

3 MYTHS THAT BLOCK PROGRESS FOR THE POOR

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by
Bill and Melinda
Gates



BILL & MELINDA
GATES foundation



When we visit poor countries, we see first-hand that the world is getting better
(Jamsaut, India, 2011).

3 MYTHS THAT BLOCK PROGRESS FOR THE POOR



by
Bill Gates

By almost any measure, the world is better than it has ever been. People are living longer, healthier lives. Extreme poverty rates have been cut in half in the past 25 years. Child mortality is plunging. Many nations that were aid recipients are now self-sufficient.

You might think that such striking progress would be widely celebrated, and that people would rush to figure out what is working so well and do more of it. But they're not, at least not in proportion to the progress. In fact, I'm struck by how few people think the world is improving, and by how many actually think the opposite—that it is getting worse.

I believe this is partly because many people are in the grip of several myths—mistaken ideas that defy the facts. The most damaging myths are that the poor will remain poor, that efforts to help them are wasted, and that saving lives will only make things worse.

I understand why people might hold these negative views. This is what they see in the news. Bad news happens in dramatic events that are easy for reporters to cover: Famine suddenly strikes a country, or a dictator takes over someplace. Good news—at least the kind of good news that I have in mind—happens in slow motion. Countries are getting richer, but it's hard to capture that on video. Health is improving, but there's no press conference for children who did not die of malaria.

The belief that the world is getting worse, that we can't solve extreme poverty and disease, isn't just mistaken. It is harmful. It can stall progress. It makes efforts to solve these problems seem pointless. It blinds us to the opportunity we have to create a world where almost everyone has a chance to prosper.

If people think the best times are in the past, they can get pessimistic and long for a return to the good old days. If they think the best times are in the future, they see things differently. When science historian James Burke wrote about the Renaissance in *The Day the Universe Changed*, he pointed to one source for many of

the advances that happened in that amazing period: the shift from the belief that everything was decaying and getting worse to the realization that people can create and discover and make things better. We need a similar shift today, if we're going to take full advantage of the opportunity to improve life for everyone.

In all five of the annual letters I have written so far, I have discussed our foundation's activities, showing where we're making progress and where we're not. This year, Melinda and I chose not to focus on the foundation specifically. (The foundation's annual report, which comes out later this year, will do that.)

Instead, we wanted to focus this year's letter entirely on three myths that keep the world from accelerating success against poverty and disease. I wrote about the first two myths, which relate to poverty and aid, and Melinda decided to write about the third one, because it is related to her expertise in reproductive health.

We hear these myths raised at international conferences and at social gatherings. We get asked about them by politicians, reporters, students, and CEOs. All three reflect a dim view of the future, one that says the world isn't improving but staying poor and sick, and getting overcrowded.

We're going to make the opposite case, that the world is getting better, and that in two decades it will be better still.

But that future isn't pre-ordained. To achieve it, we'll need to apply human ingenuity and act on our compassion. That starts with removing the barriers that undercut our confidence and slow our momentum. That's why in this year's letter Melinda and I take apart some of the myths that slow down the work.

The next time you hear these myths, we hope you will do the same.

MYTH

01



POOR COUNTRIES ARE DOOMED TO STAY POOR

by
Bill Gates

I've heard this myth stated about lots of places, but most often about **Africa**. A quick Web search will turn up dozens of headlines and book titles such as *How Rich Countries Got Rich and Why Poor Countries Stay Poor*.





©Corbis, Howard Davies

Thankfully these books are not bestsellers, because the basic premise is false. The fact is, incomes and other measures of human welfare are rising almost everywhere, including in Africa.

So why is this myth so deeply ingrained?

I'll get to Africa in a moment, but first let's look at the broader trend around the world, going back a half-century. Fifty years ago, the world was divided in three: the United States and our Western allies; the Soviet Union and its allies; and everyone else. I was born in 1955 and grew up learning that the so-called First World was well off or "developed." Most everyone in the First World went to school, and we lived long lives. We weren't sure what life was like behind the Iron Curtain, but it sounded like a scary place. Then there was the so-called Third World—basically everyone else. As far as we knew, it was filled with people who were poor, didn't go to school much, and died young. Worse, they were trapped in poverty, with no hope of moving up.

The statistics bear out these impressions. In 1960, almost all of the global economy was in the West. Per capita income in the United States was about \$15,000 a year.¹ (That's income per person, so \$60,000 a year for a family of four.) Across Asia, Africa, and Latin America, incomes per person were far lower. Brazil: \$1,982. China: \$928. Botswana: \$383. And so on.

Years later, I would see this disparity myself when I traveled. Melinda and I visited Mexico City in 1987 and were surprised by the poverty we witnessed. There was no running water in most homes, so we saw people trekking long distances by bike or on foot to fill up water jugs. It reminded us of scenes we had seen in rural Africa. The guy who ran Microsoft's Mexico City office would send his kids back to the United States for checkups to make sure the smog wasn't making them sick.

1

Calculating GDP is an inexact science with a lot of room for error and disagreement. For the sake of consistency, throughout this letter I'll use GDP per capita figures from the Penn World Table, adjusted for inflation to 2005 dollars. And for the sake of simplicity, I'll call it "income per person."

- ◀ Development projects, such as providing safe drinking water, have helped improve lives throughout the world (*Mtwara, Tanzania, 2000*).



©Corbis, Owen Franken

▲ MEXICO CITY 1980



©Corbis, Keith Dannemiller

▲ MEXICO CITY 2011

Today, the city is mind-blowingly different. Its air is as clean as Los Angeles' (which isn't great, but certainly an improvement from 1987). There are high-rise buildings, new roads, and modern bridges. There are still slums and pockets of poverty, but by and large when I visit there now I think, "Wow, most people who live here are middle-class. What a miracle."

Look at the photo of Mexico City from 1980, and compare it to one from 2011. **(TOP)** You can see a similar transformation in these before-and-after photos of Nairobi and Shanghai. **(RIGHT)**

▼ NAIROBI 1969, 2009



©Getty Images, National Geographic



©Corbis, Nigel Pavitt

▼ SHANGHAI 1978, 2012



©Corbis, Dean Conger



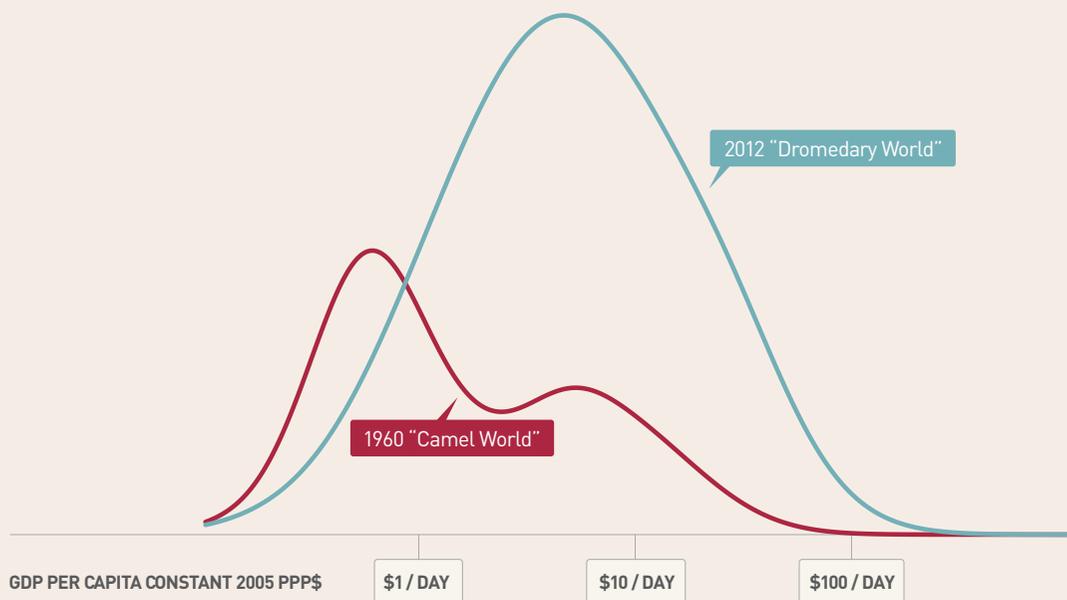
©Corbis, John Heaton

These photos illustrate a powerful story: The global picture of poverty has been completely redrawn in my lifetime. Per-person incomes in Turkey and Chile are where the United States was in 1960. Malaysia is nearly there, as is Gabon. And that no-man's-land between rich and poor countries has been filled in by China, India, Brazil, and others. Since 1960, China's real income per person has gone up eightfold. India's has quadrupled, Brazil's has almost quintupled, and the small country of Botswana, with shrewd management of its mineral resources, has seen a thirty-fold increase. There is a class of nations in the middle that barely existed 50 years ago, and it includes more than half of the world's population.

Here's a way to see the transition: by counting people instead of countries. **(BELOW)**

THE POVERTY CURVE: FROM TWO HUMPS TO ONE

A half-century ago, the distribution of income in the world looked like a camel with two humps. The first hump represented the so-called developing world. The second hump represented people in wealthier countries (mostly in the West). But the world is no longer separated into the West and the rest. More than a billion people have risen out of extreme poverty, and most of humanity is now in the large dromedary-like hump in the middle.



Source: Gapminder, drawing on Jan Luiten van Zanden et al., "The Changing Shape of Global Inequality 1820–2000: Exploring a New Dataset," Working Paper 1, Center for Global Economic History, Utrecht University, January 2011.



So the easiest way to respond to the myth that poor countries are doomed to stay poor is to point to one fact: They haven't stayed poor. Many—though by no means all—of the countries we used to call poor now have thriving economies. And the percentage of very poor people has dropped by more than half since 1990.

That still leaves more than one billion people in extreme poverty, so it's not time to celebrate. But it is fair to say that the world has changed so much that the terms "developing countries" and "developed countries" have outlived their usefulness.

Any category that lumps China and the Democratic Republic of Congo together confuses more than it clarifies. Some so-called developing countries have come so far that it's fair to say they have developed. A handful of failed states are hardly developing at all. Most countries are somewhere in the middle. That's why it's more instructive to think about countries as low-, middle-, or high-income. (Some experts even divide middle-income into two sub-categories: lower-middle and upper-middle.)

With that in mind, I'll turn back to the more specific and pernicious version of this myth: "Sure, the Asian tigers are doing fine, but life in Africa never gets better, and it never will."



By 2035, there will be almost no poor countries left in the world.



- ▼ Health, education, and income are on the rise as more countries in Africa embrace sustainable models of development (*Nairobi, Kenya*).



©Getty Images, Tom Cockrem

First, don't let anyone tell you that Africa is worse off today than it was 50 years ago. Income per person has in fact risen in sub-Saharan Africa over that time, and quite a bit in a few countries. After plummeting during the debt crisis of the 1980s, it has climbed by two thirds since 1998, to nearly \$2,200 from just over \$1,300. Today, more and more countries are turning toward strong sustained development, and more will follow. Seven of the 10 fastest-growing economies of the past half-decade are in Africa.

Africa has also made big strides in health and education. Since 1960, the life span for women in sub-Saharan Africa has gone up from 41 to 57 years, despite the HIV epidemic. Without HIV it would be 61 years. The percentage of children in school has gone from the low 40s to over 75 percent since 1970. Fewer people are hungry, and more people have good nutrition. If getting enough to eat, going to school, and living longer are measures of a good life, then life is definitely getting better there. These improvements are not the end of the story; they're the foundation for more progress.

Of course, these regional averages obscure big differences among countries. In Ethiopia, income is only \$800 a year per person. In Botswana it's nearly \$12,000. You see this huge variation within countries too: Life in a major urban area like Nairobi looks nothing like life in a rural Kenyan village. You should look skeptically at anyone who treats an entire continent as an undifferentiated mass of poverty and disease.

The bottom line: Poor countries are not doomed to stay poor. Some of the so-called developing nations have already developed. Many more are on their way. The nations that are still finding their way are not trying to do something unprecedented. They have good examples to learn from.

I am optimistic enough about this that I am willing to make a prediction. *By 2035, there will be almost no poor countries left in the world.*² Almost all countries will be what we now call lower-middle income or richer. Countries will learn from their most productive neighbors and benefit from innovations like new vaccines, better seeds, and the digital revolution. Their labor forces, buoyed by expanded education, will attract new investments.

A few countries will be held back by war, politics (North Korea, barring a big change there), or geography (landlocked nations in central Africa). And inequality will still be a problem: There will be poor people in every region.

But most of them will live in countries that are self-sufficient. Every nation in South America, Asia, and Central America (with the possible exception of Haiti), and most in coastal Africa, will have joined the ranks of today's middle-income nations. More than 70 percent of countries will have a higher per-person income than China does today. Nearly 90 percent will have a higher income than India does today.

It will be a remarkable achievement. When I was born, most countries in the world were poor. In the next two decades, desperately poor countries will become the exception rather than the rule. Billions of people will have been lifted out of extreme poverty. The idea that this will happen within my lifetime is simply amazing to me.

Some people will say that helping almost every country develop to middle-income status will not solve all the world's problems and will even exacerbate some. It is true that we'll need to develop cheaper, cleaner sources of energy to keep all this growth from making the climate and environment worse. We will also need to solve the problems that come with affluence, like higher rates of diabetes. However, as more people are educated, they will contribute to solving these problems. Bringing the development agenda near to completion will do more to improve human lives than anything else we do.

²

Specifically, I mean that by 2035, almost no country will be as poor as any of the 35 countries that the World Bank classifies as low-income today, even after adjusting for inflation.

MYTH

02



FOREIGN AID IS A BIG WASTE

by
Bill Gates

You may have read news articles about foreign aid that are filled with big generalizations based on small examples. They tend to cite anecdotes about waste in some program and suggest that foreign aid is a waste. If you hear enough of these stories, it's easy to get the impression that aid just doesn't work. It's no wonder that one British newspaper claimed last year that more than half of voters want cuts in overseas aid.





Foreign aid helps refugees like Nikuze Aziza feed their families and stay healthy (Kiziba Camp, Rwanda, 2011).

These articles give you a distorted picture of what is happening in countries that get aid. Since Melinda and I started the foundation 14 years ago, we've been lucky enough to go see the impact of programs funded by the foundation and donor governments. What we see over time is people living longer, getting healthier, and escaping poverty, partly because of services that aid helped develop and deliver.

I worry about the myth that aid doesn't work. It gives political leaders an excuse to try to cut back on it—and that would mean fewer lives are saved, and more time before countries can become self-sufficient.

So I want to take on a few of the criticisms you may have read.³ I should acknowledge up front that no program is perfect, and there are ways that aid can be made more effective. And aid is only one of the

tools for fighting poverty and disease: Wealthy countries also need to make policy changes, like opening their markets and cutting agricultural subsidies, and poor countries need to spend more on health and development for their own people.

But broadly speaking, aid is a fantastic investment, and we should be doing more. It saves and improves lives very effectively, laying the groundwork for the kind of long-term economic progress I described in myth #1 (which in turn helps countries stop depending on aid). It is ironic that the foundation has a reputation for a hard-nosed focus on results, and yet many people are cynical about the government aid programs we partner with. The foundation does a lot to help these programs be more efficient and measure their progress.

3

I'll focus mostly on health and agriculture programs, since that's what Melinda and I have hands-on experience in (and an increasing share of all U.S. aid goes to health). I support other kinds of international aid, including infrastructure and education, but we have done less work in those areas.



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THE AMOUNT OF AID

Many people think that development aid is a large part of rich countries' budgets, which would mean a lot can be saved by cutting back. When pollsters ask Americans what share of the budget goes to aid, the average response is "25 percent." When asked how much the government should spend, people tend to say "10 percent." I suspect you would get similar results in the United Kingdom, Germany, and elsewhere.

Here are the actual numbers. For Norway, the most generous nation in the world, it's less than 3 percent. For the United States, it's less than 1 percent.

One percent of the U.S. budget is about \$30 billion a year. Of that, roughly \$11 billion is spent on health: vaccines, bed nets, family planning, drugs to keep people with HIV alive, and so on. (The other \$19 billion goes to things like building schools, roads, and irrigation systems.)

I don't want to imply that \$11 billion a year isn't a lot of money. But to put it in perspective, it's about \$30 for every American. Imagine that the income tax form asked, "Can we use \$30 of the taxes you're already paying to protect 120 children from measles?"⁴ Would you check yes or no?

It also helps to look at the overall impact this spending has. To get a rough figure, I added up all the money spent by donors on health-related aid since 1980. Then I divided by the number of children's deaths that have been prevented in that same time. It comes to less than \$5,000 per child saved (and that doesn't include the improvements in health that go beyond saving the lives of young children).⁵ \$5,000 may sound expensive, but keep in mind that U.S. government agencies typically value the life of an American at several million dollars.

4

Since the measles vaccine costs 25 cents per child, \$30 would buy enough vaccine for 120 children.

5

I calculated the drop in child mortality since 1980, the start of the "Child Survival Revolution" that made vaccines and oral rehydration therapy much more widespread. It comes to 100 million deaths averted. The total amount of aid, \$500 billion, counts money for vaccines, HIV/AIDS, family planning, and water and sanitation from all donors since 1980.

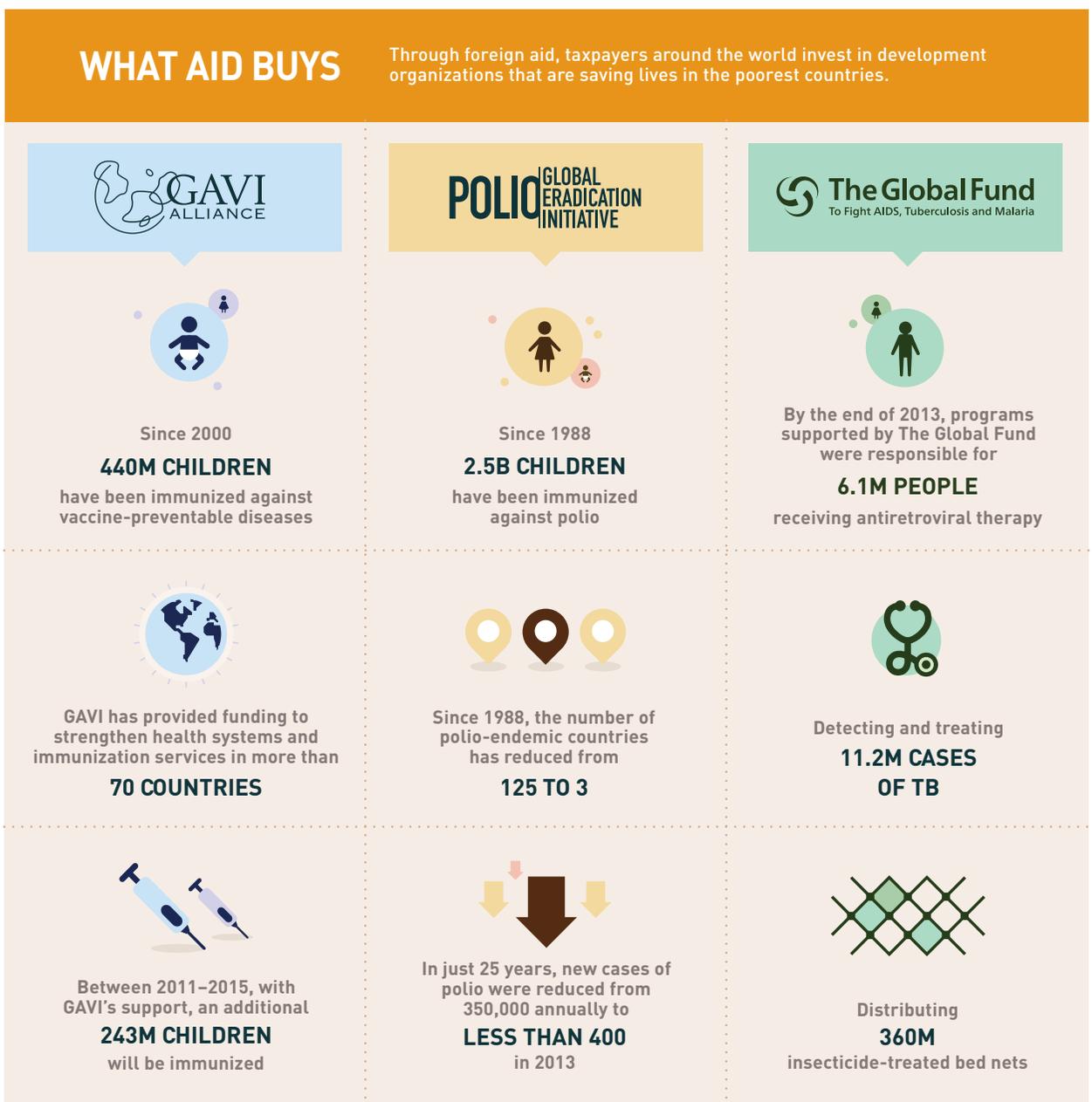
This calculation does not take into account how child mortality might have declined without aid, which would increase the cost per life saved. On the other hand, I included a lot of aid that wasn't meant to save children—but, say, to treat adults with AIDS. So overall this calculation overstates the cost per life saved.

◀ A growing number of countries in Africa are building community health systems, which are extremely cost-effective (Accra, Ghana, 2013).

Also remember that healthy children do more than merely survive. They go to school and eventually work, and over time they make their countries more self-sufficient. This is why I say aid is such a bargain.

This graphic (BELOW) shows you a few of the programs supported by the United States and other donors. As you can see, their impact is quite impressive.

The U.S. government spends more than twice as much on farm subsidies as on health aid. It spends more than 60 times as much on the military. The next time someone tells you we can trim the budget by cutting aid, I hope you will ask whether it will come at the cost of more people dying.



CORRUPTION

One of the most common stories about aid is that some of it gets wasted on corruption. It is true that when health aid is stolen or wasted, it costs lives. We need to root out fraud and squeeze more out of every dollar.

But we should also remember the relative size of the problem. Small-scale corruption, such as a government official who puts in for phony travel expenses, is an inefficiency that amounts to a tax on aid. While we should try to reduce it, there's no way to eliminate it, any more than we could eliminate waste from every government program—or from every business, for that matter. Suppose small-scale corruption amounts to a 2 percent tax on the cost of saving a life. We should try to reduce that. But if we can't, should we stop trying to save lives?

You may have heard about a scandal in Cambodia last year involving a bed net program run by The Global Fund to Fight AIDS, Tuberculosis and Malaria. Cambodian officials were caught taking six-figure kickbacks from contractors. Editorial writers trotted out headlines like "How to waste foreign aid money." One article mentioned me as someone whose money was being wasted.

I appreciate the concern, and it's a good thing when the press holds institutions accountable. But the press didn't uncover this scheme. The Global Fund did, during an internal audit. In finding and fixing the problem, The Global Fund did exactly what it should be doing. It would be odd to demand that they root out corruption and then punish them for tracking down the small percentage that gets misused.



- ▲ Since 2000, a global effort against malaria has saved 3.3 million lives (Phnom Dambang village, Cambodia, 2011).



Four of the past seven governors of Illinois have gone to prison for corruption, and to my knowledge no one has demanded that Illinois schools be shut down or its highways closed.





There is a double standard at work here. I've heard people calling on the government to shut down some aid program if one dollar of corruption is found. On the other hand, four of the past seven governors of Illinois have gone to prison for corruption, and to my knowledge no one has demanded that Illinois schools be shut down or its highways closed.

Melinda and I would not be supporting The Global Fund, or any other program, if the money were being misused in a large-scale way. Malaria deaths have dropped 80 percent in Cambodia since The Global Fund started working there in 2003. The horror stories you hear about—where aid just helps a dictator build a new palace—mostly come from a time when a lot of aid was designed to win allies for the Cold War rather than to improve

people's lives. Since that time, all of the actors have gotten much better at measurement. Particularly in health and agriculture, we can validate the outcomes and know the value we're getting per dollar spent.

More and more, technology will help in the fight against corruption. The Internet is making it easier for citizens to know what their government should be delivering—like how much money their health clinic should get—so they can hold officials accountable. As public knowledge goes up, corruption goes down, and more money goes where it's supposed to.



AID DEPENDENCE

Another argument from critics is that aid holds back normal economic development, keeping countries dependent on generosity from outsiders.

This argument makes several mistakes. First, it lumps different kinds of aid together. It doesn't differentiate aid that is sent directly to governments from funding that is used for research into new tools like vaccines and seeds. The money America spent in the 1960s to develop more productive crops made Asian and Latin American countries less dependent on us, not more. The money we spend today on a Green Revolution for Africa is helping countries grow more food, making them less dependent as well. Aid is a crucial funding source for these "global public goods" that are key for health and economic growth. That's why our foundation spends over a third of our grants on developing new tools.

Second, the "aid breeds dependency" argument misses all the countries that have graduated from being aid recipients, and focuses only on the most difficult remaining cases. Here is a quick list of former major recipients that have grown so much that they receive hardly any aid today: Botswana, Morocco, Brazil, Mexico, Chile, Costa Rica, Peru, Thailand, Mauritius, Singapore, and Malaysia. South Korea received enormous amounts of aid after the Korean War, and is now a net donor. China is also a net aid donor and funds a lot of science to help developing countries. India receives 0.09 percent of its GDP in aid, down from 1 percent in 1991.

Even in sub-Saharan Africa, the share of the economy that comes from aid is a third lower now than it was 20 years ago, while the total amount of aid to the region has doubled. There are a few countries like Ethiopia that depend on aid, and while we all—especially Ethiopians themselves—want to get to a point where that is no longer true, I don't know of any compelling argument that says Ethiopia would be better off with a lot less aid today.

Critics are right to say there is no definitive proof that aid drives economic growth. But you could say the same thing about almost any other factor in the economy. It is very hard to know exactly which investments will spark economic growth, especially in the near term. However, we do know that aid drives improvements in health, agriculture, and infrastructure that correlate strongly with growth in the long run. Health aid saves lives and allows children to develop mentally and physically, which will pay off within a generation. Studies show that these children become healthier adults who work more productively. If you're arguing against that kind of aid, you've got to argue that saving lives doesn't matter to economic growth, or that saving lives simply doesn't matter.

- ◀ Sharifa Idd Mumbi's crop yields have increased dramatically since she started using a newer maize seed more tolerant to drought (*Morogoro region, Tanzania, 2010*).

The lifesaving power of aid is so obvious that even aid critics acknowledge it. In the middle of his book *The White Man's Burden*, William Easterly (one of the best-known aid critics) lists several global health successes that were funded by aid. Here are a few highlights:

"A vaccination campaign in southern Africa virtually eliminated measles as a killer of children."

"An international effort eradicated smallpox worldwide."

"A program to control tuberculosis in China cut the number of cases by 40 percent between 1990 and 2000."

"A regional program to eliminate polio in Latin America after 1985 has eliminated it as a public health threat in the Americas."

The last point is worth expanding on. Today there are only three countries left that have never been polio-free: Afghanistan, Pakistan, and Nigeria. Last year the global health community adopted a comprehensive plan aimed at getting the world polio-free by 2018, and dozens of donors stepped up to fund it. Once we get rid of polio, the world will save about \$2 billion a year that it now spends fighting the disease.

The bottom line: Health aid is a phenomenal investment. When I look at how many fewer children are dying than 30 years ago, and how many people are living longer and healthier lives, I get quite optimistic about the future. The foundation worked with a group of eminent economists and global health experts to look at what's possible in the years ahead. As they wrote last month in the medical journal *The Lancet*, with the right investments and changes in policies, *by 2035, every country will have child-mortality rates that are as low as the rate in America or the U.K. in 1980.*⁶

6

Specifically, the *Lancet* Commission on Investing in Health found that the rates of infectious disease, child mortality, and maternal mortality "can fall to those presently seen in the best-performing middle-income countries." In the best-performing middle-income countries today, the child mortality rate is about 15 per 1,000 live births, equivalent to the rate in the United States in 1980.

You can see here just how dramatic this convergence will be **(BELOW)**.

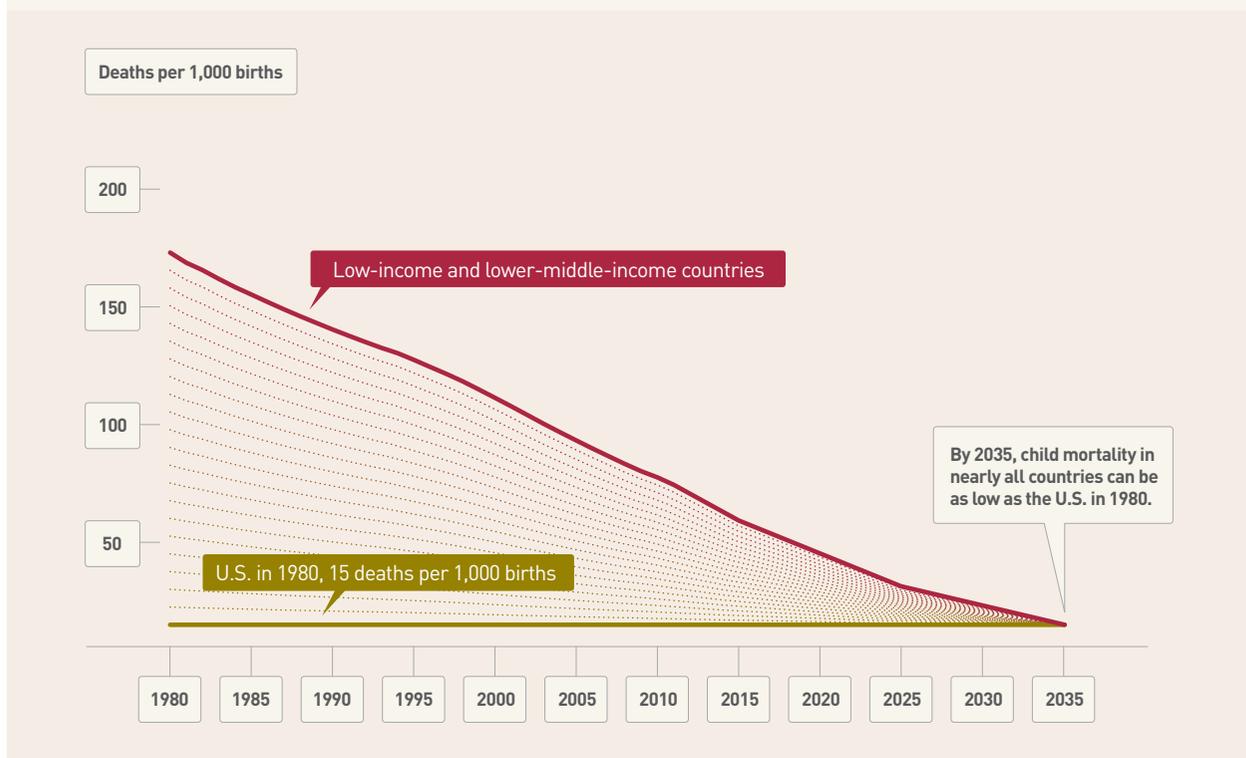
Let's put this achievement in historical perspective. A baby born in 1960 had an 18 percent chance of dying before her fifth birthday. For a child born today, the odds are less than 5 percent. In 2035, they will be 1.6 percent. I can't think of any other 75-year improvement in human welfare that would even come close.

To get there, the world will need to unite around this goal, from scientists and health workers to donors and recipient countries. If this vision is reflected in the next round of the United Nations' Millennium Development Goals, it will help get everyone working on this milestone.

Many low- and middle-income countries will develop enough to pay for this convergence themselves. Others will need continued generosity from donors, including investments in health-related R&D. Governments will also have to set the right policies. For example, middle-income countries should look at taxing tobacco and at cutting fossil-fuel subsidies to free up funding for health.

CONVERGING ON A MASSIVE BREAKTHROUGH FOR HUMANITY

With the right investments over the next two decades, child mortality rates in nearly all countries can drop all the way down to where the United States was in 1980.



Source: Historical data from World Bank, World Development Indicators. Projections adapted from *Lancet* Commission on Investing in Health, "Global Health 2035: A World Converging within a Generation," *Lancet*, December 3, 2013, Appendix 5.



- ▲ Hannah Konadu is one of thousands of community health workers in Ghana, where immunization coverage is higher than 90 percent (*Agordiebe, Ghana, 2013*).



It is unjust and unacceptable that millions of children die every year of causes that we can prevent or treat.



Above all, I hope we can stop discussing whether aid works, and spend more time talking about how it can work better. This is especially important as you move from upstream research on global public goods into the downstream effort of delivering these innovations. Are the recipient countries in charge of figuring out where health clinics should be built and training the workers? Are donors helping local teams build up the expertise they need to put the Western experts out of business? Are the best performers sharing the lessons they've learned so other countries can follow suit? This has been a big area of learning for the foundation.

I have believed for a long time that disparities in health are some of the worst inequities in the world—that it is unjust and unacceptable that millions of children die every year from causes that we can prevent or treat. I don't think a child's fate should be left to what Warren Buffett calls the "ovarian lottery." If we hit this goal of convergence, the ovarian lottery for health outcomes will be closed for good.



MYTH

03



SAVING LIVES LEADS TO OVER-POPULATION

by
Melinda Gates

We see comments like this all the time on the Gates Foundation's blog, Facebook page, and Twitter feed. It makes sense that people are concerned about whether the planet can continue to sustain the human race, especially in the age of climate change. But this kind of thinking has gotten the world into a lot of trouble. Anxiety about the size of the world population has a dangerous tendency to override concern for the human beings who make up that population.





Going back at least to Thomas Malthus, who published his *An Essay on the Principle of Population* in 1798, people have worried about doomsday scenarios in which food supply can't keep up with population growth. As recently as the Cold War, American foreign policy experts theorized that famine would make poor countries susceptible to Communism. Controlling the population of the poor countries labeled the Third World became an official policy in the so-called First World. In the worst cases, this meant trying to force women not to get pregnant. Gradually, the global family planning community moved away from this single-minded focus on limiting reproduction and started thinking about how to help women seize control of their own lives. This was a welcome change. We make the future sustainable when we invest in the poor, not when we insist on their suffering.

The fact is that a *laissez faire* approach to development—letting children die now so they don't starve later—doesn't actually work, thank goodness. It may be counterintuitive, but the countries with the most deaths have among the fastest-growing populations in the world. This is because the women in these countries tend to have the most births, too. Scholars debate the precise reasons why, but the correlation between child death and birth rates is strong.



We make the future sustainable when we invest in the poor, not when we insist on their suffering.



◀ More children than ever before are getting vaccinated, driving child mortality down [Roti Mushahari, India, 2013].



Take Afghanistan, where child mortality—the number of children who die before turning five years old—is very high. Afghan women have an average of 6.2 children.⁷ As a result, even though more than 10 percent of Afghan children don't survive, the country's population is projected to grow from 30 million today to 55 million by 2050. Clearly, high death rates don't prevent population growth (not to mention the fact that Afghanistan is nobody's idea of a model for a prosperous future).

When children survive in greater numbers, parents decide to have smaller families. Consider Thailand. Around 1960, child mortality started going down. Then, around 1970, after the government invested in a strong family planning program, birth rates started to drop. In the course of just two decades, Thai women went from having an average of six children to an average of two. Today, child mortality in

Thailand is almost as low as it is in the United States, and Thai women have an average of 1.6 children.

If you look at the graph of Brazil (**BELOW**), you'll see the same thing: As the child mortality rate declined, so did the birth rate. I've also charted the population growth rate, to show that the country's population grew more slowly as more children survived. If you graphed most South American countries, the lines would look similar.

7

Estimating fertility and mortality rates is an inexact science. As a result, the estimates produced by the United Nations and the World Bank differ slightly. In most cases (and unless otherwise cited), I have used the UN's estimates.

AS BRAZIL'S CHILD MORTALITY RATE DROPPED, SO DID ITS FERTILITY AND POPULATION GROWTH RATES



MORTALITY RATE

The probability per 1,000 that a newborn baby will die before reaching age five.



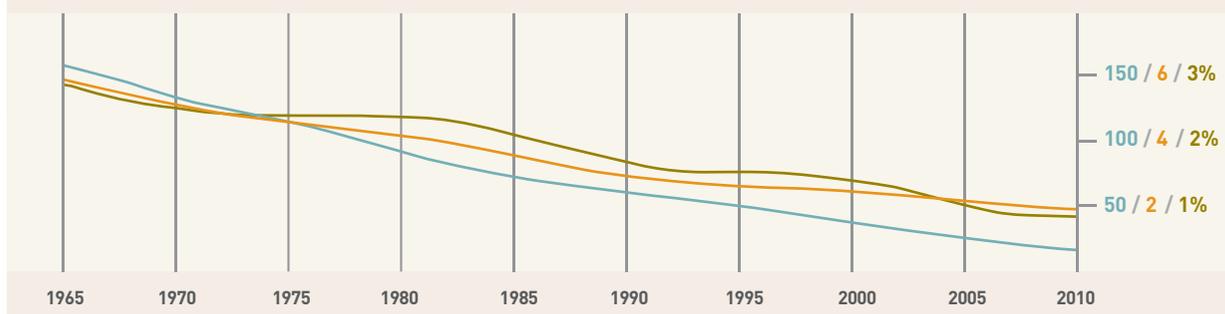
FERTILITY RATE

The average number of births per woman.



POPULATION GROWTH RATE

Percentage change of resident population compared to previous year.



Source: The World Bank

BIRTH RATES HAVE FALLEN IN MOST OF THE WORLD



LATE 1700s
FRANCE



1880s
GERMANY



1910s
ARGENTINA



1960s
BRAZIL



1970s
VIETNAM



1970s
ECUADOR



1980s
BANGLADESH



1980s
SYRIA

This pattern of falling death rates followed by falling birth rates applies for the vast majority of the world. Demographers have written a lot about this phenomenon. The French were the first to start this transition, toward the end of the 18th century. In France, average family size went down every decade for 150 years in a row. In Germany, women started having fewer children in the 1880s, and in just 50 years family size had mostly stabilized again. In Southeast Asia and Latin America, average fertility dropped from six or seven children per woman to two or three in a single generation, thanks in large measure to the modern contraceptives available by the 1960s.

Because most countries—with exceptions in sub-Saharan Africa and South Asia—have now gone through this transition, the global

population is growing more slowly every year. As Hans Rosling, a professor at the Karolinska Institute in Sweden and one of my favorite data geeks, said, “The amount of children in the world today is probably the most there will be! We are entering into the age of the Peak Child!”

Given all the evidence, my view of a sustainable future is much more optimistic than the Malthusians’ view. The planet does not thrive when the sickest are allowed to die off, but rather when they are able to improve their lives. Human beings are not machines. We don’t reproduce mindlessly. We make decisions based on the circumstances we face.



- ◀ With access to a range of contraceptives and information about birth spacing, women like Sharmila Devi are able to raise healthier families (Dedaur village, India, 2013).



Here's an example: Mothers in Mozambique are 80 times more likely to lose a child than mothers in Portugal, the country that ruled Mozambique until 1975. This appalling aggregate statistic represents a grim reality that individual Mozambican women must confront; they can never be confident their children will live. I've spoken to mothers who gave birth to many babies and lost most of them. They tell me all their mourning was worth it, so they could end up with the number of surviving children they wanted.

When children are well-nourished, fully vaccinated, and treated for common illnesses like diarrhea, malaria, and pneumonia, the future gets a lot more predictable. Parents start making decisions based on the reasonable expectation that their children will live.

Death rates are just one of many factors that affect birth rates. For example, women's empowerment, as measured by age of marriage and level of education, matters a great deal. Girls who marry in their mid-teens tend to start getting pregnant earlier and therefore have more children. They usually drop out of school, which limits their opportunities to learn about their bodies, sex, and reproduction—and to gain other kinds of knowledge that helps them improve their lives. And it's typically very difficult for adolescent brides to speak up in their marriages about their desire to plan their families. I just traveled to Ethiopia, where I had a long conversation with young brides, most of whom were married at 11 years old. They all talked about wanting a different future for their children, but the information they had about contraceptives was spotty at best, and they knew that when they were forced to leave school their best pathway to opportunity was closed off.

In fact, when girls delay marriage and stay in school, everything changes. In a recent study of 30 developing countries, women with no schooling had three more children on average than women who attended high school. When women are empowered with knowledge and skills, they start to change their minds about the kind of future they want.

I recently spent an afternoon with a woman named Sadi Seyni, who scratches out a living for five children on an arid farm in a desert region of Niger. She didn't know about contraceptives when she got married as a teenager. Now she knows, and she's spacing her pregnancies several years apart, to protect her health and the health of her newborns. I visited the place where she learned about family planning: her village's well, where women go to talk. And talk. And talk. While we were telling stories, a young bride came to get water. Through a translator, this girl told me that her pregnancies were "God's will" and therefore out of her control. Sadi suggested that as long as this girl keeps coming to the well and listening, she'll change her view over time. Even the informal education that happens when a little knowledge spreads among friends transforms the way people think about what's possible.

It is important to note that the desire to plan is only part of the equation; women need access to contraceptives to follow through on their plan. Sadi lives a stone's throw away from a health clinic, but it doesn't carry the contraceptive injections she prefers. She has to walk 10 miles every three months to get her shots. Sadi is incensed, as she should be, about how difficult it is for her to care for her family. Many women like Sadi have no information about planning their pregnancies in a

◀ Like millions of women in sub-Saharan Africa, Sadi didn't know about contraceptives when she got married (Talle, Niger, 2012).

healthy way—and no access to contraceptives. More than 200 million women say they don't want to be pregnant but aren't using contraceptives. These women are being robbed of opportunities to decide how to raise their families. And because they can't determine how many children to have or when to have them, they also have a harder time feeding them, paying for medical care, or sending them to school. It's a vicious cycle of poverty.

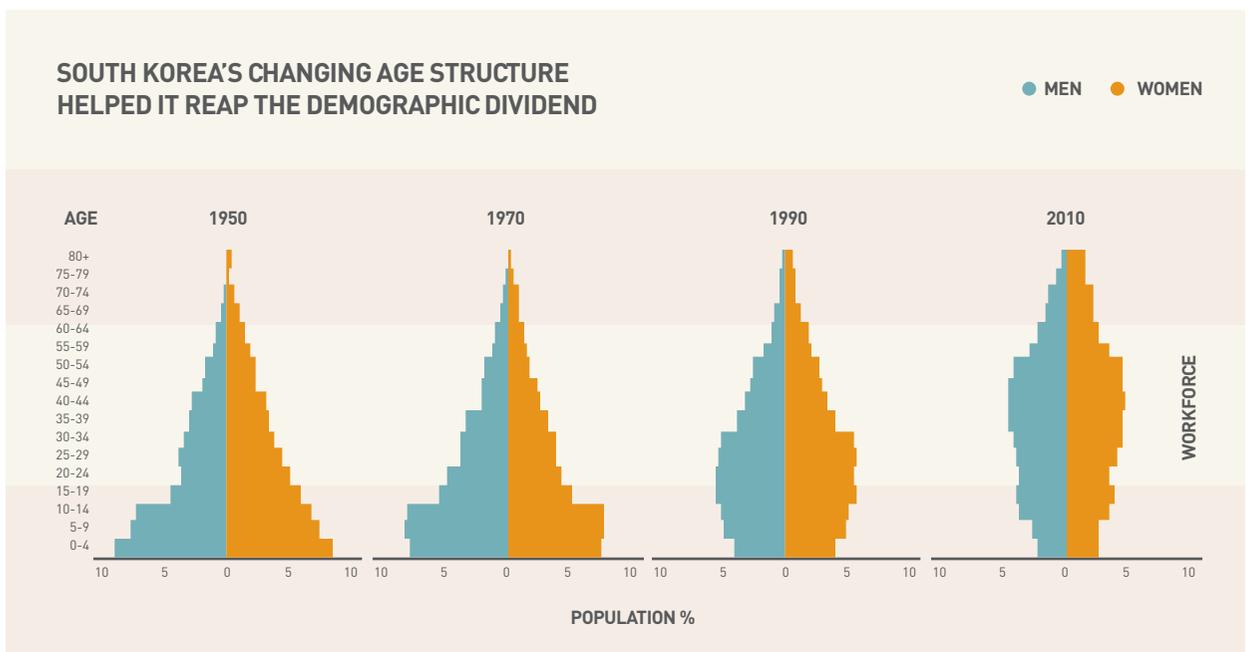
On the other hand, the virtuous cycle that starts with basic health and empowerment ends not only with a better life for women and their families, but also with significant economic growth at the country level. In fact, one reason for the so-called Asian economic miracle of the 1980s was the fact that fertility across

Southeast Asia declined so rapidly. Experts call this phenomenon the demographic dividend.⁸ As fewer children die and fewer are born, the age structure of the population gradually changes, as you can see in the graphic (BELOW).

Eventually, there's a bulge of people in their prime working years. This means more of the population is in the workforce and generating economic growth. At the same time, since the number of young children is relatively smaller, the government and parents are able to invest more in each child's education and health care, which can lead to more economic growth over the long term.

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For more information on the demographic dividend, see this excellent paper, produced by the Gates Institute for Population and Reproductive Health at Johns Hopkins University: <http://gates.ly/1b0a8f1>



Source: Department of Economic and Social Affairs of the United Nations Secretariat



These changes don't just happen by themselves. Governments need to set policies to help countries take advantage of the opportunity created by demographic transitions. With help from donors, they need to invest in health and education, prioritize family planning, and create jobs. But if leaders set the right strategic priorities, the prospect of a virtuous cycle of development that transforms whole societies is very real.

The virtuous cycle is not just development jargon. It's a phenomenon that millions of poor people understand very well, and it guides their decisions from day to day. I have the privilege of meeting women and men in poor countries who commit the small acts of love and optimism—like going without so they can pay their children's school fees—that propel this cycle forward. The future they hope for and work hard for is the future I believe in.

In this version of the future, currently poor countries are healthier, richer, and more equal—and growing sustainably. The alternate vision summed up by the Malthusian myth—a world where sustainability depends on permanent misery for some—is a misreading of the evidence and a failure of imagination.

Saving lives doesn't lead to overpopulation. In fact, it's quite the opposite. Creating societies where people enjoy basic health, relative prosperity, fundamental equality, and access to contraceptives is the only way to secure a sustainable world. We will build a better future for everyone by giving people the freedom and the power to build a better future for themselves and their families.

- ▼ Children who have a healthy start in life kick off a virtuous cycle of development (*Dakar, Senegal, 2013*).



LOOKING AHEAD

If you read the news every day, it's easy to get the impression that the world is getting worse. There is nothing inherently wrong with focusing on bad news, of course—as long as you get it in context. Melinda and I are disgusted by the fact that more than six million children died last year. But we are motivated by the fact that this number is the lowest ever recorded. We want to make sure it keeps going down.

We hope you will help get the word out on all these myths. Help your friends put the bad news in context. Tell political leaders that you care about saving lives and that you support foreign aid. If you're looking to donate a few dollars, you should know that organizations working in health and development offer a phenomenal return on your money. The next time you're in an online forum and someone claims that saving children causes overpopulation, you can explain the facts. You can help bring about a new global belief that every life has equal value.

We all have the chance to create a world where extreme poverty is the exception rather than the rule, and where all children have the same chance to thrive, no matter where they're born. For those of us who believe in the value of every human life, there isn't any more inspiring work underway in the world today.

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COVER

TOP

The skyline of New Delhi (*New Delhi, India, 2012*). ©Corbis, Christian Charisius/dpa

MIDDLE

Sacks of flour, fortified with iron and folic acid, being stacked at a flour mill (*Luxor, Egypt, 2009*).

BOTTOM

Aissatou Soumare cradling her newborn baby (*Dakar, Senegal, 2013*).