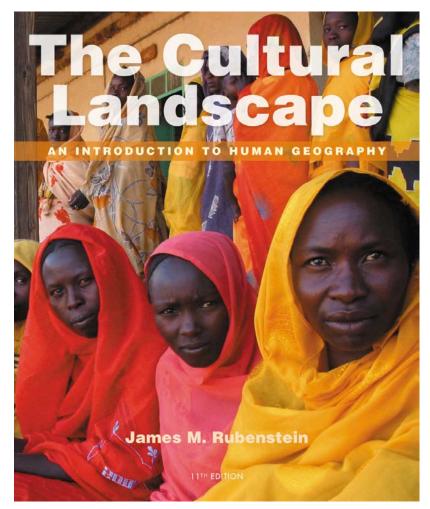
#### **Chapter 2 Lecture**

### **The Cultural Landscape**

**Eleventh Edition** 

### Population and Health

Matthew Cartlidge University of Nebraska-Lincoln



#### **Key Issues**

- Where is the world population distributed?
- Why is global population increasing?
- Why does population growth vary among regions?
- Why do some regions face health threats?

### **Learning Outcomes**

- 2.1.1: Describe regions where population is clustered and where it is sparse.
- 2.1.2: Define three types of density used in population geography.
- 2.2.1: Understand how to measure population growth through the nature increase rate.
- 2.2.2: Understand how to measure births and deaths through CBR and CDR.
- 2.2.3: Understand how to read a population pyramid.

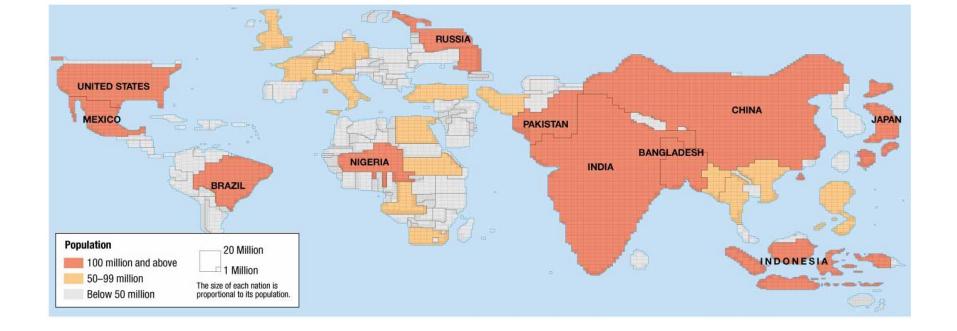
- 2.3.1: Describe the four stages of the demographic transition.
- 2.3.2: Summarize two approaches to reducing birth rates.
- 2.3.3: Summarize Malthus's argument about the relationship between population and resources.
- 2.3.4: Summarize the possible stage 5 of the demographic transition.

- 2.4.1: Summarize the four stages of the epidemiologic transition.
- 2.4.2: Summarize the reasons for a possible stage 5 of the epidemiologic transition.
- 2.4.3: Understand reasons for variations in health care.

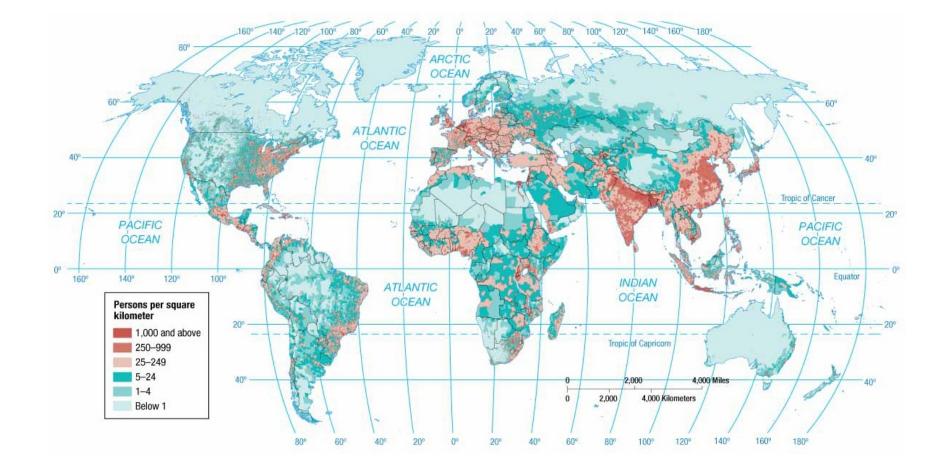
#### Where Is the World's Population Distributed?

- Population Concentrations
  - 2/3 of the world's inhabitants are clustered in four regions.
    - East Asia
    - South Asia
    - Southeast Asia
    - Europe
  - Site and Situation of Population Clusters
    - Low-lying areas with fertile soil and temperate climate
    - Near an ocean or near a river with easy access to an ocean.





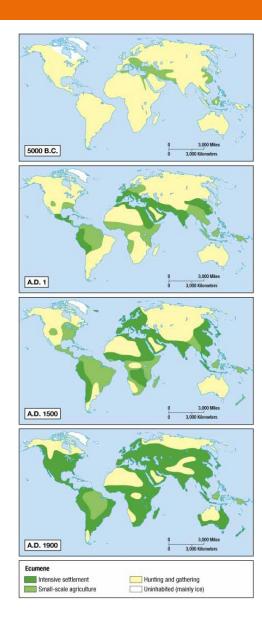




### Where Is the World's Population Distributed?

- Sparsely Populated Regions
  - Humans avoid clustering in certain physical environments.
    - Dry Lands
    - Wet Lands
    - Cold Lands
    - High Lands
  - Places considered too harsh for occupancy have diminished over time.
    - Places of permanent human settlement are termed the *ecumene*.

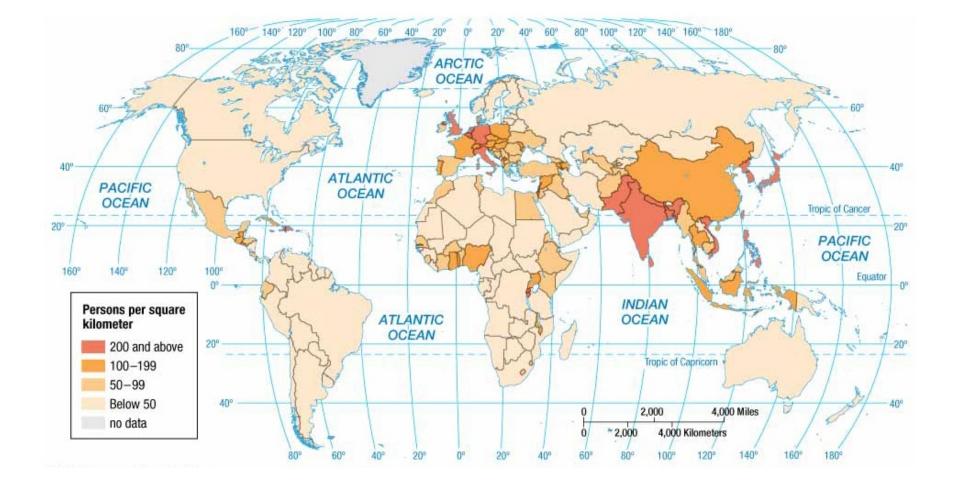




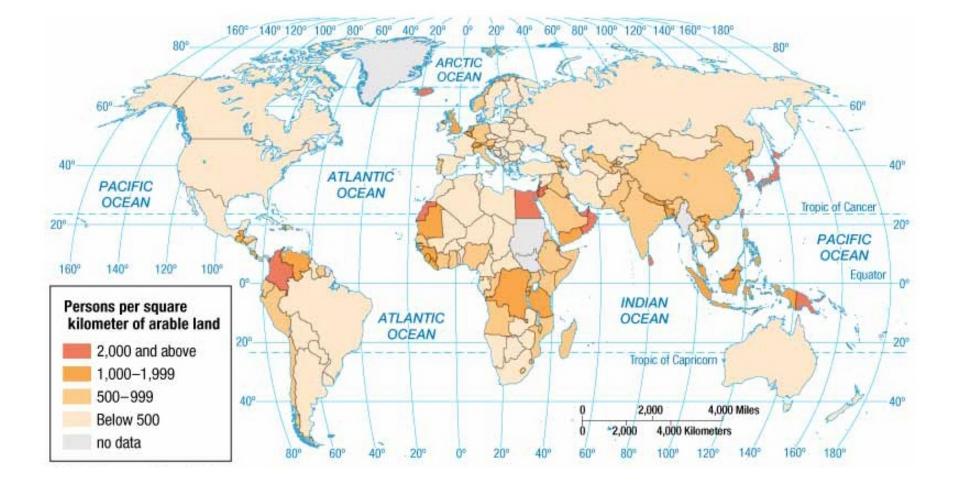
### Where Is the World's Population Distributed?

- Population Density
  - Density can be computed in up to three ways for a place.
    - 1. Arithmetic Density
      - Total number of objects in an area
      - Computation: Divide the population by the land area
    - 2. Physiological Density
      - Number of people supported by a unit area of arable land
      - Computation: Divide the population by the arable land area
    - 3. Agricultural Density
      - Ratio of the number of farmers to amount of arable land
      - Computation: Divide the population of farmers by the arable land area

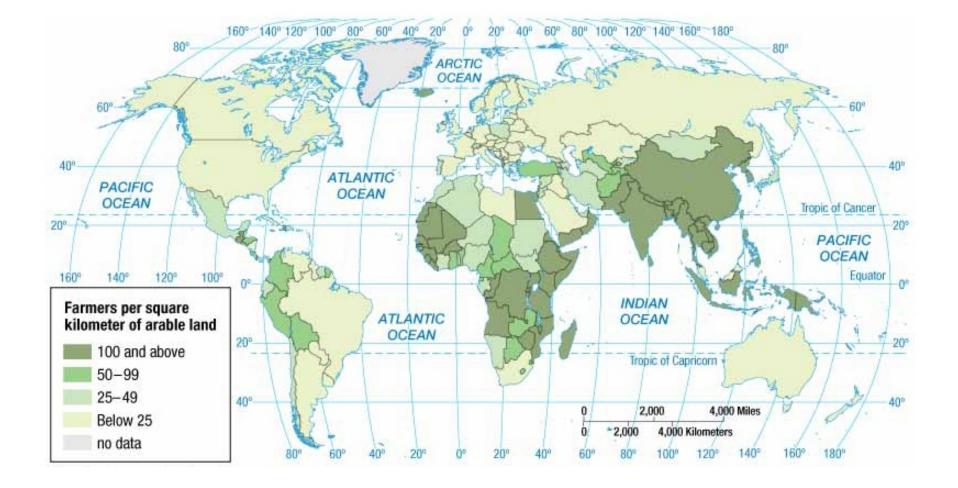






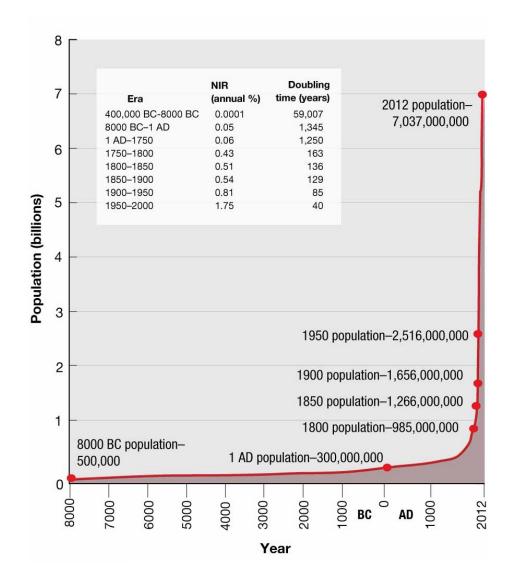






- Components of Population Growth
  - Geographers measure population change in a country or the world as a whole by using three measures:
    - Crude Birth Rate (CBR) total number of live birth in a year for every 1,000 people alive in society.
    - Crude Death Rate (CDR) total number of deaths in a year for every 1,000 people alive in society.
    - Natural Increase Rate (NIR) *percentage* by which a population grows in a year.
      - Computation: CBR CDR = NIR
        - » Remember NIR is a percentage (*n* per 100, while CBR and CDR are expressed as *n* per 1,000)

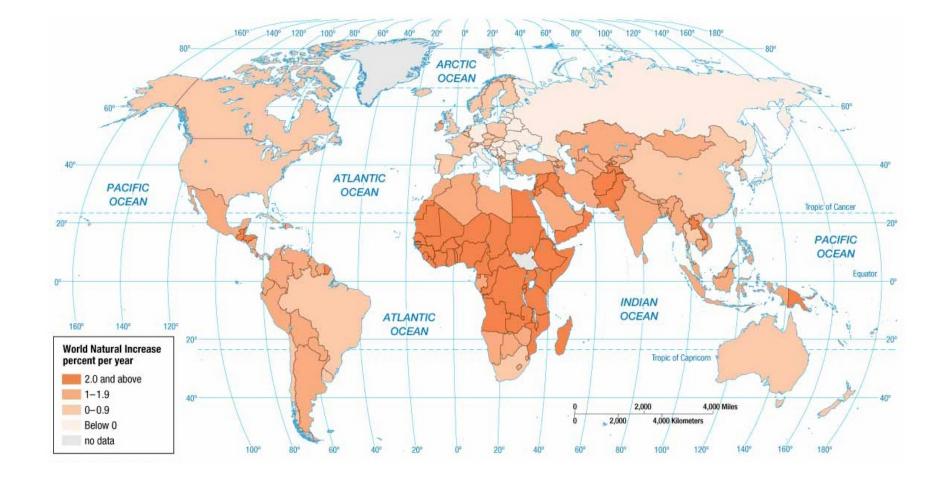




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- Components of Population Growth
  - Natural Increase
    - About 82 million people are added to the population of the world annually.
    - Rate of natural increase affects the *doubling time*number of years needed to double the population, assuming a constant rate of natural increase.
      - Twenty-First Century Rate (1.2 percent): 54 years
        - » Global population in 2100 would reach 24 billion.
      - 1963 (2.2): 35 years
        - » Global population in 2010 would have been 10 billion instead of nearly 7 billion.
    - More than 95 percent of the natural increase is clustered in developing countries.

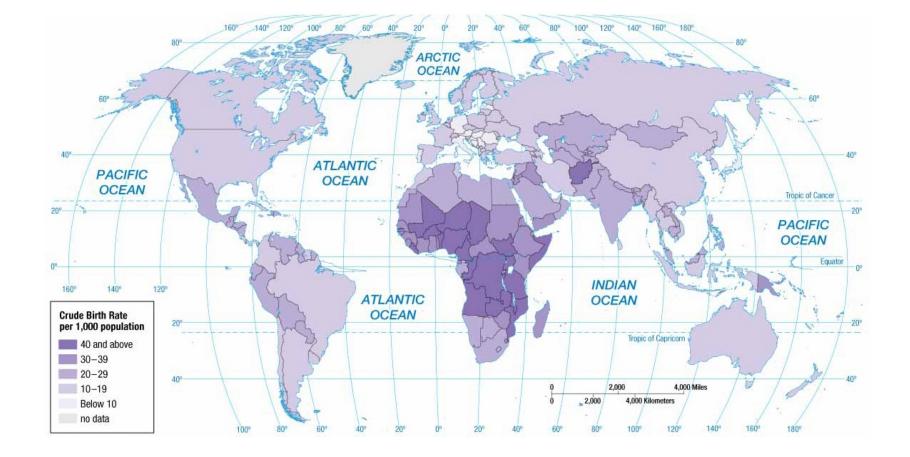




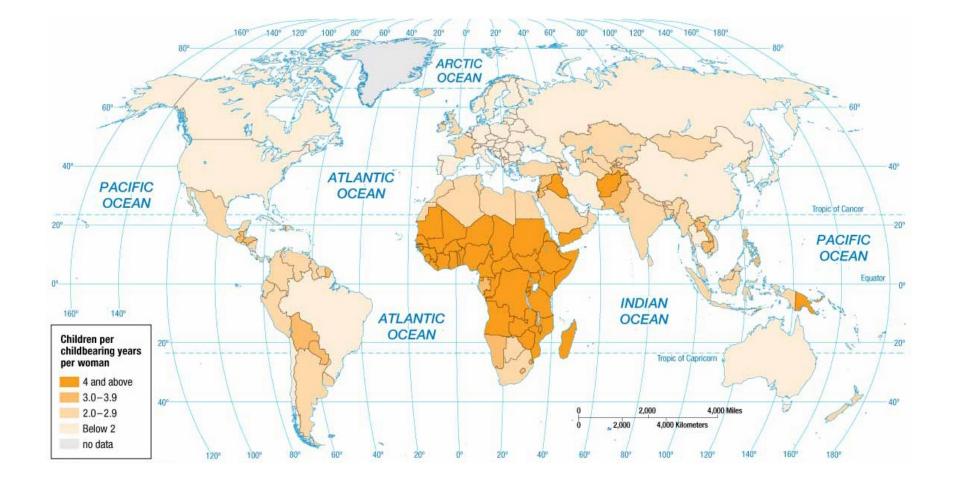
- Components of Population Growth
  - Fertility
    - Total Fertility Rate (TFR)
      - Measure also used by geographers to measure number of births in a society.
      - Defined as the average number of children a woman will have throughout her childbearing years (15–49)
      - TFR for world is 2.5.
      - TFR exceeds 5 in sub-Saharan Africa, while 2 or less in nearly all European countries.

- Components of Population Growth
  - Mortality
    - Infant Mortality Rate (IMR)
      - Measure used by geographers to better understand death rates in a society
      - Defined as the annual number of deaths of infants under one year of age, compared with total live births
      - Usually expressed per 1,000 births rather than a percentage
      - IMR is 5 in developed countries and 80 in sub-Saharan Africa.



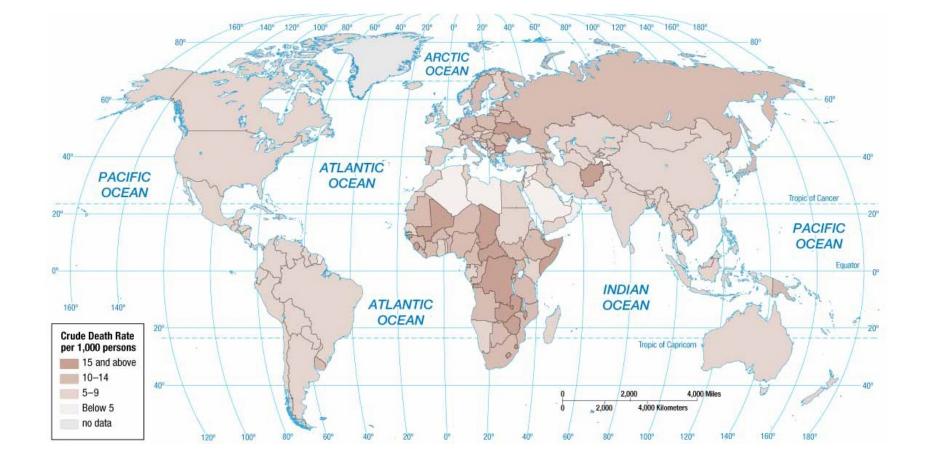






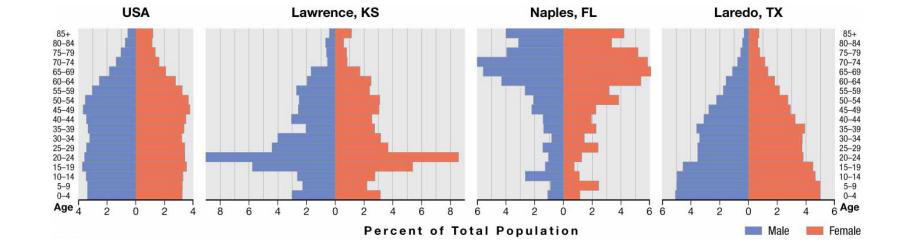
- Summary of Spatial Patterns
  - Developed Countries
    - Lower rates of...
      - Natural increase
      - Crude birth
      - Total fertility
      - Infant mortality
  - Developing Countries
    - Higher rates of...
      - Natural increase
      - Crude birth
      - Total fertility
      - Infant mortality





- Population Structure
  - Fertility and mortality vary not only spatially but also temporally within a country.
  - A special bar graph known as a *population pyramid* can visually display a country's distinctive population structure.
    - X-axis
      - Percent male displayed to the left of zero
      - Percent female displayed to the right of zero
    - Y-axis
      - Age cohorts typically grouped in 5-year intervals
      - Youngest displayed at bottom and oldest at top

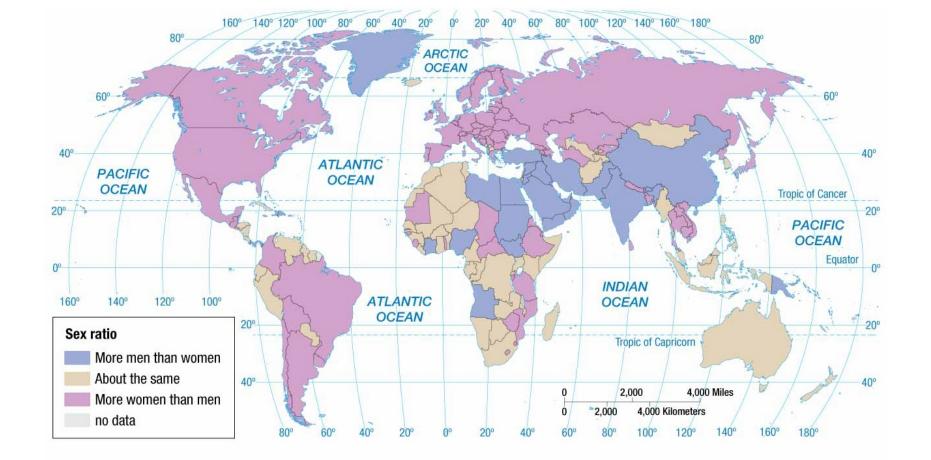




- Population Structure
  - Dependency Ratio
    - Defined as the number of people who are too young or too old to work, compared to the number of people in their productive years.
      - People aged 0 to 14 and over 65 years old are considered dependents.
      - Larger dependency ratios imply greater financial burden on the working class.
        - » 85 percent in sub-Saharan Africa, while 47 percent in Europe.

- Population Structure
  - Sex Ratio
    - Defined as the number of males per 100 females in the population
      - Developed countries have more females than males, because they tend to live 7 years longer.

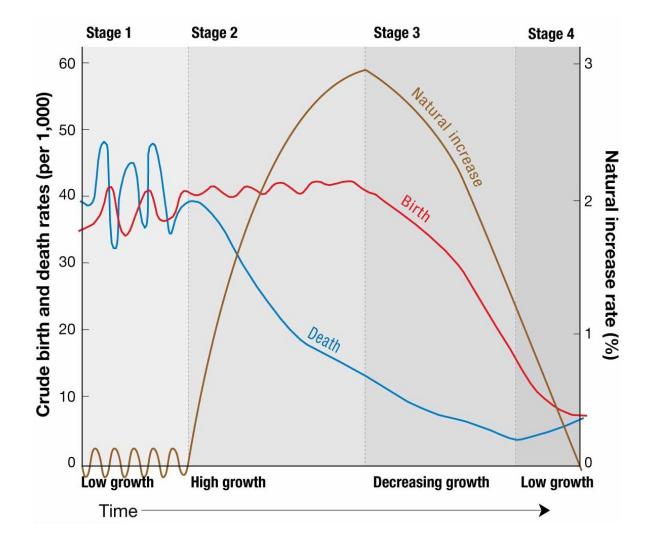




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- The Demographic Transition
  - It is a model consisting of four stages that helps to explain the rising and falling of natural increase over time in a country.
  - Historically, no country has ever reverted back to a previous stage.
    - Thus, the model can be thought to have a beginning, middle, and an end.





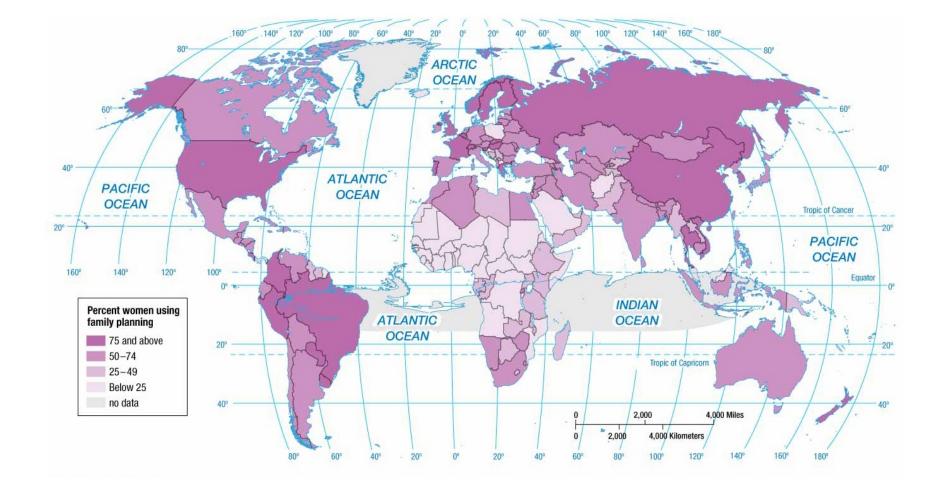
- The Demographic Transition
  - Stage 1: Low Growth
    - Marked by very high birth and death rates.
      - No long-term natural increase
      - No country presently is in Stage 1
  - Stage 2: High Growth
    - Marked by rapidly declining death rates and very high birth rates
      - High natural increase
      - Europe and North America entered stage 2, as a result of the industrial revolution (~1750).
      - Africa, Asia, and Latin America entered stage 2 around 1950, as a result of *medical revolution*-improved medical care.

- The Demographic Transition
  - Stage 3: Moderate Growth
    - Marked by rapid decline in birth rates and steady decline in death rates
      - Natural increase is moderate.
        - » Gap between CBR and CDR is narrower in stage 3 countries than stage 2 countries.
    - Population grows, because CBR is still greater than CDR.
    - Most European countries and North America transitioned to stage 3, during first half of twentieth century.

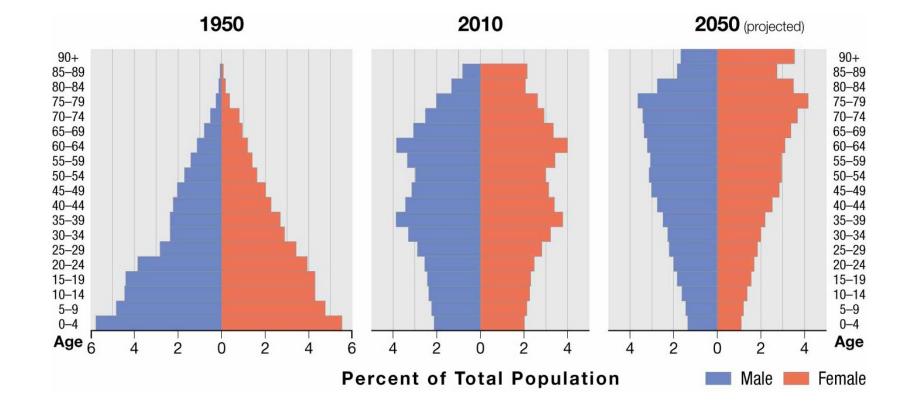
- The Demographic Transition
  - Stage 4: Low Growth
    - Marked by very low birth and death rates
      - No long-term natural increase and possibly a decrease
    - Country reaches stage 4 when population gains by CBR are diminished by losses because of CDR.
      - Condition known as zero population growth (ZPG)
        - » Demographers more precisely define ZPG as the TFR that produces no population change.
    - Population change results from immigration.

- Declining Birth Rates
  - Two Successful Strategies for Lowering Birth Rates
    - 1. Improving Education and Health Care
      - Emphasizes improving local economic conditions so that increased wealth is allocated to education and health programs seeking to lower birth rates.
    - 2. Contraception
      - More immediate results reaped than previous approach
      - Met with greater resistance, because it goes against cultural or religious beliefs of some.
        - » Roman Catholics, fundamentalist Protestants, Muslims, and Hindus.









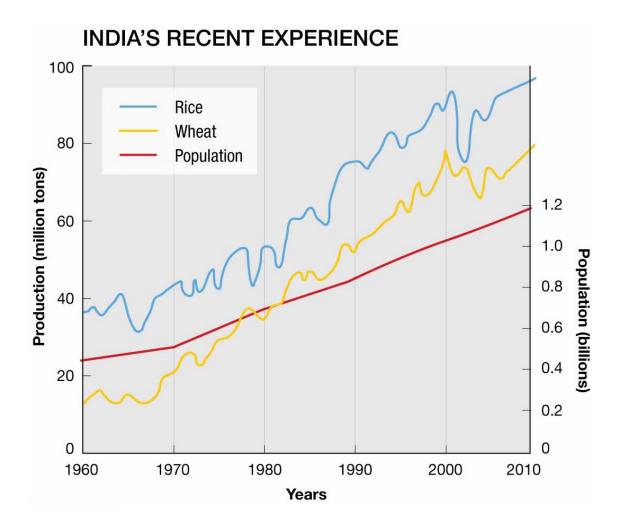
## Why Does Population Growth Vary among Regions?

- Malthus on Overpopulation
  - He claimed the population was growing faster than the increase in food supply.
  - Malthus's Critics
    - Many geographers consider his beliefs too pessimistic.
      - Malthus's theory based on idea that world's supply of resources is fixed rather than expanding.
    - Many disagree that population increase is not a problem.
      - Larger populations could stimulate economic growth, and therefore, production of more food.

## Why Does Population Growth Vary among Regions?

- Malthus on Overpopulation
  - Theory and Reality
    - Food production has increased over last 50 years faster than Malthus predicted.
    - His model predicted world population to quadruple over the course of 50 years.
      - Not even in India has population growth outpaced food production.





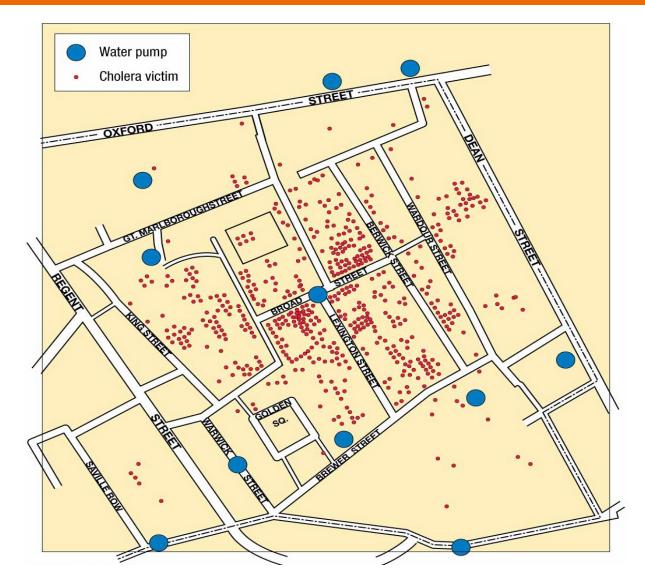
## Why Does Population Growth Vary among Regions?

- Population Futures
  - Demographic Transition Possible Stage 5:
    Decline
    - Characterized by...
      - Very low CBR
      - Increasing CDR
        - » More elderly people than young persons
      - Negative NIR
      - Over time, few young women in child-bearing years
        - » Contributing to ever falling CBR
    - Several European countries already have negative NIR.
      - Russia is most notable hosting a negative NIR for 50 years.

- Epidemiologic Transition
  - Medical researches have identified an epidemiologic transition that focuses on distinct health threats in each stage of the demographic transition.
  - Stage 1: Pestilence and Famine (High CDR)
    - Principal cause of death: infectious and parasitic diseases
      - Ex. black plague (bubonic plague)

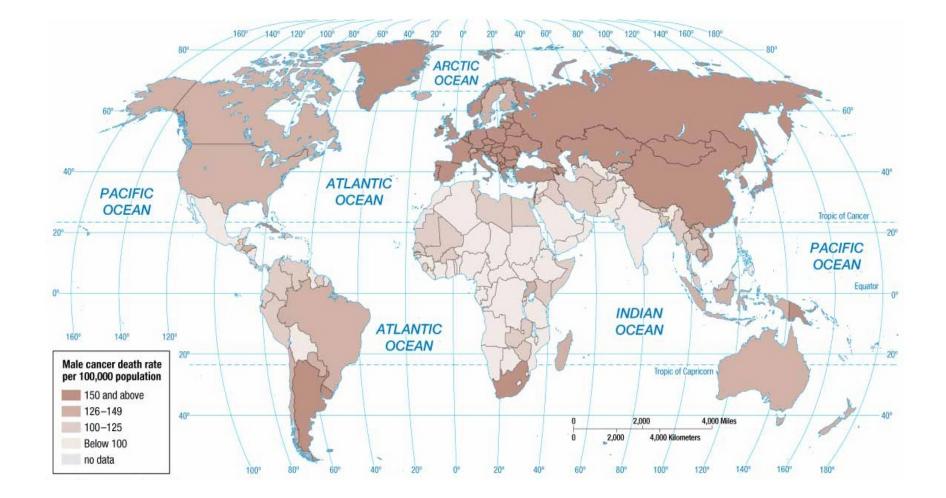
- Epidemiologic Transition
  - Stage 2: Receding Pandemic (Rapidly Declining CDR)
    - *Pandemic* is a disease that occurs over a wide geographic area and affects a very high proportion of the population.
    - Factors that reduced spread of disease, during the industrial revolution
      - Improved sanitation
      - Improved nutrition
      - Improved medicine
    - Famous cholera pandemic in London in mid nineteenth century.



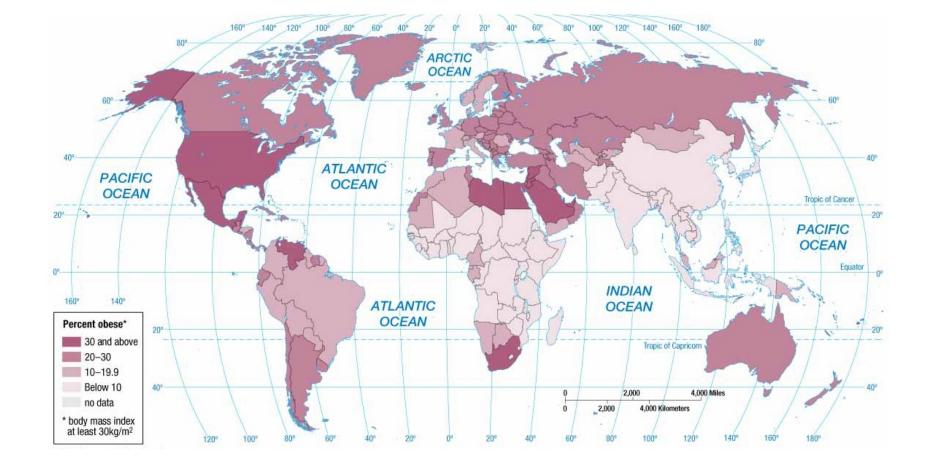


- Epidemiologic Transition
  - Stage 3: Degenerative Diseases (Moderately Declining CDR)
    - Characterized by...
      - Decrease in deaths from infectious diseases.
      - Increase in chronic disorders associated with aging.
        - » Cardiovascular diseases
        - » Cancer
  - Stage 4: Delayed Degenerative Diseases (Low but Increasing CDR)
    - Characterized by...
      - Deaths caused by cardiovascular diseases and cancer delayed because of modern medicine treatments.



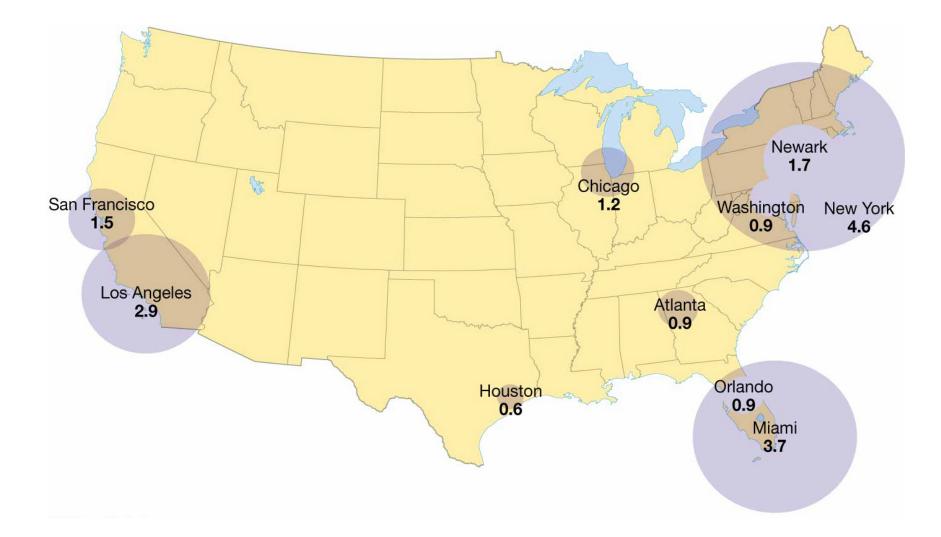






- Infectious Diseases
  - Reasons for Possible Stage 5
    - Evolution
      - Infectious disease microbes evolve and establish a resistance to drugs and insecticides.
      - Antibiotics and genetic engineering contributes to the emergence of new strains of viruses and bacteria.
    - Poverty
      - Infectious diseases are more prevalent in poor areas because of presence of unsanitary conditions and inability to afford drugs needed for treatment.
    - Increased Connections
      - Advancements in modes of transportation, especially air travel, makes it easier for an individual infected in one country to be in another country before exhibiting symptoms.



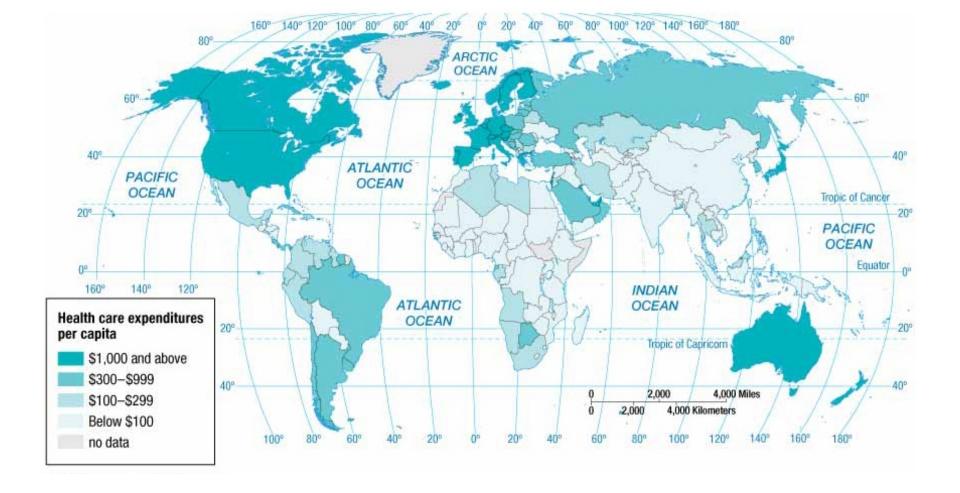


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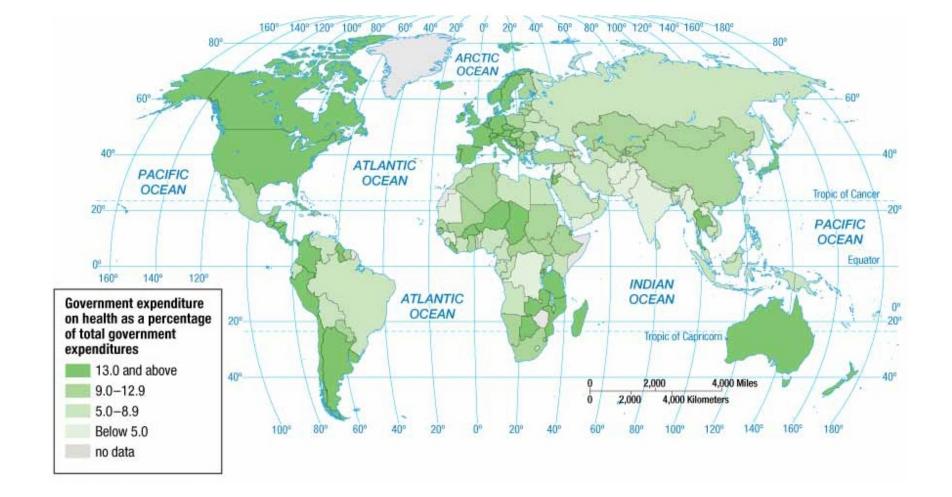
- Health Care
  - Health conditions vary around the world, primarily, because countries possess different resources to care for people who are sick.
    - Expenditures on Health Care
      - More than 15 percent of total government expenditures in Europe and North America.
      - Less than 5 percent in sub-Saharan Africa and South Asia.

- Health Care
  - Health Care Systems
    - Developed Countries
      - Public service available at little or no cost.
      - Government pays more than 70 percent of health-care costs in most European countries, and private individuals pay about 30 percent of the expense.
    - Developing Countries
      - Private individuals must pay more than half of the cost of health care.
        - » U.S. is an exception to these generalizations, because private individuals are required to pay about 55 percent of health care costs making it more closely resemble a developing country, in regards to health care.

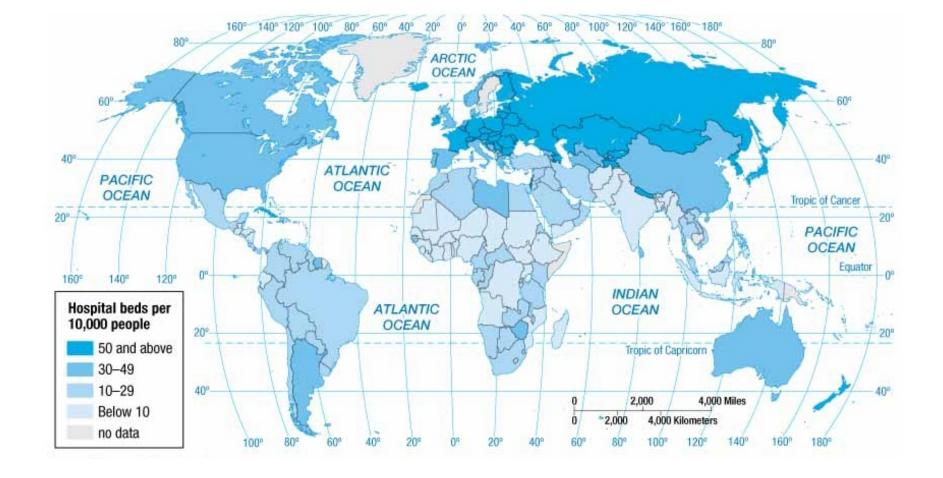




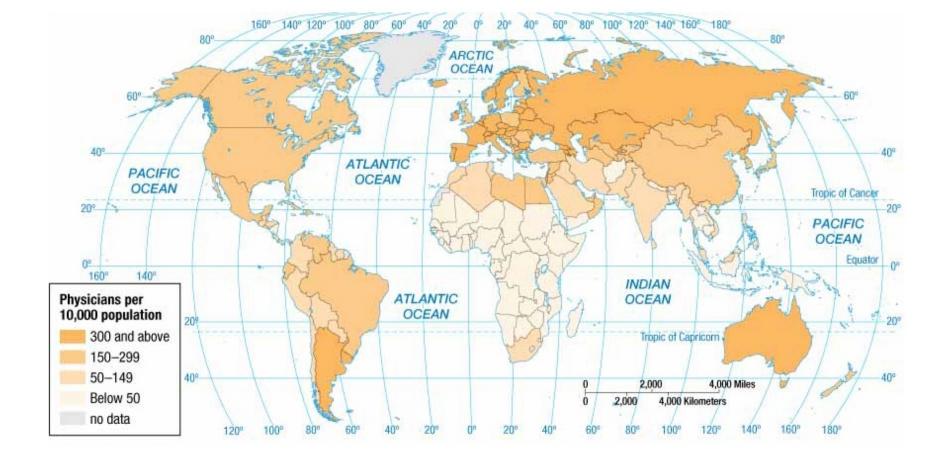




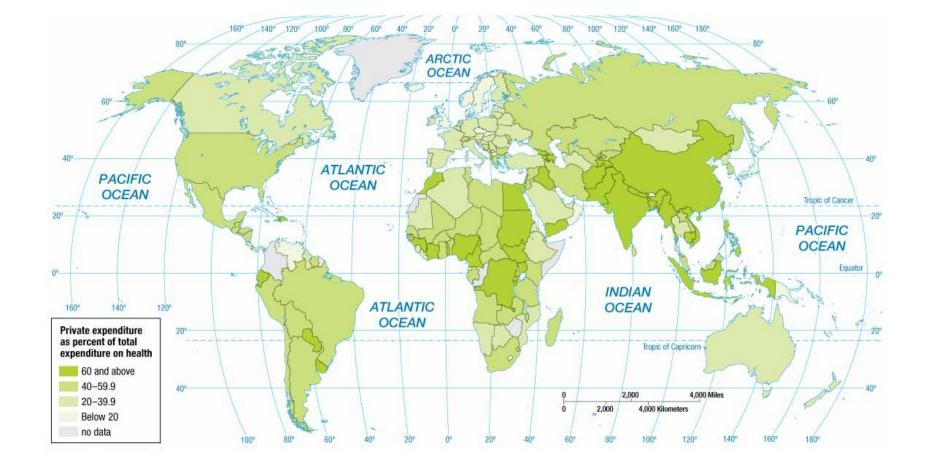












### Summary

- Global population is concentrated in a few places that are not too wet, too dry, too cold, or too mountainous.
- Nearly all NIR is concentrated in developing countries.
- Developed countries have a stable population, if not slightly declining.
- Population growth varies among regions, because not all countries are in the same stage of the demographic transition model.

### Summary

 Intimately connected to the demographic transition model is the epidemiologic transition model that helps to explain why different regions face varying health threats.