

## How population dynamics impact the achievement of eradicating poverty and promoting prosperity in a changing world

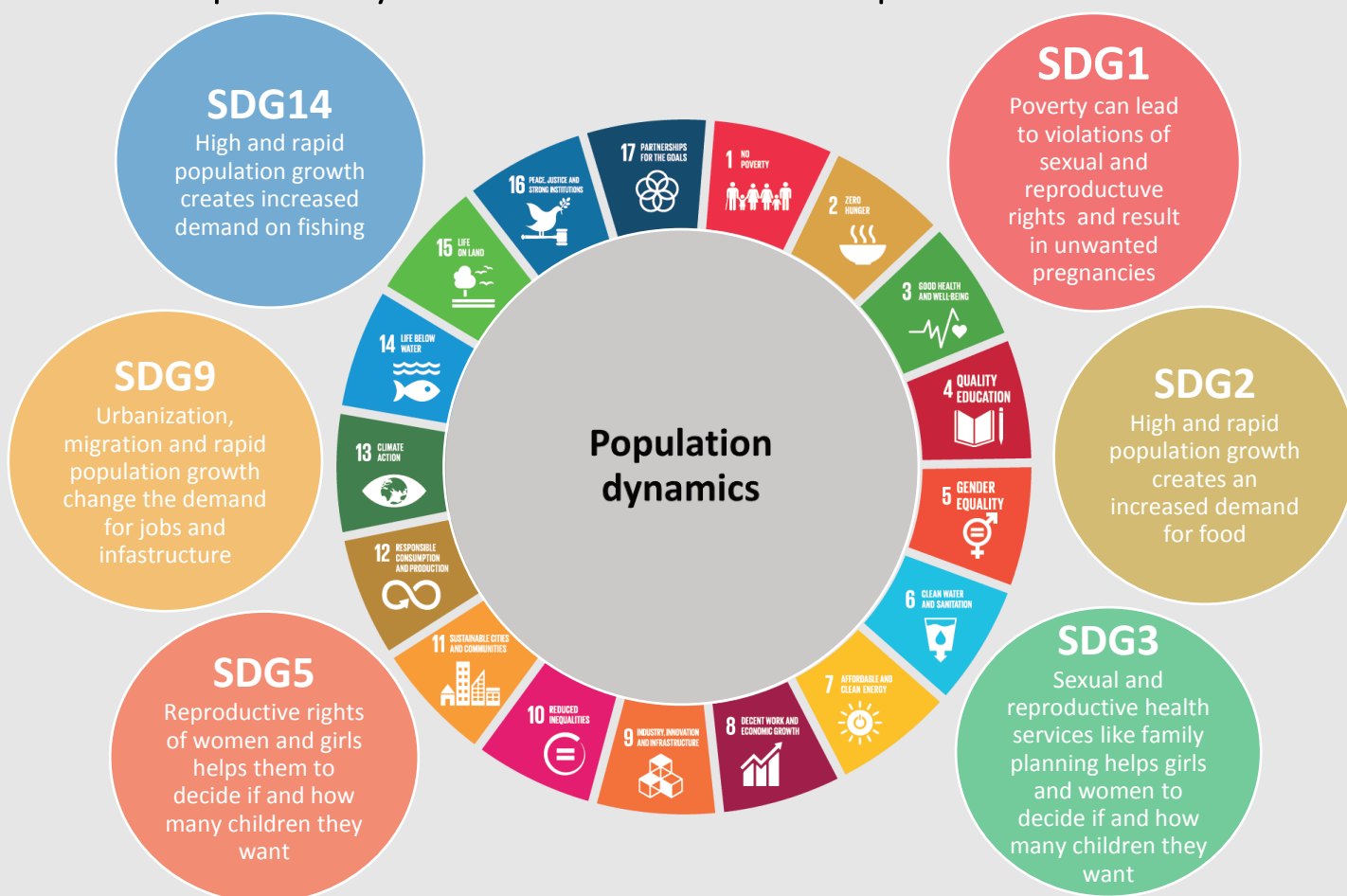
Poverty (SDG1) and hunger (SDG2) rarely stem from a single source of bad health (SDG3), gender inequality (SDG5), poor infrastructure (SDG9) or unsustainable use of the oceans (SDG14). They stem from multiple issues that interfere with each other and increase the impact of one another, and many people are facing double, triple and more challenges that hamper their means to live sustainable lives.

By integrating efforts and avoiding siloed approaches to development, we are better able to reap off the benefits of each initiative and sustainably eradicating poverty and promoting prosperity in a changing world.

Among the many cross-cutting issues that influence poverty and prosperity are matters of **population dynamics**. Some countries and regions in the world face massive and rapid population growth rates, and the majority of these people are living in areas where they already face multiple challenges of poverty, hunger, lack of health and gender equality, poor infrastructure or unsustainable use of the oceans.

We are seeing **the biggest youth population ever of 1,8 billion people** – who enter their reproductive age during the remaining time of the 2030 Agenda. **225 million women living in developing countries have an unmet need for family planning**. Together with barriers such as access to safe abortion and comprehensive sexuality education, this results in **74 million unplanned pregnancies annually**<sup>i</sup>, and is part of the reason why *“births in sub-Saharan Africa to girls under age 15 are projected to nearly double over the next decade”*<sup>ii</sup>.

### Population dynamics relate to all the SDGs up for review in 2017



## 2017 HLPF thematic reviews of SDG3 and SDG5<sup>iii</sup>

- “GLOBALLY, THERE HAS BEEN ONLY A SLIGHT INCREASE IN THE PROPORTION OF WOMEN OF REPRODUCTIVE AGE WHO MARRIED OR IN-UNION WHO HAD ACCESS TO MODERN FAMILY PLANNING METHODS, FROM 74.5% IN 2000 TO 76.7% IN 2017”

### Target 3.7



- “ONLY 50 PERCENT OF WOMEN, AGED 15-49 YEARS, MARRIED OR IN UNION, MAKE THEIR OWN DECISIONS REGARDING SEXUAL RELATIONS, CONTRACEPTIVE USE AND HEALTH CARE, ACCORDING TO DATA AVAILABLE FROM 45 COUNTRIES”

### Target 5.6



This calls for an urgent need to speed up the delivery on target 3.7 and 5.6 on sexual and reproductive health and reproductive rights. Women and men can become able to decide over their own family size, making them and their communities and fellow country (wo)men more resilient to whatever challenges they face - by integrating efforts to ‘ensure universal access to sexual and reproductive health care services, including for family planning, information and education’ in projects and programs that deal with poverty, hunger, health, gender equality, infrastructure and oceans, and by making modern methods of family planning eligible for funding.

#### **About Population and Sustainable Development Alliance (PSDA)**

PSDA is an international network of civil society organizations from the global north and south who advocate jointly for integrating sexual and reproductive health and rights (SRHR), population dynamics, health and gender with environment and climate change using a human rights based approach. We do so because these areas are interlinked and will be met most effectively and sustainably using an integrated and holistic approach.

**WWW.PSDA.INTERNATIONAL.COM**

<sup>i</sup> Guttmacher Institute and UNFPA, Adding It Up, 2014

<sup>ii</sup> 2017 HLPF thematic review of SDG 3

<sup>iii</sup> <https://sustainabledevelopment.un.org/hlpf>