

## Population

For the first time in history, by the end of 2007, more than 3.3 billion people—half of the world's population—were living in urban areas. That number was expected to swell to almost 5 billion by 2030, with most of the growth occurring in developing countries. The urban population of Africa and Asia was expected to double between 2000 and 2030, whereas that of the developed countries was projected to grow relatively little, from 870 million to 1.01 billion.

UN population activities continued to be guided, in 2007, by the Programme of Action adopted at the 1994 International Conference on Population and Development (ICPD) and the key actions for its implementation adopted at the twenty-first special session of the General Assembly in 1999. The Commission on Population and Development, the body responsible for monitoring, reviewing and assessing the implementation of the Programme of Action, considered as its special theme “Changing age structures of population and their implications for development”. The Population Division continued to analyse and report on world demographic trends and policies and to make its findings available in publications and on the Internet.

The United Nations Population Fund (UNFPA) assisted countries in implementing the ICPD agenda and the Millennium Development Goals (MDGs) through their use of population data to formulate sound policies and programmes. In 2007, UNFPA provided assistance to 159 countries and territories, with special emphasis on increasing the availability and quality of reproductive health services, fighting gender discrimination, formulating effective population policies and intensifying HIV prevention.

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### Follow-up to 1994 Conference on Population and Development

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#### Implementation of Programme of Action

**Commission on Population and Development consideration.** In follow-up to the recommendations of the 1994 International Conference on Population and Development (ICPD) [YUN 1994, p. 955], the Commission on Population and Development, at its fortieth

session (New York, 10 May 2006 and 9-13 April 2007) [E/2007/25], considered as its special theme “Changing age structures of population and their implications for development”, and discussed its demographic, social and economic aspects (see below). It also discussed follow-up actions to the ICPD recommendations and adopted a resolution [E/2007/25 (res. 2007/1)] on the special theme.

The Commission had before it a report of the Secretary-General on world population monitoring, focusing on the changing age structures of population and their implications for development [E/CN.9/2007/3]; his report on monitoring of population programmes, with the same focus [E/CN.9/2007/4]; his report on world demographic trends [E/CN.9/2007/6]; and a statement by Population Action International, a non-governmental organization in consultative status with the Economic and Social Council [E/CN.9/2007/NGO/1].

#### *Changing age structures of population and their implications for development*

The Secretary-General's report on world population monitoring, focusing on the changing age structures of population and their implications for development [E/CN.9/2007/3], reviewed demographic trends and prospects related to the changing age distributions of populations; discussed their likely economic implications; and considered the social implications and policy aspects of those trends. The report found that in 2007, 28 per cent of the 6.6 billion people on Earth were children, 18 per cent were young people, 44 per cent were persons in the prime working ages and 10 per cent were older people. Seventy per cent of the world population resided in developing countries. In the coming decades, the populations of all major development groups were expected to age. Europe had the oldest population and was projected to maintain that rank in the foreseeable future, with North America in second position, having a slightly younger population. Asia, Latin America and the Caribbean had a very similar age distribution and were expected to maintain that similarity until 2050. Africa, with the youngest age distribution among major areas, was expected to attain by 2050 an age distribution similar to that of Latin America and the Caribbean in 2007, with its share of older persons rising from about 10 per cent to about 24 per cent in 2050.

The report noted that although the proportions of children and youth were expected to decline in most areas, the numbers of children and young people were projected to rise globally until at least 2025, mainly because of their increase in the least developed countries. In particular, Africa's share of the world's children was expected to increase from 21 per cent in 2007 to 30 per cent in 2050, whereas that of Asia and developing Oceania was projected to drop from 58 per cent to 51 per cent. The share of Latin America and the Caribbean was expected to decline slightly, from 9 per cent in 2007 to 8 per cent in 2050, while that of developed countries was projected to remain stable at 11 per cent. In contrast with the relatively stable number of children and youth expected in the future, the population aged 25 to 59 was projected to rise from 2.9 billion in 2007 to 4.1 billion in 2050, virtually all of that increase occurring in the less developed regions. The most significant increases in that age group were expected in Asia (577 million) and in Africa (528 million), while the share of the developed countries was projected to drop from 21 per cent in 2007 to 13 per cent in 2050.

The world population aged 60 and over was expected to nearly triple from 2007 to 2050, going from 0.7 billion to around 2 billion, and the proportion of that age group was expected to double in that time frame. Most of the increase was projected to occur in Asia, where the older population would triple, from 0.4 billion in 2007 to 1.2 billion in 2050. Smaller relative increases were expected in North America and Oceania, where the older population was projected to double, and in Europe, where it was expected to increase by slightly under 50 per cent. In Europe, only the older population was expected to increase, since the numbers of persons in all younger age groups were expected to be considerably smaller in 2050 than in 2007. The report underlined the predominance in the older population of women, who accounted for 55 per cent of the population aged 60 and over in the world and for 64 per cent of that aged 80 or over. Furthermore, the median age of the world population increased, between 1975 and 2005, from 22 to 28 years, and it was projected to reach 38 years in 2050. The report noted that the overall dependency ratio—the number of dependents per 100 persons aged 15–59—was 59 in the more developed countries and 64 in the less developed regions as a whole. Among the latter, its value was 59 in Asia, 63 in Latin America and the Caribbean, and 88 in Africa. In the coming decades, all major areas except Africa would experience an increase in the overall dependency ratio.

The report stated that the simulated trends in the economic support ratio, calculated by dividing the number of effective producers by that of effective consumers, were consistent with trends in the overall dependency ratio. While Europe and North America

were already well advanced in the process of population ageing and no longer likely to benefit much from a beneficial age structure, Africa was expected to be the only region that could look forward to a long period in which the age structure of its population might prove beneficial, provided its fertility continued to decline. The report noted that an increase in the proportion of older persons could generate an increase in wealth per capita in the population, likely giving rise to a long-lasting demographic dividend. Evidence suggested, however, that the elderly, especially those aged 70 or over, were more likely to be poor than persons in any other age group. To combat poverty among the older populations, at least 150 countries had established unfunded public pension programmes that provided transfers from the working-age population to the elderly beneficiaries, and some countries had funded pension programmes for workers in the private sector, also known as defined-contribution plans, which usually converted the individual's accumulated capital account into a pension-income stream at retirement. Some countries had instituted universal social pensions, providing a minimum income to all older persons without any contributions requirement. The elderly also frequently benefited from private intra-familial transfers, an important source of support in many developing countries. However, the high labour-force participation rates among older persons still prevailing in developing countries suggested that neither public nor private transfers were large enough to provide a sufficient level of support in old age. The report emphasized the benefits of investing in education of the young as a means to improve labour productivity and the health of the individual, and to reduce poverty, arguing that the generation of sufficient decent jobs would contribute to increase the support ratios of the older population.

Although life expectancy had increased markedly in developing countries, in the least developed countries it was a low 51 years, mainly because many of them were still in the early stages of epidemiological transition. In those countries, 42 per cent of deaths were of children under the age of five. The toll of infectious diseases that had been controlled in other parts of the world, such as malaria and measles, remained high. With life expectancy increasing in all regions, a related concern was the growing costs of health care and long-term care, as costs rose sharply after age 60. Whereas developed countries were worried because their working-age populations were small and growing slowly, if at all, developing countries were concerned about their large and rapidly growing labour forces and the challenge of providing decent employment for all.

The Secretary-General's report on world demographic trends [E/CN.9/2007/6] described patterns for the world as a whole, as well as for major areas, de-

velopment groups and selected countries, exploring issues such as population size and growth, fertility and contraception, mortality, international migration, population ageing and urbanization. World population, which reached 6.6 billion in 2007, was growing at about 1.14 per cent annually, and was expected to reach 7 billion in 2013 and 9 billion by 2050, where the population size could stabilize, provided fertility continued to decline in the less developed countries. The population of most countries, particularly the least developed, was projected to increase markedly in the coming decades, while populations in a number of developed countries were expected to decrease, largely because their fertility levels were expected to remain below replacement levels. Because of prevailing low fertility, international migration accounted for three quarters of the population growth in the more developed regions in 2000-2005. The reduction of fertility combined with increases in life expectancy had led to population ageing, and the world population aged 60 years or over would rise from 11 per cent in 2007 to 22 per cent by 2050. The report considered important elements that had potential for policy intervention, such as population ageing, the rapidly increasing number of urban dwellers, and the decline of rural population, and discussed barriers to, and opportunities for, policy intervention.

**Commission action.** The Commission, in a resolution [E/2007/25 (res. 2007/1)] brought to the attention of the Economic and Social Council, took note of the Secretary-General's reports described above, as well as his report on the flow of financial resources for assisting in the implementation of the ICPD Programme of Action (see below). It encouraged Governments, the UN system and other international organizations to assist developing countries in assessing the impact of changing population age structures and in building capacities to respond to the challenges and opportunities resulting from those trends. It recognized that investing in young people was an urgent development priority that would contribute to the achievement of the internationally agreed development goals, including the Millennium Development Goals (MDGs). It stressed the importance of incorporating a gender perspective in policy and planning processes and the need to eliminate discrimination on the basis of gender and age. The Commission urged Governments to provide young people with opportunities for education, acquiring skills and participating fully in society, in order to improve their productive employment and help them to lead self-sufficient lives. The Commission expressed concern that developing countries had a large number of persons reaching old age with minimal literacy and numeracy, which limited their capacity to earn a livelihood. It encouraged Governments to enhance the self-reliance of older persons, through participation in working life, if desired; provide con-

tinuing education; and ensure access to health and social services. The Commission called on Governments to ensure that all persons had adequate economic and social protection during old age, and to develop strategies to meet the long-term care needs for older persons. Governments were urged to promote healthy living at all ages, including sexual and reproductive health, in particular maternal, child and adolescent health, and to address the rising rates of HIV infection. The Commission called on Governments to promote intergenerational equity by taking into account the implications of the changing age structures of the population in medium- and long-term development planning, and requested the Secretary-General to continue his work on the changing age structures of populations, including levels, trends, determinants, consequences and policies, giving attention to their implications for development.

By **decision 2007/237** of 24 July, the Economic and Social Council took note of the report [E/2007/25] of the Commission on Population and Development on its fortieth session and approved the provisional agenda and documentation for the forty-first session.

### *Financial resources*

In accordance with General Assembly resolutions 49/148 [YUN 1994, p. 963] and 50/124 [YUN 1995, p. 1094], the Secretary-General submitted to the Commission a January report [E/CN.9/2007/5] on the flow of financial resources for assisting in the implementation of the ICPD Programme of Action. The report examined the expected level of donor and domestic expenditures for population activities in developing countries for 2005, as well as estimates for 2006 and projections for 2007. Donor assistance had been increasing steadily over the past few years, reaching \$5.6 billion in 2004. If that trend continued, donor assistance was projected at \$6.9 billion in 2005, at \$7.8 billion in 2006 and \$8.6 billion in 2007. A rough estimate of resources mobilized by developing countries, as a group, yielded a figure of \$17.3 billion for 2005. Even if estimates and projections were valid and the ICPD financial targets were surpassed, the resources mobilized would not be sufficient to meet current needs, which had grown dramatically since the targets were agreed upon in 1994. At that time, the population and health situation in the world was much different from 2007, no one having foreseen the escalation of the AIDS pandemic.

The Joint United Nations Programme on HIV/AIDS (UNAIDS) estimated that global resource requirements amounted to \$15 billion in 2006, of which \$8.4 billion was required for prevention and \$3 billion for treatment and care. The financial targets of \$1.4 billion in 2005 and \$1.5 billion in 2010, for prevention activities only, that were set by the Conference were

far below those estimated requirements and should be revised upwards.

The challenge before the international community was to continue to mobilize sufficient resources to meet needs in all areas of the Conference-costed population package: family planning services; reproductive health services; sexually transmitted diseases, including HIV/AIDS; and basic research, data and population and development policy analysis.

## International migration and development

The Population Division [E/CN.9/2008/6] of the Department of Economic and Social Affairs continued preparation of the *World Migration Report 2006*, which provided migration profiles for regions and countries of the world for 1995 and 2005. The profiles included estimates of the international migrant stock, the number of refugees, the net migration rate and the amount of remittances, as well as the policies of Governments on international migration. The Division was developing a database on the number of international migrants enumerated by censuses or population registers.

**Global Forum meeting.** On 10 October, Belgium transmitted to the Second (Economic and Financial) Committee the summary report of the First Meeting of the Global Forum on Migration and Development (Brussels, 9-11 July) [A/C.2/62/2]. As proposed by the Secretary-General in 2006 [YUN 2006, p. 1261], the Global Forum was established as a venue for discussing issues related to international migration and development in a systematic and comprehensive way. The meeting considered how to deepen understanding through enhanced dialogue and partnerships of the opportunities and challenges of migration for development and to identify practical and action-oriented ways to address and operationalize those at national, regional and global levels. One day of the meeting was held for civil society, followed by two days of meetings for governmental representatives. Discussions focused on human capital development and labour mobility, remittances and other diaspora resources, enhancing policy and institutional coherence and promoting partnerships.

**Sixth Meeting on International Migration and Development.** The Population Division, in response to General Assembly resolution 58/208 [YUN 2003, p. 1087], held on 26-27 November the Sixth Coordination Meeting on International Migration and Development in New York. The objectives of the meeting were to discuss outcomes and follow-up of the first meeting of the Global Forum on Migration and Development; to consider preparations for the second meeting of the Global Forum, to be organized and hosted by the Philippines in October 2008; to exchange information on current and planned activities in the area of international migration; and to exchange best practices

and future plans on the use of surveys on international migration.

Other conferences, meetings and forums on the subject included: the Third Seminar on Immigration and Co-development (Palma de Mallorca, Spain, 8-9 March); the Regional Symposium on Foreign Workers in the Gulf Cooperation Council: Towards a Common Strategy (Doha, Qatar, 17-19 April); the Migration and Development Conference (Washington, D.C., 23-24 May); the Follow-up Meeting of the Euro-African Conference on Migration and Development (Madrid, 21 June); and the Expert Group Meeting on the Use of Censuses and Surveys to Measure International Migration (New York, 24-28 September).

In December, the General Assembly, in **resolution 62/156**, took action on the protection of migrants (see p. 719).

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## UN Population Fund

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### 2007 activities

**Reports of Executive Director.** In response to General Assembly resolution 59/250 [YUN 2004, p. 868], the Executive Director of the United Nations Population Fund (UNFPA) submitted a July report [DP/FPA/2007/17] which reviewed the new UNFPA strategic plan for 2008-2011, setting the strategic direction and providing the overall framework for UNFPA to help programme countries to achieve their nationally owned development objectives over the next four years in the three interrelated focus areas of population and development, reproductive health and rights, and gender equality. The strategic plan consisted of a development results framework, outlining goals and outcomes for UNFPA in the three focus areas; a management results framework; and an integrated financial resources framework.

In view of the finding that 90 per cent of the projected population growth would occur in the poorest developing countries and that the first generation of poverty-reduction strategies had not been adequately factored into the previous and current multi-year funding frameworks (MYFFS), the new strategic plan was designed to ensure that UNFPA key interventions pertaining to population dynamics, gender equality, and HIV prevention and treatment were well positioned in national and local plans and budgets. Emerging population issues, such as international migration, the changing age structure of the population and urbanization, would receive particular attention. International migration was increasingly becoming an area of concern in view of the magnitude, growth and diversity of global flows, as was the ageing of the

world population. Despite advances in reproductive health policies, the lack of translation into resources and improved national programmes, particularly health systems, was a major constraint to meeting sexual and reproductive health goals, especially those pertaining to lower maternal mortality and morbidity rates, which still accounted for nearly one sixth of the worldwide burden of illness and premature death. The new strategic plan would have UNFPA support access to sexual and reproductive health services, promote maternal health as part of reproductive health and the right to health, and support the scaling up of HIV-prevention programmes and the development of reproductive health and social services for young people, including for poor and vulnerable groups. The significant gaps between policy and implementation, affecting mostly the female population living in poverty or belonging to marginalized groups, would prompt UNFPA to intensify its contributions to national capacity development for gender equality programming and to implementation of commitments to the human rights of women and girls, including their reproductive rights.

For the 2008-2011 period, the report projected that UNFPA income would total \$2,595 million, up from \$2,190 million for 2004-2007. Of that amount, \$1,020 million would be devoted to country programmes during 2008-2011, representing an increase of 28 per cent over the 2004-2007 MYFF.

In July [DP/FPA/2007/19], UNFPA issued a report on its global and regional programme for 2008-2011, based on its strategic plan for that period. The proposed programme, at a total cost of \$200 million for the four years, adopted a rights-based and culturally sensitive approach to development, with the aim of assisting countries to implement the ICPD Programme of Action and to respond to their national development priorities. There were six components of the programme—a global component and five regional programmes—which were complementary and structured around the three substantive focus areas of the strategic plan.

The UNFPA Executive Director reported jointly with the Administrator of the United Nations Development Programme (UNDP) [DP/FPA/2008/5 (part II)] on the recommendations of the Joint Inspection Unit (JIU), providing a synopsis of UNDP/UNFPA management responses to key JIU recommendations relevant to them. Of the 10 reports issued by JIU in 2007, four were relevant to both UNDP and UNFPA. Those reports concerned: an analysis of the trends in voluntary funding and its impact on programme delivery and resource mobilization strategies; an assessment of staff medical insurance coverage; and the age structure of staff in the UN system organizations and UN liaison offices. Of the 29 recommendations issued by JIU in 2005-2006

that were relevant to UNDP and/or UNFPA, all either had been implemented or were being pursued.

On 26 January [E/2007/35 (dec. 2007/11)], the UNDP/UNFPA Executive Board took note of the draft outline of the UNFPA draft strategic plan for 2008-2011 and requested UNFPA to reflect on the lessons learned from the 2004-2007 MYFF. On the same date [dec. 2007/12], the Board took note of the joint report of the UNDP Administrator and the UNFPA Executive Director to the Economic and Social Council [E/2007/5]. On 15 June [dec. 2007/16], the Board noted the consultative process conducted by UNFPA in developing the draft strategic plan, 2008-2011, among other reports, and noted the clear structure of that plan. UNFPA was requested to take into account the comments of Board members in finalizing the plan. The Board, on the same date [dec. 2007/40], endorsed the strategic plan and approved the integrated financial resources framework for 2008-2011 contained in that report. The Executive Director was requested to present in 2009 a midterm review of the 2008-2011 strategic plan. Also, on 14 September [dec. 2007/41], the Board endorsed the proposed global and regional programme for 2008-2011, authorized the Executive Director to commit \$200 million over the four-year period for its implementation, and requested her to report in 2009 and 2011 on its implementation.

By **decision 2007/221** of 12 July, the Economic and Social Council took note of the annual report of the UNDP/UNFPA Executive Board [DP/2007/35] and of the joint UNDP/UNFPA report [E/2007/5].

**Report of Secretary-General.** The Secretary-General submitted to the Commission on Population and Development a report on monitoring population programmes, focusing on the changing age structures of population and their implications for development (see also p. 1091) [E/CN.9/2007/4]. The report, prepared by UNFPA, covered the demographic situation, its implications for development, and UNFPA activities designed to address the challenges of population ageing. The Fund's aim was to influence public policy in order to respond to the challenges posed by the social, health and economic consequences of population ageing and to meet the needs of older persons, with particular emphasis on the poor, especially women.

UNFPA offered assistance in policy formulation, as, for example, in Bangladesh where it advocated with the Government for a policy on the elderly, with emphasis on their need for reproductive health services. In Benin, the Fund was involved in formulating a national plan on active ageing. In China, UNFPA provided support for an appraisal of the implementation of a law on protection of the elderly's rights and interests. In the Lao People's Democratic Republic, UNFPA sought to ensure health-care services for older persons,

provide job opportunities and education, and protect older persons from discrimination and violence.

Other activities concerned data collection and research. In Benin, UNFPA supported the collection of data on older persons, including a database of census information on older persons and a census volume on the elderly. In Bolivia, it supported the analysis of socio-demographic data on the elderly. In Cambodia, it commissioned a survey and report on older persons for policymakers and others.

The Fund promoted capacity-building by supporting training institutes and providing technical assistance to Governments. In China, it worked with a governmental committee to implement activities in six pilot sites on formulating strategic plans on ageing, with special emphasis on active and healthy ageing. In Ethiopia, UNFPA sponsored the participation of policymakers in training programmes and workshops organized by the International Institute on Ageing. In India, it supported the training of Government officials at the Institute and at the international workshops on preparing for ageing societies, held at Columbia University in New York. In a number of Latin American countries, UNFPA supported the participation of national professionals in international conventions and courses in gerontology and geriatrics. Advocacy, another area of UNFPA work, was aimed at ensuring that young people as well as older persons were included in the development process. In Nicaragua, UNFPA supported the National Council of the Elderly to plan and implement advocacy work. In the Russian Federation, the Fund supported the training of a regional network of journalists on population issues, including low fertility and ageing.

### *Reproductive health and safe motherhood*

In 2007, UNFPA provided \$146.6 million in assistance for reproductive health and supported activities to prevent maternal death in some 90 countries. The Fund joined in launching the International Health Partnership, a renewed global campaign to meet the health-related targets of the MDGs, and established a new trust fund for maternal health, encouraging developed countries and private sponsors to contribute nearly \$500 million to reduce the number of women dying during pregnancy and childbirth in 75 countries. UNFPA, in partnership with multilateral organizations, helped convene Women Deliver (London, October), a global conference aimed at increasing the political will and financial investments to save lives and improve the health of women, mothers and infants around the world.

In order to expand family planning programmes, 140 of UNFPA's country offices supported activities to improve access to and quality of family planning

services. UNFPA increased national capacity for developing and updating family planning protocols and integrating them into health systems. It collaborated with the World Health Organization (WHO), the United States Agency for International Development and other partners in publishing *Family Planning: A Global Handbook for Providers*, which offered guidance on how to provide contraceptives. In Zambia, UNFPA contributed to the revision of family planning guidelines and protocols, while in Georgia, the Fund supported the development and updating of guidelines for reproductive health services according to international standards.

Among activities to meet the demand for reproductive health commodities at affordable prices, including contraceptives and medical supplies, UNFPA's Global Programme to Enhance Reproductive Health Commodity Security received additional funding pledges in 2007 from the United Kingdom, Ireland, the Netherlands and Spain. The Fund also developed the reproductive health commodity security dashboard, a new global tool that helped stakeholders in monitoring country progress in reproductive health commodity security. Of 135 countries tracked over several years, 74 had national budget lines for reproductive health commodities, 79 had national coordination committees on reproductive health commodity security and 121 included contraceptives on their essential drug lists.

A UNFPA-led Campaign to End Fistula was carried out in 44 countries. Thirty-six countries assessed the extent of the problem and their ability to address it, 15 others integrated fistula into national health policies and plans, more than 3,300 women received fistula treatment with support from the Fund, and more than 500 professionals received training to provide fistula services. In 2007, the campaign raised more than \$10.5 million, bringing total contributions to more than \$28 million. In April, UNFPA opened new fistula treatment centres in Afghanistan and Pakistan.

The Fund continued to give priority to youth-related issues, especially those pertaining to adolescent girls. UNFPA mobilized a new alliance of UN organizations to champion increased investment in adolescent girls, particularly those at risk of child marriage. The Fund also launched its *Framework for Action on Adolescents and Youth*, which emphasized action in four key areas: population, poverty and policy; sexual and reproductive health services; life skills-based sexuality education; and youth participation. UNFPA continued to support country-level Youth Advisory Panels, mechanisms established in nearly 30 countries for open dialogue with youth. In Africa, the Fund supported youth empowerment initiatives through the African Youth and Adolescent Network on Population and Development, which worked with

40 national affiliates to offer youth opportunities to participate in advocacy, policy and programme implementation on national health and development; in Zimbabwe, it contributed to implementing a comprehensive adolescent sexual and reproductive health initiative in 16 districts, including training nurses and peer educators on providing youth-friendly services, and it worked with partners such as the United Nations Children's Fund (UNICEF), WHO, the World Bank and others to form a countrywide task force coordinating such services.

As one of the 10 co-sponsors of UNAIDS, UNFPA continued to carry out HIV prevention activities. It supported national efforts to provide universal access to HIV/AIDS prevention, treatment, care and support services by 2010. In Malawi, a Fund meeting brought together more than 250 participants from sub-Saharan Africa, Latin America and the Caribbean to share knowledge and experience in sexual and reproductive health. In Brazil, UNFPA, in cooperation with the Government and other partners, launched a campaign to curb the feminization of HIV infections. In partnership with China, WHO, UNAIDS and others, UNFPA hosted an International Consultation on HIV and Sex Work (Beijing, April), aimed at stimulating dialogue and action on the issue.

### *Population, development and poverty*

In 2007, UNFPA continued to assist countries in integrating population issues in national and international plans, especially those addressing poverty. Expenditures for its activities in this area reached \$52.2 million. A key area of focus was the 2010 round of censuses, the results of which would be critical to assessing progress made in meeting the MDGs. In 2007, UNFPA secured the resources to support censuses in 63 countries and provided direct financial support for 47 others. In 78 countries, UNFPA provided technical support to strengthen national capacity in cartography, data collection and processing.

During the year, UNFPA issued *World Population Prospect: The 2006 Revision*, which projected that, if birth rates stayed at current levels, the world population would increase by about 2.5 billion people, to 9.2 billion, by 2050, mostly in developing countries. It highlighted the findings as a wake-up call to the urgency of giving individuals and couples the means to exercise their human right to freely determine the size of their families. The 2007 edition of *The State of the World Population*, entitled *Unleashing the Potential of Urban Growth*, revealed that the population of African and Asian cities would grow by 1.7 billion people over the next 30 years—more than the population of China and the United States combined—and called attention to the related challenges, such as

poverty, gender-based violence and the lack of reproductive health care, which had emerged as a result of rapid growth of urban areas, especially in developing countries. In July, UNFPA, in collaboration with the International Organization for Migration and several other partners, supported a round table on regional migration and development at the first Global Forum on Migration and Development (Brussels, Belgium, July).

In the area of population ageing, UNFPA organized several meetings focused on ageing and the MDGs and on progress accomplished in meeting the goals of the 2002 Madrid International Plan of Action on Ageing [YUN 2002, p. 1194] over the previous five years. It launched, with WHO, *Women, Ageing and Health: A Framework for Action*, a report summarizing the evidence about those issues.

The Fund, calling attention to the impact of population growth on the environment, assisted in developing a new approach in Colombia on the linkages between population and environmental, social and economic issues in urban and regional planning. It held training workshops on population and water management for senior water and sanitation officials in nine cities in the Asia and Pacific region.

### *Gender equality and empowerment of women*

In 2007, UNFPA continued to assist countries in addressing gender discrimination and inequities that prevented women from fully contributing to their families, communities and societies, and it provided \$20.8 million for activities in this area. Together with the General Assembly and other UN organizations, the Fund was instrumental in organizing the Civil Society Hearing of the High-level Dialogue on Interreligious and Intercultural Understanding for Peace (New York, October). UNFPA organized four training sessions on culturally sensitive programming for UN country teams in Bangladesh, Iran, Iraq and Jordan, linking culture, gender and human rights to development programming. It organized an Africa-wide regional consultation to discuss ways to enhance partnerships between faith-based communities and the United Nations, particularly in the areas of HIV/AIDS and violence against women. In Bolivia, Guatemala and Panama, UNFPA provided technical assistance to indigenous communities and networks for strengthening access to sexual and reproductive health services.

UNFPA collaborated with UNICEF to establish a joint trust fund on female mutilation/cutting, which aimed to reduce the practice by 40 per cent by 2012. The Fund published *A Holistic Approach to the Abandonment of Female Genital Mutilation/Cutting*, which described UNFPA's tactics to eliminate the practice,

including legal and policy reforms, national capacity-building and working at the community level. The Fund also published *Programming to Address Violence against Women: Ten Case Studies*, which highlighted how carefully targeted and planned interventions could reduce gender-based violence, using examples from 10 countries. It co-hosted a consultation which discussed how men and boys could be more involved in the areas of sexual and reproductive health, maternal and child health, fatherhood, HIV and AIDS prevention and reducing gender-based violence, and was instrumental in organizing a symposium on sex ratio imbalance at the Fourth Asia and the Pacific Conference on Reproductive and Sexual Health and Rights (Hyderabad, India, October). Studies commissioned by UNFPA and presented at the Conference revealed the social consequences that prenatal sex selection was likely to have in several Asian countries in coming years. UNFPA also played a leading role at the Tenth Regional Conference on Women of Latin America and the Caribbean (Quito, Ecuador, August), which integrated ICPD issues into the regional strategy to advance women's human rights.

In 2007, UNFPA continued to work closely with Governments, parliamentarians, civil society organizations, religious leaders and other decision-makers to enforce and expand the rights of women and adolescent girls worldwide. The Fund assisted the Comoros, Côte d'Ivoire, Mali and Rwanda in including aspects of reproductive health rights in their laws and policies, and supported in Ghana and Zimbabwe the passage of acts addressing domestic violence. The Fund helped the Democratic Republic of the Congo to design mechanisms to protect reproductive rights and respond to gender-based violence, and played an important role in Madagascar in revising discriminatory laws against women, including those relating to marriage. In Venezuela, it supported research on gender-based violence and how well sexual and reproductive rights were addressed in national-level primary health-care facilities. UNFPA organized a meeting with members of the UN Permanent Forum on Indigenous Issues on how to improve UNFPA's work with indigenous people.

### Humanitarian crises

In 2007, UNFPA, in partnerships with various UN specialized agencies and non-governmental organizations (NGOs), responded to humanitarian crises in 54 countries. The Fund ensured that emergency strategies took gender and age issues into account, and issued guidelines to ensure that mental health and psychosocial support reached people in emergencies. The year also marked the launch of a three-year strategy to build up the capacity of UNFPA's country offices and other parts of the humanitarian system to integrate ICPD principles into all aspects of crisis

preparedness, response and recovery. In October, the Fund organized in Nairobi the first in a series of regional workshops which addressed all aspects of emergency preparedness and response—from mobilizing resources to advocacy and programming. As part of its work in conflict areas, UNFPA, in 2006 and 2007, distributed in Darfur, Sudan, over 5,000 reproductive emergency health kits to help ensure clean and safe deliveries and to provide care for rape victims. With the increasing number and intensity of climate-related disasters, UNFPA played a role in responding quickly with life-saving emergency health supplies and equipment, ensuring adequate nutrition for pregnant women and nursing mothers affected by severe drought in Moldova, preventing maternal death and disabilities after the destruction caused by a powerful cyclone in Bangladesh, and offering emergency assistance to those devastated by tropical storm Noel in the Caribbean.

### Country and intercountry programmes

UNFPA project expenditures for country, regional, interregional and headquarters activities in 2007 totalled \$273.6 million, compared to \$245.7 million in 2006, according to the Executive Director's statistical and financial review [DP/FPA/2008/5 (Part I, Add.1)]. The 2007 figure included \$218 million for country programmes and \$55.6 million for intercountry (regional, interregional and headquarters) activities. In accordance with the Executive Board's procedure for allocating resources [YUN 1996, p. 989], total expenditures in 2007 for Group A countries amounted to \$151.9 million, compared to \$134.3 million in 2006.

**Africa.** Provisional data for UNFPA expenditures for programmes in sub-Saharan Africa gave a total of \$95.3 million in 2007, compared to \$83.9 million in 2006. Most of that amount (44.3 per cent) went to reproductive health and family planning, followed by population and development (24.5 per cent), programme coordination and assistance (22.4 per cent) and gender equality and women's empowerment (8.8 per cent).

On 26 January [E/2007/35 (dec. 2007/12)], the UNDP/UNFPA Executive Board approved UNFPA country programmes for the Central African Republic, Eritrea, Ethiopia, Gabon, the Gambia, Guinea, Mozambique, Sao Tome and Principe, Senegal, Seychelles, South Africa, the United Republic of Tanzania, Zambia and Zimbabwe. On 22 June [dec. 2007/30], it took note of the draft country programme documents for Cameroon, Comoros, Guinea-Bissau, Malawi, Mali and Sierra Leone, as well as of the one-year extensions of country programmes for Burundi, Côte d'Ivoire, the Niger and Nigeria. It also approved a two-year extension of the country programme for Botswana and the

second one-year extension for the Sudan. On 14 September [dec. 2007/44], it took note of the draft country programme documents for the Democratic Republic of the Congo, Equatorial Guinea, Lesotho, Liberia, Madagascar, Rwanda and Togo.

**Arab States, Europe and Central Asia.** Provisional expenditures for UNFPA programmes in the Arab States, Europe and Central Asia totalled \$34.3 million, compared to \$32.5 million in 2006. Most of that amount (52.5 per cent) was spent on reproductive health, followed by programme coordination and assistance (22.1 per cent), population and development (20.4 per cent) and gender equality and women's empowerment (5 per cent). On 26 January [dec. 2007/12], the Executive Board approved country programmes for Algeria, Egypt, Moldova, Morocco, the Syrian Arab Republic, Tunisia and Yemen. On 22 June [dec. 2007/30], it took note of the draft country programme documents for Djibouti and Jordan, as well as of the second one-year extension of the country programme for Lebanon; and on 14 September [dec. 2007/44], of the draft country programme document for Somalia.

**Asia and the Pacific.** Provisional expenditures for UNFPA programmes in Asia and the Pacific amounted to \$79.5 million, compared to \$74.7 million in 2006. Most of those expenditures (66 per cent) went to reproductive health, followed by population and development (14.5 per cent), programme coordination and assistance (13.8 per cent), and gender equality and women's empowerment (5.7 per cent). On 26 January [dec. 2007/12], the Executive Board approved country programmes for the Democratic People's Republic of Korea, the Lao People's Democratic Republic, Mongolia, Myanmar and Thailand. On 22 June [dec. 2007/30], it took note of the draft country programme documents for Bhutan, India, Maldives, Papua New Guinea and Sri Lanka, as well as of the third one-year extension of the country programme for Timor-Leste. On 14 September [dec. 2007/44], it took note of the draft country document for Nepal, as well as of the draft multi-country programme document for the Pacific island countries.

**Latin America and the Caribbean.** Provisional expenditures for UNFPA programmes in Latin America and the Caribbean totalled \$25.4 million in 2007, compared to \$22.1 million in 2006. As in other regions, most of the total (39.4 per cent) went to reproductive health, followed by population and development (24.4 per cent), programme coordination and assistance (18.9 per cent) and gender equality and women's empowerment (17.3 per cent). On 26 January [dec. 2007/12], the Executive Board approved country programmes for Brazil, the Dominican Republic, El Salvador, English- and Dutch-speaking Caribbean countries, Honduras, Panama, Paraguay and Uruguay. On 22 June [dec. 2007/30], it took note of the draft country programme documents for Bolivia and

Cuba and approved the second one-year extension for Haiti, and on 14 September [dec. 2007/44], it took note of the draft country documents for Colombia, Costa Rica, Mexico and Nicaragua, as well as of the one-year extension of the country programme for Venezuela.

**Interregional and headquarters programmes.** Provisional expenditures for UNFPA interregional and headquarters programmes totalled \$39.1 million in 2007 compared to \$32.5 million in 2006. Most of the total (61.4 per cent) went to reproductive health, followed by programme coordination and assistance (23.7 per cent), population and development (10.2 per cent) and gender equality and women's empowerment (4.8 per cent).

## Financial and management questions

### *Financing*

UNFPA income from all sources totalled \$752.2 million in 2007, compared to \$605.5 million in 2006 [DP/FPA/2008/5 (Part 1, Add.1)], comprising \$419 million from regular resources, \$286.2 million from other contributions, interest income of \$26.9 million, other income of \$1.9 million and a contribution from a private endowment trust of \$18.3 million. Expenditures totalled \$629 million, up from \$536.6 million in 2006, comprising \$385.4 million from regular resources and \$243.6 million from other resources, resulting in a net excess of \$120.9 million after adjustments were made for prior periods.

The increase in regular resource contribution income by \$58.5 million, or 16.2 per cent, was due to \$31.5 million in increased contributions from 13 major donors and \$27 million as a result of favourable exchange rates. Total income to other resources was \$295.1 million, comprising contributions of \$282.2 million and other income including interest of \$9 million.

On 14 September [E/2007/35 (dec. 2007/44)], the Executive Board took note of the annual financial review, 2006 [DP/FPA/2007/15].

The Board, on 15 June [dec. 2007/14], approved an interim one-month budget allocation for January 2009, in the amount of \$9 million, pending final approval of the UNFPA biennial support budget for 2008-2009. That budget, submitted in November [DP/FPA/2008/1] in the results-based budget format for consideration by the Board in 2008, totalled \$259 million.

### *Recovery of indirect costs*

In June, the UNDP/UNFPA Executive Board considered a UNFPA review of its policy on indirect cost recovery [DP/FPA/2007/9]. That report described the new cost-recovery rates [YUN 2005, p. 1266] which had been

in force for two years, at a rate of 5 per cent on nationally executed cost-sharing expenditures financed by programme countries, and a rate of 7 per cent on all other co-financed expenditures. The variable costs attributed to co-financing resources represented the indirect costs that were eligible for recovery. Actual recovery had been consistent with the required rate over two years. Therefore, UNFPA did not wish to amend the rate or its policy on indirect cost recovery.

The Board, in a decision of 15 June [E/2007/35 (dec. 2007/15)], took note of the report and of the implementation of the new UNFPA recovery policy, and urged the UNFPA Executive Director to intensify consultations with the United Nations Development Group in order to reach a common agreement on what constituted direct costs. The Board requested UNFPA to provide it with an update on the policy on indirect cost recovery in 2009.

### *Audit reports*

The Executive Director submitted to the UNDP/UNFPA Executive Board a report [DP/FPA/2007/1] on follow-up action by UNFPA to recommendations by the UN Board of Auditors for the 2004-2005 biennium [A/61/5/Add.7]. UNFPA reported that it expected to implement most of the 42 recommendations by March 2009. On 26 January [E/2007/35 (dec. 2007/10)], the Executive Board, taking note of the UNFPA report, welcomed its efforts to implement the recommendations, namely action to strengthen internal control through such means as: implementation of the Atlas system for auditing planned expenditures and strategic planning; risk management; ethical and professional conduct; and anti-fraud and anti-corruption measures. The Executive Director was requested to fully implement the recommendations within the prescribed time frame, and UNFPA was asked to simplify the procedures for national execution, which was viewed as a means to build national capacity. The Executive Director was requested to report in 2008 with an update on progress made.

The Executive Director reported in April on the internal audit and oversight activities carried out by UNFPA in 2006 [DP/FPA/2007/14]. Those included: management audits of 17 offices (13 in Africa, two in Latin America and the Caribbean, one in the Arab States, Europe and Central Asia, and one in the Asia and the Pacific region); and contracted audits in six country offices in the Asia and the Pacific region, five in the Arab States, Europe and Central Asia region, and one audit of regional projects at headquarters. Of the 41 reports issued in 2006, the level of internal controls and the compliance with financial, administrative and programme requirements were found to be satisfactory in nine offices, partially satisfactory in 25 offices and deficient in seven. A total of 2,269 recommendations were issued. UNFPA initiated a series of

activities to prevent fraud. In addition, the Executive Director requested that training on fraud prevention and risk management be provided to all managers, and UNFPA undertook several management reviews to improve the Fund's effectiveness and efficiency, especially at the country level. The Division for Oversight Services continued to improve its risk-based audit planning system to ensure that its priorities were consistent with UNFPA goals.

On 22 June [E/2007/35 (dec. 2007/29)], the Executive Board welcomed the greater attention of the internal audit reports to key and recurrent management issues and the clarity and format of the recommendations and risk-based audit planning. It called on UNFPA to further strengthen the national execution modality by addressing the operational risks and weaknesses identified in the audit reports, in particular capacity-building, and to pay particular attention to risks related to business processes and information technology. UNFPA was requested to submit an oversight policy to the Board in 2008 for its consideration and approval.

### *Resource allocation*

In a July report [DP/FPA/2007/18] issued in response to a 2005 request of the Executive Board [YUN 2005, p. 1183], the Executive Director reviewed the system for allocating UNFPA resources to country programmes. In addition to describing the experience and progress achieved in implementing the resource allocation system in terms of expenditures by groups of countries, the report put forward proposed changes to the system. The allocation system, revised last in 2005 [ibid.], was based on the principle that countries that were the furthest away from achieving ICPD goals and the MDGs in the areas of reproductive health and gender equality should receive priority assistance from UNFPA. All least developed countries were automatically included in Group A (the highest priority group of three groups), and special attention was given to low-income countries, sub-Saharan Africa and countries in emergencies, transition and recovery. Under the proposals, the UNFPA strategic plan for 2008-2011 would guide the revised resource allocation system. The system of eight indicators would be retained, with some refinement of the threshold level for each indicator; for example, for the indicator of adult HIV prevalence, the threshold level was 5 per cent or lower. Assistance to the new European Union countries would be phased out, and the definition of groups of countries would be simplified. The number of countries included for assistance would rise to 154 from 129 under the previous system, and some countries would move from one group to another.

In a decision of 14 September [E/2007/35 (dec. 2007/42)], the Executive Board approved the proposed resource allocation system presented in the report and

endorsed the procedure for categorizing countries into groups A, B and C. It also approved the proposal that the country programme documents specify that the amounts were subject to the availability of funds and therefore indicative. In the event of changes in income, the country programmes would be adjusted in accordance with the proposed resource allocation system, either up or down. The Board requested the Executive Director to undertake a further review of the resource allocation system in 2011.

### *Multi-year funding commitments*

In May [DP/FPA/2007/8], the Executive Director submitted to the UNDP/UNFPA Executive Board updated estimates of regular and other resources for 2007 and future years in the multi-year funding framework (MYFF). As of 1 March, 111 official pledges had been received, several of which were multi-year pledges.

Total resources for 2006 reached \$556.5 million, the Fund's highest total ever, comprising \$389.3 million in regular resources and \$167.2 million in co-financing resources. Compared to 2005, regular resources increased by \$23.5 million, or 6.4 per cent, and income for co-financing arrangements by \$9.5 million, or 6 per cent. UNFPA increased its donor base to 180 Governments in 2006, from 172 in 2005. Multi-year pledges increased to 77, compared to 55 in 2005. The substantial increase in the 2006 regular income level was due to larger contributions from 11 major donors and private donations. The Netherlands, Sweden, Norway, the United Kingdom and Japan were the five largest donors, with 18 major donors providing over 91 per cent of total regular resources.

On 15 June [E/2007/35 (dec. 2007/13)], the UNDP/UNFPA Executive Board welcomed the substantial increase in the 2006 regular income level, the increase in the 2006 co-financing income and the contributions made by programme countries, which had enabled UNFPA to reach its highest ever number of donors. It recognized that sustaining and improving the UNFPA funding level required countries to augment their funding efforts during the period of the UNFPA strategic plan, 2008-2011.

### *Accountability and oversight*

In June [E/2007/35 (dec. 2007/21)], the UNDP/UNFPA Executive Board requested the UNFPA Executive Director to report on the UNFPA accountability framework and its monitoring and evaluation mechanisms. In response, the Executive Director issued a July report [DP/FPA/2007/20] outlining the three elements of the Fund's accountability framework—individual frameworks for development results, management results, and integrated financial resources. Goals and outcomes for the Fund in the three focus areas would guide programme

development and monitoring of performance and progress; management results constituted the accountability framework for organizational performance at all levels and for the results-based biennial budget; and the integrated financial resources framework outlined the financial resource requirements for 2008-2011.

The Executive Board, in other June action [E/2007/35 (dec. 2007/29)], requested the Executive Director to submit an oversight policy that also defined the concepts of accountability and transparency as well as disclosure and confidentiality in the management of operational activities. Pursuant to that request, the Executive Director issued a November report [DP/FPA/2008/4] in which she described the oversight roles and responsibilities of management, the Division for Oversight Services, the Audit Advisory Committee, the Ethics Office, the Executive Board, the United Nations Board of Auditors and the Joint Inspection Unit, and outlined UNFPA's oversight policies.

### *Organizational structure and regionalization*

The Executive Director, in a July report [DP/FPA/2007/16 & Corr.1], reviewed the organizational structure of UNFPA and proposed changes. In an earlier report [DP/FPA/2007/2], the Executive Director had made the case for regionalization of UNFPA by moving the geographical divisions from headquarters in New York to their respective regions and by expanding the functions of country technical services teams in order to establish regional or subregional offices. At its annual (June) session, the UNDP/UNFPA Executive Board took an oral decision authorizing UNFPA to prepare its biennial support budget for 2008-2009 based on one of three scenarios put forward by the Fund. That scenario called for relocating the UNFPA geographical divisions to the field, and for merging them with streamlined country technical services teams at the regional offices, to be located at: Bratislava, Slovakia (for Eastern Europe and Central Asia); Bangkok, Thailand (for Asia and the Pacific); Cairo, Egypt (for the Arab States); Johannesburg, South Africa (for Africa); and Panama City, Panama (for Latin America and the Caribbean). UNFPA would also have subregional offices in Kingston, Jamaica; Suva, Fiji; Dakar, Senegal; Johannesburg, South Africa; and Kathmandu, Nepal, to provide programmatic and technical support to a cluster of countries in those subregions. That plan, expected to correct a number of weaknesses in the organizational structure, would shift resources from the headquarters level to the country level, increase utilization of local expertise for technical functions, offer more opportunities to train country office staff, and permit better monitoring and oversight of programme implementation and follow-up of audit findings.

Under the selected scenario, a one-time cost of \$27.9 million would be incurred, as well as recurring costs of an estimated \$10 million per biennium. UNFPA identified funding strategies to finance the estimated one-time cost without directly affecting programme resources during 2008 and 2009, namely by using \$10 million from the carry-forward balance from previous years; making available \$11 million by freezing the operational reserve at \$72.1 million until 1 January 2010, to partially fund the biennial support budget portion of the one-time costs; and making use of additional contributions to fund the remaining amount of \$6.9 million.

On 14 September [E/2007/35 (dec. 2007/43)], the UNDP/UNFPA Executive Board approved the proposed organizational structure and decided to review the location of the regional office for Eastern Europe and Central Asia, taking into account the comments of Member States and the evolving situation in the region. It requested the Executive Director to present regular updates on the implementation of the organizational structure and authorized the Executive Director to proceed with the proposed funding strategies. UNFPA was requested to resume funding the operational reserve after the funds had been withdrawn for the purpose of regionalization, and the Executive Director was requested to report to the Board in 2009 on the state of the operational reserve.

### UN Population Award

The 2007 United Nations Population Award was presented to Dr. Hossein Malek Afzali of Iran and Dr. Allan Rosenfield of the United States in the individual category, and to Le Comité National de Population of Algeria and the National Population and Family Development Board of Malaysia in the institutional category.

The Award was established by General Assembly resolution 36/201 [YUN 1981, p. 792], to be presented annually to individuals or institutions for outstanding contributions to increasing awareness of population problems and to their solutions. In August, the Secretary-General transmitted to the Assembly the report of the UNFPA Executive Director on the Population Award [A/62/277].

#### GENERAL ASSEMBLY ACTION

On 25 May [meeting 102], the General Assembly adopted **resolution 61/268** without vote [agenda item 42].

#### United Nations Population Award

*The General Assembly,*

*Recalling* its resolution 36/201 of 17 December 1981, entitled "Establishment of the United Nations Population Award",

*Recalling also* its decision to set up the Trust Fund for the United Nations Population Award and to finance all

costs related to the Award from the investment income of the Fund,

*Stressing* the importance of the Award in promoting excellence in the field of population and development for the reduction of poverty and for sustainable development,

*Noting* that the investment income of the Trust Fund has fallen below the monetary value of the Award and related expenditure,

1. *Takes note* of the note by the Secretary-General transmitting the report of the Executive Director of the United Nations Population Fund on the 2006 United Nations Population Award;

2. *Invites* Member States to make voluntary contributions to the Trust Fund for the United Nations Population Award in order to generate adequate investment income and sustain the Award;

3. *Welcomes* additional contributions from foundations, individuals and other sources.

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## Other population activities

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### Commission on Population and Development

The Commission on Population and Development, at its fortieth session (New York, 10 May 2006 and 9-13 April 2007) [E/2007/25], considered as its special theme "Changing age structures of population and their implications for development" (see p. 1091). Documents before the Commission included the report of its Bureau on its intersessional meetings (New York, 3 November and 7 December 2006 and 16 January 2007) [E/CN.9/2007/2], and reports by the Secretary-General on: world population monitoring, focusing on the changing age structures of populations and their implications for development [E/CN.9/2007/3] (see p. 1091); monitoring of population programmes, focusing on the same subject [E/CN.9/2007/4] (see p. 1095); flow of financial resources for assisting in the implementation of the ICPD Programme of Action [E/CN.9/2007/5] (see p. 1093); world demographic trends [E/CN.9/2007/6] (see p. 1092); and programme implementation and progress of work in 2006 by the Population Division of the Department of Economic and Social Affairs in the field of population for 2008-2009 [E/CN.9/2007/7]. The Commission also considered a note by the Secretariat on the draft programme of work of the Population Division for 2008-2009 [E/CN.9/2007/8].

The Commission adopted and brought to the Economic and Social Council's attention a resolution on national, regional and international action on the subject of the changing structures of populations and their implications for development [E/2007/25 (res. 2007/1)] (see p. 1093). The Commission decided that the special theme for its forty-second (2009) session would be "The contribution of the Programme of Action of the

International Conference on Population and Development to the internationally agreed development goals, including the Millennium Development Goals" [dec. 2007/1]. In other action [dec. 2007/2], the Commission took note of the documents it had considered at its fortieth session. It also recommended to the Council the draft provisional agenda for its forty-first (2008) session.

By **decision 2007/237** of 24 July, the Economic and Social Council took note of the report of the Commission on Population and Development on its fortieth (2007) session and approved the provisional agenda for the Commission's forty-first (2008) session.

In preparation for its forty-first session, the Commission's Bureau held two meetings in 2007 (New York, 16 October and 11 December) [E/CN.9/2008/2].

### UN activities

In a report on programme implementation and progress of work of the UN Population Division in 2007 [E/CN.9/2008/6], the Secretary-General described the Division's major activities dealing with the analysis of fertility, mortality and international migration; world population estimates and projections; population policies; the population and development inter-relationship; and monitoring, coordination and dissemination of population information.

The Division's work in fertility analysis included the publication of two databases, *World Fertility Data 2006* and *World Marriage Data 2006*, which contained period and cohort indicators of fertility and marriage for 192 countries or areas of the world. The Division also worked on a major recurrent publication, the *World Fertility Report 2006*, which presented for each country or area a fertility profile combining information and data on fertility, nuptiality, family planning and population policies. The data showed that fertility had declined over the past three decades in most countries, although high levels were still prevalent in many least developed countries, especially those in sub-Saharan Africa. High levels of fertility were associated with low levels of contraceptive prevalence and marriage at younger ages. In addition, the Division prepared a wallchart on *World Fertility Patterns 2007*, which presented the most recent data on fertility for 195 countries or areas with at least 100,000 inhabitants in 2007, together with fertility indicators for an earlier date around 1970. There were 55 developing countries with a very high adolescent birth rate, defined as over 90 births per 1,000 women aged 15-19: 33 in Africa, 15 in Latin America and the Caribbean, and 7 in Asia. However, adolescent birth rates declined in 103 of the 122 developing countries where data during the past 30 years were available.

Work concerning family planning included a new wallchart and a new database on *World Contraceptive Use 2007*, which provided information for 169 countries or areas covering 99.7 per cent of the world's total number of women aged 15-49 who were married or in union. The average contraceptive prevalence worldwide was 63 per cent, but only 22 per cent of women of reproductive age in sub-Saharan Africa married or in union used contraceptive methods. Africa also had the largest proportion of women with unmet need for family planning.

In the area of mortality and health, substantial progress was made in the compilation of data suitable for estimating mortality, including documentation of data sources, which was being published in the *World Mortality Report 2007*. The *Report* also contained estimates for several mortality indicators presented for 195 countries or areas. Those estimates were derived from the results of the *World Population Prospects: The 2006 Revision*. The Division undertook the preparation of *World Mortality 2007*, a wallchart presenting estimates of several mortality indicators during 2000-2005 such as infant and under-five mortality, the probabilities of survival between specific ages, and life expectancy at birth by sex. Estimates were given for 2005 on maternal mortality ratio, HIV prevalence and the number of deaths due to HIV. The Division published the report of the Expert Group Meeting on Current Issues in the Estimation of Adult Mortality, convened by the Division on 26-27 October in New York. Progress was made in developing models of mortality patterns by age to fit the incomplete information available for countries with deficient data.

Concerning international migration, the Division prepared the *World Migration Report 2006*, containing migration profiles for all major areas, regions and countries of the world for 1995 and 2005 with estimates of the international migrant stock, number of refugees, net migration rate and amount of remittances, as well as policies of Governments on international migration. The number of international migrants reached almost 191 million in 2005, some 3 per cent of the world population. Developing countries received in 2004 some \$145 billion in migrant remittances, almost two thirds of the global amount of remittances that migrants sent home. The Division organized the Sixth Coordination Meeting on International Migration (New York, 26 and 27 November), at which some 80 participants exchanged information and best practices and discussed follow-up to the first meeting of the Global Forum on Migration and Development (Brussels, 9-11 July). In conjunction with that event, the Division organized an Internet-based Marketplace for International Migration and Development Services which considered 18 projects. That process allowed those presenting projects and

prospective funding partners to match their interests and exchange information.

With regard to world population projections, the Division continued its preparation of biennial population estimates and projections. It issued the results of the *2006 Revision of World Population Prospects* in electronic form and analysed population estimates and projections for 229 countries or areas of the world over the period 1950-2050. The Division also completed the *2007 Revision of World Urbanization Prospects*, which presented data on urban and rural populations, and was preparing findings to be released in 2008. The Division began developing a database integrating all empirical data used in preparing the *Revisions of World Population Prospects*, and it continued work on improving the methodology for preparing estimates and projections of national populations and populations in urban and rural places. In collaboration with the Economic and Social Commission for Western Asia (ESCWA) and the Planning Council of Qatar, the Division organized a Regional Workshop on Demographic Projections (Doha, 20-24 May) in ESCWA member countries, providing training to over 20 representatives from national statistical offices involved in preparation of population data.

As to population policies, the Division completed the 2007 edition of *World Population Policies*, a biennial survey of the views and policies of Governments. It found that a majority of Governments (93 per cent of developing countries and 81 per cent of developed countries) viewed HIV/AIDS as the most significant demographic issue facing them. The Division also completed *Population and HIV/AIDS 2007*, a wallchart showing that, in 2005, over 35 million people were living with HIV and that all population and development indicators were adversely affected in countries where the epidemic was most widespread.

With regard to population and development, the Division published the volume *World Population Ageing 2007*, which described global trends in ageing and included key indicators of the ageing process for each of the major areas, regions and countries of the world. It showed that the number of older persons in the world had surpassed 700 million, representing the fastest-growing population segment, and would reach 2 billion by 2050. The Division made substantial contributions to the *World Economic and Social Survey 2007*, a major publication of the Department of Economic and Social Affairs that focused on "Development in an ageing world". Addressing issues of changing age structures, gender, mortality, health and long-term care, the *Survey* stressed that population ageing would continue over several decades and that, although the proportion of older persons was higher in developed than in developing countries, the majority of older persons in the world were living in developing countries. The working-age population and the older population were themselves becoming older, a phenomenon produced by declining fertility and increases in life expectancy.

The Division's work in monitoring population trends and policies included the production of the annual world population monitoring report, which was devoted to the changing age structures of populations and their implications for development. In disseminating population information and data, the Division continued to update and expand its website ([www.unpopulation.org](http://www.unpopulation.org)) and to maintain a website ([www.unmigration.org](http://www.unmigration.org)) which served as a portal to international migration activities. Complementing those websites was the Population Information Network ([www.popin.org](http://www.popin.org)), which provided easy and timely access to population information from the UN system.