

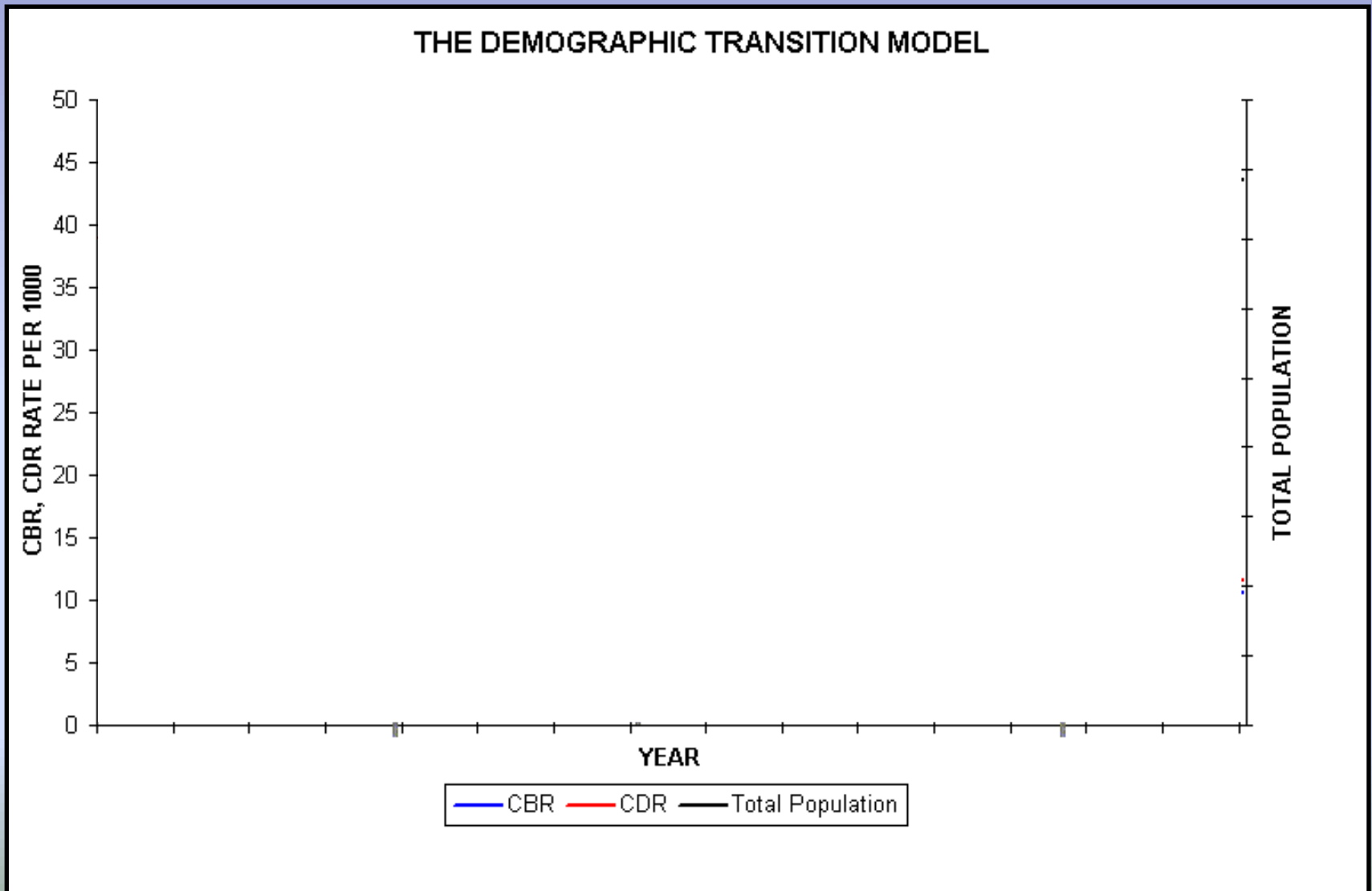
Population

Demographic transition model

"fertility and mortality vary over time: Demographic Transition Model – reasons for differences in fertility and mortality in the stages of the model; differences between economically more developed countries (EMDCs) and economically less developed countries (ELDCs) "

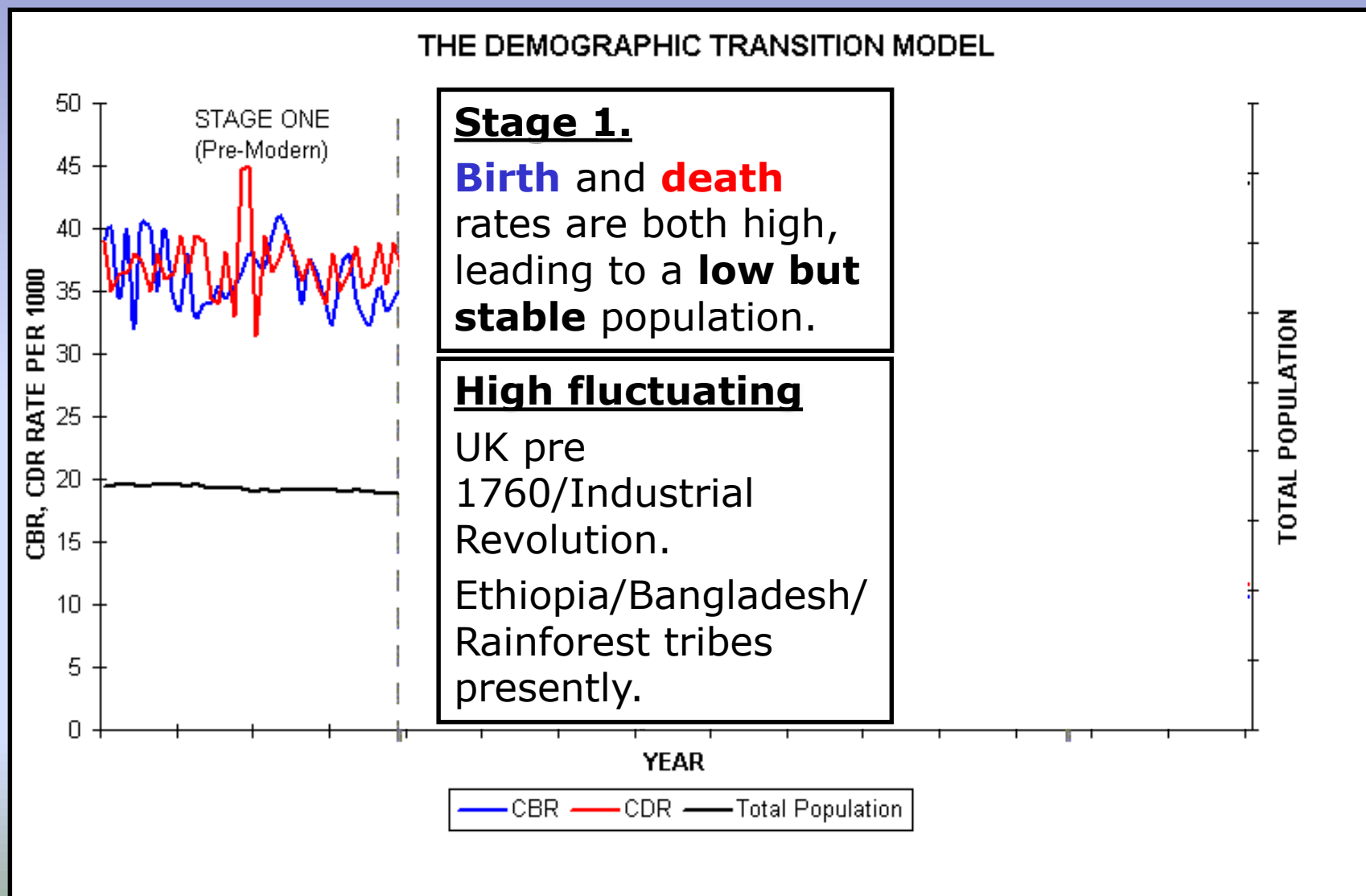
Population Demographic transition model

The demographic transition model shows how a population will change over time as it changes from an agrarian society to an industrial, and post-industrial one.



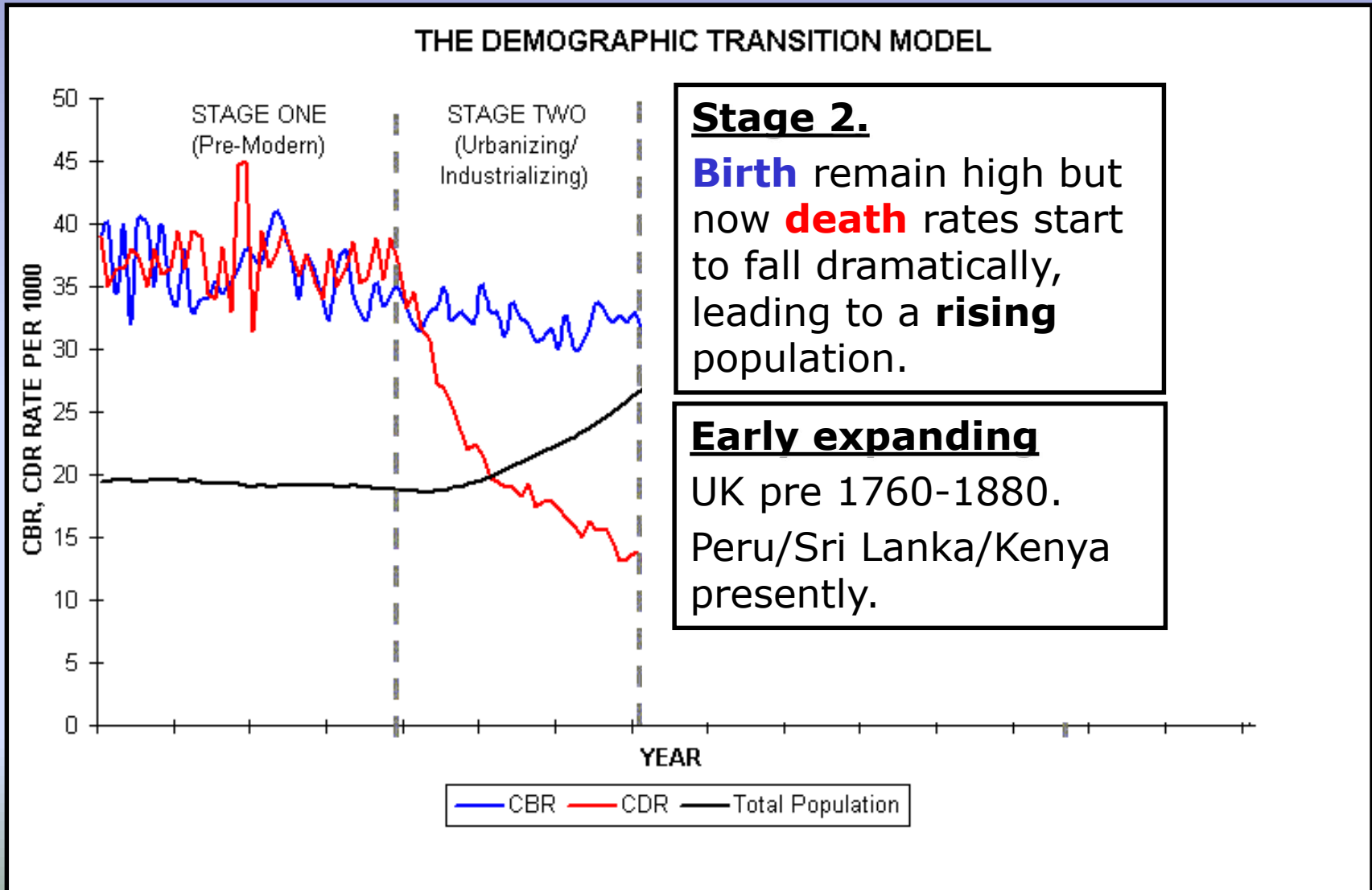
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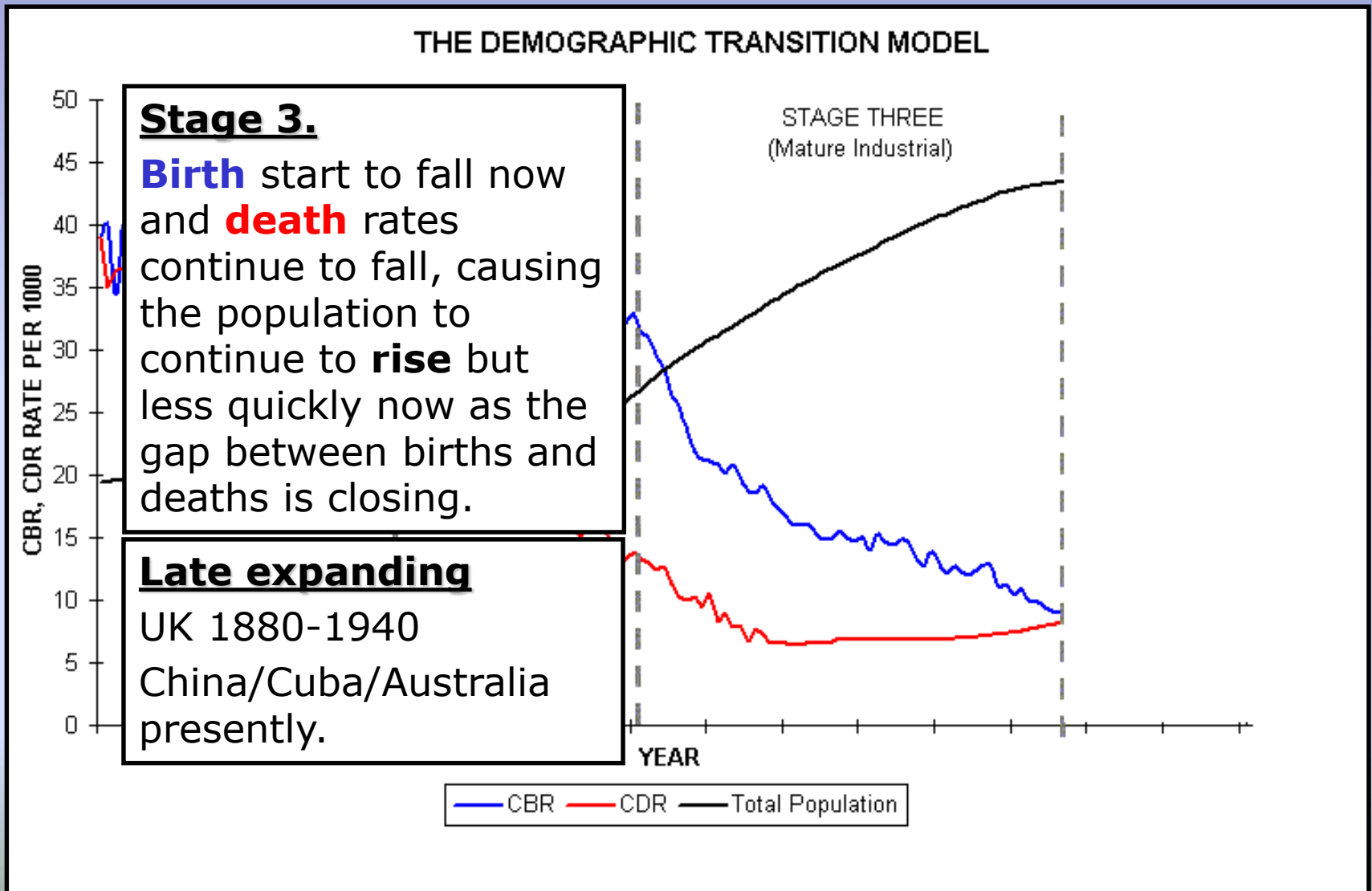
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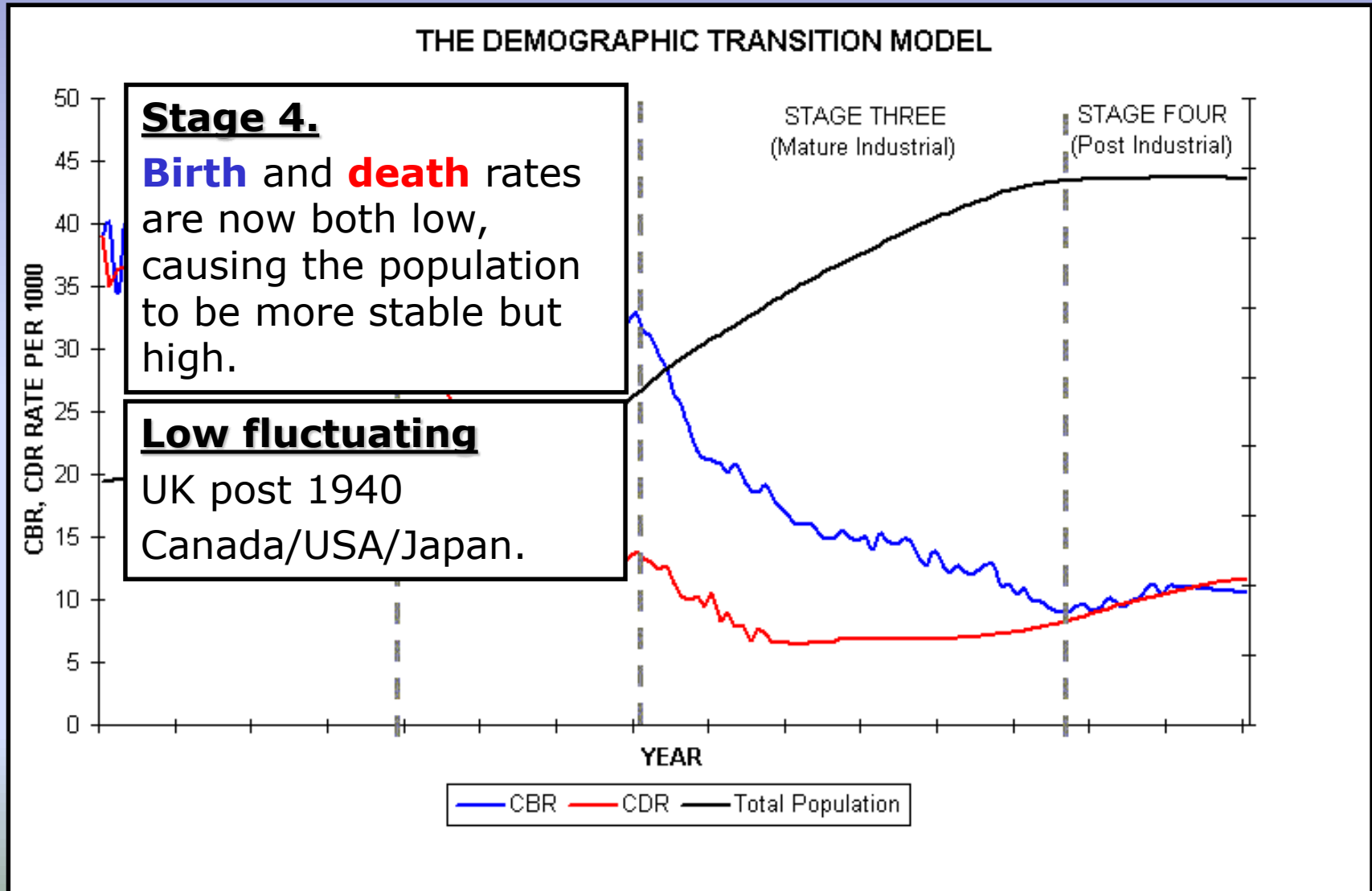
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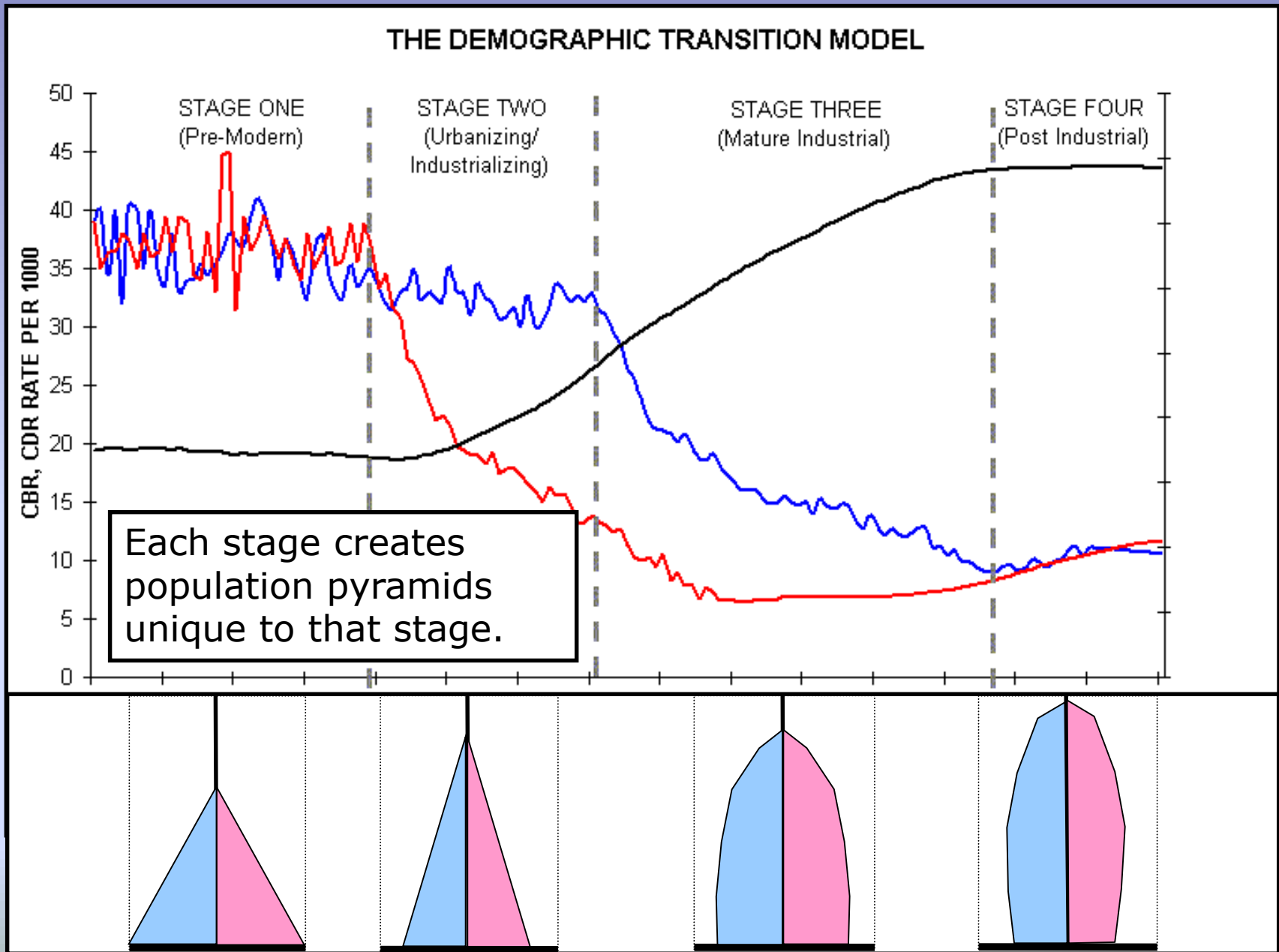


Population | Demographic transition model

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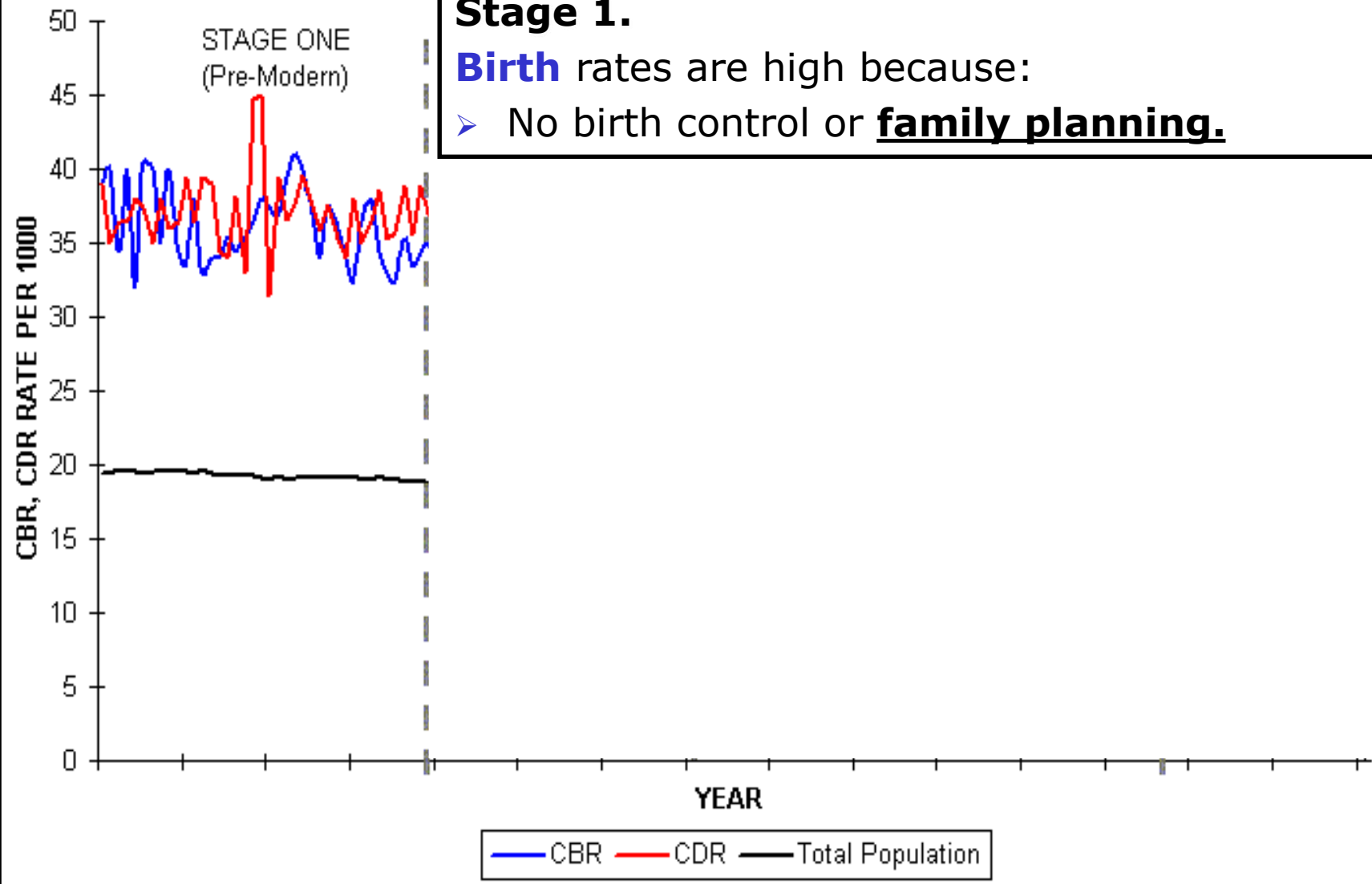


Population Demographic transition model



THE DEMOGRAPHIC TRANSITION MODEL

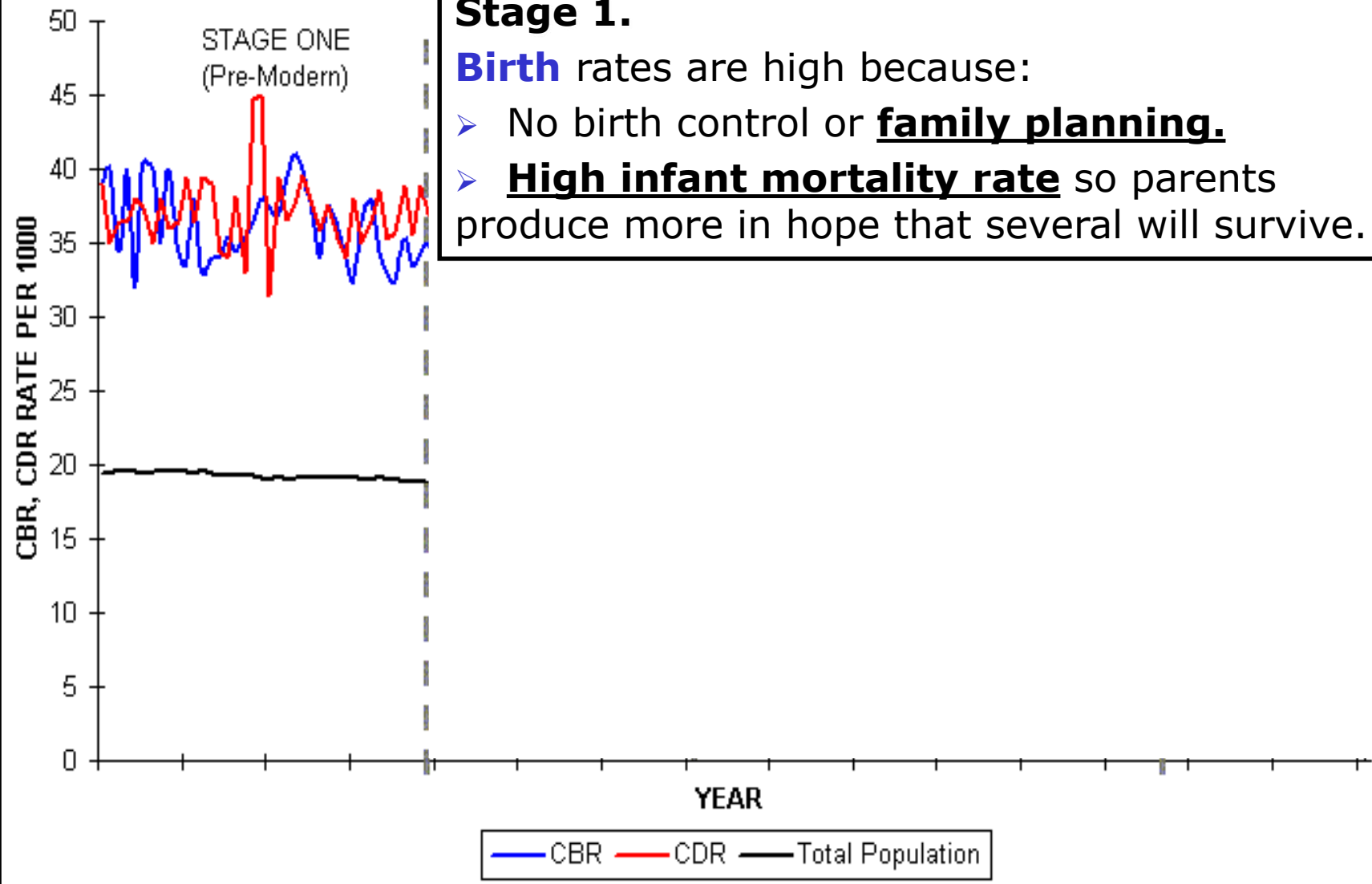
Stage 1.
Birth rates are high because:
➤ No birth control or **family planning.**



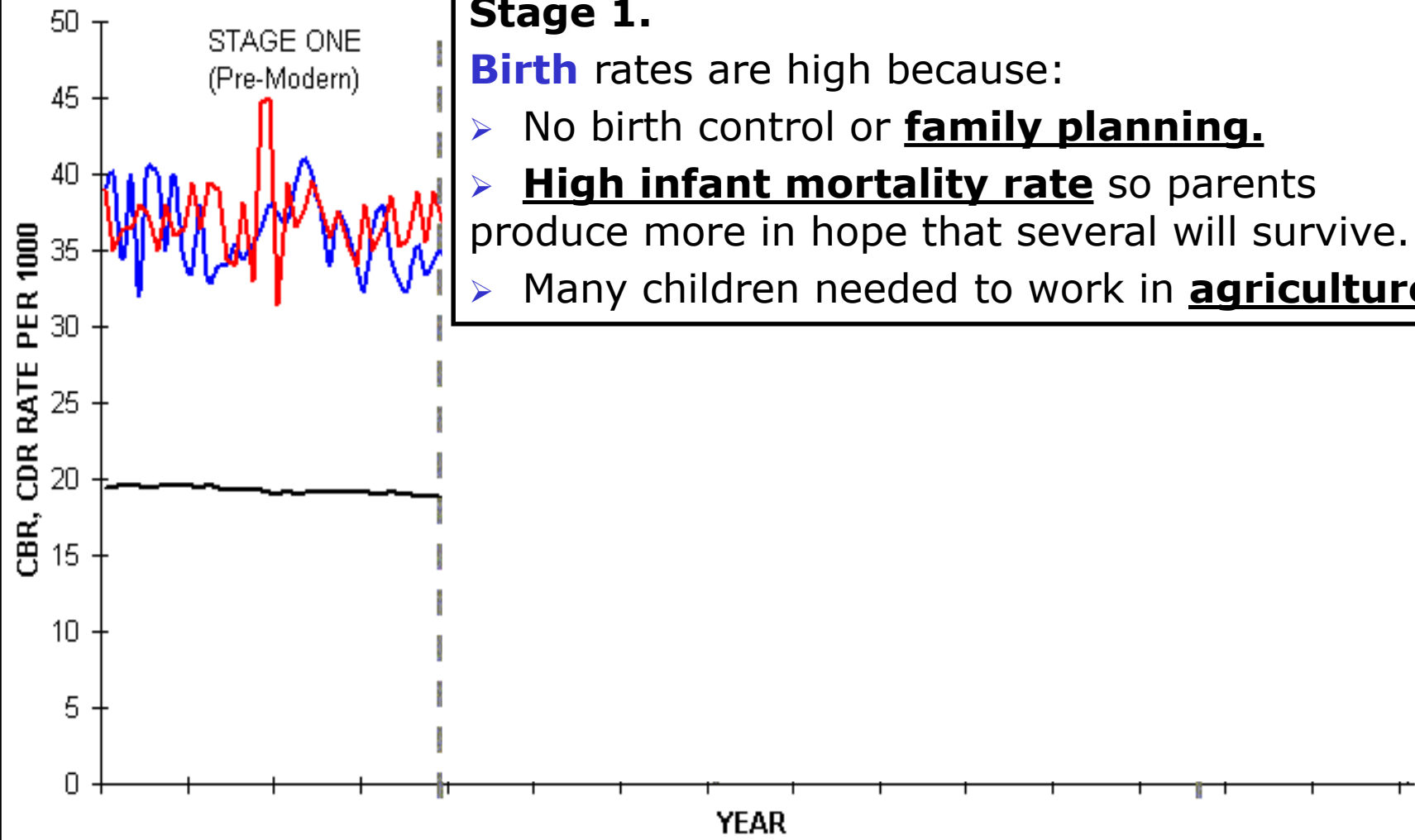
THE DEMOGRAPHIC TRANSITION MODEL

Stage 1.

- Birth** rates are high because:
- No birth control or **family planning.**
 - **High infant mortality rate** so parents produce more in hope that several will survive.



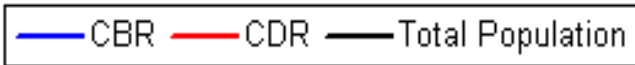
THE DEMOGRAPHIC TRANSITION MODEL



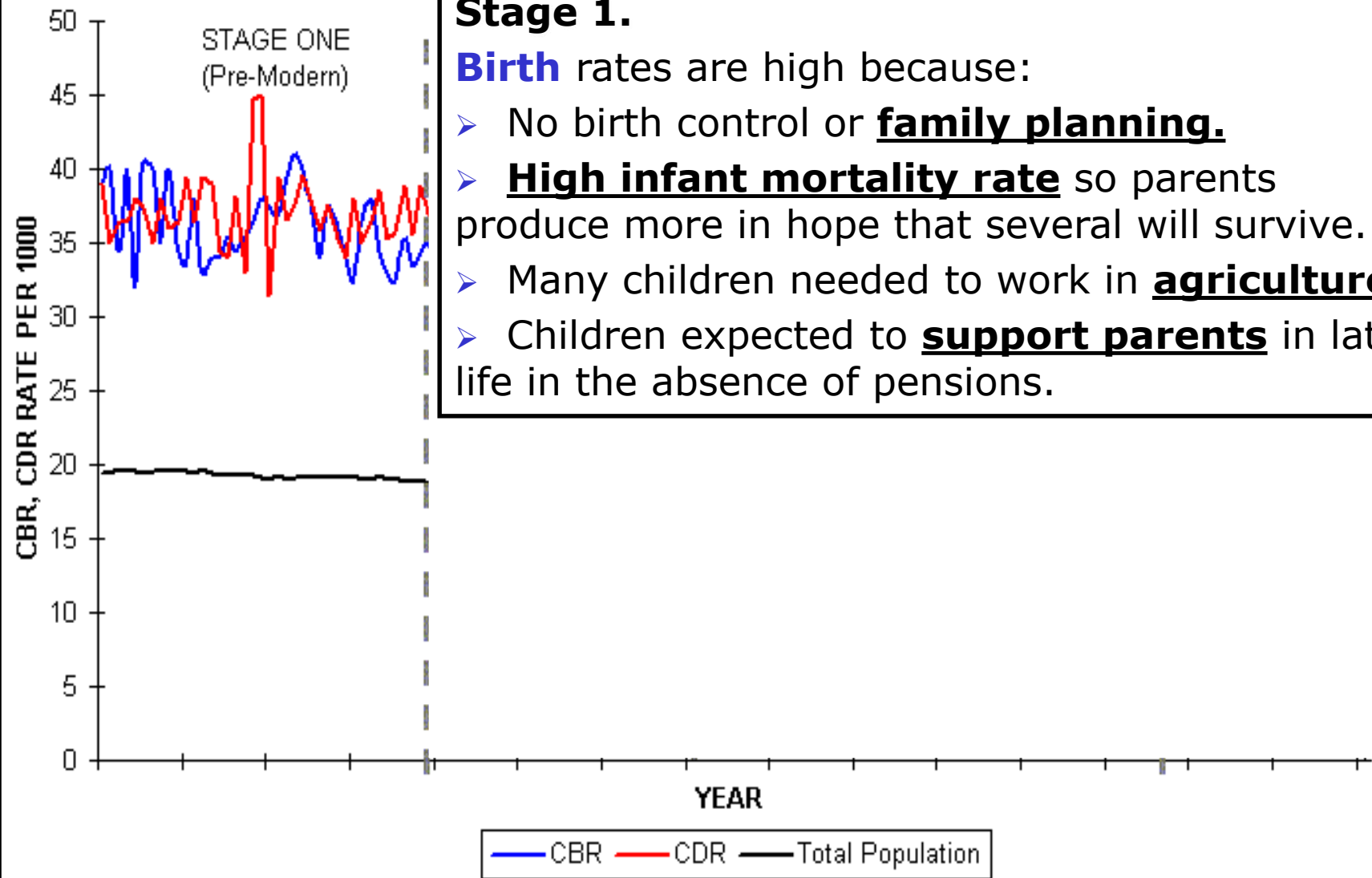
Stage 1.

Birth rates are high because:

- No birth control or **family planning**.
- **High infant mortality rate** so parents produce more in hope that several will survive.
- Many children needed to work in **agriculture**



THE DEMOGRAPHIC TRANSITION MODEL

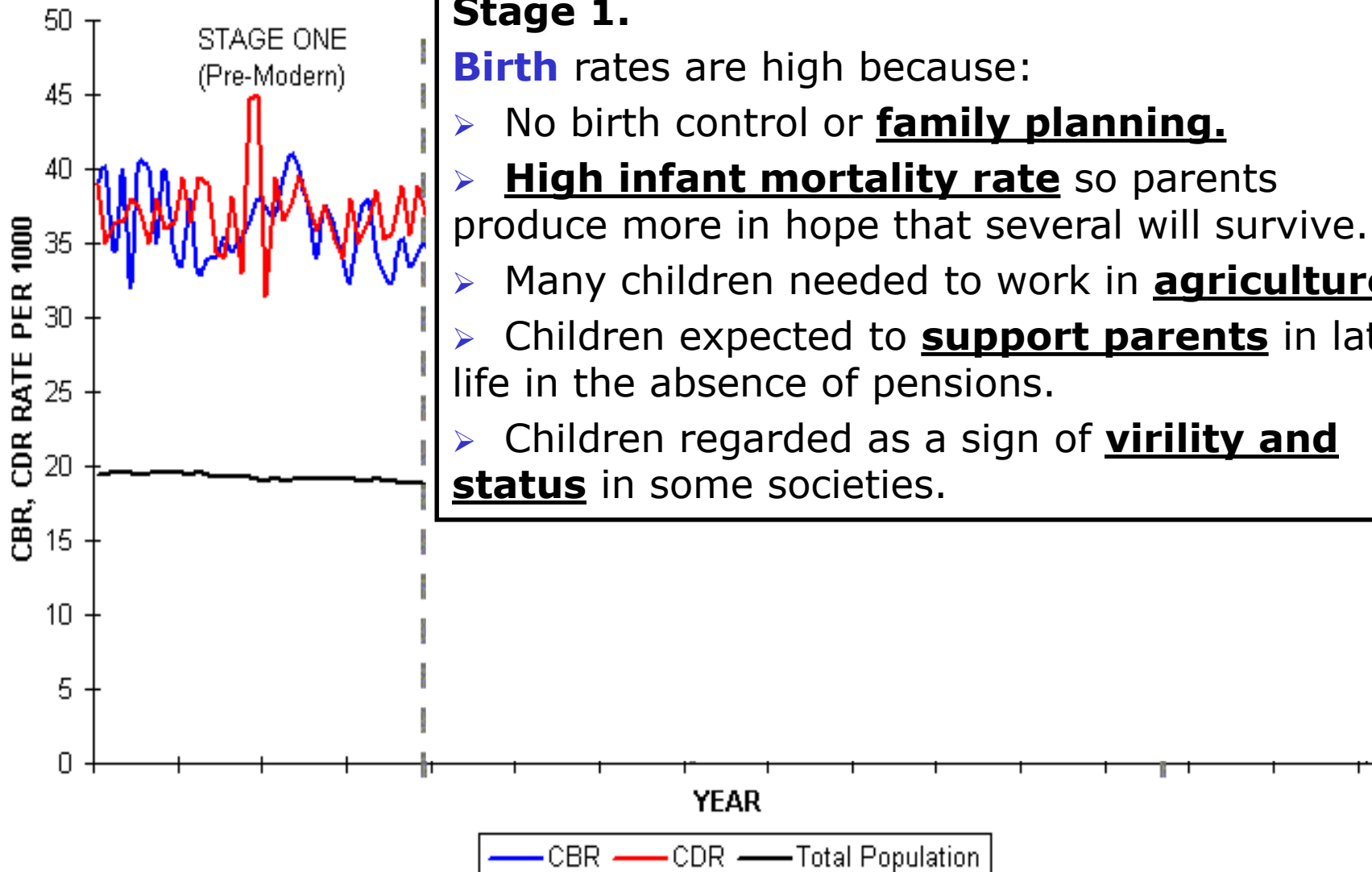


Stage 1.

Birth rates are high because:

- No birth control or **family planning**.
- **High infant mortality rate** so parents produce more in hope that several will survive.
- Many children needed to work in **agriculture**
- Children expected to **support parents** in later life in the absence of pensions.

THE DEMOGRAPHIC TRANSITION MODEL

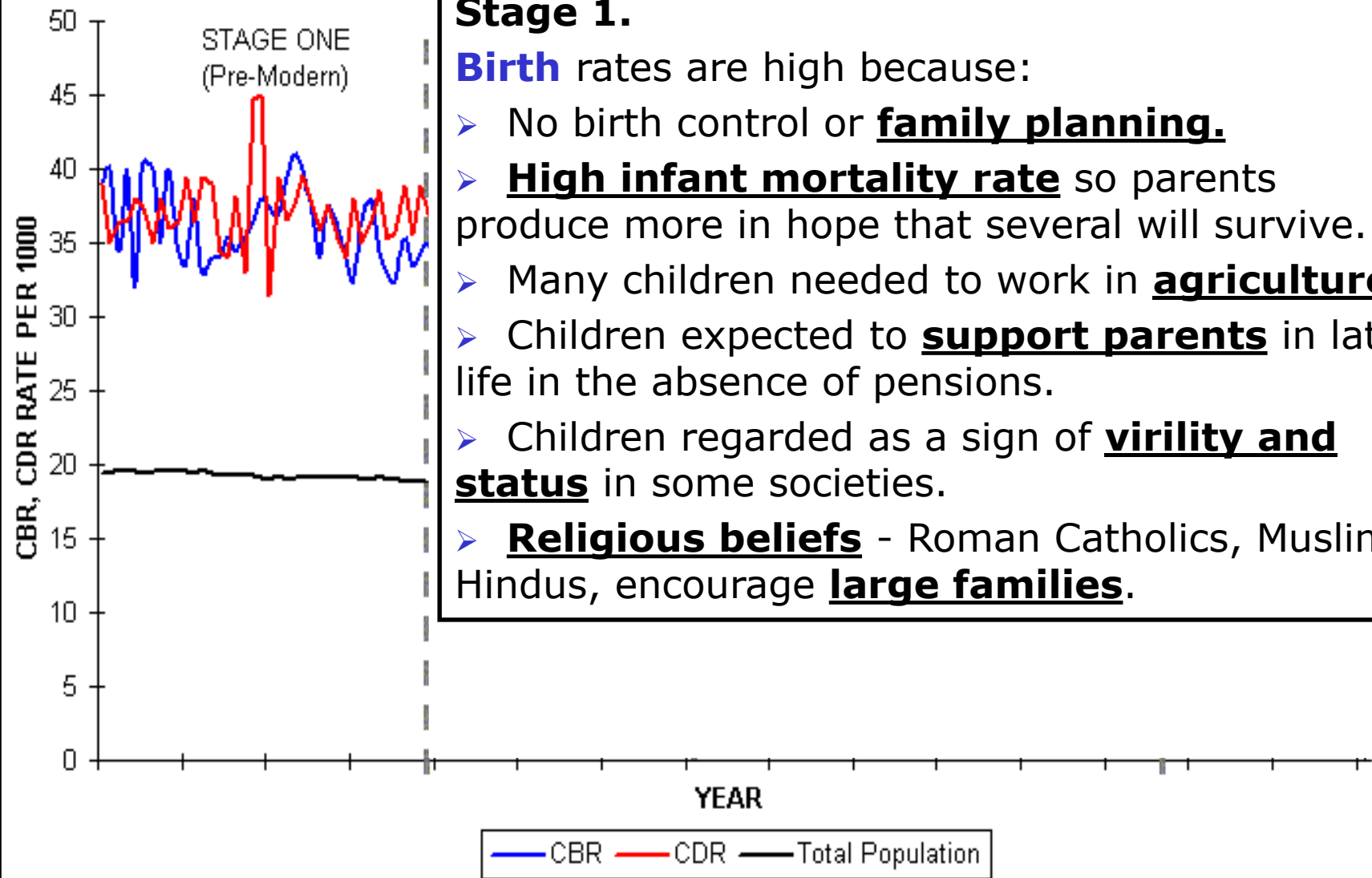


Stage 1.

Birth rates are high because:

- No birth control or **family planning**.
- **High infant mortality rate** so parents produce more in hope that several will survive.
- Many children needed to work in **agriculture**
- Children expected to **support parents** in later life in the absence of pensions.
- Children regarded as a sign of **virility and status** in some societies.

THE DEMOGRAPHIC TRANSITION MODEL



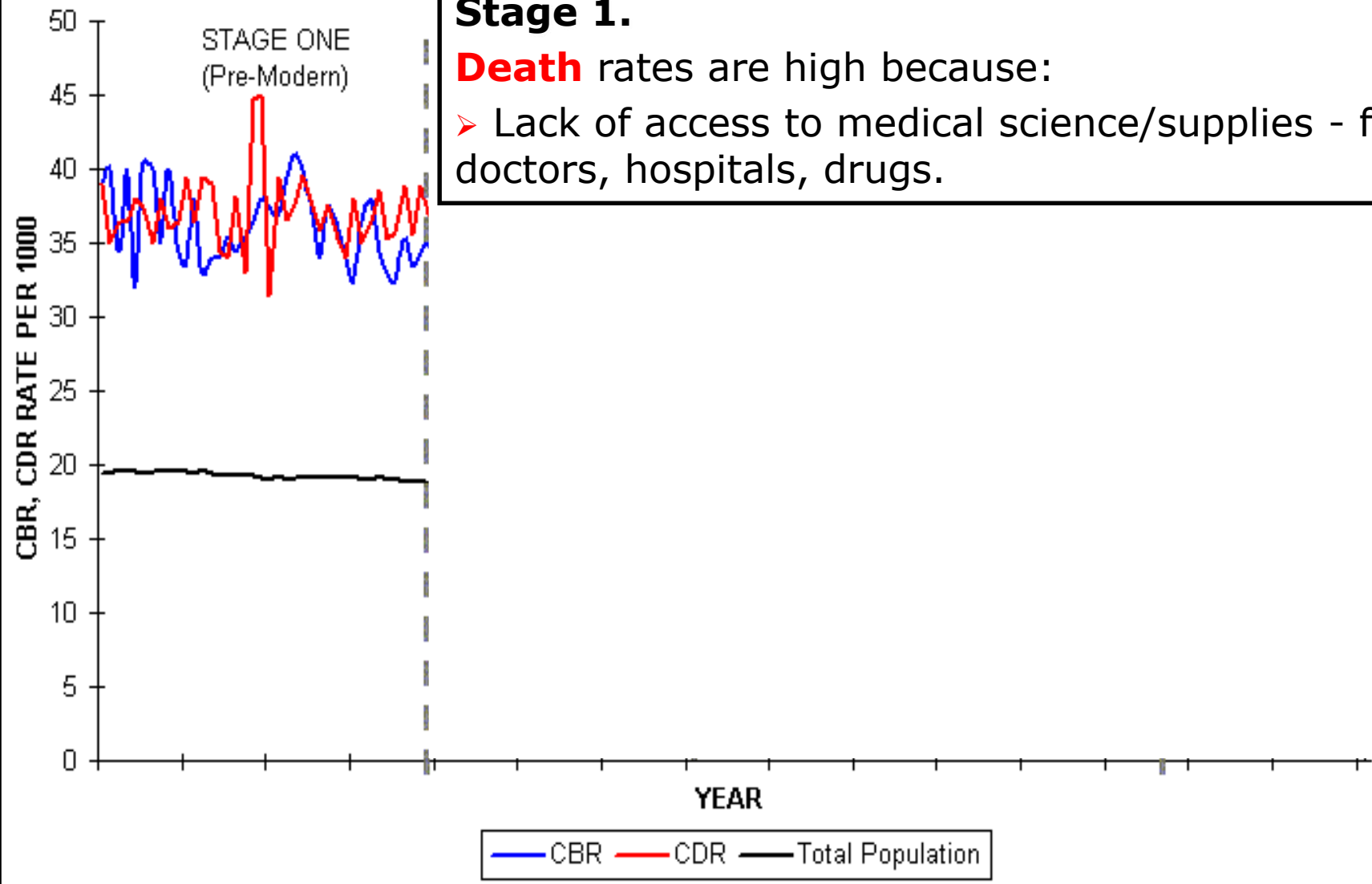
Stage 1.

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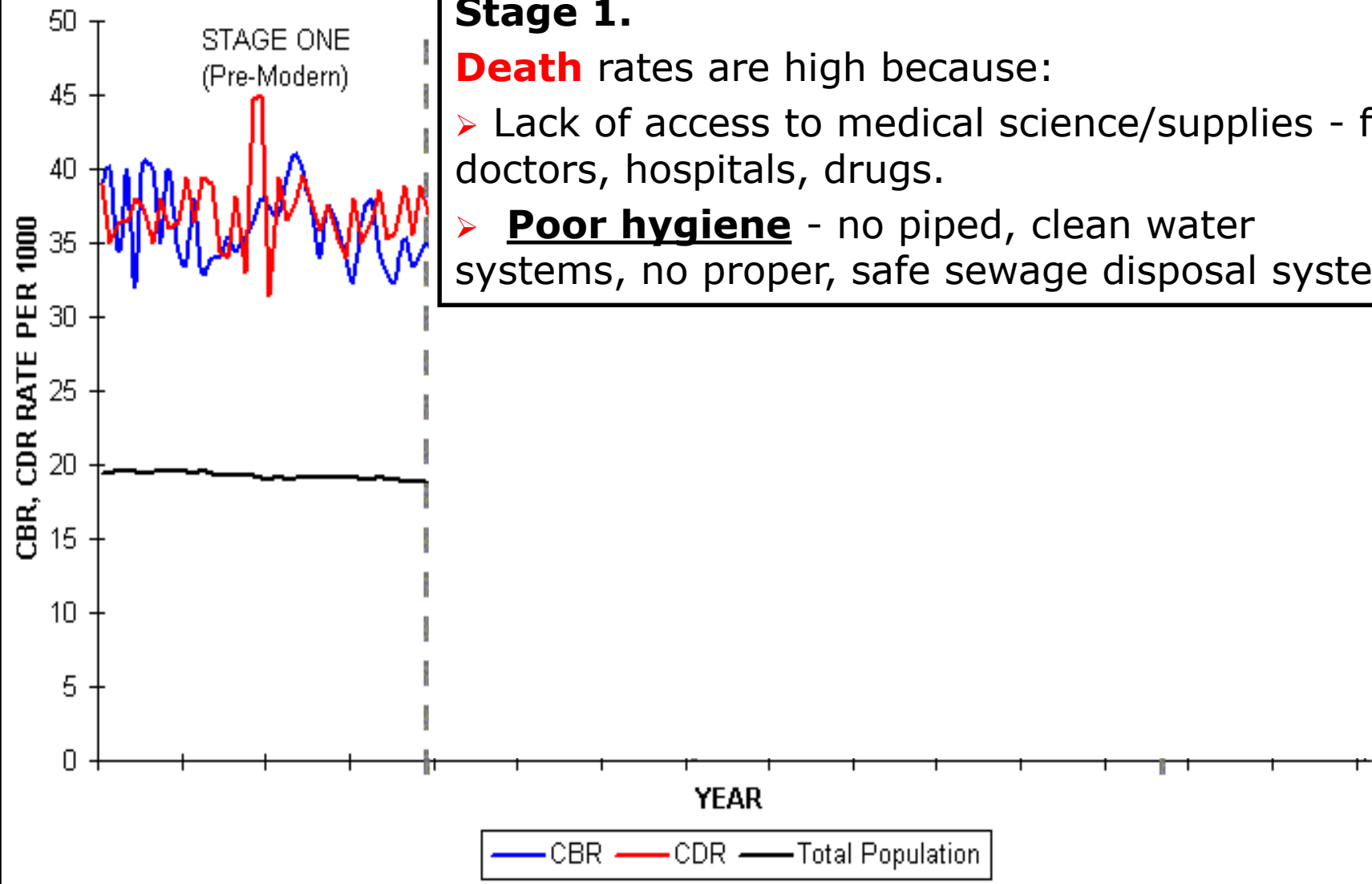
- No birth control or **family planning**.
- **High infant mortality rate** so parents produce more in hope that several will survive.
- Many children needed to work in **agriculture**
- Children expected to **support parents** in later life in the absence of pensions.
- Children regarded as a sign of **virility and status** in some societies.
- **Religious beliefs** - Roman Catholics, Muslims, Hindus, encourage **large families**.

THE DEMOGRAPHIC TRANSITION MODEL

Stage 1.
Death rates are high because:
➤ Lack of access to medical science/supplies - few doctors, hospitals, drugs.



THE DEMOGRAPHIC TRANSITION MODEL

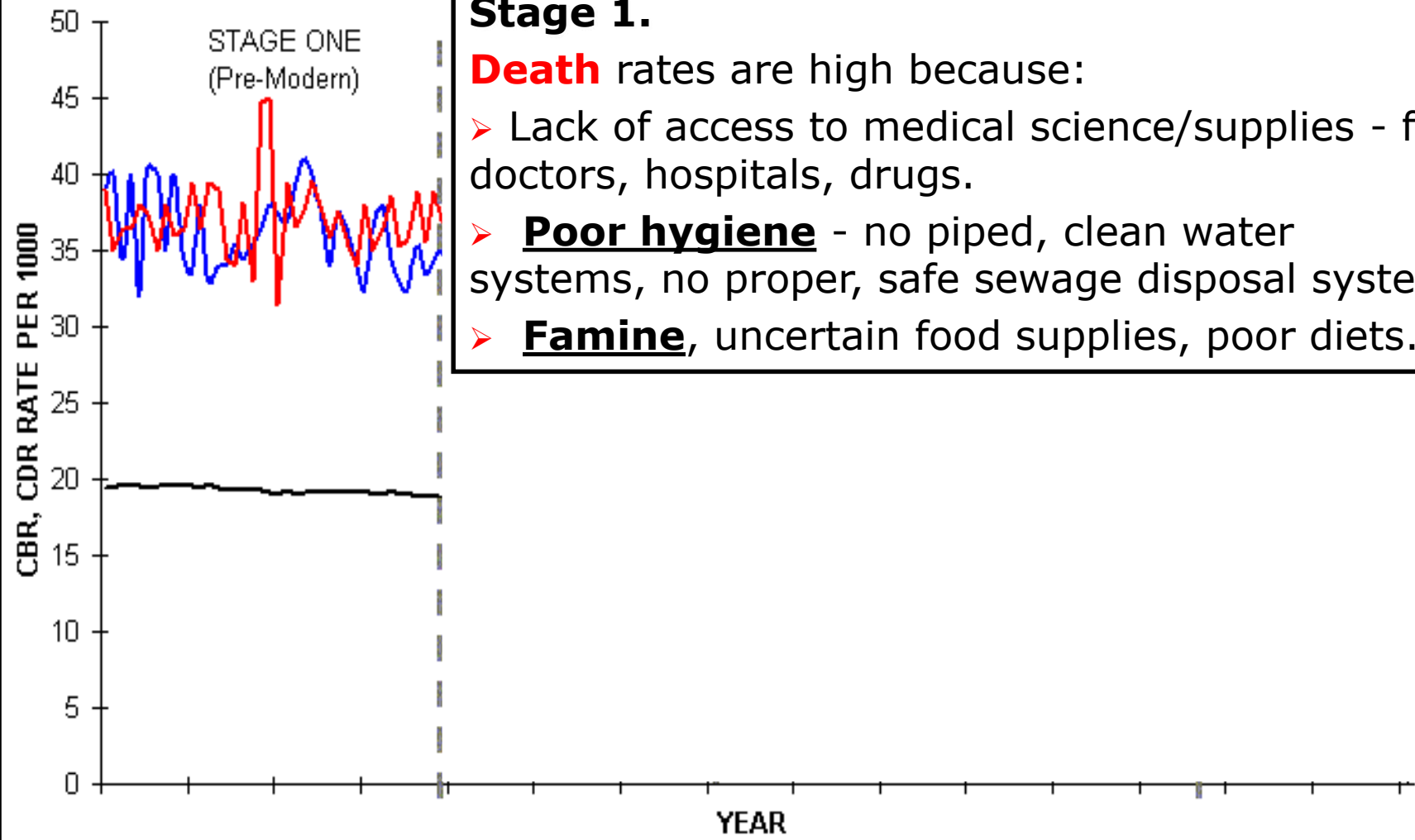


Stage 1.

Death rates are high because:

- Lack of access to medical science/supplies - few doctors, hospitals, drugs.
- **Poor hygiene** - no piped, clean water systems, no proper, safe sewage disposal systems.

THE DEMOGRAPHIC TRANSITION MODEL

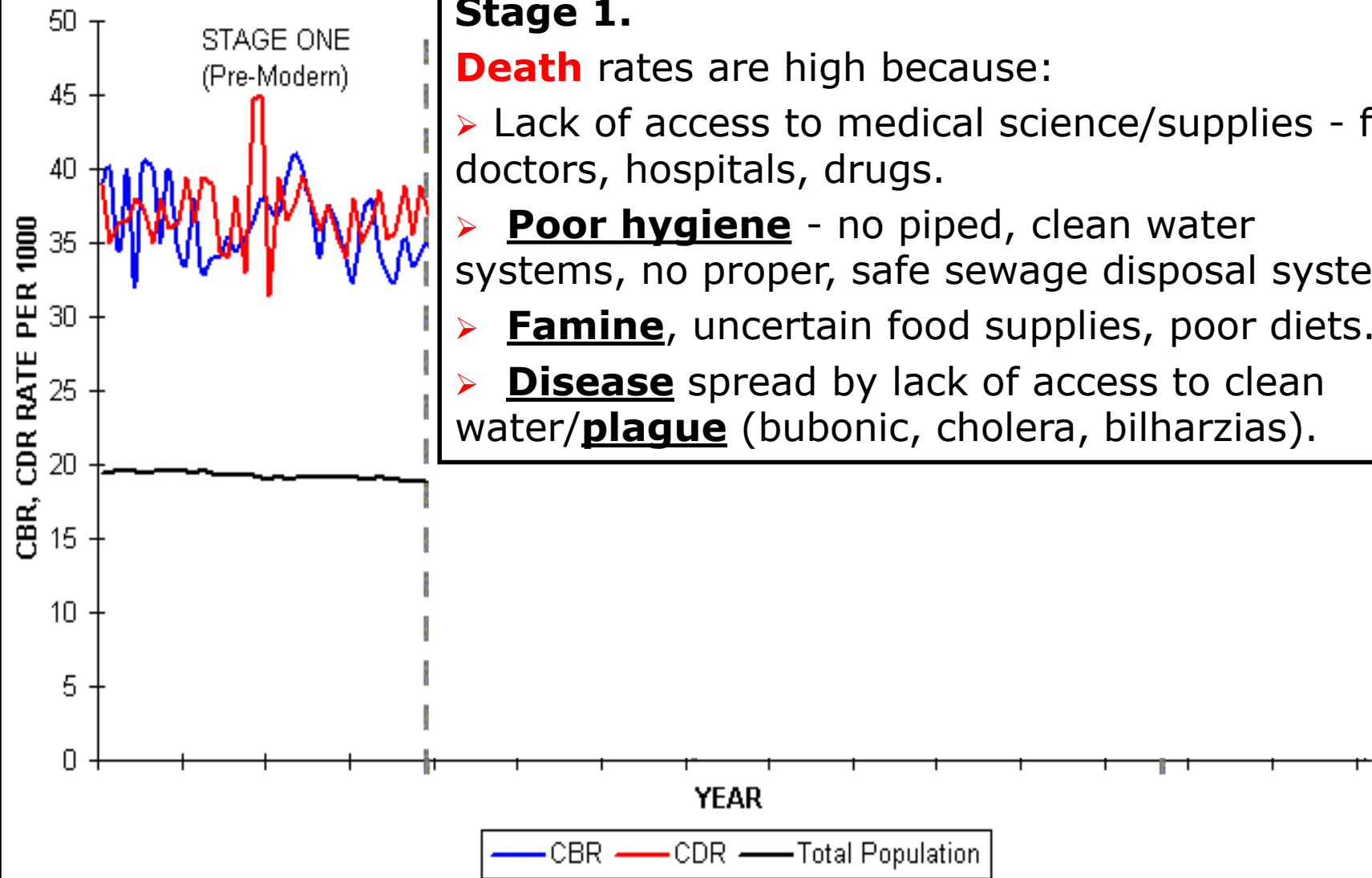


Stage 1.
Death rates are high because:

- Lack of access to medical science/supplies - few doctors, hospitals, drugs.
- **Poor hygiene** - no piped, clean water systems, no proper, safe sewage disposal systems.
- **Famine**, uncertain food supplies, poor diets.

— CBR — CDR — Total Population

THE DEMOGRAPHIC TRANSITION MODEL



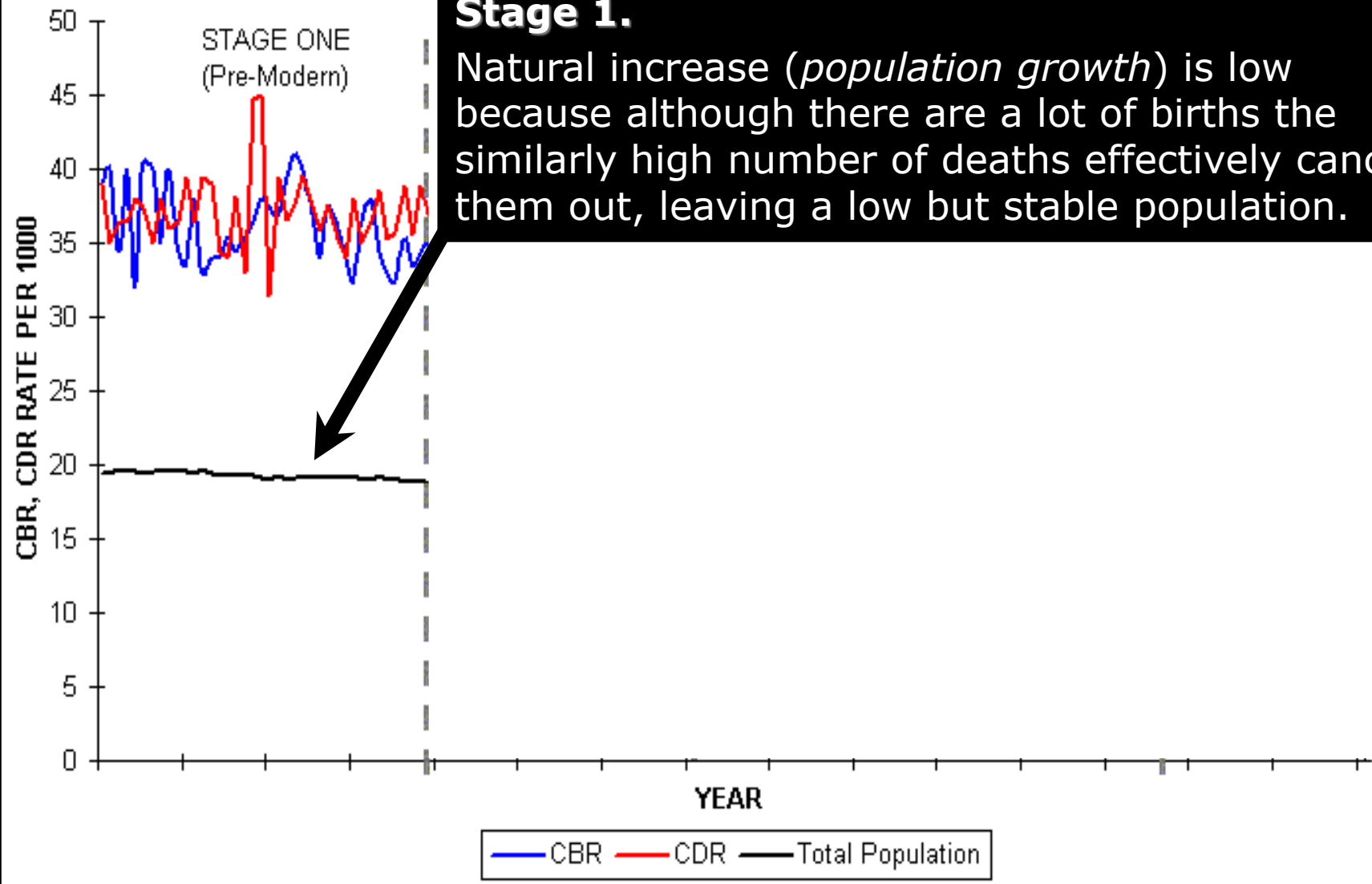
Stage 1.

Death rates are high because:

- Lack of access to medical science/supplies - few doctors, hospitals, drugs.
- **Poor hygiene** - no piped, clean water systems, no proper, safe sewage disposal systems.
- **Famine**, uncertain food supplies, poor diets.
- **Disease** spread by lack of access to clean water/**plague** (bubonic, cholera, bilharzias).

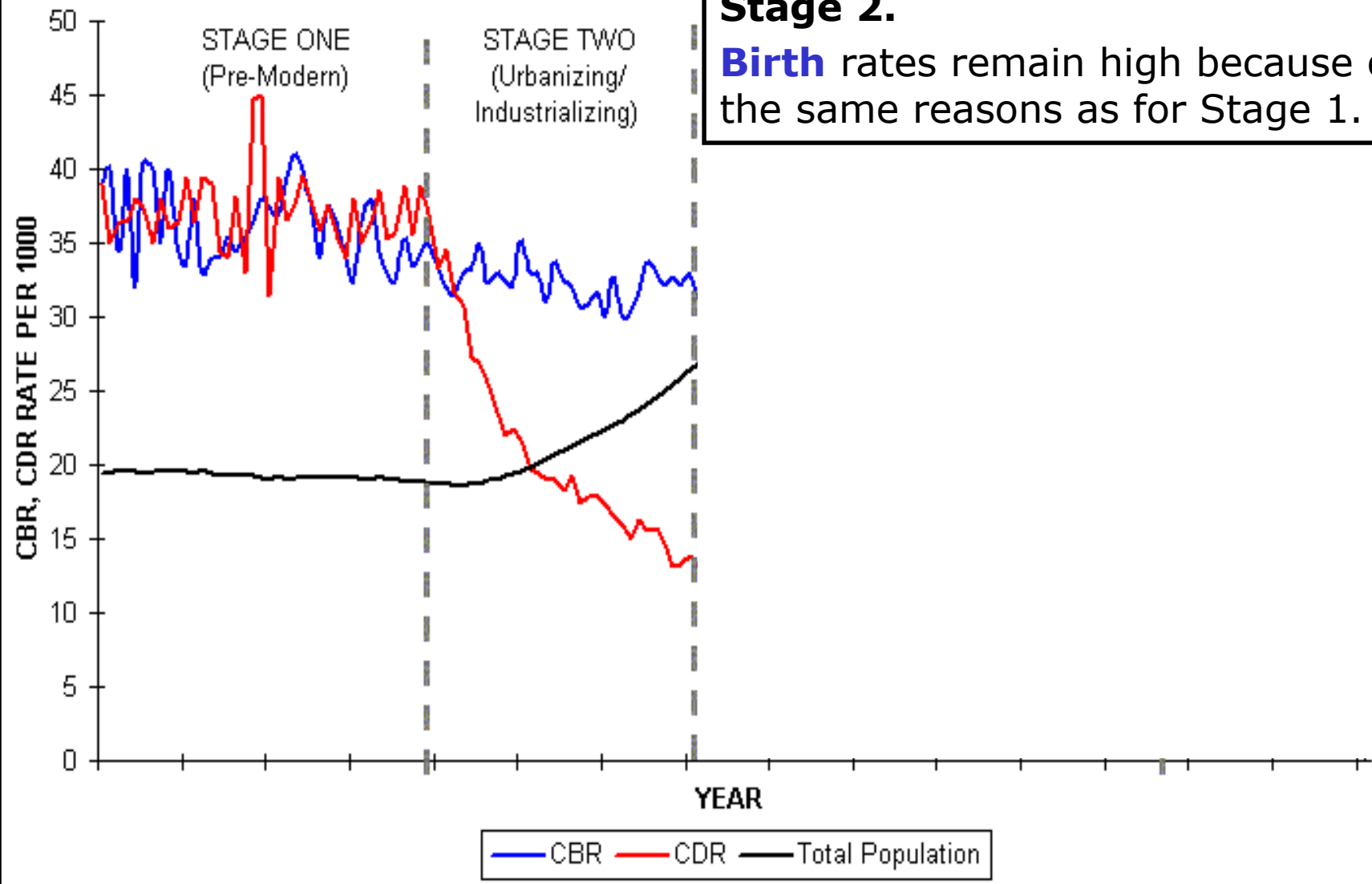
THE DEMOGRAPHIC TRANSITION MODEL

Stage 1.
Natural increase (*population growth*) is low because although there are a lot of births the similarly high number of deaths effectively cancels them out, leaving a low but stable population.

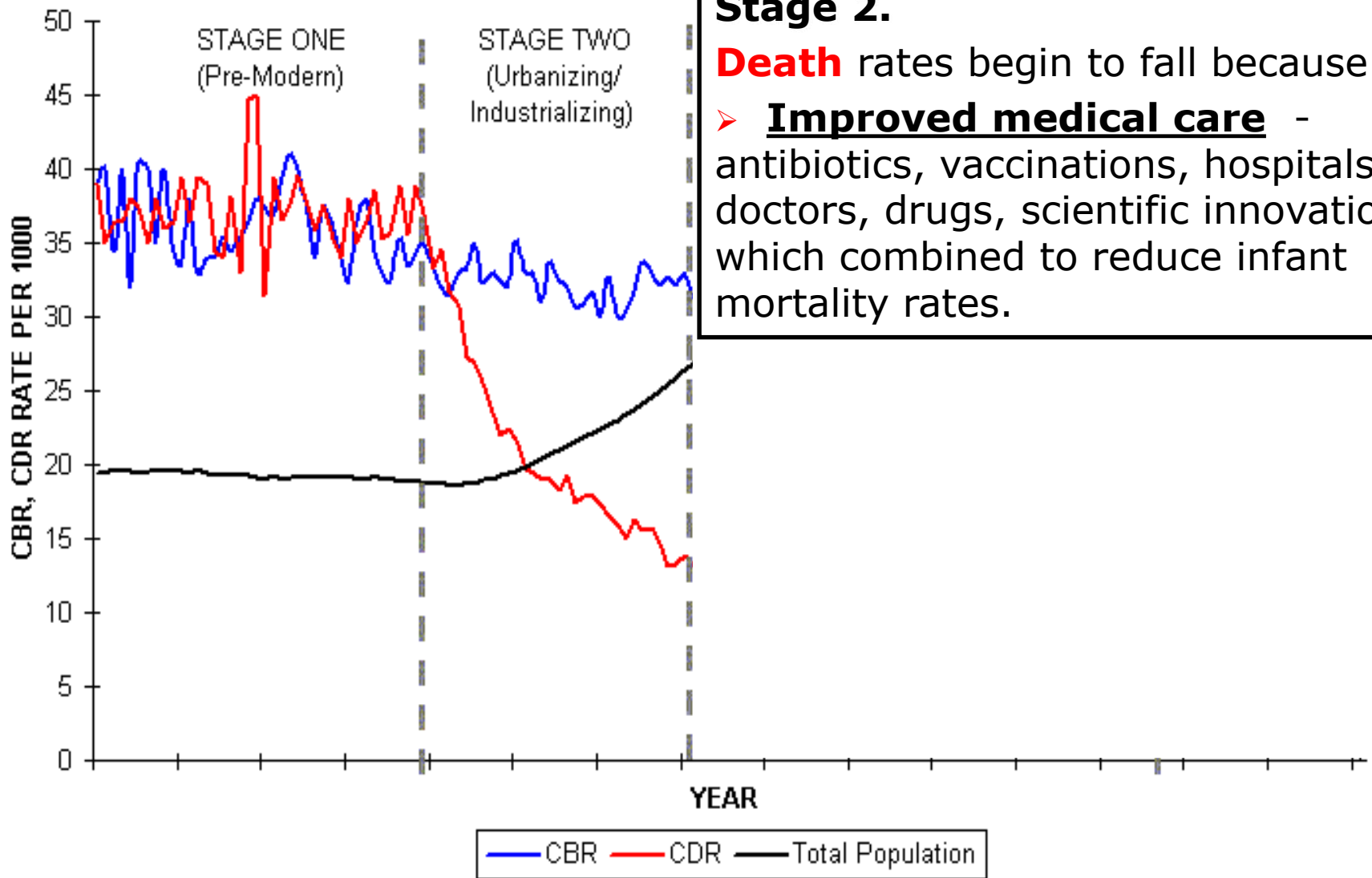


THE DEMOGRAPHIC TRANSITION MODEL

Stage 2.
Birth rates remain high because of all the same reasons as for Stage 1.

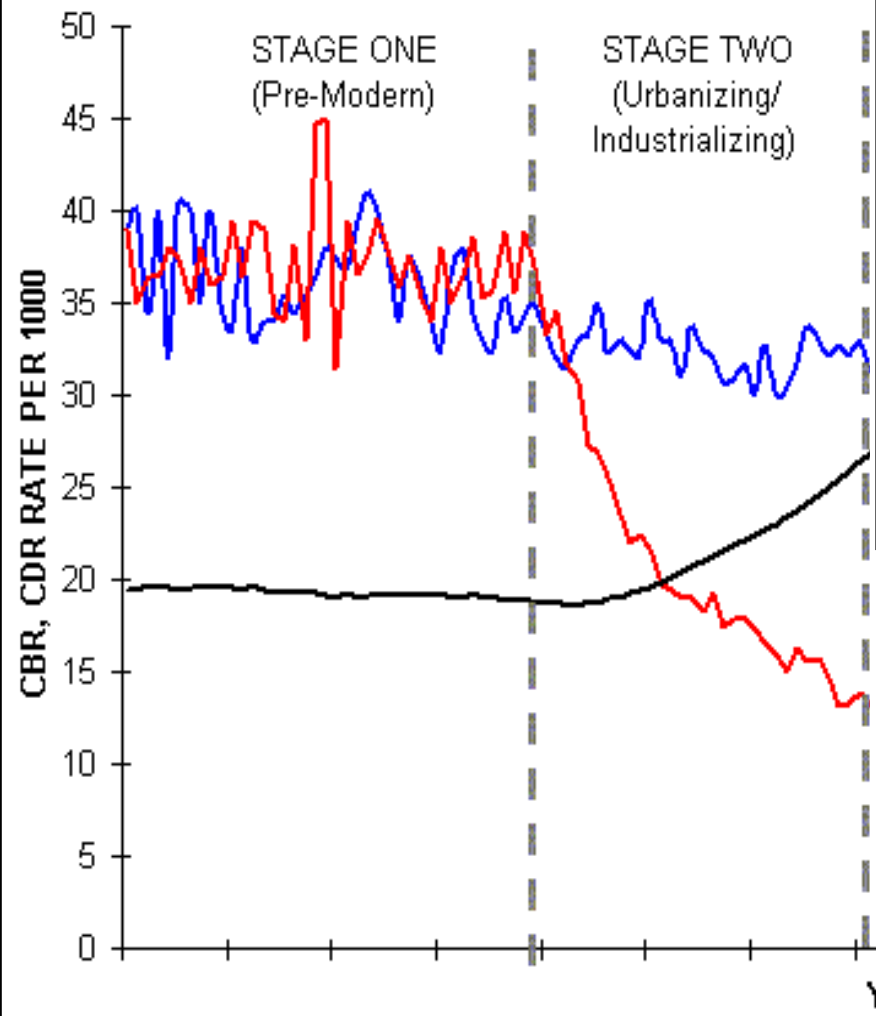


THE DEMOGRAPHIC TRANSITION MODEL



Stage 2.
Death rates begin to fall because:
➤ **Improved medical care** - antibiotics, vaccinations, hospitals, doctors, drugs, scientific innovations which combined to reduce infant mortality rates.

THE DEMOGRAPHIC TRANSITION MODEL

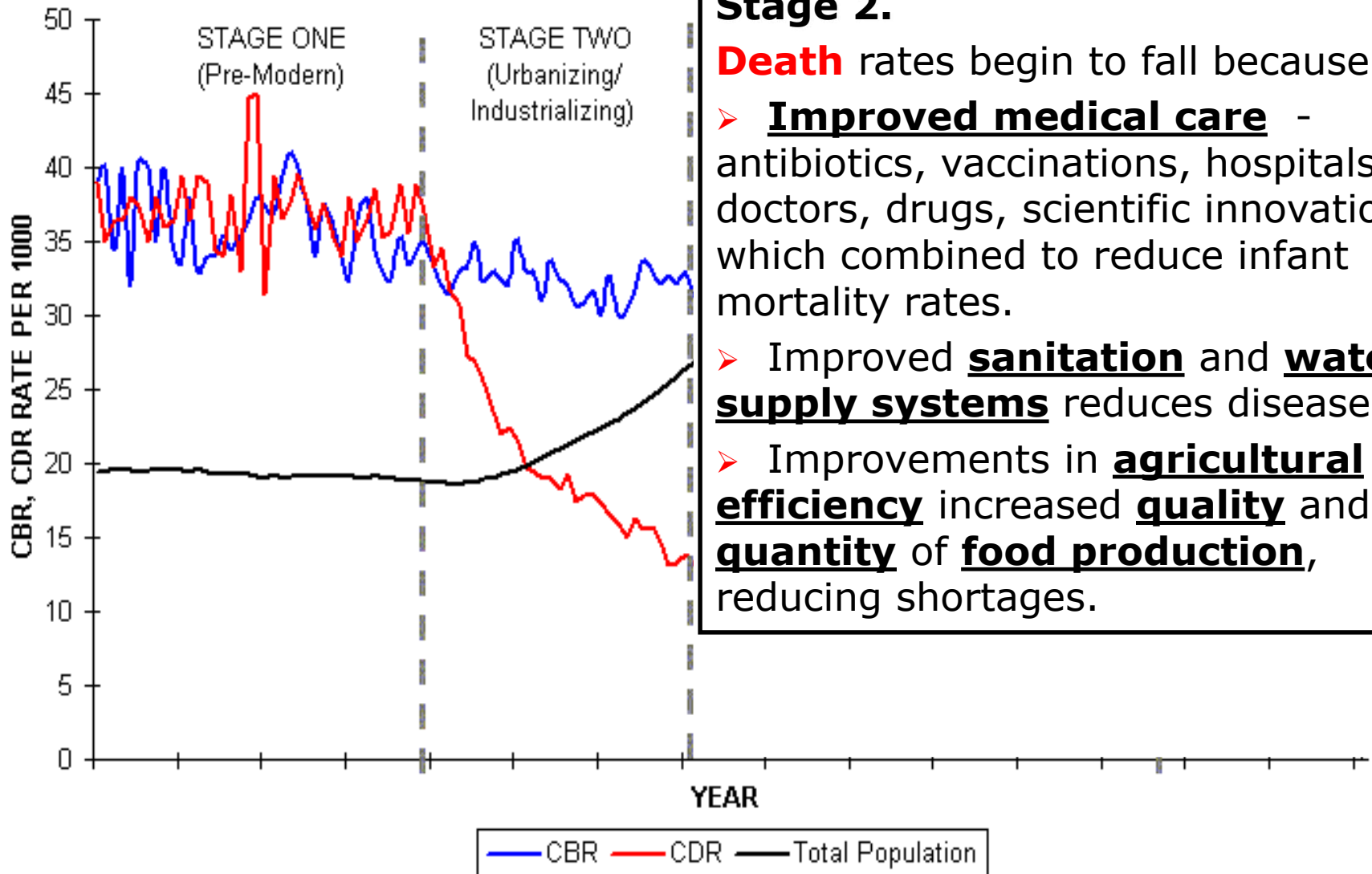


Stage 2.
Death rates begin to fall because:

- **Improved medical care** - antibiotics, vaccinations, hospitals, doctors, drugs, scientific innovations which combined to reduce infant mortality rates.
- Improved **sanitation** and **water supply systems** reduces disease.

— CBR — CDR — Total Population

THE DEMOGRAPHIC TRANSITION MODEL

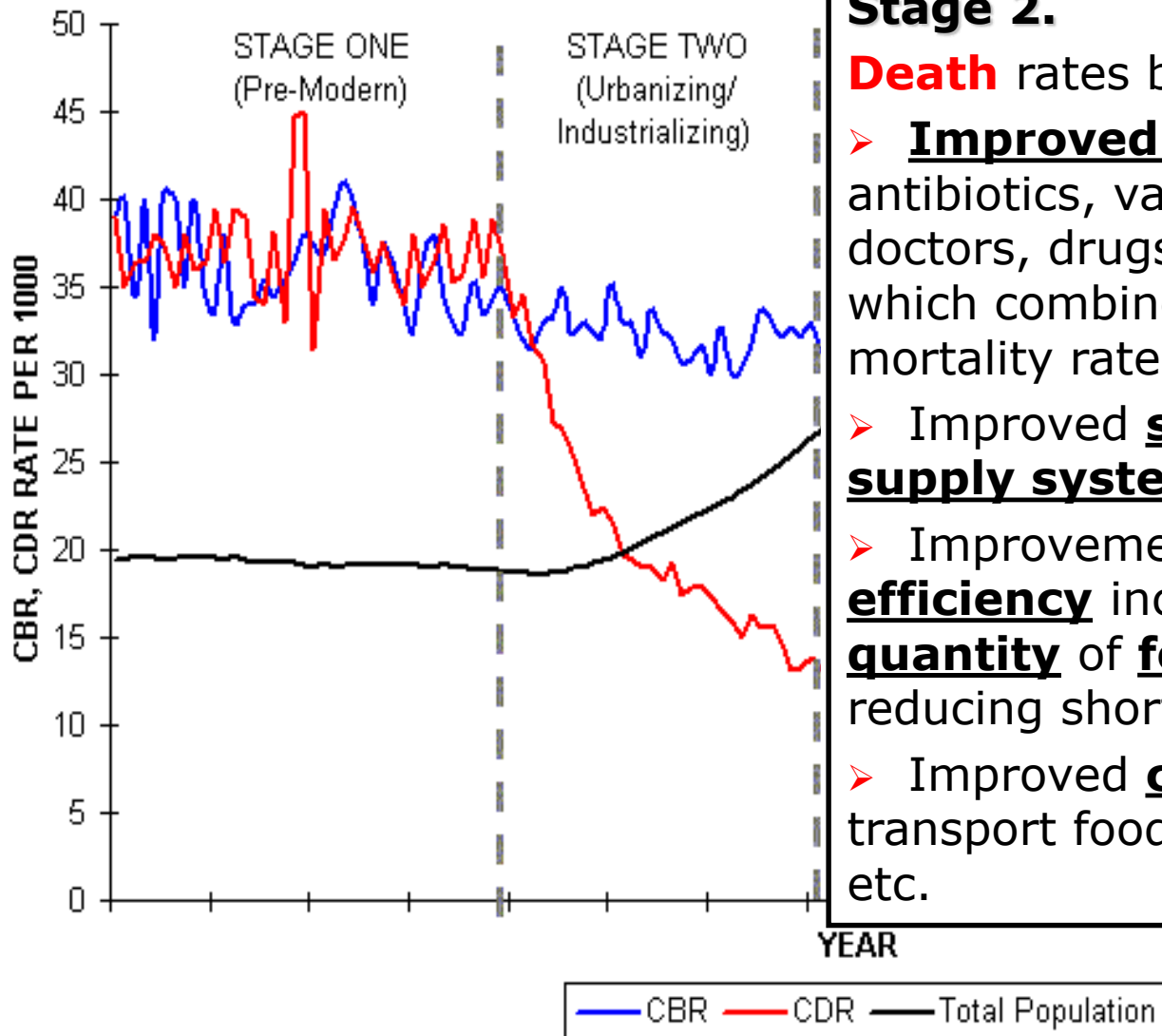


Stage 2.

Death rates begin to fall because:

- **Improved medical care** - antibiotics, vaccinations, hospitals, doctors, drugs, scientific innovations which combined to reduce infant mortality rates.
- Improved **sanitation** and **water supply systems** reduces disease.
- Improvements in **agricultural efficiency** increased **quality** and **quantity** of **food production**, reducing shortages.

THE DEMOGRAPHIC TRANSITION MODEL

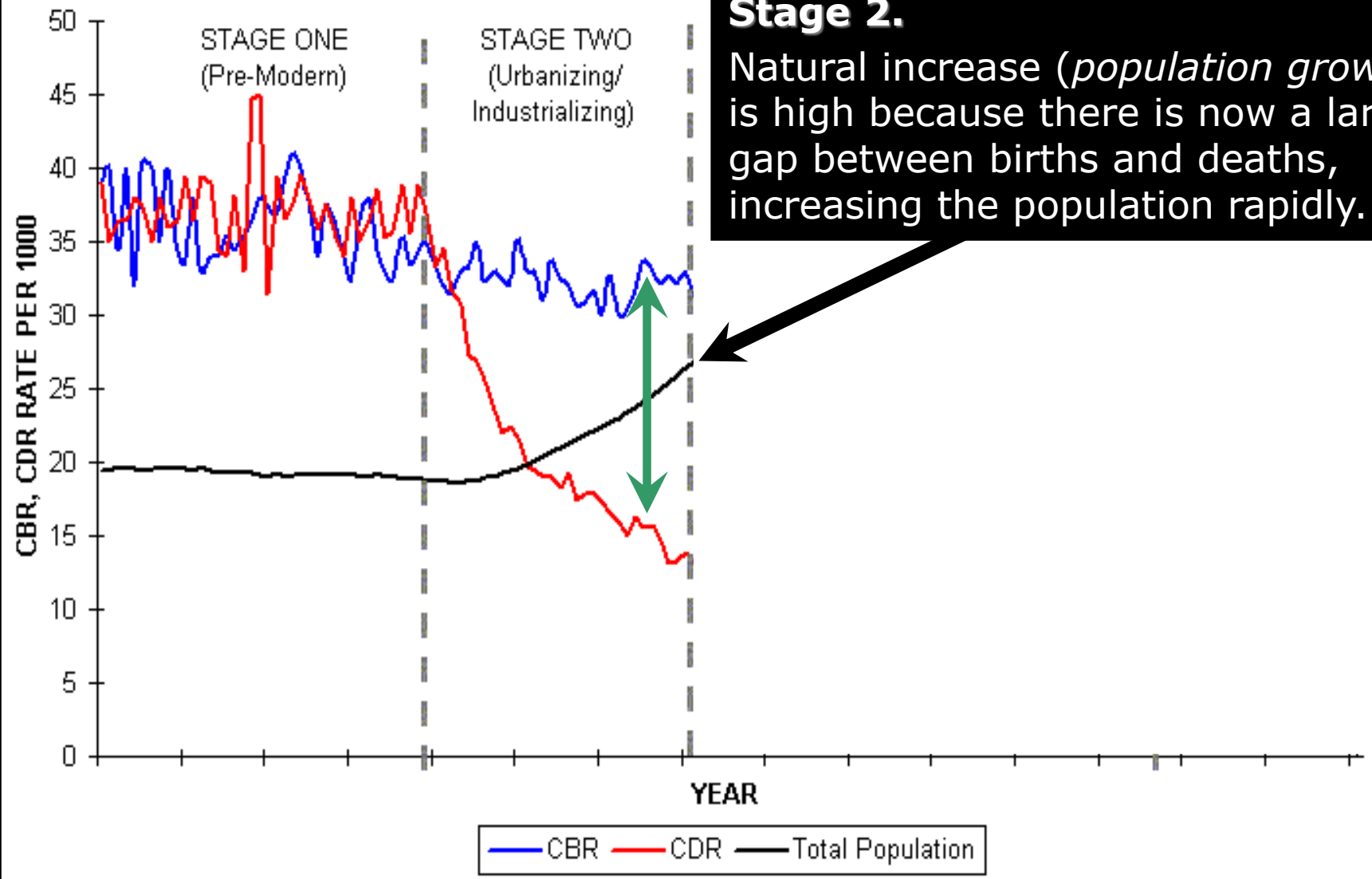


Stage 2.

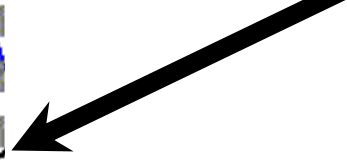
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- Improved **communications** to transport food, doctors, medicines etc.

THE DEMOGRAPHIC TRANSITION MODEL



Stage 2.
Natural increase (*population growth*) is high because there is now a large gap between births and deaths, increasing the population rapidly.



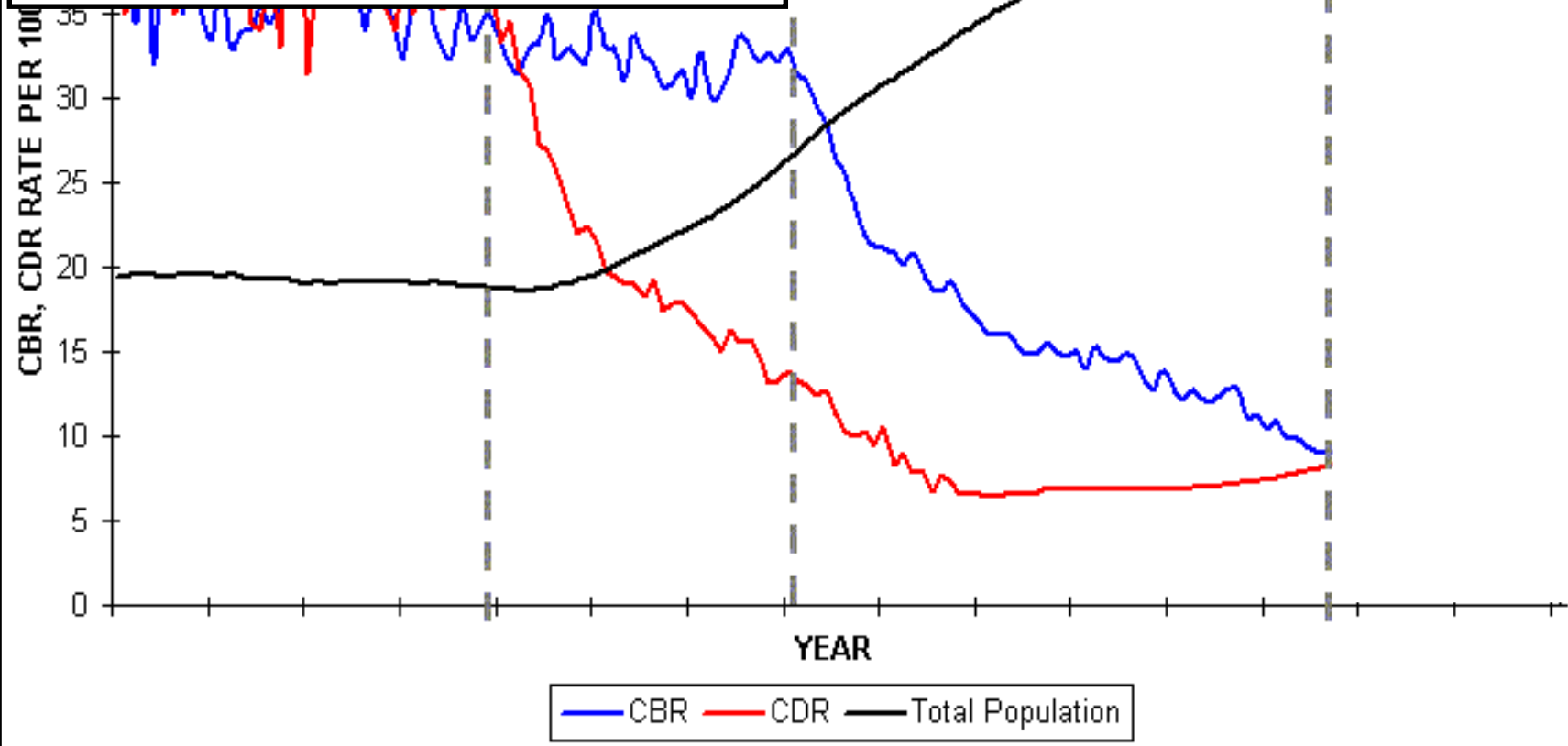
Stage 3.

Birth rates begin to fall because:

- **Lower infant mortality rate** means less pressure to have many children.

PHIC TRANSITION MODEL

STAGE THREE
(Mature Industrial)



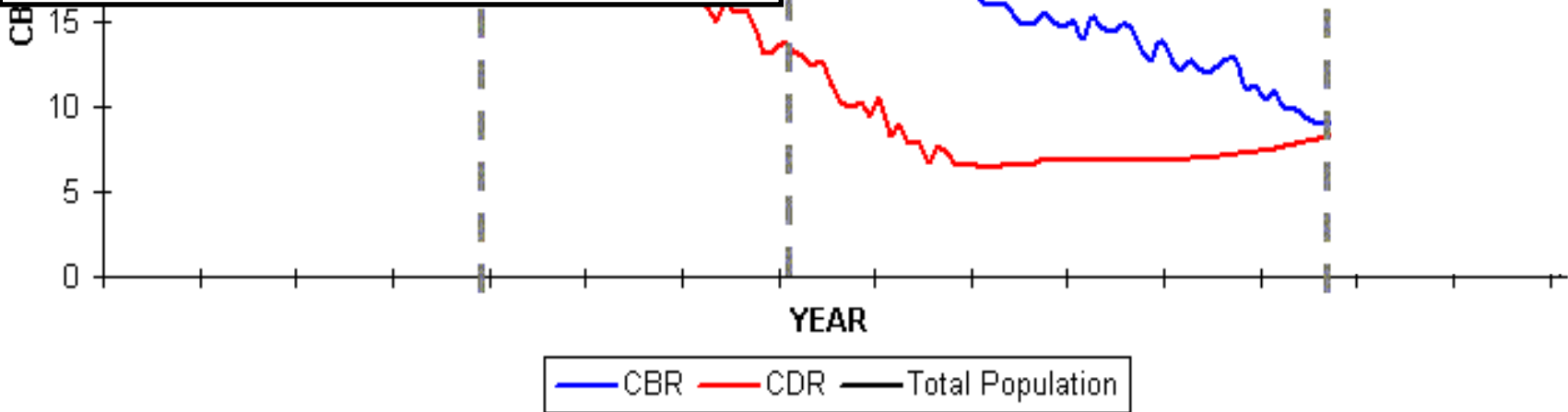
Stage 3.

Birth rates begin to fall because:

- **Lower infant mortality rate** means less pressure to have many children.
- Widespread availability and knowledge of **family planning** - contraceptives, abortion, sterilisation and government incentives (anti-natalist policies -China).

PHIC TRANSITION MODEL

STAGE THREE
(Mature Industrial)

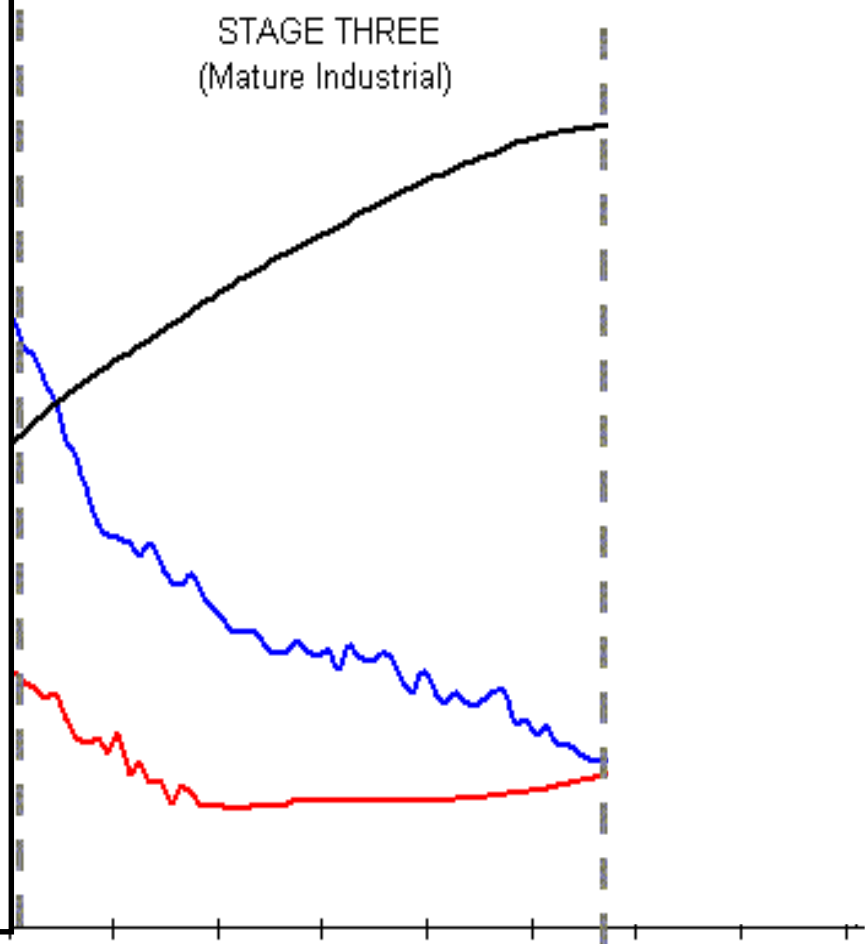


Stage 3.

Birth rates begin to fall because:

- **Lower infant mortality rate** means less pressure to have many children.
- Widespread availability and knowledge of **family planning** - contraceptives, abortion, sterilisation and government incentives (anti-natalist policies -China).
- Change from agrarian to an **industrial society** and **mechanisation** leads to a reduction in workforce requirements.

PHIC TRANSITION MODEL



STAGE THREE
(Mature Industrial)

YEAR

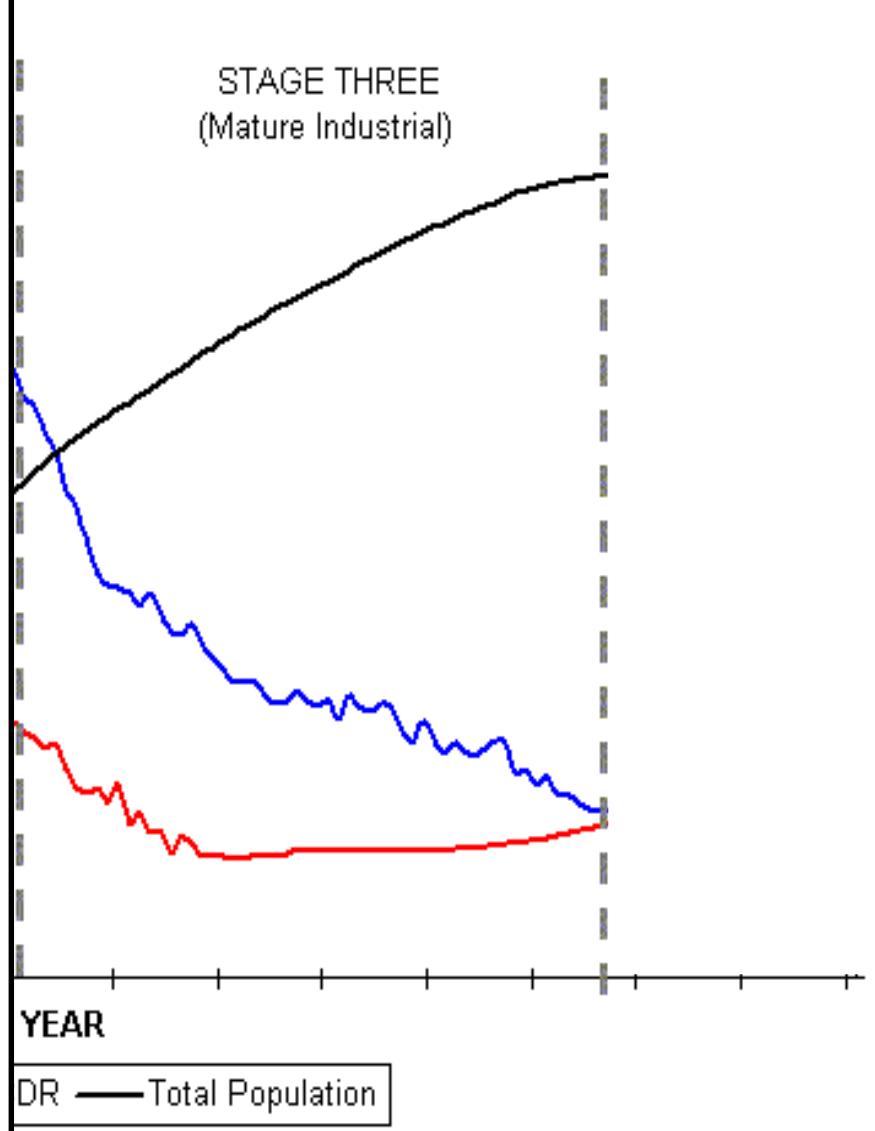
— CBR — CDR — Total Population

Stage 3.

Birth rates begin to fall because:

- **Lower infant mortality rate** means less pressure to have many children.
- Widespread availability and knowledge of **family planning** - contraceptives, abortion, sterilisation and government incentives (anti-natalist policies -China).
- Change from agrarian to an **industrial society** and **mechanisation** leads to a reduction in workforce requirements.
- **Welfare systems** i.e. **pensions** meant children no longer needed to care for parents in old age.

PHIC TRANSITION MODEL



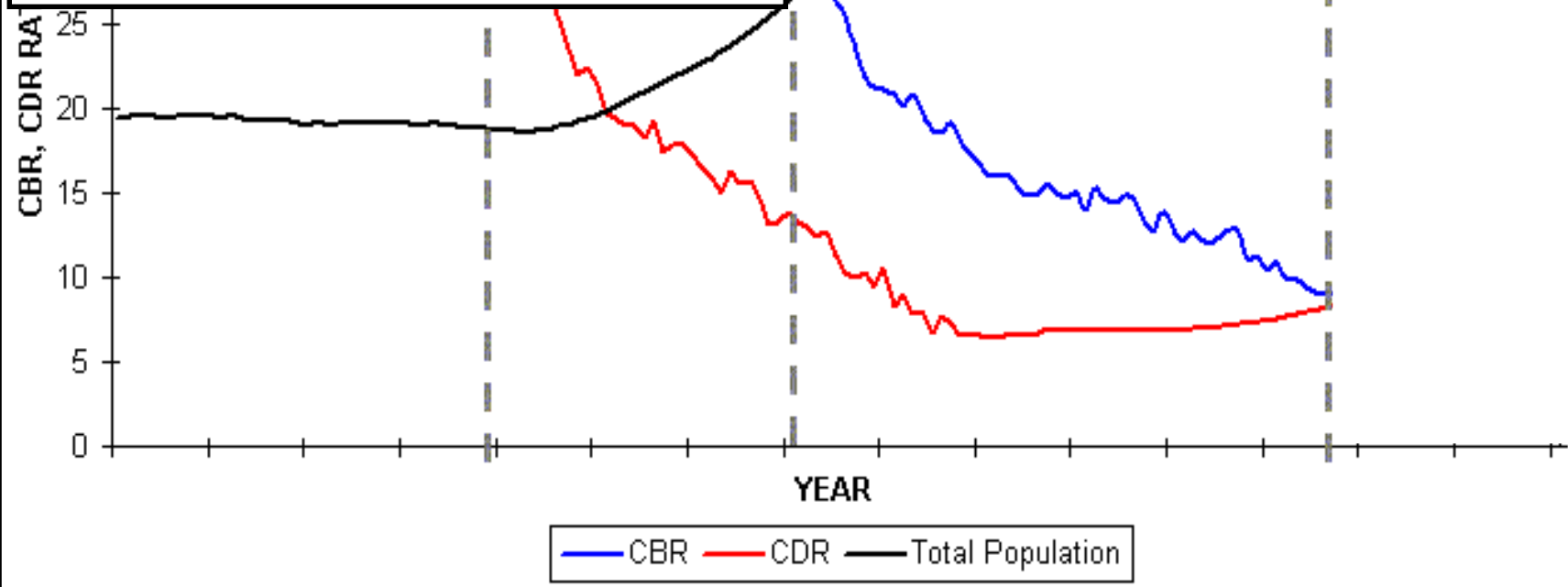
Stage 3.

Birth rates begin to fall because:

- **Emancipation of women** and **improved educational opportunities** has increased status of women, enabling them to pursue careers and so delay child-bearing.

PHIC TRANSITION MODEL

STAGE THREE
(Mature Industrial)



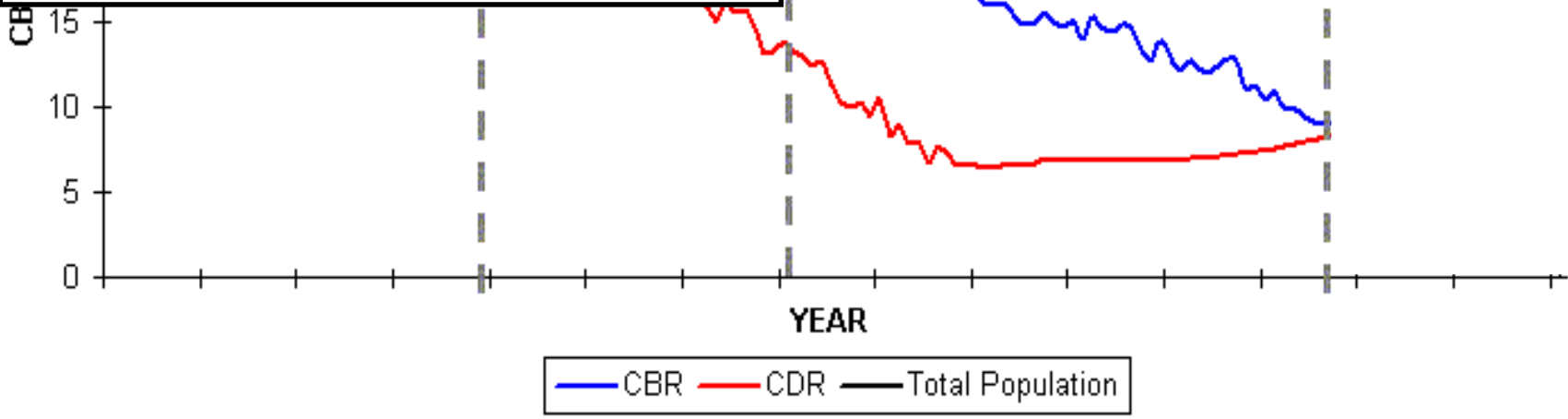
Stage 3.

Birth rates begin to fall because:

- **Emancipation of women** and **improved educational opportunities** has increased status of women, enabling them to pursue careers and so delay child-bearing.
- Large families increasingly viewed as an **economic** and **social burden**.

PHIC TRANSITION MODEL

STAGE THREE
(Mature Industrial)



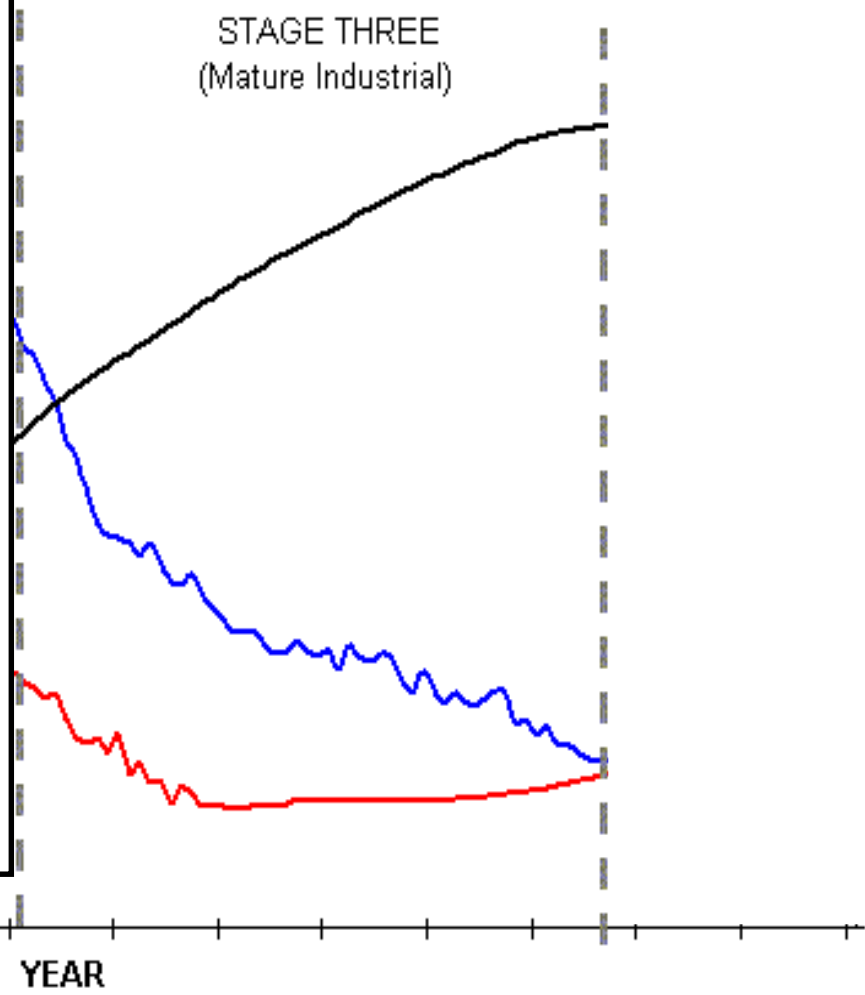
Stage 3.

Birth rates begin to fall because:

- **Emancipation of women** and **improved educational opportunities** has increased status of women, enabling them to pursue careers and so delay child-bearing.
- Large families increasingly viewed as an **economic** and **social burden**.
- Increased desire to pursue **material lifestyles** (cars, holidays, bigger homes) and less for large families.

PHIC TRANSITION MODEL

STAGE THREE
(Mature Industrial)

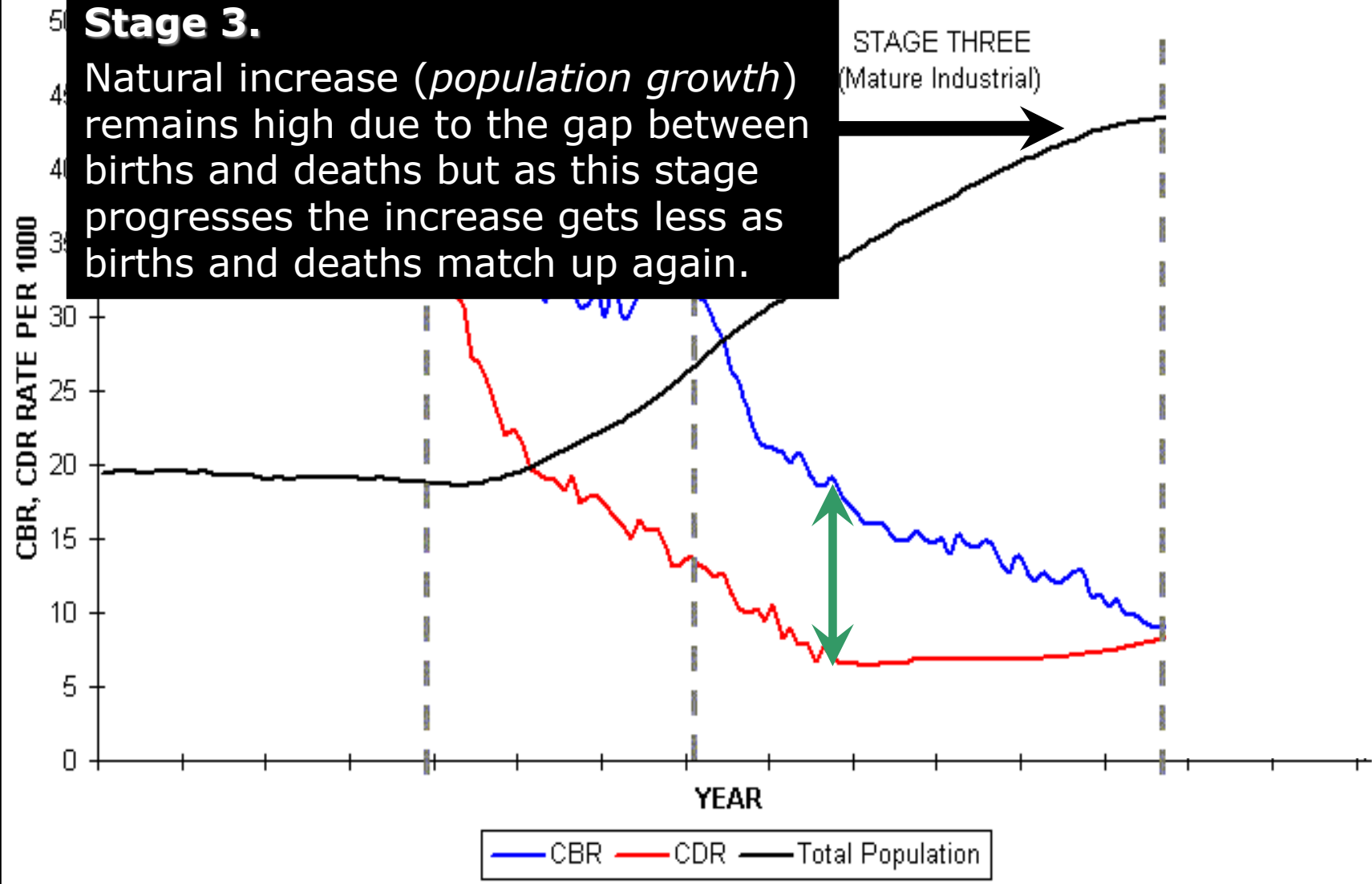


— CBR — CDR — Total Population

THE DEMOGRAPHIC TRANSITION MODEL

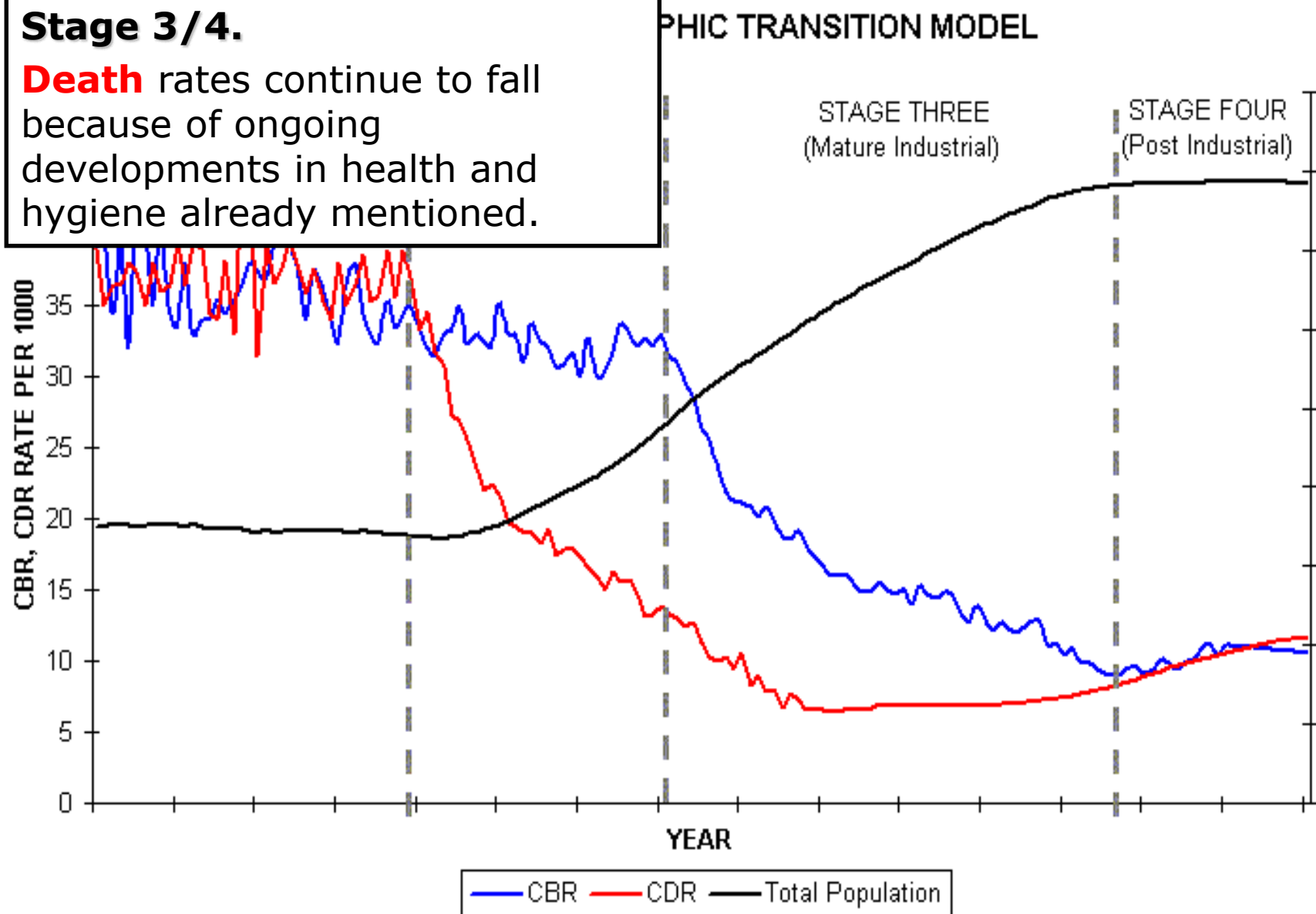
Stage 3.
Natural increase (*population growth*) remains high due to the gap between births and deaths but as this stage progresses the increase gets less as births and deaths match up again.

STAGE THREE
(Mature Industrial)



Stage 3/4.

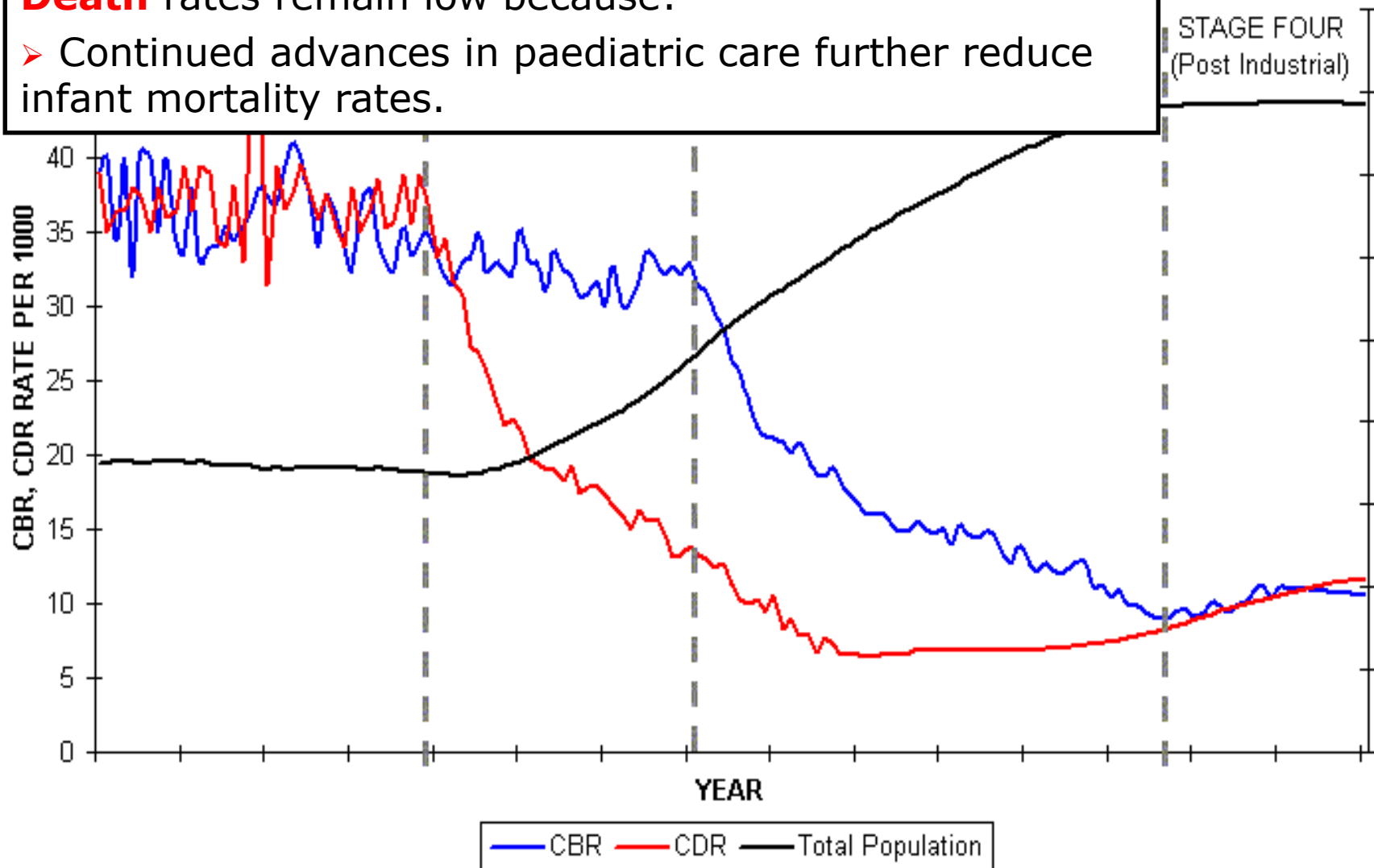
Death rates continue to fall because of ongoing developments in health and hygiene already mentioned.



Stage 3/4.

Death rates remain low because:

- Continued advances in paediatric care further reduce infant mortality rates.

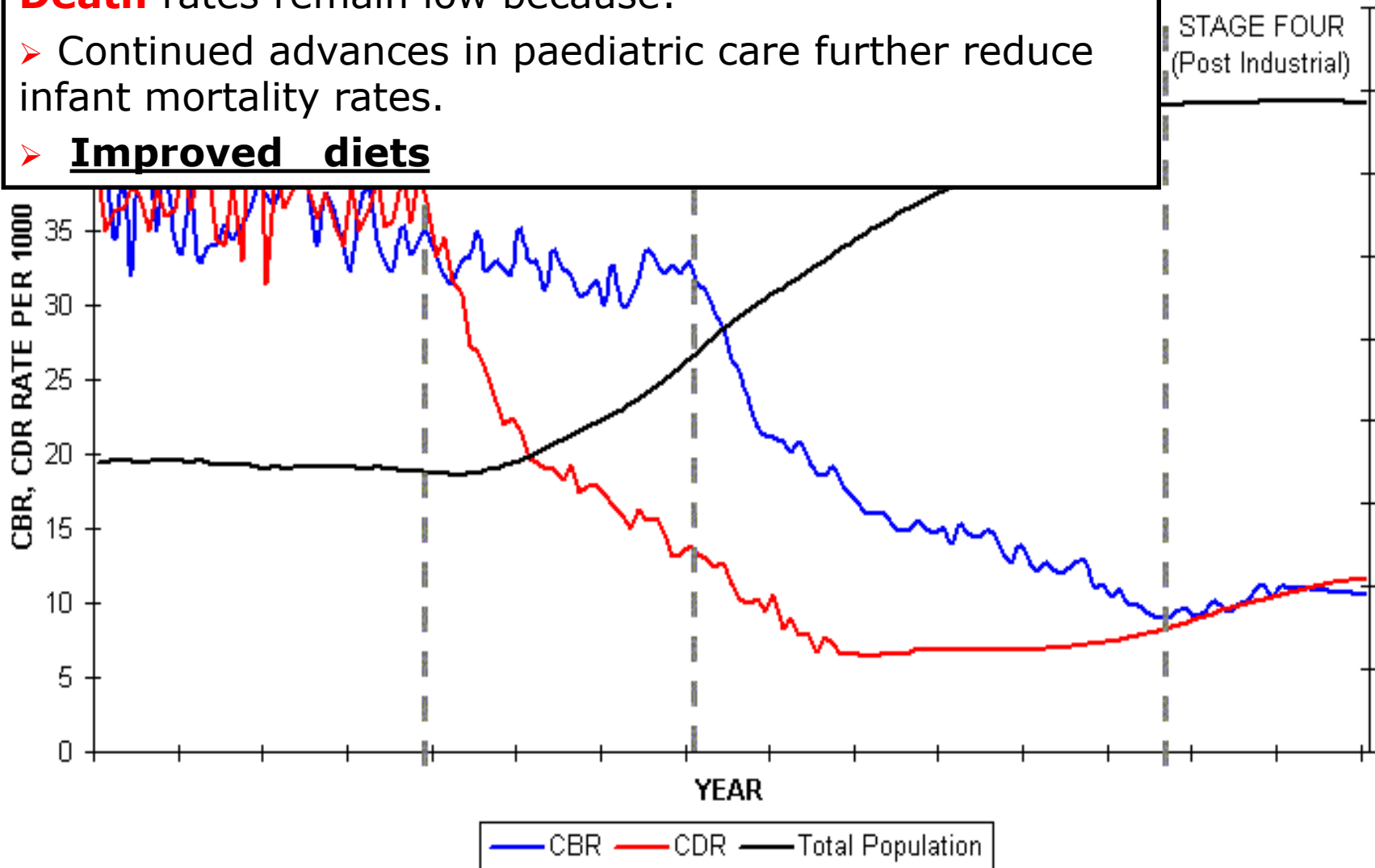


Stage 3/4.

Death rates remain low because:

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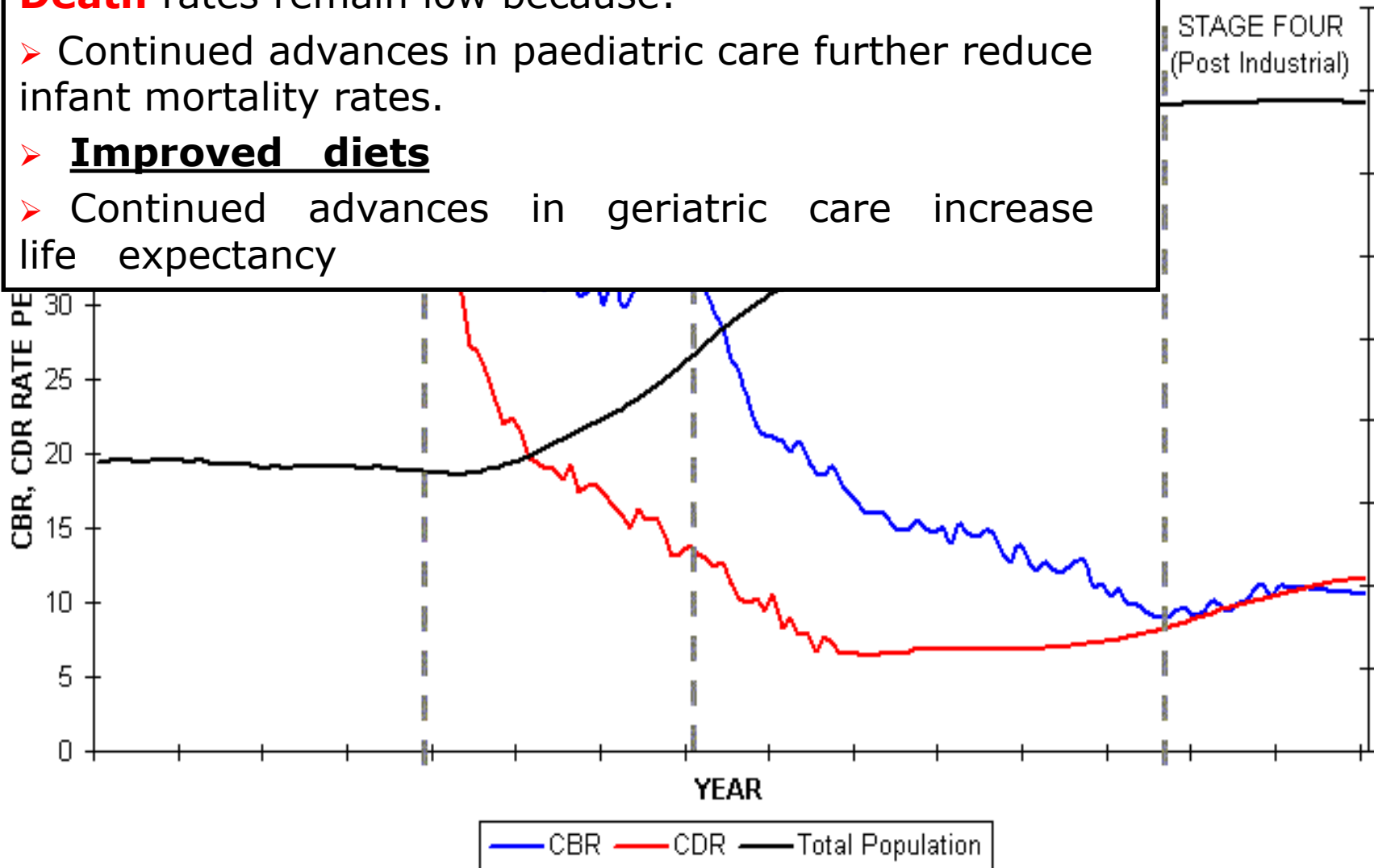
➤ **Improved diets**



Stage 3/4.

Death rates remain low because:

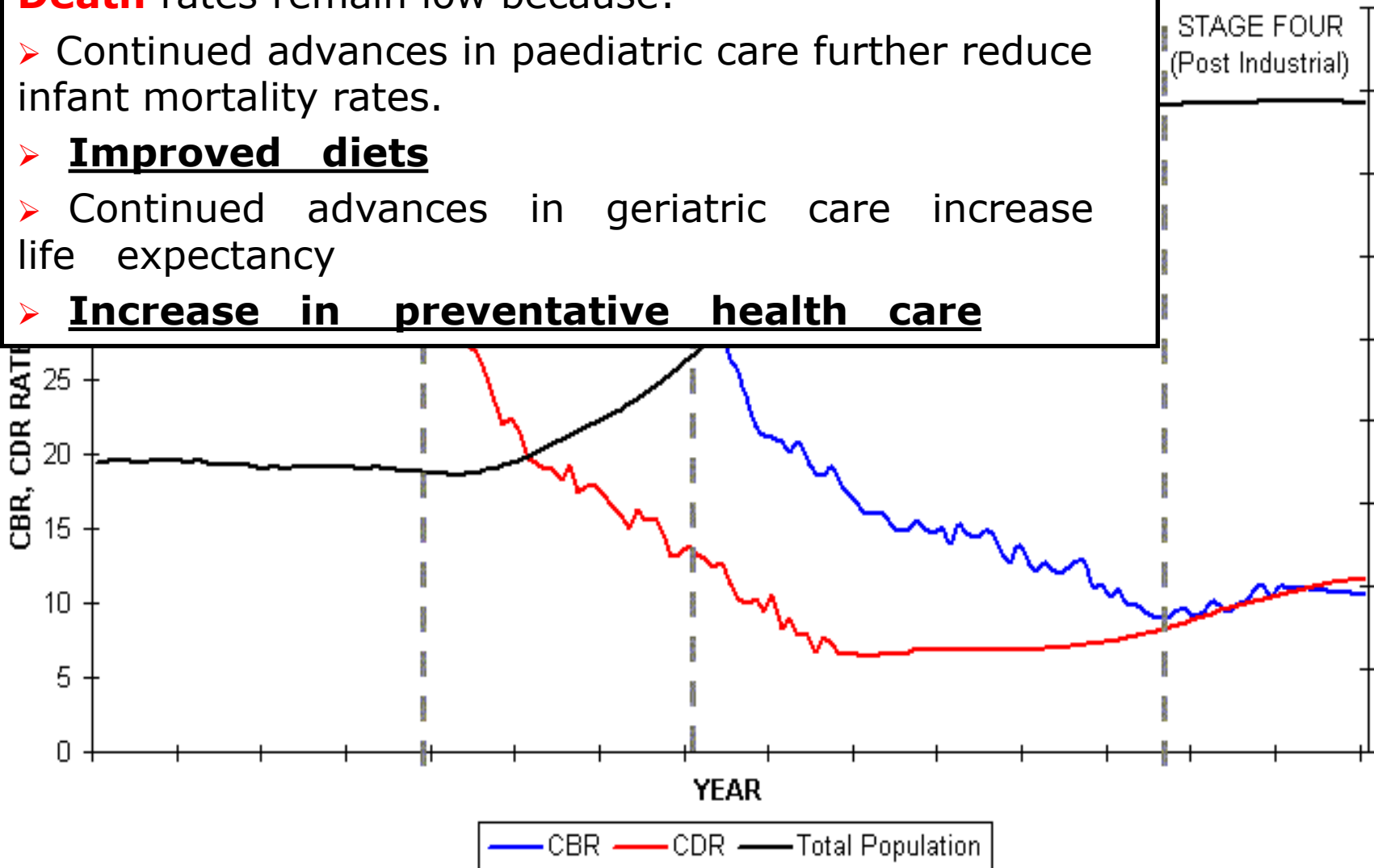
- Continued advances in paediatric care further reduce infant mortality rates.
- **Improved diets**
- Continued advances in geriatric care increase life expectancy



Stage 3/4.

Death rates remain low because:

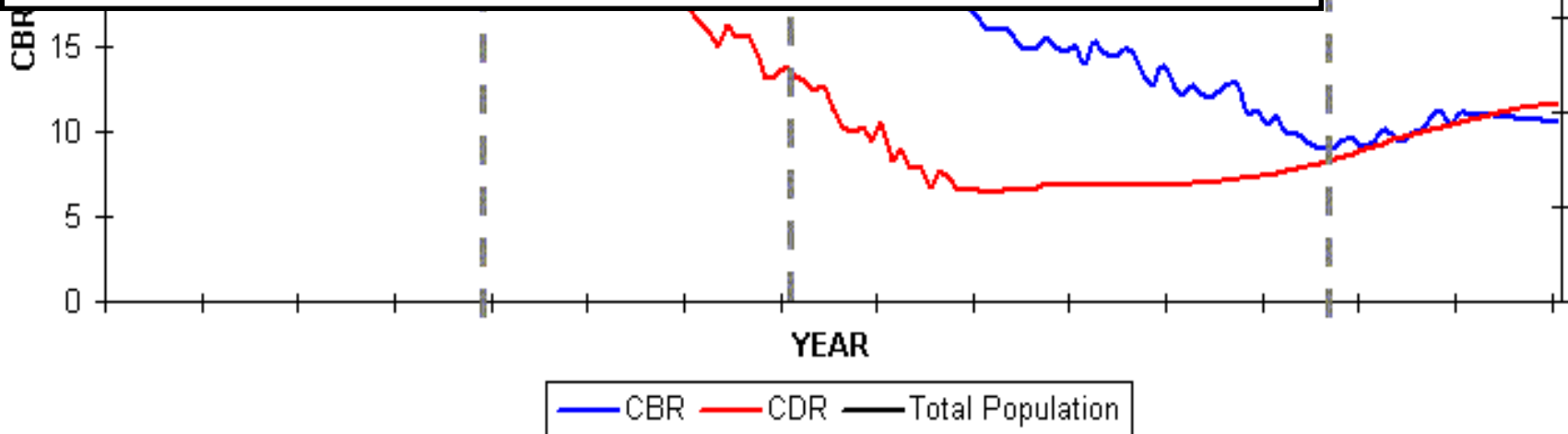
- Continued advances in paediatric care further reduce infant mortality rates.
- **Improved diets**
- Continued advances in geriatric care increase life expectancy
- **Increase in preventative health care**



Stage 3/4.

Death rates remain low because:

- Continued advances in paediatric care further reduce infant mortality rates.
- **Improved diets**
- Continued advances in geriatric care increase life expectancy
- **Increase in preventative health care**
- Enhanced public services for **elderly** - specialised care workers, day-centres, residential homes, sheltered housing, meals-on-wheels.

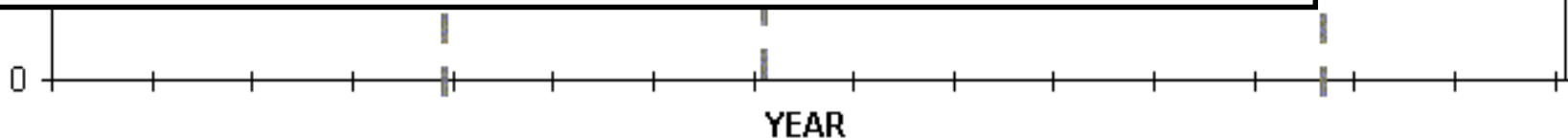


Stage 3/4.

Death rates remain low because:

- Continued advances in paediatric care further reduce infant mortality rates.
- **Improved diets**
- Continued advances in geriatric care increase life expectancy
- **Increase in preventative health care**
- Enhanced public services for **elderly** - specialised care workers, day-centres, residential homes, sheltered housing, meals-on-wheels.
- Universal state pension scheme and increasing uptake of private pensions have increased affluence of elderly and so increased life expectancy.

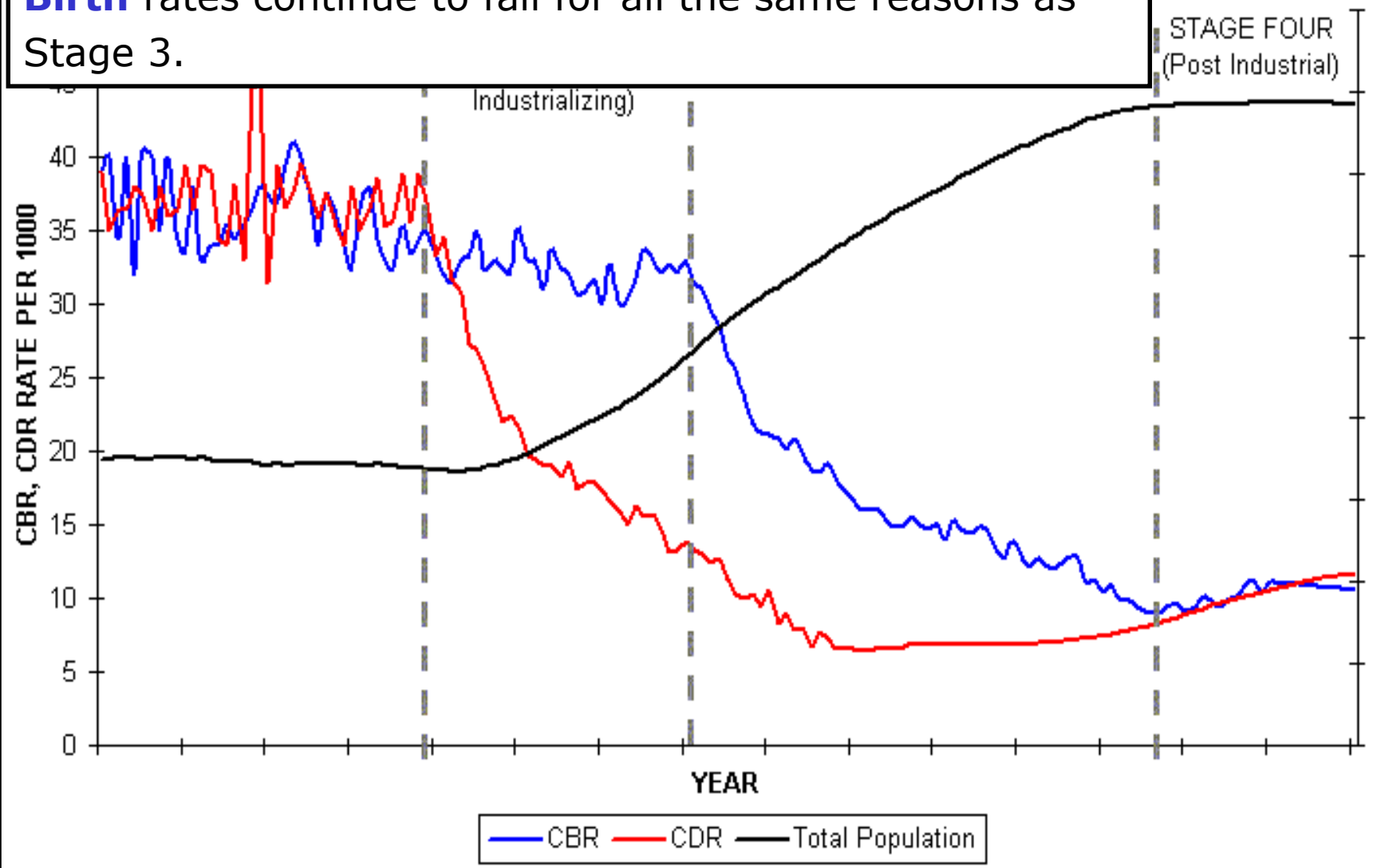
STAGE FOUR
(Post Industrial)



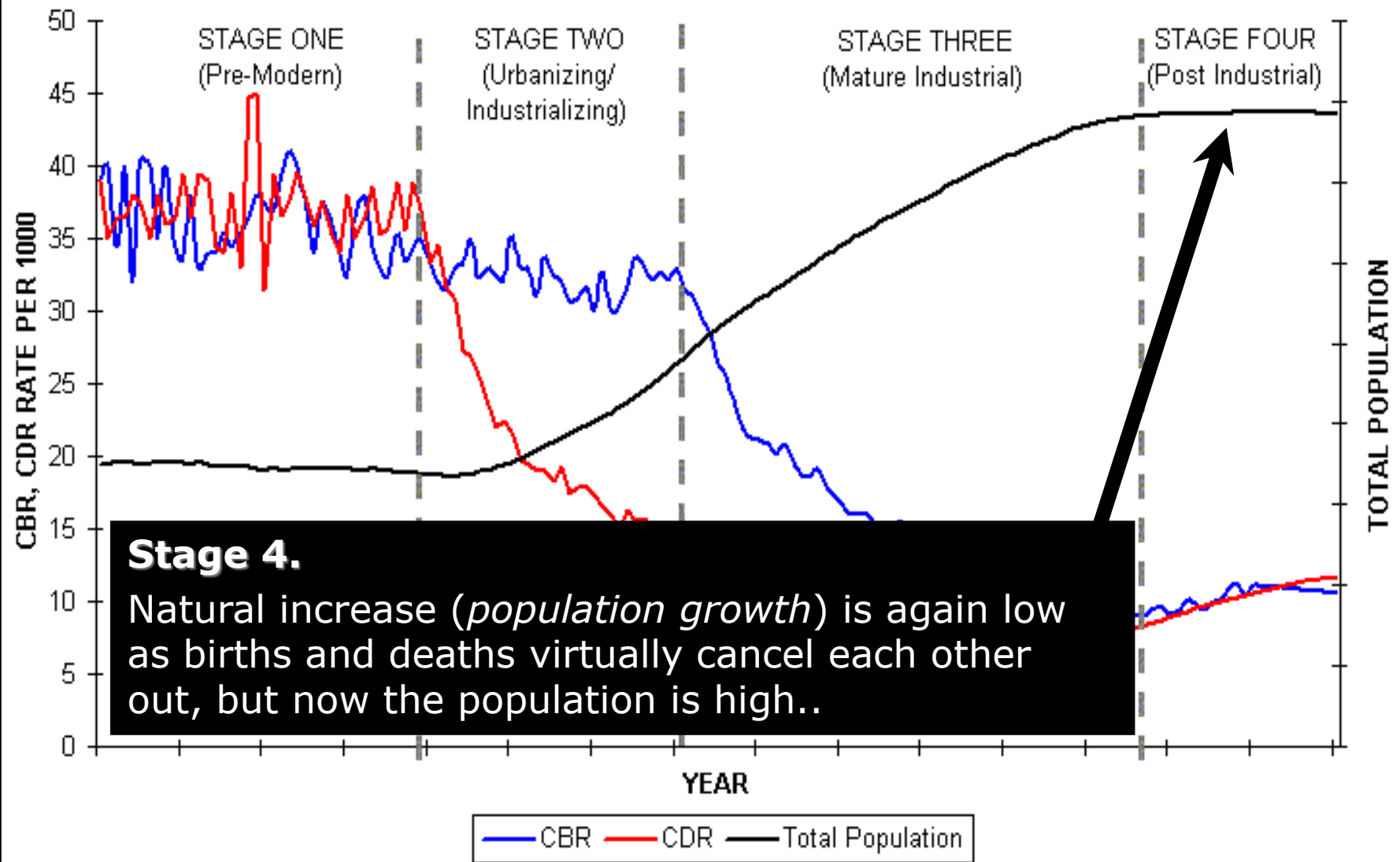
— CBR — CDR — Total Population

Stage 4.

Birth rates continue to fall for all the same reasons as Stage 3.



THE DEMOGRAPHIC TRANSITION MODEL

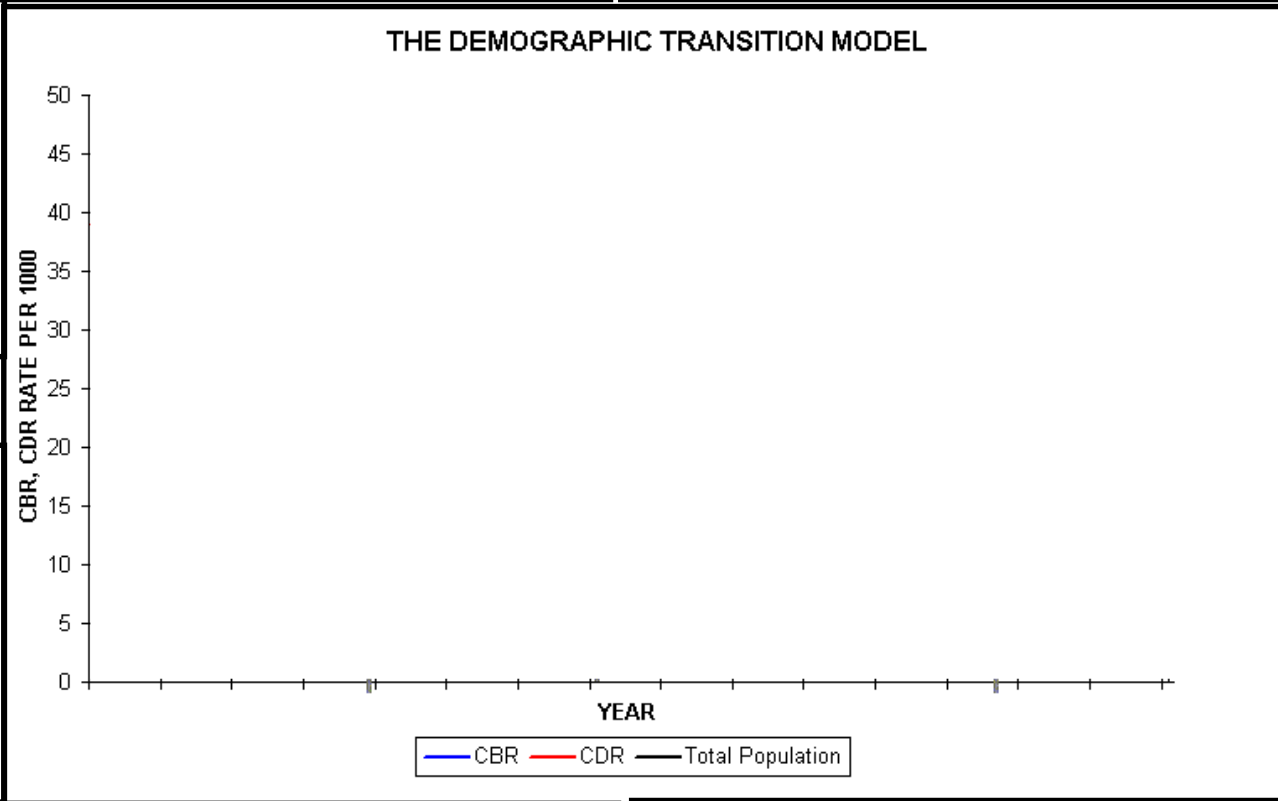


Population

Demographic transition model

Stage 1.

Stage 2.



Stage 3.

Stage 4.
