

China Population and Development Report 2009

From ICPD to MDG: A Review for China at 15 Years (1994-2009)

Department of Social, Sciences and Technology Statistics
National Bureau of Statistics

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This book is published under the sponsorship and technical guidance of the United Nations Population Fund (UNFPA), however, its contents do not represent the viewpoints of the UNFPA.

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Foreword

Over the past 15 years since the International Conference on Population and Development (ICPD) in Cairo, Egypt in 1994 where a series of population and development goals were put forward, the Chinese Government is committed to fully implement the goals and principles and has made significant progress therein. Accompanying the fast economic development process, China's population has also experienced tremendous changes to transit into a country with low birth and death rates and a low rate of natural increase. The development of population in China is however facing many challenges - a rapid rise in the number of older persons and a highly skewed sex ratio at birth, and fertility rate has declined to below the replacement level. At the same time, China is located in a transitional period both in terms of its social and economic development and many social and economic problems are mingled together: a large economy, a low fertility rate, a massive and highly transient population, and widespread disparities. Hence the Chinese Government and the international community including UNFPA have reflected and acted correspondingly at such a crucial juncture in China's development.

The ICPD principles and the Millennium Development Goals (MDG) endorsed at the United Nations Millennium Summit in the year 2000 in New York, provide an excellent protocol to review the situation in China. Both the ICPD principles and the MDGs are internationally agreed upon development frameworks which are based on fundamental human rights such as equality, equity and freedom; principles

towards which China, as it continues to grow, is shifting its development focus to become more and more closely aligned with.

The review of China's experiences at ICPD +15 is an opportune time to document the achievements and their facilitating factors, and to analyze the challenges China still faces in fulfilling the ICPD principles by 2014, and the MDG goals before the set deadline of 2015. The review findings are not only of great importance to China, but potentially also for the international community, particularly those countries who are currently undergoing, or are likely to experience similar economic growth and demographic transitions as China.

This review involves a research report done by three national scholars and an update of field inquiry questionnaire for ICPD progress for China done by the China Population and Development Research Centre (CPDRC). The report has employed wherever possible official data and in a few occasions, published data by research institutes throughout the exercise to present a factual situation underpinning solid conclusions and recommendations for future action.

The review was made possible through technical and financial support from UNFPA in the collaboration between the National Bureau of Statistics (NBS) and the United Nations Population Fund (UNFPA) in China in the field of data. The report however reflects the viewpoints of the experts but not necessarily the views of NBS.

Executive summary

Field Inquiry Questionnaire ICPD +15 and From ICPD to MDG: A review for China at 15 Years

In agreement with the Government of China, two reports have been prepared to document progress as well as remaining challenges in the achievement of the ICPD PoA for China. The first is the ICPD+15 update which follows the ICPD + 10 update and the second is a report prepared by three national experts on behalf of the NBS, which analyses official or published data on Chinese initiatives in attaining the ICPD agenda since its promulgation in 1994. The two documents are complementary in that the questionnaire was used to analyze constraints of specific actions of the ICPD PoA from an operational perspective, while the report addresses particular challenges and proposes recommendations specific to China.

The field inquiry questionnaire covers ten areas: 1. Population and development; 2. Gender Equality, Equity and Women's Empowerment; 3. Reproductive Rights and Reproductive Health; 4. Youth Sexual and Reproductive Health and Rights; 5. HIV/AIDS; 6. Behavioral Change and Advocacy; 7. Data and Research; 8. Partnerships and Resources; 9. Best Practices and Emerging Issues; and, 10. Climate Change, Financial Crisis and Population.

The review report has six chapters: 1. ICPD and MDGs in China; 2. Population and Development Issues in China; 3. Gender Equality, Equity and Empowerment; 4. Reproductive Health and Rights; 5. Youth Sexual and Reproductive Health; and 6. Major Conclusions and Policy Recommendations.

I. ICPD and MDGs in China

China is a signatory and has made firm commitments to both the ICPD Plan of Action (PoA) and the Millennium Declaration. China has set out to build a “Xiaokang” society (i.e. one in which most people are moderately well off and middle class) by focusing on equalizing access to good quality, essential public social services and dealing with population issues in a holistic manner.

By 2008, China had already achieved four of the 14 relevant MDG targets for China; six other MDG targets were on track as “likely” to be achieved; and four targets lag behind and are only classified as “potentially” able to be achieved. The latter four targets include: achieve full and productive employment and

decent work for all, including women and youths; achieve universal access to reproductive health; achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it; and reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss. Strengthened efforts are required to achieve these targets.

China has largely completed its demographic transition and is a country with a low fertility level. However, China's population is experiencing unprecedented radical changes: continuous and rapid ageing, severely skewed and high sex ratio at birth, a complicated urbanization process, and the simultaneous advent of three peaks, in: (a) the total population, (b) the

labour force population and (c) the elderly population.

II. Population and development in China

Integration of population factors into national development strategy

The Chinese Government has always paid attention to the coordinated and sustainable development between population, economy, society, resources and environment. Efforts to attain the ICPD and MDG goals have been integrated into development strategies at various levels and types. Family planning is a “basic state policy” with the aim of maintaining low fertility, to which the Government appropriates an earmarked budget every year; this budget has been on the increase over the years due to the set up of a special fund to support incentives and awards for rural families practicing family planning.

A number of ministries are involved in the management and service delivery related to population issues, family planning and reproductive health. The current administrative system designates responsibilities for each of these bodies. Further attention is required to improve efficiencies and ensure better coordination among sectors.

Population and social development

The Chinese Government has paid adequate attention to the eradication of poverty and has included poverty alleviation in the national development strategy; as a consequence the absolute number of those living in poverty has reduced significantly. However, poverty alleviation remains an arduous task in that large numbers are still living below the poverty line, many return to poverty every year and disparities are increasing between urban and rural areas, across regions and among various groups.

In China education is a priority development focus and there have been constant increases in the level of educational attainment of the general public. However, public investment in education comprises a relatively low share of the Government’s expenditure

and deficiencies in the education budget have long been a constraining factor for development of China’s education system. Although funding has improved somewhat, the unbalanced investment and prioritization of education has not fundamentally changed.

The Chinese Government has set the target of basic health care for all by 2020. Up to now there has not been a comprehensive health service delivery system in place due to insufficient public health financing, low public investment in general health expenditure, and incomplete coverage of health insurance. Seventy per cent of resources that do go towards health are pooled to cities and rural health lags behind, resulting in failure to meet rural residents’ increasing demands for health services.

China clearly sets an active employment and labour market policy and includes full employment as an important component of building a harmonious society. Employment in China is currently characterized by an apparent increase in informal sectors and a migrant worker population of over 200 million people, forming a group that requires special attention because of their limited, or non-existent social security.

Population and environment

China actively promotes human-centered, coordinated and scientific development; in order to combat climate change, it accelerates efforts to build an energy-saving, environmentally-friendly and innovative country. Continued industrialization and urbanization places demands on natural resources and creates pressure on land utilization, forestry and the ecological environment. Further efforts and comprehensive measures need to be taken to cope with climate change.

The ageing population

The Chinese Government regards the development of ageing related undertakings as an important component of overall socio-economic development and adopts economic, legal and administrative measures to actively deal with the challenges associated with population ageing. Already,

13% of China's population is in the over sixty age group, a figure which will continue to increase rapidly. Urban elderly with difficulties and rural poor elderly require special attention.

Urbanization

The proportion of the population living in urban areas in China is increasing steadily yet remains low compared with the world average. Migration so far has been restricted by the urban-rural dichotomy and the fact that most migrants have no access to social security and social services to which local residents are entitled. Improving the level and quality of urbanization is a must for China to build an all-round Xiaokang society. It is estimated that there are 150 million rural surplus laborers and that the urbanization process will be accelerated in the coming two decades.

III. Gender equality, equity and empowerment of women

Implementing the ICPD Programme of Action, the Chinese government has formulated or revised many of the laws and regulations on women and gender equality in recent years. Progress has been made in the fields of compulsory education, employment, access to medical services and health care, basic social security and participation in decision-making.

However, gender mainstreaming and gender sensitive development requires improvement at the policy level as well as in the implementation of existing policies and regulations.

Women in urban and rural areas still face many obstacles in gender based discrimination.

A gender-based income gap is still obvious in China; women have lower rates of social participation and an earlier retirement age.

The process of urbanization and industrialization has brought more employment and development opportunities to women, but at the same time occupational health and safety issues are increasingly prominent, especially for migrant women in urban and

rural labor markets.

Chinese women have one of the world's highest suicide rates and it is the only country in the world where more women than men take their own lives. The leading suicide rates are amongst young rural women aged 15-24.

Although programmes to reduce violence against women have made significant progress, it remains one of the most serious social problems in China. Special, national legislation on gender-based violence prevention and control has not yet been promulgated and a long-term mechanism on prevention, intervention and rescue is similarly lacking.

The sex ratio at birth has continued to rise in China for the past 20 years and the level of girl infant mortality has also been relatively high since the mid 80s. In response, the government has adopted various interventions including economic and administrative measures as well as advocacy programmes. However, discrimination against women and girls continues despite rapid economic development and the implementation of the basic state policy of gender equality.

Women's participation in the political and decision-making process has not increased significantly in the past 20 years. Leading female cadres at all levels are still low; the proportion of women cadres holding the principal leading posts in the Party and government is very limited.

Involving men as partners in reducing violence and discrimination against women, is a strategy that is not often used. Male involvement remains low. Male contraceptive use increased slightly from 13% in 2000 to 15% in 2007, but women still bear the contraceptive burden. The long standing practice of women doing most of the housework has not changed significantly in several decades.

IV. Reproductive Health and Rights

China fully agrees with the concepts of "all-

round human-centered development" and "reproductive health" raised in the 1994 Cairo ICPD and its Program of Action (PoA). The family planning approach has been reoriented from an "administrative population control" perspective towards a more comprehensive people-centered "reproductive health" perspective.

In the past 15 years, China's infant mortality rate has been reduced by more than 60%. Narrowing the gaps in infant mortality and under-five mortality between urban and rural areas is a continuing challenge that is very important.

China's maternal mortality rate is declining, while the gap between urban and rural areas has been reduced significantly. According to maternal mortality data, 75% of maternal deaths could be avoided through basic obstetric services.

Contraceptive "informed choice" is being promoted through the country as part of quality of care in RH/FP, however there are still limited areas in the country which have adopted "informed contraceptive choice". More than 40% of women with reproductive tract infections do not seeking medical care, and over one third of women at reproductive age do not understand the characteristics of contraceptive methods and their side effects.

Meeting the sexual and reproductive health needs of the migrant population is a significant challenge.

The family planning programme is evolving to have an increasing emphasis on reproductive health, including respect for and protection of fundamental reproductive rights. Law-based administration, the protection of civil rights and the installation of complaints mechanisms are increasingly implemented by the government. In some pilot areas other reforms are being supported such as reductions in the social compensation fee, removal of the regulation on birth intervals and the promotion of RH/FP quality of care for service providers.

Gaps remain between China's current fertility policy, regulations and the quality of RH services and

the ICPD principles and PoA. Continued reform is required in this area.

V. Youth Sexual and Reproductive Health

Since the mid 1990s the issue of youth sexual and reproductive health began to enter the public arena. Although special legislation on youth sexual and reproductive health has not been issued at the national level, many laws and regulations formulated or revised since 1994 include content on youth health and development rights. Youth sex education policies and legislation have progressed, administrative regulations and departmental policies on school health education have been progressively enacted, and youth health and population education has been gradually incorporated into formal secondary and university education. Nevertheless, the promotion of youth SRH in China is still limited. SRH counseling and services for youth remain weak and the necessary supportive social environment is lacking, creating a large gap with the huge demand generated by early puberty and delayed marriage. Small pilot initiatives, though rich and varied, are non-institutionalized and sustainability is a significant issue

Youth sexual and reproductive health, though incorporated in some measure into formal school education, is not yet fully implemented and its contents are still far from being able to meet the SRH needs of youth. Out-of-school and community SRH and rights education is limited, related services are fragmented and inconsistent and have low coverage. Unmarried youths still face many obstacles to access information, counseling and services. The provision of youth-friendly services is outside of the skill set of sexual and reproductive health service providers. It is imperative to accelerate the provision of appropriate SRH information, education and services for youth as well as to build the capacity of youth to engage in these issues.

VI. Major conclusions and policy recommendations

1. Major conclusions

Conclusion 1:

The spirit of ICPD has changed the road-map of Chinese population and development and has promoted national reform in the areas of population and family planning. Comprehensive, balanced and sustainable development has become the basis for the national development strategy and the concept of reproductive health has been increasingly integrated into family planning management and service. Compared with 15 years ago, China has witnessed enormous changes in population and national development.

Conclusion 2:

As per the national human rights action plan, the Government is committed to progressively meeting the rights of the people (rights holders) to access social services and to building the capacity of service providers (duty bearers) to deliver those services.

Over the 15 years since 1994, China has recorded remarkable progress in many areas including: tremendous achievements in poverty alleviation; improvements in the health and wellbeing of citizens, particularly women and children; promoting gender equality and equity through policies and laws; provision of quality family planning/reproductive health services and prevention and treatment of STI and HIV.

Conclusion 3:

China is currently in a special historical time with transitions in both population numbers and structures. China will face huge challenges in further attaining the ICPD and MDG goals including:

- An enormous pressure from the population on resources, environment and socio-economic development.
- The large gap between the current provision of basic public health services and society's demands for

education, health care including primary health care, social security and public employment services.

-Challenges regarding gender equality and equity with significant disparities between males and females in employment, income, health and participation in public policy formulation.

- Critical challenges in addressing disparities in reproductive health and rights among regions, urban and rural areas, and between different population groups.

- SRH information, counseling and services for youths are inadequate, do not have institutional support.

-Gaps exist between the currently fertility policy in China and the reproductive wishes of the public in certain regions.

-China also needs to make significant progress to meet the prevailing international concept of reproductive rights.

2. Policy recommendations

-Recommendation 1:

Further attention should be made to strengthen the capacities of duty bearers and rights holders in the field of population and development.

-Recommendation 2:

Efforts should be made to examine the interactions between population factors and climate and to ensure that human aspects of climate change are adequately addressed in both the mitigation and adaptation strategies.

-Recommendation 3:

Focus and priority should continue to be given to increased provision of essential social services including education, health, social security and employment, for all members of society, and to reducing disparities across regions, between urban and rural areas and among population segments. The disparities in the field of RH/FP require special attention.

-Recommendation 4:

Further efforts are needed to mainstream gender

equality and equity in employment, income, health and public policy.

-Recommendation 5: Prioritize youth sexual and reproductive health on the agenda.

-Recommendation 6: Further reform needs to be made to RH/FP policies and regulations to progressively meet the expectations of people and to attain international commitments.

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Chapter 1: ICPD in China

Introduction: ICPD and MDG

The United Nations International Conference on Population and Development (ICPD) held in Cairo in 1994 and its Programme of Action (PoA) have exerted profound influence on subsequent international population and development. The PoA embraces future goals and action plans for all countries that cover various aspects of population and development with 14 categories and 43 items. It aims to further integrate population in policies, plans and strategies related to development so as to respond to population and development challenges faced by the human race. Building on the success of previous world population conferences on conventional issues such as population and sustained economic growth, enhancement of women's status and the empowerment of women, it creatively put forward new concepts such as "sustainable development" and "reproductive health" and established goals and a PoA to guide global population and development initiatives from 1995 to 2015.

The Millennium Declaration and the Millennium Development Goals (MDGs) were endorsed at the Millennium Summit in 2000 by 189 member states of the UN General Assembly. The goals are considered as "the most comprehensive, the most authoritative and the most clearly articulated development goal system in the field of development in the contemporary international community"¹ with coverage of many sectors such as the economic, social and environmental sectors. The MDG monitoring indicator framework has been updated several times, and the most recently updated version,

effective the 15th of January 2008 includes eight primary goals, 21 targets and 60 progress monitoring indicators².

Although the ICPD PoA does not set specific and quantitative progress monitoring indicators, the goals of the PoA are parallel to the MDGs (see Table 1-1). These goals have not only established the roadmap and concrete requirements for: poverty alleviation; universal education; promotion of gender equality and equity; reduction of mortality; improvement of reproductive health; and enhancement of environment sustainability; but have also underlined the importance of understanding the interaction between population progress and achieving development outcomes. Efforts in the field of population development such as the slowing of population growth, the reduction of unwanted pregnancies and the enhancement of reproductive health are all prerequisites for realizing the global, comprehensive development goals of the MDGs such as poverty alleviation and the elimination of hunger.

The ICPD principles and the MDGs are interlinked and complement each other to make an important joint platform that can guide the global population and development initiatives and facilitate consensus among and coordinated actions by all nations on population issues.

ICPD and MDGs in China

China was a signatory of both the ICPD PoA and the Millennium Declaration and has made solemn commitments to make every effort to implement the PoA of the ICPD and to realize the MDGs on time.

China has undergone remarkable social and economic achievements in the 15 years since the ICPD. At the turn of the century, the Chinese government set the development goals of building a prosperous and

harmonious society and promoting equal access to basic public services to benefit its population of 1.3 billion

people,. In the fields of population and development, the Chinese government emphasizes practicing a human-

Table 1-1: PoA of ICPD & MDGs

PoA of ICPD		MDGs
Field	Details	Goals
1. Interrelationship between population, sustained economic growth and sustainable development	1) Integrated population and development strategies 2) Population, sustained economic growth and poverty alleviation 3) Population and environment	Goal 1: Eradicate Extreme Poverty and Hunger
2. Gender equality, equity and empowerment of women	4) Empowerment and status of women 5) Protection of girls 6) Male responsibilities and participation	Goal 3: Promote Gender Equality and Empower Women
3. The family, its roles, rights, composition and structure	7) Diversity of family structure and composition 8) Socio-economic support to the family	Goal 3: Promote Gender Equality and Empower Women
4. Population growth and structure	9) Fertility, mortality and population growth rates 10) Children and youth 11) Elderly people 12) Indigenous people	Goal 4: Reduce Child Mortality
5. Reproductive rights and reproductive health	13) Reproductive rights and reproductive health 14) Family planning 15) Sexually transmitted infections and prevention of HIV 16) Human sexuality and gender relations 17) Adolescent SRH	Goal 5: Improve Maternal Health
6. Health, morbidity and mortality	18) Primary health care and the health-care sector 19) Child survival and health 20) Women's health and safe motherhood 21) HIV and AIDS	Goal 6: Combat HIV/AIDS, Malaria and Other Diseases
7. Population distribution, urbanization and internal migration	22) Population distribution and sustainable development 23) Population growth in large urban agglomerations	Goal 7: Ensure Environmental Sustainability
8. International migration	24) International migration and development 25) Documented/undocumented migration 26) Refugees, asylum-seekers and displaced persons	Goal 8: Develop a Global Partnership for Development
9. Population, development and education	27) Education, population and sustainable development 28) Population information, education and communication	Goal 2: Achieve Universal Primary Education

Source: Reports for the ICPD (Chinese version). 1995, NY. UN. Report by the UN General Secretary on the Work of the UN, 62nd Conference, supplementary No. 1 (A62/1).

oriented scientific outlook on development, prioritizing investment in the all-around development of human beings, strengthening social construction focused on improvement of people's livelihoods, and solving population issues in a comprehensive manner. All these endeavors are coherent with the ICPD principles and the requirements of the MDGs. The efforts to realize the MDGs have been "well integrated into the cause of building a moderately prosperous society"³ in China.

By the year 2008, the mid-point for the period of time for achieving the MDGs, China had made remarkable progress in realizing the MDGs; having achieved and even surpassed some of the targets as much as seven years in advance of the deadlines. Remarkable progress was made in poverty alleviation, reduction of hunger, elimination of illiteracy, and reduction of infant and under five child mortality (see Table 1-2). China is also making great achievements and is firmly on track to achieve several goals by 2015 including reduction of maternal mortality and the prevention and treatment of HIV/AIDS and tuberculosis. However, China has four targets with lagging progress which are described as being only "possibly" achieved by the deadline. The following targets require increased efforts by China⁴: Target 1.B. Achieve full and productive employment and decent work for all, including women and young people; Target 5.B, Achieve, by 2015, universal access to reproductive health; Target 6.B. Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it; and Target 7.B. Reduce biodiversity loss, achieving, by 2010, a reduction in the rate of loss.

Population and development in China in a low fertility context

With unremitting effort over the past decades, China has experienced the fastest population transition in the modern world.

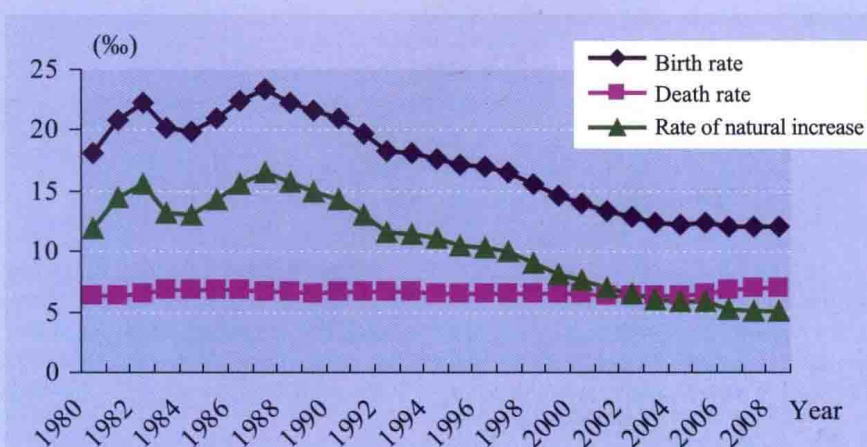
By the 1990s, China had curbed its excessively rapid population growth and had entered a new historic period with a constantly decreasing low birth rate, low death rate and low rate of natural increase (see Chart 1-1). The total fertility rate (TFR)⁶ of Chinese women has decreased from above 6 to around 1.8, lower than the population replacement level of 2.1. This marks the primary accomplishment of China's population transition and indicates that China has become a country with a low fertility rate.

Within the social context of a rapid socio-economic transition and the constant slowing of the rate of population increase, China's population is experiencing a unique period of change and facing an unprecedented, complicated situation with a number of new challenges.

(1) **The impact of a low fertility rate on population and economic development is not clear.** A large population size is a fundamental reality of China. Due to the large population base and the inertia effect of population growth, China's population size will continue to grow for a long time even in the context of the low fertility rate. In the next two decades, the population growth rate will decelerate further and the new mode of population growth will pose potential challenges to China's development.

(2) **The elderly population is surging in number**

Chart 1-1: China's Population Growth, 1980 -2008



Sources: NBS. China Statistics Yearbook 2009, China Statistics Press, 2009.

Table 1-2: China's Progress on Key ICPD and MDG Indices

Progress Monitoring Index	ICPD or MDG goals	Current Situation in China	China's MDG goal status
(1) Proportion of people whose income is less than one dollar a day	ICPD Principle 3.16: Raise the quality of life for all people through appropriate population and development policies and programmes aimed at achieving poverty eradication and sustainable growth MDG Target 1.A: Halve the proportion of people whose income is less than one dollar a day	(1) Proportion of rural population living in absolute poverty (according to the national poverty line) fell from 9.6% in 1990 to 1.6% in 2007.	Already achieved
(2) Net enrolment ratio in primary education (3) Gross enrolment ratio in junior middle school (4) Proportion of pupils starting grade one who reach the last grade of primary education (5) Literacy rate of 15-24 year-olds, women and men (6) Literacy rate of adults	ICPD Principle 11.5: Achieve universal access to quality education, with particular priority being given to primary and technical education and job training, to combat illiteracy and to eliminate gender disparities in access to, retention in and support for, education. MDG Target 2.A: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	(2) Net enrolment ratio for both boys and girls in primary education reached 99.5% in 2008. (3) Gross enrolment ratio in junior middle school reached 98.5% in 2008. (4) Proportion of pupils starting grade one who reach grade five rose from 95% in 2000 to 99% in 2006. * (5) The literacy rate of 15-24 year-old men and that of 15-24 year-old women reached 99.1% and 98.6% respectively in 2005. (6) Literacy rate of adults (over the age of 15) reached 92.2% in 2008.	Already achieved
(7) Ratios of girls to boys in primary, secondary and tertiary education (8) Proportion of seats held by women in national parliament	ICPD Principle 4.3: Achieve equality and equity based on harmonious partnerships between men and women and enable women to realize their full potential MDG Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015	(7) Ratio of girls to boys in primary education rose from 98% in 1991 to 106% in 2006. (8) Proportion of seats held by women in National People's Congress in 2008 was 21.3%.	Likely to be achieved
(9) Under-five mortality rate	ICPD Principle: 8.15: Promote child health and survival and reduce disparities between and within developed and developing countries as quickly as possible, with particular attention to eliminating the pattern of excess and preventable mortality among girl infants and children MDG Target 4.A: Reduce by two-thirds the under-five mortality rate	* (9) Under-five mortality rate fell from 61‰ in 1991 to 18.5‰ in 2008.	Already achieved
(10) Maternal mortality ratio (11) Proportion of births attended by skilled health personnel	ICPD Principle 8.20: Promote women's health and safe motherhood; achieve a rapid and substantial reduction in maternal morbidity and mortality and reduce the differences observed between developing and developed countries and within countries MDG Target 5.A: Reduce by three quarters the maternal mortality ratio by 2015	* (10) Maternal mortality ratio fell from 94.7/100,000 in 1990 to 34.2/100,000 in 2008. * (11) Proportion of births attended by new methods reached 99.1% in 2008.	Likely to be achieved

<p>(12) Contraceptive prevalence rate</p> <p>(13) Adolescent birth rate</p> <p>(14) Antenatal care coverage</p> <p>(15) Unmet need for family planning</p>	<p>ICPD Principle 7.14: Help couples and individuals meet their reproductive goals in a framework that promotes optimum health, responsibility and family well-being, and respect the dignity of all persons and their right to choose the number, spacing and timing of the birth of their children</p> <p>MDG Target 5.B: Achieve, by 2015, universal access to reproductive health</p>	<p>*(12) Contraceptive prevalence rate of married women at reproductive ages was 89.74% in 2007.</p> <p>*(13) Adolescent birth rate between ages 15-19 was 5.26‰ in 2008.</p> <p>*(14) Antenatal examination rate in 2008 was 90.96% and postnatal visit rate was 87.01%.</p> <p>(15) Currently no data available.</p>	<p>Potentially able to be achieved</p>
<p>(16) Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS</p> <p>(17) HIV prevalence among population aged 15-49 years</p>	<p>ICPD Principle 8.29: Prevent and reduce the spread of and minimize the impact of HIV infections; to increase awareness of the disastrous consequences of HIV infection and AIDS and associated fatal diseases, at the individual, community and national levels, and of the ways of preventing it; to address the social, economic, gender and racial inequities that increases vulnerability to the disease</p> <p>MDG Target 6.A: Have halted and begun to reverse the spread of HIV/AIDS.</p>	<p>(16) According to the baseline survey in the 5th AIDS Programme by the Global Fund, proportion of boys and girls aged 15-24 with comprehensive correct knowledge of HIV/AIDS was 50% and 55% respectively.</p> <p>(17) HIV prevalence rate among general population in China was 0.057‰ in 2009⁵.</p>	<p>Likely to be achieved</p>
<p>(18) Proportion of land area covered by forest</p> <p>(19) CO₂ emissions, total, per capita and per \$1 GDP (PPP)</p>	<p>ICPD Principle 3.28: Reduce both unsustainable consumption and production patterns as well as negative impacts of demographic factors on the environment</p> <p>MDG Target 7.A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources</p>	<p>(18) Proportion of land area covered by forest rose from 13.92% in 1990 to 18.21% at the beginning of the 21st century</p> <p>(19) No data available</p>	<p>Likely to be achieved</p>
<p>(20) Proportion of population using an improved drinking water source</p> <p>(21) Proportion of population using an improved sanitation facility</p>	<p>ICPD Principle 8.3: Increase the healthy life span and improve the quality of life of all people, and reduce disparities in life expectancy between and within countries</p> <p>MDG Target 7.C: Halve the proportion of people without sustainable access to safe drinking water and basic sanitation</p>	<p>(20) Proportion of population using an improved drinking water source rose from 67% in 1990 to 88% in 2006.</p> <p>*(21) Prevalence rate of sanitary lavatory in rural areas reached 57.0% in 2007.</p>	<p>Likely to be achieved</p>
<p>(22) Population size and growth</p> <p>(23) Urbanization</p> <p>(24) Total Fertility Rate (TFR)</p> <p>(25) Life expectancy at birth</p> <p>(26) Proportion of population aged 10-24</p>	<p>Basic demographic indicators</p>	<p>*(22) The population of mainland China was 1.328 billion at the end of 2008 and the natural rate of increase was 5.08 per thousand per year.</p> <p>*(23) Urbanization rate was 45.68% by the end of 2008.</p> <p>** (24) TFR of women at reproductive ages was 1.74 in 2005.</p> <p>*(25) Life expectancy at birth was 71.4 years in 2000, with 69.63 years for male and 73.33 years for female</p> <p>*(26) Proportion of population aged 10-24 was 14.73% at the end of 2008.</p>	<p>Likely to be achieved</p>

Sources: The Ministry of Foreign Affairs, P.R.C and the UN System in China. Report on the Progress of China in Realizing the MDGs (2008 version). 2008.

Notes: data with * come from China Statistics Yearbook 2009 (China Statistics Press, 2009) compiled by NBS of China, China Health Statistical Yearbook 2008 (Peking Union Medical College Press, 2008) by the Ministry of Health, China Population Yearbook 2008 (published by China Population Yearbook Office, 2008) compiled by Institute of Population and Labor Economics, CASS and Tabulation on the 2005 National Centesimal Survey of the People's Republic of China (China Statistics Press, 2007) compiled by the Leadership Office for National centesimal Survey of the State Council and the Department of Population and Employment Statistics, NBS of China. Data with ** come from the Communiqué of Statistics on Population and Family Planning: the Communiqué of Major Data of the Sampling Survey on National Population and Family Planning (No. 2 in 2007), <http://www.cpirc.org.cn/>. 2008-04-30