



Short Communication

Decline in Birth Rate: A Growing Iran Concern

Danial Z¹, Kalantar Motamedi MH^{1*}, Koshmohabat H¹, Mirhashemi S¹ and Danial N²

¹Baqiyatallah University of Medical Sciences, Tehran, Iran

²Esavand School, Ministry of Educational and Development, Share Ghods, Tehran, Iran

*Corresponding author: Kalantar Motamedi, PO Box: 1994943636 – Tehran, Iran, Tel: +982188053766; Fax: +98 21 88053766; E-mail: motamedical@yahoo.com

Rec date: Jul 27, 2015 Acc date: Nov 10, 2015 Pub date: Nov 14, 2015

Short Communication

In 2010-2015, the 83 countries with below-replacement fertility accounted for 46 per cent of the world's population. The most populous countries with below replacement fertility are China, the United States of America, Brazil, the Russian Federation, Japan, Vietnam, Germany, the Islamic Republic of Iran, and Thailand, in order of population size [1]. Many countries especially in Europe and Scandinavia have a negative growth rate [2-4] in these nations the elderly now form the major proportion of the population [3]. Over the past four decades, Iran has experienced several different policies on population control, and finally from 1985, the greatest and most rapid decline in fertility occurred because of the government's population control programs. In the last census of the country, the population growth rate and the mean household size was 1.3% and 3.6% respectively. Reproductive health and family planning programs in Iran caused many improvements in increasing the use of contraceptive methods and controlling the birth rate. Iran has successfully completed its commitments under the Plan of Action of the International Conference on Population and Development, but in order to achieve the goals by 2015, it should face significant challenges that require a systematic effort. Although some studies have been conducted in the field of fertility behavior, it is critical to continue monitoring the reproductive behaviors of women and its trends on a national level [2]. With young people in minority, these nations may begin to encounter a lack of sufficient capable human resources. This is a growing concern as it will increase the need for specialists in geriatric medicine which is limited in the many healthcare systems. Among the Middle Eastern countries, Iran is facing a decline in birth rate. In 1983 the Total Fertility Rate (TFR) was about 6.54 (4.1 growth rate) and the government created an atmosphere of economic incentives where families were encouraged to have more children (the baby boom). After this period in 1988, government policy was reversed and family planning was officially started encouraging a maximum of two children. However, despite this Iran's population grew to 70,495,782 in 2006. In a 2011 census, the population of Iran was reported at 75,149,6695. In 2011 the birth rate decreased to 1.29% [5]. Alongside this decrease in birth rate in Iran, advances in medicine and healthcare improved and the life expectancy

increased. The percentage can be seen in the 15-64 year-old (70.9%) age group; this is expected to lead to a huge increase in the population of elderly people in the next decades and the main part of the population will consist of the elderly with much fewer young people to support them [3]. Youth factor analysis has shown that the mean and median age of the population is moving towards an aging population. It is noteworthy that in the analysis of relations according to the latest global trends show the change of Iran's population is decreasing. Increased costs of living, education and healthcare are among the factors that make people reluctant to have more children [6]. Reproductive health issues and the needs of Iranian women have changed in the last three decades. The interval between the marriage and the first pregnancy and the mean age at the first childbirth has increased. The number of couples with no childbirth because of voluntarily childlessness or infertility is high and should be noted more by policy makers. Although the fertility rate has declined, issues like unwanted pregnancy and use of non-reliable methods of contraception are not resolved yet. Women need more support and guidance from a health care provider to make the best decisions in their short reproductive life. Allocating enough resources for reproductive health services is vital as well [2]. Thus, young males and females tend to delay their marriages until they get a well-paid job that covers the living expenses. Ezeh et al. [7] showed that countries with low or negative growth face rapid population ageing, placing a burden on healthcare systems, problems with public pensions and slowing economic growth. Despite recent government policy, urging the increase in population growth, it is clear that serious action should be taken in this regard. Improving economic conditions, employment and health insurance can be possible solutions to this global problem.

References

1. World Population Prospects (2015) Key Findings and Advance Tables. Department of Economic and Social Affairs Population Division United Nations New York.
2. Ranjbar F, Shirzad M, Kamali K, Akhondi MM, Ghoojani A, et al. (2015) Fertility behaviour of Iranian women: a community-based, cross-sectional study. *below Arch Iran Med* 18: 2-5.
3. Statistical Center of Iran (2011) The President's Office Deputy of Strategic Planning and Control. National population and housing Census 2011 (1390). Selected Findings. Tehran The Center.
4. Noroozian M (2012) The elderly population in iran: an ever growing concern in the health system. *below Iran J Psychiatry Behav Sci* 6: 1-6.
5. Haub C YM (2011) World population data sheet. Washington DC: Population Reference Bureau.
6. Moeeni M, Pourreza A, Torabi F, Heydari H, Mahmoudi M (2014) Analysis of economic determinants of fertility in Iran: a multilevel approach. *below Int J Health Policy Manag* 3: 135-144.
7. Ezeh AC, Bongaarts J, Mberu B (2012) Global population trends and policy options. *below Lancet* 380: 142-148.