

# RAPID IBADAN



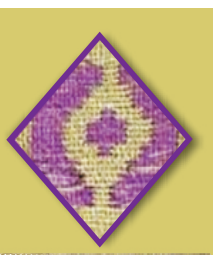
## Urbanization, Population, and the Opportunity for Ibadan to Develop

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Building a Strong City with a  
High Quality of Life



NIGERIAN URBAN REPRODUCTIVE  
HEALTH INITIATIVE  
[www.nurhi.org](http://www.nurhi.org)



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Urbanization, Population  
and the Opportunity for  
Ibadan to Develop

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**Building a Strong City with a  
High Quality of Life**

This booklet focuses on urbanization, population changes, and the opportunity for Ibadan to develop into a strong city with a high quality of life for the people and for future generations.





Produced by the FUTURES Institute in collaboration with the Nigerian Urban Reproductive Health Initiative (NURHI), a Bill and Melinda Gates Foundation funded project in Nigeria.

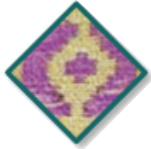
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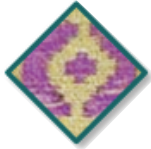


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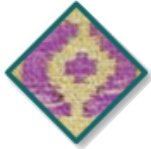
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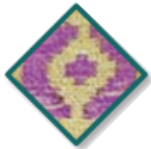
## Urbanization in Nigeria



## Ibadan's Population Dynamics



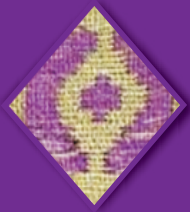
## Population & Development: the crucial links



## What can we do?

This booklet has four sections.

1. Urbanization in Nigeria;
2. Ibadan's population dynamics;
3. The crucial linkages between population and development; and
4. What can we do?



# Urbanization in Nigeria



We start by first examining the broader context of urbanization in Nigeria as the background for Ibadan's urbanization.



Photo by Bonnie NURHI

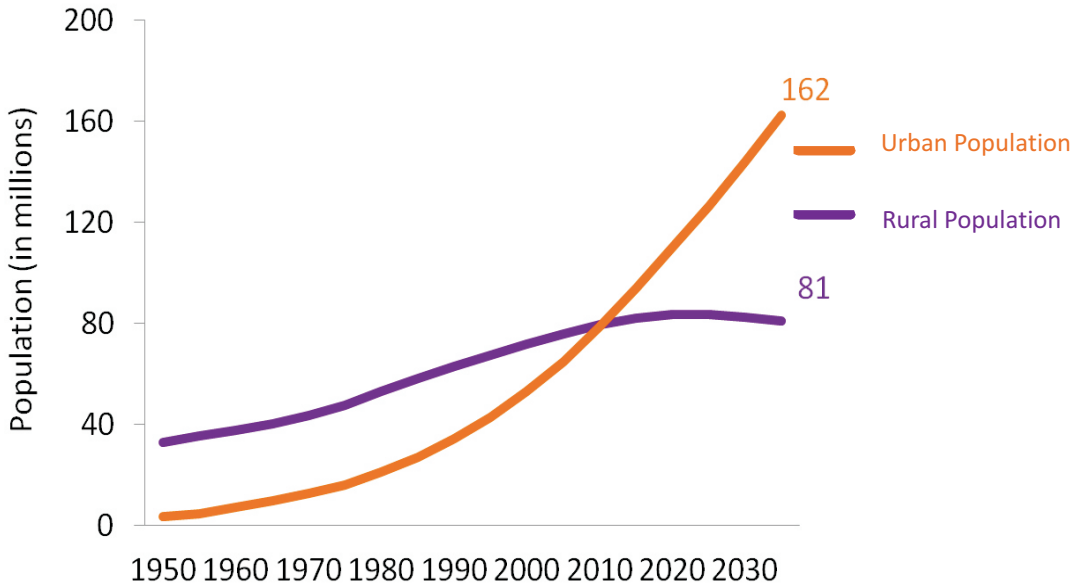
*Nigeria experienced and is still experiencing one of the fastest rates of urbanization in the world*

*With growth rates in urban areas almost double those in rural areas*

International statistics indicate that Nigeria experienced and is still experiencing one of the fastest rates of urbanization in the world. During the last few decades, the growth rates of the population of Nigeria's urban areas had been almost double those of rural areas.

# Nigeria Urban/Rural Population

After 2010, Nigeria became more urban than rural



World Population Prospects 2009

The graph above shows actual and projected growth of Nigeria's urban and rural populations. In 1950, Nigeria had over 30M rural population but less than 4M urban population. Over the years, Nigeria's rural and urban populations continued to grow, but after 1990, the rural population grew more slowly, whereas urban growth became very rapid. In 2005, Nigeria's rural population numbered over 75M compared to 65M urban population. By 2010, the urban and rural populations were nearly equal. It is projected that by 2015, three years from now, Nigeria's urban population will be almost 94M while the rural population will be around 82M. More people will be living in Nigeria's cities and the country's rapid urbanization rate is expected to continue into the future. UN projections estimate that by 2030, Nigeria's urban population will reach 162 million whereas the rural population will be only about half the number of urban residents.



Photo by Bonnie NURHI

*Focusing on the urban population is key to Nigeria meeting its overall economic and development goals.*

*Nigeria will not be able to meet its MDGs or Vision 2020 without addressing the growing urban population.*

Thus, focusing on the urban population is key to Nigeria meeting its overall economic and development goals. It is clear that Nigeria will not be able to meet its Millennium Development Goals (MDGs) or Vision 2020 without addressing its rapidly growing urban population.



# Nigeria has a Vision for Urban Development

The National Urban Development Policy calls for:

- Providing adequate shelter for all
- Poverty reduction and economic empowerment
- Ensuring environmental sustainability
- Good governance and development

*“The urbanization process is irreversible in Nigeria and must therefore be turned into opportunities for growth”*

Presentation by Permanent Secretary, Federal Ministry of Housing and Urban Development, Nigeria 2005

Nigeria has a vision for urban development. The country's National Urban Development Policy calls for

- Providing adequate shelter for all
- Poverty reduction and economic empowerment
- Ensuring environmental sustainability
- Good governance and socio-economic development

As the Permanent Secretary of the Federal Ministry of Housing and Urban Development emphasized, the urbanization process is irreversible. Nigerians must turn urbanization and its challenges into opportunities for growth.



Photo by Bonnie NURHI

*However, there are challenges with policy implementation which is resulting in poor quality of life for city residents, especially among the urban poor.*

*One of the key challenges in policy implementation of the urbanization plan is the rapid growth in the population of cities.*

*This creates a situation where the government is unable to:*

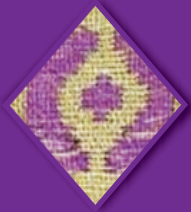
- Maintain and expand infrastructure
- Provide adequate, high quality social services
- Create an environment that is conducive to economic development

However, there are challenges with policy implementation. As a result, poor quality of life affects city residents, especially the urban poor.

One of the key challenges in policy implementation of Nigeria's urbanization plan is the rapid growth in the population of cities.

Such rapid growth has created a situation where the government is unable to:

- Maintain and expand much needed urban infrastructure
- Provide adequate, high quality social services for various sectors of the population
- Create an environment that is conducive to economic development



# Ibadan's Urban Population



Photo by Bamidele NURHI

Let us now examine closely the characteristics of Ibadan's urban population.



## Let's focus on these urban areas:

- Ibadan South East
- Ibadan South West
- Ibadan North East
- Ibadan North
- Ibadan North West

For this booklet, whenever I say Ibadan city, I am referring specifically to the combined information of the following LGAs: Ibadan South East, South West, North East, North and North West.



# Current Situation of Ibadan



1.5 million population in the 5 LGAs



On average, each women has just under 4 children



33% of married women use a modern method of family planning

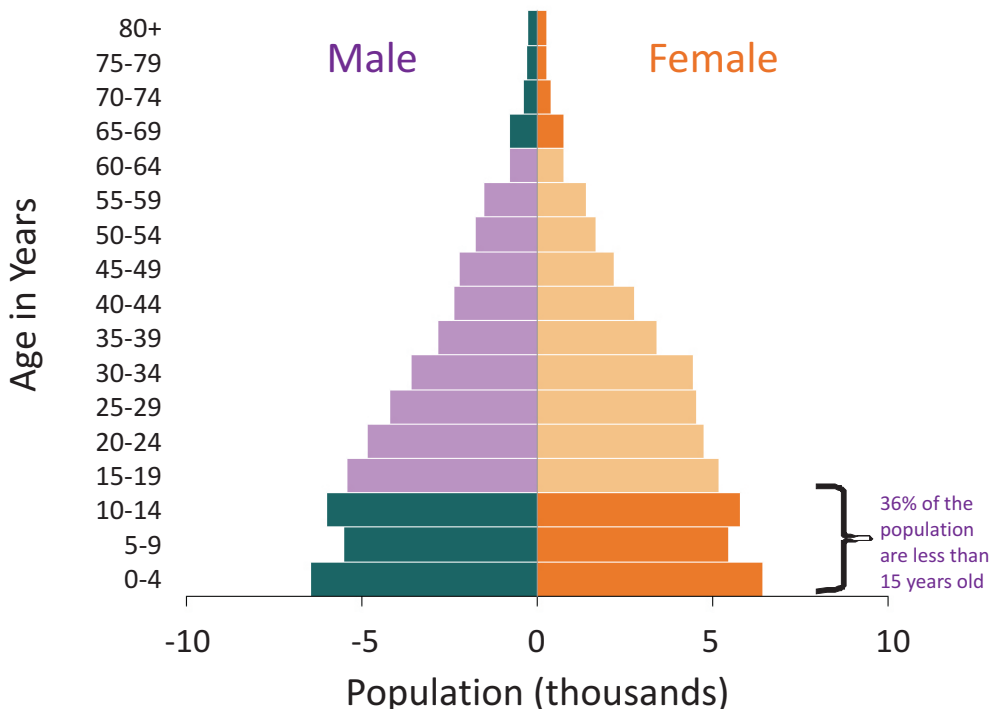


More than 130 maternal deaths per year

What is the current population situation in Ibadan? At present, the focus urban LGAs of Ibadan have a combined total population of 1.5 million. On average, each woman in Ibadan city has given birth to a little less than 4 children in her lifetime. An estimated 33% of currently married women in Ibadan city are using a modern method of family planning. Every year, as many as 130 Ibadan mothers die due to pregnancy-related reasons.

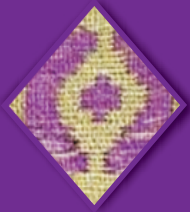
# Age Structure

2011 Population of Ibadan, projected using the 2006 census



Because information on the age and sex composition at the LGA level is not readily available, we applied the age and sex percentage distribution of the state to the focus urban LGAs of Ibadan in order to obtain numbers by age and sex.

Ibadan has a young population, with 36% of the entire population under 15 years of age. If we consider mainly five-year age groupings, we can note that the largest concentration of population in Ibadan can be found in the youngest age group (ages 0-4 years).



# Population and Development



Photo by Bonnie NURHI

In this section, we will examine the implications of the growth and characteristics of Ibadan's population on various developmental concerns.

# Population and Economic Development are Linked

A much larger working age population compared to the population in young dependent ages was a key factor in the **Asian development miracle**.

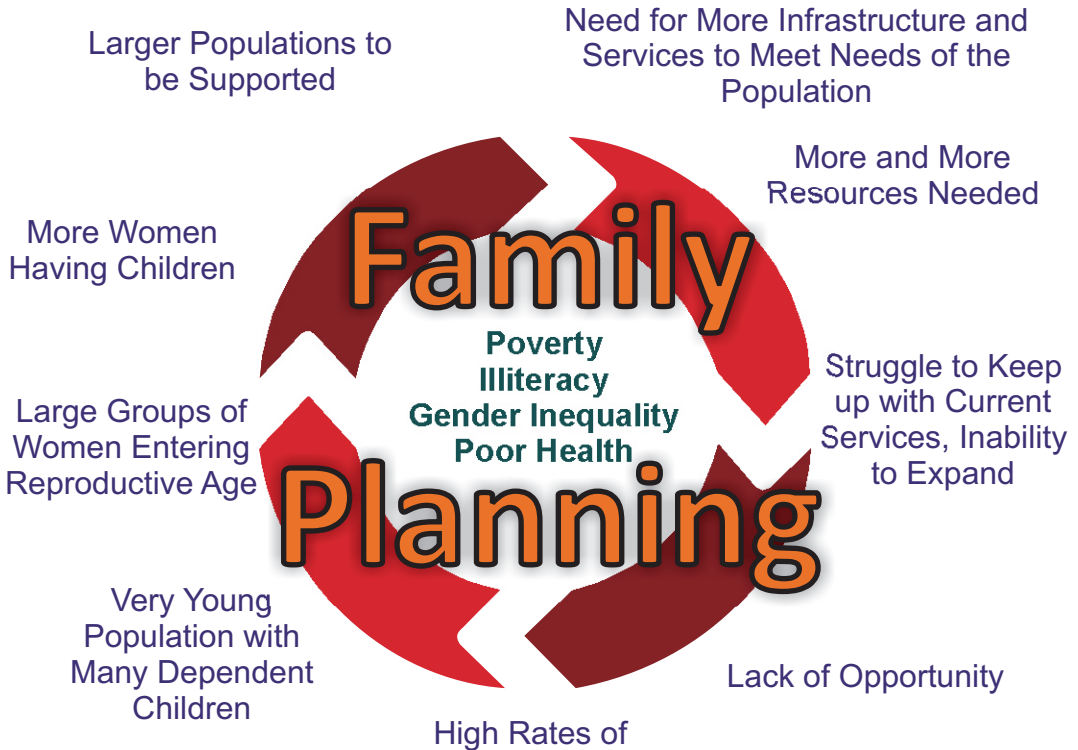
- As families became smaller, dependency significantly declined.
- Greater emphasis on population quality than quantity meant increased investments by the state
- More and better educational opportunities emerged
- Greater productivity
- Investment in modern agriculture

Photo by Bonnie NURHH

International studies document the link between population and economic development. In countries where fertility declines have occurred, a much larger working age population emerged compared to the population in the young dependent ages. This was a key factor in the Asian development miracle, or what the “Asian tigers” experienced.


- As families became even smaller, the percentage of the population in the young dependent ages declined, and the percentage of the population in the working ages grew even larger, resulting in significant declines in dependency.
- The governments of the Asian tigers also emphasized population quality rather than quantity, and Asian state leaders increased investments to improve the quality of the population.
- More and better educational opportunities emerged from increased government investments on education.
- More and better educated working force meant greater productivity that allowed even more economic investments.
- More investments included investments in modernizing agriculture, using modern equipment and technology along with fewer but highly skilled agricultural workers.

# Vicious Circle



In contrast to the experiences of Asian tigers, many African countries like Nigeria are in a vicious circle propelled by continued high rates of fertility that result into very young populations and many dependent children. Moreover, as a result of historically high fertility rates, large groups of women enter the reproductive ages every year, resulting in more women having children and even larger populations to be supported. All these indicate the need for more infrastructure and services to meet the needs of the population dominated by the very young who should be provided basic needs of food and health care. Thus, more and more resources are needed, as governments struggle to keep up with current services and experience inability to expand or improve services. All these lead to lack of opportunities, continuing high fertility and high dependency, continuing poverty, illiteracy, gender inequality, poor health, and high maternal and infant mortality.

The objective of family planning is to intervene and to contribute significantly to breaking this vicious circle.



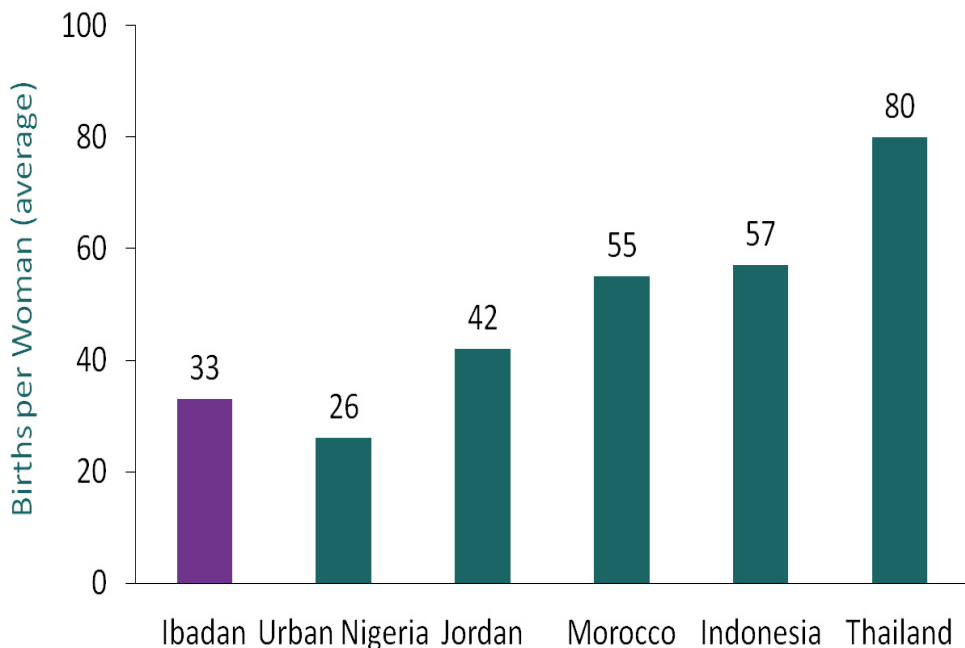
## A key component to the success of the Asian tigers was investment in family planning



A key component to the success of the Asian tigers was investment in family planning. Sustaining and increasing investment in family planning contributed significantly to improved quality of life and escalated economic development in the Asian tigers.

# Modern Contraceptive Use

Percentage of Married Women using a Modern Contraceptive Method



Source: NURHI/MLE Household Survey, 2011 and DHS and RHS Surveys

Let us now focus on family planning, particularly modern contraceptive use. The percentage of currently married women using modern contraceptives in Ibadan (33%) is actually higher than the corresponding percentage for all urban areas of Nigeria (26%). The higher level of modern contraceptive use in Ibadan, however, is still below national-level percentages of women using modern contraceptive methods in Jordan (42%), Morocco (55%), Indonesia (57%) and Thailand (80%).



# Couples in Ibadan Want to Plan their Families

- ◇ Less than 20% of women and less than 15% of men want a child in the next 2 years
- ◇ 1 in 4 women and 1 in 5 men do not want any more children
- ◇ 1 in 5 women have an unmet need for family planning
- ◇ Less than 1 in 4 of the poorest women are using a modern method
- ◇ Almost half of women say it would be a “big problem” if they were to become pregnant in the next few weeks

2011 NURHI/MLE Baseline Survey

Aside from high modern contraceptive use among currently married women in Ibadan, the Measurement, Learning and Evaluation (MLE) data revealed that Ibadan couples indeed want to plan their families. Less than 20% of women and 15% of men want to have a child in the next two years. In fact, approximately 1 out of every 4 women and 1 out of every 5 men do not want any more children. Moreover, approximately 20% of women have an unmet need for family planning, meaning they want to space or limit childbearing but are not using any family planning method. Almost half of all women also stated that it would be a big problem if they were to become pregnant in the next few weeks.



# Ibadan has an opportunity to improve the quality of life of its population

## 2 Potential Futures:

### **Scenario 1: Maintain Current Trends**

What if things continued as they are now?

### **Scenario 2: Investment in Family Planning**

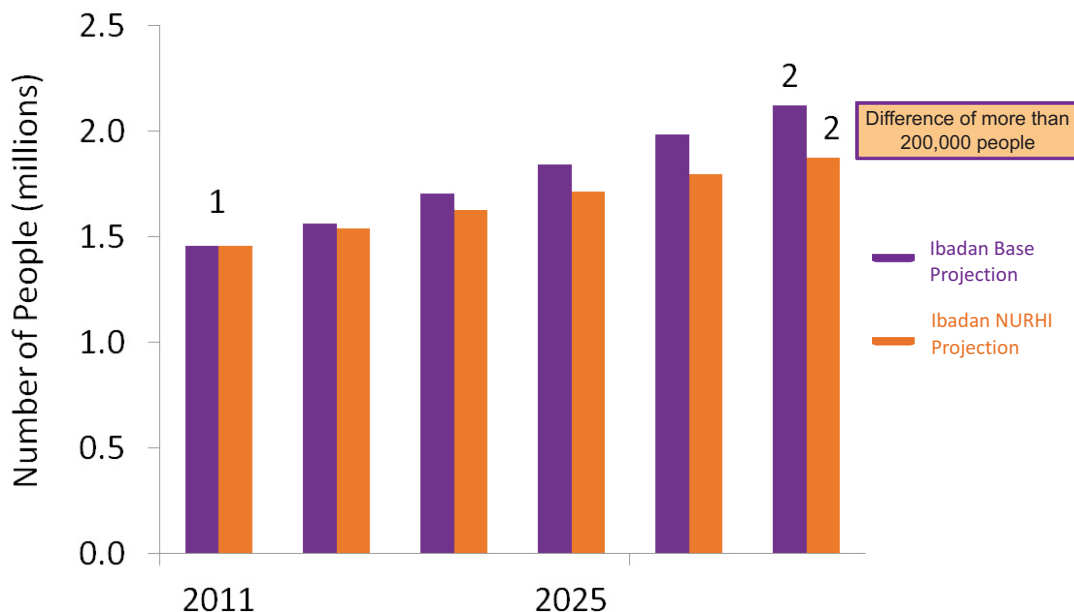
What will happen if there is an investment in family planning and unmet need is met?

Considering the family planning aspirations and needs expressed by urban men and women, Ibadan has a real opportunity to improve the quality of life of its population. To make us appreciate this point more, let us examine two potential future scenarios that have been prepared for NURHI: Future Scenario 1 answers the question “What if things continued into the future as they did before and now?” This is what we will call the base (or reference) scenario. This scenario uses past trends in contraceptive prevalence increase in the urban areas of Nigeria based on the 1999 to 2008 Nigeria Demographic and Health Surveys. These national demographic surveys showed an average of 1.06 percentage point increase in contraceptive prevalence in the urban areas of Nigeria between 1999 and 2008.

Then we have Scenario #2 which answers the question: What will happen in Ibadan if there is improved investment in family planning and unmet need is met?

# Total Populations

Actual and projected total populations of the Ibadan urban areas



Under the Base Scenario wherein modern contraceptive use in Ibadan will increase gradually based on past trends, the population is projected to grow from 1.46 million in 2011 to 1.56 million in 2015 and continue to increase to 2.12 million in 2035.

Under the NURHI scenario where contraceptive use increases significantly, Ibadan's total population will be 1.54 million in 2015 and 1.87 million in 2035. Overall, the NURHI scenario yields smaller numbers compared to the base scenario populations. The differences in total populations between the base scenario and the NURHI scenario for Ibadan become larger over time, to reach almost 200,000 in 2035.

# Impacts on Different Sectors

## Health



## Education



## Infrastructure



## Economy



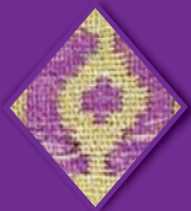
Let us now examine projected population changes achieved through the two different family planning scenarios and their implications on selected social and economic development concerns of Ibadan.



*“All stakeholders need to appreciate the linkages of population factors with broader development issues like housing, education, health, agriculture, energy, environment, gender concerns, food security and the security of life and property.”*

Nigeria National Policy on Population for Sustainable Development : January 2004

As we examine the implications of Ibadan’s population changes on selected social and economic development concerns, let us also keep in mind the emphasis placed by Nigeria’s 2004 National Policy on Population for Sustainable Development on the linkages of population factors with broader development issues like health, housing, education, gender, and security of life and property.



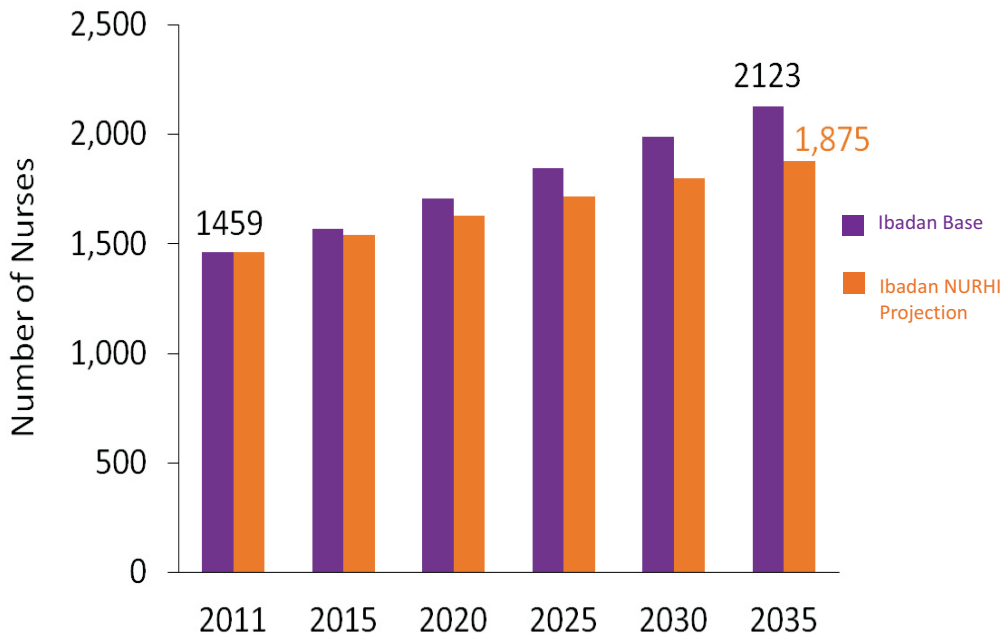
# Health



This section focuses on the implications of our two projection scenarios on the health sector.

# Number of Nurses Required

Assuming WHO standard of 1 nurse per 1,000 population

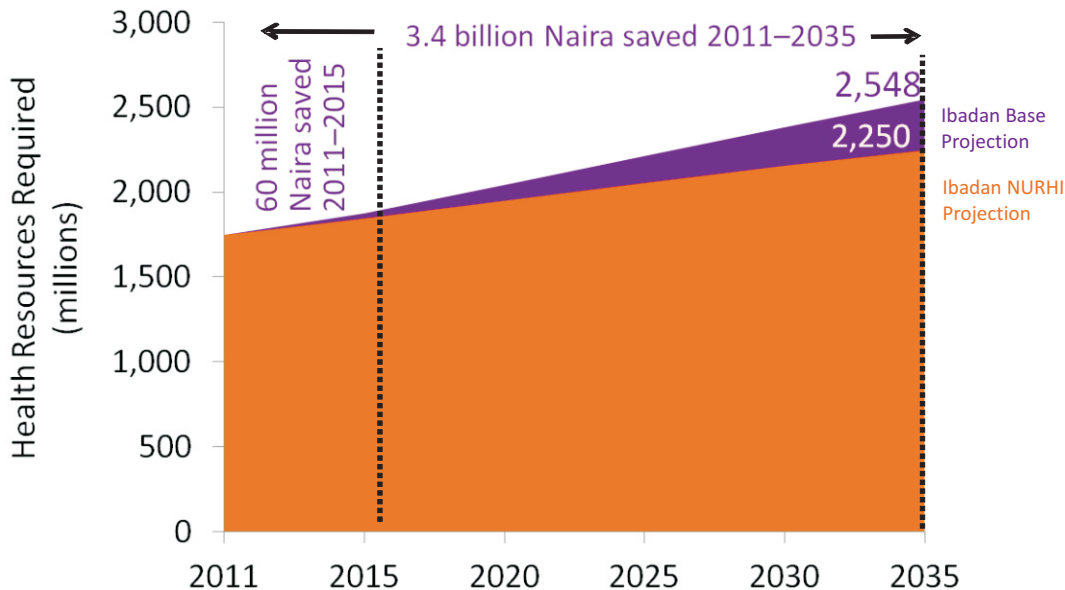


WHO 1:1,000 recommendation

Using the WHO standard of 1 nurse for every 1,000 population, the number of nurses that is required for Ibadan to meet the standard would increase from 1,459 nurses in 2011 to 2,123 nurses in 2035 under the base projection scenario. In contrast, Ibadan would need 1,875 nurses by 2035 under the NURHI projection scenario. Fewer nurses would be needed by the urban LGAs if the projected total population would be lower.

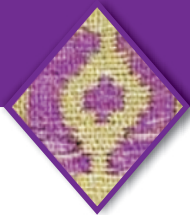
# Health Resources Required

Based on Per Capita Health Spending



Human Resources for Health by African Health Workforce Observatory 2002

Using the figure of 1,200 Naira per capita health spending per person per year, the amount of health resources required just to maintain this low level of per capita spending would reach almost 2.5 billion Naira in 2035 under the Ibadan base scenario compared to 2.2 billion Naira under the NURHI scenario. The cumulative potential savings generated between 2011 and 2035 by the NURHI projection scenario over the base scenario will reach 3.4 billion Naira.



# NURHI Health Savings 2015 & 2035

Comparison between actual and recommended per capita spending

Per Capita Spending in Health	Cumulative savings generated by achieving the NURHI Scenario instead of the Base Scenario	
	2011–2015 Savings	2011–2035 Savings
Actual: 1,200 Naira	60 million	3.4 billion
Recommended: 5,100 Naira	254 million	14 billion

Human Resources for Health by African Health Workforce Observatory 2002

As stated in the previous page, the estimated per capita spending on health in Ibadan at present is about 1,200 Naira per person per year. If the same amount would be spent per person per year over the course of the projection period, the NURHI scenario with its lower population totals would save 60 million Naira in just the four-year period from 2011 to 2015. The cumulative savings from 2011 to 2035 would reach 3.4 billion naira.

Of course, current per capita spending on health in Ibadan is still very low. What is really recommended is 5,100 naira per person per year so that all basic health needs and care are met. If health spending per capita would significantly increase to the recommended level of 5,100 naira per person, and the NURHI scenario would be realized, the cumulative future savings in just four years from 2011 to 2015 would be approximately 254 million naira. The cumulative savings from 2011 to 2035 would reach 14 billion Naira. More savings under the NURHI scenario mean that the health sector can use more of the health budget to improve the quality of care, through more and better trained health workers, more modern medical equipment and health supplies, and more health infrastructure all over the city.



*“The key challenges to reducing infant mortality include population, declining resources and wide geographic variations.”*

*Major challenges to reducing maternal mortality include “a dearth of skilled personnel and a shortage of family planning facilities”.*

Nigeria Millennium Development Goals: Report 2010

One of the biggest challenges in Nigeria is continuing high infant mortality. As Nigeria’s MDG Report for 2010 stated, reducing infant mortality requires addressing the population challenge, for which the key intervention is family planning. The MDG Report also cites the need to reduce maternal mortality by addressing the shortage of skilled health personnel and FP facilities in the country.



# Family Planning Eliminates Risky Births

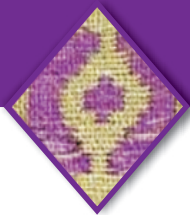
Family Planning Acts by Reducing Births in the Following Categories, Called the 4 Too's:

- Too young: *women who give birth before age 18*
- Too old: *women who give birth after age 35*
- Too many: *more than 5 births*
- Too close: *births spaced less than 24 months*

Studies in many countries demonstrate that family planning can eliminate high risk births. High risk births refer to the 4 TOO's or births that are:

- Too young – refers to women who give birth before age 18, as the woman herself is still developing and growing physically and emotionally.
- Too old – refers to women who give birth after age 35.
- Too close– when births are spaced less than 24 months
- Too many – when the woman has had more than 5 births.

The percentage of births with any of the risk factors just cited would be higher under the base scenario projection for Ibadan, compared to lower proportions under the NURHI projection. High risk births result in maternal and infant deaths and are very expensive to attend to at health facilities.



# Risky Births

Percentage of births with any risk factor

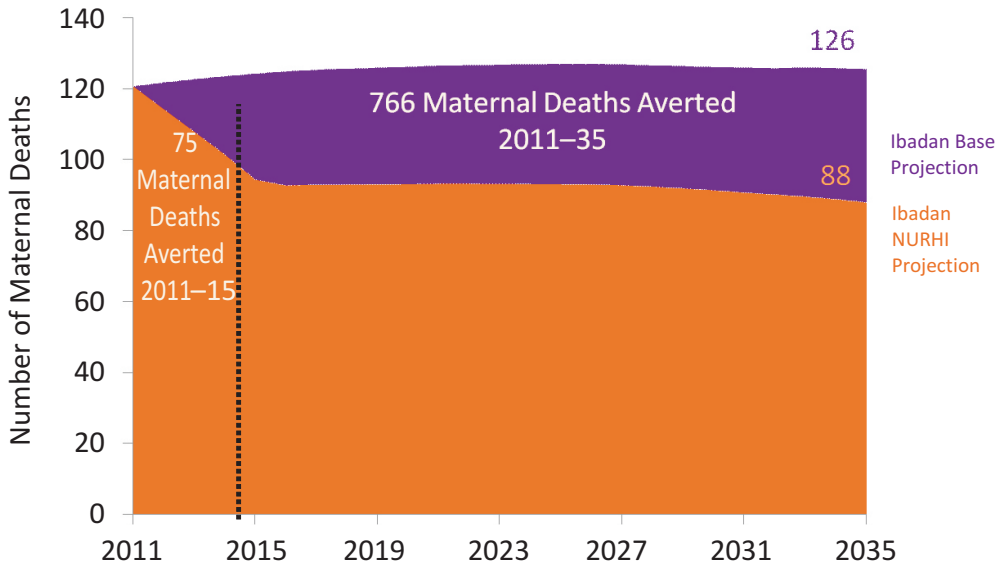
Year	Ibadan Base Projection	Ibadan NURHI Projection
2011	63	63
2015	62	52
2035	55	48

*High risk births can result in maternal and infant deaths and are very expensive to attend to at health facilities.*

Nigeria DHS

In 2011, approximately 63% of births in Ibadan had one or more of the risk factors (4 Too's) just cited. The projection scenarios demonstrate that, over time, the percentages of births with any of the High Risk factors would be higher under the base scenario for Ibadan, compared to lower proportions that are high risk under the NURHI scenario. By 2035, the NURHI scenario would have only about 48% high risk births compared to 55% under the base scenario.

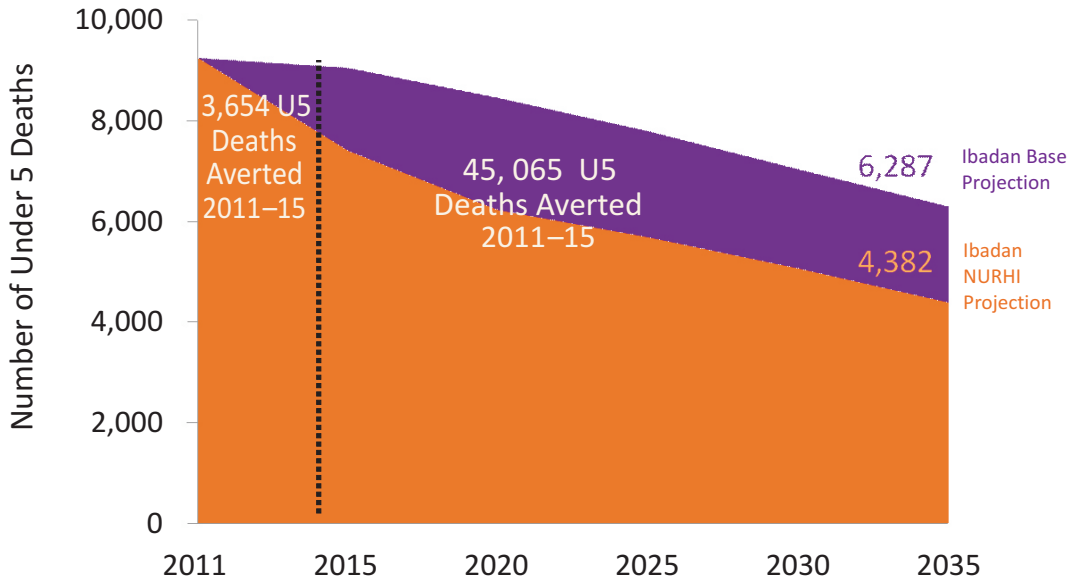
# Number of Maternal Deaths



FP can help prevent high risk pregnancies from occurring. While gradual FP increase would help prevent maternal deaths, the number of maternal deaths that would occur under the base scenario would still be higher than the NURHI scenario that assumes significant increase in FP use. Through NURHI, around 75 maternal deaths can be averted between 2011 and 2015 alone, and a cumulative projected figure of 766 maternal deaths averted between 2011 and 2035, as greater numbers of high-risk pregnancies are prevented from occurring during the 24 year period.

# Number of Under 5 Deaths

Deaths to Children 0-4 years



While gradual FP increase under the base scenario would help prevent child deaths, the number of deaths to children under five years of age in Ibadan cities under the base scenario would still be higher than projected numbers of children dying under the NURHI scenario which assumes significant increases in modern FP use. Through NURHI, a cumulative total of 3,654 child deaths can be averted in Ibadan cities in the 4 years between 2011 and 2015. A cumulative number of 45,065 child deaths can be averted between 2011 and 2035 by NURHI compared to the base scenario, as more and more high-risk pregnancies are prevented from occurring over the 24-year period.



# Infant Mortality Rate

Number of deaths to babies less than 1 year old for every 1,000 births

Year	Ibadan Base Projection	Ibadan NURHI Projection
2011	74	74
2015	71	49
2035	55	38

*Infant Deaths Averted:*

*1,867 between 2011-2015*

*18,133 between 2011-2035*

If we focus on infant mortality alone, the difference between the NURHI and base projection implies nearly 2,000 infant deaths averted in the 4 year period between 2011 and 2015. A cumulative number approaching nearly 20,000 infant deaths can be averted between 2011 and 2035 because of significant increases in modern contraceptive use under the NURHI scenario.

Because of family planning and reduced numbers of high risk births, the infant mortality rate will also decline. In 2011, the estimated infant mortality rate was 74 infant deaths per 1,000 live births. By 2035, the infant mortality rate for Ibadan urban areas would be 38 under the NURHI projection scenario compared to a much higher 55 IMR under the base projection scenario.



# Health Benefits of Investing in Family Planning



Reduction in the number of maternal, infant, and child deaths



Increase in life expectancy



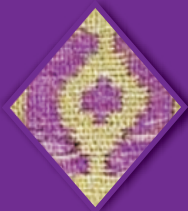
Freed up resources that can be invested in strategies to improve quality and access to essential health services



Reduction in the strain on health staff and infrastructure

The projection scenarios depicting the impact of two family planning scenarios on the health sector of Ibadan urban areas illustrate the health benefits of investing in modern family planning services. The health benefits of family planning include:

- Reduction in the numbers of maternal, infant and child deaths.
- Increase in life expectancy.
- Resources freed up so that these can be invested in strategies and interventions to improve the quality of and access to essential health services.
- Reduced strain on health staff and infrastructure.



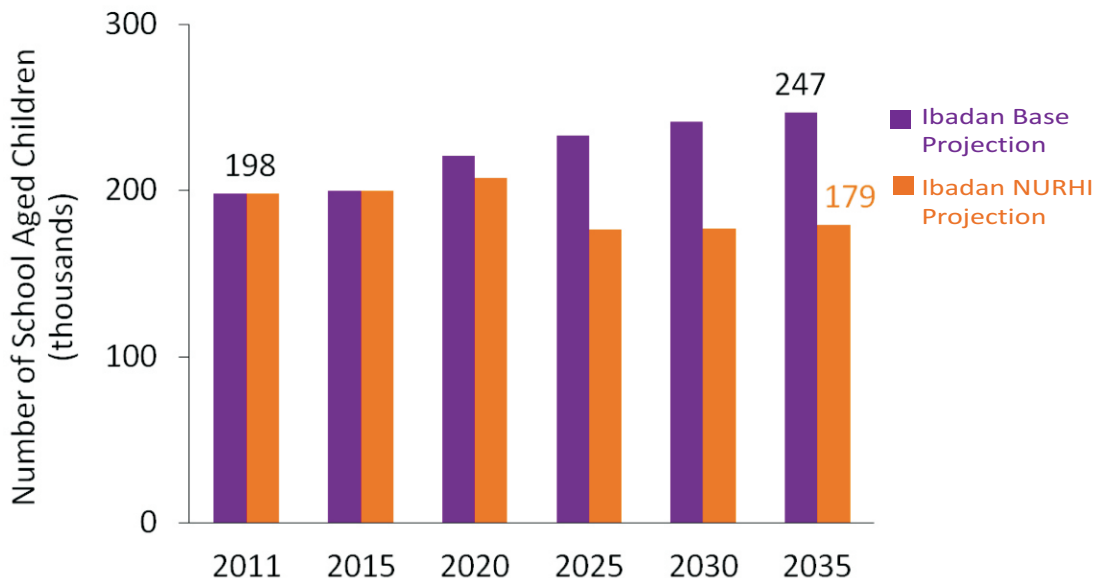
# Education



This section of the booklet examines the impact of our two scenarios on the education sector.

# Primary School Aged Children

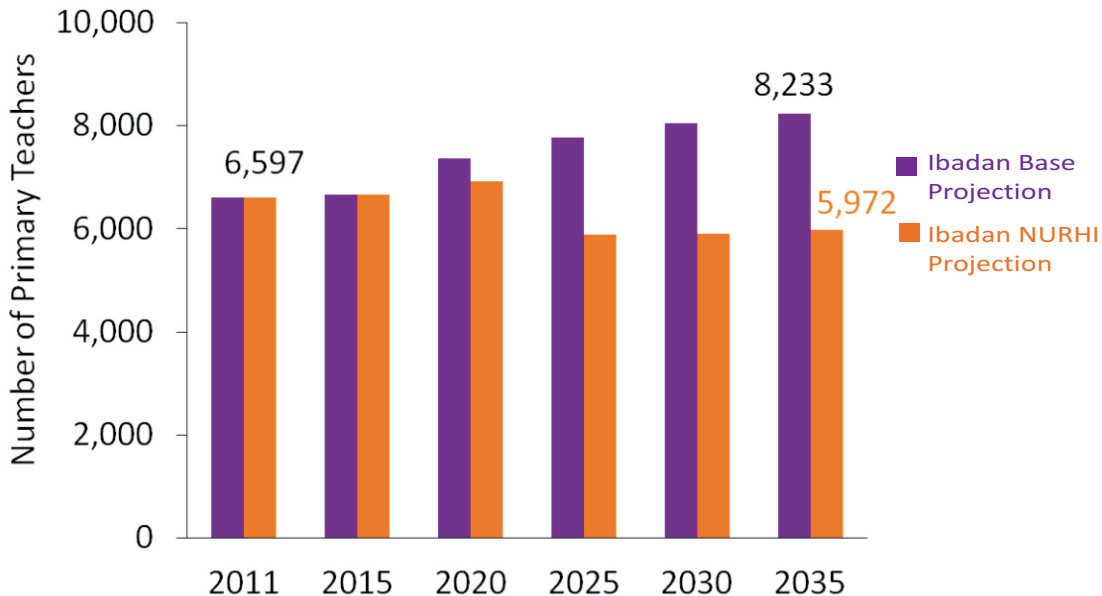
Number of Children Aged 6-11



The number of primary school age children- or children ages 6 to 11 years – in Ibadan urban areas was estimated to be about 198,000 in 2011. This number will increase to around 247,000 under the base scenario projection compared to 179,000 under the NURHI scenario. The impact of a much higher modern FP use under the NURHI scenario becomes noticeable starting 2020 and thereafter, as projected numbers of primary school aged children get even lower than estimated numbers for 2011 to 2020.

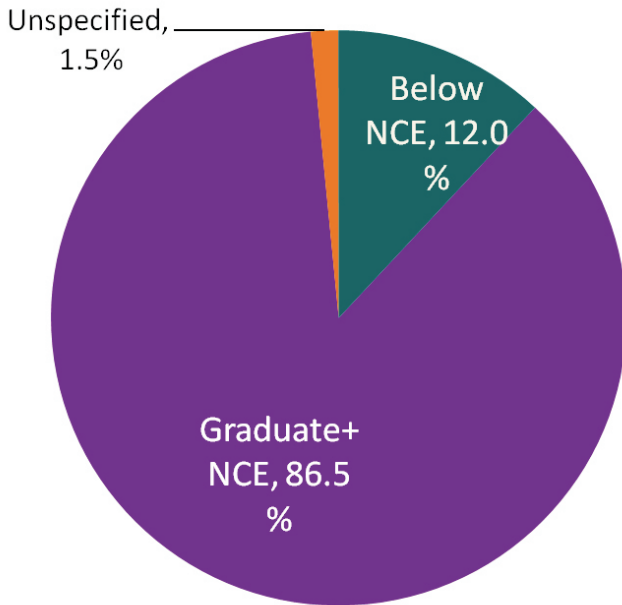
# Number of Primary Teachers Required

Based on 1 teacher per 30 students



The current primary school standard is 1 teacher for every 25 students. This translates into 6,597 primary teachers required in the focus Ibadan areas at present. Meeting the same standard in the future will require more than 8,200 primary school teachers in 2035 under the base projection scenario compared to a little less than 6,000 primary teachers under the NURHI projection scenario.

# Quality of Primary Teachers



Ibadan has a high percentage of qualified teachers.

National Bureau of Statistics: Social Statistics in Nigeria 2009

As the previous page showed, the number of primary teachers required is much higher under the base scenario compared to fewer numbers under the NURHI projection scenario. The figures in this previous page refer only to efforts to meet the increasing numbers of schoolchildren – or efforts to accommodate increasing quantities (numbers) of children. The current distribution of primary school teachers by educational background in the urban areas of Ibadan is shown in the pie chart. Ibadan, a renowned educational center in Nigeria and all of Africa, has a very high percentage of qualified teachers. Ibadan needs to ensure that qualified primary teachers remain in the city and get even more training. Youths, who will be Ibadan's future work force, should go through continuing education. At the same time, Ibadan also needs to invest in improving further city school facilities and equipment so that Ibadan will continue to be the education leader of the country.

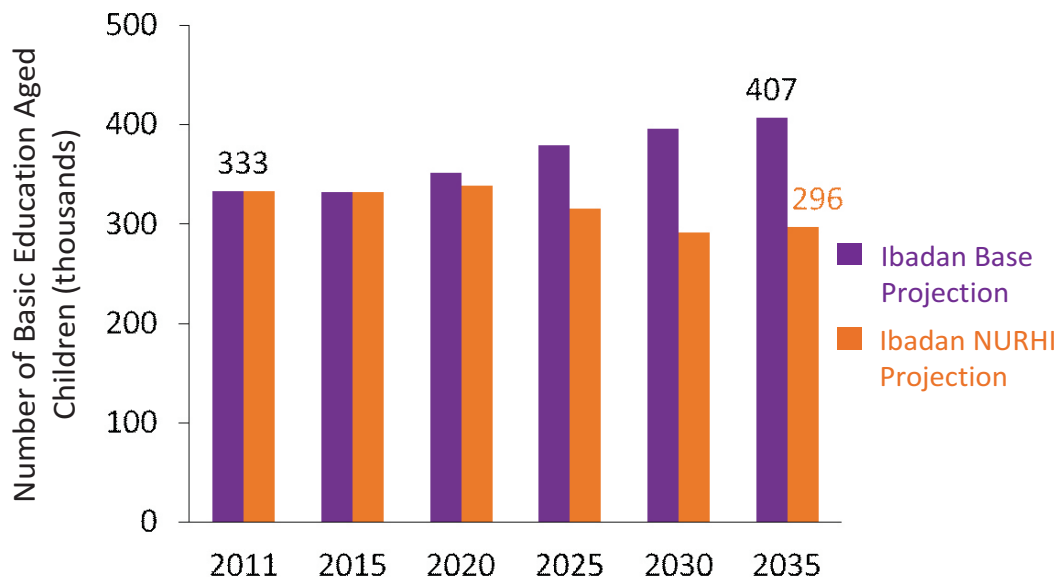


*Current policy goes beyond universal primary education and has set a target of universal basic education.*

Through its National Universal Basic Education Act, Nigeria occupies a unique place among African countries for its ambitious objective of free basic education for all children between the ages of 6-15 years. Thus, the current policy goes beyond universal primary education and sets a higher target of providing universal basic education for the country's youth

# Basic Education Aged Children

Primary and Junior Secondary (Ages 6-15)



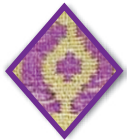
The basic education objective can be assessed in terms of current and projected numbers of basic education-aged children in the urban areas of Ibadan. Ibadan children in the basic education aged group numbered about 333,000 in 2011. Under the base scenario, the number to be provided basic education could reach 400,000 in 2025 (just a little over 10 years from now) and 407,000 in 2035. In contrast, the NURHI scenario yields much lower projection figures. Meeting the national basic education policy will be a challenge for the focus urban areas of Ibadan especially under the base scenario with larger projected numbers of children ages 6-15 years compared to smaller numbers under the NURHI scenario.



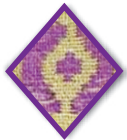
# Education Benefits of Investing in Family Planning



Reduction in the strain on teachers and infrastructure



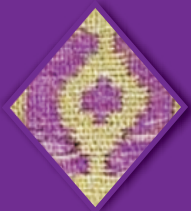
Freed resources that can be invested in strategies to improve the quality of education and prepare the next generation to participate in the global economy



Assist Ibadan in meeting the Education Sector goal of universal basic education

Overall, the education benefits of investing in family planning include:

- Reduced strain on teachers and the education infrastructure.
- Resources freed up which can be invested in strategies to improve the quality of education and prepare the next generation to participate in the country's efforts to be a major participant in the global economy.
- Helping Ibadan urban areas to achieve the Education sector goal of universal basic education.



# Infrastructure

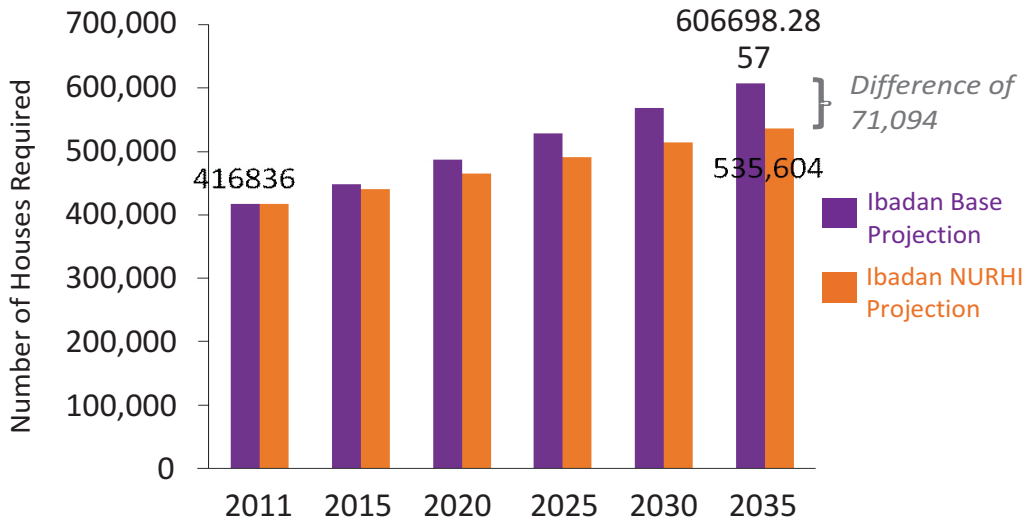


Photo by Bonnie NURHI

This section of the booklet focuses on the infrastructure sector.

# Housing Requirements for a Growing Population

Average household size of 3.5 people

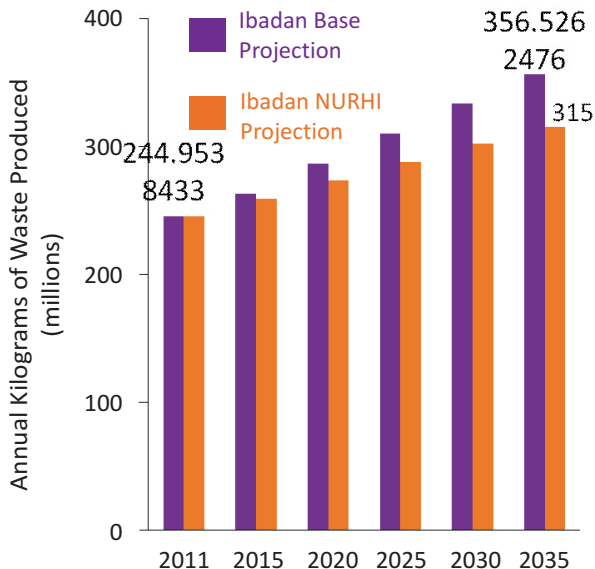


Spectrum Projections using data from NURHI/MLE Baseline Data, 2011

If we apply the MLE survey figure of 3.5 average household size in Ibadan to projected total population figures, we can come up with estimates of housing requirements. At present, housing requirements for the focus Ibadan urban areas approximate 417,000. Future populations of Ibadan will require nearly 607,000 housing units under the base scenario compared to around 536,000 housing units under the NURHI projection scenario. We are looking here only at the quantity or numbers of houses, and we do not assume anything here about housing quality.

# Solid Waste Generation

## Annual Production of Waste (in kilograms)



Babayemi et al. 2009

A study by Babayami (2009) estimated that in the Ibadan urban areas, each person generates about 167 kg of solid waste per year. This translates into a total of 245 million kilograms of solid waste generated in 2011. This figure will increase to a projected total of 357 million kilograms of waste generated in Ibadan in 2035 under the base scenario, compared to 315 million kilograms of waste under the NURHI scenario. Increasing populations over time mean more solid waste, but the quantity of waste generated will be much more under the base scenario.



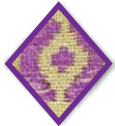
# Infrastructure Benefits of Investing in Family Planning



Reduction in the strain on housing requirements



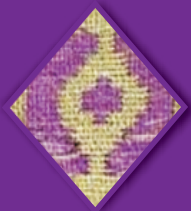
Likely lower the percentage of people living in slums or other forms of temporary housing



Reduction in the amount of trash that is generated and improvement in the sanitation condition of the city

Investing on improving family planning services, with a defined focus on modern FP, yields benefits in physical infrastructure that include among others:

- Reduced strain on housing requirements
- Likely lowered numbers and percentages of the population living in temporary housing or in slum areas
- Reduced amount of trash that is generated - which in turn helps improve sanitation conditions of the city.

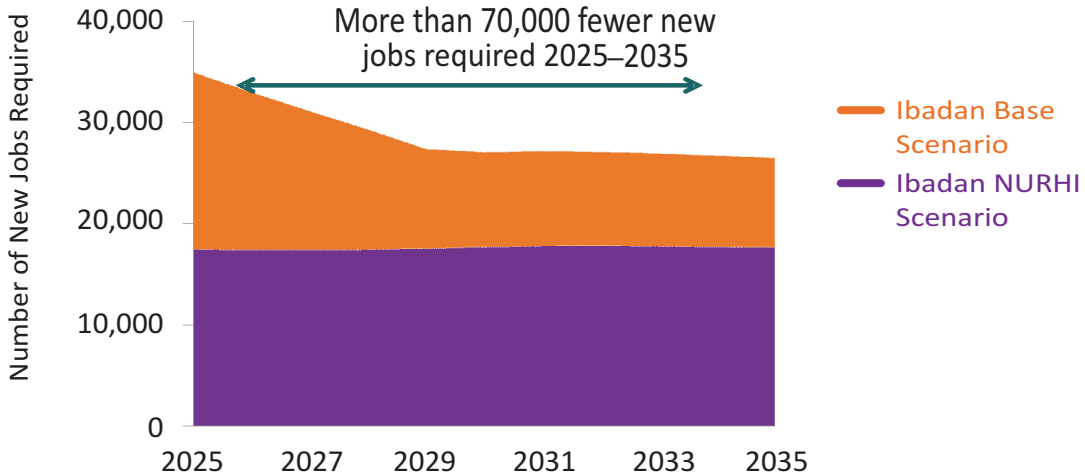


# Economy



This section looks at the implications of two projection scenarios on the economy.

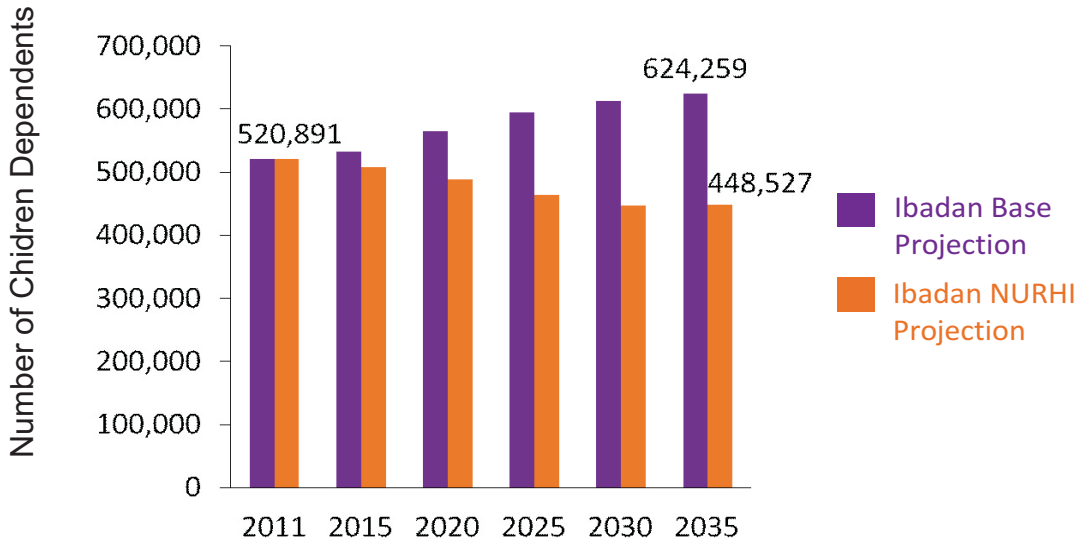
# New Jobs Required



Spectrum Projection

Let us now consider implications on the employment infrastructure through the expected number of new entrants to the work force who will need to be provided with jobs. The graph shows the differences between expected new entrants to the workforce under the base projection scenario and the NURHI projection starting from 2025, when differences in the number entering the work force become very apparent. The cumulative differences from 2025 to 2035 between the two scenarios sum up to more than 70,000 fewer new jobs that must be created in the focus urban areas of Ibadan in one decade under the NURHI scenario compared to larger numbers requiring new jobs under the base scenario.

# Number of Child Dependents



MLE Survey 2011

At present, the focus urban areas of Ibadan have approximately over 521,000 children belonging to the ages 0-14 years. Over time, projected numbers of children in these dependent ages will grow increasingly higher under the base scenario projection compared to increasingly lower number of dependents under the NURHI scenario. By 2035, over 624,000 children are projected for the base scenario compared to the much lower figure of around 449,000 children under the NURHI base scenario.



*“With a high population growth rate of 3.2%, the teeming population tends to exert a massive demand-pull on existing resources, thereby constraining the growth of the nation’s GDP per capita.”*

Nigeria Vision 20:2020 Economic Transformation Blueprint

It is clear that rapid population growth affects the economy. This was stressed significantly in Nigeria’s Vision 2020 Economic Transformation Blueprint.



# Economic Benefits of Investing in Family Planning



Reduction in the strain on employment requirements



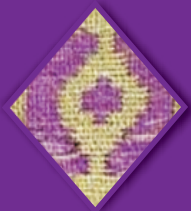
Likely reduction in the percentage of people in the working ages that are unemployed



Reduction in the number of dependents which will assist families to move out of poverty

In summary, the economic benefits of investing in family planning in Ibadan's cities include:

- Reduced strain on employment requirements
- Likely reduction in the percentage of the population in the working ages that are unemployed.
- Reduction in the number of dependents will assist families in moving out of poverty



# What Can We Do?



Photo by Bonnie NURHI

Considering the significant impact of increased use of modern family planning on health, education, infrastructure, and the economy of Ibadan's cities, what can we do?



*Couples in Ibadan want to plan their families, they want family planning*



Clearly, much needs to be done. But first, we should remember that couples in Ibadan want to plan their families. Couples want family planning. There is clear awareness among the Ibadan urban population about the importance of planning their families. They need our help.



# Policy Response

*Improving access and utilization of high quality family planning services will:*



Enable couples to achieve their own reproductive intentions (having the number of children they want, when they want them)...



Result in happy, healthier families, that are more economically secure...



Thereby support Ibadan in becoming the prosperous, developed, and thriving city it is intended to be.

To ensure that Ibadan couples have the means to plan their births, prompt response is needed from Ibadan officials and leaders at all levels.

Policies, resources and services should ensure improved access to high quality family planning services in order to facilitate utilization of such services. This will:

- Enable couples to achieve their own reproductive intentions, including having the number of children they want and when they want them so that families are able to take care of their children. This includes enabling couples to avoid high risk childbearing and poor maternal and child health.
- Help Ibadan couples to be able to plan their families which will contribute to happier, healthier families that are more economically secure.
- And thereby support Ibadan in becoming a prosperous, developed and thriving model city that it is intended to be.



## *Ibadan is Already Moving...*

- Oyo state has an approved family planning policy
- Pilot NHIS state offering free maternal and child health care
- Adequate health infrastructure to provide family planning services
- Presence of qualified health personnel
- Wide acceptance of family planning
- Started integration of family planning services into existing MCH U5/MDG Fund

Ibadan has made significant strides towards development, including positive actions related to health and family planning. This includes:



## *... but there is more to be done* **Important Next Steps**

- Implement the family planning component of the existing reproductive health policy  
Show commitment to preventing maternal and child deaths
- The State Assembly should pass a bill that guarantees access to high quality family planning services for all people living in Ibadan/Oyo State
- Increase budgetary allocation for family planning from 1M Naira to 10M Naira  
Stock outs of family planning commodities continues to be a major barrier to access
- Ensure the timely release of funds budgeted for family planning and guarantee their use for family planning services  
Lack of funds is limiting access and uptake of family planning services
- Speak out, and encourage others to speak out, supporting family planning  
Family planning discussions should happen with multiple audiences, in many forums, with all decision-makers.  
The more we talk about family planning, the more we all contribute to an environment where couples are able to meet their own reproductive intentions.

But more needs to be done. Important next steps to be taken in Ibadan include:

- Implementation of the family planning component of the existing reproductive health policy- This includes building and sustaining commitment to preventing maternal and child mortality through interventions that include family planning
- The State Assembly should pass a bill that guarantee's access to high quality family planning services for all people living in Ibadan/Oyo State
- Increasing the budgetary allocation for family planning from 1M Naira to 10M Naira - This includes contraceptive procurement to prevent stock outs of family planning commodities, which continues to be a major barrier to access
- Ensuring the timely release of funds budgeted for family planning and guaranteeing their use for family planning services – the lack of funds has been limiting access and uptake of family planning services
- Speaking out and encouraging others to speak out in support of family planning – Family planning discussions should happen involving multiple audiences and stakeholders and in many forums that include decision-makers. The more family planning is openly discussed and supported, the more we all contribute to an environment where couples are able to meet their own reproductive intentions.

*“Family Planning is something I support because we need to space our children, support safe motherhood and we need to take care of our children.”*

Nigeria’s Minister of Health  
November 2011

As Nigeria’s Minister of Health stated last November, 2011 “family planning needs to be supported because we need to space our children, support safe motherhood, and take care of our children.”



NIGERIAN URBAN REPRODUCTIVE  
HEALTH INITIATIVE

Nigerian Urban Reproductive Health Initiative (NURHI) is a Project that is Supporting Quality Family Planning in 6 Nigerian Cities:



*Get it together*

KNOW. TALK. GO.

- Abuja FCT
- Kaduna
- Ilorin
- Ibadan
- Benin
- Zaria

*NURHI aims to increase family planning by 20 percentage points in each city by providing quality services that couples can access*

Nigeria Urban Reproductive Health Initiative NURHI, is a project implemented by a consortium led by Johns Hopkins Bloomberg School Public Health Center for Communication Programs, other international development agencies and Nigerian organizations in partnership with local government health departments. NURHI is supporting the provision of accessible and high-quality family planning services in four Nigerian cities: Kaduna, Abuja FCT, Ilorin and Ibadan. NURHI aims to increase modern family planning use by 20 percentage points in each city by providing quality services that couples can access.



**NURHI**  
NIGERIAN URBAN REPRODUCTIVE  
HEALTH INITIATIVE  
[www.nurhi.org](http://www.nurhi.org)