

This book is a trial to emphasis and explains the current transitions in the age-structure of the countries of Arab region, and to what extent it's relevant to current and future Internationally Agreed Development Goals IADGs, from one side, and in developing a conceptual framework for understanding the effects of age-structural transitions in achieving these goals on the other side. In addition, the book represents a trial made to establish a framework to integrate the demographic dimensions into the national and sectoral development plans and programs.

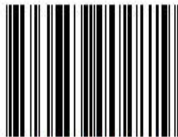


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## The Age-Structural Transitions in the Arab Region



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## **1. Introduction:**

Integration of the demographic dimension and utilizing the profound age-structure-transition in formulating national development strategies and plans in Arab countries received a growing thought during the past few years. Many of the demographic indicators became more integrating in formulating the development policies and programs but the magnitude of these indicators was unutilized yet. The reductions in infant, child and maternal mortality and decreases in fertility rates during the post-half of the last century have reshaped the population age structure of Arab countries and led to unprecedented changes. Child boom and youth bulge are the main features of population age-structure transition in the current time while aging population will be the future emphasis of these changes. Many studies dealt with the issue of youth bulge (Assaad, 2007 and UN, 2011). They show that youth bulge is a demographic gift, represents a unique window of opportunity to more

investment, rapid social and economic development and poverty reduction. Consistently, the window of opportunity will associate, at the end, with increasing the absolute numbers of ageing persons. Although the differences among Arab countries in their age-structure transition is limited, but these differences should be explained, met, and planned at an early stage.

On the other hand, The Internationally Agreed Development Goals (IADGs) are a set of specific goals, many of them with concrete time bound quantitative targets, that summarize the major commitments of the 34 global summits and conferences held since 1990 on different aspects of global development challenges. These goals were combined in the declaration of Millennium Development Goals (MDGs) adopted by the Millennium Summit 2000.

IADGs agenda addresses not only the conventional challenges of economic growth, social progress and sustainable development but also extends to systemic issues. At the national level, the agenda includes governance, human rights and the importance of national ownership. At the international level, the agenda includes challenges of global economic governance such as international finance, debt, aid, trade, technology and migration. The IADGs incorporate, but are broader than, the better publicized Millennium Development Goals (MDGs)

The above introduction explains the importance of current study in examining the relevant between age-structure transition in Arab countries to the current and future IADGs, from one side, and in developing a conceptual framework for understanding the effects of age-structural transitions in achieving these goals on the other side.

## **2. Age-Structure Transitions in Arab region:**

Age-structural transition is the outcome of demographic transition. Demographic transition passes through several stages. First, and as a result of improvement of maternal and child health, the reduction in death rates begins, followed by a reduction in birth rates as a result of greater access to contraception, economic and social development, and improvement in women education and status. As a result of this process, the age structure of the population will shift from high proportion of children (0-14) to a high proportion of the population of working age (15-64), and especially of youth (15-24). With the continued reduction in fertility and mortality rates, the impact of population momentum decreases and the youth cohort moves through to reach the ageing stage (65+), making the population of older persons an increasingly important share of the population. All Arab countries are undergoing these age-structural changes (UN, 2005, and 2007).

The following section will review and analyze the changes that took place in the structure of the population of Arab countries during the period from 1950 to the year 2050. Data of World Population Prospects utilized to perform this review and analysis. The aim of the analysis is to divide the Arab countries into specific groups according to their current and future stages of demographic transition. This classification will help in formulating specific policies for each group of countries to enhance the development process and gain more benefits from the opportunities provided by population dividend. (The demographic dividend is a window of opportunity in the development of a society or nation that opens up as fertility rates decline and consequently the proportion of child population decline and the proportion of working age population increase. The demographic dividend is more appearance when faster rates of economic growth and human development are possible and when combined with effective policies and markets). In addition, the classification will enable in formulating specific policies and programs relevant to the challenges faces each group of countries at each stage of the demographic transition.

## **2.1. Trends in population size and growth:**

The population of the Arab region almost quadrupled during the period 1950-2010. According to medium variant scenario of world population prospects, 2012 revision (UN, 2012), the size of Arab population climbed from about 73 million in 1950 (3% of world population) to reach about 348 million in 2010 (5% of world population). The size of Arab population projected to reach about 604 million by 2050, represent about 6.3% of the world population.

The variation in population size among Arab countries is substantial. Most of the Region's population is concentrated in a few countries. Algeria, Egypt, Morocco, and Sudan constitute about half of the Arab region population (52%). Egypt's population represents about 22.4% of the Arab population in 2010 (78 million), and is projected

to reach about 122 million in 2050, representing 20.2% of the Arab population and to be ranked as twelfth most-populated country in the world by mid-century. On the other direction, Bahrain, Comoros, Djibouti and Qatar still and will remain the smallest among Arab countries in terms of population size. The relative size of the population of each of these countries does not exceed 0.5% of the total Arab population. The population of eight countries of the region, Comoros, Iraq, Kuwait, Mauritania, Palestine, Oman, Somalia, and Sudan, is expected to be more than doubled during the next 40 years (period from 2010 to 2050), (Table 1).

Although the demographic transition from high to low population growth rate has begun in all Arab countries, with varying degrees, the population momentum from earlier periods of rapid population growth will continue as the main force of population increase in the future (Mirkin, 2010; UN, 2009). During the past few decades, Arab region experienced a decline in population growth rate, from 3.1% annually during the period 1975-1980, to about 2.2% annually during the period 2000-2005.

**Table I: Trend in population size of Arab countries, 1950-2050**

(In Thousands)

Country	Total population by years											
	1950		1975		2000		2010		2025		2050	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Algeria	8,872	12.2	16,834	11.8	31,719	11.4	37,063	10.6	46,480	10.2	54,522	9.0
Bahrain	116	0.2	267	0.2	668	0.2	1,252	0.4	1,571	0.3	1,835	0.3
Comoros	156	0.2	261	0.2	528	0.2	683	0.2	954	0.2	1,508	0.2
Djibouti	62	0.1	224	0.2	723	0.3	834	0.2	1,023	0.2	1,244	0.2
Egypt	21,514	29.5	40,359	28.3	66,137	23.8	78,076	22.4	96,989	21.3	121,798	20.2
Iraq	5,719	7.8	11,685	8.2	23,801	8.6	30,962	8.9	45,892	10.1	71,336	11.8
Jordan	449	0.6	1,985	1.4	4,767	1.7	6,455	1.9	8,742	1.9	11,510	1.9
Kuwait	152	0.2	1,050	0.7	1,906	0.7	2,992	0.9	4,432	1.0	6,342	1.1
Lebanon	1,335	1.8	2,576	1.8	3,235	1.2	4,341	1.2	5,043	1.1	5,316	0.9
Libya	1,113	1.5	2,532	1.8	5,176	1.9	6,041	1.7	7,145	1.6	8,350	1.4
Mauritania	660	0.9	1,329	0.9	2,708	1.0	3,609	1.0	5,097	1.1	7,921	1.3

Morocco	8,986	12.3	17,685	12.4	28,710	10.3	31,642	9.1	37,723	8.3	42,884	7.1
Palestine	932	1.3	1,322	0.9	3,205	1.2	4,013	1.2	5,769	1.3	8,906	1.5
Oman	456	0.6	882	0.6	2,193	0.8	2,803	0.8	4,770	1.0	5,065	0.8
Qatar	25	0.0	164	0.1	594	0.2	1,750	0.5	2,662	0.6	2,985	0.5
Saudi Arabia	3,121	4.3	7,378	5.2	20,145	7.3	27,258	7.8	34,207	7.5	40,338	6.7
Somalia	2,264	3.1	3,881	2.7	7,385	2.7	9,636	2.8	14,743	3.2	27,076	4.5
Sudan	5,734	7.9	12,076	8.5	27,730	10.0	35,652	10.2	49,676	10.9	77,138	12.8
Syria	3,413	4.7	7,564	5.3	16,371	5.9	21,533	6.2	27,865	6.1	36,706	6.1
Tunisia	3,099	4.2	5,561	3.9	9,553	3.4	10,632	3.1	12,231	2.7	13,192	2.2
UAE	70	0.1	533	0.4	3,026	1.1	8,442	2.4	11,479	2.5	15,479	2.6
Yemen	4,661	6.4	6,677	4.7	17,523	6.3	22,763	6.5	31,279	6.9	42,497	7.0
<b>Arab Region</b>	<b>72,911</b>	<b>100</b>	<b>142,823</b>	<b>100</b>	<b>277,804</b>	<b>100</b>	<b>348,430</b>	<b>100</b>	<b>455,772</b>	<b>100</b>	<b>603,948</b>	<b>100</b>
		<b>2.9</b>		<b>3.5</b>		<b>4.5</b>		<b>5.0</b>		<b>5.0</b>		<b>6.3</b>
<b>World</b>	<b>2,525,779</b>		<b>4,071,020</b>		<b>6,127,700</b>		<b>6,916,183</b>		<b>8,083,413.0</b>		<b>9,550,945</b>	

Source: United Nation, Department of Economic and Social Affairs, Population Division. World Population Prospects: the 2012 Revision.

Intensive labor migration to Gulf Cooperation Countries (GCCs), Iraq and Libya in addition to raising the population growth rate in Algeria, Comoros, Djibouti, Mauritania, Palestine, Somalia, Sudan, and Syria, were the main reasons behind the raising of population growth rate in 1975-1980, comparing with average population growth rate of 1950-1955. Arab population growth rate of 2.2% (as average annual growth rate for the period 2000-2005) is expected to continue its decline during the coming years to reach about 0.8% annually by year 2050 (Table. 2).

## 2.2. Trends in age structure:

The main consequence of demographic transition on population age structure can be dividing into three phases. The first phase is “youth bulge” because of shifting from high to low fertility level, especially when coupled with a decline in infant mortality rate (IMR), increase in life expectancy, and population momentum. The second phase is “growth of the population of active working age, 25-64” which will outpace the growth of the rest of the population. The third phase is “Population



Ageing” where the proportion of older persons increases and that of younger persons declines.

The population of the Arab region is still young (in the first consequence of demographic transition, youth bulge), with a median age of 23.2 years, for the year 2010. The youngest populations in the region are observed among Comoros, Iraq, Mauritania, Palestine, Somalia, Sudan, and Yemen, where the median age of the population in each country is less than 20 years (Table. 3), and the percent of population in child and youth stages is greater than 60% (Table. 4).

**Table 2: Trend in population growth rate of Arab countries, 1950-2050**

Country	Population Growth Rates (Years)				
	1950-1955	1975-1980	2000-2005	2025-2030	2050-2055
Algeria	2.2	2.9	1.4	0.9	0.3
Bahrain	2.9	6.0	5.5	0.9	0.2
Comoros	2.1	3.7	2.6	2.1	1.5
Djibouti	2.3	9.4	1.4	1.0	0.4
Egypt	2.5	2.1	1.6	1.1	0.6
Iraq	2.6	3.1	2.8	2.1	1.3
Jordan	7.3	2.8	1.9	1.4	0.6
Kuwait	4.9	5.3	3.7	1.7	1.0
Lebanon	2.8	0.2	4.2	0.5	-0.1
Libya	2.0	3.9	1.6	0.9	0.2
Mauritania	2.5	2.9	3.0	2.0	1.4

Morocco	3.1	2.3	1.0	0.8	0.2
Palestine	1.2	2.7	2.1	2.1	1.3
Oman	1.7	5.4	2.8	0.6	0.0
Qatar	7.2	6.2	6.5	0.7	-0.1
Saudi Arabia	2.6	5.8	4.1	0.8	0.3
Somalia	1.9	9.0	2.7	2.7	2.0
Sudan	2.6	3.5	2.6	2.1	1.3
Syria	2.8	3.4	2.1	1.4	0.7
Tunisia	2.4	2.5	1.0	0.5	0.0
UAE	2.3	12.9	6.3	1.4	0.5
Yemen	0.5	3.4	2.8	1.7	0.6
<b>Arab Region</b>	<b>2.4</b>	<b>3.1</b>	<b>2.2</b>	<b>1.4</b>	<b>0.8</b>
<b>World</b>	<b>1.8</b>	<b>1.8</b>	<b>1.2</b>	<b>0.8</b>	<b>0.5</b>

Source: United Nation, Department of Economic and Social Affairs, Population Division. World Population Prospects: the 2012 Revision. (<http://esa.un.org/wpp/>)

**Table 3: Trend in median age of population of Arab Countries,  
Both sexes, 1950-2050**

Country	Median age of population (years)					
	1950	1975	2000	2010	2025	2050
Algeria	19.4	16.6	21.6	26.0	30.5	36.3
Bahrain	18.9	19.3	26.5	30.0	34.3	45.1
Comoros	21.2	17.4	18.6	19.1	20.6	24.6
Djibouti	16.5	16.6	19.1	22.0	25.6	32.4
Egypt	20.4	19.3	22.0	24.4	28	34.6
Iraq	22.0	17.0	18.3	19.1	22.2	27.8
Jordan	17.2	16.4	19.5	22.5	25.7	33.8
Kuwait	21.5	17.6	28.6	28.4	31.1	35.6
Lebanon	23.2	19.5	26.3	28.5	36.7	48.8
Libya	21.0	17.0	22.2	25.6	30.7	40.6

Mauritania	17.9	17.0	18.4	19.5	21.4	25.7
Morocco	19.5	16.7	22.3	26.2	30.6	36.7
Palestine	17.3	14.9	16.2	18.2	22.4	29
Oman	18.8	17.1	20.8	25.1	34.2	50.8
Qatar	18.9	23.2	30.3	31.6	38.5	55.8
Saudi Arabia	19.0	18.0	21.1	26.1	32.2	41.7
Somalia	19.5	18.2	16.4	16.1	17.4	21.3
Sudan	18.1	16.6	17.9	18.7	21.3	26.2
Syria	20.3	15.9	18.8	21.9	26.4	35.3
Tunisia	19.3	17.6	24.6	29.0	35.6	43.4
UAE	18.9	25.2	28.2	28.0	37.7	46.9
Yemen	18.9	16.3	15.6	18.2	22.5	30.8
<b>Arab Region</b>	<b>19.8</b>	<b>17.6</b>	<b>20.6</b>	<b>23.2</b>	<b>27.2</b>	<b>33.4</b>
<b>World</b>	<b>23.5</b>	<b>21.9</b>	<b>26.3</b>	<b>28.5</b>	<b>32.2</b>	<b>36.1</b>

Source: United Nation, Department of Economic and Social Affairs, Population Division. World Population Prospects: the 2012 Revision. (<http://esa.un.org/wpp/>).

**Table 4: Population of Arab countries, by broad age Groups, 2010-2050**

Country	Age groups and Years							
	Children (0-14)		Working age groups (15-64)				Ageing (65+)	
			Youth (15-24)		Adult (25-64)			
	2010	2050	2010	2050	2010	2050	2010	2050
	%	%	%	%	%	%	%	%
	Algeria	27.1	20.2	20.8	12.7	47.3	52.9	6.5
Bahrain	19.9	13.4	14.6	9.5	63.5	58.9	4.7	18.2
Comoros	42.2	32.3	18.6	18.5	36.3	43.8	3.4	5.4
Djibouti	34.1	23.7	22.4	15.1	39.8	50.5	5.1	10.4
Egypt	31.5	21.8	19.7	14.5	43.3	51.4	7.1	12.3

Iraq	41.2	28.2	19.8	17.3	35.6	47.3	3.5	7.2
Jordan	35.1	22.3	19.8	14.6	41.7	50.4	4.7	12.7
Kuwait	25.2	19.4	16.2	12.4	56.4	57.1	3.3	11.1
Lebanon	23.7	13.4	20.0	10.1	47.8	50.8	12.5	25.7
Libya	29.4	16.9	19.3	11.5	46.7	53.0	6.8	18.7
Mauritania	40.6	30.9	19.6	18.0	36.7	45.1	3.7	6.1
Morocco	28.1	20.1	19.8	13.2	47.1	51.5	7.6	15.2
Palestine	42.1	26.6	21.4	16.9	33.8	48.7	3.6	7.8
Oman	27.4	14.7	22.4	10.1	47.7	54.5	3.8	20.9
Qatar	13.7	9.6	14.4	6.5	70.8	54.8	2.4	29.1
Saudi Arabia	30.7	15.9	17.2	9.6	49.1	56.1	5.4	18.4
Somalia	47.7	37.0	18.9	20.0	30.6	39.6	2.9	3.4
Sudan	42.1	30.0	19.6	18.0	35.2	46.1	3.7	6.0
Syria	35.7	20.5	20.7	14.6	39.8	52.0	5.7	12.9
Tunisia	23.5	16.2	18.8	10.8	50.8	50.1	11.0	22.9
UAE	13.9	11.2	23.0	7.5	62.8	56.7	1.3	24.6
Yemen	42.0	23.7	23.1	16.7	32.2	53.3	3.4	6.3
<b>Arab Region</b>	<b>33.3</b>	<b>23.2</b>	<b>19.9</b>	<b>14.7</b>	<b>42.7</b>	<b>50.4</b>	<b>5.7</b>	<b>11.7</b>
<b>World</b>	<b>26.6</b>	<b>21.3</b>	<b>17.7</b>	<b>13.7</b>	<b>48.0</b>	<b>49.4</b>	<b>10.3</b>	<b>15.6</b>

Source: United Nation, Department of Economic and Social Affairs, Population Division. World Population Prospects: the 2012 Revision. (<http://esa.un.org/wpp/>)

The oldest populations of the region noticed in Bahrain, Qatar, and UAE with a median age for each is greater than 28 years (Table. 3), and a percent of children and youth (ages 0-25) less than 40% (Table. 4). These populations are approaching of ageing stage, but due to external effects of their age structure represented by their receipt of intensive labor migration streams. Lebanon and Tunisia represent the nearest countries to approach the ageing stage due to major changes in their age structure, with a median age of 29 years and a percent of children and youth (less than 25 years) about 43% in 2010.

The young age structure of Arab countries creates many challenges to governments in terms of providing education and employment to large cohorts of children and youth. High unemployment among young people is more frequent in the majority of Arab countries and tends to be persisting in the future, because of unbalance between socioeconomic development and population growth.

The movement from high fertility and mortality rates, adaptation of smaller families, and longer life are the main reasons of the shifting from younger to older population age-structure. Ageing (population aged 64 years and over) will be a future phenomenon in the Arab Region. The current average percent of older population in Arab region is 5.7% in 2010 and it is expected to increase gradually to reach 11.7% by the year 2050 (Table 4). Lebanon, Oman, Qatar, Tunisia, and UAE are the nearest Arab countries from approaching the ageing population in the near future, with a percent of aging population greater than 20% by the year 2050 (Table 4).

Lebanon and Tunisia are the nearest countries to enter ageing stage, due to internal momentum factors; the current percent of older persons in these two countries are greater than 10% (in 2010). More rapid increase in the proportion of older population is expect in many of Arab countries in the future, where the percent of increase in older persons will be higher than the percent of reduction in children. This phenomenon will observe in countries like Algeria, Bahrain, Kuwait, Lebanon, Libya, Oman, Qatar, UAE, and Tunisia.

Population of working ages (25-64 years) represents the majority of Arab population, with average percent 42.7 and is not expect to achieve any decline until 2050. This phenomenon is approximately valid for all Arab countries except some of Gulf Cooperation Countries (GCC), due future limitation to the streams of labor migrants. High percent of population of working age group (25-64) to total population may represents a window of opportunity for more economic development, if productive employment can be granted to the majority of persons in this stage.

The previous analysis to the age-structure transition in Arab region indicates to a decline in child dependency ratio during the period 1980-2010, from 85.2% to 58.1% respectively, and is expected to reach 44.2% by 2025 (UN, 2009) . On the other hand, the average old dependency ratio will tend to increase from 0.10% (10 older persons per each 100 persons in the working ages) in 2010, to about 0.28% in 2050 (Mirkin, 2010).

### **2.3. Trends in birth rates in Arab region:**

Crude Birth Rate (CBR) can be considering as indicator of fertility level, especially in comparative studies. CBR in Arab region achieved a notable decline during the past six decades (1950-2010). This reduction may occur as result of increasing family planning programs, school enrolment of females, increasing participation of women in the labor markets, and consequently, new trend toward delaying age at first marriage. However, CBR of Arab region remains higher than the world average. Data of World Population Prospects 2012 revision indicate that CBR of Arab region declined from 50 live births per 1000 population as average for the period 1950-1955 to reach about 27 live births per 1000 population as average for the period 2000-2005. The gap between average CBR of Arab region and CBR world's average is in decline over time. The past decline in CBR trend is expected to continue in the future and in all countries of the region. Data of current estimates and future projections of fertility indicate to a considerable variation among Arab countries in CBR level. According to current estimates (2000-2005), only five countries have already achieved CBR below 20 (Algeria, Lebanon, Qatar, Tunisia, and UAE). This number of countries will increase to fifteen by 2025, including Bahrain, Egypt, Jordan, Kuwait, Libya, Morocco, Oman, Saudi Arabia, and Syria. By year 2050, all Arab countries will achieve CBR less than 20 live births per 1000 population except Mauritania Somalia and Sudan (Table. 5).

## 2.4. Trends in death rates in Arab Region:

The second half of twentieth century witnessed a reduction of mortality rates, especially infant mortality and expansion of longevity at both global and regional levels (UN, 2012c). The discovery of vaccines and antibiotics especially penicillin, steady improvement in hygiene factors, improvement of health services and therapeutic care may associate positively in this reduction (Andre, 2008). The fact worth mentioning is that both, Infant Mortality Rate (IMR) and Child Mortality Rate (CMR) tend to decline almost steadily since they were first down, in the 1930's. All of these factors were lead to significant decline in infant mortality rate (IMR) in many countries during the period 1950-2010 (Goutas, 2011).

In 1950-1955, the lowest Crude Death Rate (CDR) in the Arab region was observed in Lebanon (12.9 per 1,000 population) while the highest CDR (41 per 1,000 population) was recorded in Yemen.

**Table 5: Trend in Crude Birth Rate (CBR) of Arab countries, 1950-2050**

(Per 1,000 populations)

Country	Crude Birth Rate by years				
	1950-1955	1975-1980	2000-2005	2025-2030	2050-2055
Algeria	53	45	19	16	14
Bahrain	45	33	20	10	9
Comoros	45	45	39	30	23
Djibouti	41	42	29	20	15
Egypt	51	38	24	18	14
Iraq	53	41	35	26	19
Jordan	47	43	30	19	14

Kuwait	44	41	21	16	13
Lebanon	40	30	16	11	9
Libya	50	43	23	14	11
Mauritania	49	44	37	29	23
Morocco	51	39	21	16	13
Palestine	46	47	36	25	18
Oman	49	50	22	12	10
Qatar	48	36	18	7	7
Saudi Arabia	48	44	25	11	10
Somalia	49	46	47	38	28
Sudan	47	46	39	28	21
Syria	51	45	29	19	13
Tunisia	51	37	17	12	11
UAE	50	29	16	8	7
Yemen	49	55	38	24	15
<b>Arab Region</b>	<b>50</b>	<b>42</b>	<b>27</b>	<b>20</b>	<b>16</b>
<b>World</b>	<b>37</b>	<b>28</b>	<b>21</b>	<b>17</b>	<b>14</b>

Source: United Nation, Department of Economic and Social Affairs, Population Division. World Population Prospects: the 2012 Revision. (<http://esa.un.org/wpp/>)

The recent estimates of CDR (2000-2005) indicate that the highest CDR recorded in Arab region is 15.0 per 1,000 population in Somalia; this is approximately one-third of the highest CDR recorded in any country of the region, fifty years ago (1950-1955). At the regional level, average CDR achieved a significant reduction from around 24.7 per 1,000 populations in 1950-1955 to reach about 6.4 per 1,000 populations in 2000-2005, the percentage of reduction is about 74% during the whole period.

Arab countries have significant variations in CDR. Countries of Gulf Cooperation Council (GCC), Achieved the lowest CDR in the region (less than 4 per 1,000



population in 2005). The rest of Arab countries recorded a moderate level of IMR (Less than 10 per 1,000 population in 2005), except Comoros, Djibouti, and Somalia where they recorded a level of CDR greater than 10 per 1,000 population. The projected figures of 2050 indicate that all the countries of Arab region will achieve CDR less than or equal to 10 per 1,000 population (Table.6).

## 2.5. Trends in migration in Arab region:

International migration has a special concern in the Arab region. Several patterns of international migration, including permanent migration, labor migration and brain drain, and irregular and transit migration exist. The Arab region has experienced a strong rise in international migration in recent years. Most of Arab countries have become sending and receiving countries. All GCC countries and some of Mashreq countries such as Jordan and Syria experienced positive annual net migration ranging from 1.2 per 1,000 in Saudi Arabia to 93.9 per 1,000 in Qatar. In contrast, the Arab Maghreb countries and Lebanon, Egypt, Iraq, Palestine and Yemen experienced negative net migration. Countries of the Maghreb, which include Morocco, Tunisia, Libya, and Algeria, are mainly countries of origin for migrants to Europe and recently act as transit countries for migrants from sub-Saharan Africa mainly to Europe (ILO, 2009).

**Table 6: Trend in Infant Mortality Rate (IMR) of Arab countries, 1950-2050**

(Per 1,000 live births)

Country	Infant mortality rate				
	1950-1955	1975-1980	2000-2005	2025-2030	2050-2055
Algeria	23.7	13.4	5.3	6.5	10.1
Bahrain	21.1	4.8	2.6	3.2	8.2
Comoros	23.6	15.4	10.2	7.8	7.7
Djibouti	21.0	12.1	10.2	7.5	8.6
Egypt	25.3	12.9	6.9	6.4	7.6
Iraq	27.7	9.4	5.1	4.7	6.0
Jordan	20.4	7.4	4.0	4.2	6.7

Kuwait	13.6	4.5	3.1	3.1	6.0
Lebanon	12.9	7.3	5.2	5.5	9.4
Libya	30.3	8.5	4.3	4.7	8.0
Mauritania	23.8	13.9	9.6	8.0	8.4
Morocco	20.2	12.0	6.1	6.8	9.7
Palestine	20.0	8.9	3.8	3.5	4.6
Oman	28.3	11.6	3.3	2.8	6.8
Qatar	13.4	3.6	1.9	2.1	10.0
Saudi Arabia	23.3	9.7	3.8	3.8	7.9
Somalia	29.8	20.7	15.0	9.3	6.6
Sudan	20.3	13.4	10.0	7.5	7.7
Syria	19.2	7.7	3.5	4.1	5.9
Tunisia	24.5	9.7	5.3	6.4	10.2
UAE	22.0	4.7	1.7	1.7	7.1
Yemen	41.2	19.1	8.7	6.6	8.3
<b>Arab Region</b>	<b>24.7</b>	<b>12.1</b>	<b>6.4</b>	<b>5.8</b>	<b>7.7</b>
<b>World</b>	<b>19.1</b>	<b>10.6</b>	<b>8.4</b>	<b>8.3</b>	<b>9.9</b>

Source: United Nation, Department of Economic and Social Affairs, Population Division. World Population Prospects: the 2012 Revision. (<http://esa.un.org/wpp/>).

The current estimate of the stock of international migration in the region is 25.8 million migrants, distributed among countries of the region as 4% in Arab Maghreb countries, 4% in other Arab African countries, 32% in Arab Mashreq countries, and the majority (60 %) living in the countries of GCC (Table.7). The countries of the GCC represent one of the most attracting areas of the world to international migrants. Immigrants represents over one-third of the population of GCC (The Economist, 2009 and UN, 2005b). The proportion of women among the immigrants to the region is below the global average, currently standing at 36.4% of the migrants (UN, 2011); most of them come from non-Arab Asian countries (Hassan, 2011 and IOM, 2004).

The main demographic concern associated with increasing labor migrants is the overall imbalance in the population age-structure of these countries (Shakoori, 2005).

## 2.6. Classification of Arab Countries according the age-structure transition:

In view of the previous analysis of the trends and levels of age-structure transition in the Arab region, the following classification of Arab countries can be outline. This classification will be the base of accessing the relevance of age-structure transition in achieving the internationally agreed developmental goals in Arab countries from one side, and in formulating appropriate policies for each group of the countries, from the other side. The groups of classification are:

- **Countries are currently and will continue in the demographic dividend stage:** this group includes all countries, where the majority of its population is currently in age stage less than 25 years age, and is projected to continue in this stage in the future (until 2050). These groups includes seven Arab countries, mostly Least Developed Countries (LDCs) in the region (Comoros, Djibouti, Mauritania, Somalia, Sudan, and Yemen), in addition to countries of civil conflicts and political instability (Iraq, and Palestine).

**Table 7: International Migrant Stock in Arab countries (2010), by Sex**

(In Thousands)

Country	Migrants stock by sex			% of female migrants to total
	Male	Female	Total	
Algeria	133	109	242	45.0
Bahrain	212	103	315	32.7
Comoros	6	7	13	53.8
Djibouti	62	52	114	45.6
Egypt	131	114	245	46.5
Iraq	57	26	83	31.3

Jordan	1511	1462	2973	49.2
Kuwait	1468	630	2098	30.0
Lebanon	385	373	758	49.2
Libya	440	242	682	35.5
Mauritania	57	42	99	42.4
Morocco	25	24	49	49.0
Palestine	977	946	1923	49.2
Oman	655	171	826	20.7
Qatar	968	337	1305	25.8
Saudi Arabia	5093	2196	7289	30.1
Somalia	13	10	23	43.5
Sudan	390	363	753	48.2
Syria	1126	1080	2206	49.0
Tunisia	17	17	34	50.0
UAE	2389	904	3293	27.5
Yemen	320	198	518	38.2
<b>Arab Region</b>	<b>16435</b>	<b>9406</b>	<b>25841</b>	<b>36.4</b>
<b>World</b>	<b>109145</b>	<b>104799.0</b>	<b>213944</b>	<b>49.0</b>

Source: United Nations, Department of Economic and Social Affairs, Population Division. Trends in International Migrant Stock: Migrants by Age and Sex (United Nations database, POP/DB/MIG/Stock/Rev.2011).

- **Countries are currently in demographic dividend stage and will shift to adult-working-age stage:** this group includes all countries where the majority of its population is currently in the demographic dividend stage and projected to shift to adult working age stage (population aged 25-64 years) by year 2050. This group constitutes of Arab middle-income countries and some of Arab petroleum rich countries. This group includes nine countries (Algeria, Bahrain, Egypt, Jordan, Kuwait, Libya, Morocco, Saudi Arabia, and Syria).

- **Countries are currently in the adult-working-age group and will shift to ageing stage:** this group includes all countries, where the majority of its population is currently in the adult-working-age stage and projected to experience a rate of older-age population greater than 20% (which is the current percent of ageing in most developed countries of the world), by year 2050. This group consists of five Arab countries (Lebanon, Oman, Qatar, Tunisia, and UAE).

### **3. Overview of the Internationally Agreed Development Goals (IADGs):**

The IADGs are a set of specific goals, many with concrete time bound quantitative targets, of the United Nations Development Agenda. They summarize the major commitments of the 34 global summits and conferences held since 1990 on different aspects of global development challenges. These commitments combined in the Millennium Declaration adopted by the Millennium Summit 2000. This agenda

addresses not only the conventional challenges of economic growth, social progress and sustainable development but also extends to systemic issues. At the national level, the agenda includes governance, human rights and the importance of national ownership. At the international level, the agenda includes challenges of global economic governance such as international finance, debt, aid, trade, technology and migration (ECOSOC, 2008). This section will give a brief description of the major commitments delivered from the most important global summits and conferences.

### **3.1 International Conference on Population and Development (ICPD):**

The 1994 International Conference on Population and Development (ICPD) in Cairo was a milestone in the history of population and development, as well as in the history of women's rights. At this conference, the world agreed that population is not just about counting people, but about making sure that, every person counts (UN, 1995). The substantive content of ICPD Program of Action (PoA) is that; equality and empowerment of women is a global priority. It is not only a universal human right, but it is also essential step towards eradicating poverty and stabilizing population growth. A woman's ability to access reproductive health and rights is cornerstone of her empowerment and key to sustainable development. In addition, ICPD strengthen on empowering women and meeting people's needs for education and health including reproductive health, are necessary for both individual advancement and balanced development.

ICPD-PoA dealt with the issue of changing age structure as different age categories separately. For instance, it looks to children and young people category as the very large proportion of the populations of developing countries. ICPD-PoA aims are to promote the health, well-being and potential of all children, adolescents and youth; to meet their special needs, including social, family and community support,

as well as access to education, employment, health counseling and high-quality reproductive health services; and to encourage them to continue their education.

On the other hand, ICPD-PoA call Governments to develop social security systems that ensure greater equity and solidarity between and within generations and that provide support to elderly people through encouragement of multigenerational families. Governments should also seek to enhance the self-reliance of elderly people so that they can lead healthy and productive lives and can benefit society by making full use of the skills and abilities they have acquired in their lives. Governments should strengthen formal and informal support systems and safety nets for elderly people and eliminate all forms of violence and discrimination against them.

The conference adopted a 20-year Program of Action, (PoA) focused on individuals' needs and rights, rather than on achieving demographic targets. The ICPD Program of Action set out to:

- Provide universal access to family planning and sexual and reproductive health services and reproductive rights;
- Deliver gender equality, empowerment of women and equal access to education for girls;
- Address the individual, social and economic impact of urbanization and migration;
- Support sustainable development and address environmental issues associated with population changes.

### **3.2 The Millennium Development Goals (MDGs):**

September 2000 saw the meeting of the leaders of 189 countries at the United Nations, where they approved the Millennium Declaration, and committed to work together to build a safer, more prosperous and equitable world. The Declaration set a

framework of eight measurable goals to achieve by 2015, known as the Millennium Development Goals (MDGs) (UN, 2007b and 2013b). These goals and targets are represents in the following table:

### Millennium Development Goals (MDGs)

Goals	Targets
Goal 1: Eradicate extreme poverty and hunger.	<ul style="list-style-type: none"> <li>• Target 1.A: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day.</li> <li>• Target 1.B: Achieve full and productive employment and decent work for all, including women and young people.</li> <li>• Target 1.C: Halve, between 1990 and 2015, the proportion of people who suffer from hunger.</li> </ul>
Goal 2: Achieve universal primary education.	<ul style="list-style-type: none"> <li>• Target 2.A: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling.</li> </ul>
Goal 3: Promote gender equality and empower women.	<ul style="list-style-type: none"> <li>• Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015.</li> </ul>
Goal 4: Reduce child mortality.	<ul style="list-style-type: none"> <li>• Target 4.A: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate.</li> </ul>
Goal 5: Improve maternal health.	<ul style="list-style-type: none"> <li>• Target 5.A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio.</li> <li>• Target 5.B: Achieve, by 2015, universal access to reproductive health.</li> </ul>
Goal 6: Combat HIV/AIDS, malaria and other diseases.	<ul style="list-style-type: none"> <li>• Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS.</li> <li>• Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it.</li> <li>• Target 6.C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases.</li> </ul>
Goal 7: Ensure environmental	<ul style="list-style-type: none"> <li>• Target 7.A: Integrate the principles of sustainable</li> </ul>



sustainability	<p>development into country policies and programmes and reverse the loss of environmental resources.</p> <ul style="list-style-type: none"> <li>• Target 7.B: Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss.</li> <li>• Target 7.C: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation.</li> <li>• Target 7.D: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.</li> </ul>
Goal 8: Develop a global partnership for development.	<ul style="list-style-type: none"> <li>• Target 8.A: Develop further an open, rule-based, predictable, non-discriminatory trading and financial system.</li> <li>• Includes a commitment to good governance, development and poverty reduction - both nationally and internationally.</li> <li>• Target 8.B: Address the special needs of the least developed countries.</li> <li>• Includes: tariff and quota free access for the least developed countries' exports; enhanced programme of debt relief for heavily indebted poor countries (HIPC) and cancellation of official bilateral debt; and more generous ODA for countries committed to poverty reduction.</li> <li>• Target 8.C: Address the special needs of landlocked developing countries and small-island developing States (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General Assembly).</li> <li>• Target 8.D: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term.</li> </ul>

Target 8.E: In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries
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Target 8.F: In cooperation with the private sector, make available the benefits of new technologies, especially information and communications
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### **3.3 Linkage between ICPD Program of Action and MDGs:**

The above-described ICPD-PoA and MDGs represents a guide and focus development priorities for governments, donors and international development agencies worldwide. Although the population aspects of ICPD PoA may not have a direct convergence with the MDGs, it cannot be denied that the implementation of ICPD goals impact on the achievements of the MDGs. In his address to the Fifth Asian and Pacific Population Conference in December 2002, Mr. Kofi Annan, Secretary-General of the United Nations remarked: “The Millennium Development Goals, particularly the eradication of extreme poverty and hunger, cannot be achieved if questions of population and reproductive health are not squarely addressed” (UN, 2004). Changes in demographic dimensions, such as population size, characteristics and age structure are the necessary determinants linked to the improvement in MDGs. Many of the ICPD goals incorporated into MDGs. ICPD Program of Action and MDGs linked, both in terms of overall poverty dynamics and in terms of the individual goals (UNFPA, 2004).

One of the limitations of the MDGs is that universal access to reproductive health services not spelt out in the MDGs, but it is fundamental to reducing poverty, improving maternal health, reducing child and maternal mortality, hindering stopping gender discrimination and environmental degradation. Effective reproductive health services help in improving women’s empowerment and elimination of gender discrimination, which in return reduces the significant risks associated with too-early marriage, childbirth, pregnancy, and childbearing. Successful reproductive health

services reduce the rapid population growth, on the other hand, can offset economic gains, strain food and water supplies and exacerbate environmental degradation. More efforts is still required to ensure synergy between the MDGs and the goals of ICPD, more specifically, to ensure that reproductive health and other ICPD goals remain high on the list of development priorities.

The ICPD and MDGs meet in their affirmation to women's human rights, including reproductive rights, full participation, and empowerment. For instance, eradication of poverty, as one of the main MDGs cannot be achieve without achieving the ICPD program of Action (UNESCAP, 2004). Universal access to education and reproductive health are essential steps in helping individuals to break out the cycles of poverty. Reproductive health and rights are central to women's empowerment; empowered women are the key to full participation in economic activities, healthier and more productive families, communities and countries.

### **3.4 The World Program of Action for Youth (WPAY):**

The World Program of Action for Youth (WPAY) provides a policy framework and practical guidelines for national actions and international support to improve the situation of young people. It contains proposals for action to the year 2000 and beyond, aiming at achieving the objectives of the International Youth Year and at fostering conditions and mechanisms to promote improved well-being and livelihood among young people (UN, 2010).

The WPAY focuses in particular on measures to strengthen national capacities in the field of youth and to increase the quality and quantity of opportunities available to young people for full, effective and constructive participation in society (UN, 1997).

The States Members of the United Nations have agreed to work towards achievement of the purposes and principles of the Charter of the United Nations, inter alia, the promotion of higher standards of living, full employment and conditions of economic and social progress and development, including:

1. Attainment of an educational level commensurate with their aspirations;
2. Access to employment opportunities equal to their abilities;
3. Food and nutrition adequate for full participation in the life of society;
4. A physical and social environment that promotes good health, offers protection from disease and addiction and is free from all types of violence;
5. Human rights and fundamental freedoms without distinction as to race, sex, language, religion or any other forms of discrimination;
6. Participation in decision-making processes;
7. Places and facilities for cultural, recreational and sports activities to improve the living standards of young people in both rural and urban areas.

The policy framework and practical guideline of WPAY are relevant to Arab countries, as they are currently passing through the youth bulge stage. This framework and practical guideline focuses on social and economic aspects, which are likely to be of assistance in maximizing the development benefits of this stage as well as setting youth on a path, which will facilitate their transitions to adulthood.

### **3.5 The Madrid International Plan of Action on Ageing (MIPAA):**

The Madrid International Plan of Action on Ageing (MIPAA) adopted at the United Nations Second World Assembly on Ageing held in Madrid in 2002. The plan brought together delegates from more than 160 Governments, intergovernmental institutions and NGOs to respond to the opportunities and challenges of age structure transition and shifting of populations to ageing stage. Ageing stage is a result of ending demographic dividend and window of opportunity stage, as the situation of

many currently developed countries and many of developing countries in the near future. In addition to promotes the development of a society for all ages. It calls on Governments to integrate the rights and needs of older persons into national and international, economic and social development policies. The aim is "to ensure that persons everywhere are able to age with security and dignity and to continue to participate in their societies as citizens with full rights" (UNESCAP, 2012)

*“The MIPAA is a practical tool to assist policymakers to focus on the key priorities associated with population ageing. It addresses a wide range of issues with implications for the lives of older people around the world including social protection, health, urbanization, labor, education, nutrition, training and careers, housing, infrastructure, and images of ageing. The Madrid Plan of Action offers a bold new agenda for handling the issue of ageing in the 21st-century”* (UN, 2008b). It focuses on three priority areas:

1. Older persons and development;
2. Advancing health and well-being into old age;
3. Ensuring enabling and supportive environments.

Specific recommendations designed to be adapted to the circumstances in each country are included. Furthermore, the MIPAA recognizes the many different stages of development and the transitions that are taking place in various regions, as well as the interdependence of all countries in a globalizing world. The Plan represents the first time Governments agreed to link questions of ageing to other frameworks for social and economic development and human rights (UN, 2002).

### **3.6. Linkages between the IADGs.**

The IADGs are a set of specific goals of the United Nations Development Agenda. They summarize the major commitments of the 34 global summits and conferences held since 1990 on different aspects of global development challenges.

These commitments combined in the Millennium Declaration and delivered from ICPD- PoA, MIPAA, WPAY and many other global summits and conferences.

The general observation on the IADGs is that they represent a comprehensive framework to achieve sustainable development and improve the living conditions of all populations at different stages of their lives. For instance, MDGs give more attention to the living conditions of children, women in general, and women of reproductive age in particular, while they give less focus on specific issues related to youth living condition and their preparation for the future, and completely ignored the improvement of living condition of population at the older stage of life.

Of course, children, youth and women of reproductive age represent the majority of populations in developing countries, including Arab countries. Thus, the MDGs are more relevant to the current and future changes in the age-structure transition of Arab countries. The success of Arab countries in achieving these goals and targets in the suitable time enables them to benefit from the demographic window in these countries.

Arab LCDs are suffering the high rate of extreme poverty and hunger, where the poverty rate in these countries approximately doubles the average for the region (36%) (UN, 2009b). The MDG target of eradicating extreme poverty through the achievement of full and productive employment and decent work for all, including women and young people is more relevant to the current and future situation of Arab age-structure transition. Employment is the major problem among population of working age group, especially youth (15-24 years of age), those who are first-time entrants to the labor market, with more prevalence among females. Unemployment rates in Arab countries are the highest in the world, with an average rate of 15% for the region and with higher rates among youth.

Achieving the universal primary education and ensuring that all boys and girls will complete a full course of primary schooling is another target relevant to the current age-structure transition in LDCs where the highest proportion of population are in the childhood stage (less than 15 years of age). While these countries suffer from the lack of financial resource to achieve such goal, thus the development of global partnership for development (as the goal number 8 of MDGs) is highly required and more relevant to the economic situation and political instability in these countries.

Promoting gender equality and empower women is another MDG that is highly relevant to current situation of women in the majority of Arab countries. Family planning and reproductive health programs are directly contribute in reducing fertility but they also have indirect effect on gender equality and women empowerment through increasing the proportion and duration of attending schools, delaying age at first marriage, more participation in labor force and labor market.

Another limitation of the MDGs is that, they not focused on specific issues related to youth living conditions and their preparation to the future such as attaining an educational level commensurate with their aspirations, participation in decision-making, adequate food and nutrition, and adequate physical and social environment that promote good health. These frameworks and practical guidelines represent the main core of the World Program of Action for Youth (WPAY) and are more relevant to the Age-structure transition in all Arab countries passing through the youth bulge stage.

#### **4. IADGs and Age-structure transition in Arab countries:**

Arab countries are currently passing through different stages of the age-structural transition. For instance, the Least Developed Countries (LDCs) in the region and countries of civil wars and political instability, (Comoros, Iraq, Mauritania, Palestine, Somalia, Sudan, and Yemen) are still and will continue -at least for the next three decades- to be in the first population dividend stage. Middle-income countries (Algeria, Djibouti, Egypt, Jordan, Kuwait, Libya, Morocco, Saudi Arabia, and Syria)



are currently in youth bulge stage and will shift during the next three decades to be in older-working-age stage. Most of GCC countries (Bahrain, Oman, Qatar, and UAE) in addition to Lebanon and Tunisia are approaching the ageing stage of population transition but will still be able to gain more benefit of the older-working-age stage for the next three decades.

IADGs constitute a consolidated package of related targets of people-centered development policies to improve the quality of life of all people. It achieved through alleviating poverty, achieving universal primary education, narrowing gender gaps and closing social inequalities, improving child health, promoting reproductive health and rights, combating sexually transmitted diseases, eliminating violence against women, and promoting fair trade policies and debt relief. The Madrid International Plan of Action on Ageing (MIPAA) and the policy framework and practical guidelines of The World Program of Action for Youth (WPAY) formulated specific goals to meet the needs and problems of specific population groups (older persons and youth respectively).

MDGs related to child and youth issues are of great relevance to the needs of the Arab LDCs and countries in conflicts and political instability in the region. The age-structure transition in these countries is still passing through the population dividend stage, where the highest percentage of their populations are in the child and early youth stage. Thus, programs to achieve universal primary education, improve child health, narrow gender gaps and close social inequalities, promote reproductive health and rights, combat sexually transmitted diseases, and eliminate violence against women are most relevant to the population transition in these countries. More specifically, these programs are relevant to children, who should receive attention in this stage, given their importance as a percentage of the population and since a good childhood will constitute a strong basis for future benefits. Due the a wide range of constraints including inefficient service delivery infrastructure and limited financial capacity in many Arab countries, the achievement of MDG goals will not be possible

without the support of the international community. In addition, these countries are in major need of the political assistance of the international community to end the implications of civil wars and political instability with other neighboring countries. The eighth goal of the MDGs concerning global partnerships for development is highly relevant to the development process in Arab LDCs and middle income countries, but the practical implementation during the past 13 years indicates to the weak support provided by international communities in this regard. Official Development Assistance (ODA) is still far behind the target. The most optimistic figures of ODA do not exceed 0.31% of Gross Domestic Product (GDP). For LDCs, the percentage reached is 0.09% instead of the committed 0.15-0.20%.<sup>4</sup> (Abdel-Samad, 2010). The most probably is Arab LDCs will not achieve most of MDGs by year 2015. The case of Arab LCDs is similar to the cases of many of African Sahara, and South-East Asia countries.

The MDGs related to alleviating poverty, narrowing gender gaps, closing social inequalities, and eliminating violence against women are also of great relevance to the age-structure transition and socio-economic conditions of the majority of Arab countries, more specifically LDCs and middle-income countries. Poverty in the Arab LDCs (36%) is nearly twice the average for the region (UN, 2009b). Low economic participation rate of women in Arab region, which estimated at 29% in 2000 and considered as one of the lowest in the world, represents an additional reason of high dependency ratio and poverty (ESCWA, 2007).. The success of Arab countries in achieving progress toward high participation rate of female in labor force can be considered as push factor in the direction of further development and an assistant factor for achieving other IADGs.

The policy framework and practical guidelines of the World Program of Action for Youth (WPAY) is also more relevant to the age-structure transition in all Arab countries passing through the demographic window stage. The framework and practical guidelines of WPAY focuses on core issues of relevance to youth in the

region such as employment, as well as taking a broader human-development and well-being approach that would assist youth in their transition stages and ensuring their ability to live healthy.

The framework and practical guidelines of WPAY should include as a complementary source in formulating the agenda of development in Arab countries. It includes some principles that fit specific issues of youth not focused in MDGs, such as attaining an educational level commensurate with their aspirations, full and equal employment opportunities, participation in decision-making, adequate food and nutrition, and adequate physical and social environment that promotes good health.

Most of petroleum rich Arab countries, in addition to Tunisia and Lebanon are passing through a different stage of the age structure transition. These countries approached or already entered the first step toward the ageing population stage. In fact, MDGs are less relevant to the age structure of these countries since MDGs focused on specific issues mainly related to the living conditions of children, youth and women. In the other hand, these countries have succeeded in achieving great progress toward the implementation of MDG goals related to other population groups rather than older persons, such as maternal early child health. Of course, the effort should continue to keep the continuity of these improvements but more effort should implement to improve the living conditions of the older population. The Madrid International Plan of Action on Ageing (MIPAA) represents the most relevant framework to the age structure transition in these countries, since it addressed a wide range of issues with implications for the lives of older people including social protection, health, urbanization, labour, education, nutrition, training and careers, housing, infrastructure, and images of ageing. These issues should consider as complementally to the shortage of MDGs toward ageing population.

Changes in age structure could significantly affect national economic performance. With entering to ageing stage of age-transition, the tendency of saving

among order persons increases to meet the consumption in older ages. So that, the investment and accelerate economic growth, process would be deepen, which may consider as a “second demographic dividend”.

Policies aiming to benefit from wealth accumulation of elderly, initiatives to improve the prospects of the older persons should consider in Arab countries, where ageing population will dominate in the near future.

Of course, there are many other principles relevant to the age-structure transition in Arab countries and helpful in achieving other IADGs include human rights, good governance, peaceful and political stability, expansion of democracy, and sustainable framework for action.

## **5. Current Situation of Arab Countries in achieving IADGs:**

Linkage the previous classification of Arab countries according to their current and future stage in age-structure transitions with the recorded progresses of the achievement of MDGs in Arab region indicate to following phenomena:

The Least Developed Countries (LDCs) in the region, (Djibouti, Somalia, Sudan and Yemen), together with countries of civil conflicts and political instability (Iraq

and Palestine) are currently in population dividend stage (population less than 15 years of age), and will continue in the same transition stage until 2050, are unlikely to achieve the MDG targets by 2015. Middle-income countries (Algeria, Egypt, Jordan, Morocco, and Syria) and some of Arab petroleum rich countries (Bahrain, Kuwait, Saudi Arabia, and Libya), who are currently in population dividend stage and will shift to adult-working-age stage by year 2050, will achieve some of the MDGs targets by 2015. The rest of countries of the region (rest of GCC countries in addition to Lebanon and Tunisia), who are currently in adult-working-age group and will shift to the ageing stage by year 2050, are more likely to achieve the majority of MDGs targets by year 2015. This classification is in great consistence with the results of (UN, 2010b).

In general, Arab countries have achieved progress in many MDGs, including significant steps in health and education. However, there have been delays and constraints attributable to several factors, including the relatively poor economic performance in the 1990s and early 2000s, inadequate financing of social policies, and increasing political tensions and conflicts (UNDP, 2012).

Although Arab countries are on track to halving the proportion of people living below \$1.25-a-day, the picture is dramatically changing when considering national poverty lines; this shows that the Arab region did not experience significant progress in reducing income poverty, especially in rural areas. Moreover, poverty in the Arab LDCs (36 per cent) is nearly twice the average for the region (UN, 2009b).

Despite the consideration of full employment as one of the principles of the World Program of Action for Youth (WPAY), the labor markets of most of Arab countries characterized by widespread of unemployment, especially among youth. The average unemployment rate of the region is 11.8 % during the period 2005-2008. Youth unemployment is particularly high, reaching 30% in 2006.

With regard to the achievement of universal primary education, the Arab region has seen improvement in net enrolment rates, literacy rate of young adults aged 15-24, and gender equality in primary schooling. Despite these advances, the performance of educational system in most of Arab countries is still away from achieving the high quality of education and irrelevant to the needs of modern labour markets (Mirkin, 2013).

Arab women have moved closer to equality as the gender parity index measured by the girls-to-boys gross enrolment ratio has substantially increased at all levels of education over the period 1991 to 2005. The share of women in wage employment in the non-agricultural sector has remained constant in all sub-regions since 1990. Women's economic and political participation remains very limited in the Arab region. Additionally, women's representation in national parliaments still remains low, despite the fact that some of Arab governments have adopted the quota system to allow more political participation of women.

Under-five mortality rates have achieved remarkable declines in the majority of Arab countries, but LDCs in the region are still off-track. Universal immunization coverage will not be achieved by 2015 without addressing problems of accessibility to vaccines, low health facility coverage, suboptimal delivery strategies and the unavailability of services in conflict areas and for mobile and displaced populations.

There are great variations in reducing maternal mortality rates among countries of the region, ranging from levels below level of 10 per 100,000 live births in some Gulf countries to around 1,600 per 100,000 live births in Somalia

With respect to the environment, all Arab countries share, with varying degrees, the major challenges of improving the environment and integrating environmental resources into development plans. The contribution of Arab region as a whole in the global emission of carbon dioxide is less than 5%, but the impact of climate change

on the region is the major concern of policy makers. Arab region will negatively affected by climate change.

## **6. Post-2015 Development Agenda:**

### **6.1 An overview of Post-2015 Development Agenda**

There is no doubt that enormous progress has made towards the achievement of Millennium Development Goals (MDGs). Global poverty continues to decline, more children than ever are attending primary school, child deaths have dropped

dramatically, access to safe drinking water has been greatly expanded, and targeted investments in fighting malaria, AIDS and tuberculosis have saved millions (UN, 2013).

Of course, efforts to achieve the MDGs will continue after 2015. The UN is working with governments, civil society and other partners to build on the momentum generated by the MDGs and carry on with an ambitious post-2015 development agenda.

At the September 2010 MDG Summit, UN Member States initiated steps towards advancing the development agenda beyond 2015 and are now leading a process of open, inclusive consultations on the post-2015 agenda (UN, 2013). Civil society organizations from all over the world have also begun to engage in the post-2015 process, while academic and other research institutions, including think tanks, are particularly active. A set of 11 global thematic and national consultations over 60 countries, facilitated by the United Nations Development Group and involves partnership with multiple stakeholders for this regard (developing a post-2015 agenda).

In July 2012, Secretary-General Ban Ki-moon announced the 27 members of a High-level Panel to advise on the global development framework beyond 2015, the target date for the Millennium Development Goals (MDGs). The Panel was part of the Secretary-General's post-2015 initiative mandated by the 2010 MDG Summit (UN, 2013).

In the process of formulating the new objectives of beyond 2015, the UN initiated a global survey called "MY World" Survey for a better world (UN, 2012b). The survey consists of 16 options (developmental issues), from them citizens, from all over the world, asked to choose six that they felt would make the most difference to their lives.



Complementing the “MY World” Survey, the United Nations Secretary-General established the UN System Task Team in September 2011 to support UN system-wide preparations for the post-2015 UN development agenda, in consultation with all stakeholders. The Task Team co-chaired by the Department of Economic and Social Affairs and the United Nations Development Programme. They bring together senior experts from over 50 UN entities and international organizations to provide system-wide support to the post-2015 consultation process, including analytical input, expertise and outreach. “The World We Want for All” report was the output of the task Team, where citizens have the opportunity for more engagement in the various consultations taking place on the post-2015 development agenda.

## **6.2 Toward formulating the post 2015 agenda:**

In view of the latest results of “MY World” Survey, “The Future We Want for All” report, prepared by the UN System-wide Task Team (UN, 2012b), The High-Level Panel Report submitted to the Secretary-General on 30 May 2013, and Dhaka Declaration, the following suggested dimensions of post-2015 agenda could be emerged:

The latest results of “MY World” Survey added another dimension to the suggested post-2015 agenda. Over 560,000 citizens from 194 countries have already voted for the issues that would make the most difference to their lives, providing, for the first time ever, real-time and real-world intelligence on what people think about the biggest challenges facing them and their families, many of them in very remote places, completed the survey. The results of “MY World” Survey indicated to the following developmental goals as they have first priority among interviewed persons:

- Good education and better healthcare comes as the first and second most important development priorities respectively. This is valid for the world as

a whole, for both men and women. Older people (greater than 55 years), and people of low Human Development Index (HDIs) countries voted for “Better healthcare” as the first priority, followed by “Honest and responsive government” as the second priority among older persons, and “Good education” as the second priority among low HDI countries (blog.myworld2015.org, 2013, July 13).

- “Honest and responsive government” comes as the common third development priority for the world as a whole and people of both sexes followed by “Better Job opportunities” as the fourth development priority, with a reverse order of among young persons (less than 34 years) and countries of low HDIs.
  
- The fifth and sixth development priorities were “Access to clean water and sanitation” and “Affordable and nutritious food” respectively. The order is valid for people of the world as a whole, of both sexes, and younger people. People of low HDIs countries voted for “Better transport and roads” as the sixth most important development priority.

Although the target of post-2015 conversation is to focus on new developmental goals, which may missed in the MDGs, but the results of “MY World” Survey indicate that many of the MDGs will continue to be a priority after 2015. The regional and country gaps in the achievement of MDGs combined with the results of “MY World” Survey will be the guide to suggest the most important developmental goals beyond 2015.

“The Future We Want for All” report, prepared by the UN System-wide Task Team indicates that the following objectives to have priority in the post 2015 agenda:

- Rests on the core values of human rights, equality and sustainability.
- The report focused on inclusive social development; inclusive economic development; environmental sustainability; and peace and security as the long four key dimensions in formulating the post 2015 developmental goals. This focus is consistent with the principles of the Millennium Development Goals (MDGs) which concentrated on the freedom and fear for present and future generations and building of sustainable development.

The High-Level Panel Report of 30 May 2013, indicated to the following suggested dimensions to be the basics of post-2015 agenda:

- Grantee of ‘Basic Economic Opportunities and Human Rights for All’ regardless of ethnicity, gender, geography, disability, race or other status.
- “Sustainable Development at the Core”. Rapid shift in sustainable patterns of production and consumption is highly required.
- Acts to slow “Alarming Pace of Climate Change and Environmental Degradation”.
- “Transforming Economic Growth into Jobs and Inclusive Growth” to end extreme poverty and promote sustainable development, improving livelihoods,
- More diversified economies, with equal opportunities for all, can drive social inclusion, especially for young people, and foster respect for the environment. Build Peace for All. Freedom from violence, conflict, and oppression is essential to human existence and the foundation for building peaceful and prosperous societies.

- Recognizing peace and good governance is a core element of wellbeing, not an optional extra.
- New Global Partnership, new spirit of solidarity, cooperation, and mutual accountability must underpin the post-2015 agenda. This new partnership should to build on our shared humanity, and based on mutual respect and mutual benefit.

The Global Leadership Meeting on Population Dynamics is one of 11 leadership meetings convened as part of the UN's global thematic consultations on the post-2015 development agenda. It took place from 12-13 March 2013 in Dhaka, Bangladesh. Over 100 participants including over 50 government representatives attended the meeting. Their discussions focused on four mega-trends, high fertility and population growth, low fertility and population aging, migration and human mobility, and urbanization. Six working sessions took place during the meeting; the sessions addressed the issues of high fertility, population growth and large youth populations, international migration and human mobility, urbanization, cities and sustainable development, population aging and population decline; and the way forward for national, regional and global level action (IISD, 2013).

A number of issues representing convergence across the four mega-themes emerged during the discussions, including: putting humans at the center of the development agenda and the discussion on population dynamics; the need for public-private partnerships, and inter-ministerial and cross-sectoral collaboration; and support for rights-based and gender-responsive approaches to address the challenges and opportunities associated with population dynamics. Several participants noted the need for a paradigm shift in order to link population dynamics to other aspects of the post-2015 agenda, such as global health and inequalities. Many concurred with the

notion that “demographics is not destiny,” and that equal access to resources is critical for development. There was a call for integrating unfinished elements of the MDGs into the post-2015 development agenda, and for the SDGs to build on the MDGs.

The Dhaka Declaration on the Global Leadership Meeting on Population Dynamics in the context of the Post-2015 Development Agenda reaffirmed that people are at the center of the development agenda; recognizes population dynamics as an integral component of sustainable development; and notes the population megatrends that are at the forefront of national and international development agendas (IISD, 2013).

The recommendations of the meeting included: adopt rights-based and gender-responsive approaches to population dynamics; strengthen migration governance; share knowledge on the links between population dynamics and development to promote sustainable development; promote development of human capital; and strengthen national capacities for all aspects of population dynamics.

In the area of high fertility and population growth, the Declaration calls upon states and relevant stakeholders to: provide universal access to reproductive health services; strengthen coverage and quality of education, especially for the girl child; make significant efforts to seize opportunities presented by demographic dividends; and improve and support opportunities for young people to access productive employment and decent work.

In the area of low fertility and population aging, the Declaration calls upon states and relevant stakeholders to: eliminate age-based discrimination; provide adequate levels of social protection; and develop appropriate technologies, care services and infrastructure to accommodate the needs of older persons.

In the area of migration and human mobility, the Declaration calls upon states and relevant stakeholders to: ensure migrants are considered agents of development; ensure that migration is safe and orderly and that adequate protection is extended to all migrants; ensure migration is integrated into national and sectoral development policies, strategies and programmes; promote matching of skills and jobs as well as labor supply and demand within and between countries; consider internal and international migration as possible adaptation strategies in the context of climate change; and ensure the human rights of, and non-discrimination towards, migrants.

One of the challenges face the formulating of Post-2015 development agenda is how to combine poverty and environmental objectives. The “MY World” Survey” indicated that people are less concerned about the environment as it excluded from the top 10 priorities.

In many developed countries, protection of forests, rivers and oceans are more important than climate change, which suggests that the global efforts, programs and actions that done in the way of slowing down or halting climate change are insufficient or most of people around the world have not seen its impact yet.

## **7. Integration of age-structure transitions into the development plans:**

Arab population characterize by large generation of young people, estimated by about 174 million people under the age of 25 years and represents about 49% of the total population. As we explain in section 2.6, the majority of Arab countries are currently in the population dividend stage (where the majority of population is currently less than 25 years old). Lebanon, Tunisia and some GCC countries, namely Bahrain, Oman, Qatar, and UAE are exception to this general phenomenon, where they are currently in adult-working-age stage (where the majority of the population lies in the 25-64 age groups).

By year 2050, LDCs (Comoros, Mauritania, Somalia, Sudan, and Yemen) in addition to countries of civil conflicts and political stability in the region (Iraq, and Palestine) will continue in the population dividend stage. The rest of Arab countries will shift to the adult-working-age stage, and a few countries will move to ageing

stage (where more than 20% of the population will be in ages greater or equal to 64 years).

### **7.1 Age-structure transition and development:**

Youth should be one of the main economic assets for a country's development. As the proportion of children decline, the share of youth and working-age-adult population increases, and consequently the demographic dependency ratios decrease and the window of opportunity for economic growth open, resulting from high participation rate of population in the workforce. This "demographic dividend" can be reaping through effective policies that ensure an adequate education and job creation for the large waves of young people who enter the labor market. Education and vocational training plays an important role in regard (reaping the benefits of progress through the demographic transition). An equal education opportunity for men and women is a significant element in increasing the chances of families to earn more and to have stable incomes. As incomes increases and becomes more stable, the investment in human capital will be viable and will contribute positively towards macroeconomic growth and gender equity. Education and employment outside the home empower women to have more control on their fertility choices. Stable employment and fertility control choices create a positive dynamic that encourages families to make plans for the future (ILO, 2009b).

On the other hand, if a situation of weak governance and poor socioeconomic development exists, the demographic opportunities can turn into demographic challenges, and youth may turn to be a source of potential instability rather than of being an asset of economic growth.

### **7.2 Age-structure transition and civil conflicts:**



Reviewing the history of civil conflicts during the past 4 decades (from 1970 until now) indicate that majority of civil conflicts occurred in countries where a majority of the populations was young (less than 25 years) and in countries with ongoing high fertility rates. Central African Republic, Côte d'Ivoire, Guinea, Haiti, Mali and Nigeria are examples of the validity of this phenomenon (Madsen et. al, 2007). Palestine, Somalia, Yemen and lastly countries of Arab spring are the equivalent examples in Arab region. Civil conflicts cannot related only to “youth bulge” since many other factors play an important role in this regard, such as the level of development, regime type, total population size and past outbreaks of conflicts, but of course, population age structure is an important factor.

### **7.3 Age-structure transition and the good governance:**

Age structure also tied to democracy. As a general observation over the past four decades, democracy was associated with shifts in age-structure. Democracy is more prevalent in societies with older age structures rather than younger age structure. Only 13% of countries with very young age structures rated as full democracies, compared to 81% of countries with mature age structures. Other measures of governance, such as freedom of speech and civil liberties, show a similar relationship. Countries with young age structure are more likely to face restrictions on political freedoms and civil liberties and experience corruption, weak institutional capacity and regulatory quality. Further analysis of the relationship between demography and governance suggests that while countries with youthful populations may achieve democracy, they are less likely to sustain it until their age structures become more balanced (Madsen et. al, 2007; Leahy, et al. 2009).

## **7.4 Impact of age-structure transition on fertility and gender inequity:**

High fertility perpetuates young age structure and exacerbates gender inequality. Family planning and reproductive health programs contribute to the improvement of women's status. Increased schooling for girls produces many future benefits, including reducing fertility. Smaller family sizes allow more women to enter the workforce and more families to send their daughters to school. Legal protections for women must be increased and enforced, together with advocacy at the community level (CICRED, 2006).

## **7.5 Impact of age-structure transition on the environment and climate Change:**

Rapid population growth often results in unsustainable pressure on the environment. The challenges produced by high fertility rates and the impacts of climate change often intersect in the parts of the world which are the least prepared to adapt. Climate change adaptation strategies that include attention to family planning and reproductive health and that addresses the effects of population pressure can help slow the pace of environmental degradation and lessen the challenges caused by declining agricultural productivity. The ability to choose and plan the size of their families empowers women and men to face the challenges of an increasingly unpredictable environment and to provide each of their children with a better future (Madsen, 2007).

## **8 Conclusion and policy recommendations:**

### **8.1 Conclusion:**

Policymakers should address the issues of security, governance, and economic development at the global and country levels as the potential effects of demographic variables. Arab countries are more able to meet the needs of their people and promote the development when age structures are balanced. Age structure responds to both individual opportunities and policy decisions (Madsen, 2010).

Policies and programs that can influence young age structure in LDCs and countries of civil conflicts and political instability in Arab region are family planning and reproductive health, education and economic opportunities, especially for women, and opportunities for growing cohorts of young people. These policies and programs allow them to foster and benefit from a demographic dividend as well as to

promote political stability. These policies and programs must fully integrated into development strategies by country governments and international partners. Multiple policy options are available for translating working-age structures into a driver for development, but addressing gender inequality is essential to make them fully effective. Age structures are dynamic and can change, if the political commitment is present, and supported by the adequate fund and services (CICRED, 2006). The above suggested policies and programs for LDCs in Arab region are in great consistence with the recommendation of Dhaka Declaration on the Global Leadership Meeting on Population Dynamics in the context of the Post-2015 Development Agenda (see Section 6.2).

## **8.2 Policy recommendations:**

The demographic transition in Arab countries offers significant opportunities that are unlikely to recur. Policymakers and planners should look seriously to the dynamics of age structures of their populations. The focus on population age structure, offers policymakers a vital tools to plan for and manage the changes facing their countries. Policymakers need to respond to the emerging new realities associated with changing the age structures of their populations, with policies and programs to meet the needs of all groups in the society and to accelerate the demographic transition and make its beneficial effects more pronounced.

### **8.2.1 Recommended policies for Arab countries passing through youth bulge stage:**

Increase investments in family planning and reproductive health, including meeting the needs of youth are highly recommended. In view of the current economic conditions, of many LDCs in the region, which are initially suffer from high fertility rates, the improvements will be impossible without financial investments of the governments and support of international donors. The future economic benefits of the success in meeting such a policy would include cumulative cost savings in other socioeconomic and services sectors, such as education, maternal health, housing, and water and sanitation.

Focusing on education will prepare persons for their future integration into the work force. Extended education for large youth cohorts, with a focus on improving female participation should be considering as first priority policies in this stage. Funds should also be devoted to ensuring increased educational access for girls. Developing the current educational curriculum is essential to guarantee graduates are able to absorb the new technologies and to compete in the labour markets.

Given that many of Arab countries are currently in this stage of demographic transition and suffer from political instability and civil conflicts, efforts to promote political stability and security are highly required. Cooperation between donor countries and recipient nations in setting security priorities should highlight and strengthen. Such initiatives will strengthen, in the short term, if they linked to economic opportunities for young people. In the long-term, development policies should focus on limiting the population growth rate and adjusting age structure through the expanding family planning and reproductive health programs, reforming the educational system, and expanding cultural awareness of small family size.

Policies and programs that promote gender equity and advance the legal rights of and economic opportunities for women are highly recommended. Legal protections for women, including age at marriage, must be increased and enforced. The changing attitudes among young people, which reflect stronger beliefs in gender equity, should

be reinforcing in both formal education and informal community settings. Policymakers and donors should aim to facilitate women's vocational training, microcredit projects for women, legal reforms and assistance to ensure women's rights and to challenge discrimination. Funding should also address the gender gap in education by assisting innovative programs to reach adult illiterate women.

Encouraging savings and investment through reform of financial institutions and targeting the poor with microfinance programs will give countries the resources to prepare for the future, when the boom generation passes out of the workforce. Develop and fund integrated approaches to climate change adaptation and environmental sustainability.

### **8.2.2 Recommended policies for Arab countries passing through the population of working-age stage:**

As fertility falls from high to low levels, the population enters a period of "window of opportunity" during which the number of persons in working ages increases relative to that of children and older persons. If the decent jobs are available for the potential labour supply, the countries could gain beneficial effects for development. Policies aiming to improve human and physical capital, increase employment by providing decent jobs for the growing population of working age, and promote savings are necessary and significant to reap the potential benefits of this stage. Implementation of other recommendations included in the Programme of Action of the International Conference on Population and Development regarding the provision of education to all, especially girls, and increasing investment in human resource development would contribute to ensuring the benefits of the demographic bonus. Formulating policies based on the principle of free trade and opening labour markets will create work opportunities for the enlarged working-age cohort.

Failure to act on these issues could have a damaging effect on the future prospects, as unemployment rises, the social structure deteriorates, and rising numbers of aging begin to overwhelm available resources.

### **8.2.3 Recommended policies for Arab countries entered or approached population-ageing stage:**

Policies of receiving immigrant workers may admit in order to address labor imbalances. Other alternative policies may include promoting the labor force participation of women and delaying the effective age of retirement. Programs allowing older persons to remain economically and physically independent would also reduce stress on the family.

In addition to the above general policies, the following sub-policies implemented in some of Arab countries but are worth being considered and generalized:

- Drawing policy guidelines aiming to initiate and formulate national plan of action. Bahrain, Jordan, Qatar and Syrian Arab Republic have already completed this task (ESCWA, 2007). Lebanon is in the process of elaborating its national plan of action. Qatar has completed guidelines for its national strategy for ageing, drafted the national plan of action on ageing, and set up a mechanism for cooperation regarding the implementation of MIPAA.
- Issuing licenses and tax directives regarding the establishment of homes and clubs for older persons, as in the case of Jordan..
- Initiating health insurance provisions that cover the needy elderly, as in the case of Egypt, Jordan, and Oman (ESCWA, 2007). ;

- Expanding welfare provisions to cover disability caused by ageing, as in the case of Kuwait.
  
- Formulating projects to implement a new pension law, as in the case of Lebanon.
  
- Upgrading pension funds and social security schemes, as in the case of Oman. .
  
- Conducting training programs aiming to enhance and upgrade skills. Due to the existing financial constraints, few countries have initiated such programs, including, for example Egypt, Jordan and Lebanon (ESCWA, 2007).
  
- Upgrading the health services, expanding the number of specialized health centers, and introducing mobile clinic services. Mobile clinic services already operate in Bahrain, Oman and Saudi Arabia. Moreover, there are some countries have established day centers for the aged, including Egypt, Jordan and Lebanon (ESCWA, 2007).

More work is still required in terms of advocacy from a human rights perspective, collection of data, survey analysis, program management, and policy formulation and monitoring. Many of Arab countries have made significant progress in raising public awareness towards addressing ageing issues at both the governmental and civil society levels.



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