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The Right Lessons to Draw as India Overtakes China's Population

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India will become the world's most populous country earlier than anticipated. It would however be counterproductive to take coercive steps towards population control.

Since 1990, the United Nations (UN) has ritualised the annual spotlight on global population trends by celebrating 11 July as World Population Day. While this year will see yet another unfurling of national anxieties about numbers, it comes with an important revelation. In a year's time, the UN's [World Population Prospects 2022](#) shows, India's population will catch up with China's.

The new projection means that India's population will outrun China's a full four years earlier than predicted by the UN in 2019.

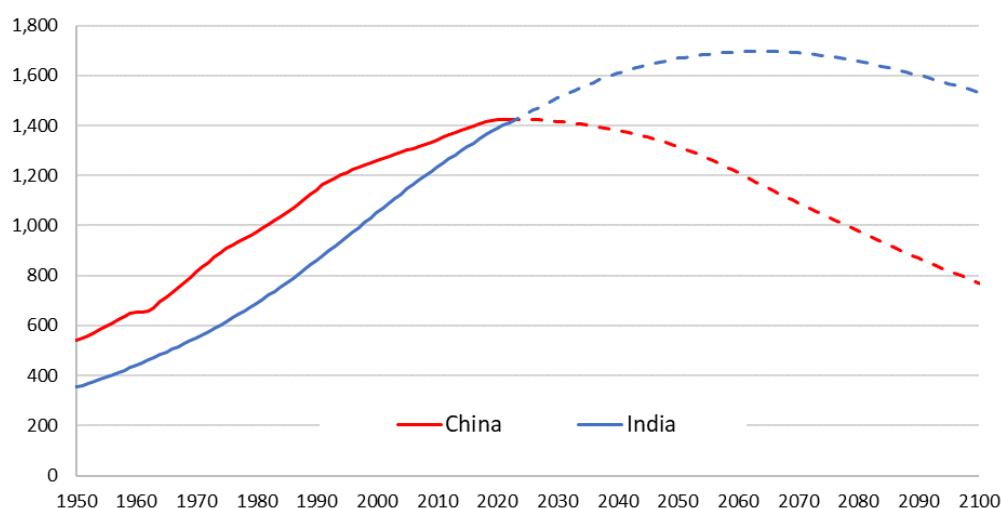
This announcement comes at a pertinent juncture for India's demographic journey. Being placed higher than China as the world's most populated country will possibly be a matter of immense pride or lingering alarm. India's growing population will be much younger than China's receding population; which could yield it a demographic dividend (provided people find employment and female participation rates catch up with the rest of the world).

However, the qualitative features of the two populations are hardly similar. India, for all its demographic primacy, is unlikely anytime soon to become number one in terms of absolute GDP, college-educated youth, political influence, or military power. A huge and still growing population in a country with a density similar to that of the Netherlands or Japan makes India resemble a giant with clay feet. The gap between its size and its might may become more glaring. Further demographic growth will raise serious questions of environmental sustainability, as current issues of air pollution, water shortages, and displacement already illustrate.

How did we get here?

In 1950, the newly formed People's Republic of China had a 'running start' with 53% more inhabitants than India. It is worth emphasising that contemporary China and India had surprisingly identical demographic profiles. Women in both countries had then, on average, about 5.8 children, among whom around 15% would die in the first year. Life expectancy was longer by two years in China than in India, but it was still incredibly low in both countries (44 and 42 years, respectively). The relatively faster health progress recorded by China during the 1950s was almost entirely cancelled out by the dramatic consequences of the great famine that followed the Great Leap Forward (1958–62). As seen on the graph, China's population temporarily ceased growing in the early 1960s.

Populations in millions



Sources: 2022 World Population Prospects (United Nations)

Subsequently, the gap between the two growing nations increased to attain an absolute excess of 290 million people in China by the mid-1970s. In 1972, as the Cultural Revolution ended and Nixon paid a visit to Mao, fertility levels were identical in both countries in 1971 (at 5.5 children per woman). Both populations progressed at a record rate of 2.3% per year.

Yet, something had changed in China: the country recorded spectacular advances on the health front. Its life expectancy was already almost 10 years ahead of India's, which still lay below 50 years. Similarly, the risk of dying during infancy and childhood in China had become half of that observed in India. In addition, literacy among the youth increased much faster in China. First measured in 1982, the comparative figures of literacy rates among the youth of both countries showed a gap of 30-40 percentage points in literacy rates.

In view of such large differences in social development, the rest of the story followed a familiar demographic path.

By the early 1970s, with considerable progresses in education and child survival, conditions were ripe in China for birth rates to plunge and fertility to reach replacement level (2.1 children per woman). China's drastic birth policies, introduced in the 1980s, ensured a continuous and irreversible decline in fertility across the country that had already started during the previous decade and halved China's family size. Notwithstanding the impacts of the One-Child Policy and its gendered ill effects, population growth started plummeting in China and the gap between both countries melted away.

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In contrast to China, India's demographic transition proceeded at a very slow pace (the so-called Hindu rate of fertility decline). Notwithstanding the political overreach of the Emergency years (1975-77), the targeted sterilisation policies left no lasting impact on fertility trends. Demographic growth remained considerable, and the populations of China and India started gradually to converge.

Fast forwarding to today, India has reached replacement level. But it has done so 30 years later than China, whereas both countries had similar fertility levels 50 years ago. The life expectancy recorded in India before Covid-19 stuck was attained in China more than 20 years earlier.

Today, Chinese citizens can expect to live, on average, 11 years longer than Indians. In terms of infants and young children, mortality rates during the first five years of life are more than four times higher in India than in China. High mortality rates point to one of the weaknesses of India's demographic regime where fertility is now nearing that of Western Europe, but where infant mortality rates are closer to that of Malawi or Bolivia (and distinctly worse than Bangladesh or Nepal).

The Indian century

India will further widen its demographic gap with China from here on. WPP 2022 forecasts suggest that China's population will now contract in the forthcoming decades: its annual population growth, which is nil today, should further slide to -0.5% by 2045 and -1% in 2060.

This irreversible decline is, of course, related to China's present-day very low birth rates that the recent dismantling of the One-Child Policy has barely affected. Fertility in China reached a historical low at 1.2 children per woman in 2022, and it is not projected to rebound above 1.5 children before the end of the twenty-first century. Another limiting factor is the rapid ageing of China's population and the shrinking size of birth cohorts that will in turn reduce the share of the child-bearing population and the future number of births.

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Meanwhile, India's population impetus will ensure significant demographic growth to the next 40 years, despite below-replacement fertility. India's demographic dominance is expected to expand till the end of the century and peak at 1.7 billion in 2065. Going by the standard WPP scenario, India should have 350 million inhabitants more than China by 2050. By 2100, its population should be twice that of China's.

Nothing is entirely new in these forecasts. They resemble estimates prepared earlier by the United Nations for India and the rest of the world. The Covid-19 tragedy has hardly bent the trends even if India’s fight against death has recorded its largest reversal since Independence—a drop of three years in life expectancy—in 2020-21.

Lessons for policymakers

As India will become the world’s most populous country, it will also be marked by stark inequalities in life expectancy. No discussion on population control can circumvent the stark difference in how people live or die in the country—or how long they get to live and whether they are able to live well. As Martha Nussbaum and Amartya Sen’s capability approach has shown, it is not enough that people live long, but it is also important that the state provides enough material comfort for the individual to work towards transforming oneself and one’s historical conditions (Nussbaum and Sen 1993).

There is a lesson here for the Indian health bureaucracy. Even though the global growth rate fell under 1% per year for the first time since 1950, the WPP report also cautioned that the global population would continue to increase due to the historical demographic push towards large young clusters. The report concluded that no government advocacy can undo this growth trend as it is an outcome of past demographic decisions and not really something that can be controlled by behavioural change in current populations.

In short, no political legislation on population will impact the trend of rising numbers.

For reasons which are less epidemiological and more political, India has yet to have an exhaustive survey of the country’s demographic structures.

Long term change in fertility patterns come from a change in self-perception: when a family is not fighting to survive but living a full life. State subsidies towards education, nutrition, vaccination, and disease prevention programmes are crucial enablers, but caring for a population that is reaching replacement fertility while surviving on whatever daily wages offer will require more inclusive economic policies than demographic targeting.

As the graph above illustrates, India’s tryst with coercive sterilisations during the Emergency years (1975-77) hardly impacted the overall rate of population growth. As the rate by which fertility levels are falling in India is gradual and slow, the increase in numbers we see now is an outcome of deep social change over the past decades.

Thus, no knee jerk legislations focusing on elected representatives or on large families is likely to make a significant dent on already falling birth rates. Families across different regions are reaching replacement level fertility (or even below that) because of factors like urbanisation, migration, education, and overall aspirations of social mobility. While the burden of contraception in country already falls on women, the immediate urge of the government would be to ride on this trend and to encourage reversible family planning methods rather than sterilisations.

A better estimate of population

The UN Population Division’s biannual demographic estimates in the WPP have been remarkably reliable over the last thirty years. To formulate its estimates, the division processes all existing statistics drawn from national censuses, civil registration, and demographic surveys.

This time around, the deadly Covid-19 waves in 2020–21 forced the UN to postpone the release of 2021 WPP by a year. India’s statistical situation in this regard was even more complicated. For reasons which are less epidemiological and more political, India has yet to have an exhaustive survey of the country’s demographic structures. In a breach of a century-old tradition, India was not able to undertake the 16th decennial census in 2021 and will not carry it out in 2022. (China’s census was taken in 2020 as scheduled, amidst the pandemic.) In addition, the civil registration system remains deficient in India and the precise computation of annual population change (basically births minus deaths) is simply not feasible.

The stress on global fertility, mortality, and migration that the WPP encapsulates reanimates the discussion on modernisation and their limits.

Luckily, the Population Division was able to draw from the latest round of the National Family and Health Survey, released last year. This survey gave a detailed picture of fertility and mortality trends across the country. China provides a richer set of official estimates, but figures related to birth rates have often been contested and re-estimated by demographers.

This incomplete database partly explains, however, one most surprising result from the new WPP 2022, namely the very small gap between China's and India's population at the beginning of the year. In fact, the Population Division's estimate for India in 2022 is higher by 42 million than the official projections for the same year. (Notably, the WPP 2022 dataset incorporates the WHO's high Covid-19 estimates for India — 4.7 million in 2020-21 — so India's population figures may even be an underestimate if one believes the Indian government's official number of less than half a million Covid-19 deaths in India.) The corresponding figure for China is on the contrary smaller by 14 million than the 2020 census results.

These corrections, introduced to ensure statistical consistency, explain why India's population is now expected to reach 1.425 billion early next year and match China.

Moving away from high fertility

The stress on global fertility, mortality, and migration that the WPP encapsulates reanimates the discussion on modernisation and their limits. We are familiar with the literature (and its critique) that earmarks high fertility as a key characteristic of lower and middle-income countries. In 2021 too, the trend of fertility affirms this correlation as the historically underdeveloped regions of the world remained regions with the highest births: Central and Southern Asia (28% of global births) and Eastern and South-Eastern Asia (18%)—and in sub-Saharan Africa (29%) (WPP, 22: 13).

While the definitions and categories used in the document hardly differ from its predecessors, the indices of development have now gone beyond simple correlations with fertility and mortality.

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While the bends and shifts of WPP 2022 are contingent on geopolitical constraints, one major imperative is the optimum size of a country's national population in the backdrop of its position in the global economic index. Another important factor is climate change brought about by large infrastructural projects. Indeed, the 2022 fact sheet made a special effort to document “the effects of almost 7,000 crises, including conflicts and battles, mass killings, flooding, cyclones, epidemics, earthquakes, the COVID-19 pandemic, famines, droughts, and tsunamis...” (WPP, 2022, 38). Malthus would be proud.

We wonder how the world's most populous country will manage the quandary of seeking economic growth, infrastructural developments which may displace its people and destroy its habitats — while not resorting to impoverishing an already fragile population. Hopefully, by listening to its people.

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