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Letter to the Editor

The population control bill, 2021: exploring newer perspectives

Sir,

As we observe the World Population Day on 11th July, the current population stands at roughly 7.9 billion in 2021, with India bagging the second place at 1.39 billion.¹ The net growth rate stands at 1.1% or 83 million per year and the projected world population by 2050 is estimated to be 9.7 billion.¹ These figures are alarming to us-the millennials, who grew up writing ominous essays on 'population explosion' at school. Governments across the world, historically Romania to more recently China, have adopted population policies to control the rate of population growth to cater to their advantage-either economically or politically. Some of them directly against reproductive rights- to decide freely and responsibly the number, spacing and timing of their children and to be able to do so without discrimination, coercion and violence.²

If we look at the demographic profile of India, the current fertility rate is around 2.3, while the replacement fertility rate is 2.1, with Bihar (3.3), Uttar Pradesh (3.1), Madhya Pradesh (2.8), Jharkhand (2.6) and Chhattisgarh (2.5) in the lead.³ As per predictions of the United Nations, the population of India is expected to supersede China by 2027.¹ An expanding population raises pressing concerns in terms of equitable resource allocation, access to basic necessities and healthcare, economic impact and quality of life. More recently, the pandemic has driven home the need to eliminate densely populated demographic profile that is inherent to metro cities of India. Growing demands of a humongous population have already left the health facilities drained and sapped. These dire projections have led many to consider population control measures.

The draft of the proposed population control bill by the Government of the most populous state of Uttar Pradesh has hit the news, eliciting mixed reactions amongst the public. On one hand, this bill commendably stresses on accessibility to contraception and safe abortion services as well as improvement of reproductive health. On the other hand, it proposes incentives to couples adopting the 2-child or 1-child norm such as salary increments, attractive subsidies, many benefits to the single child and free health facilities. It also disincentivizes those who violate the 2-child norm by cutting back on promotions/consideration for Government jobs/Benefit schemes and also barring them from contesting in local bodies.

Amongst all its benefits, what the UP Government has failed to consider is the effect of the pandemic on the population profile. If we analyze statistics, most COVID related deaths were among the elderly in India, making the

size of the workforce nearly constant.⁵ On the other hand, the disability related to the disease has left the younger crowd less productive. Hence there is a need for a young, skilled workforce in the future. Unlike the previous pandemics, the so-called baby boom is not likely to happen since the impact is going to be prolonged; there is no role of replacement conception. Also, economic anxiety is likely to reduce fertility rates.⁴ In concordance, China has seen a decline in growth rate post-pandemic and has jumped from 1-child norm to 3-child norm!

Moreover, the bill is being viewed as 'coercion' and directly opposed to the reproductive rights of couples. It also pushes for permanent birth control rather than spacing-which is the real need of the hour. While its focus on reproductive health and access to services is noteworthy and encouragement to girl child laudable, its stubborn promotion of 1-child norm can be seen as unfair. However, the Government has generously invited suggestions concerning the draft of the bill and has received many enthusiastic responses. This seems to be a democratic step in policy-making. On a closing note, having a draconian population control bill is unlikely to benefit the public it is designed to serve and in addition, backfire politically as well. One report estimates that around 2.7 million unintended pregnancies to have occurred due to lack of access to contraception in low- and middle-income countries during the pandemic.⁵ Accordingly, it would be apt to focus on educating the population on contraceptive measures and ensure safe access to reproductive health.

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