

# WORLD POPULATION DAY SUPPLEMENT

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**T**oday, Kenyans join the international community in celebrating World Population Day amidst a myriad challenges, some old, others relatively new.

On the threshold of the millennium, the world urgently seeks a balance between population, development and the environment. The world is faced with pressing, complex population issues that demand sustainable solutions.

This day was selected by the United Nations to focus public attention on the urgency and importance of population and development issues.

Of major concern in Kenya is the financing of reproductive health services and the exclusion of some sections of the population in drawing up programmes and policies that affect them. Environmental issues are also of great concern.

Kenya is still confronted by a variety of development challenges, the critical ones which have persisted since independence, being poverty and unemployment.

If the country is to successfully reduce unemployment and poverty, the economy will need to grow on average by 5 per cent a year so as to generate job opportunities, and also resources that would support welfare provision.

While this calls for policies that will successfully mobilise private savings, this will not be possible if the rate of growth of the population remains high since this calls for increased expenditure for social welfare provision. Kenya is rated among the top 50 countries with the highest population globally. It is ranked 35th with a population of 28 million.

Government funding stands at 10 per cent and the situation may not improve much in future given the persistent economic difficulties the country has been experiencing.

The country still grapples with the challenges of empowering women, eliminating retrogressive and repugnant socio-cultural practices like female genital mutilation and integrating youth, the elderly and persons with disabilities into the mainstream of national development.

Each year, an estimated 600,000 women die world-wide as a result of pregnancy and childbirth (maternal mortality) and perhaps 15 times as many suffer injury or infection (ma-



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## Family planning outreach extensive in the country

ternal morbidity). Most of these deaths and disabilities happen to women in developing countries, where pregnancy and giving birth are among the leading causes of death for women of child-bearing age, and where the risk of death is 50 to 100 times greater than in developed countries.

Abortion performed under unsafe conditions is a serious threat to reproductive health.

The World Health Organisation estimates that about 70,000 women die each year as a result of unsafe abortion, almost all of them in developing countries.

Up to a third of maternal mortality and morbidity could be avoided if all women had access to a range of modern, safe and effective family planning services which would enable them to avoid unplanned pregnancies. In Kenya, persons with disabilities have been fighting against being sidelined, particularly in marital and reproductive health issues, and in other spheres as well.

Women with disabilities have been hard hit, being deprived fundamental services because society has yet to recognise their place and role in national development.

They are impoverished, denied family planning choices and consigned to single parenthood in a society that frowns upon their kind getting married.

These women end up giving birth to many children as a security measure, even when they know they lack the resources to provide for the children.

Youth, more than any other group, are faced with perhaps the worst scourge of the century — the unrelenting Aids, spread mainly through sex.

Adolescents who lack information and services are particularly at risk. In most parts of the world, the majority of new Human Immunodeficiency Virus infections are in young people between the ages of 15 and 24, sometimes younger.

But, this group, most in need of enlightenment on how to avoid contracting the virus that leads to full-blown Aids has the least access to information on the pandemic — mostly be-

cause society has yet to agree on the need and manner of imparting this information.

Developing and providing appropriate information and services to young people is not easy, given the need to balance rights to confidentiality with the concerns of families and communities.

Whether to provide family life education to the youth — in learning institutions — has been a contentious, unresolved issue. Condoms, one of the choices available against contracting HIV, are taboo subject among some churches.

In both cases, youth have not been asked to decide for themselves.

While the support of community leaders and parents is critical to the success of pro-

grammes for youth, young people should be involved in designing the programmes that will serve them, since they may understand best the needs of their peers.

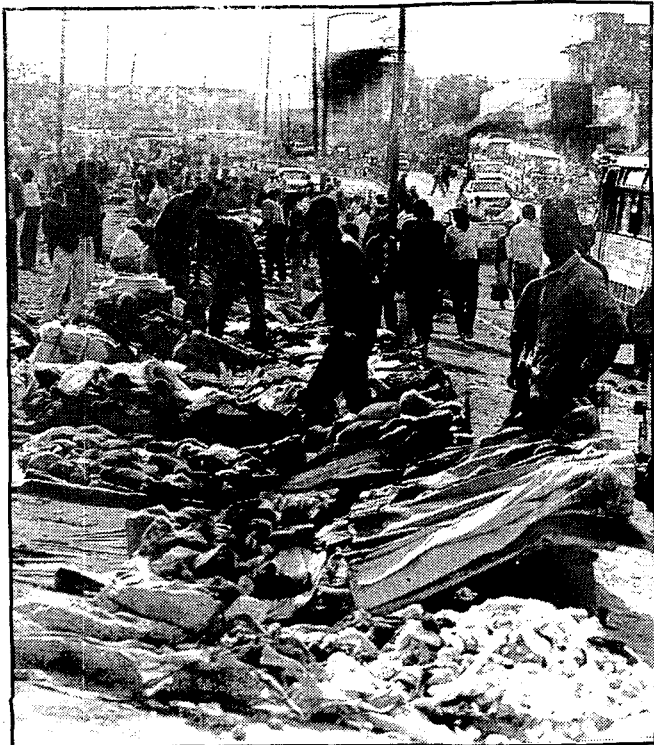
However, Kenya is one of the four African countries — alongside Zimbabwe, Botswana and South Africa — that have made significant progress in population control.

Over the past 20 years Kenya has experienced a virtual revolution in reproductive behaviour. Average family size has dropped from eight children in the 1970s to five in the mid-1990s. There has been an increase in contraceptive use from seven per cent among married women to the present 33 per cent.

The country has, in addition, lowered child mortalities to 61 per 1,000 live births against the region's 105 average.

Kenya holds the distinction of being the first sub-Saharan country to come up — in 1967 — with a policy that incorporated the relation between population growth, economic development and improved health.

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Hawkers selling mituba in one of the open-air markets in Nairobi. Unemployment is one of the biggest problem facing the country.



People going to work in the city.