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**ICPD revisited – Pacific island population developments since  
Cairo, and their implications for public policy**

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**ABSTRACT**

The complex relationship between population, resources and development in the Pacific island region has attracted considerable political attention for some time. Leading up to Cairo, the 1993 Port Vila declaration on population and development provided a regional policy framework, with most policy priorities addressing the ICPD's first objective – the interrelationship between population, sustained economic growth and sustainable development, arguing that only a carefully balanced approach in policy development and development practice will deliver sustainable results.

Ten years on, the region's population has increased by a formidable 20% to 8,6 million people, posing formidable challenges to policy-makers and planners. Acknowledging the dialect interplay between population dynamics, resource management and sustainable development, and the domestic and international policy environment shaping such developments, this paper explores the continued relevance of the ICPD Programme of action and associated international development assistance initiatives guiding Pacific island population and sustainable development policy and programme initiatives.

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## Introduction – the lead-up to Cairo

Some 11 years ago, introducing the Pacific Islands regional report to the International Conference on Population and Development in Cairo, SPC's then Secretary-General underlined that population issues have always been at the very heart of balanced and sustainable development throughout region. Despite differences in culture, geographies, resource endowment and levels of development, he pointed to many similarities, some of which are shared with other island regions in the world: a vulnerability to natural disasters and sea-level rise, a very narrow resources base coupled with small domestic markets and long distances to international markets, a high dependence on overseas development assistance and highly complex systems of social and economic relationships. Set against this backdrop of bio-physical and economic challenges, he continued, Governments throughout the region recognise the crucial role of population in the development process, acknowledging an emerging major population challenge confronting the region being its growing and youthful population in search of employment, while putting pressure on infrastructure and the provision of services.

A growing recognition of the complex inter-relationship between population, development and the environment became official in the *Port Vila Declaration on Population and Sustainable Development*, the final communiqué of a Pacific Ministerial conference on population and development leading up to Cairo. Referring to the objectives of the World Population Plan of Action, the Bali Declaration on Population and Sustainable Development, the Jakarta Plan of Action on Human Resource Development and Agenda 21, the *Port Vila Declaration* identified eleven key population and sustainable development issues, elaborated on nine principles considered to be appropriate in the Pacific Region, and acknowledged the importance for the region, of all ICPD Programme of Actions 11 thematic policy priority areas. Notwithstanding this explicit recognition of the relevance to the Pacific region of all ICPD Programme of Action's eleven policy themes, the *Port Vila Declaration* had, true to its full name, an unmistakable *Population and Sustainable Development* focus, with seven of the *Port Vila Declaration's* eleven key population and sustainable development issues addressing the ICPD's first policy theme: the interrelationship between population, sustained economic growth and sustainable development.

Not surprisingly, this strong focus on broad population and development issues relative to other population concerns also transpired quite explicitly from Pacific island countries' own national policy statements, development policy and planning documentation, and interventions made at various regional and international fora in the lead-up to Cairo, and in Cairo itself. Thirteen of the 14 Pacific island countries which sent official delegations to Cairo had little difficulty in identifying their concerns, referring to over 200 population and development issues they wished to address in their own countries. While most countries had something to say about most ICPD policy themes, some policy areas attracted more attention than others, as illustrated in Table 1<sup>2</sup>:

- the interrelationship between population, sustained economic growth and sustainable development (PoA-3),
- reproductive rights and reproductive health (PoA-7),
- population growth, including negative growth, i.e. population loss (PoA-6)
- health, morbidity and mortality (PoA-8), and
- national action (PoA-13).

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<sup>2</sup> For a more detailed account on this assessment see Haberkorn, 1995, Prioritizing priorities: Pacific island population developments and their implications for public policy, *New Zealand Population Review*, Vol 21(1-2):1 - 26.

**Table 1: Pacific Island countries key population and development concerns, ICPD 1994**

Main Policy Themes in the ICPD Programme of Action (PoA)	Pacific Island Countries												
	CKI	FIJ	FSM	KIR	MAR	NAU	NIU	PNG	SAM	SOL	TON	TUV	VAN
PoA-3: Inter-relationship between population, sustained economic growth, sustainable development													
PoA-4: Empowerment of Women													
PoA-5: Family													
PoA-6: Population Growth (Concern with rapid growth/decline)													
PoA-7: Reproductive Health/Rights (Family Planning/Human Sexuality)													
PoA-8: Health / Morbidity / Mortality (Child Survival; Maternal Health; HIV/AIDS)													
PoA-9: Population Distribution (Rapid Urbanisation/Internal Migration)													
PoA-10: International Migration													
PoA-11: Population IEC													
PoA-12: Technology/Research (Data Collection/Need for Population Research)													
PoA-13: National Action (policy development; improve Human Resources)													

**Legend:** Number of policy references made to theme



Considered important



No mention

**Notes:** No "top-three" indications available from PNG and Solomon Islands, with Tonga and Tuvalu providing four and two mentions respectively (Haberhorn, 1995).

Given the practical impossibility for most Pacific island countries in terms of domestic resources and national capacity, to effectively pursue more than two or three key population policy initiatives at any one time – since most population-related activities in the early 1990s were largely donor-funded, and often “under the overall management of single government official, euphemistically called the ‘population focal point’ –, a second assessment was made of countries’ top policy priorities. With the Demography/Population programme then just having started a multi-year technical assistance programme with a focus on integrating population issues into policy development and planning, and to ensure our activities would address countries priority population and development concerns, we requested all countries represented at Cairo to again review their own priorities, and identify those issues they felt required immediate attention (Group 1 priorities), and those they considered important in the long-run (Group 2), and then pick their top 3 population and development priorities from their Group 1 priorities. The results of this review are illustrated in Table 2, which, while highlighting considerable contrasts between countries (which in itself should not surprise), contained two key messages:

- a concern with population/development/environment interactions emerged as a top priority for seven countries, closely followed by concerns over high population growth (or in the case of Niue, rapid population decline), health-related issues, and the perception of the need to intensify efforts to develop national policies and improve domestic HR capacities; while
- reproductive rights and health did not make the top three policy priority in any Pacific island country (despite being widely acknowledged as important) and neither did “empowerment of women” or Population IEC, despite featuring strongly in most official documents and statements.

Table 2: Pacific Island countries key population and development concerns, ICPD 1994

Main Policy Themes in the ICPD Programme of Action (PoA)	Pacific Island Countries												
	CKI	FIJ	FSM	KIR	MAR	NAU	NIU	PNG	SAM	SOL	TON	TUV	VAN
PoA-3: Inter-relationship between population, sustained economic growth, sustainable development		●		●	●		●		●		●	●	
PoA-4: Empowerment of Women													
PoA-5: Family					●						●		
PoA-6: Population Growth (Concern with rapid growth/decline)			●			●	●		●			●	●
PoA-7: Reproductive Health/Rights (Family Planning/Human Sexuality)													
PoA-8: Health / Morbidity / Mortality (Child Survival; Maternal Health; HIV/AIDS)	●		●		●	●							●
PoA-9: Population Distribution (Rapid Urbanisation/Internal Migration)	●			●		●					●		
PoA-10: International Migration							●				●		
PoA-11: Population IEC													
PoA-12: Technology/Research (Data Collection/Need for Population Research)		●											
PoA-13: National Action (policy development; improve Human Resources)	●		●	●					●				●

Legend: Number of policy references made to theme



Considered important



No mention



Top 3 priorities

Notes: No "top-three" indications available from PNG and Solomon Islands, with Tonga and Tuvalu providing four and two mentions respectively (Haberkorn, 1995).

## Developments since Cairo

With the ICPD Programme of Action representing a very comprehensive policy document covering every conceivable population and development angle contained in 100 pages, one obvious downside of such comprehensive coverage is that it is unworkable in terms of providing tangible, strategic directions, while at the same time giving single-issue interest groups or lobbyists *carte blanche* to pursue single-sector or single-issue policy and program initiatives – a development that is conceptually and politically incompatible with a population and development focus that gave the ICPD Programme of Action its name in the first place – but which, if left unattended to, has the potential of undermining, even reversing other previous population (and development) achievements and initiatives. Regarding Pacific island countries, several immediate implications come to mind:

- a de-emphasis of population-development related activities over the past decade, including cross-sectoral policy analysis as well as national population policy development,
- a near complete lack of recognition of migration (and to a lesser extent mortality) as key drivers of national, sub-national and regional population (and development) dynamics, and a
- stagnation, and in some case, a decline in national/regional capacity to undertake population data collection and analysis, which form the essential backbone of any population policy development and population programme implementation initiative.

But before reviewing some of these matters in more detail, it is useful to provide some context of Pacific island population developments in the decade since Cairo.

## Population development since Cairo

In the years since Cairo, the population of the Pacific Islands has reached 8.6 million in 2004<sup>3</sup>, representing an increase of approximately 1.9 million people, or 22 per cent of its current size, in just one decade. This growth notwithstanding, population distribution has remained largely unchanged: the five largest island countries and territories (those comprising Melanesia) account for the vast majority (86.4%) of the regional population, followed by the much smaller island countries and territories of Polynesia (7.4%) and Micronesia (6.2%). Two out of every three Pacific Islanders live in Papua New Guinea, while Fiji's 2004 estimated population of 836,000 is 25 per cent larger than all 10 Polynesian Island countries and territories combined. At the other end of the population spectrum, the combined populations of the seven smallest Pacific Island countries and territories (51,800) is about equal to the combined population of Vanuatu's only two towns (49,500), Port Vila and Luganville. The much smaller populations of Micronesian and Polynesian countries and territories, and their past and ongoing political associations with metropolitan countries, make these states very sensitive to international migration, which has a significant impact on their demographic structures, and implicitly, their development potential and prospects.

## Population growth and structure

The addition of 1.9 million Pacific Island people since 1994 reflects an annual population growth rate of 2.5 per cent per annum; if sustained, this growth rate would lead to a doubling of the Pacific Island population in 28 years, to 17.2 million people. In the decade since Cairo, Melanesia's population increased at an annual rate of 2.3 per cent (maintaining the same speed as in the decade prior to Cairo), ahead of Micronesia (1.3%) and Polynesia (0.5%).

Continued high population growth across Melanesia is driven by moderately high fertility rates and declining mortality, which is of particular relevance to Papua New Guinea, Solomon Islands and Vanuatu. Migration, on the other hand, plays a more prominent role in Fiji Islands and New Caledonia. There has been sustained emigration from Fiji Islands following the political developments of the past decade, and continued immigration into New Caledonia from metropolitan France and the two other French Pacific territories. Migration is the prime reason for the much slower annual growth rates across Micronesia and particularly Polynesia, where high rates of emigration have prevailed for almost four decades. This has led to a very small population growth rate of less than 0.3 per cent in some island countries (Federated States of Micronesia, Nauru, and Tonga), and actual population decline in the Cook Islands and Niue.

Population growth throughout the region has been much higher in urban than rural areas, except in the Federated States of Micronesia (FSM) and Niue. This reflects sustained rural to urban migration over the past decade, which accounts for the rapid urbanisation taking place across the region. While the Pacific is still a primarily rural region, as is reflected in the fact that only one in four Pacific Islanders live in urban areas — towns, and their associated urban lifestyles (ranging from diets to employment, and health to leisure activities) are becoming home for a rapidly growing number of people. At the time of their last censuses, more than 50 per cent of the population in 9 out of 22 Pacific Island countries and territories already lived in towns and urban areas, and we expect Fiji and Kiribati to have increased this number to 11 by now<sup>4</sup>.

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<sup>3</sup> *Pacific Island Populations 2004*, Secretariat of the Pacific Community, Noumea, 2005.

<sup>4</sup> Applying the latest inter-censal urban growth rates of Fiji (2.6%) and Kiribati (5.2%), puts Fiji Island's urban population and the population of South Tarawa above the 50% mark of the national population total in 2004.

Rapid population growth is readily apparent in countries' population structures, with the fastest growing countries having the lowest median age and broadest population base. As was the case 10 years ago, the Marshall Islands has the youngest population: the median age of 17.8 means that half the country's population is younger than 18. Palau has the oldest population, featuring a median age of 31. Some interesting regional variations also emerge in the sex structure of Pacific Island populations, with Palau, Fiji Islands and Samoa having significantly more male than female residents, while women outnumber men in the Northern Mariana Islands, Kiribati, Tuvalu and Tokelau.

## Population dynamics

Variations in population growth and composition across the Pacific and between and within regions highlight the complex nature of regional population dynamics, reflecting differential impacts of fertility, mortality and migration.

**Fertility** refers to the reproductive performance of a population, which is affected by social, cultural, economic, physiological and even institutional determinants. Reproductive health is not simply the absence of illness affecting the reproductive process, but implies the ability and choice to have children, and the freedom to determine their number, spacing and timing. Family planning and safe motherhood are essential components. Generally speaking, fertility has the greatest impact on a country's population composition, as the proportions of a population that are young or old depend largely on birth and not death rates; among small and highly mobile Pacific (Polynesian) populations, however, migration usually has a stronger impact. Populations age with falling birth rates (which reduce the proportion of children), while declining death rates make some contribution to younger age distributions, with more infants and children surviving as the result of improved health conditions and practices.

As ten years ago, fertility levels remain the highest in the Marshall Islands (5.7), Tokelau (4.9), Vanuatu (4.8) and Solomon Islands (4.8), with total fertility rates (TFRs)<sup>5</sup> above or just under the 5 children per women ratio, with another six countries featuring TFRs of over 4 (Table 1). The lowest current levels are also a mirror image of 1994, with the Northern Marianas (1.6), New Caledonia (2.4) and French Polynesia (2.4) featuring the lowest fertility, which is largely the result of international migration and the different fertility behavior of various ethnic groups<sup>6</sup>.

Notwithstanding the persistent high fertility in 10 Pacific Island countries and territories, which explains most of these countries' continued high population growth, fertility has declined in most countries and territories (16) over the past decade and has stabilised in four, with only Tuvalu recording a modest increase (from 3.3 to 3.7). Changes are most pronounced in Wallis and Futuna, the Solomon Islands, Nauru, FSM and Tokelau, with women in those countries having one birth less during their lifetime as compared with only 10 years ago. Looking at these developments over a demographic generation (25 – 30

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<sup>5</sup> This rate refers to the average number of children a woman would give birth to during her lifetime if she were to pass through her childbearing years conforming to the fertility patterns prevailing in a given period.

<sup>6</sup> In the Northern Marianas, about two in three women of childbearing ages are temporary female migrants from Asia, working in the garment and hotel industry; if they are excluded from the latest figures available to us, the TFR would increase to 2.7. With French law prohibiting the disaggregation of social and demographic statistics by ethnicity, empirical verification of visible and anecdotal evidence is not possible in the case of New Caledonia and French Polynesia.

years) underlines the massive change that has taken place in a relatively short time period, as is illustrated quite dramatically in the case of Nauru women, who in the early 1980s averaged between 7 and 8 live births during their reproductive years, compared to currently around 4 (Annex 1).

**Mortality** has a much smaller impact on population structure, distribution and dynamics relative to fertility and migration (except in the event of war, epidemics or natural disasters), yet mortality indicators such as infant mortality rates and life expectancies at birth, are important indicators of a country's state of development. This is quite powerfully illustrated in the MDG framework, which contains 3 mortality indicators – yet not a single one relating to fertility or migration, the two principal determinants of population growth and distribution, including urbanization.

With the family planning component in many reproductive health and maternal and child health (MCH) programs having achieved modest results in lowering fertility levels across the region, MCH activities and other social and economic development measures aimed at improving infant and child health, seem to have had greater impacts, as evident from declining infant mortality rates in most countries of the region. With visible improvements everywhere, some of which are considerable, such as in the Marshall Islands and Kiribati, two countries show worrying developments that ought to raise concern amongst both civil society, as well as relevant government agencies and the international community. Featuring a very low infant mortality rate (IMR)<sup>7</sup> of 11 in the early 1990s, the most recent figures for Nauru give an IMR of 42, with Solomon Islands experiencing a similar reversal, and currently feature the highest infant mortality rate in the region (66), just ahead of Papua New Guinea (64), which managed some modest improvements over the past decade (Annex 2)

This picture also emerges when considering life expectancy at birth<sup>8</sup> values, which in the case of Nauru shows a decline over the past 10 years, whereas Solomon Islands values remained virtually unchanged. Currently, Nauru's men have the lowest life expectancy at birth with 52.5 years across the region (as compared to 55, ten years ago), and Nauru women also record a low 58.2 years (from an earlier figure of 64), which is the second lowest figure in the region. Tuvalu also shows declining values for men and women compared to the early 1990s, a picture also emerging in the case of Palau and Tonga women, and Cook Island males. These figures put a somewhat negative spin on what otherwise seems to be a positive development, with most countries registering modest to quite tangible improvements in their mortality situation over the past 30 years (Annex 3).

The third contribution to a country's population dynamic comes from **migration**, which in most Pacific Island countries also makes the biggest contribution to population distribution, via rural-to-urban migration. And throughout Micronesia and Polynesia, migration is also the single biggest factor impacting on national population growth, as is evident from comparing annual rates of population growth (the result of births, deaths and migration) with annual rates of natural increase (births *minus* deaths)<sup>9</sup>, as illustrated in the case of FSM, Nauru and

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<sup>7</sup> The infant mortality rate (IMR) refers to the number of infant deaths (children under 1 year of age) in a given year or time period, per 1000 live births during the same period.

<sup>8</sup> This indicator refers to the average number of years men and women can expect to live, based on the most recent mortality information available.

<sup>9</sup> Given the absence of timely and reliable migration information system in many PICTs, the best proxy to gauge the impact of international migration on national population growth is to compare intercensal population growth rates derived from two consecutive censuses (which have births, deaths and migration between these two points in time factored in) with the rate of natural increase (births *minus* deaths), with the residual growth attributed to migration. For example, an annual intercensal growth rate of 1.5 per cent, when compared with a rate of natural increase of 2.3 per cent, indicates an annual net migration rate of -0.8 per cent.



Tonga. All three feature low annual intercensal growth (0.2% – 0.3%), yet display quite substantive rates of natural increase (2.1% – 2.3%). Only the Northern Mariana Islands and New Caledonia emerge as true migration destinations, with Palau also recording a small amount of in-migration, whereas almost all other PICTs else recorded negative movement<sup>10</sup>.

### **Likely future trends**

At the rate of recent population growth, the region's population is expected to double in size in 28 years. Obvious implications of this growth mean growing and sustained pressures on land, the provision of services and infrastructure, such health and education, water supply and access to employment outside traditional occupations for a growing number of young and, relatively more educated people with aspirations beyond village-based and family-oriented agricultural and fishing activities. This is of particular concern in the more populated countries throughout Melanesia, which unlike most Micronesian and Polynesian countries and territories do not enjoy historical migration outlets to metropolitan countries such as New Zealand, Australia and the US, to deflect sustained population pressures on small land areas and fragile ecosystems.

The continued perception of Pacific people as primarily rural dwellers is factually correct, but in wider political and development terms a myth, lulling national policy-makers and their international development partners into a false sense of security that traditional village social structures and support networks are able to handle this demographic change. Most observers seem unaware that the perpetuation of this "rural myth" is largely the result of three predominantly rural societies — Papua New Guinea (87%), Solomon Islands (84%) and Vanuatu (79%) dominating the Pacific demographic landscape and accounting for 74 per cent of the region's overall population.

With half of all Pacific Island countries and territories already having a larger proportion of their population living in urban rather than rural areas, annual urban growth rates of between 3 and 4 per cent, translate into population doubling times of between 17 to 23 years. To illustrate some concrete implications of this development, it is worth considering Kiribati, and population developments on South Tarawa in particular. Consisting of three groups of coral atolls and one isolated volcanic island spread over more than 4,000 km from west to east across the Central Pacific, with a total land area of just 811 km<sup>2</sup>, Kiribati is home to some 93,100 people, half of whom live on the small island of South Tarawa, the country's main island, measuring just 12.5 km<sup>2</sup>. With land at a premium, and agricultural activities limited to copra production on only some islands and some isolated subsistence vegetable gardening, Kiribati's industry is concentrated on fishing and handicrafts, with the vast majority of Kiribati's population living a subsistence lifestyle supplemented by remittances of approximately 1,000 men working on mainly German cargo-ships, or families working on South Tarawa, or in the phosphate industry in nearby Nauru<sup>11</sup>. Lacking resources, and with only limited access to even basic services, migration from the outer islands of Kiribati to South Tarawa is perceived by many people as the only viable alternative to sustain a livelihood, resulting in an annual population growth rate of 5.2 per cent. Should South Tarawa's population continue to expand at this rate, it's population will double in just 13 years, reaching 73,400 by 2013! Already experiencing enormous population-natural

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<sup>10</sup> Vanuatu, PNG and Solomon Islands are not known to attract significant numbers of people, with the small migration rates most likely indicative of birth and death under-reporting.

<sup>11</sup> At present, most of these people merely subsist there, many not having been paid for months, given the current economic and political hardships prevalent in Nauru.

resources pressures at present on only 12.5 km<sup>2</sup> of land, with its lagoon over-exploited and polluted to such an extent that subsistence fishing is no longer a viable option, it is quite inconceivable of how South Tarawa's economy, its society and environment will be able to cope with an additional 36,700 people in nine years.

Even predominantly rural Melanesia averages annual urban population growth rate of just below 3 per cent, with Solomon Islands and Vanuatu showing the highest growth at 4.3 and 4.2 per cent respectively. This could see the populations of Honiara and Port Vila double in around 16 years. Recent visitors to both towns will be left wondering what social, economic and environmental impact an additional 49,000 and 30,000 people respectively might have on Honiara and Port Vila in 2015. Port Moresby's experience over the past decade, and the recent civil unrest in the Solomon Islands, concentrating largely on Honiara and surrounding areas on Guadalcanal, should serve as timely reminders of what might be in store, should rural-urban migration persist at current levels.

Apart from obvious social impacts on urban life and Pacific societies at large, persistent high urban population growth and overcrowding has serious environmental consequences, leading to increased environmental degradation and contamination. In the Pacific report to the ICPD, its authors highlighted the rapid increase in incidents of dangerous and illegal pollutants being discharged into streams, lagoons and oceans, which occurred hand in hand with a developing manufacturing industry. There were then, as are still today, only very limited recycling and waste reduction programs in the smaller island countries, and rubbish is still largely burned or dumped into the sea or lagoons, impacting not only on environmental health and the depletion of fish stocks and other marine life, but also leading to invariable human health problems. First-time visitors, particularly to the smaller atoll countries, are surprised to drive along roads lined with cans, bottles and plastic, and repeat visitors ponder the visible growth in such environmental pollution over the years. Beyond immediate consequences and costs in terms of human health and household incomes – like when contaminated mangrove crabs and oysters, and lagoon fish are no longer safe to eat, or disappear altogether, and households are forced to buy alternative food elsewhere -, deteriorating environments, particular lagoons and coastal areas, could in the long-run severely impact on national economies and the livelihood of Pacific island people. This is of particular relevance to countries which rely heavily on tourism as their main, or one of their main sources of both national income/revenue as well as employment, and who can ill-afford this industry going belly-up.

The main reason behind the likelihood of persistent high population growth, are *continued high levels of fertility* as discussed earlier, with women in most Pacific Island countries giving birth to four or more children during their reproductive years. While most family and reproductive health activities over the past decade managed to contribute to a lowering of fertility, which, from a population and development perspective, are very laudable achievements indeed, fertility rates (TFR) of between 3 and 4 mean population growth will persist in most countries for years to come.

While improvements in lowering *infant mortality*, and with it, the achievements of higher *life expectancy at birth* are also very commendable achievements, reports of a widespread increase in non-communicable diseases, the recent experience in Nauru and the Solomon Islands, and reports in early 2004 in the Fijian press about alarming declines in life expectancy values for Fijian Island males and females, should all raise some concerns about morbidity and mortality improvements in the near future.

And *migration*, both internal movements from rural to urban areas and associated with it, high rates of urbanization, as well as a continued migration to metropolitan countries, particularly from Micronesian and Polynesian countries and territories, is likely to continue. Acknowledging this demographic and political reality, in addressing associated structural causes (and implications) in pro-active population and migration policies, is of utmost importance to sending and destination countries, as resource-poor atoll environments, such as the Marshall Islands, Tuvalu and Kiribati, as well as a resource-depleted Nauru and small micro-states such as Tokelau and Niue, simply lack a domestic economic resources base to provide for the sustained livelihood of its people.

## **Current policy concerns**

Against this backdrop of demographic developments since Cairo, how are Pacific island countries and territories placed to confront upcoming future challenges? What have their and their development partners' responses been since Cairo in terms of implementing the ICPD Programme of Action? What are their current most pressing concerns and policy priorities?

In terms of achievements to date, some countries report having either reviewed their population policies, developed new population and development policies, or specific (reproductive) health or other sectoral policies, while others, like PNG, have intensified efforts to fully integrate population considerations into sector-specific policies and strategies. Progress has also been reported from most countries in improving access to prenatal and delivery care, and in improving access to family planning services, including providing access to a greater range of available contraception. Many countries have also intensified their efforts in meeting reproductive health needs of adolescents and unmarried young adults, even though this is still perceived as a very sensitive issue in some countries. And progress has also been reported in promoting partnerships between governments, NGOs, civil society organizations and international development partners.

While some distinct differences emerged in the pace of progress between countries in the implementation of the ICPD POA – with differences referred to by planners as primarily due to population structure and distribution, resource allocation and political commitment -, countries overall more advanced in terms of socio-economic development and services provision appear to have responded more easily to the Cairo challenge than others<sup>12</sup>. Furthermore, countries differ in terms of population structure and recent developments as just outlined, as well as in cultural and political features and organization, all of which impact differently on the perceived sense of urgency and pace of progress in implementing the ICPD POA.

In terms of international policy concerns and priorities, the Cairo agenda was very comprehensive, and at least according to official language, it embraced a broad population and development focus. Considering tangible outcomes, however, a clear policy and subsequent funding priority emerged in UNFPA's emphasis on reproductive and sexual health, with most of its operating funds allocated to this sector since Cairo. While the latter's relevance for most of the developing world remains unquestioned, such an almost single-theme priority focus appears to have had less of an impact addressing persistent high population growth in the Pacific region, and has had little overall impact on the region's population and development agenda, as perceived by Pacific island development planners

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<sup>12</sup> See *Population and Development in the Pacific islands*, Secretariat of the Pacific Community, 2002, Noumea.

and planning agencies, with a similar picture of international versus national population *policy dissonance* emerging in 2005, as it did ten years ago (Table 3)<sup>13</sup>.

**Table 3: Pacific Islands key population and development concerns, 2001 - 2005**

Main Policy Themes in the ICPD Programme of Action (PoA)	Pacific Island Countries												
	CKI	FIJ	FSM	KIR	MAR	NAU	NIU	PNG	SAM	SOL	TON	TUV	VAN
PoA-3: Inter-relationship between population, sustained economic growth, sustainable development	●	●	●	●	●	●	●	●	●	●	●	●	●
PoA-4: Empowerment of Women			●								●		
PoA-5: Family													
PoA-6: Population Growth (Concern with rapid growth/decline)	●		●	●			●					●	
PoA-7: Reproductive Health/Rights (Family Planning/Human Sexuality)											●		
PoA-8: Health / Morbidity / Mortality (Child Survival; Maternal Health; HIV/AIDS)		●			●	●		●			●		●
PoA-9: Population Distribution (Rapid Urbanisation/Internal Migration)				●								●	
PoA-10: International Migration	●						●		●				
PoA-11: Population IEC													
PoA-12: Technology/Research (Data Collection/Need for Population Research)						●		●	●	●			
PoA-13: National Action (policy development; improve Human Resources)		●	●	●	●					●			●

**Legend:** policy reference made to theme



Considered important



No mention



Top 3 priorities

**Source:** 2001 SPC Regional Planners' Meeting on Population and Development - Country Reports, 2001. Cook Islands, FSM, Marshall Islands and Nauru did not attend the meeting; information obtained through recent updates. The top three priorities refer to a 2001/2004/2005 update with national planning agencies. FSM and Kiribati provided 4 top priorities.

As was the case then, when asked to identify their top three population concerns and priorities, some ICPD PoA items again appeared more prominent than others:

- a concern with the interrelationship between population, sustained economic growth and sustainable development, the very essence of what we refer to when we talk about population and development, again topped the list – with all but one Pacific island country referring to it as one of their top three priorities/concerns;
- concerns over health, high population growth (or in the case of Niue and Cook Islands and FSM, rapid population decline), and the perception of the need to intensify efforts to develop national policies and improve domestic HR capacities again featured in the second group of priorities; with
- references to reproductive health and rights, again not appearing as prominent as one might expect in the context of international policy attention and resources allocation.

<sup>13</sup> A first assessment was made in 2001, during a regional heads of planning workshop, where planners were asked to report on ICPD related activities and ongoing, or newly emerging population concerns. An analysis of country statements prepared for this meeting, as well as more recent documentation provided by some countries who did not attend this meeting, highlighted the ongoing relevance of the Cairo agenda for most countries. This process was repeated in late 2004/early 2005, with all national planning agencies in the Pacific again asked to identify their current most pressing population and development priorities and concerns, which are highlighted in Table 3.

Whether or not the latter owes to the fact that with considerable international attention paid to reproductive health and rights, this ICPD PoA item may not have been regarded as a national priority concern simply because of the high international (donor) attention it already attracts and hence possibly being seen as “already being taken care off”, or because Pacific island countries see it as part of other ICPD PoA items (such as population and development in general; or population growth), cannot be ascertained from our review. We simply wish to flag this issue as is clearly highlights the ongoing challenge of appropriate advocacy, and more effectively and transparently communicating linkages between population and development.

With population growth and health featuring again very prominently as a second set of national population concerns, an interesting shift in country priorities has occurred, possibly reflecting sector-specific developments over the past decade (Table 4). Regarding population growth, for example, it remains a key issue in FSM (loss in Chuuk state), Niue (loss) and Tuvalu (loss on outer islands, high urbanisation), and has been acknowledged as a growing concern for the Cook islands (loss) and Kiribati (high growth) over the past decade, while it currently appears less of a pressing issue (relative to other population concerns) in Nauru, Samoa and Vanuatu. And a further development worth noting, has been the emergence of ‘data collection’ and need for population research amongst the top three ICPD PoA priorities for four countries (Nauru, PNG, Samoa and Solomon Islands) relative to just a single mention (Fiji) ten years ago, reflecting both a growing commitment to pursuing a culture of evidence-based decision making, as well as indicating a need for external development assistance.

**Table 4: Comparing top three population and development priorities, Cairo and Cairo<sup>PlusTen</sup>**

Main Policy Themes in the ICPD Programme of Action (PoA)	Pacific Island Countries													
	CKI	FIJ	FSM	KIR	MAR	NAU	NIU	PNG	SAM	SOL	TON	TUV	VAN	
PoA-3: Inter-relationship between population, sustained economic growth, sustainable development	●	●	●	●	●	●	●	●	●	●	●	●	●	
PoA-4: Empowerment of Women			●								●			
PoA-5: Family					●						●			
PoA-6: Population Growth (Concern with rapid growth/ decline)	●		●	●		●	●		●			●	●	
PoA-7: Reproductive Health/ Rights (Family Planning/ Human Sexuality)											●			
PoA-8: Health / Morbidity / Mortality (Child Survival; Maternal Health; HIV/ AIDS)	●	●	●		●	●		●			●		●	
PoA-9: Population Distribution (Rapid Urbanisation/ Internal Migration)	●			●		●					●	●		
PoA-10: International Migration	●						●		●		●			
PoA-11: Population IEC														
PoA-12: Technology/ Research (Data Collection/ Need for Population Research)		●				●		●	●	●				
PoA-13: National Action (policy development; improve Human Resources)	●	●	●	●	●				●	●			●	

**Legend:** policy reference made to theme      Considered important      No mention      Top 3 priorities 1994      Top 3 priorities 2004

## **Key challenges ahead, and their implications for public policy**

Population developments over the past decade set against a review of past and current priority concerns amongst Pacific island planners, underline the continued importance and relevance of the Cairo agenda. While some distinct differences emerge between countries in perceived policy relevance of specific PoA items, as well as in the pace of progress in the implementation of the ICPD PoA, some similarities emerge, which bode well for a more concerted regional approach, complementing specific national programme activities.

### **Focus on population growth and unequal distribution**

The main reason behind persistent high population growth in the region are prevailing *high levels of fertility*. While family and reproductive/sexual health activities over the past decade managed to contribute to a lowering of fertility, fertility rates (TFR) of between 3 and 4 mean population growth will persist in most countries for years to come.; strong cultural and social aspects as well as economic considerations play important roles, with perceptions of the “value” of children varying accordingly. Much remains to be done in the area of *Sexual and Reproductive Health* to continue recent efforts and sustain achievements, including paying more attention to the right of unmarried women and adolescent girls, as well as the role of men. Ignoring the latter, couched in perception of social and cultural appropriateness limits the overall effectiveness of SRH activities, and prevents the achievement of broader population and development objectives aimed at slowing rapid, and at achieving sustainable population growth. And while some programs have come a long way since the pre-Cairo years, in making greater allowances to consider the economic and political context of high fertility, such as poverty, and general lack of development, it may be time to move on from political best rhetoric to actual practice. Considering that most Pacific island countries have little difficulty in expressing their key population concerns within a population and development context, a closer alignment of national and international policy agendas ought to be a top priority over the next decade.

Concerns with population growth expressed by Niue, the Cook Islands and FSM, highlight that overall growth in some Pacific island countries is actually negative, with these countries experiencing substantial population losses, which calls for a completely different policy approach than what population and development specialists and national policy-makers are usually confronted with. And high growth in some areas, usually in countries’ capital cities or major towns, occurs normally at the expense of rural areas and outer islands, in some places increasing rather than alleviating hardships for those left behind – more than often the young and very old.

### **Proactive migration policies**

Migration, both internal movements from rural to urban areas and associated with it, high rates of urbanization, as well a continued migration to metropolitan countries, particularly from Micronesian and Polynesian countries and territories, is likely to continue in years to come. Acknowledging this demographic and political reality, and addressing associated structural causes (and implications) in pro-active population and migration policies, is of utmost importance at national and international levels, as most outer islands across the region, and resource-poor atoll countries in general, such as the Marshall Islands, Tuvalu and Kiribati, a resource-depleted Nauru, and small micro-states such as Tokelau and Niue, simply lack an economic resources base to provide for the sustained livelihood of its people.

In terms of policy measures, it has been argued for quite some time, that migration may have more developmental value than aid, in that it fosters a greater sense of initiative, self-

realisation and hence sustainability<sup>14</sup>. This is not meant to deny the enormous and quite tangible impact international aid has had on raising living standards throughout the region, and in virtually bankrolling most countries national development budgets (Grynberg, 1995); it is merely a reminder that a greater and more active participation in developing one's country is more valuable in terms of long-term sustainability. Allowing some permanent resettlement and/or the introduction of temporary work permit schemes to New Zealand and Australia for people from some Pacific island countries that simply have little to no chance for real and sustainable economic development, are two obvious policy options worthy of further consideration. Given the relative ease with which European students and travelers can secure one-year working visas in New Zealand and Australia, to basically bankroll their travels there, it appears somewhat incongruous to think that a similar act of generosity could not also be extended to Pacific neighbors in real need! Modest resettlement programs and properly organised temporary work program schemes have obvious two-way benefits: they help boost national incomes through the flow of remittances back home, as is evident from examples throughout the world where such programs have been operational for decades; and they would also fill chronic labour shortages in Australia and New Zealand, such as seasonal work in the agricultural and construction sectors.

### **Population advocacy and creating partnerships**

Population advocacy in the broadest sense is essential to policy success. Population policy measures and strategies/program activities addressing population growth/fertility, or the impact of unabated high growth on the environment and its implications for national development, all have very little chance to succeed without widespread support through civil society and the political sphere. The political (and economic) fall-out from population-resources- imbalances leading to ethno-cultural-social tensions, as witnessed over the past decade or two in Papua New Guinea and more recently in the Solomon Islands illustrate just what can happen if population-environment (al resources) imbalances are either ignored for too long, or are not systematically addressed involving all sectors of civil society. The Pacific Parliamentary Assembly for Population and Development (PPAPD) created in 1997, and the current UNFPA-SPC initiative to integrate population (and gender) into national and sectoral policy development and planning, are both tangible expressions of meaningful population and development advocacy.

### **Rediscovering the basics – the need for good and timely population data**

Population advocacy, and the development of sound population and development policy and programs, however, will be seriously limited, if not outright impossible without the availability of, and access to good quality population data and other important socio-economic statistics. An immediate fall-out from Cairo, has been UNFPA's withdrawal from providing population census and survey support during the 2000 round of censuses, following two decades of generous, much appreciated and effective technical and financial assistance during the 1980 and 1990 census rounds. The reason? More pressing policy issues in need of resources, we understand. The result? Great difficulties experienced by some Pacific island countries in finding alternative funds, which led to shortcuts in some aspects of census operations, and an overall decline in data quality, and timely reporting<sup>15</sup>. Combined with civil or vital registration across the region existing but in name, difficulties experienced by most countries to maintain up-to-date and complete international migration data, and the general absence of

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<sup>14</sup> See Grynberg (1995), *Immigration versus Aid*, Pacific island Monthly, May, 34-36; and Haberkorn (1995, *ibid*).

<sup>15</sup> Jorari, A. and G. Haberkorn (2005), Providing context, reporting facts – upcoming challenges in improving data capture and quality in the 2010 round of Pacific censuses. Invited paper presented at the *International Association of Official Statistics satellite meeting on Measuring Small and Indigenous Populations*, 14 – 15 April, Wellington, New Zealand.

population registers – evidence-based decision-making, in the form of routine policy development and planning, remains a distant dream for many Pacific island governments and administrations. Yet despite crying out for quality data and information, most international donors seem reluctant to underwrite what are largely considered, ‘routine domestic Government operations’, such as census and survey activities. The logic of how this particular ‘routine’ differs from most other routine development-related activities is not always immediately visible, such as providing technical assistance and operational funds with law and order activities, with immunisation programs, with training teachers or nurses, or road and wharf maintenance and rehabilitation, all costing tens of millions of dollars in international development aid each year.

The bottom line is simple: with national censuses, civil registration systems, international migration registers, and periodic demographic and health surveys providing the context for policy development and planning, the justification for deciding to implement some development activities ahead of others, or deciding to concentrate particular activities in specific geographical areas or limiting to specific population groups – none of this will be possible without basic facts, without people able to collect, process and analyse them, convert them into information, and thus contribute to their actual use.

Population and development is about data collection and analysis, as much as it is about sexual and reproductive health and rights, migration and urbanization, economic policy and environmental legislation. Acknowledging this reality means rediscovering the spirit of Cairo, appreciating the complexity and complementarity of the various components of the *Programme of Action*, and recognizing different needs of different countries, at different stages of different development processes. Pacific island countries demonstrated in the lead-up to Cairo that while embracing the ICPD PoA, they had and continue to have, different population concerns and policy priorities, commensurate with national development conditions and efforts. It is now up to the international community to show greater flexibility within the PoA, in assisting these national efforts that reflect, first and foremost national, rather than international policy priorities<sup>16</sup>.

Acknowledging the latter will arguably be the single biggest test to the **continued relevance of Cairo**, one might even say, the survival of the ICPD PoA. The *Millennium Development Goal* framework is seen by many as providing such an opportunity; applied indiscriminately, however, its population and development value is quite limited, as in its present form it contains less policy relevance for the region than the ICPD PoA, in not addressing key population challenges which matter regionally, such as continued high population growth and persistent high levels of fertility, high levels of rural-urban migration/urbanization, and international migration. To avoid following the “application fate” of previous programs of actions – Rio, Cairo, Copenhagen, Beijing, to just name the Big Four of the 1990s – it is imperative that this framework is seen as a model for national policy development and not as *de facto* guidelines for allocating development funds, with the framework’s main users, national planners and policy-makers and their international development partners alike, given both the flexibility and mandate to ensure policy and program compatibility between this international framework and national priority plans for sustainable development.

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<sup>16</sup> Recognizing the importance of good population data for informed decision-making, the Australian Agency for International Development has recently allocated 1 million dollars to the Secretariat of the Pacific Community’s Demography/Population programme to assist Pacific island countries and territories with their upcoming 2010 round of census activities over the coming three years.



## **Annexes**

### Annex 1: Pacific island fertility developments, 1975 - 2003

Fertility levels, 1975 - 1985		Current, Most recent Fertility levels (around 1998-2003)			
TFR		Very high fertility (TFR > 6)	High Fertility (TFR 4.5 - 6)	Moderate to High Fertility (TFR 3.5 - 4.4)	Low to moderate Fertility (TFR < 3.5)
<b>Very high fertility (TFR &gt; 6)</b>	Nauru Solomon Islands Marshall Islands Vanuatu FSM Wallis and Futuna		Solomon Islands Marshall Islands Vanuatu	Nauru FSM	
					Wallis and Futuna
<b>High Fertility (TFR 4.5 - 6)</b>	PNG Cook Islands Tonga Samoa Kiribati CNMI American Samoa		PNG Samoa	Tonga Kiribati American Samoa	Cook Islands CNMI (between 1.6 - 3)
<b>Moderate to High Fertility (TFR 3.5 - 4.4)</b>	Niue New Caledonia Palau Fiji Islands French Polynesia Tokelau		Tokelau		Niue New Caledonia Palau Fiji Islands French Polynesia
<b>Low to moderate Fertility (TFR &lt; 3.5)</b>	Tuvalu Guam			Tuvalu	Guam

Source: Pacific island populations, 2004, Secretariat of the Pacific Community, Noumea. Pacific island population statistics, Bulletin No.42, SPC, 1995.

## Annex 2: Pacific island mortality developments, 1975 - 2003: Infant Mortality

Infant mortality Rates 1975 - 1980		Current, most recent Infant Mortality rates (1998 - 2003)			
IMR		Very high infant mortality (> 60/1000)	High infant mortality (IMR: 30 - 60/1000)	Moderate Infant mortality (IMR: 15 - 30/1000)	Low Infant mortality (IMR: < 15/1000)
Very high infant mortality (> 60/1000)	Vanuatu 94 Kiribati 82 Papua New Guinea 72 Marshall Islands 60		Kiribati 44.0 Marshall Islands 37.0	Vanuatu 27.0	
High Infant mortality (IMR: 30 - 60/1000)	FSM 51 Wallis and Futuna 49 Solomon Islands 46 Tuvalu 42 Fiji Islands 41 Tokelau 37 Samoa 33 Nauru 31	Solomon Islands (<) 66.0	FSM 40.0 Tuvalu 35.0 Nauru (<) 42.3	Fiji Islands 22.0 Tokelau 33.0 Samoa 19.1	Wallis and Futuna 7.4
Moderate Infant mortality (IMR: 15 - 30/1000)	Cook Islands 28 Palau 27 Tonga 26 French Polynesia 23 New Caledonia 21 CNMI 19 American Samoa 18			Cook Islands 21.0 Palau 17.0	Tonga 12.0 French Polynesia 6.9 New Caledonia 6.9 CNMI 5.0 American Samoa 8.5
Low Infant mortality (IMR: < 15/1000)	Guam 12 Niue 12			Niue 29.4	Guam 9.0

Source: Pacific island populations, 2004, Secretariat of the Pacific Community, Noumea. Pacific island population statistics, Bulletin No.42, SPC, 1995.

**Annex 3: Pacific island mortality developments, 1975 - 2003: Life expectancy at birth**

Life expectancy at birth 1975 - 1980		Current, most recent Life expectancy at birth (1998-2003)			
	e(0)	Very low life expectancy e(0) < 60	Low life expectancy e(0) : 60 - 65	Moderate life expectancy e(0) : 65 - 70	High life expectancy e(0) : > 70
<b>Very low life expectancy e(0) &lt; 55</b>	PNG	50	54.3		
	Kiribati	53		64.1	
	Solomon Islands	54		61.1	
	Vanuatu	55			67.3
	Nauru	56	55.4		
	FSM	58			67.1
	Tuvalu	59		63.4	
	Marshall Islands	60			67.6
	Fiji	62			66.6
<b>Low life expectancy e(0) : 55 - 65</b>	Wallis and Futuna	62			72.3
	Tonga	63			70.8
	Samoa	63			73.0
	New Caledonia	66			73.8
	Palau	66			68.7
<b>Moderate life expectancy e(0) : 65 - 70</b>	CNMI	67			75.2
	Cook Islands	67			71.2
	Niue	67			70.0
	French Polynesia	67			71.7
	Tokelau	68			69.9
	American Samoa	70			
<b>High life expectancy e(0) : &gt; 70</b>	Guam	72			77.7
					72.5

Source: *Pacific island populations*, 2004, Secretariat of the Pacific Community, Noumea. Pacific island population statistics, Bulletin No.42, SPC, 1995.