Human Overpopulation as the Greatest Challenge for Gynecology of the 21st Century

Background:

A significant number of current global problems, as well as those expected in the future, is directly linked to the size of human population. Namely, the human overpopulation that we are witnessing today is causing severe environmental, healthcare, political and economic, and social problems. In the 2017 report World Scientists Warning to Humanity: A Second Notice, human overpopulation was identified as the main driver of environmental degradation; resource depletion; deforestation; species extinction; climate change and poverty.

Results:

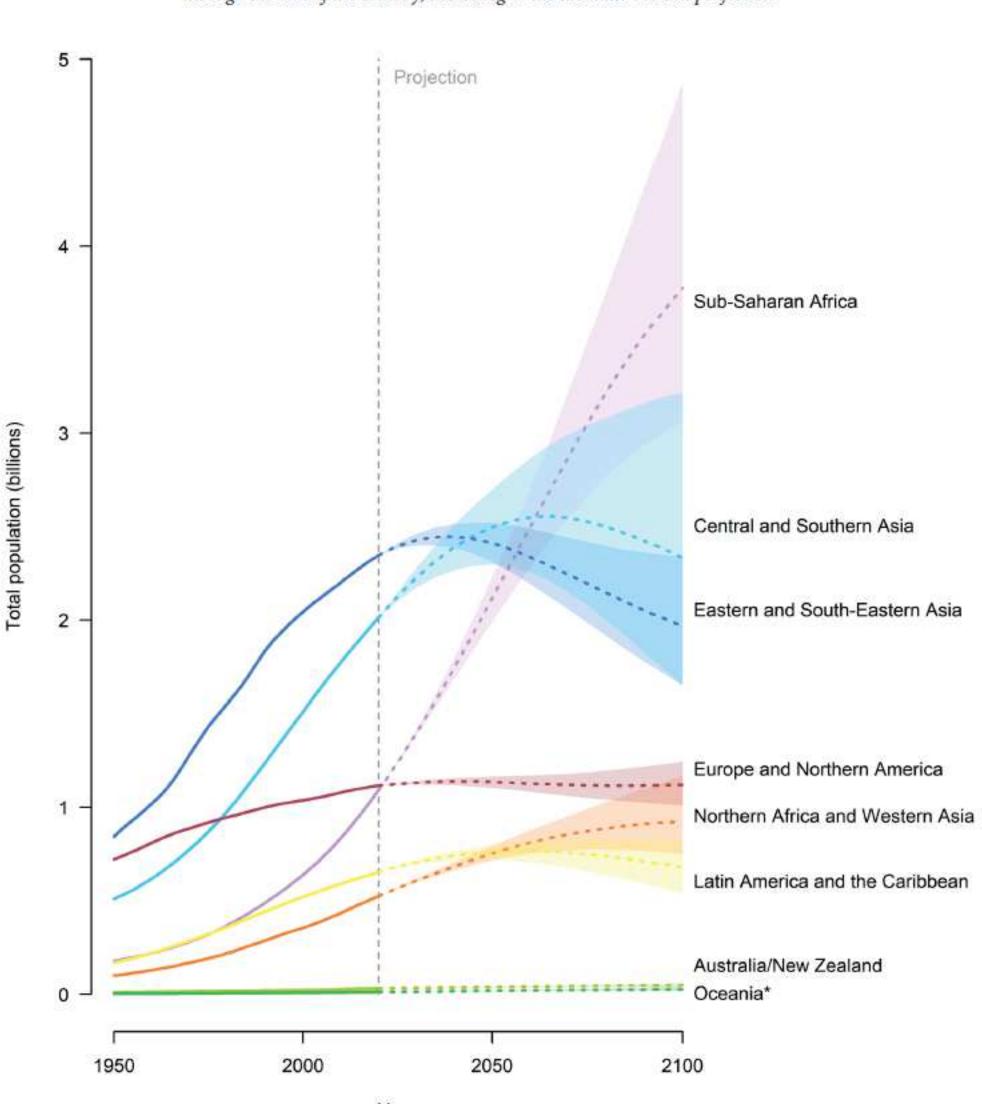
Since 1950, humanity has witnessed a rapid population growth. Even though the fertility level has declined and population growth has slowed down, the human population continues to grow by over 80 million people a year. In mid-2019, the world's population reached 7.7 billion. According to the United Nations projections, the human population will keep growing until 2100, reaching 9.7 billion in 2050 and nearly 11 billion in 2100. Population growth is (and will continue to be) most dramatic in sub-Saharan Africa (see figures).

Globally, nearly 41% of all pregnancies are unintended (some 86 million out of a total 208 million pregnancies a year).

The availability of family planning methods worldwide does not meet current global needs. In mid-2017, 214 million women in developing countries who wanted to avoid pregnancy were not using a modern contraceptive method. Though globally contraceptive use has risen (57 % in 2015 versus 54 % in 1990), it is still deficient in sub-Saharan Africa (28 % in 2015).

Figure 2. Population by SDG region: estimates, 1950-2020, and medium-variant projection with 95 per cent prediction intervals, 2020-2100

Of the eight SDG regions, only sub-Saharan Africa is projected to sustain rapid population growth through the end of the century, according to the medium-variant projection



Data source: United Nations, Department of Economic and Social Affairs, Population Division (2019). World Population Prospects 2019.

* excluding Australia and New Zealand

Keywords:

human overpopulation, unintended pregnancies, family planning, women's rights

Objectives:

The objective of this report is:

- 1. to inform the audience how rapid population growth is progressing by world regions
- 2. to remind the audience of current gynecological problems such as the global epidemic of unintended pregnancies and insufficient availability of family planning
- 3. to show the audience the connection between the seemingly unrelated issues of human overpopulation and rapid population growth and their gynecological challenges

Methods:

This report is based on data from the United Nations (World Population Prospects – 2019 Revision), the Alliance of World Scientists (World Scientists' Warning to Humanity: A Second Notice, 2017), the FIGO's Committee for Women's Health and Human Rights (2017 Newsletter Women's Health Challenges), the FIGO's presentation on The Global Epidemic of Unintended Pregnancies, and the World Healthcare Organization's 2017 Sheet on Family Planning and Contraception.

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Key Messages:

- 1. human overpopulation and, by extension, rapid population growth are the main drivers of many problems that humanity and the planet Earth now face
- 2. the process of finding a solution overlaps with that of gynecological problems mentioned above that could be achieved by greater support and investment into voluntary family planning; greater availability of contraception; and greater support of women's rights, education, and empowerment worldwide
- 3. given the magnitude of problems it causes, human overpopulation, and particularly the global epidemic of unintended pregnancies, should become the greatest challenge for gynecology of the 21st century and family planning's support the gynecologists' top priority. Gynecologists and their organizations worldwide should pay for the sake of both women's health and the health of planet Earth a particular focus on sub-Saharan Africa.





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