# Communicating the Demographic Dividend

November 2018

### Our objective

The purpose of this project is to **work in partnership** with government ministries, civil society and other non-government organizations (e.g. multi-laterals, youth, population and development networks) in Kenya, Tanzania, Nigeria and Senegal to **co-create a unified narrative, communications and advocacy content** that can help **increase multi-sectoral action** taken to achieve the Demographic Dividend.

### Our participants



- UNFPA
- · Ministry of Finance and Planning
- Ministry of Labour, Employment and Development
- Ministry of Education
- · Ministry of Labour
- Institute of Rural Development Planning
- Agricultural non-state actors forum
- African Youth and Adolescent Network (AfriYan)
- · Advanced Family Planning
- National Bureau of Statistics
- John Hopkins University, School of Health
- School of Economics & Population Studies Center, University of Dar es Salaam



- NCPD Nation Council for Population and Development
- Kenya Institute for Public Policy and Research
- Federation of Kenya Employers
- Ministry of Health
- Ministry of Education
- Organization of African Youth in Kenya
- Population Studies and research institute (PSRI), University of Nairobi
- JHPIEGO John Hopkins University
- AUC
- African Woman and Child features journalist



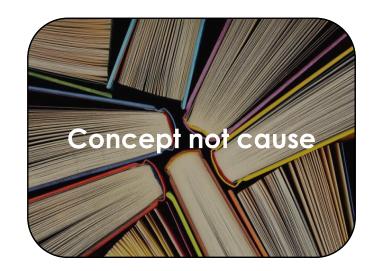
- Ministry of Economy and Finance
- UNFPA Senegal
- Reseau Siggil Jigeen
- Direction du Development du Capital Humain (DDCH)
- Intrahealth
- OFBD communications agency
- GEEP Le Groupe pour l'Étude et l'Enseignement de la Population
- Ministère de la Femme, de la Famille et de l'Enfance
- The Islamic Cultural Centre of Burkina
- SWEDD Sahel Women's Empowerment and Demographic Dividend Project
- Youth Network in Population and Development of Senegal
- Civil Coalition for Family Planning
- Direction du Development du Capital Humain (DDCH)
- Centre for Research in Applied Economics and Finance (CREFAT)
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- National Agency for Statistics and Demography
- The Human Capital Development Directorate



- UNFPA
- Federal Ministry of Education
- Federal Ministry of Health
- Afe Babalola University
- Economics Department, University of Ibadan
- One Nigeria
- ActionAid International
- International Youth Alliance for Family Planning
- National Population Commission
- Albright StoneBridge
- FHI360
- AFRYPOD African Youth Initiative on Population, Health and Development
- Forward Africa
- 99.5 Wazobia FM Abuja radio
- HACEY Health Initiative
- HRH Dr. Haliru Ndanua Yahaya, Tribal Leader
- AUC
- Africa 2.0
- Path Finder

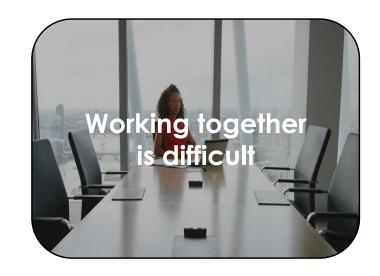
# **Key Insights**

# **Key barriers**











# **KEY THOUGHT**

The generation that will transform Africa has already been born.

# This key thought allows us to:

- 1. Turn a dry concept in to cause that people want to fight for (youth opportunities).
- 2. Force emotional engagement with the issue by humanizing it, focusing on quality not quantity.
- 3. Drive urgency to act now for change that is absolutely possible, but not inevitable.

# 5 key messaging pillars to tell our story

Purpose	1. Incentivise	2. Humanize	3. Explain potential	4. Add jeopardy	5. Stress urgency
Message	Explain that the Demographic Dividend is the exponential economic growth that comes from a country restructuring its population, so that more people are contributing to the economy than dependent on it. Country after country has lifted itself from poverty to prosperity in this way.	Demonstrate that prosperity is built by one household at a time by telling a story of a young couple and how investment across 4 pillars dramatically improves the future of their family for generations to come.	Explain that the reason the future of this young couple matters so much is because young people make up such a high percentage of the population. They are the best untapped resource we have to achieve the Demographic Dividend.	Raise awareness that this huge wave of young people is going to change Kenya. The Youth Impact will happen, for better or worse.	Make it clear that Kenya is at a turning point. The decisions we make today will determine tomorrow.

# How we're re-framing the pillars

Here's how we have moved the conversation on from the Demographic Dividend for each area of action:

#### **Education**

#### FROM

#### Giving access to education

Giving kids access to schools and stopping them from dropping out.



#### TO

#### **Equipped for success**

Access is only half the battle.

We need to give young people the skills to fulfil their potential and succeed as productive adults in the 21st Century.

#### Health

#### FROM

#### Increasing productivity

Health is a means to sustain a strong workforce and drive macro-economic growth.



#### TO

#### Protecting the family

The family is an institution in African life. Prosperity begins with families made strong and healthy by good nutrition, healthcare and the ability to time and space births.

#### **Employment**

#### FROM

#### Job availability

Unemployment rates and macro-economic conditions. Thinking of young people as employees



#### TO

#### **Fulfilling potential**

Turning passion and energy into prosperity. Supporting entrepreneurs and employers, as well as employees.

Focusing on formal and informal sectors.

#### Governance

#### FROM

#### Inputs

Focus on the institutions and practices of democracy and governance.



#### TO

#### **Outcomes**

Building a country where young people want to live and participate, and where their ambitions are supported.

Reducing the potential for brain-drain.

# **Creative & Toolkit Assets**

## **Toolkit development**

We're developing a communications toolkit with unbranded, open source content that partners can use for their own advocacy efforts. This will include:

- An introductory film
- Key visuals, posters and banners
- Social media assets
- PPT decks
- Leaflets and A4 leave-behinds
- Case studies

















#### BETTER HEALTH CAN TRANSFORM KENYA

- Improved healthcare and the right nutrition to young children 💿 Kenya urgently needs to increase its fight against deadly can ensure a better future.
- Undernutrition contributes to an estimated one-third of all deaths to
- Nearly 35% of under-5 deaths occurred during the neonatal period; 1/3 of all neonatal deaths are due to severe infections, followed by birth asphyxia, preterm births and congenital anomalies.
- The leading causes for death for under-5s are pneumonia and
- Kenya urgently needs to keep improving the health of its
- Now, Kenya's rates for infant mortality, under-5 mortality, and adult mortality are all poorer than the global averages.
- 52 children out of every 1000 births die before the age of 5 in Kenya. Stunting is the failure to grow both physically and cognitively and is the result of chronic or recurrent malnutrilion. The devastating effects of stunting can last a lifetime.
- 26% of children under 5 years in Kenya are stunted.
- Kenya urgently needs to do more to enable our young couples to have children at a time that is suitable to them.
- Over 40% of pregnancies in Kenya are unintended.
- About 14% of pregnancies in Kenya end in abortion, most of these abortions are unsafe resulting in over 2,600 deaths of women and
- Kenya's birth rate declined from 4.9 births per woman in 2003 to 3.9 births in 2014, but it is still higher than the global average of 2.5 births
- Over half (53%) of all married women in Kenya use any form of modern contraception, but just 37% of married teenage girls use any form of modern contraception.
- 18% of Kenyan teenage girls have already begun childbearing. 1.5 million unintended pregnancies in Kenya are averted due to modern contraceptive use.
- Nearly two in ten married women in Kenya who report that they would like to avoid or delay pregnancy do not currently use any method of
- 5,000 maternal deaths are averted in Kenya due to modern
- Providing children with the right medication will lead to greater productivity within the workforce
- One recent trial in Kerya showed that children who received de-worming pills for two years, giving a boost to their levels of nutrition, had higher earnings as adults.

- In Kenya HIV/AIDS is still estimated to cause the highest proportion of HIV/AIDS has left an estimated 1.2 million children without one or
- Kenya has one of the highest Tuberculosis (TB) prevalence rates in the world. The high burden of TB is linked to the high prevalence of HIV in Kanya.

#### Having children at a suitable time saves lives.

- Conceptions taking place within 18 months of a previous live birth are at greater risk of feelfol death, low birth weight, and premature births. In fact, birth gaps of less than 18 months are associated with doubling of the relative risk of child montality.
- One million of the eleven million annual deaths of children below 5
- could be avoided by spacing children by at least 2 years If the unmet need for modern contraception were met in the world's poorest countries, there would be 76,000 fewer maternal deaths a year. In fact, child spacing could prevent 1 in 3 maternal deaths.
- If all women who want to avoid a pregnancy used modern controspitives and all pregnant women and their newborns received care at the standards recommended by WHO, the benefits would be dramatic. Compared with the current situation:

  - unintended pregnancies would drop by 70% malarmal deaths would drop by 67%. Indeed the second of disability related to pregnancy and delivery experienced by women and newborns would drop by two-thirds transmission of HIV from mothers to newborns would be nearly eliminated—achieving a 93% reduction.

#### Timing and spacing births increases schooling attainment and life expectancy.

- Family planning produces cost savings that can be used on public services, meaning there is more for everyone. Every dollar (KSh 101) invested in family planning on save \$4 (KSh 404) or more in that car be used in other areas of development such as healthcare, education,
- Each \$1 (KShs 101) invested in contraceptive services reduces the cost of pregnancy-related healthcare, including care for women living with HIV by \$1.47 (KSh 148).
- For every additional dollar spent on contraceptive services above the current level, the cost of pregnancy-related care will drop by \$2.20 (KSh 222).

#### Family Planning increases prosperity.

- One-third of East Asia's unprecedented economic growth from 1965 to 1990 is attributable to the Demographic Dividend including investments in reproductive health.
- Giving women access to family planning increases their earnings. A study following women over several decades in Bangladesh found that women who were given the choice of planning for the number of children they wortled and when to have them had earnings 40% higher than women who did not have the same opportunity.
- High rates of child dependency without economic opportunities can restrict the potential for economic growth. If Kenya Isn't able to maximize the economic potential of its people, it will offain only 20-30% of the progress on development indicators that it needs to equal African and Asian benchmark countries such as Mourtilus and

#### WHAT TO DO

#### Key Objectives to Prioritize

- Enable couples to effectively plan for their families and have affordable families they can take care of well
- 2. Improve access to reproductive health services and information to adolescents and young people in particular 3. Enhance the drive to significantly reduce maternal, new-born and
- 4. Halt and eliminate preventable and treatable infectious diseases
- 5. Commit to arresting the growing threat of Non-communicable
- 6. Improve health financing, training and recruitment of health

All sources for facts can be found at www.DDCommunications.org

**THE GENERATION THAT** 

WILL TRANSFO HAS ALREADY

70% OF OUR COUNTRY IS UNDER 30 AND THEIR NUMBERS ARE

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# The

#### KENYA MUST TAKE SIMULTANEOUS ACTION TO ENSURE:



01 HEALTHY FAMILIES

Families are an institution in Kenyan life. Prosperity begins with healthy families.

We must help families and provide them with:

- Good nutrition
- Sanitation
- ImmunizationsContraceptives
- Basic healthcare
- Resources to prevent physical violence and mental health

EDUCATION FOR THE 21st CENTURY

Ensure youth can go to school, stay in school, and get the skills to succeed in the 21<sup>st</sup> century

We must help our young people:

- Go to schoolStay in school
- Learn the skills to succeed in the 21st century including STEM education

We must grow:

employers

 Young entrepreneurs, employers & employees in both the formal and informal sectors

WORK

OPPORTUNITIES

Give our youth the chance

to be employees – but also

We must invest in:
Physical infrastructures,

 Physical infrastructures like roads, ports and factories matched by investments in skilled workers

We must create:
A country young people want to be part of.

Ensure we have a

want to be part of

- From strong public services to respect for human rights
- A transparent, accountable government must support young people in their ambitions

**INCLUSIVE AND** 

ACCOUNTABLE

GOVERNANCE

government that makes

Kenya a country our youth

#### Case Study 1:

Documents the steps taken by Malaysia to reap the demographic dividend, serving as an example of a country that was able to transition itself from a lower income to a middle-income country between 1970 -2016.

#### Case Study 2:

Provides guidance on how advocates can demonstrate that the demographic dividend aligns with existing national development plans and strategies.

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