

Preconditions for a Population Policy in Botswana

By Cornelis VanderPost

Botswana is generally regarded as a model of economic growth and democracy in Africa, but like other countries in the region, is faced with rapid population increase: An annual growth rate of 3% threatens to undermine rising living standards. Nevertheless, a population policy is not a high priority within the government. In spite of Botswana's well-developed health infrastructure, low infant mortality and high literacy rate, other conditions are needed for implementation of an effective population policy. Favorable attitudes among the people toward smaller family sizes and a commitment among political leaders to long-term policies may not presently be strong enough, and socioeconomic problems related to rapid population growth may not be extreme enough, to prompt the government to take definite action.

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Botswana is among the African countries that, following calls by the United Nations General Assembly and the subsequent All-Africa Parliamentary Conference on Population and Development held in Harare, Zimbabwe, pledged themselves to formulate and implement a national population policy.¹ In 1987, Botswana's Central Statistics Office and its Ministry of Health published a report that was intended to "contribute to continued serious consideration of the role of population factors in Botswana's development."² The report's message was that, if uncontrolled population growth continued, such social services as education and health care would be beyond the means of the nation, unemployment would rise, and the standard of living would decline. This message appears to be as valid today as it was in 1987.

Population policies are not limited to reducing fertility, but are more comprehensively aimed at general improvements in living conditions; their goals include improvements in family health education, the status of women and health care, and the reduction of infant and child mortality. In countries that have formulated and successfully implemented a population policy, the following circumstances generally exist:

- The general economic and social conditions in the country must point to the existence of a population problem.
- The government and political leaders

must favor reduction of population growth.

- The population must hold positive attitudes toward fertility reduction.
- The basic infrastructure needed, such as roads and clinics, must be in place.³

In countries that have implemented population policies, the government has realized that national development aspirations can be seriously hampered or delayed by rapid population growth. India is a case in point, while China is an example of a country where the government denied for a long time, mainly for ideological reasons, the existence of a population problem, only to subsequently develop the most stringent policies in the world.

In Africa, countries with large populations (e.g., Nigeria and Zaire) or with severe economic problems (e.g., Zambia and Kenya) have been the first to develop population policies. In these countries, rapid population growth and a stagnating economy have made attitudes toward fertility reduction more favorable.⁴ The combination of economic problems and rapid population growth manifests itself in such symptoms as rising unemployment and growing deficiencies in social services, conditions that may provide impetus for development of a population policy.

Do the conditions necessary for the creation and introduction of a population policy exist in Botswana?

Socioeconomic Conditions

Current conditions in Botswana are not comparable to those in the countries just mentioned. Botswana, a large country with a small population, is one of the few countries in Africa with a recent history

of rapid economic growth. For example, during the 1980s, the per capita gross domestic product (GDP) increased by over 8% per year.⁵ The country has a well-developed, government-financed health care system that has included a family planning program since the 1970s. Good basic health care and a drought relief strategy have contributed to a marked reduction in infant mortality, recently estimated at 45 deaths per thousand live births,⁶ one of the lowest rates in Africa.

However, Botswana's future economic health is not ensured because, as in other African nations, the population is growing rapidly and the economy has serious weaknesses. In both Zambia and Kenya, the economy grew rapidly but then stagnated, a difficult situation to cope with in a context of extremely rapid population growth.

Although the reasons and background for economic problems and economic stagnation in African nations are many and diverse, it is clear that economic development and economic recovery are hampered by rapid population growth. Few countries perceive population control as the ultimate solution to economic problems, but many believe that reducing population growth could make a substantial contribution.

Despite the strength of the economy, rapid population growth remains a major concern for Botswana. Although provisional data from the 1991 census suggest that the total fertility rate fell from 6.2 in 1981 (revised adjusted estimate) to 4.1 in 1991, the census results also confirm that overall population growth remained at about 3.4% per year between 1981 and 1991.⁷ Growth is currently estimated at just under 3% per year⁸ and is expected to decrease slowly, averaging about 2.5% per year during the next decade, a rate at which the population will double within 30 years.

There are also problems on the economic front. Botswana's economy lacks diversification and has a very vulnerable agricultural sector because of periodic droughts. In addition, foreign exchange earnings and government income depend heavily on diamond prices in the world market: In 1990-1991, 55% of government revenue was derived directly from the sale of minerals,⁹ mainly diamonds.

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A 1993 report on population and development issues in Botswana focuses on three major economic issues of grave concern for the future.¹⁰ First, rapid economic growth has not eradicated poverty, and the fruits of Botswana's progress are to an increasing degree unevenly distributed among the people.¹¹ In this semiarid country, conditions for the majority of rural people who remain dependent on subsistence farming are not unlike those in the Sahel. Only the government's diamond revenues enabled it to feed large proportions of the rural population during a series of recent droughts, avoiding famine and establishing Botswana's reputation as the country with the most efficient food aid program in Africa.¹²

The second issue is the rising level of unemployment. The seventh National Development Plan estimates that more than 600,000 new jobs will be needed between 1991 and 2016—almost three times the estimate of 210,000 people employed in the formal sector in March 1991, when unemployment was around 25%. The plan assumes that continued economic growth will generate a substantial number of jobs and expects the informal sector to make up the difference.¹³ This is overly optimistic; even an impressive increase in formal employment may not prevent an equally rapid increase in the numbers of urban and rural unemployed when the generation born during the previous decades of rapid population growth enters the labor force.

The third point concerns the economic, environmental and social sustainability of the current economic development scenario. The main economic problem is the economy's dependence on diamond revenue. Recent world market price fluctuations and increasingly successful efforts to manufacture artificial diamonds make the diversification of the economy an urgent matter.

The main environmental concerns are that population growth in combination with economic expansion will accelerate the loss of valuable and unique wildlife habitats and will lead to deforestation, overgrazing, soil erosion and eventually desertification.¹⁴ The report also expresses concern over the effects of the expansion of conventional dry-land crop cultivation and ranching in the semiarid Kalahari, which covers most of Botswana, and over the rapidly increasing consumption of limited groundwater.

In addition, increasing income inequality may lead to social and political unrest. There is also the issue of providing such social service facilities as schools and clin-

ics for the rapidly growing population. In spite of its relatively high income and a substantial school building program, for example, the government cannot provide enough classrooms for the increasing number of children entering primary school. Only 69% of all classes are expected to have a classroom by the end of the period covered by the seventh National Development Plan;¹⁵ other classes will have to share rooms or convene outside.

Thus, Botswana, like other African countries, is experiencing economic, social and environmental problems, which are exacerbated by rapid population growth. These problems have not yet taken on crisis proportions nor are they as serious as in other African countries, but they have become sufficiently noticeable in recent years to raise substantial concern about population growth. Botswana is still in a position to head off population problems and thus to create some breathing space to work on its economic, social and environmental problems.

The Government's Position

Population growth is deceptive. It does not appear to be very alarming when one's perspective encompasses one, two, five or even 10 years, the perspective employed by most government development plans. Only when one looks 20 or 40 years ahead can one realize that populations can double or even quadruple within a person's lifetime. The 1991 Population Census of Botswana counted 1.3 million people, more than double the country's 1971 population of 597,000.¹⁶

Following the All-Africa Conference on Population and Development of 1986, a similar conference was held for legislators and chiefs in Botswana. The participants expressed concern over the possibility that rapid population growth might hinder Botswana's ability to achieve its goals of higher per capita income, productive employment for all who wish to work, food self-sufficiency and preservation of natural resources. The group recommended that the government formulate and implement a national population policy "that will reduce the high rates of population growth in Botswana in an effort to attain a balance between resources and the needs and opportunities of our people."¹⁷

Two 1987 conferences for senior public officers on population and development re-

iterated these recommendations. An inter-ministerial steering committee was set up to advise the government on population programs, such as the Botswana Population Sector Assistance Program funded by the U.S. Agency for International Development and activities funded by the United Nations Population Fund, and to lay the groundwork for Botswana's population policy.

However, because of various factors, including the economic boom experienced in the country at the time and confusion about actual fertility levels, the "population problem" did not remain on the government's political agenda. Because the 1981 census report overestimated fertility,¹⁸ the lower levels recorded in later surveys led people to believe that a substantial reduction in the population growth rate was already occurring. In reality, however, the population growth rate declined slowly because mortality decreased and fertility reduction was not as dramatic as the erroneous figures suggested. Indeed, the 1991 census figures suggested an average growth rate of 3.4% per year for 1981–1991.

In the meantime, during the late 1980s and early 1990s, it became increasingly clear that Botswana's economic growth had not overcome the basic problems of increasing urban unemployment, wide-

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spread rural poverty, a widening gap between rich and poor, and poverty-related environmental degradation. As the seventh National Development Plan noted, "in relation to the resource base—the productive land, water, forests and capital stock on which the quality of life of the people depends—the population is large. Indeed, those resources are under great strain to provide even minimum subsistence needs to many of the nation's families."¹⁹ The development plan reiterated that "Government has decided that a clearly stated policy on population issues is needed, as well as a programme for its coordinated implementation."²⁰

As a first step, the rather informal Population Steering Committee was changed into a Population Council with a clear status in the government structure and a secretariat located in the Ministry of Finance

and Development Planning. The council, with a membership of 16 drawn from the civil service, the private sector and non-governmental organizations, meets four times per year. Its main task is to formulate a national population policy.

Definite advances have also been made in the promotion and use of family planning throughout the country.²¹ Nevertheless, the government has not taken a firm stand on the need for family limitation. The National Development Plan states its goals as follows:

to improve the quality of family life by providing to prospective parents, in a convenient and timely fashion, information on, and methods for, controlling conception and promoting healthy family formation in order to assist parents to make well informed and practical decisions about the timing, spacing and number of their children....the effective implementation of this policy should enable parents to have the number of children they want when they want them.²²

A further factor contributing to the slow progress of population policy formulation is concern about the attitudes—and thus the potential voting behavior—of the general public, especially the rural majority. In addition, for politicians who are mostly concerned with short-term politics—such as preparing for the next election, managing economic problems that have accelerated unemployment, and coping with various corruption scandals—not much immediate gain is to be derived from a population policy whose long-term benefits may only become obvious in the distant (political) future. Thus, in spite of positive rhetoric, a population policy is not currently among the government's top priorities.

Family Planning Infrastructure

Apart from administrative and institutional arrangements, successful implementation of a population policy requires clinics, family planning services and access roads enabling people to reach the facilities. Much of this infrastructure is already in place in Botswana.

Family planning was introduced in Botswana in 1967 and was, until 1973, funded by the International Planned Parenthood Federation. Since 1973, funding has been provided by the government as part of an integrated maternal and child health and family planning program. Under this program, family planning services have become widely available: Services were first provided in urban areas and were then extended to rural areas during the 1980s.²³

The widespread access to services has been possible because of a massive expansion in the number of clinics all over the country. In 1990, Botswana's population of 1.3 million was fairly well served by 308 health posts and 170 clinics; the government estimates that 73% of the people live within eight kilometers of a health facility.²⁴ There are only 17 doctors per 100,000 people, but the number of nurses working in the country's clinics reached 179 per 100,000 in 1989. Access to health services has also been improved by easier travel: In 1990, Botswana had 2,664 kilometers of tarred roads, compared with only 20 kilometers in 1966.²⁵

While there are indications that the health and family planning programs have helped to reduce infant mortality as well as fertility, family planning is not currently aimed specifically at the reduction of the average family size nor is it part of a comprehensive population policy.

Survey of Popular Perceptions

Of equal importance to the successful implementation of a population policy are the attitudes of the general population. Some of the relevant questions are: Do the people realize that population growth takes place? Do they experience any of its effects? If so, do they relate those effects to family size and family planning issues?

Background information on people's perceptions can be derived from a population attitude survey that was commissioned by the Population Steering Committee and conducted in six districts by the Central Statistics Office and the University of Botswana in 1989. We examine some of the data from the Ngwaketse district (where the author was responsible for data collection), which is fairly representative of the country, because it incorporates both a densely populated area in the east, close to the capital city Gaborone, and an area of low density in the arid, sandy west. In Ngwaketse district, a representative sample of 498 persons aged 15 or older were interviewed based on a national sampling frame used by the Central Statistics Office. The survey results are described in detail in an unpublished report to the Steering Committee.²⁶

Population Growth

Ngwaketse, an area of 27,370 square kilometers in southern Botswana, had 130,000 inhabitants in 1991, with the population increasing at about 3% per year.²⁷ The population, which is mostly rural, is concentrated in the east, where rainfall is relatively plentiful. About one-quarter of the

Table 1. Percentages of households allocated communal land and owning livestock, by selected characteristics of head of household, Ngwaketse district, Botswana, 1989

Characteristic	Allocated land	Owning livestock
All	60	53
Sex		
Male	73	64
Female	55	49
Age		
15–24	25	20
25–44	41	54
≥45	77	57
Education		
None	65	55
Primary	61	54
>Primary	33	33
Residence		
Kanye	48	41
Other	69	61

Source: reference 26.

people live in Kanye, the district administrative center, while the rest reside in villages and scattered hamlets.

The Ngwaketse survey found that 66% of the respondents were aware that the population in their communities had substantially increased during the five years preceding the survey. When asked the reason for this growth, 49% cited large families, while 12% attributed it to in-migration.

The survey also asked whether people regarded this growth as advantageous or disadvantageous to their community. About 50% of all respondents believed that their community was better off with an increased population, mostly because it "brings more development" such as the construction of schools and clinics. Only about 10% thought that their village was worse off because growth created unemployment and a shortage of facilities. These respondents were likely to be younger, more educated and residing in the relatively crowded town of Kanye.

Basic Needs and Services

Although most respondents felt that it was advantageous to have more people in the village, many said they had had increased difficulty, over the five years before the survey, in obtaining water (37%), wood (64%) and housing (29%). People living in Kanye were more likely than those living elsewhere to report increased difficulty in obtaining wood (89% vs. 45%), but less likely to report more problems obtaining water (17% vs. 52%). In addition, 60% of respondents said there were not enough places in the schools for their children, and 61% said that clinics were overcrowded; both per-

centages were significantly higher in Kanye.

The majority of respondents cited the increasing number of children to be educated and the growing number of people needing medical attention as the reasons for these difficulties. When asked for solutions, most people said the government should provide more facilities. There was no indication that people directly connected these problems with family size.

Land for Crops and Grazing

Access to land for crop production and animal grazing is vital to rural subsistence in Ngwaketse, but some groups, mostly younger people and women who head households, are having difficulty in obtaining good land (Table 1). Most good cropland is now in the hands of older men who were the main beneficiaries of the traditional land allocation system, and the little land that becomes available is not enough for the growing population. Communal grazing lands near villages have become overstocked and overgrazed, and only the wealthy have the capital needed to tap the deep groundwater in the remaining productive grazing land, most of which is located far from easily accessible water sources.

An increasing proportion of the population no longer own any cattle, partly because of decreasing access to productive grazing land. Instead, the poorer segments of the rural population are increasingly keeping small livestock such as goats. This implies a worsening of the overall standard of living, as cattle used to be the mainstay in an environment in which crop cultivation is an extremely risky undertaking. It is thus not surprising to find that 42% of the survey respondents believed that it would be very difficult for their children to acquire enough land to produce a living.

Family Size and Family Planning

In answer to the question "If you (could go back to the time before you had any children and) could choose exactly the number of children to have in your whole life, how many would that be?" the average for all respondents in the survey was 6.2 children. The figure was considerably lower among young people and respon-

dents with more than a primary education than among respondents aged 45 or older and those with no education (Table 2), signaling that important changes in family-size aspirations may be occurring.

Only 25% of the survey respondents in Ngwaketse had ever used any modern or traditional method of family planning. Women were more than twice as likely as men to report having used a method (29% vs. 14%), and respondents living in Kanye were more likely to report having done so than were those living in small villages (28% vs. 22%). Ever-use rose from 12% among those with no schooling to 54% among those with more than a primary education.

Two-thirds of all respondents stated that they would like to learn more about family planning, in particular about the use and the safety of various methods, while 44% indicated that they would like to begin using family planning in the near future. In addition, 42% of the respondents were in favor of increased sex education and the promotion of family planning among youth to combat the high incidence of teenage pregnancy (29% of teenage girls in Ngwaketse become pregnant before their 20th birthday).

Conclusion

Currently, socioeconomic conditions in Botswana are fairly good in comparison with those in many other African countries. This situation puts the country in an ideal position to avert more serious population problems in the future, but it decreases the need to push the population issue to the top of the political agenda and to move rapidly to implement a population policy aimed at family size reduction. Unfortunately, it appears that the population situation must become worse before its seriousness and its long-term consequences will be recognized. The population problems of countries that have adopted and implemented population policies (e.g., Nigeria and Zambia) generally had reached a far more serious stage before the government acted.

The attitudes and perceptions of the political leaders are colored by Botswana's comparatively healthy socioeconomic circumstances and by traditional attitudes toward family and family size among the people. The government has taken some steps toward a population policy, but so far has not done so very consistently or with any sense of urgency.

Botswana's population is beginning to recognize that population growth leads to a shortage of resources and facilities. As yet, however, there is little indication that

people connect these problems to family size, although there is evidence that many people feel a need for family planning education and information.

In conclusion, only some of the conditions necessary for the implementation of a population policy aimed at the reduction of family size currently exist in Botswana, although the country's sound infrastructure, high literacy rate and changing attitudes among the young and educated hold promise for the future.

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20. *Ibid.*, p. 91.
21. N. Rutenberg and I. Diamond, 1991, op. cit. (see reference 18).

Table 2. Ideal number of children, by respondent's education, according to age

Education	15-24	25-34	35-44	≥45
None	5.75	6.21	6.96	8.09
Primary	4.47	5.12	7.22	8.36
>Primary	3.84	4.25	4.67	4.50

Source: reference 26.

22. Ministry of Finance and Development Planning, 1991, op. cit. (see reference 5).
23. N. Rutenberg and I. Diamond, 1991, op. cit. (see reference 18).
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27. Central Statistics Office, 1991, op. cit. (see reference 16).

Resumen

Botswana es generalmente considerada como un modelo de crecimiento económico y de democracia en el África, aunque, sin embargo, como otros países de la región, enfrenta un rápido aumento demográfico: una tasa de crecimiento anual del 3% amenaza socavar el au-

mento en el nivel de vida. Sin embargo, el gobierno no le asigna gran prioridad a la política demográfica. A pesar de contar con una infraestructura bien desarrollada del sector de salud, una tasa de mortalidad infantil baja, y elevados índices de alfabetismo, se requieren otras condiciones para poder ejecutar una política demográfica eficaz. La actitud favorable de la población con respecto a reducir el número de hijos y el compromiso de los líderes políticos a adoptar políticas a largo plazo no son suficientemente firmes en la actualidad, ni tampoco han llegado a un punto extremo los problemas socioeconómicos, como para que el gobierno se sienta urgido a adoptar una medida definitiva en este sector.

Résumé

Le Botswana est généralement considéré comme un modèle de croissance économique et de démocratie en Afrique. A l'image de ses

voisins, le pays n'en est pas moins confronté au problème d'une rapide croissance démographique et son taux d'accroissement annuel de 3% menace les gains tirés de l'amélioration du niveau de vie. La politique démographique ne compte cependant pas au nombre des hautes priorités de l'Etat. Malgré l'infrastructure sanitaire bien développée du Botswana, sa faible mortalité infantile et son taux d'alphabétisme élevé, d'autres conditions doivent être remplies pour qu'une politique démographique efficace puisse être mise en œuvre. La faveur du public envers les familles de taille réduite et l'engagement des responsables politiques à l'égard de politiques à long terme ne sont peut-être pas suffisants à l'heure actuelle, et les problèmes socio-économiques liés à l'explosion de la population, ne sont peut-être pas encore suffisamment sérieux pour inciter le gouvernement à prendre des mesures plus déterminées.