A farewell party at the Krishna Kumari City Corporation Girls High School in Chittagong, Bangladesh

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THE 2003 WORKSHOP ON
POPULATION AND SUSTAINABLE
DEVELOPMENT

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The 2003 Workshop on Population and Sustainable Development

With the support of the United Nations Population Fund (UNFPA) and the City of Kobe, AUICK hosted “The 2003 Workshop on Population and Sustainable Development” from July 22 to 31, 2003. Nine senior administrative officials from nine medium-sized cities representing nine Asian countries were invited to participate. The workshop was established in 1994 for the purpose of providing Asian city administrators with a comprehensive study course on population and sustainable development issues. Topics addressed during this year’s lectures and opinion exchange sessions included population issues and related urban problems, ageing, and city planning. Participants also made observational visits to Kobe Compound Industrial Park, city-owned welfare facilities, the Disaster Reduction and Human Renovation Institute, and the Port of Kobe. Everyone expressed particular interest in Kobe’s recovery from the Great Hanshin-Awaji Earthquake and said that it would serve as a good source of motivation for the development of their cities. Thanks to individual reports on current situations in participants’ cities and subsequent opinion exchange sessions, participants left the workshop with an increased understanding of the issues facing each other’s cities.

Objective

This course intends:
1. To develop a better understanding for the participants on a wide range of issues caused by the recent drastic population flow into urban areas and to provide them ideas on what to do for sustainable development.
2. To promote cooperation among Asian cities on a continual basis. The workshop covers a broad range of areas such as local administration system, statistics, population, family planning, public health, environment, and waste disposal.

Participants

The workshop is designed for senior administrative officials who advise on policy making in nine medium-sized Asian cities: Chittagong (Bangladesh), Chennai (India), Surabaya (Indonesia), Lalitpur (Nepal), Rawalpindi (Pakistan), Quezon (Philippines), Dehiwala-Mount Lavinia (Sri Lanka), Nonthaburi (Thailand), and Buôn Ma Thuot (Vietnam).

Participants (in alphabetical order of country):
Mr. Pranab Kumar Neogi
Chief Executive Officer, Central Administration, Narayanganj Municipality, Bangladesh
Ms. Apoorva
Joint Commissioner-Health, Health and Works Department, Chennai Corporation, India
Mr. Samsul Arifin
Head, Administration Division, Agriculture Department, Surabaya Municipality, Indonesia
Mr. Komal Prasad Kafle
Chief Executive Officer, Lalitpur Sub-Metropolitan City Office, Nepal
Mr. Hamid Ali Khan
District Coordination Officer, Rawalpindi District Government, Pakistan
Ms. Victoria Velasquez Loanzon
Special Assistant to the Mayor, Office of the Mayor, Quezon City Government, Philippines
Mr. Wanni Arachchilage Gunawardena
Ms. Ponsri Kitcham
Director, Bureau of Environment and Health, Nonthaburi Municipality, Thailand
Mr. Huynh Ngoc Luan
Chairman, People’s Council of Buôn Ma Thuột City, Vietnam

Schedule

1st Day: Tuesday, July 22

The participants arrived in Kobe from their respective countries.

2nd Day: Wednesday, July 23

In the morning, the workshop began with an orientation by Mr. Nobuyuki Morimoto, Manager of AUICK. Following this Mr. Kazutoshi Sayayama, President of AUICK, delivered a welcome message to the participants, and each participant introduced themselves.

Opening Ceremony

After the opening ceremony, Dr. Toshio Kuroda, a
Senior Adviser at the Population Research Institute and University Research Center, Nihon University, delivered a lecture on "Population Transition and Urban Issues." Professor Kuroda, who is the Dean of Japanese demographers, outlined major trends in world population as well as demographic transition in Japan. Then he proposed some suggestions to cope with the realities of population ageing, urban-rural imbalance, and other related issues. (details on p. 6)

Dr. Yutaka Kurosaki

In the afternoon session, Dr. Gayl D. Ness, Professor Emeritus of the University of Michigan, delivered a lecture on "How to Use Population and Health Data for Urban Planning." Dr. Ness outlined a global view in the relationships between population growth and major changes in energy, technology, and social organization. He stated that a number of points emerge from studies of population change and these can be widely applied. He also introduced "Stella," a simple and effective computer program that can be used to perform the analysis. (details on p. 9)

Dr. Gayl D. Ness

In the evening, a welcome reception was held.

3rd Day: Thursday, July 24

In the morning session, Dr. Hirofumi Ando, Professor of Nihon University, as well as President of AUCCK, delivered a lecture on "Policy Making Capability on Population and Sustainable Development." Dr. Ando discussed global population growth and the urbanization trend. Using the observations derived from "Land is Shrinking," which he co-authored with Prof. Ness, he also explained how developing Asian countries have responded to these problems. He also gave an overview of major population-related events since the end of World War II, in part to suggest that population issues are interrelated with political events. (details on p. 12)

Dr. Hirofumi Ando

In the afternoon session, the participants visited the World Health Organization Centre for Health Development (WHO Kobe Centre) located in HAT Kobe, an area developed under one of the major restoration plans after the 1995 Great Hanshin-Awaji Earthquake. Dr. Hiroshi Ueda, Technical Officer of the Centre, delivered a lecture on "Population Ageing and Community Care." He outlined global trends and the current situation of ageing using statistical data, and introduced WHO's basic stance of promoting community health care and other major activities in this field.

With Dr. Hiroshi Ueda (Second from the left in the front row) at WHO Kobe Centre

The participants visited the Great Hanshin-Awaji Earthquake Memorial Disaster Reduction and Human Renovation Institute, which was established to pass down the experiences and lessons from the Great Hanshin-Awaji Earthquake, and to contribute to promotion of the awareness of future damage from disasters both in Japan and abroad. The Institute also functions to provide information and advice on the kinds of aid and supports that should be sought, how to call for volunteers, and many other issues associated with crisis management in the event of a major disaster were to strike.

4th Day: Friday, July 25

In the morning session, Mr. Yuichi Honjo, Manager of the General Planning and Research Division, Planning and Coordination Bureau of the City of Kobe, delivered a lecture on "Population Issues in Kobe: Transition, Strategy and Challenges." Mr. Honjo discussed the transition of population and the economy in Kobe chronologically, and explained how the formulations of the "Master Plans" of the city of Kobe rely on these transitions. He also presented achievements in the city's restoration from the Great Hanshin-Awaji Earthquake with statistical data and pictures. (details on p. 16)

Mr. Yuichi Honjo

In the afternoon session, Mr. Shu-Yun Xu, Director of the Asia and the Pacific Division, UNPPA, delivered a lecture on "UNPPA's Goals and Activities in"
the Asian Region." Mr. Xu talked about global trends and the current situation of population explosion in Asia and the Pacific region, and introduced the UNFPA’s commitment to reproductive rights, gender equality and empowerment of women. Programmes in family planning, safe motherhood, adolescent reproductive health and prevention of HIV/AIDS were mentioned as some of the focuses of UNFPA. (details on p.20)

Mr. Shu-Yun Xu

5th Day: Saturday, July 26

The participants made a trip to Kyoto, Japan’s ancient capital. They explored temples, palaces, gardens and other sights, and got a glimpse of traditional Japanese culture.

Golden Pavilion

6th Day: Sunday, July 27

On the way back to Kobe, the participants stopped in Osaka. After they enjoyed a bird’s-eye-view of the city from atop Osaka Castle, they returned to Kobe and visited Kobe Fruit and Flower Park, a municipal facility that provides citizens with the opportunity to experience the rich culture that agriculture brings for the better understanding of the municipal goal to create a society co-existing with nature. At the end of the day, the participants went to the top of Mt. Rokko located 30 minutes away from downtown Kobe, and admired the panoramic view of the city.

7th Day: Monday, July 28

In the morning session facilitated by Dr. Hirofumi Ando, Professor of Nihon University, as well as President of AUCK, city report presentations were made by Mr. Pranah Kumar Neogi (Bangladesh), Ms. Apoorva (India), Mr. Samaul Ariffin (Indonesia), Mr. Komal Prasad Kafle (Nepal), and Mr. Hamid Ali Khan (Pakistan). In the afternoon session, the remaining cities presented their reports, which included Ms. Victoria Velasquez Loanzon (Philippines), Mr. Wanni Arachchilage Gunawardena (Sri Lanka), Ms. Ponsri Kitcham (Thailand) and Mr. Huynh Ngoc Luan (Vietnam). (details on p.24)

Session of city reports

8th Day: Tuesday, July 29

The participants took a one-hour boat trip around the central port facilities of the Port of Kobe. Among the sites observed were the Kawasaki factory and shipbuilding facilities and the Mitsubishi Heavy Industries complex. Led by Mr. Masaru Kurimura, Manager of the Planning Division, Engineering Headquarters, Port and Urban Projects Bureau, they also observed reclamation work under way at the Port Island Second Stage and at the new Kobe Airport construction site (currently 60% complete).
The participants visited "Shiawase no Mura" (literally, "Happiness Village"), a comprehensive welfare complex constructed by the City of Kobe. It includes a nursing home, a vocational training center for senior and physically disabled citizens, as well as various sporting, rehabilitation and recreational facilities. Each year, two million people use the facility, both citizens of Kobe and people from other nearby areas. The center also holds seminars and programs aimed at educating family members about the proper care of the elderly in the home environment. Participants were given a complete tour of the facilities by Mr. Kiyoyuki Kanemitsu, Managing Director of the center.

Finally, the participants crossed the Akashi-Kaikyo Ohashi Bridge, the longest suspension bridge in the world, and enjoyed its beautiful night view.

9th Day: Wednesday, July 30

In the morning, following a final evaluation session chaired by Dr. Ando, the closing ceremony was organized and Mr. Kazutoshi Sasayama, Chairman of AUIC, conferred a certificate to each participant.

In the afternoon, the participants paid a courtesy call on Mr. Tasuo Yada, Mayor of Kobe, who warmly greeted them and wished them luck.

In the afternoon, the participants visited the mountains north of the city that are being excavated to make land for development, and to provide the raw materials for the construction of the artificial island on which Kobe Airport will be built. Led by Mr. Kozo Yoshida, Manager of Works Coordination, Construction Division, Seishin Development Office, Port and Urban Projects Bureau of the City of Kobe, and Mr. Masahiko Takimi, Manager of Engineering Headquarters, Project Management Division, Port and Urban Projects Bureau of the City of Kobe, participants were able to observe the entire process as the earth and rock was excavated, transported to crushers and then moved to Sumaera Pier on a 20km-long system of conveyor belts. On average, 100,000 tons a day are moved. Participants were able to see how excess water was disposed of and the way in which part of the site where excavation work had finished was being prepared for development.

The participants paid another courtesy call to the City of Kobe Assembly. Mr. Masahiro Hirano, Chairperson, and Mr. Yasunori Taji, Vice-chairperson, greeted them. The participants were then guided on a tour of the assembly hall.

10th Day: Thursday, July 31

The participants departed Kobe and returned home.
Population Transition and Urban Issues

Dr. Toshio Kuroda*
Director Emeritus of
Population Research Institute,
Nihon University, Japan

I. Global Transition of World Population

1. Two Stages of Population Explosion

The so-called population explosion began in the second half of the 20th century. World population growth rate per year jumped from less than 1 percent in the first half of the 20th century to 2 percent in the twenty years from 1955-1975. Several countries in Asia have shown 3 percent or more growth rates per year.

Extremely high growth rates, the massive size of the projected world population and diversified vital events are necessarily bringing about revolutionary transitions in the context of social, economic, political and demographic fields. which have never been experienced in the long, long history of humankind. Now we are entering the second stage of world population explosion. World population is currently growing at a rate of 1.2 percent annually, implying a net addition of 77 million per year. The size of world population increased from 2.5 billion in 1950 to 6.1 billion in 2000. It increased by 3.6 billion in half a century, and is projected to increase to 8.9 billion by 2050, again an addition of 2.8 billion in half a century.

Against the background of unparalleled population growth in the developed countries (so called less developed countries), showing growth rates of higher than two per cent per year, such terms as the “population explosion” and the “population bomb” have been used to visualize the world population increase.

A first signal was given by “The Limits to Growth” (A Report for the Club of Rome’s Project on the Predigament of Mankind -1972). It was more than thirty years ago. However, it was really shocking scientific work, becoming the center of serious concern of the world’s intelligent people. They suggested that if economic growth and world population continue to increase in the future, world population will surely be facing miserable conditions of increasingly higher mortality and a severely degraded environment in the not distant future, due to the “limits to growth.”

A second warning is given by the continuous announcements of “World Population Prospects” published every two years. The newest one, the 2002 Revision, is the eighteenth undertaken by the United Nations Population Division since 1950. They have presented fundamental data directly or indirectly concerned with the sustainability of humankind in terms of economic, social, environmental and demographic issues.

2. Change of World Population Order

The 21st century has to face serious issues because world population is expected to change drastically. First is how to provide enough food to the additional population of 3 billion expected in the next half century, an increase from 6.1 billion in 2000, to 8.9 billion in 2050.

Second is the remarkable change of world population distribution among regions with different levels of economic development, social and political systems and diversified religions. For example, population size will be dramatically changeable between Africa and Europe. Africa’s population is projected to increase from 0.8 billion in 1950 to 1.8 billion in 2050, but Europe will be decreasing from 0.73 in 1950 to 0.63 in 2050. Political and economic issues will be extremely serious problems to solve.

Third is the ageing issue due to global reduction of fertility. Countries which are already below the replacement level of total fertility rate (less than 2.1) are now 59 (2000), 30.7 percent of total countries, and are expected to increase to 80.2 percent in 2050. It clearly demonstrates that world population will be quickly accelerating in ageing. The proportion of population aged 65 and over is now 6.91 percent in 2000, but will quickly reach 15.63 percent in 2050. It should be noted that the ageing index in 2050 is composed of quite diversified levels of regions and countries.

Ageing issues here should not be understood simply as increasing trends, because age structure sooner or later tends to be inverted. It indicates that the basic structure of society has to inevitably and fundamentally be reconagnized in order to be able to adjust to drastically changing economic and social functions of inverted age and sex structure. Ageing of the world population is shown here by a few indicators.

A. Proportion of aged population (65+) will increase from 6.9% in 2000 to 15.6% in 2050.
B. Dependency ratio: $\{(0-14)\times(65+)\div(15-64)\times100$
58.4% (2000) → 57.7% (2050)
C. Potential Support Ratio: (15-64) / (65+)
9.1 persons (2000) → 4.1 persons (2050)
D. Total Fertility Rate (Below Replacement Level)
Number of countries: 59 (2000) → 154 (2050)
% distribution 30.7 → 80.2

Rapid ageing of population will be seen by countries in the world that attain below replacement level of TFR around 2050. Drastic reductions in TFR is the basic reason for the severe ageing process. Countries with below replacement level, projected by the U.N. Population Division, will comprise 80 percent of all countries by 2050, excluding African countries.

3. Last Stage of Stabilization

World population is now facing the second stage of growth after exploding expansion in the latter half of the 20th century. In spite of a remarkable reduction of world population increase rate, the already remarkably expanded world population base will continue to increase, even under a low rate of increase.

However, it is quite interesting to find new ideas of research and repeated world population projections produced by the United Nations Population Division and other organizations including works of IIASA (International Institute for Applied Systems Analysis), which are suggesting the end of world population increase before the end of the 21st century. Global population will stop growing due to the balancing of fertility and mortality. In other words world population will be stabilizing at around 10 billion in the foreseeable future.

4. Demographic transition theory and world population transition

Demographic transition theory has been a powerful thesis to explain changing stages of population in connection with economic and social development, based on actual historical experiences.

In general, this theory is composed of three stages of different combinations of fertility and mortality.

Among many scholars concerned with this topic, Professor Notestein's (P.W.) work on demographic transition stages should be mentioned here because his idea seems to reasonably explain future trends in terms of the end of the demographic transition stage. A few words are introduced here.

According to his statement, three demographic types or stages of demographic evolution are as follows:
(a) Population with "incipient decline" or transition completed, characterized by a fertility rate declining to or even below the replacement level;
(b) A transitional type of population with a rate of growth which is still relatively rapid, but where a decline in the birth rate is well established; and
(c) Population with high growth potentials or transitional growth not yet begun, where fertility remains high with no tendency to decline and where the high, but declining death rate is the main growth factor.

While the idea of a demographic transition has been widely adopted and is frequently used as a generalized description of the evolutionary process, a number of writers have emphasized its limitations as a theory. However, attention should be paid to Notestein's idea about the last stage of transition theory. It seems to me that he was thinking about what will be followed after the last stage of completed transition, which may be characterized by population decline. It is surprising that his reasoning was born through hard work on the World Population Projection, requested by the League of Nations half a century ago.

In any event, demographic transition in terms of the global population standpoint is expected to be completed, and characterized, by stabilization of population change through balancing of fertility and mortality. We are seriously concerned with fundamental change of human society and must challenge this new unprecedented world with new ideas free from conventionalism.

II. Demographic Transition in Japan

1. Overview of Demographic Transition in Japan

Japan's experience in demographic transition seems to be noteworthy, theoretically and practically, in terms of cultural difference. Demographic transition has been characterized by vital change patterns realized in western countries before World War II. However, typical behavioral change of population in Japan was only achieved after World War II and in a very short period of only 10 years, which was never experienced before in western countries.

However, it should be noted that Japan's own western pattern of demographic transition has been accepted by several Asian countries, including Taiwan, Korea, China and some other countries which are closely located with each other regionally and culturally. Rapid diffusion of fertility behavior in several Asian countries, which are then labeled as so-called less developed countries, raised serious discussion on how to integrate their experiences into a so-called western pattern of demographic transition theory. Dr. Irene Taeuber, a famous demographer on Japan, stressed that Japan's transition is essentially similar to the western pattern but not the same. While she realized there were very typical transition stages in Japan, which occurred much later than those of western countries, she also wondered about the effects of Japanese culture which seemed to be favorable for a rapid spread of demographic transition in neighboring Asian countries. This is a very important sequence of transitional process, suggesting that demographic transition could be recapitulated even in non-western, less developed countries.

2. Rapid Decline of Fertility and Mortality

Demographic transition processes in Japan are
remarkable in the post-World War II period, when major trends of demographic transition process are differentiated. Figure 1 shows general trends in numbers of births and deaths which can indicate more clearly changing trends than crude rates. The first stage is characterized by a large scale baby boom period during three years, 1947-49, showing a 2.7 million average per year, followed by a rapid decline to 1.6 million in 1957. Then, through a stabilizing period, 1958-1964, a second baby boom period, 1965-1974, when the first baby boom generation also bare large numbers of children.

Lastly, a second declining period of fertility births started, continuing to the present time, from more than 2 million per year to 1.1 million in 2002.

On the contrary, trends in numbers of deaths are quite simple, and represent an almost straight line (See Figure 1). It should be pointed out that after a long period of steady decline, a very slow rising trend can be recognized. However, it should also be noted that an increasing trend in number of deaths is not due to rising higher mortality. It is caused by the continuously expanding aged population (as a proportion of overall age.)

Finally, it is important to see that the natural increase resulting from differences in births and deaths, revealed by the space between the two lines, is declining rapidly since 1974 and is now approaching zero (See Figure 1).

Figure 2 shows trends of fertility transition in terms of Total Fertility Rate, in order to clarify fertility behavior. The number of babies in terms of TFR (average number of babies during the reproductive period per woman) was extremely large, 4.3 to 4.5, with the exception of 1966 (1.53). TFR generally continued to decline. In Japan it was only 1.32 in 2002, which is one of the lowest rates in the world.

3. Ageing Issues and Implications

It is well-known that fertility decline necessarily brings about population ageing, particularly in the case of rapid, continuous decline of fertility. Ageing processes are expressed by distributional change of age composition, dependency ratio, median age of population, ageing index and so on. The percentage of the elderly population shows great change from 4.9 in 1950 to 17.3 in 2000, more than three times in half a century. It is expected that it will reach 36 per cent by 2050, more than one third of the total population.

We must pay serious attention to the terrifying disruption caused by the completely inverted age structure of the total population. It means drastic changes of social and economic systems and functions, never experienced in human history, and is surely a great challenge for world population which demands urgent solutions.

A simple idea of newly revised classifications of conventional broad age groups is presented here based on a newly changing educational system, employment trends and people's attitude toward retirement.

In general, broad age classification of the population is based on three groups of 0-14, 15-64, 65 and over. This conventional system does not fit in with reality. A newly proposed one is 0-19, 20-74, and 75 and over. Longer education periods and a strong desire to continue to work after retirement and also better health conditions are taken into consideration. It is extremely interesting to find that a comparative observation of the conventional and new age classification of the population pyramid can easily show how there is quite a different structure in the century from 1850 to 2050 (See Table 1).

### Table 1: Inverted Population Pyramid, Japan

<table>
<thead>
<tr>
<th>Conventional Age Group</th>
<th>1950</th>
<th>2000</th>
<th>2050</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elderly (65+)</td>
<td>4.9%</td>
<td>17.3%</td>
<td>35.7%</td>
</tr>
<tr>
<td></td>
<td>4 million</td>
<td>22 million</td>
<td>35.9 million</td>
</tr>
<tr>
<td>Productive (15-64)</td>
<td>59.7%</td>
<td>67.9%</td>
<td>53.6%</td>
</tr>
<tr>
<td></td>
<td>49.7 million</td>
<td>86.2 million</td>
<td>53.9 million</td>
</tr>
<tr>
<td>Young (0-14)</td>
<td>35.4%</td>
<td>14.6%</td>
<td>10.8%</td>
</tr>
<tr>
<td></td>
<td>29 million</td>
<td>18.5 million</td>
<td>10.8 million</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>New Age Group</th>
<th>1950</th>
<th>2000</th>
<th>2050</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elderly (75+)</td>
<td>1.3%</td>
<td>7.1%</td>
<td>21.5%</td>
</tr>
<tr>
<td></td>
<td>1.1 million</td>
<td>9.0 million</td>
<td>21.6 million</td>
</tr>
<tr>
<td>Productive (20-74)</td>
<td>53.1%</td>
<td>72.3%</td>
<td>63.8%</td>
</tr>
<tr>
<td></td>
<td>44.1 million</td>
<td>91.7 million</td>
<td>64.1 million</td>
</tr>
<tr>
<td>Young (0-19)</td>
<td>45.7%</td>
<td>20.5%</td>
<td>14.8%</td>
</tr>
<tr>
<td></td>
<td>38.0 million</td>
<td>25.0 million</td>
<td>14.9 million</td>
</tr>
</tbody>
</table>
Comparison of Dependency Ratio

<table>
<thead>
<tr>
<th>Age Group</th>
<th>1950</th>
<th>2000</th>
<th>2050</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conditional age classification</td>
<td>67.5</td>
<td>47.0</td>
<td>86.8</td>
</tr>
<tr>
<td>New age classification</td>
<td>88.5</td>
<td>38.2</td>
<td>56.7</td>
</tr>
<tr>
<td>(2 + 3)</td>
<td>131.1</td>
<td>81.3</td>
<td>65.6</td>
</tr>
</tbody>
</table>

It is easily understood that the population pyramid is inverted by the remarkably higher percentage of elderly population compared to young population. This implies that the historical structure of human society should be fundamentally modified.

One of the noticeable points is that the new age classification of dependency ratios will be much lower in the first half of the 21st century. That will be much lighter by 20 to 35 percent, compared with conventional age classification.

This is the first step to be implemented as quickly as possible, because the revolutionary change of population is now a basic agent affecting social and economic development. Consequently, readjustment of changing age structure should be considered when social and economic dependency ratios are favorable, according to new age classification patterns.

*The Author is also a senior advisor of University Research Center of Nihon University, and is now serving as President of the Japanese Organization for International Cooperation in Family Planning. He is also Professor Emeritus of Jilin University (China), and also Doctor Emeritus of Economics of Tong-A University (Korea). He received the United Nations Population Award in 1997.

Population and Sustainable Development

Dr. Gayl D. Ness  
Professor Emeritus,  
University of Michigan, USA

Introduction: A Global View

Our modern era, roughly the past two centuries, has seen a dramatic revolution in world population dynamics. For hundreds of thousands of years, the human population grew very slowly. Just a thousand years ago the world population totaled about 250 million, slightly less than the population of the United States today, and was growing at about 0.1 percent.

In the 18th century world population began to grow more rapidly; exponential growth gave us 6 billion in 1990, and the prospect is for continued growth giving us a world population of perhaps 9 to 12 billion by the end of this century. Figure 1 shows that this growth was accompanied by urbanization and industrialization. Our era is marked by the interlinked revolutions of population growth, urbanization and industrialization.

Two Modern Transitions

These combined revolutions did not occur throughout the world at the same time. There were in fact two major waves of change. Europe, North America, Australia, New Zealand and Japan first experienced this change, which was largely completed by 1950. The population change was marked by what is called the "Demographic Transition," or the transition of a population from high to low birth and death rates. First mortality began to fall, late in the 18th century. It fell gradually, largely through a generally rising standard of living. While mortality fell, fertility remained high, giving a relatively brief period of rapid population growth. Then fertility fell to come into line with the lowered mortality. The fall in fertility is generally related to the reduced value of children. Traditional rural agrarian society found children a valuable asset. Modern urban industrial society finds children more a liability. It is important to note that the fall of both mortality and fertility were not accompanied by, or accomplished with, the development of modern medical technology that could limit either mortality or fertility.

By 1950 the "Western" urban-industrial-demographic
transition had produced two different worlds. Alongside the Western urban-industrial world with low-fertility and mortality were Africa, Asia and Latin America which continued to show high mortality and fertility, and low levels of urbanization and industrialization. These were designated the "Less Developed Regions" (LDRs) by the United Nations. The transition is now taking place in those LDRs. Mortality and fertility are falling and urbanization and industrialization are also moving ahead. What is radically different, however, is the far greater speed of the transition and the much larger numbers involved.

Mortality reductions that took one or two centuries in the West are now being achieved in one or two decades. Similarly, fertility declines that took one or two generations in the West can now occur in two decades. In addition, for reasons that are not fully clear, traditional birth and death rates in these LDRs were typically much higher than those of the West prior to the transition. This means a large difference in growth rates. When the West made its transition, population growth rose to about one percent per year, implying a doubling time of 70 years. In the current transition, growth rates can reach above three percent, implying a doubling time of only 20 years.

The numbers involved are also strikingly different. Population growth during the earlier Western transition involved scores of millions; those in the LDRs today involved billions. The same holds for the urban transition. From 1890 to 1990 the European urban population grew from about 50 million to 400 million. In the past half century the LDR urban population grew from 450 million to 1.9 billion.

Although the greater speed and size of the current transition places great strains on the human population, the forces responsible for the difference offer great opportunities to advance human welfare.

A major reason for the greater speed in the current transition lies in a three-part development: 1) the emergence of new and powerful medical technologies for reducing both mortality and fertility; 2) the growth and spread of new global organizations to move this technology rapidly throughout the world; 3) the emergence of new policies, especially with respect to population growth.

The latter is particularly revolutionary. Until 1952 virtually all governments throughout history have been "pronomalist"; they have promoted births and often vigorously opposed any movement to limit fertility. This is because all governments have viewed people as a resource: to be taxed, worked and sent off to war. Thus governments have wanted people and the logical policy implication was to promote fertility. In 1952 this changed when India became the first government to adopt an official policy to limit population growth by limiting fertility in marriage. Since then, most governments of the LDRs have adopted similar policies: either direct policies to reduce fertility with government programs, or indirect policies to permit, and sometimes assist, non-governmental organizations to promote fertility limitation. In the past half century we have seen the growth of family planning programs throughout the Less Developed Regions.

Limiting fertility has done much to improve welfare, since high fertility typically means that women bear children early, frequently and late in their reproductive lives. All three are known to be killers of women and children. Thus family planning programs have an immediate impact on the welfare of women and children, the people typically left behind by most development programs. No other development programs have this immediate impact on the welfare of women and children.

Governments throughout the world have accepted responsibility for promoting human welfare. Many, but not all, have recognized that promoting family planning and reproductive health is one of the surest ways to promote welfare. The technology and organizational designs are readily available for any government that wishes to use this proven strategy to promote welfare. But there are other problems as well that come from rapid population growth.

Rapid Population Growth and Age Structure: Young Males and Dependency Ratios

Rapid population growth in the LDRs typically implies a rapid growth in young people. This means an immediate demand for more schools and soon for more jobs as well, as those young people reach working age. An especially critical group is young males, age 15-19. This is typically a highly volatile population. Young males are energetic, strong, and exhibit the kind of fearlessness that comes from lack of experience. They feel themselves to be invulnerable. They can be led to do great good, but also to do great evil. Urban riots and ethnic riots typically find young males doing the most damage. This places especially heavy demands on the leadership of the LDRs. Constructive leaders, such as Mandela and Havel, can bring us through volatile transition periods with little bloodshed. Demagogues, on the other hand, cynically use the young males to beat up opposition and perpetrate violence. Leadership is the important determinant, but the demographics of the age structure with rapid population growth mean that the leadership will be severely tested. In the Least Developed Regions, the poorest of the poor, the numbers of young males 15-19 are now some 25 million and will almost certainly grow to 75 million before their numbers begin to decline. These are the countries without the resources to provide schools, jobs or hope to these young men. The potential for instability is great simply from these population dynamics.

There is another bomb lurking in the age structure that comes from rapid population growth. It is called the "Dependency Ratio," the ratio of people in the dependent ages (0-15 and 65+) to the numbers of people in the working ages (15-64). As the dependency ratio rises, the burden on the working age population increases. Rapid population growth increases the burden.
of the dependency ratio. This means it is more difficult to provide the schools and jobs that these young people need. Fertility decline reduces that burden. This is another indirect benefit that comes from effective population programs that promote reproductive health and limit fertility.

In effect, governments have found that they can promote welfare through addressing the problem of rapid population growth. But they also face problems of rapid urbanization. Here other strategies are needed.

## Modeling Urbanization and Population Environment Dynamics

Urbanization appears inevitable and unstoppable. But urbanization brings both benefits and costs. The task of government, therefore, is to work out strategies and tactics to enhance the benefits of urbanization and minimize its costs. There are many innovations in the broad field of urban planning that have attempted to address the problem of urbanization. AUICK undertook one effort to address this issue in a research project to model urban population environment dynamics. This used dynamic systems modeling to examine five cities: Faisalabad, Pakistan; Khon Kaen, Thailand; Cebu City, The Philippines; Pusan, South Korea; and Kobe, Japan. The project resulted in the publication of a book, Five Cities: Modelling Asian Urban Population Environment Dynamics (Singapore, Oxford University Press, 2000).

The value of dynamic systems modeling is that we construct models whose basic assumptions are clear, visible and can be contested and changed. This is preferable to our common ways of thinking, in which we use implicit models in our heads to tell us how things work. Those models typically do not show us the assumptions on which they are based, so they give us no way to test them. With dynamic systems modeling, we construct models, test them, and run future scenarios to guess at what will happen in the future. These can be especially useful tools for urban planning. They demand that people from different specializations in science and government come together to think about the future. Moreover, they focus our attention on a specific local scene. One of the major findings in all our research on population-environment dynamics is that they are location-specific. It is at the local level that specific problems arise and where specific solutions must be developed.

For AUICK’s study of Five Cities, a general model was adopted, which can be seen in Figure 2 below. This identified the environment as four conditions: air, water, energy and land. It also identified three institutional areas — the economy, social services, and transportation — which urban administrators have been telling us in all our research are the critical areas for their cities. The arrows show how each of these seven areas is connected with other areas. This is called a “Metabolic Model” of urban population environment dynamics. The outcome of any metabolic process is life itself, which can be seen as a variable, measured as the quality of life. With a vigorous and well working metabolic process, the quality of life will be high. If the metabolic process breaks down or is less vigorous, the quality of life will be low. We place the quality of life as the major outcome of the metabolic process in the center of the model. The inner circle denotes a more subjective quality of life, which we do not know how to measure in any systematic and cross-culturally viable fashion. Around that circle is another, the human health system, where we have good objective measures of the quality of life in such things as the infant mortality rate, maternal mortality rate, or the incidence of various diseases.

**Figure 2**

A Metabolic Model of Urban Population Environment Dynamics

Local teams of social scientists and urban administrators worked together using this model to gather data and model the relationships. They used a simple and effective computer program, STELLA, to perform the analysis. The time period was 1970 to 2020. This gave the analysts 25 years of data on which to build the model and its interconnections and 25 years in which to run a variety of future scenarios. Here we can provide only a brief summary of some of the findings.

Faisalabad, Pakistan lies in the upper portion of the Indus Valley, an extremely arid region made productive by the massive Himalayan snowfields that feed the Indus river system. It is a relatively new city, built by the British at the end of the 19th century as they brought river waters through the Chenab canal to water the arid land. The question raised here is whether irrigated agriculture is sustainable in such an arid land. The future population scenarios of the city included high, medium and low estimates. The high scenario envisaged the city growing from its current 2 million to over 5 million. This assumes an agricultural collapse from salinization of the land, and a massive exodus from the land to the city. This also implied increasing poverty. The low scenario assumed that the problem of salinization could be solved and that the government would succeed in providing effective health care, education and family planning to the city. This would raise the population from 2 to 3.4 million and would imply a substantial increase in the quality of life.

Khon Kaen, Thailand lies at the heart of the Northeast Region, some 250 miles NE of Bangkok. It is a relatively small town, of 135,000 people, but is the
third largest, after Bangkok and Chiangmai. Unlike Faisalabad, it has no problems with water or population growth. Drained by three rivers that run into the Mekong, its supplies are sufficient for much future population growth. And with Thailand's highly successful national family planning program, fertility and population growth have slowed to replacement levels and below, so there is no prospect of stress from rapid population growth. Its young male population is mostly in school, sports, Boy Scouting and has some prospect for a good future. AND, its numbers are declining.

What it needs for better urban planning is better data. Its population data do not allow urban managers to know current birth and death rates. Births are registered in hospitals by place of birth, not place of residence. Thus when a new maternity hospital came on line in 1972, the city's apparent birth rate shot up from 20 to 27, even as the total fertility rate was declining rapidly. The water quality data show the same figures for years on end, down to three decimal points. Primary and secondary school enrollments vary radically from one year to another, and are far above what they should be for a city this size. The study identified many serious gaps in data and suggested a city-university partnership to produce better data, which would permit effective modeling for the future.

Cebu City, The Philippines is the country's second largest city, and was in fact the first center of the Spanish colonial government in the 16th century, before it moved to Manila. It lies at the center of the island of Cebu, which runs north and south at the center of the Philippines archipelago. The city has a raft of problems. Air pollution is at "dangerous" levels whenever it is measured. Dirt roads, heavy truck traffic that flows through the town on the island's main N-S artery, and countless charcoal fires from restaurants and the homes of the poor make the air almost lethal to breathe. In addition, the city draws its water from a deep aquifer, charged over millennia by tropical monsoon rains. But now uncontrolled well drilling by the affluent population moving up into the highlands around the city, and general water consumption that rises above recharging is reducing the aquifer. The salt-fresh water line in the aquifer is receding some kilometers each decade, and soon the city will have no effective water supply. In all of this the city and national governments appear powerless. Cebu's problems lie in the overall weakness of the Philippines' political and administrative systems.

Pusan, South Korea is the country's largest seaport and second largest city. It has risen from the ashes of near total destruction in 1951 to become a vibrant, productive city that gives its citizens an exceptionally high quality of life. With one of Asia's most successful primary health and national family planning programs, mortality and fertility fell rapidly after 1960 and today the city faces no major population problems. A shift from coal dust to oil as the city's major fuel source has brought great improvements in air quality. A major problem lies in water quality. The city's water supply is drawn from a river whose upstream cities have embarked on massive industrialization programs without investing in effective sewage discharge systems. Pusan must spend more and more for water treatment.

Kobe is Japan's largest seaport and a vibrant international city with a great deal of autonomy. Like Pusan it rose Phoenix-like from the ashes of near total destruction in 1945 to provide its 1.3 million citizens with an exceptionally high quality of life. Its geographic constraints, lying on a narrow shelf some 4 kilometers wide by 20 kilometers long between sharp mountains and a deep sea coast have given it advantages and problems. The constraints of the mountains led it to develop a "mountains to the sea project" in the 1950s. Tops of the Rokko Mountains were cut off to provide fill for islands in the bay and room for new towns in the near interior. Port and Rokko Islands were the major products, which were wildly successful in bringing wealth to the city and a high quality of life to its citizens. The future of this success poses many problems, however. One lies in the aging of the population. The proportion over 65 is already greater than those under 15, and the aging problem will continue to grow. Wealth and effective planning have greatly reduced the emissions of industry and vehicles, but wealth also implies an ever-increasing number of vehicles. Great improvements in emissions control technology will be required to keep air quality high despite the expected growth of vehicles. Kobe is a reminder that population-environment problems are never solved. One solution always leads to another problem.

These brief summaries illustrate how population dynamics vary with different local conditions. They also show that population analyses are important components in planning for sustainability.
Global population growth

The global population did not start to increase rapidly until after reaching one billion in 1800. From this point onwards, the global population increased sharply. Having taken until 1804 to reach one billion, the figure of two billion was reached in 1934, 130 years later. The next billion took a mere 30 years, the next just 12 years. Now there are 6 billion people on the planet, and, according to the U.N., it is projected to reach 9 billion by the year 2050.

This figure of 9 billion is the most probable option. A worst-case scenario suggests a figure of 11 billion - 5 billion more than the current population - is possible. This scenario will come about if efficient socioeconomic policies, particularly family planning, are not implemented by governments of developing countries. The best-case scenario suggests that a figure of 8 billion, just 2 billion more than at present, is attainable if efficient family planning programs are implemented along with improving educational opportunities for women and encouraging them to join the workforce. (See Figure 1)

Figure 1
Annual growth rate for the world and major development groups, 1950-2050


The overall global population growth rate, which peaked in the 1960s, is declining. Though it is also declining in developing countries, the rate is still very high, and the absolute number of people is increasing. Thus, the global population continues to increase very rapidly. Current estimates show that the world's population is increasing by 77 million people each year. The rate in developed countries is decreasing much more quickly.

The total fertility rate is also decreasing globally. The total fertility rate is defined as the average number of children a woman is expected to give birth to during her lifetime. Fifty years ago the global figure was three children per woman. In the developing world this figure was considerably higher up until about 1970, at six children per woman. Since 1970 the fertility rate in the developing world has started decreasing - mainly due to effective family planning programmes, with a projected figure of two children per woman to be reached by the year 2050. (See Figure 2)

Figure 2
Total fertility trajectories in the medium variant for the world and major development groups

In 1960 the global population stood at 2.5 billion people. By 1999 it reached 6 billion, of which 4.9 billion lived in the developing world, the vast majority (3.9 billion) in Asia.

Urbanization

In addition to the increasing population, there is also the related issue of increasing urbanisation in the developing world. Currently, 46 per cent of the world's population lives in urban areas. However, the urban population is increasing three times as quickly as the rural population, and by the year 2020 it is estimated that more than 50 per cent of the world population will live in urban areas. (See Figure 3)

The term "megacity" is used to describe cities which have a population of over 10 million. In 1970, there were just 11 such megacities, six of which were in
developed nations. By 2000 this figure more than doubled, to 25, and it is projected that by 2015 there will be 33 such megacities. What will not change, however, is the number of megacities in the developed world. That figure will remain at six. So, in 2015, of the 33 megacities, 27 will be in the developing world. Of the six megacities in the developed world, two are in Japan, namely the Tokyo and Osaka greater metropolitan areas.

A further urbanisation trend is that urban areas in general - not just megacities - are getting larger and larger. The number of Asian cities with between one and five million people in 1950 was 26. By the year 2015 this figure is expected to reach 236. However, the proportion of the urban population living in megacities - as opposed to other kinds of cities - continues to increase. Thus, though the overall urban population living in smaller cities continues to increase, proportionally it is decreasing.

As of 2000, 12 of the world's 15 largest cities are in developing countries. By 2015, this will have increased to 13, when "Metro Manila" (the Manila greater metropolitan area) will have joined the ranks.

Asian countries' responses

Bearing in mind the rapid increase in population and the accompanying increase in urbanisation, let us see how the developing Asian countries have responded. The following observations are derived from Land Is Shrinking, co-authored with Prof. Nese of the University of Michigan.

Developing countries' attitudes towards the problems can be classified into three categories, for simplicity's sake called A, B & C.

A = countries with a family planning programme and official government policy
B = countries with family planning programme only
C = countries with neither family planning nor policy

In 1952, India became the first developing country to formulate a national population policy. Following India's lead came Pakistan (at that time including Bangladesh, then known as East Pakistan) and South Korea. The world's most populous nation, China, had, under the leadership of Mao Tse Tung, resisted family planning policies. This attitude changed after the disastrous famines of 1958-1961 when an estimated 30 million people died. Soon afterward, China started addressing the problem seriously, in turn followed by Fiji, Taiwan and numerous other Asian countries. In contrast, Cuba was the first Latin American country to launch a family planning program, and Tunisia the first Middle Eastern one, in 1952. (See Figure 4)

By 1970, the majority of Asian countries fell into category A. However, only about half of Latin American and Middle Eastern countries had achieved this goal, and Africa lagged far behind, having some family planning programs, but little in the way of government policies.

Figure 4
Percent of High-Fertility Countries with Fertility-Limiting Programs

Reasons for Asian countries' responses

Why then did Asian countries respond to the population problem and formulate population policies and programs more rapidly than developing countries in other parts of the world?

1) Higher population density.
   As an example, Japan has a population density of 8,000 people/km² of arable land. The average population density in Asia is 10 times that of Latin America or Africa and so the issue was far more readily apparent to policy planners and government officials.

2) Planned economic development process.
   Many Asian countries had established coherent economic strategies and plans immediately after their independence. To ensure the success of these economic plans, population factors were taken into serious consideration. They also had reasonably accurate population statistics.

3) Well-established organisations and institutions.
   Asian countries in general had efficient and reliable population data, either through civil registration systems and/or censuses. They ensured that governments were able to accurately provide the statistics required for 2) above. This was not the case in Africa, for example. By 1970, some 22 African countries had still not taken modern censuses. Policy formulation is impossible if a
government does not know how many people live in the country.

4) Colonial legacy.
Though a controversial point: the colonial experience and associated administrative infrastructure present in many Asian nations as a legacy, primarily, of the British Empire, meant that society had some kind of order not present in the same way in African and Latin American nations. Though this system had primarily been for the benefit of the colonial powers, mainly for conscription and taxation purposes, its relative efficiency could be applied to other aspects of government. Connected to this was the experience of the independence movement leaders, who had to know how many people there were in order to provide for and cater to in an effective fashion, once they had assumed power.

5) No serious religious or ideological opposition to family planning.
In Latin America in particular, a strong belief in Marxist ideology - which is opposed to family planning - led to a slower process of population policy formulation. The major Asian religions (e.g. Buddhism, Hinduism) harbour no objections to family planning. Even in the one predominantly Roman Catholic country, The Philippines, the Council of Bishops there openly supported family planning initiatives in the 1970s. This was not the case in Latin America, where the influence of the Roman Catholic church was very strong, as it was in some parts of Africa which had either religiously inclined Western-educated leaders or strongly pro-Marxist regimes.

Summary

In summary, the emphasis should be on the following three:

1) Accurate data are essential for solving demographic and related issues.
A local example: Mayor Sasayama of Kobe, immediately following the Great Hanshin Earthquake in 1995, sought to know exact casualty figures in order to formulate a coherent response to the disaster.

2) The organisational capacity to move people, money and materials.
Another local example: Again, Mayor Sasayama had a good staff, and was able to cut through the central government's red tape.

3) Political commitment by the government, at the central or local level is essential for effective population policy formulation and implementation. Asian countries were fortunate to have many leaders with strong political commitment to solve population issues.

Major population-related events since the end of World War II

To conclude an overview of major population-related events since the end of World War II was presented, in part to suggest that population issues are interrelated with political events.

- **1945** - End of World War II. Japan had a sudden influx of one million Japanese citizens returning from former colonies.

- **1950-3** - Korean War

- **1952** - Establishment in London of the International Planned Parenthood Federation (IPPF). The pioneers, certainly initial leaders, were the Indian representatives, acutely aware of the problems facing the world's second most populous country.

- **1953** - The first meeting of population experts and academics by the UN and the IUSSP. Held in Rome.

- **1958** - President Eisenhower disapproved the use of US overseas aid for population activities (i.e. family planning).

- **1962** - The first Asian Population Conference is held in New Delhi, India.

- **1965** - A major meeting of population experts and academics was held under the auspices of the U.N. in Belgrade.

- **1966** - U.N. ECOSOC passed a resolution establishing a trust fund to be used to pay for studies and activities related to population issues. This trust fund was established with $500,000 from the Danish government.

- **1967** - Fifteen years after the formation of the IPPF, the U.N. is finally authorised to work in the field of population studies and a U.N. General Assembly Resolution is passed to this effect.

- **1967** - The U.S. reverses its 1958 stance on the use of aid for population-related activities.

- **1968** - U.N. Human Rights Conference, held in Teheran, recognises family planning as a human right.

- **1969** - U.N. population issues trust fund established in 1966 is changed to an official U.N. fund. From small beginnings ($500,000/year in 1966) the fund increased in scale and importance to reach a value of $200 million/year by 1987.

0 1972 - Ten years after the inaugural Asian Population Conference, a second one is held in Tokyo.

0 1974 - The World Population Conference in Bucharest, Romania is marked by strong disagreements between the developed world (supported by some Asian nations) and the developing world. Developed nations strongly advocated population-control measures, but major developing nations such as Brazil, China and Nigeria were opposed. The world's population reached 4 billion.

0 1984 - International Population Conference held in Mexico City. In a reversal of the 1974 stance, almost all developing nations now supported population planning measures, while the U.S. - with a conservative administration under President Reagan - once again prohibited the use of overseas aid to be used for such activities. This took effect from 1986 and lasted until 1992 when President Clinton's administration once again reversed U.S. policy. There is a continuous struggle between conservative and progressive elements in the U.S. over family planning as a human right.

0 1987 - The world's population reached 5 billion.

0 1994 - International Conference on Population and Development (ICPD) held in Cairo. This conference focused on the role of women and how best to tackle the population issue at the micro-level.

0 1999 - The world's population reached 6 billion. United Nations organised ICPD+5 session to review the progress made since 1994.

0 2001 - 9/11 attacks in New York. One result of this has been a short-sighted shift in focus away from population-related issues to security-related ones.

Final Comment

Population issues can be highly political and controversial since they deal with fundamental human rights and value systems. In order to help solve these issues, the most important and effective means will be consensus building among peoples of different socio-economic and cultural backgrounds.

Population Issues in Kobe: Transition, Strategy and Future Challenges

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Kobe: an overview

The city of Kobe is located some 500km west of the nation's capital, Tokyo, and it is one of the three major cities of the Kansai region, the other two being Kyoto and Osaka. Kyoto is the nation's old capital, and Osaka has a long tradition of being a merchant city, while Kobe is known as a major international port city. Kobe is approximately 550kld and has a population of 1,517,000, a little over 1% of the nation's total.

Kobe's inner city is relatively small, sandwiched between a mountain range and the Seto Inland Sea. The inner city is 30km long (east-west), but just 2-4km wide (north-south). Because of its long, narrow shape, the city has faced population pressures and the decision was made after World War II to reclaim land to help ease the situation.

In 1868, when Kobe Port opened to the world, the then town had a population of just 20,000. Since then there has been a huge increase in the number of its inhabitants. What challenges has the city faced, and what measures have been taken to counter them?

The picture at the time of opening port.
Kobe: background

The water off the coast of Kobe is very deep, certainly compared with the port facilities of the nearby city of Osaka which, being shallow, needed a considerable amount of engineering work before the port became functional. Kobe is also, by virtue of the mountains behind the city, blessed with many rivers and streams. These waterways have deposited a lot of silt as they reach the sea, and over time they have built up to form a natural barrier which protects the city from the strong winds that blow in from the west. Kobe has been a centre for transportation as far back as written records exist and has been in use as a port for well over a thousand years. During the Edo Period, the city boomed because of the so-called "western" route whereby ships would sail from the northernmost island of Hokkaido, through the Sea of Japan, and then up through the Seto Inland Sea to Kobe, thereby avoiding the sometimes treacherous Pacific Ocean.

Modern Kobe really started at the beginning of the Meiji Period when it opened to the world in 1858. The town's urban area was to the west of the port, which suited the government as it was forced to open the port to Western nations demanding trading rights, and didn't want troublesome foreigners bothering the local townspeople.

As the city boomed, initial concerns were swept aside. Neighbouring towns merged, and Kobe became a city in 1889, with a population of 130,000 and an area of 21 km². Kobe continued to expand, absorbing other towns and settlements on its way to its current size. The city's population passed the one million mark in 1941, by which time the city had expanded to 115 km². The advent of World War II brought the city's population down to just 380,000 by 1945, however, and it wasn't until 1966 that it again passed the million mark.

Movement of Population, Number of Households and Number of People per Household

Initially, local products like silk and tea had fuelled international trade, but with the advent of heavy industries including Kawasaki and Kobe Steel establishing factories in the city after World War I, the city boomed yet more as steel and shipbuilding became the main industries. Industrial products were made in the port area using raw materials imported from overseas.

Population and construction of urban areas: 1960 onwards

1) 1960-1970
This period was marked by rapid growth. In 1960, the national government announced a ten-year plan to double the national income by 1970, with annual year-on-year growth of 7%. As a result of this, many people moved from the countryside to urban areas nationwide, forming what became known as the Tohoku Belt, a stretch of industrialized urban areas which stretches from Tokyo through Nagoya, Kyoto, down to Kobe and beyond to the city of Himeji. During this period, an average of 18,000 people moved to Kobe each year, the majority coming from elsewhere in the western part of Japan as well as the islands of Kyushu and Shikoku. Between 1966 and 1970, the population increased from one million to 1.3 million. Steel, machinery and shipbuilding remained the main industries.

Movement of Number of Business Offices (1972-2001)

Movement of Number of Employees (1972-2001)

The rapid growth fuelled the need for more land, but the mountains to the north ruled out expansion that way, so the move (originally taken in 1953) to reclaim land proceeded apace. The sea off the coast of Kobe was too deep for reclamation to be carried out by the dredging method, so rock was quarried from Mt. Rokko to the north of the city. A feasibility report found that Mt. Rokko had numerous sections of weathered granite which could possibly collapse in the form of landslides, and so using parts of the mountain to build new islands would actually help make the mountain safer by removing the risk of landslides in certain areas.

The environmental impact of this excavation work
was of major concern to the city's inhabitants who lived in the mountain's shadow, and so numerous innovative methods of transporting the rock were implemented. In one case, an underground conveyor belt was constructed to transport the rock directly to the reclamation area. In the west of the city, where this wasn't feasible, a suspended conveyor belt was constructed which transported rock to a special loading area where it was then loaded onto barges to be taken to the reclamation sites. Initially, land along the sea front of parts of the eastern and western districts of the city was reclaimed.

The so-called "Double Advantage" here was that areas in the north of the city where the mountains had been cut away were now suitable for housing development projects to accommodate the city's increasing population.

The city's "First Master Plan" was announced in 1965. This was a 30-year plan which set the city's upper population limit at 1.8-2.0 million and which aimed to reform the city by improving living conditions while also allowing for economic growth. The 1960-1970 decade was one of improving both social and industrial infrastructure, by planning for the construction of new towns, redeveloping urbanized areas and improving the city's transportation services.

ii) 1970-1985

Economic growth started to slow down throughout the country during this period, due in part to the two oil shocks (1973, 1978). There was an increasing shift to living in urban areas rather than rural areas, at the same time as a depletion of natural resources.

While Kobe's population continued to increase, the increase itself was considerably lower than in the preceding period (6,000/year compared with 18,000/year) and was due to natural growth as the birth rate increased, even as migration to the city slowed down due to the slow economy.

To tackle the increasing urban overcrowding problem, the central government passed a law which stated that existing industrial plants located in urban areas could not expand any further. Because of this, a number of large industries moved out of the city. Kawasaki relocated to Chiba, near Tokyo, while Kobe Steel moved to Kakogawa, a more rural area where land was cheaper. The new law wasn't the only reason that heavy industry moved out of Kobe. Due to an increase in the price of raw materials caused by the oil shock of 1973, it became important to cut costs and so industry moved to places where labour and land costs were lower than Kobe. Consequently, the employment situation worsened, not just because the top-tier companies moved out of Kobe, but because many of the second-tier, supply companies also moved out. As the city's economic situation worsened, so migration to the city slowed and the rate of population increase fell. The city was thus forced to encourage new, different kinds of industry to start up in Kobe: fashion, tourism and conventions.

The extra land gained from reclamation projects in the preceding period was deemed insufficient and so work on a totally reclaimed, artificial island, Port Island, continued space, and was completed in 1980. Port Island (443 ha) was conceived as a base for the new fashion industries and convention facilities centred on a new, world-class hotel, the Portopia Hotel. Housing (for 20,000 inhabitants) was also constructed along with new port facilities necessary for the city to handle the new container system coming into use worldwide. In this regard, Kobe was quick off the mark and ahead of the curve, enabling it to retain its position as one of the major Asian hub ports.

An exposition was held on Port Island in 1981 by the city and this was extremely successful, attracting 16 million visitors, enabling the city to make a profit as well as acting as excellent publicity for the city nationwide.

Work also continued on another artificial island project, Rokko Island (595 ha) in the east of the city. Both islands are connected to the Japanese mainland by road and rail links.

The city's "Second Master Plan" was announced in 1976 and revised the city's projected population to 1.8 million by the year 2001. The central thrust of the master plan was solving the increasing environmental problems and trying to make a more human city. One big issue was the provision of a safe water supply. Then supplies were insufficient for a targeted population of 1.8 million. Most fresh water is brought to Kobe from Lake Biwa and it is the capacity of this supply which dictates how large Kobe's population can grow. Western Kobe continued to be developed and mass housing projects were constructed both there and in northern districts of the city where land had been "made" by excavation work related to the ongoing reclamation projects.

Housing Development in Seishin Area

In western Kobe housing and industrial estates were created concurrently. The advantages of the city acting as public developer could be seen as urban infrastructure (subway system, schools, water supply) was built at the same time. To finance the development, funds were needed and these were raised by the issuance of local government bonds as well as the sale of developed land and buildings. Kobe was the first local government in Japan to issue foreign bonds (e.g. in
German marks) and raise funds overseas. Environmental targets were publicly announced and the vast majority had been met by 1985.

iii) 1985-1995
Economic growth continued to slow. The population in urban areas decreased, with younger populations leaving, forcing many retailers to shut. Only older people remained in inner city areas, causing the city to designate four central wards to be in urgent need of revitalization. The population of these four wards had decreased from 782,000 in 1955 to 532,000 in 1985. The population of the city’s other five wards increased however, as the newly developed areas (including Port Island) continued to attract people.

An Inner City Development Master Plan was announced in 1986 which included the construction of a new subway line through central and west Kobe. The Harborland area was developed in front of JR Kobe Sta., providing 15,000 jobs and housing facilities for 3,000 people.

Unfortunately, before the redevelopment plans could bear fruit, the city was hit by the Great Hanshin-Awaji Earthquake in January 1995 which caused a further decrease in the population of inner city areas and of the city overall. Population decreased by 100,000 in the initial aftermath of the disaster and has still not returned to pre-earthquake levels. The declining national birthrate contributes to this problem.

Population of Kobe (as of December 1, 2003)

<table>
<thead>
<tr>
<th>Ward Division</th>
<th>Total</th>
<th>Male</th>
<th>Female</th>
<th>Estimated Population (1/1/85)</th>
<th>National Census Figures taken on (10/1/95)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Higashinada</td>
<td>201,233</td>
<td>95,929</td>
<td>105,274</td>
<td>191,716</td>
<td>157,599</td>
</tr>
<tr>
<td>Nada</td>
<td>126,014</td>
<td>59,445</td>
<td>66,569</td>
<td>124,538</td>
<td>97,473</td>
</tr>
<tr>
<td>Chuo</td>
<td>113,373</td>
<td>53,197</td>
<td>60,176</td>
<td>111,195</td>
<td>103,711</td>
</tr>
<tr>
<td>Hyogo</td>
<td>107,906</td>
<td>51,632</td>
<td>56,274</td>
<td>117,558</td>
<td>98,856</td>
</tr>
<tr>
<td>Kita</td>
<td>225,150</td>
<td>107,316</td>
<td>117,849</td>
<td>217,166</td>
<td>230,473</td>
</tr>
<tr>
<td>Nagata</td>
<td>104,363</td>
<td>48,224</td>
<td>55,139</td>
<td>129,978</td>
<td>96,807</td>
</tr>
<tr>
<td>Suma</td>
<td>172,994</td>
<td>80,767</td>
<td>92,227</td>
<td>188,949</td>
<td>176,507</td>
</tr>
<tr>
<td>Tarumi</td>
<td>224,893</td>
<td>106,893</td>
<td>117,966</td>
<td>237,735</td>
<td>249,203</td>
</tr>
<tr>
<td>Nishi</td>
<td>240,995</td>
<td>117,564</td>
<td>123,431</td>
<td>201,530</td>
<td>222,163</td>
</tr>
<tr>
<td>TOTAL</td>
<td>1,536,885</td>
<td>722,887</td>
<td>794,798</td>
<td>1,620,365</td>
<td>1,423,792</td>
</tr>
</tbody>
</table>

Figure uses "Estimated Population figures" which are based directly on results taken from recent National Census, calculating fluctuations in number of monthly resident registrations, and foreign resident registrations. Calculations based on results of the national census conducted on October 1, 1990.

The Great Hanshin-Awaji Earthquake

<table>
<thead>
<tr>
<th>(Details)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date: 5:46 a.m. January 17, 1995</td>
</tr>
<tr>
<td>Depth: 16 km below the earth’s surface</td>
</tr>
<tr>
<td>Force: 7.3 on the Richter scale</td>
</tr>
<tr>
<td>Ground motion: Vertical and horizontal shaking occurred simultaneously</td>
</tr>
</tbody>
</table>

(Damage)

- Victims in Kobe:
  - Dead: 4,571 (Total: over 6,400)
  - Injured: 14,678
  - 56% of those who died were 60 years old or older.
  - 73% died from suffocation or being crushed.

- Destruction of property in Kobe:
  - Fully collapsed: 67,241
  - Partially collapsed: 55,145
  - Completely burned: 6,965
  - Half burned: 80
  - Partially burned: 270

iv) 1995-present
To take into account the effects of the earthquake, a Fourth Master Plan was conceived in October 1995. The objectives of this plan are to create an information-oriented and disaster-prepared city able to deal with long-term issues such as internationalization and the effects of an aging society. Part of the plan was a concerted effort to preserve, create and foster green areas, especially in northern districts of the city, and to involve citizens more in municipal activities. The spirit of volunteerism after the earthquake impressed city officials who now strive to incorporate this, plus the sense of community fostered, into future urban planning and policy. A citizens’ ordinance is being considered which would involve the city’s inhabitants more actively in drafting new laws.

Movement of Population Pyramid by Five Year Layers (1990-2000)

Some 82,000 houses were lost during the earthquake. The city has now built more than double that, with over 150,000 new dwellings constructed. The city’s economy is stuck at 80% of pre-earthquake levels, a figure actually achieved in 1998. Shipping is only at 70% of pre-earthquake levels.

Nationwide, the central government is trying to tackle the effects of the recession and there is little the city of Kobe can do to influence policy. At the local level the city is trying to encourage new industries, especially those active in the medical and robotic fields, to move to the city as there are no currently booming, or even growing, industries in Kobe.

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By bringing together the wisdom and energy of the citizens of Kobe and involving local residents and businesses in our restoration efforts, we will continue working to overcome the aftermath of the earthquake and give new life to Kobe as a sustainable city.

We are also aware that Kobe is responsible for sharing its experience and lessons learned from the earthquake in order to facilitate relief activities for other earthquake victims, both domestic and foreign, such as those suffering from the recent Iran earthquake, and to help the public better prepare for future disasters, including the Nankai and Tonankai earthquakes.

Editor's Note: This article is a summary of the 2003 Workshop. AUICK takes full editorial responsibility for the content of the article.

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### Basic Idea

<table>
<thead>
<tr>
<th>Date of adoption</th>
<th>October 8, 1974</th>
<th>September 30, 1993</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target year</td>
<td>2001</td>
<td>2005</td>
</tr>
<tr>
<td>Basic idea</td>
<td>A human-oriented city</td>
<td>A multi-purpose city created by citizens</td>
</tr>
<tr>
<td>City's image</td>
<td>- A citizen-centered city - A city placing importance on human-oriented environment - A welfare-minded city - A city with culture - An international, information-oriented city</td>
<td></td>
</tr>
<tr>
<td>Population</td>
<td>To project the city of Kobe with a population of 1.8 million</td>
<td>To control the growth of the city of Kobe, setting the capacity at 1.8 million</td>
</tr>
</tbody>
</table>

### Basic Plan

#### 1st Plan
- Date of adoption: November 1965
- Objectives: This plan aims at realizing a human-oriented city by providing living conditions while balancing them with economic growth, giving the past principle placing importance on production and economic activities.
- Target year: 1980
- Population: 1.8 million
- People visiting Kobe: 1.6 to 2.0 million
- Composition and contents: The 1st plan centers on providing city's "hardware," including projects to redevelop urbanized areas, to construct new towns, and provide a transportation system. (The plan aims at forming city's infrastructure toward the 21st century.)

#### 2nd Plan
- Date of adoption: October 1975
- Objectives: This plan aims at creating local structures and living environment, in order to prevent the new poverty of citizens' lives that has been caused by the city's transformation into a megalopolis due to the rapid economic growth and highly advanced activities in urban areas.
- Target year: 2001
- Population: 1.8 million
- People visiting Kobe: 1.8 million
- Composition and contents: The 2nd plan adopts five images of Kobe, and includes "software" projects for welfare, environmental and cultural fields.

#### 3rd Plan
- Date of adoption: February 1976
- Objectives: This plan indicates more concrete direction towards the 21st century based on the concept of the Basic Idea, by dealing with the trend of a decreasing population, economic stagnation and inner-city problems.
- Target year: 2005
- Population: 1.5 million
- People visiting Kobe: 1.6 million
- Composition and contents: The 3rd plan adopts five images of Kobe, and includes "software" projects for welfare, environmental and cultural fields. It also sets three ideas by systematizing important measures, reflecting major issues.

#### 4th Plan
- Date of adoption: October 1996
- Objectives: This plan establishes a direction for building a city of the 21st century on the basis of the New Basic Idea. For this purpose, the plan proposes measures for addressing long-term issues arising from the changes of the time, such as an aging society, internationalization and an information-oriented society, and also for building a disaster-preventive city. It also aims at dealing with the issue of wide-area activities including cooperation with neighboring cities and towns.
- Target year: 2010
- Population: 1.8 million
- People visiting Kobe: 1.7 million
- Composition and contents: Based on five images newly prepared, the 4th plan comprehensively promotes projects of "hardware," "software" and fostering human resources. The 4th plan adopts the idea of "building an urban resort city," and sets eight main plans which lead to attaining the five images.
UNFPA's Goals and Activities in the Asian Region

Mr. Shu-Yun Xu
Director, Asia & the Pacific Division, United Nations Population Fund (UNFPA)

Programmes and Mandate

Guided by the ICPD Cairo Agenda, UNFPA has consistently affirmed its commitment to reproductive rights, gender equality and male responsibility, universal access to basic education and to the autonomy and empowerment of women everywhere. Programmes in family planning, safe motherhood, adolescent reproductive health and prevention of HIV/AIDS are some of UNFPA’s core areas. Supported by a large network of alliances with governments, NGOs, individuals and foundations, UNFPA-funded programmes in Asia and the Pacific have helped the countries of the region implement population programmes, improve their demographic monitoring capabilities, conduct censuses, implement suitable population strategies and operationalise an integrated reproductive health (RH) approach. All its programmes are in line with the national population and health policies and priorities of partner countries and emphasize national capacity building.

Asia and Pacific region: profile

The Asia and Pacific region, with over 3.7 billion people, is home to an overwhelming majority of the world’s people. It is a very diverse region and includes three of the world’s four most populous countries. While it also includes some very developed states (like the Republic of Korea and Singapore) and some that are approaching middle-income status, the region as a whole is dominated by a number of less and least developed countries, landlocked countries and a large number of small island developing states (SIDS).

A vast majority of the people in Asia and the Pacific continue to face serious deprivation and live in extreme poverty on $2 a day or less, lacking basic sanitation, clean water, and adequate housing. Illiteracy levels are high and issues related with gender inequalities and gender-based violence continue to plague many countries. Rapid rates of urbanization are posing a serious threat to the surrounding environment and increasingly stressing the already weak social, health, housing and sanitation services in urban areas.

Even though significant progress has been achieved in reducing mortality levels, many countries like Afghanistan, India, Bhutan, East Timor, Nepal, Cambodia and Lao PDR continue to have maternal mortality ratios exceeding 400 per 100,000 live births and likewise infant and under-five mortality rates are very high. Persisting inequities in gender and wealth distribution are serious deterrents to social and economic development.

An overall improvement in education, medical facilities, health and nutrition over the past few decades has resulted in a rapid transition from high to relatively low mortality and fertility. Life expectancy averages over 65 years in most parts. Paralleling this progress has been a related decline in the region’s average population growth rate, which at 1.3% is the lowest among developing country regions and closely approximates the world average of 1.2%. Although significant progress has been achieved in the social sector, particularly reproductive health (RH), over the last decade, there are wide regional variations. Whereas fertility levels have dropped significantly in China, Democratic People’s Republic of Korea, Thailand, Sri Lanka and Republic of Korea, women in Afghanistan, Bhutan, Pakistan, Cambodia, Lao PDR and Nepal continue to bear more than four children on average. In all these countries continuing high rates of population growth are neutralizing economic gains.

However, the new emerging threat to the Asia and Pacific region is now the rising incidence of HIV/AIDS. Even with HIV prevalence rates as low as 1-2% across the region, in absolute numbers an estimated 7.1 million people are currently living with the disease in the region.

UNFPA - Integrated RH Approach and Population Programmes

UNFPA’s reproductive health programmes follow an integrated approach in improving the health of individuals and reducing maternal, infant and child mortality. UNFPA advocates for gender equality, with a special focus on adolescents and education for female children. A priority area is the development of strategies and programmes for preventing the further spread of HIV/AIDS. UNFPA, through its programmes, also strives towards national capacity building in population programming and strengthening of data collection and evaluation systems. The Fund also works to provide emergency reproductive health services to people fleeing armed conflict and natural disasters. The overarching objective of all interventions is to improve the well-being of the people of Asia, reduce poverty levels and ensure sustainable development.
HIV/AIDS

AIDS has arrived in the two most populous countries of the world - China and India, with a combined total of roughly 5 million HIV/AIDS cases. UNFPA is now following a focused agenda with institutional priority against the dual issues of poverty as well as HIV/AIDS. It has been mobilizing political commitment through advocacy, providing increasing resources to fight AIDS; training healthcare providers and counselors and promoting access to counseling, testing and treatment.

In fact, HIV/AIDS is part of a comprehensive RH approach, which pays special attention to the needs of adolescents (those aged 10-19 years), most at risk of unwanted pregnancies, STDs and AIDS. Since adolescents comprise a sizable and growing proportion of the total population (more than one fifth), adolescent sexual and reproductive health has become a key area of UNFPA support.

Adolescent Reproductive and Sexual Health (ARSH)

While tackling the issue of Adolescent Reproductive and Sexual Health (ARSH), UNFPA follows a holistic, rights-based, gender-responsive and youth-centred approach. The focus has been on expanding adolescents' access to reproductive health information, education, counselling and services; building partnerships and networks; strengthening advocacy initiatives; and supporting youth groups.

One of the most successful interventions in this regard has been the joint EC/UNFPA Reproductive Health Initiative (RHI) in Asia, which began in 1997 and is now entering its second phase of implementation. It is being implemented in seven South and Southeast Asian countries: Bangladesh, Cambodia, Laos, Nepal, Pakistan, Sri Lanka and Vietnam.

Highly innovative, youth-friendly and sensitive approaches in handling adolescent sexuality have met with huge successes in Laos, Cambodia and Vietnam. Youth centres in Vietnam, Cambodia and Lao PDR offer entertainment activities which help reduce the clients’ shyness when coming for RH services. These youth centres also operate RH clinics that have an anonymous registering system to ensure client privacy. They operate at suitable timings and at locations where the youth can access them.

In Nepal and Pakistan, the RHI country programmes have involved large numbers of grassroot NGOs and community based organizations (CBOs), including mothers groups and youth clubs, in raising awareness of RH in remote and under-served rural areas and among marginalized urban populations.

Ageing

While youth constitute a sizable proportion of the population in several countries, Asia likewise is home to the majority of the world’s older persons (roughly 54%) defined as those aged 60 years and above, the majority being women. Since many countries of the region do not yet have systems of social protection in place, particularly old age security and health insurance, UNFPA, with its network of Country Offices and Technical Support Teams and in collaboration with UN DESA, is now developing programmes on aging as well. UNFPA actively participated in the Second World Assembly on Aging in Madrid in April 2002 and started two ongoing regional initiatives on population ageing, which affects the Asia and Pacific region more than any other.

Population and Development Strategies

Complementing the efforts of partner countries, the Fund has helped them increase their demographic monitoring capability and establish vital registration systems. As a result, the region now has considerable institutional capacity and expertise available to undertake policy research on important population and policy linkages. After a very successful census in Cambodia, the Fund is supporting the governments of Mongolia, Afghanistan and East Timor in major logistical challenges for the next three to five years in undertaking nationwide population and housing censuses.

Response to Situations of Crises

In accordance with its mandate, UNFPA has also supported many emergency RH projects in several Asian countries torn by crisis, war, armed conflicts and natural disasters. A major example is the work in Afghanistan. In rapid response to the post-September 11, 2001 crisis, UNFPA has been participating in Afghanistan’s reconstruction as part of an integrated UN assistance mission. Priorities include rebuilding the health and educational infrastructure. Efforts are under way to expand RH services in remote areas, including emergency and essential obstetric care, and to provide medical equipment, health supplies and emergency RH kits. We have fully renovated a hospital in Kabul and equipped two other maternity hospitals, established an adult vocational training centre, and trained large numbers of health care workers. The Fund has also been providing support to around 2 million Afghan refugees in the Northwestern Frontier Province, Punjab and Baluchistan provinces of Pakistan and to roughly 1.5 million refugees in Iran by improving the skills of health professionals in the delivery of RH/FP services, sensitizing adolescents and males to HIV/AIDS, delivering limited RH services through the existing health infrastructure in the refugee camps, and providing safe delivery kits and FP supplies to the UN refugee agency, UNHCR.

Another emergency project involving humanitarian assistance undertaken by UNFPA was in East Timor, where the nation’s health care infrastructure had been virtually destroyed and where an estimated 85% deliveries are still done at home. The Fund worked with NGOs in 1999 to provide emergency supplies enough to serve a population of 400,000 people for three months.
ICPD and MDGs

Guided by the Programme of Action of ICPD and ICPD+5, UNFPA supports development programmes that are sustainable, gender-sensitive and people-centred. Following a human rights and results-based management approach, the Fund remains steadfast in its commitment to the Millennium Development Goals. UNFPA is convinced that meeting the MDGs on reducing maternal, infant and child mortality, achieving universal basic education, empowering women and halting the spread of HIV/AIDS is critical to achieving sustained and sustainable social and economic development that ensures the well-being of all people and protects the natural resources on which all life depends. Experience in East and Southeast Asia has shown that health gains and voluntary fertility reductions have played a significant role in economic growth and fertility reductions. The MDG targets, which includes many of the ICPD goals, provide a powerful tool for addressing population and poverty linkages, especially in national poverty reduction strategies.

Recent Study on MDGs by ESCAP and UNDP

According to a recent study published jointly by UNESCAP and UNDP on Promoting the Millennium Development Goals in the Asia and Pacific, one of the most remarkable achievements in recent years has been an impressive reduction in poverty. Some countries like Thailand, Malaysia and Republic of Korea have already achieved their MDG targets and are setting even higher targets for poverty reduction that incorporate a higher minimum standard of living, healthcare and educational attainment. These targets are called MDG Plus. Over the span of the nineties, it is estimated that the overall incidence of poverty in the region has declined from 34 to 26%. On the whole, this constitutes one of the largest decreases in mass income poverty in social history. In China, poverty is estimated to have come down from 33 to 4.6%, in Indonesia from 60 to 27% and in Pakistan from 54 to 30%. If this trend continues, the region can be expected to achieve the target of 17% or even bring down poverty levels to 10%.

Need for Further Commitment to Achieve ICPD & MDG Targets

Although this trend is very heartening, the report further adds that though there has been some progress in promoting gender equality and women’s empowerment, the same progress is not evident in indicators of hunger, universal primary education, reducing infant and maternal mortality and combating HIV/AIDS. Though there are wide regional variations, the progress overall on these targets has been slow and at best moderate. So a lot of work still remains to be done and the main onus lies with the national governments, whose efforts need to be continually strengthened. Unless all these issues are tackled with leadership and vision, improved governance, greater political commitment, accountability and financial support, there is danger of the gains achieved so far being reversed.

The Fund’s presence in the Asia and the Pacific has overall been catalytic, and the programmes have been very successful in helping countries plan and expand their activities in the area of population and development, reproductive health and women’s empowerment. UNFPA has assisted many countries in operationalising their RH services, with an emphasis on national capacity building. The region as a whole has made important strides in implementing the ICPD PoA. However, some ICPD milestones are still far from being achieved in many countries, such as maternal mortality and unmet need for contraceptives and commodity security.

RHCS - A Vital Area

Therefore, another vital area of UNFPA’s work is reproductive health commodity security (RHCS). In large parts of the region, access to sexual and reproductive health services is far from adequate, the quality of affordable health care is poor and there is a huge gap between the needs and the available resources for population and reproductive health programmes. The crisis in the availability of RH commodities, in particular condoms and contraceptives, not only is a great setback in preventing and reversing the spread of HIV/AIDS but also in preventing unwanted pregnancies and maternal deaths due to unsafe abortions. Needless to say, RHCS is one of the primary factors in the setback in achieving the Millennium Development and the ICPD goals. UNFPA is therefore providing increasing focus to this crucial issue.

A Network of Partnerships & Knowledge Sharing

UNFPA programmes would not have been such a success without the tremendous support extended by its main partner United Nations agencies and by nongovernmental organizations (NGOs). Some of these main partner UN agencies are ESCAP, UNICEF, UNESCO, ILO, FAO, WHO and the office of the UNHCR. NGO partners in Asia and the Pacific are far too many to list. The Asian Urban Information Centre of Kobe (AUCK) is one prominent partner, with whom an excellent partnership has been formed over the years.

Sustainable development as a means to ensure human well-being, equitably shared by all people today and in the future, requires that the interrelationships between population, resources, the environment and development should be fully recognized, properly managed and brought into a harmonious, dynamic balance. It requires strengthening of social policies as well as regional cooperation. The experiences gained in one country must be shared with the others in the region and UNFPA must learn from best practices. UNFPA would like to see a much stronger focus on gender issues in poverty reduction strategies. And one challenge here is to strengthen partnerships and global alliances, particularly at country level and to build on...
comparative advantages in addressing these issues.

Q&A:

Q: (Hamid Ali Khan) i) In Pakistan, a local government system has just been implemented, like the Japanese system. Budgets are set at the local/city level. We have 2-3% allowance for family planning policies, but requesting assistance from UNFPA requires too much red tape. At the local level, we want to act quickly. UNFPA funds take too long to arrive. ii) NGOs have credibility; local government doesn’t, so a partnership between the two works well. iii) Rural women are aware of reproductive health issues but the local offices/health centres are unable to meet their requests/demands (e.g., condom supply), especially in remote, rural areas.

A: i) UNFPA has established five Provincial Offices in Pakistan to work in the field as an experiment. UNFPA has 6 State Offices in India and 2 District Offices in Nepal. Such arrangements could help to ensure a smooth flow of funds to the projects. There are plans to build on this system. ii) UNFPA regards NGOs as an important partner of our programme activities. Bangladesh has many NGOs, Pakistan too. UNFPA collaborates with some of the NGOs in the current programmes in these countries and will further promote such collaboration in the future. iii) South Asian countries’ populations have high awareness of family planning and contraceptives even in the rural areas. But insufficient access to the services and RH commodities including contraceptives is still a problem in some remote and rural areas. UNFPA is helping these countries in improving the logistical system and improving the access to RH/FP services through many innovative activities.

Q: (Pornsri Kittham) Is it possible to hold education seminars at local levels and bypass the central government? For example, there are many refugee camps along the Thailand-Myanmar border, but they are never visited by UNFPA representatives.

A: Usually UNFPA country offices consult with the government coordinating ministries and the project counterparts before going to the field for project activities or monitoring visits.

Comment: (Selvi Apoorva) At the city level it is the issue of population which is the most pressing.

Comment: (Hamid Ali Khan) We have consensus, manpower, and knowledge now. We must address the issue of poverty before anything else. Unless the developed world changes its economic policies, the poverty problem will not be solved. In Japan, they can plan accordingly, but third world nations are dependent on donars and so the money supply fluctuates and it is difficult to plan and prepare. Agricultural subsidies in developed countries must be stopped. Unless they are, developing nations will never be able to export agricultural products to developed nations.

Comment: (Shu-Yun Xu) Migration, urbanization, and ageing are some of the emerging issues in Asia and the Pacific region. AUCB has been actively conducting research and training on some of the relevant issues. Population and development strategy is one of UNFPA’s key programme areas. The United Nations system also pays special attention to these issues. Recently, at the request of one NGO in China, UN Secretary-General Kofi Annan wrote a few paragraphs on aging issues. It arrived in China just before the ‘Respect the Aged’ day and so the Secretary-General’s words made it to the front page of one of the newspapers. This is a small example to show how supportive the Secretary-General is on the aging issue. Regarding how the developed countries should help the developing countries in their social and economic development, the important thing is for the developed countries to take concrete action in their ODA, economic, financial and trade policies in favour of the developing countries. In the field of RH/FP, at the ICPD held in Cairo in 1994 and ICPD+5 review in 1999, all developed countries were urged to strengthen their commitment to the goals and objectives of the Programme of Action, and to make every effort to mobilize the agreed estimated financial resources required for its implementation.

CITY REPORTS

Narayanganj (Bangladesh)

Mr. Pranab Kumar Neogi
Chief Executive Officer
Central Administration
Narayanganj Municipality

Narayanganj was established in 1876 and during the days of the British Empire was described as a model municipality. Now, however, it has lost much of its grandeur because of a greatly increased population. As Narayanganj is located very close to Bangladesh’s capital, Dhaka, its development is officially controlled by RAJUK, the development authority of the capital city. It has a population of 230,924.

The major problems it faces are: i) Sewerage service - lack of proper planning, absence of any town planning and indiscriminate approval of building structures by RAJUK without the consent of Narayanganj have caused the growth of many irregular, illegal constructions. One of the
major problems this causes is the resultant blocking of drainage system and localised flooding with stagnant, dirty water.

ii) Solid waste management - 70 tonnes produced per day, but the municipality can only deal with 50 tonnes, so there is a daily shortfall of 20 tonnes.

iii) Traffic congestion - few wide roads and a large number of both mechanised and non-mechanised vehicles causes very serious congestion problems at all times.

iv) Mosquito control - incidence of Dengue fever and malaria has risen due to increase of mosquito-friendly sites caused by the absence of proper drainage and sewerage systems. Increased social awareness regarding mosquito problem, and a mosquito eradication programme have helped, but the problem remains severe.

v) Slums - large number of migrants in search of work at Narayanganj's port and industrial areas have increased pressure on the already overcrowded slum areas.

vi) Unemployment - large number of migrants in search of work, plus a lack of family planning resulting in an increased urban population greatly exceeding available jobs.

vii) Education - high rate of dropouts amongst low-income families' children. Families encourage children to work as child labourers instead of attending schools. Free primary education offered to try and alleviate the problem.

viii) Air pollution - due to unplanned industrialisation, factories are built haphazardly. Absence of Local Environmental Action Plan.

ix) Medical aid - insufficient facilities: just two hospitals and 18 clinics offering one bed per 4,900 inhabitants.

x) Family planning - services offered by government and NGOs is quite good, but illiterate migrants from rural areas have no knowledge of family planning and need to be targeted.

Q&A:

Q: How much solid waste is there, each day?
A: 3,000 tonnes. A large proportion of this is food waste.

Q: How are water and sewerage dealt with?
A: These are big problems, but they are not Chennai's problems. They don't come under the jurisdiction of Chennai's municipal authority. A separate water and sewerage board are in charge. The rivers in the city cannot be used for drinking water due to sewerage contamination.

### Chennai (India)

#### Ms. Apoorva
Joint Commissioner-Health, Health and Works Department
Chennai Corporation

Chennai (formerly Madras) is the oldest municipality in India, established in 1868. Some 70% of the city is urbanised and boasts numerous temples of architectural note, a long, sandy beach and many popular resorts. A fast-growing city, it has a population of 4,567,302.

The major problem in Chennai is solid waste management. Citizens continually throw rubbish by the roadside day and night which causes numerous health risks.

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### Surabaya (Indonesia)

#### Mr. Samsul Ariffin
Head
Administration Division
Agriculture Department
Surabaya Municipality

Surabaya has a long history and was a major centre for the spread of Islam in the 10th century. It is located in the east of the island of Java and has a population of 2,599,796.

The major problems it faces are:

i) Sewerage service

ii) Provision of public transportation

iii) Slum dwellings

iv) Health and medical services for low-income groups

v) Domestic waste water

vi) A low literacy rate

vii) Unemployment

Surabaya works in partnership with numerous NGOs in the following fields:

i) Health and medical services - 7 of 27 hospitals are run by NGOs

ii) Preschool (kindergarten) education - total of 1,250 kindergartens run by NGOs

iii) Caring for the elderly
iv) Vocational training - English, computers
v) Waste collection - household collection of domestic waste to a temporary holding location from where the municipality takes over. One problem is educating citizens to separate organic and inorganic waste to help recycling.
vii) Street sweeping

Q&A:

Q: Indonesia is an oil-producing country. Does Surabaya receive any money directly from this?
A: No.

Q: Who pays for primary education?
A: Both private and government sectors.

Q: How many people live in the slum areas? How do you collect tax in these areas?
A: About 200,000 people. No tax is collected.

Lalitpur (Nepal)

Lalitpur is located in the foothills of Mt. Everest and is a noted cultural centre in Nepal. It has a vibrant Hindu and Buddhist culture and is home to a World Heritage site, Patan Durbar. The city is believed to have been founded in the third century AD and has a population of 162,991.

The major problems it faces are:

i) Water supply - most community members cite i, ii), iii) jointly as the leading problems the city faces.
ii) Sewerage service
iii) Solid waste management
iv) Quality of overall housing
v) Air quality (pollution) - though there are no major polluting industries in the city itself, there are some in neighbouring areas and these have an adverse, negative effect on Lalitpur.
vi) Literacy rate - though higher than the national average, one in four people are still illiterate.

Patan Durbar is a World Heritage site and it is necessary to conserve and protect it, so priority has gone to conservation initiatives over other public utilities. Health and medical services, preschool education, care of the elderly, vocational training and waste collection services are all carried out in partnership with NGOs.

Q&A:

Q: Can you capitalise on tourism income as part of your overall budget?
A: No, it's a source for the central government, not the local government.

Q: Who takes care of the temple renovation?

A: Both central and local governments.

Rawalpindi (Pakistan)

Evidence of civilisation on the Pothwar plateau where Rawalpindi is located stretches back some 3,000 years. The current city can be dated back to the village of Rawal in 1493. Located next to the capital city of Islamabad, it has a population of 3,363,911.

The major problems it faces are:

i) Rapid population growth - 1.2 million in past ten years
ii) Decrease in size of individual land holdings resulting in decreased ability to produce necessary foodstuffs
iii) Decrease in availability of safe drinking water due to population increase - 40% of the population doesn't have access to safe drinking water. Rural women spend hours each day collecting water from communal taps, or directly from ponds, wells and rivers
iv) Environmental degradation due to continuing deforestation and persistent drought for the last five years
v) Sewerage services - 59% of the population don't have access to sewerage services, resulting in pollution and health risks.
vi) Air pollution - rapid increase in number of motor vehicles leading to increased air pollution as well as traffic congestion
vii) Blurring of industrial and residential areas in some sectors causing health problems
viii) About one quarter of the population lives below the poverty level
ix) Unemployment among youth is leading to an increase in crime and over-dependence on families for support. One earning individual has to support six to eight persons
x) In rural areas, some 60% of women don't have access to health facilities which, in many places, are inadequately staffed due to a shortage of doctors and paramedical staff
xi) Solid waste management - daily shortfall of 240 tonnes (750 tonnes produced, 510 collected by city) collected by private companies
xii) Low literacy rate

In the short-term, current policy is to reduce the fertility rate to four births per woman by 2004 through an enhanced voluntary contraception programme using a comprehensive network of family planning and reproductive health services. Some resistance to this from conservative religious groups. Many ongoing projects being operated in partnership with NGOs, including rehabilitation of women prisoners and urban community development projects.
Q&A:

Q: How many departments do you have under you?
A: Ten. I am a federal government employee working at the district level.

Q: Who collects the money from citizens?
A: Solid waste disposal is free. The city, district government pays private companies to collect waste from designated waste disposal areas.

Quezon City (Philippines)

Ms. Victoria Velasquez
Special Assistant to the Mayor
Quezon City Government

Quezon City is located next to the Philippines' capital city, Manila, and forms a major part of the administrative city Metro Manila. From 1939 (the year of the city's birth) until 1976, Quezon City was the capital of the Philippines. It has a population of 2,173,831.

The major problems it faces are:

i) Law and order - the ongoing economic recession has led to an increase in crime in the city. Most crimes affect citizens directly, like robber, theft and 'carnapping'.

ii) Housing/residential - informal squatters are a major population. Some groups have even invaded private properties.

iii) Transportation - increasing population has led to the overcrowding of public transportation networks and an increase in private vehicles, adding to city-wide congestion.

iv) Public utilities - health problems caused by the lack of clean water and the poor sewerage facilities.

v) Health - poor access to health services among squatters and low-income citizens.

vi) Pollution - no active enforcement and monitoring system. Environmental degradation continues apace.

vii) Education - children of some low-income families do not attend school, even though the provision of elementary and secondary education is guaranteed under the country's constitution.

viii) Employment - unemployment rates are rising due to the recession.

Q&A:

Q: Does the government support school students?
A: The provision of elementary and secondary education is guaranteed under the country's constitution. Tertiary education is not free though state universities offer subsidised education. Private universities cost (US) $600-800/month, with business, law and medicine being the most expensive.

Q: How do you deal with poverty?
A: Quezon City accounts for 22% of the population and 25% of the area of Metro Manila and so there are many poor people. Our local development council accredits NGOs with specific areas of concern. Activities include micro-financing for women and a joint venture with private-sector companies to offer free medical service/drugs to low-income families.

Q: What is the legal relationship between Quezon City and Metro Manila?
A: Metro Manila is responsible for some overall policy guidelines, like traffic. There's no financial relationship, it's just policy.

Q: Why do the Philippines have such a high mortality rate among children?
A: Women don't visit doctors prenatally and then there are problems with diet and malnutrition: 17 deaths per 1,000 births.

Dehiwala-Mount Lavina (Sri Lanka)

Mr. Wanni Arachchilage Gunawardena
Municipal Commissioner
Local Government
Dehiwala-Mount Lavina Municipal Council

Dehiwala-Mount Lavina borders Sri Lanka's capital, Colombo, to the south. It is the second largest urban agglomeration in Sri Lanka and is thought to date back to about 1510. Within its boundaries are a bird sanctuary and the nation's zoo. It has a population of 209,787.

The major problems it faces are:

i) Solid waste management - inadequate funds for solid waste management. Concrete bins were made to act as collection points, but a lack of suitable transport meant that the bins often overflow, causing a nuisance for citizens. No suitable landfill sites within the municipal area. Collection of waste from some households is difficult due to location and inaccessibility. Some sections of the community do not cooperate. Waste reduction at source policy has similarly not been successful due to non-cooperation of citizens.

ii) Domestic waste water

iii) Housing environment in slum districts

iv) Inadequate low-income housing supply

v) Sewerage services - non-availability of a sewerage system citywide

vi) Traffic congestion

vii) Squatters

viii) Industrial effluent - a very high water-table makes it difficult to dispose of waste water

ix) Provision of public transportation - heavy congestion. Bypasses are needed at busy intersections.

x) Traffic volume

Q&A:

Q: How are you involving the community in solid waste management?
A: We are holding seminars and workshops and trying to get citizens to help reduce waste at the
source, but they are not always cooperative.

Q: What are the daily migration patterns?
A: We have 30,000-35,000 people using the city’s facilities during the day while working before going home in the evening. This causes extra strain on the city’s services.

Nonthaburi (Thailand)

Ms. Pornsri Krietham
Director
Bureau of Environment and Health
Nonthaburi Municipality

Nonthaburi is located to the south and east of the country’s capital, Bangkok, and records show it became a town in 1549. The durian fruit is a local delicacy and said to be the best in the country. Good transport networks linking the city with the capital mean a lot of residents commute to Bangkok to work. It has a population of 270,643.

The major problems it faces are:

i) Solid waste management - technology is old and there are insufficient funds to modernise the system.

ii) Domestic waste water - poor treatment systems

iii) Sewerage service - only 50% of residents are connected

iv) Industrial effluent - poor/lacking treatment systems

v) Traffic volume - insufficient mass transport systems

vi) Traffic congestion - because too many people use private cars

vii) Public transportation - insufficient

viii) Air pollution due to vehicle emissions - due to use of old, insufficient cars

ix) Health and medical services - low-income groups not covered

x) Environmental issues - lack of awareness of the benefits provided by natural resources

Q&A:

Q: What is the role of central government?
A: The system is decentralised now. In the past we sent budget requests to central government, but now the budget is allocated on a per capita basis.

Q: What sort of civil registration system is there?
A: Registration at local government offices is required for births, deaths etc.

Q: How do you calculate the number of migrants?
A: We know the amount of solid waste a person produces on average, so by observing the total amount of solid waste we can calculate the total number of migrants.

Buon Ma Thuot (Vietnam)

Mr. Huynh Ngoc Luan
Chairman
People’s Council of Buon Ma Thuot City

Buon Ma Thuot is located in the Daklak highlands of central Vietnam. This region of the country was originally home to the E-De ethnic minority and the city of Buon Ma Thuot was established by the French colonial authority in 1928. It has a population of 287,515.

The major problems it faces are:

i) Sewerage service - due to rapid urbanisation

ii) Solid waste management - due to rapid urbanisation

iii) Domestic waste water - drainage systems not co-ordinated, causing pollution

iv) Vocational training - need to improve this in order to create a high-quality labour force

v) Education - need to improve this for the schoolchildren of low-income families so they can apply modern technology to their work

vi) Infant health

vii) Health & medical services for low-income groups

viii) Unemployment - leads to many social evils: drug-taking, prostitution, banditry

ix) Low-income housing supply - inadequate

x) Environmental issues - need to protect the natural environment in order to avoid natural disasters

Q&A:

Q: Bearing in mind the nation’s past relationship with the USA, does the Vietnamese government now encourage direct investment from American companies?
A: We are happy to have foreign investment, including from Americans.

Q: Buon Ma Thuot is a beautiful city. Do you plan to develop the city even though growth may hurt the environment?
A: We are now making a master plan in conjunction with the central government. We have a huge river, near us so we won’t have any problems when it comes to a water supply.
## Population Data

(From The Tenth Workshop on Population and Sustainable Development)

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<th>Item</th>
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No.41 December 2003  AUCK Newsletter 29
UNFPA Seminar on "Protection against HIV/AIDS"

On Tuesday, February 18, 2003, AUICK held the UNFPA Seminar on "Protection against HIV/AIDS" at ASTEP KOBE under the joint auspices of UNFPA Tokyo Office and Kobe International Center for Cooperation and Communication. The seminar attracted a 150-strong audience, made up of citizens, academic experts, media and local government workers, all of whom listened eagerly to the speeches.

UNFPA is the largest internationally funded source of population assistance to developing countries. At their request, it assists them to improve reproductive health, including family planning and sexual health on the basis of individual choice, to refine approaches to adolescent reproductive health, reduce maternal mortality, address HIV/AIDS, provide assistance in emergencies, and to formulate population policies in support of efforts towards sustainable development.

UNFPA's Tokyo office was established on September 1, 2002 in order to provide further information on UNFPA's goals and activities to the people of Japan, which is the second largest donor to UNFPA.

AUICK was set up with the support of UNFPA and the Kobe City Government in 1989. Since then, Kobe City, one of the most cosmopolitan cities in Japan, has enhanced a close relationship with UNFPA through AUICK activities.

I. Keynote Speech: Women in Asia—Current Status and Challenges from the Perspective of HIV/AIDS

UNFPA Global HIV/AIDS Coordinator
Ms. Suman Mehta

The estimated total number of people in the world who are HIV positive or infected with AIDS was 42 million at the end of 2002. In Africa, 30 million people, and in Asia and the Pacific, 7.2 million people are living with AIDS. The estimated number of people newly contracting HIV in 2002 is 5 million, of which 85 percent live in developing countries. Approximately 50 percent of the total comprise young people aged 15 to 24, and approximately 50 percent of them are women. Ten people are becoming infected every minute. The situation is extremely grave indeed.

However, there is hope. Prevention is possible and it is also possible to prolong the lives of those who are HIV positive.

We, at the United Nations Population Fund, have made prevention our top priority, as it is very cost effective and early intervention increases the effectiveness.

The most common route of infection by far is through sexual contact, being 75 percent of cases. As the gateway to prevention, we consider reproductive health to be the most appropriate. This is mostly a personal matter and involves sensitive issues. We have listed three ways of effective prevention: voluntary abstinence to delay the age of involvement in sexual activity, monogamous relationships, and consistent and correct use of condoms.

Our focus in preventative intervention is on the prevention of infection in young people, prevention of infection in pregnant women and condom programming.

Young people represent roughly 50 percent of all new HIV infections. Only 17 percent of young people use contraceptive devices and the percentage using condoms is much smaller. The problem lies in the fact that these young people are not aware that they are at risk. Moreover, although condoms are effective as a means of preventing infection, the reality we face is that there is a shortage of 9 billion condoms around
the world each year. Because condoms had originally been used from the viewpoint of family planning, in some ways the connection with HIV/AIDS prevention has not been made. We also feel the need for an innovative approach that would promote the consistent and correct use of condoms.

Then there is the gender perspective, which is an important area in which to work. Women are biologically more vulnerable to infection. If we take the world as a whole, in many cases women have low status socially, culturally and economically. Accordingly, gender has a big impact in sexual relationships and decision making, which increases women’s risk of infection compared to men.

The spread of HIV/AIDS is only at an early stage. We cannot even guess what the future holds. Nevertheless, the necessary measures are already clear. By emphasizing the preventative approach to young people, we can change the course of the epidemic. For this purpose, leadership involvement from all levels of society, including direct involvement from respective governments and businesses is needed. Regarding the gender perspective also, measures that encompass all aspects of prevention, treatment and care/support must be promoted under the concerted and collaborative efforts of diverse organizations. Furthermore, resources that support these activities are important. Without resources, no appropriate measures can be implemented.

II. Local Voice: AIDS and Its Countermeasures in Kobe City

Dr. Tamami Umeda
Public Health and Welfare Bureau
City of Kobe

The number of HIV positive people in Japan at the end of 2002 was 5,121. The number of AIDS sufferers totaled 2,549. The number of patients contracting the disease through the use of blood clotting factor products was 1,431. The number of HIV positive people is on the rise and the number of patients showing AIDS symptoms is virtually level. However, the statistics available do not include those who are unaware that they are HIV positive. Therefore, we fear we may be looking at just the tip of the iceberg. In terms of the number of patients, thanks to improved treatment drugs, there has been a dramatic drop in developed countries; regrettably, in Japan though, the number is not going down.

The disease is mostly transmitted through homosexual and heterosexual contact. The number is rising markedly among men of Japanese nationality. The transmission occurs within Japan in most cases and the spread is on the increase nationwide, in particular the number is rising rapidly in the Kinki region. In Western countries the disease started to spread around the end of the 1970s, but in Japan the onset was later, that is, from the end of the 1980s.

Our biggest challenge is the fact that there has been an increase in infection in both men and women within the younger generation. Although young people are highly sexually active, they unfortunately mostly engage in unprotected sex, inflicting greater risk upon themselves. Formerly, there was the perception that “it is safe to have sex with fixed partners,” but today, such a fidelity myth has been shattered. It is often the case that the patient is ignorant about being HIV positive until the disease develops. Indeed it can be said that there is the potential of a severe epidemic breaking out in the future.

In Kobe, there are 21 patients and 28 HIV positive people. The numbers are fortunately small but what is notable is the young age of the majority of these people.

What we have to do in the future is, as emphasized in the Ministry of Health, Labor and Welfare’s AIDS Prevention Guidelines, to bear in mind the importance of liaison among the national government, local authorities, medical professionals and NGOs. Accordingly, the City of Kobe is directing its energy towards publicity and education, health advice and checkups to protect people in the vulnerable age bracket and those in jobs that demand high-risk activities. In Kobe, there is an NGO that conducts independent activities in the area.

III. Discussion and Q & A

Between November 27 and December 1, the Seventh International Congress on AIDS in Asia and the Pacific is due to take place in Kobe, with information and other exchanges to be conducted from the various angles of combating AIDS.

In the discussion held under the moderation of Kyoko Ikegami, the Director of UNFPA Tokyo Office, Sumant Mehta, the keynote speaker, presented a real case of success overseas in the prevention of AIDS among the younger generation. Participants commented, “How about giving HIV tests at schools, to help find the young people who are vulnerable,” and “Why not distribute condoms at schools?” but both speakers agreed, there has to be full compliance with human rights. There must be no compulsion. What is needed is to set up a system whereby voluntary counseling and testing are available.
Executive Committee Meeting

AUICK Executive Committee held the first meeting for the year 2003 in the center on June 27, 2003.

The meeting was officially opened with remark by Mr. Sasayama, President of AUICK. Mr. Baba, Director of AUICK, explained amendments to the AUICK administrative rules. The major changes were in staffing. It was unanimously approved by the Committee and accordingly Mr. Sasayama was inaugurated as Chairman and Dr. Ando as President. Then, Dr. Ando made his inaugural address.

Secondly, Mr. Baba reported the settlement of accounts for 2002, which was followed by an audit report presented by Yoshikane Fujimoto, auditor of AUICK. This bill was also unanimously approved. Mr. Baba also presented a report of AUICK’s activities and budget plan for 2003. Again it gained unanimous approval.

Mr. Baba continued to outline AUICK’s project proposal for 2004-2007, which had been submitted to UNFPA. The Committee members all accepted this proposal and promised support for its implementation.

Attended Members

Executive Committee Members

Kojiro Nilo (Chairman)  
President, Kobe Institute of Urban Research

LaiXing Chen  
Professor, Kobe University of Commerce

Kiyoko Ikegawa  
President, Kobe City College of Nursing

Isao Mizobashi  
Director General, Civic Affairs, Culture and Tourism Bureau, Kobe City

Kazutoshi Sasayama  
Chairman, AUICK (inaugurated)

Hirofumi Ando  
President, AUICK (inaugurated)

Masayuki Isibutsu  
Executive Director, AUICK

Auditor

Yoshikane Fujimoto  
Deputy Director General, Civic Affairs, Culture and Tourism Bureau, Kobe City

International Advisory Committee Meeting

AUICK International Advisory Committee held an annual meeting in the Center on June 28, 2003. Nine members attended.

Opening remarks

Mr. Sasayama officially opened the meeting by announcing that AUICK has experienced a change of leadership and internal action. Dr. Hirofumi Ando has been appointed President. Retired Mayor Sasayama will continue as Chair, and Mr. Masayuki Isibutsu has assumed the role of Executive Director.

Upon the nomination by Mr. Sasayama, Prof. Toshiro Kuroda and Prof. Gay! D. Ness were elected to chair the meeting.

Annual Report for 2002

Mr. Baba, Director of AUICK, presented the report of activities for 2002. It was well received by the members, and called for comments on the progress of the 6th In-Depth Study. For the book, Asian Urbanization for the New Millennium, all chapters except for Malaysia and the Philippines have been submitted. It was originally decided to put the book on the Internet, but new considerations led to the decision to seek formal publication. Professor Ness will approach publishers in Malaysia and Singapore, with the help of Dr. Cheung. It was also tentatively suggested to place the book’s data chapters on the AUICK website in Excel form, so that interested users can download and work with the data as they wish.
Project Description for 2003

Mr. Baba also presented the 2003 project description, including 10 items, many of which called for IAC member advice.
1. Workshop on Population and Development will take place in July
2. Seminar planned for Nov-Dec on water issues.
3. Follow-up meeting in countries of trainees. Question is which countries?
4. Overseas training course, like the previous Singapore course.
5. Practical training course. (This is a proposal for holding training courses overseas in select cities. Funds are now being sought for this new project.) If funds are acquired, IAC members will be asked for advice and assistance.
6. In-depth studies. The Study on Urban Reproductive Health and Primary Health Care Systems was the 5th; the study on Current Asian Urbanization for the New Millennium is the 6th. The plan of the 7th in-depth study should be worked out later.
7. Newsletter. Question is how do members assess the editorial policy and what suggestions can be given?
8. Database. Q: what items, what countries or cities?
9. Next IAC meeting. Question is Where and when should it be held?
10. Future symposia. Many of these questions are answered below.

Current Issues and Future Prospects for AUICK

Dr. Ando presented the new concept paper (dated June 16, 2003) which had been submitted to UNFPA as an input for its inter-country program paper for the UNFPA Executive Board session in September 2003.

The main point of this new concept paper includes the following:
A. AUICK will continue its three-part commitment to research, training and information dissemination. In addition, it will work toward four additional goals;
B. Attempt to increase the political commitment of the Mayors of the Associate Cities;
C. Implement the past IAC advice to work with a smaller number of cities, to be designated AUICK Associate Cities. Here it will work to create a critical mass of Kobe trained staff, and to develop clearer plans of long term action and results of that action;
D. Promote closer relationships between cities and universities both in Kobe and among the Associate Cities; and
E. Promote greater South-South collaboration.

He also suggested that the themes of future training courses as well as the research studies would be selected from the ICPD and/or Millennium Development Goals.

Anticipating a question of what is to be done for those cities not included in the Associate Cities group, Dr. Ando proposed that newsletter dissemination and access to a more useful database would have to suffice at this time. Perhaps other offerings can be proposed in the future.

The secretariat tentatively selected nine cities as Associate Cities from nine countries: Bangladesh; China; India; Indonesia; Malaysia; Pakistan; Thailand; the Philippines; and Vietnam. The secretariat also noted that the nine cities were supposed to be those which AUICK has invited to each seminar on specific topics. Advice was sought for proper medium-sized cities in Malaysia and the Philippines. General agreement was reached on including Olongapo City in the Philippines. For Malaysia, suggestions included Kuantan in Pahang and Kuching in Sarawak, East Malaysia. The Secretariat will explore these and report back to the IAC. A suggestion was to include Pusan, South Korea as associate member city.

Mr. Nobuyuki Morimoto, Manager of AUICK, presented the newly constructed web-based data management and dissemination system of AUICK which was well received by the IAC members. It will contain all the papers and studies conducted by AUICK. It will also store the demographic, socio-economic and
physical data of medium-sized cities in Asia, initially brought by the participants in the workshops and seminars. The IAC members were requested to review the data collection format for suggestions and advice.

IAC Member Reactions

Members had many reactions and suggestions to the 2003 plan and the Current Issues and Future Prospects paper. Here they appear largely in order of their statement, with attribution to specific members.

Haryono: Proposed a short meeting of Associate City Mayors and that workshop participants return to organize their own in-country workshops for people from other cities; generate greater links between Associate Cities. Suggested Surabaya would be a useful city for one of the follow-up visits.

Iqbal: It would be most useful for the secretariat to send working papers in advance of the IAC meetings so that we can come better prepared to offer comments and suggestions. The June 16th paper has much rich material and it would have been useful had the members had an opportunity to study it more carefully before the meeting.

Prijono: It would be useful to provide a systematic chart of how research activities are linked to both training and dissemination. Consider linking the 2004 program to the ICPD + 10, which will be a major focus for many international organizations. Further, the database should be made available on disk as well as through the download.

Taiwar: In working with mayors, bureaucrats and technocrats for different symposia and workshops, also consider ways to make links to the Ministerial level, since this is the level that controls much of what Mayors can do.

Krasae: Welcomed the proposed orientation of the AUICK work program contained in the Concept Paper. He further proposed that there should be national advisory committees in the Associate Cities so as to increase local political commitment to population issues in urban settings.

Cheung: Suggested playing to AUICK's strength, the focus on medium-sized cities. There remains a large gap in international thinking about urbanization and development. He also raised questions of how much latitude UNFPA allows for AUICK, how will the 2003 program change to fit the new strategy, and what can we suggest about evaluation.

Ness: On evaluation for UNFPA, we should note that Kobe is the only city that successfully followed the UNFPA strategy of the mid-1980s to develop sustained institutional mechanisms to sustain the interaction among cities after a number of international meetings. This did not happen in Rome, Barcelona or Mexico. Kobe alone followed this path. Moreover, the investments made by UNFPA over the years have generated substantially greater investments by the Kobe City government, resulting in rich dividends in the form of many training activities, research projects and information dissemination.

Lim: It is especially useful in implementing the new strategy to focus on a smaller number of cities, people and topics. For topics, consider Population and Aging, Transportation, and Water. In dissemination, focus on lessons learned from various experiences and research, as this will provide practical steps that others can follow.

Taiwar: For evaluation, make more use of questionnaires sent to the past trainees, especially asking them what benefits they received, how they were able to put lessons into practice and how the training could have been made more useful.

Iqbal: Seconded the idea of the questionnaires for trainees, especially reaching them some months after they had the training. As to topics, consider urbanization and all forms of pollution, population dynamics, and ways to reduce rural to urban migration by rural development projects.

Cheung: Before launching new data collection activities for evaluation, examine the data that are already available in various reports and other documented experience. On training subjects, water is certainly a good one, and it is easily related to mortality reduction. In examining this set of issues, focus on both macro and micro levels. Macro pictures of the water supply and management system for a city can be generated rather easily through existing reports and interviews with officials. In addition, consider focused interviews with families with young children (e.g. 2 and under) on behaviors related to health and mortality. Finally, in thinking about education, consider skills training for the workforce as well as formal academic education.

Ness: Consider advertising the website in UN journals and professional population and urbanization journals. Then a count of hits and downloads can provide an indication of the information dissemination activity.

Haryono: As to topics, consider ways to assist urban immigrants to gain greater empowerment and access to urban resources. Water management is also a critical and practical subject for research and training.

Taiwar: Consider gender imbalances as underlying or crosscutting all topics.

Iqbal: Both noted the importance of work on and in slums. There are excellent experiences, such as Orangi in Pakistan, which can be documented and disseminated widely for lessons for other managers. More attention should be given to how the quality of slum life can be enhanced.
Iskatsubu:

(a) 2004 will be the 15th anniversary of AUICK. This will be a good time to invite the new Associate City Mayors for a symposium on urban issues and AUICK strategies;

(b) There is a budget for the Asian Urbanization book and prefers full publication of the book. We seek suggestions on ways to report AUICK activities to UNFPA;

(c) Mr. Sasayama, Chairman of AUICK, recently held a meeting with Ms. Thoraya Obeid, Executive Director, UNFPA in Tokyo and requested her opinion about AUICK's project proposal for 2004-2007 to UNFPA;

(d) She advised that the outcome of past projects which contributed to raise Asian quality of life should be presented to UNFPA in the AUICK activity report. She also said that an Arab Urban Development Institute would seek ways to make contact with AUICK and to offer an information exchange on urban development subjects.

General: A discussion of the future schedule suggested a meeting of Associate City Mayors next July or August with the IAC members in attendance, and followed by the IAC meeting. Following the Mayors' meeting will be a seminar on broad strategies for senior bureaucrats from the Associate Cities, followed by a technical training workshop for Associate Cities technocrats.

There was also general agreement that topics for the future should include water, mortality reduction, education with a focus on work training for the poor, waste management, and gender as a cross cutting issue for all topics.

Ness and Ando: We will review the past proposal (unsuccessful) to the Gates Foundation to fund a network of training and research projects using dynamic modeling to link university scientists and urban administrators in planning urban futures. It may be possible to submit a proposal to the Japanese Ministry of Education through Nihon University for this type of activity. An organizational plan has already been developed for the kind of city-university partnership proposed in the Five Cities book. In addition an organizational plan and budget have been developed for the training network. This can be focused on a set of the Associate Cities.

Kuroda: Concluded the meeting by reminding us that what we call "medium-sized cities" is not a static group. It is very dynamic. Some cities grow and move into this group; others grow and move out to the major metropolises. People always move, and cities change their size. So we must not forget that all of urbanization is a highly dynamic process. We should look for ways to include this dynamic in our analyses.

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**Attended IAC Members**

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<tr>
<th>Name</th>
<th>Title and Affiliation</th>
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<tbody>
<tr>
<td>Dr. Prem P. Talwar</td>
<td>Adjunct Professor, School of Public Health, University of North Carolina, India</td>
</tr>
<tr>
<td>Dr. Haryono Suyono</td>
<td>Former Coordinating Minister for Social Welfare and Poverty Alleviation, Indonesia</td>
</tr>
<tr>
<td>Dr. M.A. Kreem Iqbal</td>
<td>Member, Sindh Local Govt. Commission, Pakistan</td>
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<tr>
<td>Dr. Jung Duk Lim</td>
<td>Professor, Dept. of Economics, Pusan National University, Labour Research Institute, Pusan National University, Republic of Korea</td>
</tr>
<tr>
<td>Dr. Krasae Chanawongse</td>
<td>Advisor to Prime Minister, Thailand</td>
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<tr>
<td>Dr. Gayl D. Ness</td>
<td>Professor Emeritus, University of Michigan, U.S.A.</td>
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<tr>
<td>Dr. Paul Cheung</td>
<td>President, International Association for Official Statistics, Singapore</td>
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<tr>
<td>Dr. Toshio Kuroda</td>
<td>Director Emeritus of Population Research Institute, Nihon University, Japan</td>
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**Observers**

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<tr>
<td>Dr. Prijono TjiptoberiJanto</td>
<td>Secretary to the Vice President, Indonesia</td>
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**Editor’s Note:** This is an article compiled from the minutes taken by Dr. Gayl D. Ness, and Dr. Hirofumi Ando during the IAC Meeting of July 27, 2003. AUICK takes full editorial responsibility for the contents of this article.
Have you ever visited the AUICK website?

The AUICK website is located at www.auick.org and houses an extensive supply of information on the population and urban situation of the Asian medium-sized cities. AUICK is continually developing this website to provide up-to-date and easily accessible information on population and urban problems and solutions.

The website provides user-friendly access to the latest news from AUICK, as well as our strategic project, organizational structure, programs and achievements. The website has a searchable database and includes AUICK publications (most in full) including past Newsletters, In-depth Studies, Training Course Reports and useful links to AUICK partners.

ABOUT US gives detailed information on the history, areas of concern and achievements of AUICK over the last 15 years. The page also includes a flowchart of the organizational structure of AUICK.

PROGRAMS outlines the many different kinds of programs that AUICK has implemented in order to disseminate information, aid in capacity building and encourage South-South cooperation including; annual seminars, workshops, newsletters, research studies and periodic conferences.

PUBLICATIONS provides many information resources which AUICK has published over the past 15 years. Many of these publications have been uploaded in full to allow easy access to our Newsletters, Reports from past training courses and seminars and our In-depth studies.

WHAT'S NEW is periodically updated to keep you abreast of the latest news from AUICK.

DATABASE is a very useful tool for anyone who wants to search for a specific theme on urban issues in our past publications. We have a large amount of searchable information and the database is very easy to navigate; it includes a comprehensive help option to help make your search fast and effective. We are continually adding to this database to provide the most accurate and pertinent information for our webpage users.

ACCESS gives AUICK's address and includes photos of Kobe and the AUICK building.

LINKS is the gateway to the homepages of some of our AUICK Associate City partners, as well as UNFPA and Academic organizations.

AUICK welcomes your contribution

Sharing information is a crucial part of AUICK's activities. This newsletter is intended to be a venue for the exchange of information on urban and population problems in Asian cities. Your contribution to the newsletter is very important. Based on our regulations, payment will be made for published works. Please send your opinions, articles, information, papers, and pictures to:

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