptive prevalence rate (CPR) is among the lowest in the region.

A political conflict between migrant and indigenous groups erupted in the capital in 1999, resulting in the total breakdown of law and order. A regional military force led by Australia intervened in 2003 and has re-established stability. The conflict affected all government and public services, including health services.

A National Population Policy was formulated some years ago but implementation has been stalled. A new National Health Plan is being developed. However, most goals of the International Conference on Population and Development remain to be achieved.

The government has formulated a National Economic Recovery, Reform and Development Plan 2003-2006. Restoring basic social services in health and education is a top priority. The plan focuses on reducing maternal and infant mortality, increasing immunization rates and contraceptive use and educating the girl child. School-based bodies, known as Teacher Committees, have been instrumental in advancing the adolescent reproductive health agenda through the school system.

The threat of HIV/AIDS has resulted in the development of new policies and strategies to strengthen and revitalize disease prevention, control and surveillance. Human resource development in health is a government priority. A number of doctors are undertaking postgraduate training in internal medicine, obstetrics and gynaecology. The Ministry of Health has also established a six-month midwifery course.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	164.0	246.6
Population in Thousands, Female	152.8	231.1
Population Growth Rate, %	na	2.5
Crude Birth Rate per 1,000 Population	37.6	36.3
Crude Death Rate per 1,000 Population	8.5	6.9
Urban Population, %	13.7	17.1
Sex Ratio at Birth, Male Births per Female Births	1.09	1.09
Women 15-49, %	45.9	50.6
Total Fertility Rate per Woman 15-49	5.55	4.67
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	6.8
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	na
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ na	130
MMR, Lower Bound	● ▲ na	33
MMR, Upper Bound	● ▲ na	240
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	12.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 37.7	32.8
Under Age 5 Mortality Rate, Total	● ▲ 63	55
Under Age 5 Mortality Rate, Female	● ▲ na	30
Under Age 5 Mortality Rate, Male	● ▲ na	31
Life Expectancy at Birth, Total, Years	● ▲ 60.9	62.8
Life Expectancy at Birth, Female, Years	● ▲ 61.5	63.6
Life Expectancy at Birth, Male, Years	● ▲ 60.3	62.1
Median Age of Total Population	● ▲ 16.8	19.2
Population 60 Years and Over, %	● ▲ 4.5	4.2
Dependency Ratio	● ▲ 94	76

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>4.47</b>	<b>27.03</b>	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH		1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars		na	1,639
Gross Domestic Product Growth Rate, Annual %		na	5
Income Group per World Bank Classification		na	Low income
Population Below \$1/Day, %	▲	na	na
Population Living Below National Poverty Line, %	▲	na	na
Share of Income or Consumption by Poorest Quintile		na	na
Access to Improved Water Supply, %	▲	61	70
Antenatal Care, At Least One Visit, %		92	92
Deliveries Attended by Skilled Attendants, %	●▲	85	85
Family Planning Programme Effort Index, 1999 (Total Mean Score)		na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)		na	na
Illiteracy Rate, % of Population 15 and Over, Male		na	na
Illiteracy Rate, % of Population 15 and Over, Female		na	na
Illiteracy Rate, % of Population 15 to 24, Male		na	na
Illiteracy Rate, % of Population 15 to 24, Female		na	na
Ratio of Girls to Boys, Primary Education	▲	0.80	0.80
Ratio of Girls to Boys, Secondary Education	▲	na	na
Primary School Enrolment, Gross % of School Age Population, Male	●▲	92	92
Primary School Enrolment, Gross % of School Age Population, Female	●▲	79	79
Secondary School Enrolment, Gross % of School Age Population, Male	●▲	17	17
Secondary School Enrolment, Gross % of School Age Population, Female	●▲	11	11
Children Underweight Under 5, Male, %		na	na
Children Underweight Under 5, Female, %		na	na
Stunted Children under 5, Severe, %		na	na
Wasted Children under 5, Severe, %		na	na
Undernourished People, %		na	na
Refugees, Number		na	na
Internally Displaced Persons, Number		na	na
Asylum Seekers, Number		na	na
Estimated HIV Prevalence, 15-49, Total		na	na
Estimated HIV Prevalence, 15-49, Male		na	na
Estimated HIV Prevalence, 15-49, Female		na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

ADOLESCENT REPRODUCTIVE HEALTH		1990	Most Recent
Proportion of Population 15-24		20.6	21.0
Age-Specific Fertility Rate per 1,000 Women, 15-20		80.0	45.5
Median Age at First Sexual Intercourse, Female, 25-49		na	na
Mean Age at Marriage, Male		25.0	25.0
Mean Age at Marriage, Female		21.2	21.2
Married by 18, Percent, Female, 25-49		na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲	na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲	na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %		na	na
HIV Prevalence, 15-24, Total	▲	na	na
HIV Prevalence, 15-24, Female	▲	na	na
HIV Prevalence, 15-24, Male	▲	na	na

GENDER EQUALITY		1990	Most Recent
Gender Empowerment Measure, Value		na	na
Gender Empowerment Measure, Rank		na	na
Malnourished Women, %		na	na
Labor Force Participation Rate, 15-64, Male		na	90.2
Labor Force Participation Rate, 15-64, Female		na	83.7
Seats in Parliament Held by Women, %		na	0.0
Female Legislators, Senior Officials and Managers, %		na	na
Female Professional and Technical Workers, %		na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY		1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands		na	53.3
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %		na	34.8
Unmet Need for Family Planning, Spacing, %	●	na	na
Unmet Need for Family Planning, Limiting, %	●	na	na
Unmet Need for Family Planning, Total, %	●	na	na
Unmet Need for Family Planning, Thousands	●	na	na

### Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:

Poorest/Richest Quintile, % na/na

### Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:

Poorest/Richest Quintile, % na/na

### Children Underweight Under 5, Severe:

Urban/Rural, % na/na

No Education, Primary, % na

Highest Level of Education, % na

Provincial Low/High, % na/na

Poorest/Richest Quintile, % na/na

### Girls 6-10 Who Currently Attend School:

Poorest/Richest Quintile, % na/na

### Boys 6-10 Who Currently Attend School:

Poorest/Richest Quintile, % na/na

### Malnourished Women:

Poorest/Richest Quintile, % na/na

### Antenatal Care, At Least One Visit:

Poorest/Richest Quintile, % na/na

# Sri Lanka



## Overview

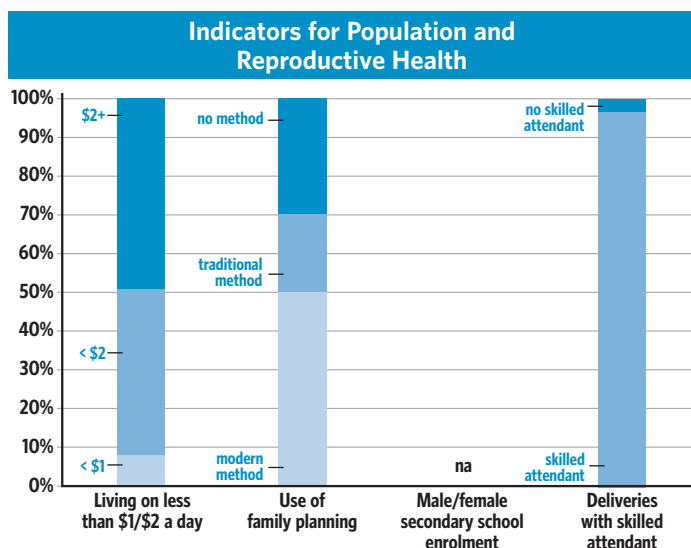
Sri Lanka, with a total fertility rate of 2.2 lifetime births per woman and a population growth rate of 0.83 per cent per annum, has one of the lowest levels of poverty among South Asian countries. The impact of armed conflict in the north and east of the country for nearly two decades is gradually receding. However, levels of poverty tend to vary widely throughout the country.

A major challenge in Sri Lanka is to meet the needs of young people along with those of an ageing population. Currently, 18 per cent of the population of 20.7 million is between the ages of 15 and 24. However, access to youth friendly reproductive health information and services is limited. Sri Lanka is also ageing at a rapid pace and by the year 2025, roughly one person in five will be over 60 years of age. The Well Women's Clinic programme through the national health system, provides reproductive health care to women over the age of 35.

Sri Lanka is a low prevalence country for HIV/AIDS. The government, under the National Strategic Plan for Prevention and Control of HIV/AIDS 2002-06, aims to take early action in view of various risk factors that exist in the country. These factors include high-risk behaviour among young people, workers returning from high prevalence areas abroad and significant male and female commercial sex work.

Developments in the area of gender include the drafting of a Women's Rights Bill and efforts being made to convert the National Committee on Women to a National Commission, vested with more powers to monitor the implementation of the Women's Charter. A bill on domestic violence has been prepared and will be presented to the Parliament.

Sri Lanka was one of the countries worst affected by the tsunami tragedy, which struck on 26 December 2004, killing 30,000. UNFPA support to the tsunami-affected communities includes reconstruction and rehabilitation of health facilities to revitalize reproductive health services, psycho-social support and interventions to address gender issues particularly domestic violence.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	9,113.7	10,541.4
Population in Thousands, Female	8,671.9	10,201.5
Population Growth Rate, %	na	0.8
Crude Birth Rate per 1,000 Population	20.9	17.1
Crude Death Rate per 1,000 Population	5.9	6.1
Urban Population, %	21.3	21.0
Sex Ratio at Birth, Male Births per Female Births	1.04	1.04
Women 15-49, %	52.0	55.2
Total Fertility Rate per Woman 15-49	2.58	2.22
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	43.6
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	66.1
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 140	92
MMR, Lower Bound	● ▲ na	46
MMR, Upper Bound	● ▲ na	180
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	11.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 25.2	15.8
Under Age 5 Mortality Rate, Total	● ▲ 28	18
Under Age 5 Mortality Rate, Female	● ▲ na	16
Under Age 5 Mortality Rate, Male	● ▲ na	30
Life Expectancy at Birth, Total, Years	● ▲ 70.8	74.5
Life Expectancy at Birth, Female, Years	● ▲ 73.6	77.3
Life Expectancy at Birth, Male, Years	● ▲ 68.7	72.0
Median Age of Total Population	● ▲ 24.2	29.6
Population 60 Years and Over, %	● ▲ 8.3	10.7
Dependency Ratio	● ▲ 60	46

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>1.80</b>	<b>15.57</b>	<b>na</b>	<b>na</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	2.1/2.8
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	2.1/3.2 Metro Colombo/Dry zone, rain fed
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	36.5/29.9
No Education, Primary	52.3
Highest Level of Education	32.0
Provincial Low/High	1.9/21.7 Jaffna/Badulla
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	34.0/31.8
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	4.0/5.1
No Education, Primary, %	78.7



SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	3,776
Gross Domestic Product Growth Rate, Annual %	4	6
Income Group per World Bank Classification	na	Lower middle income
Population Below \$1/Day, %	▲ na	7.6
Population Living Below National Poverty Line, %	▲ 20.0	25.0
Share of Income or Consumption by Poorest Quintile	na	3.5
Access to Improved Water Supply, %	▲ 60	78
Antenatal Care, At Least One Visit, %	86	98
Deliveries Attended by Skilled Attendants, %	●▲ 85	97
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	69.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	7	5
Illiteracy Rate, % of Population 15 and Over, Female	15	9
Illiteracy Rate, % of Population 15 to 24, Male	4	3
Illiteracy Rate, % of Population 15 to 24, Female	6	3
Ratio of Girls to Boys, Primary Education	▲ 0.93	0.94
Ratio of Girls to Boys, Secondary Education	▲ na	1.03
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	111
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	110
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	84
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	89
Children Underweight Under 5, Male, %	na	32
Children Underweight Under 5, Female, %	na	33
Stunted Children under 5, Severe, %	na	4
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	29.0	25.0
Refugees, Number	na	30
Internally Displaced Persons, Number	na	386,104
Asylum Seekers, Number	na	6
Estimated HIV Prevalence, 15-49, Total	na	<0.1
Estimated HIV Prevalence, 15-49, Male	na	0.1
Estimated HIV Prevalence, 15-49, Female	na	0.0

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	19.5	17.9
Age-Specific Fertility Rate per 1,000 Women, 15-20	38.0	18.5
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	na	27.9
Mean Age at Marriage, Female	na	24.4
Married by 18, Percent, Female, 25-49	na	18.9
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	0.0
HIV Prevalence, 15-24, Female	▲ na	0.0
HIV Prevalence, 15-24, Male	▲ na	0.0

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	0.3
Gender Empowerment Measure, Rank	na	74.0
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	77.9	76.8
Labor Force Participation Rate, 15-64, Female	45.3	35.6
Seats in Parliament Held by Women, %	5.0	4.4
Female Legislators, Senior Officials and Managers, %	na	4.0
Female Professional and Technical Workers, %	na	49.0

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	403.2
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	7.0
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	73.8
Provincial Low/High, %	2.5/8.4 <small>South-W, lowlands/ Dry zone, rain fed</small>
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	95.6/85.8
No Education, Primary, %	63.9
Highest Level of Education, %	92.4
Provincial Low/High, %	76.4/98.1 <small>Dry Zone, rain fed/Metro Colombo</small>
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	41.0/40.5
No Education, Primary, %	43.7
Highest Level of Education, %	36.5
Provincial Low/High, %	34.0/45.3 <small>South-W, lowlands/ Upper S, Central-hill</small>
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	3.5/6.7
No Education, Primary, %	16.8
Highest Level of Education, %	3.8
Provincial Low/High, %	3.5/9.1 <small>South-W, lowlands/ Upper S, Central-hill</small>
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Thailand



## Overview

Thailand, with its current estimated population of over 64 million, has been recognised around the world for its successful family planning programme. In only 25 years, the country moved from a pro-natalist stance to a contraceptive-friendly society. The total fertility rate is at replacement level — 2.1 lifetime births per woman and the contraceptive prevalence rate for modern methods among reproductive-age women is high at 70 per cent.

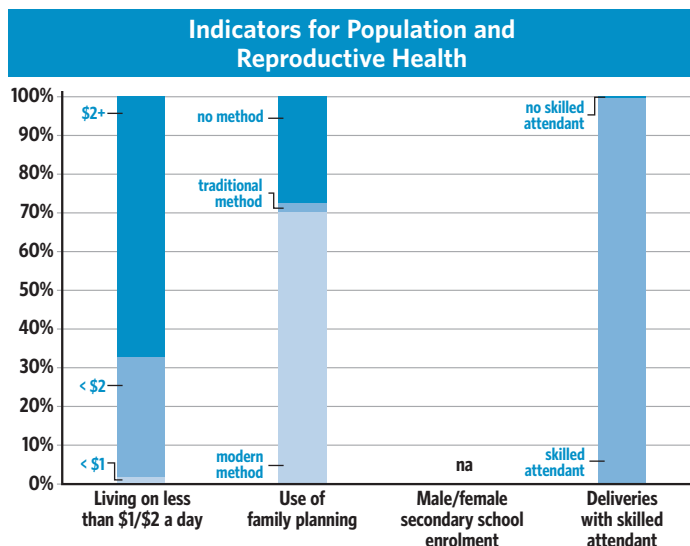
In 1997 the government launched the National Reproductive Health Policy focusing on a wide range of issues including family planning, maternal and child health, HIV/AIDS, reproductive tract infections and cancers, sex education, adolescent reproductive health, infertility, and elderly health. The integration of family planning into the national public health service system proved to be a successful implementation strategy.

The National Economic and Social Development Plan (2002-2006) outlines current priorities: maintaining the fertility rate at replacement level; ensuring that 80 per cent of all population age groups have good reproductive health according to established standards; and reducing rural to urban migration.

In October 2001, the government initiated a low cost Universal Health Care Policy nationwide, focusing on the 20 per cent of the population uninsured by any scheme. Low-income earners are able to pay a nominal fee per visit at government hospitals. As of January 2004, 45 million people were covered by this scheme.

There remains a considerable unmet need for family planning and other reproductive health services among single women, men, adolescents and youth, hill tribes and migrant workers, since such services have been directed at married women.

Although Thailand has demonstrated strong political commitment and promotes a multi-sectoral approach, the country faces socioeconomic and epidemiological consequences as large numbers of people are living with HIV/AIDS. Up to one million people are infected with HIV, and AIDS is a leading cause of death. Challenges for the country include reviving intensive HIV prevention efforts, providing care and support to people living with AIDS and maintaining political commitment.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	27,188.0	31,543.2
Population in Thousands, Female	27,450.9	32,689.6
Population Growth Rate, %	na	0.8
Crude Birth Rate per 1,000 Population	20.7	18.2
Crude Death Rate per 1,000 Population	6.0	7.2
Urban Population, %	29.4	32.5
Sex Ratio at Birth, Male Births per Female Births	1.04	1.04
Women 15-49, %	54.8	55.3
Total Fertility Rate per Woman 15-49	2.26	2.06
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	69.8
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	72.2
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 200	44
MMR, Lower Bound	● ▲ na	22
MMR, Upper Bound	● ▲ na	88
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	13.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 33.1	18.4
Under Age 5 Mortality Rate, Total	● ▲ 37	23
Under Age 5 Mortality Rate, Female	● ▲ na	19
Under Age 5 Mortality Rate, Male	● ▲ na	31
Life Expectancy at Birth, Total, Years	● ▲ 68.0	70.7
Life Expectancy at Birth, Female, Years	● ▲ 70.8	74.3
Life Expectancy at Birth, Male, Years	● ▲ 65.4	67.3
Median Age of Total Population	● ▲ 23.4	30.5
Population 60 Years and Over, %	● ▲ 6.3	10.5
Dependency Ratio	● ▲ 56	45

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>3.10</b>	<b>63.41</b>	<b>2.59</b>	<b>333.51</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	1.7/2.4
No Education, Primary	3.5
Highest Level of Education	1.4
Provincial Low/High	1.7/3.1 Bangkok/South
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	27.0/41.0
No Education, Primary	54.0
Highest Level of Education	19.0
Provincial Low/High	20.0/44.0 Bangkok/Northeast
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	24.8/61.1
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	4.1/12.2
No Education, Primary, %	29.1

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	7,580
Gross Domestic Product Growth Rate, Annual %	8	6
Income Group per World Bank Classification	na	Lower middle income
Population Below \$1/Day, %	▲ na	<2
Population Living Below National Poverty Line, %	▲ 18.0	18.0
Share of Income or Consumption by Poorest Quintile	na	2.5
Access to Improved Water Supply, %	▲ 72	85
Antenatal Care, At Least One Visit, %	53	86
Deliveries Attended by Skilled Attendants, %	●▲ 71	99
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	75.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	5	2
Illiteracy Rate, % of Population 15 and Over, Female	11	5
Illiteracy Rate, % of Population 15 to 24, Male	1	0
Illiteracy Rate, % of Population 15 to 24, Female	2	1
Ratio of Girls to Boys, Primary Education	▲ 0.94	0.94
Ratio of Girls to Boys, Secondary Education	▲ na	0.94
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	99
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	95
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	77
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	77
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	28.0	19.0
Refugees, Number	63,600	119,053
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	2,657
Estimated HIV Prevalence, 15-49, Total	na	1.5
Estimated HIV Prevalence, 15-49, Male	na	2.1
Estimated HIV Prevalence, 15-49, Female	na	1.1

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	21.5	17.0
Age-Specific Fertility Rate per 1,000 Women, 15-20	58.0	47.5
Median Age at First Sexual Intercourse, Female, 25-49	na	20.5
Mean Age at Marriage, Male	26.0	26.0
Mean Age at Marriage, Female	23.5	23.5
Married by 18, Percent, Female, 25-49	na	25.1
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	1.4
HIV Prevalence, 15-24, Female	▲ na	1.7
HIV Prevalence, 15-24, Male	▲ na	1.1

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	0.5
Gender Empowerment Measure, Rank	na	57.0
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	87.7	81.1
Labor Force Participation Rate, 15-64, Female	76.3	65.0
Seats in Parliament Held by Women, %	4.0	10.6
Female Legislators, Senior Officials and Managers, %	na	27.0
Female Professional and Technical Workers, %	na	55.0

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	524.8
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	2.9
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	2.7	
Provincial Low/High, %	3.9/17.2	Bangkok/South
<b>Deliveries Attended by Skilled Attendants:</b>		
Urban/Rural, %	97.1/63.0	
No Education, Primary, %	45.3	
Highest Level of Education, %	94.9	
Provincial Low/High, %	54.4/98.2	Northeast/Bangkok
Poorest/Richest Quintile, %	na/na	
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>		
Urban/Rural, %	64.7/63.4	
No Education, Primary, %	54.9	
Highest Level of Education, %	59.4	
Provincial Low/High, %	43.8/70.2	South/North
Poorest/Richest Quintile, %	na/na	
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Unmet Need for Family Planning, Limiting:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Unmet Need for Family Planning, Spacing:</b>		
Poorest/Richest Quintile, %	na/na	

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Children Underweight Under 5, Severe:</b>		
Urban/Rural, %	0.6/4.8	
No Education, Primary, %	10.7	
Highest Level of Education, %	1.7	
Provincial Low/High, %	0.4/4.9	Bangkok/North and North East
Poorest/Richest Quintile, %	na/na	
<b>Girls 6-10 Who Currently Attend School:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Boys 6-10 Who Currently Attend School:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Malnourished Women:</b>		
Poorest/Richest Quintile, %	na/na	
<b>Antenatal Care, At Least One Visit:</b>		
Poorest/Richest Quintile, %	na/na	

# Timor-Leste, Democratic Republic of

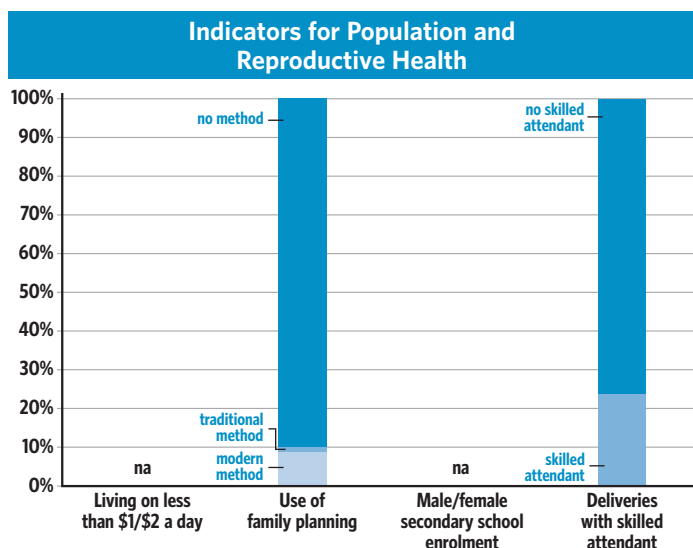
## Overview

As the world's newest nation, 2003 was the first full year of independence for The Democratic Republic of Timor-Leste. National institutions were still in the process of formation. Recent history, particularly the transition to independence, was extremely costly in human and economic terms. About 70 per cent of the country's infrastructure was destroyed and almost 75 per cent of the country's population of 947,000 was displaced. Timor-Leste is the poorest country in Asia and has been designated one of the least developed countries by the United Nations.

Timor-Leste can still be classified as a post-conflict country. Violence continues to manifest itself in a number of ways, including high rates of domestic violence and sexual assault. New legislation on domestic violence has been approved by the Council of Ministers and is awaiting adoption by the National Assembly.

There is a dearth of reliable, up-to-date data on all aspects of national life, but these gaps are gradually being corrected. The first National Population and Housing Census was conducted in 2004 and a Multiple Indicator Cluster Survey (MICS) was recently carried out by UNICEF. The total fertility rate is estimated at 6.1 lifetime births per woman, one of the world's highest. The population remains young, with 41 per cent under age 15 and only 5 per cent age 60 and over. A National Family Planning Policy has been approved by the Minister of Health and is awaiting approval by the Council of Ministers.

The maternal mortality ratio (MMR) is estimated to be about 660 deaths per 100,000 live births. The government's national development plan considers the reduction of the MMR to be a national priority. The 2002 Health Policy Framework addresses safe motherhood in terms of service delivery standards and human resource policy for basic services to reduce maternal deaths. The highly publicized "Motorbikes for Midwives" campaign provides greater mobility for professional midwives in this mountainous country with many remote settlements and a limited number of health facilities.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	383.0	491.7
Population in Thousands, Female	357.2	455.3
Population Growth Rate, %	na	5.4
Crude Birth Rate per 1,000 Population	40.0	28.1
Crude Death Rate per 1,000 Population	18.0	12.1
Urban Population, %	7.8	7.8
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	50.4	47.0
Total Fertility Rate per Woman 15-49	4.98	6.08
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	na
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	na
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ na	660
MMR, Lower Bound	● ▲ na	170
MMR, Upper Bound	● ▲ na	1,200
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	40.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 149.6	87.4
Under Age 5 Mortality Rate, Total	● ▲ 197	124
Under Age 5 Mortality Rate, Female	● ▲ na	179
Under Age 5 Mortality Rate, Male	● ▲ na	186
Life Expectancy at Birth, Total, Years	● ▲ 45.2	56.4
Life Expectancy at Birth, Female, Years	● ▲ 46.6	57.6
Life Expectancy at Birth, Male, Years	● ▲ 44.9	55.4
Median Age of Total Population	● ▲ 19.3	18.4
Population 60 Years and Over, %	● ▲ 3.6	5.0
Dependency Ratio	● ▲ 77	78

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>6.20</b>	<b>30.03</b>	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	na
Gross Domestic Product Growth Rate, Annual %	na	-2
Income Group per World Bank Classification	na	Low income
Population Below \$1/Day, %	▲	na
Population Living Below National Poverty Line, %	▲	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲	52
Antenatal Care, At Least One Visit, %	na	na
Deliveries Attended by Skilled Attendants, %	●▲	na
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	na	na
Illiteracy Rate, % of Population 15 and Over, Female	na	na
Illiteracy Rate, % of Population 15 to 24, Male	na	na
Illiteracy Rate, % of Population 15 to 24, Female	na	na
Ratio of Girls to Boys, Primary Education	▲	na
Ratio of Girls to Boys, Secondary Education	▲	na
Primary School Enrolment, Gross % of School Age Population, Male	●▲	na
Primary School Enrolment, Gross % of School Age Population, Female	●▲	na
Secondary School Enrolment, Gross % of School Age Population, Male	●▲	na
Secondary School Enrolment, Gross % of School Age Population, Female	●▲	na
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	na	3
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	12
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	19.2	23.6
Age-Specific Fertility Rate per 1,000 Women, 15-20	49.0	175.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	na	na
Mean Age at Marriage, Female	na	na
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲	na
HIV Prevalence, 15-24, Female	▲	na
HIV Prevalence, 15-24, Male	▲	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	90.3
Labor Force Participation Rate, 15-64, Female	na	77.6
Seats in Parliament Held by Women, %	na	26.1
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	168.5
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	54.9
Unmet Need for Family Planning, Spacing, %	●	na
Unmet Need for Family Planning, Limiting, %	●	na
Unmet Need for Family Planning, Total, %	●	na
Unmet Need for Family Planning, Thousands	●	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na



# Tonga

## Overview

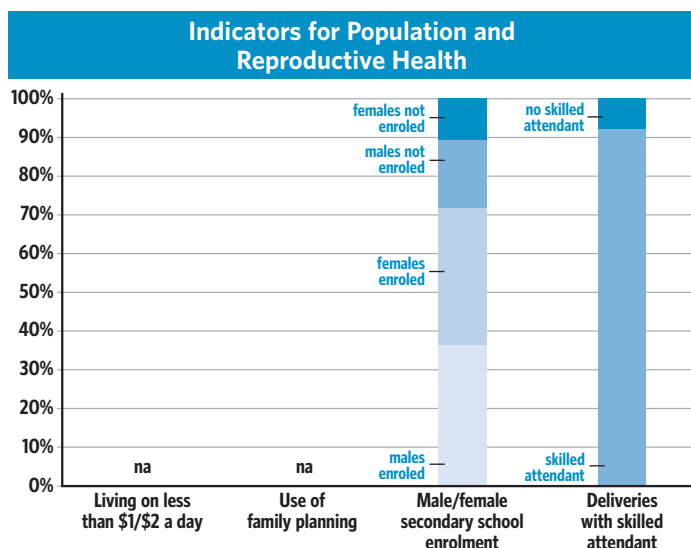
The estimated population of Tonga in 2004 was 102,300 with an annual growth rate of 0.3 per cent. As in other Polynesian countries, the low rate of population growth in Tonga is due to on-going emigration, largely to New Zealand, Australia and the U.S. The total fertility rate is currently reported at 3.9 births per woman, with a natural population increase of 2.3 per cent per year. The population remains youthful: 21 per cent are between the ages of 15 and 24.

Since the International Conference on Population and Development, Tonga has made efforts to integrate population concerns into development strategies. A National Population Policy has been under discussion for some years but has yet to be formalized. Emigration is a significant factor in the economy due to the large in-flow of remittances.

The government provides health services free of charge and access to care is generally good. As a result, the vast majority of pregnant women attend antenatal clinics, 91 per cent deliver in a health facility and 92 per cent of all deliveries are attended by trained staff.

School-based bodies, known as Health Science Committees, have been instrumental in advancing adolescent reproductive health through the school system. The introduction of adolescent reproductive health counseling and services in school-based clinics is being piloted in three secondary schools.

HIV prevalence in Tonga is low, with only 13 known cases over the last 10 years and only two people reportedly living with HIV today. HIV surveillance is good and more than 3,000 HIV tests were carried out in 2002 as part of a screening programme for blood donors, government employees, visa applicants and pregnant women. HIV counseling and testing for patients diagnosed with sexually transmitted infections are limited.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	47.7	52.2
Population in Thousands, Female	46.7	50.1
Population Growth Rate, %	na	0.3
Crude Birth Rate per 1,000 Population	30.2	24.6
Crude Death Rate per 1,000 Population	6.1	6.0
Urban Population, %	na	na
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	47.5	48.3
Total Fertility Rate per Woman 15-49	4.66	3.91
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	na
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	na
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ na	na
MMR, Lower Bound	● ▲ na	na
MMR, Upper Bound	● ▲ na	na
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	10.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 26.5	20.1
Under Age 5 Mortality Rate, Total	● ▲ 31	24
Under Age 5 Mortality Rate, Female	● ▲ na	na
Under Age 5 Mortality Rate, Male	● ▲ na	na
Life Expectancy at Birth, Total, Years	● ▲ 69.6	72.5
Life Expectancy at Birth, Female, Years	● ▲ 71.1	73.9
Life Expectancy at Birth, Male, Years	● ▲ 68.5	71.3
Median Age of Total Population	● ▲ 19.7	21.8
Population 60 Years and Over, %	● ▲ 7.0	8.8
Dependency Ratio	● ▲ 78	72

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>5.07</b>	<b>66.89</b>	<b>3.81</b>	<b>192.20</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	6,975
Gross Domestic Product Growth Rate, Annual %	na	3
Income Group per World Bank Classification	na	Lower middle income
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ na	100
Antenatal Care, At Least One Visit, %	na	na
Deliveries Attended by Skilled Attendants, %	●▲ na	92
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	na	1
Illiteracy Rate, % of Population 15 and Over, Female	na	1
Illiteracy Rate, % of Population 15 to 24, Male	na	1
Illiteracy Rate, % of Population 15 to 24, Female	na	1
Ratio of Girls to Boys, Primary Education	▲ 0.92	0.87
Ratio of Girls to Boys, Secondary Education	▲ na	1.00
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	114
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	111
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	96
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	111
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	22.7	20.9
Age-Specific Fertility Rate per 1,000 Women, 15-20	20.5	11.5
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	27.1	27.1
Mean Age at Marriage, Female	24.8	24.8
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	77.5	77.5
Labor Force Participation Rate, 15-64, Female	37.8	43.5
Seats in Parliament Held by Women, %	na	0.0
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	1.9
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	7.3
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Tuvalu

## Overview

Tuvalu consists of nine widely scattered atolls with an estimated total population of 10,000 in 2005. A steady rate of emigration has resulted in little population growth over the past decade, and population projections suggest that by 2015 the population will be only slightly higher than it is today. The population is growing by under .5 per cent per year and the total fertility rate is 3.8 births per woman.

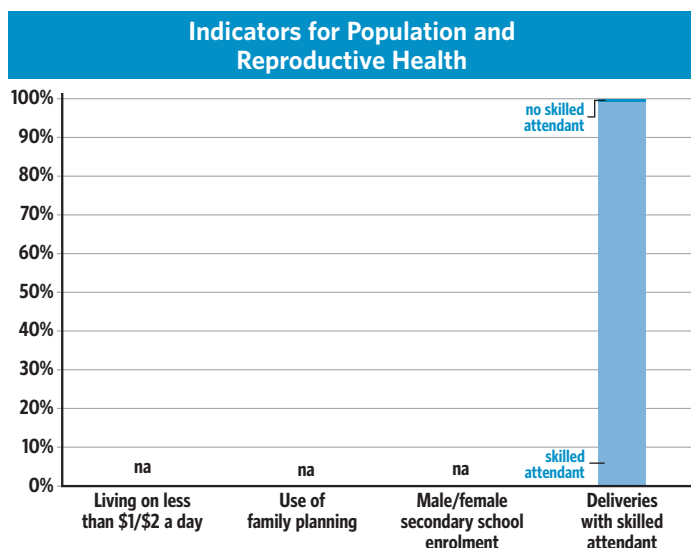
The total land area of the country is only 26 sq km, and the Capital of Funafuti has only 2.8 sq km of land. The low-lying atolls of Tuvalu are highly vulnerable to sea level surges caused by storms, spring tides, and tropical cyclones. The dire consequences of a rise in the sea level caused by "global climate change" are of great concern.

The country's low per capita income and its extreme vulnerability to both climatic and economic forces mean that it is classified as a least developed country and a priority for UNFPA assistance.

Access to basic health services and formal education in Tuvalu is virtually universal and life expectancy at birth is 64 years. The slow population growth rate and declining dependency ratio have facilitated improvements in the quality of services. However, the capacity of public services is extremely limited and the health service struggles to meet the demands.

The government's National Population Policy aims to: reduce the population growth rate; achieve sustainable population distribution between rural and urban areas; and improve the health and welfare of the population, with an emphasis on reproductive and sexual health and family planning.

New multipurpose youth centres were established with UNFPA funding. Population and reproductive health challenges include relatively high fertility and poor maternal health, sexually transmitted diseases and reproductive tract cancers (especially cervical cancer) and the threat of HIV/AIDS.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	na	na
Population in Thousands, Female	na	na
Population Growth Rate, %	na	na
Crude Birth Rate per 1,000 Population	na	27.1
Crude Death Rate per 1,000 Population	na	9.9
Urban Population, %	na	na
Sex Ratio at Birth, Male Births per Female Births	na	na
Women 15-49, %	na	na
Total Fertility Rate per Woman 15-49	na	3.80
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	na
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	na
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ na	na
MMR, Lower Bound	● ▲ na	na
MMR, Upper Bound	● ▲ na	na
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	22.0
Infant Mortality Rate per 1,000 Live Births	● ▲ na	34.0
Under Age 5 Mortality Rate, Total	● ▲ na	na
Under Age 5 Mortality Rate, Female	● ▲ na	na
Under Age 5 Mortality Rate, Male	● ▲ na	na
Life Expectancy at Birth, Total, Years	● ▲ na	63.6
Life Expectancy at Birth, Female, Years	● ▲ na	64.7
Life Expectancy at Birth, Male, Years	● ▲ na	62.4
Median Age of Total Population	● ▲ na	na
Population 60 Years and Over, %	● ▲ na	na
Dependency Ratio	● ▲ na	72

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
na	na	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	na/na
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	na/na
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	na
Gross Domestic Product Growth Rate, Annual %	na	na
Income Group per World Bank Classification	na	na
Population Below \$1/Day, %	▲ na	na
Population Living Below National Poverty Line, %	▲ na	na
Share of Income or Consumption by Poorest Quintile	na	na
Access to Improved Water Supply, %	▲ na	93
Antenatal Care, At Least One Visit, %	na	na
Deliveries Attended by Skilled Attendants, %	●▲ na	99
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	na
Illiteracy Rate, % of Population 15 and Over, Male	na	na
Illiteracy Rate, % of Population 15 and Over, Female	na	na
Illiteracy Rate, % of Population 15 to 24, Male	na	na
Illiteracy Rate, % of Population 15 to 24, Female	na	na
Ratio of Girls to Boys, Primary Education	▲ 0.91	0.85
Ratio of Girls to Boys, Secondary Education	▲ na	0.81
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	96
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	109
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	87
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	81
Children Underweight Under 5, Male, %	na	na
Children Underweight Under 5, Female, %	na	na
Stunted Children under 5, Severe, %	na	na
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	na	na
Refugees, Number	na	na
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	na
Estimated HIV Prevalence, 15-49, Male	na	na
Estimated HIV Prevalence, 15-49, Female	na	na

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	na	na
Age-Specific Fertility Rate per 1,000 Women, 15-20	na	na
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	na	na
Mean Age at Marriage, Female	na	na
Married by 18, Percent, Female, 25-49	na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	na
HIV Prevalence, 15-24, Total	▲ na	na
HIV Prevalence, 15-24, Female	▲ na	na
HIV Prevalence, 15-24, Male	▲ na	na

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	na
Labor Force Participation Rate, 15-64, Female	na	na
Seats in Parliament Held by Women, %	na	na
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	na
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	na
Unmet Need for Family Planning, Spacing, %	● na	na
Unmet Need for Family Planning, Limiting, %	● na	na
Unmet Need for Family Planning, Total, %	● na	na
Unmet Need for Family Planning, Thousands	● na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Vanuatu

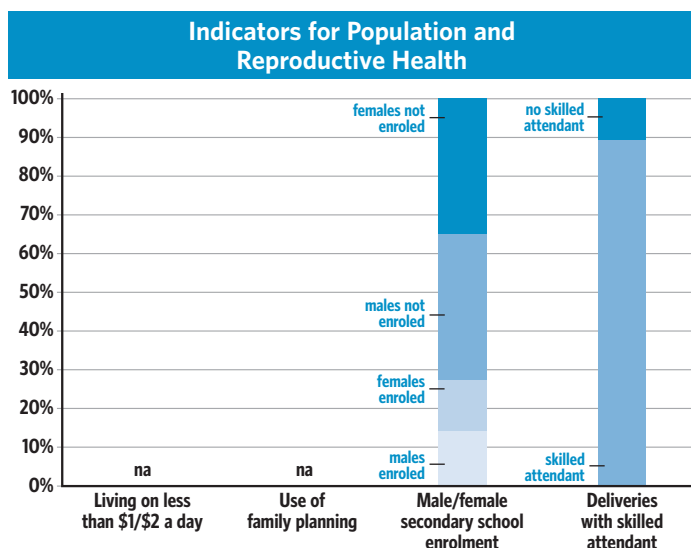
## Overview

The population of Vanuatu was estimated at 211,400 in 2005, with an annual growth rate of 1.9 per cent. One-fifth of the population is between 15 and 24 years old and the total fertility rate is 4.3 births per woman.

Due to its low per capita income and poor development indicators, Vanuatu is classified as a least developed country. Rural-urban disparities in services, together with limited economic opportunities in the rural areas, have encouraged migration to urban centres. However, the country remains predominantly rural with 80 per cent of the population residing in rural areas.

Since the International Conference on Population and Development, efforts have been made to integrate population concerns into development strategies. Vanuatu developed a National Population Policy with the main objectives of addressing population growth and ensuring people-centred sustainable development. National development strategies, as outlined in the Comprehensive Reform Programme, emphasize the importance of improving access to education, health care and employment, especially for women.

A UNFPA-funded regional adolescent reproductive health programme has helped schools strengthen existing school-based clinics, improving services and incorporating counseling. Support was also provided to an out-of-school programme to strengthen the operations and functions of existing youth clinics.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	77.0	107.7
Population in Thousands, Female	72.5	103.6
Population Growth Rate, %	na	1.9
Crude Birth Rate per 1,000 Population	36.8	33.7
Crude Death Rate per 1,000 Population	7.4	5.3
Urban Population, %	18.5	23.7
Sex Ratio at Birth, Male Births per Female Births	1.07	1.07
Women 15-49, %	47.6	50.3
Total Fertility Rate per Woman 15-49	4.94	4.31
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	na	na
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	na	na
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 280	130
MMR, Lower Bound	● ▲ na	16
MMR, Upper Bound	● ▲ na	65
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	19.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 47.6	31.3
Under Age 5 Mortality Rate, Total	● ▲ 47	38
Under Age 5 Mortality Rate, Female	● ▲ na	39
Under Age 5 Mortality Rate, Male	● ▲ na	32
Life Expectancy at Birth, Total, Years	● ▲ 63.5	69.2
Life Expectancy at Birth, Female, Years	● ▲ 64.8	71.2
Life Expectancy at Birth, Male, Years	● ▲ 61.8	67.5
Median Age of Total Population	● ▲ 18.1	19.6
Population 60 Years and Over, %	● ▲ 5.3	5.1
Dependency Ratio	● ▲ 91	76

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
<b>2.80</b>	<b>32.38</b>	<b>9.41</b>	<b>1233.86</b>

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	3.8/5.1
No Education, Primary	3.8
Highest Level of Education	na
Provincial Low/High	4.0/5.9 Shefa/Torba
Poorest/Richest Quintile	na/na

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	17.0/29.0
No Education, Primary	na
Highest Level of Education	na
Provincial Low/High	21.0/39.0 Shefa/Torba
Poorest/Richest Quintile, %	na/na

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	na/na
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	na/na
Poorest/Richest Quintile	na/na

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	na/na
No Education, Primary, %	na



SOCIO-ECONOMIC & HEALTH		1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars		na	2,924
Gross Domestic Product Growth Rate, Annual %		na	2
Income Group per World Bank Classification		na	Lower middle income
Population Below \$1/Day, %	▲	na	na
Population Living Below National Poverty Line, %	▲	na	na
Share of Income or Consumption by Poorest Quintile		na	na
Access to Improved Water Supply, %	▲	71	60
Antenatal Care, At Least One Visit, %		na	na
Deliveries Attended by Skilled Attendants, %	●▲	67	89
Family Planning Programme Effort Index, 1999 (Total Mean Score)		na	na
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)		na	na
Illiteracy Rate, % of Population 15 and Over, Male		na	na
Illiteracy Rate, % of Population 15 and Over, Female		na	na
Illiteracy Rate, % of Population 15 to 24, Male		na	na
Illiteracy Rate, % of Population 15 to 24, Female		na	na
Ratio of Girls to Boys, Primary Education	▲	0.89	0.99
Ratio of Girls to Boys, Secondary Education	▲	na	0.77
Primary School Enrolment, Gross % of School Age Population, Male	●▲	na	113
Primary School Enrolment, Gross % of School Age Population, Female	●▲	na	113
Secondary School Enrolment, Gross % of School Age Population, Male	●▲	na	27
Secondary School Enrolment, Gross % of School Age Population, Female	●▲	na	29
Children Underweight Under 5, Male, %		na	na
Children Underweight Under 5, Female, %		na	na
Stunted Children under 5, Severe, %		na	na
Wasted Children under 5, Severe, %		na	na
Undernourished People, %		na	na
Refugees, Number		na	na
Internally Displaced Persons, Number		na	na
Asylum Seekers, Number		na	na
Estimated HIV Prevalence, 15-49, Total		na	na
Estimated HIV Prevalence, 15-49, Male		na	na
Estimated HIV Prevalence, 15-49, Female		na	na

ADOLESCENT REPRODUCTIVE HEALTH		1990	Most Recent
Proportion of Population 15-24		18.5	20.0
Age-Specific Fertility Rate per 1,000 Women, 15-20		66.5	47.5
Median Age at First Sexual Intercourse, Female, 25-49		na	na
Mean Age at Marriage, Male		25.3	25.3
Mean Age at Marriage, Female		22.6	22.6
Married by 18, Percent, Female, 25-49		na	na
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲	na	na
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲	na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %		na	na
HIV Prevalence, 15-24, Total	▲	na	na
HIV Prevalence, 15-24, Female	▲	na	na
HIV Prevalence, 15-24, Male	▲	na	na

GENDER EQUALITY		1990	Most Recent
Gender Empowerment Measure, Value		na	na
Gender Empowerment Measure, Rank		na	na
Malnourished Women, %		na	na
Labor Force Participation Rate, 15-64, Male		89.7	89.7
Labor Force Participation Rate, 15-64, Female		80.2	80.2
Seats in Parliament Held by Women, %		4.0	1.9
Female Legislators, Senior Officials and Managers, %		na	na
Female Professional and Technical Workers, %		na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY		1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands		na	20.0
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %		na	30.6
Unmet Need for Family Planning, Spacing, %	●	na	na
Unmet Need for Family Planning, Limiting, %	●	na	na
Unmet Need for Family Planning, Total, %	●	na	na
Unmet Need for Family Planning, Thousands	●	na	na

Highest Level of Education	na
Provincial Low/High, %	na/na
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	na/na

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	na/na
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	na/na

# Viet Nam



## Overview

Viet Nam's population is estimated at 84.2 million. The country's Comprehensive Poverty Reduction and Growth Strategy (CPRGS) was approved in 2002. It translates the government's long-term socio-economic development strategies into concrete measures for implementation. The CPRGS emphasizes human resource development and poverty reduction, giving priority to health and education, environmental protection, prevention of HIV/AIDS, gender equality and improvement of the life of ethnic minorities.

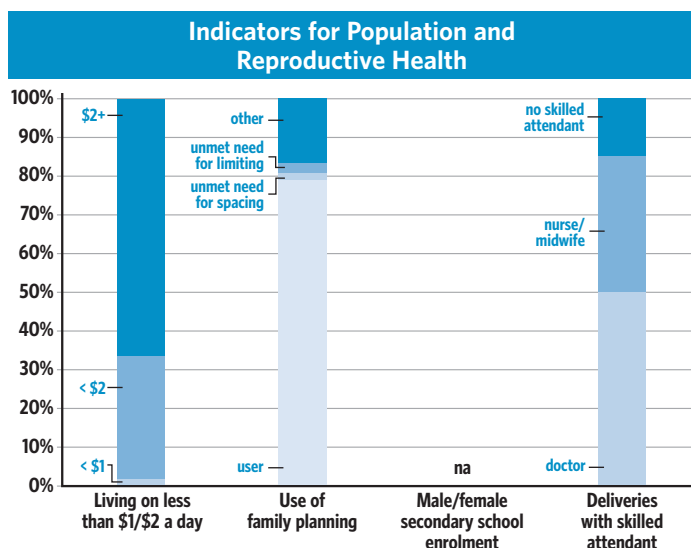
Progress has been made in the health sector. The total fertility rate fell from 3.7 lifetime births per woman in 1990 to 2.9 in 2005. The contraceptive prevalence rate in 2002 was high, at 78.5 per cent for all methods and 56.7 per cent for modern methods. The abortion rate, however, is still among the highest in the world.

Problems remain. The maternal mortality ratio (MMR) for 2000 was estimated to be 130 deaths per 100,000 live births. However, a national study for the same period revealed a MMR of 165 per 100,000 live births with a much higher figure reported in mountainous and remote areas. In response, the Ministry of Health approved the national Safe Motherhood Master Plan for 2003-2010, and, with UNFPA's assistance, endorsed national guidelines and standards for reproductive health services.

In 2003, the government endorsed a new Population Ordinance, which focuses more on informed choice and quality of services. Though couples are encouraged to have 'small families', they are not limited to two children.

In April 2004, the government approved the 'National Strategy for HIV/AIDS Prevention and Control up to 2010 with a vision to 2020'. While HIV/AIDS prevalence is low, at 0.4 per cent of adults, the pandemic is spreading to the general population and is no longer confined to groups with high-risk behaviour. Some 24 per cent of reported HIV cases are among 15-24 year olds.

Though disparities in education exist, especially between rural and urban areas, sexual and reproductive health issues are now being incorporated into secondary school curricula.



## Statistics

POPULATION	1990	Most Recent
Population in Thousands, Male	32,991.3	42,067.6
Population in Thousands, Female	33,215.0	42,170.7
Population Growth Rate, %	na	1.3
Crude Birth Rate per 1,000 Population	30.3	21.5
Crude Death Rate per 1,000 Population	8.2	5.9
Urban Population, %	20.3	26.7
Sex Ratio at Birth, Male Births per Female Births	1.05	1.05
Women 15-49, %	48.2	56.5
Total Fertility Rate per Woman 15-49	3.66	2.90
Contraceptive Prevalence Rate for Women 15-49, Modern Method, %	35.3	56.7
Contraceptive Prevalence Rate for Women 15-49, Any Method, %	53.2	78.5
Maternal Mortality Ratio per 100,000 Live Births (MMR)	● ▲ 160	130
MMR, Lower Bound	● ▲ na	32
MMR, Upper Bound	● ▲ na	240
Neonatal Mortality Rate per 1,000 Live Births	● ▲ na	15.0
Infant Mortality Rate per 1,000 Live Births	● ▲ 48.0	27.7
Under Age 5 Mortality Rate, Total	● ▲ 60	35
Under Age 5 Mortality Rate, Female	● ▲ na	37
Under Age 5 Mortality Rate, Male	● ▲ na	52
Life Expectancy at Birth, Total, Years	● ▲ 64.7	71.1
Life Expectancy at Birth, Female, Years	● ▲ 66.8	73.1
Life Expectancy at Birth, Male, Years	● ▲ 63.0	69.1
Median Age of Total Population	● ▲ 20.2	24.9
Population 60 Years and Over, %	● ▲ 7.3	7.5
Dependency Ratio	● ▲ 78	54

### Public Expenditures on Health and Education

Health		Primary & Secondary Education	
% of GDP	Per capita (\$US)*	% of GDP	Per student (\$US)
1.50	6.63	na	na

\* Commission on Macroeconomics and Health (2001) estimates that \$30-40 per capita per year is the minimum required for essential health interventions in low-income countries. Much of this expenditure requires public funding particularly to provide services for the poor.

### INTERNAL DISPARITIES

#### Total Fertility Rate per Woman 15-49:

Urban/Rural	1.4/2.0
No Education, Primary	2.8
Highest Level of Education	1.4
Provincial Low/High	1.5/2.9 Southeast/Central Highlands
Poorest/Richest Quintile	3.1/1.6

#### Infant Mortality Rate per 1,000 Live Births:

Urban/Rural	12.1/26.9
No Education, Primary	58.6
Highest Level of Education	13.2
Provincial Low/High	11.3/40.9 Southeast/Northern Uplands
Poorest/Richest Quintile, %	39.3/13.8

#### Under Age 5 Mortality Rate:

Poorest/Richest Quintile, %	52.9/15.8
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#### Age-Specific Fertility Rate, 15-19 Years:

Urban/Rural	10.0/28.0
Poorest/Richest Quintile	51.0/11.0

#### Adolescent Women 15-19 Begun Childbearing:

Urban/Rural, %	1.6/3.7
No Education, Primary, %	7.5

SOCIO-ECONOMIC & HEALTH	1990	Most Recent
Gross Domestic Product Per Capita, Purchasing Power Parity, International Dollars	na	2,490
Gross Domestic Product Growth Rate, Annual %	5	7
Income Group per World Bank Classification	na	Low income
Population Below \$1/Day, %	▲ na	<2
Population Living Below National Poverty Line, %	▲ na	50.9
Share of Income or Consumption by Poorest Quintile	na	3.6
Access to Improved Water Supply, %	▲ 50	73
Antenatal Care, At Least One Visit, %	73	68
Deliveries Attended by Skilled Attendants, %	●▲ 90	85
Family Planning Programme Effort Index, 1999 (Total Mean Score)	na	76.0
Maternal and Neonatal Health Programme Index, 2001 (Total Mean Score)	na	70.0
Illiteracy Rate, % of Population 15 and Over, Male	6	5
Illiteracy Rate, % of Population 15 and Over, Female	13	8
Illiteracy Rate, % of Population 15 to 24, Male	6	4
Illiteracy Rate, % of Population 15 to 24, Female	6	4
Ratio of Girls to Boys, Primary Education	▲ na	0.91
Ratio of Girls to Boys, Secondary Education	▲ na	0.89
Primary School Enrolment, Gross % of School Age Population, Male	●▲ na	105
Primary School Enrolment, Gross % of School Age Population, Female	●▲ na	97
Secondary School Enrolment, Gross % of School Age Population, Male	●▲ na	75
Secondary School Enrolment, Gross % of School Age Population, Female	●▲ na	70
Children Underweight Under 5, Male, %	na	31
Children Underweight Under 5, Female, %	na	35
Stunted Children under 5, Severe, %	na	12
Wasted Children under 5, Severe, %	na	na
Undernourished People, %	27.0	19.0
Refugees, Number	16,300	15,360
Internally Displaced Persons, Number	na	na
Asylum Seekers, Number	na	na
Estimated HIV Prevalence, 15-49, Total	na	0.4
Estimated HIV Prevalence, 15-49, Male	na	0.6
Estimated HIV Prevalence, 15-49, Female	na	0.3

ADOLESCENT REPRODUCTIVE HEALTH	1990	Most Recent
Proportion of Population 15-24	20.4	20.7
Age-Specific Fertility Rate per 1,000 Women, 15-20	46.5	19.0
Median Age at First Sexual Intercourse, Female, 25-49	na	na
Mean Age at Marriage, Male	24.4	24.4
Mean Age at Marriage, Female	23.1	23.1
Married by 18, Percent, Female, 25-49	na	13.7
HIV Knowledge, Women 15-24 Who Know That a Person Can Protect Herself from HIV by Consistent Condom Use, %	▲ na	60
HIV Knowledge, Men 15-24 Who Know That a Person Can Protect Himself from HIV by Consistent Condom Use, %	▲ na	na
HIV knowledge, Women 15-24 Who Know That a Healthy-looking Person Can Transmit HIV, %	na	63.0
HIV Prevalence, 15-24, Total	▲ na	0.2
HIV Prevalence, 15-24, Female	▲ na	0.2
HIV Prevalence, 15-24, Male	▲ na	0.3

GENDER EQUALITY	1990	Most Recent
Gender Empowerment Measure, Value	na	na
Gender Empowerment Measure, Rank	na	na
Malnourished Women, %	na	na
Labor Force Participation Rate, 15-64, Male	na	86.0
Labor Force Participation Rate, 15-64, Female	na	79.4
Seats in Parliament Held by Women, %	18.0	27.3
Female Legislators, Senior Officials and Managers, %	na	na
Female Professional and Technical Workers, %	na	na

REPRODUCTIVE HEALTH COMMODITY SECURITY	1990	Most Recent
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, Thousands	na	5,409.9
Projected Increase/Decrease in Women of Reproductive Age 2000-2015, %	na	20.3
Unmet Need for Family Planning, Spacing, %	● na	2.0
Unmet Need for Family Planning, Limiting, %	● na	2.8
Unmet Need for Family Planning, Total, %	● na	4.8
Unmet Need for Family Planning, Thousands	● na	1117.6

Highest Level of Education	0.5
Provincial Low/High, %	1.8/4.8 Central Highlands/Central Coast
<b>Deliveries Attended by Skilled Attendants:</b>	
Urban/Rural, %	99.0/82.2
No Education, Primary, %	41.6
Highest Level of Education, %	96.8
Provincial Low/High, %	55.9/100.0 Northern Uplands/Red River Delta
Poorest/Richest Quintile, %	58.1/99.7
<b>Modern Contraceptive Prevalence Rate for Women 15-49:</b>	
Urban/Rural, %	54.9/57.1
No Education, Primary, %	53.9
Highest Level of Education, %	54.1
Provincial Low/High, %	41.6/59.4 Central Highlands/Red River Delta
Poorest/Richest Quintile, %	57.9/51.6
<b>Modern Contraceptive Prevalence Rate for Men 15-54:</b>	
Poorest/Richest Quintile, %	na/na
<b>Unmet Need for Family Planning, Limiting:</b>	
Poorest/Richest Quintile, %	5.5/3.0
<b>Unmet Need for Family Planning, Spacing:</b>	
Poorest/Richest Quintile, %	6.2/1.9

<b>Women 15-49 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Men 15-54 Seen Medically for Treatment of Genital Discharge, Ulcer, or Sore:</b>	
Poorest/Richest Quintile, %	na/na
<b>Children Underweight Under 5, Severe:</b>	
Urban/Rural, %	na/na
No Education, Primary, %	na
Highest Level of Education, %	na
Provincial Low/High, %	na/na
Poorest/Richest Quintile, %	na/na
<b>Girls 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	90.6/98.1
<b>Boys 6-10 Who Currently Attend School:</b>	
Poorest/Richest Quintile, %	93.0/98.2
<b>Malnourished Women:</b>	
Poorest/Richest Quintile, %	na/na
<b>Antenatal Care, At Least One Visit:</b>	
Poorest/Richest Quintile, %	67.7/99.5