

Population Trends Uganda



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Uganda...the lowest life expectancy at birth in the world...high HIV prevalence among urban low-risk groups...number of women in child-bearing ages will rise from 4 to 5.5 million in the next 15 years...high fertility and declining slowly...over 95 percent of married women do not use any family planning.

HIV/AIDS

Uganda, a country of 19 million people, is experiencing an AIDS epidemic that is probably as severe as anywhere in the world. Recent seroprevalence data show that 25 to 30 percent of women attending antenatal clinics in Kampala (the

Figure 2.
Population of Uganda, by Age and Sex: 1994 and 2010

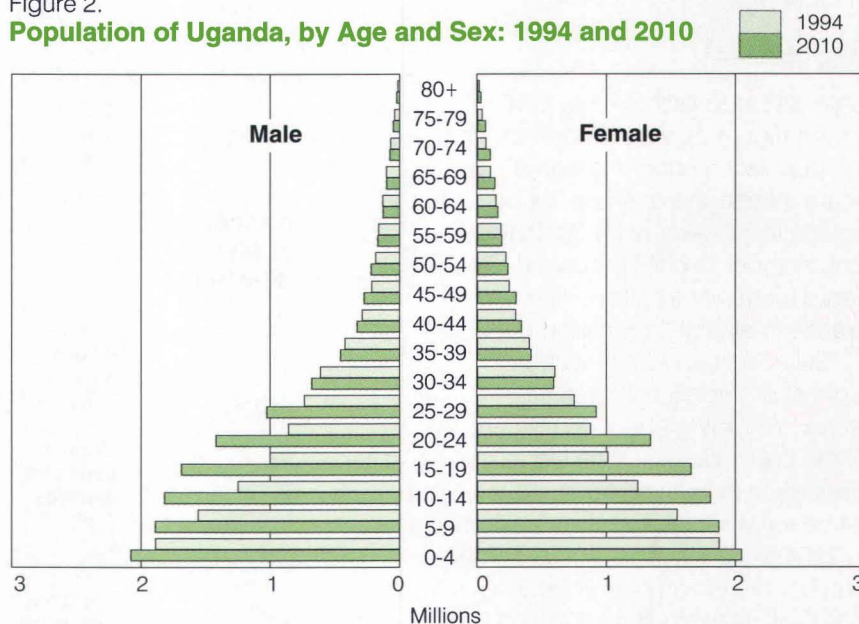
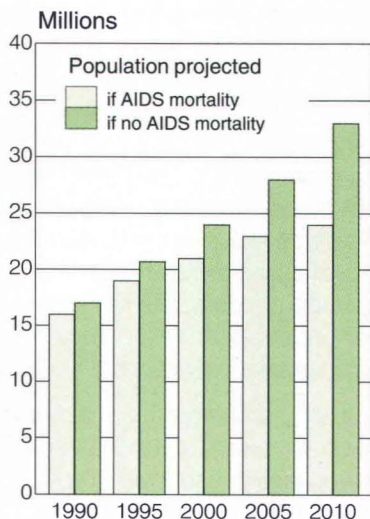


Figure 1.
The Effect of AIDS on Projections of Population: 1990 to 2010



capital city) were infected with HIV, the virus that causes AIDS (U.S. Bureau of the Census, 1993a). An epidemic of this severity is expected to cause changes in the country's demographic trends over the next two decades, with major impact on overall population size, on life expectancy, and on infant mortality rates, among other indicators.

The AIDS epidemic will have a substantial effect on overall population size in the coming years (figure 1). Projections show that of the 33 million people that would otherwise have been expected in 2010, 8.5 million will be absent because of

AIDS.¹ However, because of high fertility rates, the population will still grow by roughly 5.5 million people between 1994 and 2010, to just over 24.5 million people.

Because of AIDS, life expectancy at birth in Uganda has dropped to 37 years in 1994, the lowest in the world. Life expectancy is projected to drop further to a low of 31.5 years by 2010.

The striking impact of AIDS on the very young can be seen in the infant mortality rate, which is 112 deaths per 1,000 live births in 1994. That is about 23 percent

¹CIR incorporates AIDS mortality in its population projections by assuming that the epidemic will follow current trends and will peak in 2010.

higher than would be expected without the effect of AIDS. By the year 2010, without AIDS, infant mortality might have been expected to decline to about 63 deaths per 1,000 live births. With AIDS, it is projected at 94 per 1,000.

Uganda has recently established a major condom distribution program. If successful, this may modify the spread of the HIV virus and thus lessen mortality resulting from AIDS in future years.

Population

Uganda's population remains very young (figure 2), with almost half of the population under the age of 15 years. Although this share will decrease to 47 percent by 2010, the total number of children under 15 years (currently 9 million) will increase to almost 11.5 million (table 1). Sub-Saharan Africa has the highest under-15 cohort in the world, averaging about 46 percent of the population in 1994. Uganda's population in working ages, 15 to 64 years, will increase from 9 million in 1994 to 12.5 million by 2010. The number of women of childbearing ages will also rise, from 4 million to 5.5 million women, an increase of 33 percent.

Uganda's population is concentrated in the younger ages as a result of high fertility and high mortality. Fertility has been high for many years: according to the 1988/1989 Uganda Demographic and Health Survey (UDHS89), there were 7.4 births per woman in 1986 (UMH and IRD, 1989). However, the UDHS89 reports that the mean ideal number of children among married women was 6.8 children, indicating that fertility levels may begin to decline. Based on this and recent declines in fertility in the neighboring countries of Kenya and Rwanda, fertility is assumed to be

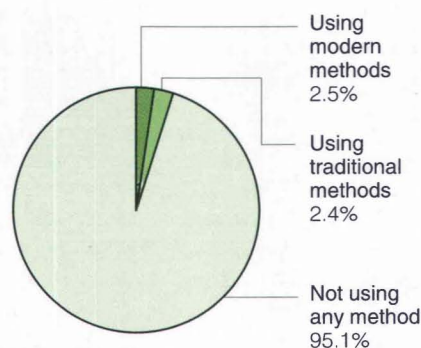
6.8 births per woman in 1994, with further declines projected.

Contraceptive Prevalence

Knowledge of contraceptive methods is widespread in Uganda. Eighty-four percent of married women ages 15 to 49 years know of at least one method, traditional or modern. Seventy-eight percent know of at least one modern method (UMH and IRD, 1989).

Yet, less than 5 percent of married women in 1988/1989 reported using any contraceptive method (figure 3). Those women using any method were evenly divided as to use of modern or traditional methods.

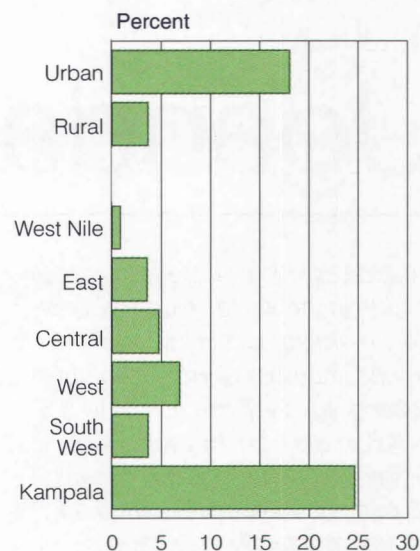
Figure 3.
Use of Contraception, by Type, for Married Women: 1988/1989



A greater proportion of urban women (18 percent) use contraception than rural women (4 percent) in Uganda. Almost 25 percent of those living in Kampala use contraception. Contraceptive use in other regions varies from a high of 7 percent in the West region to less than 1 percent in the West Nile region (figure 4).

In Uganda, as in most other countries, women with the lowest level of education are the least likely to use a contraceptive method (see figure 5). Only 2 percent of the married women with no formal education report use of contraception.

Figure 4.
Use of Contraception, by Residence and Region, for Married Women: 1988/1989



The share using contraception more than doubles for women who have had some primary schooling (5 percent) and almost doubles again if the primary level was completed (9 percent). Among the small number of women who have more than a secondary education, 34 percent are using contraception. This likely reflects both greater demand for contraception and better access to services.

Abortion, though illegal in Uganda, is used by some women to end unwanted pregnancies. The Ugandan Adolescent Fertility Survey (UAFS) of 1988/1989 found that 15 percent of women ages 15 to 24 years who had ever been pregnant had terminated a pregnancy. The percentage varied by area from 10 percent in rural areas to 23 percent in Kampala (Agyei and Epema, 1992). This likely understates actual rates because underreporting is common to abortion-related questions.

The proportion of married women in Uganda who want more children remains relatively high; over 80 percent. Over 90 percent of women

with three or fewer living children want another child. Thirty-nine percent of married women want to have a child in the next 2 years.

In spite of this, over half of all married women of reproductive age (about 1.6 million women) are in need of family planning to meet their expressed childbearing desires. Almost 17 percent of married women (over one-half million) want no more children and are not using contraception. Another 37 percent (1.1 million) want to wait 2 or more years before their next birth and are not using contraception. Unmet need is high for married women in both urban (48 percent) and rural (54 percent) areas. Unmet need for family planning is high across all levels of education, although it is highest for women who have completed primary level or higher but do not have schooling beyond a secondary education.

Both the UDHS89 and the UAFS asked sexually active persons, not using contraceptives and who did not want a child, their reasons for nonuse. Among women (ages 15 to 49 years) in the UDHS89, lack of knowledge was the reason most often given (33 percent), followed by religion (20 percent). The main reasons for nonuse by women (ages 15 to 24 years) in the UAFS were lack of knowledge (27 percent) and health concerns (27 percent). Men (ages 15 to 24 years) in the UAFS reported the main reason for nonuse was lack of access (26 percent), followed by lack of knowledge (21 percent).

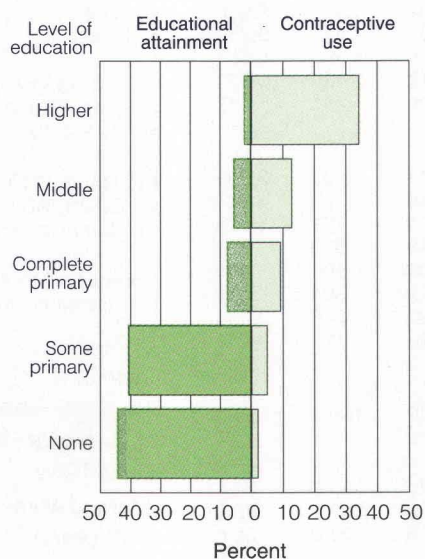
Literacy and Education

One-half of the Ugandan population 15 years and over is estimated to be literate, with little change between 1980 and 1990 estimates.

Males (62 percent) were almost twice as likely to be literate than were females (35 percent) in 1990 (UNESCO, 1981, 1991).

Most women in Uganda receive no or little formal education (figure 5): 44 percent of married women have never been to school and 41 percent did not complete primary education. Only 15 percent have completed a primary or higher education (UMH and IRD, 1989).

Figure 5.
Level of Education by Attainment and Contraceptive Use of Married Women: 1988/1989



Urbanization

Uganda remains a largely rural country, although the population is steadily becoming more urbanized. In 1950, 3 percent (147,000) of the total population lived in urban areas (UN, 1993). According to the Uganda 1991 census, the number of persons living in urban areas had risen to nearly 2 million (11 percent of the population), with almost one-half of urban dwellers living in the capital city of Kampala (Uganda Statistics Department, 1992). Ugan-

da's urban population remains relatively small, even for Sub-Saharan Africa where, in 1990, 33 percent of the population lived in urban areas. By 2010, the urbanized population in Uganda is projected to grow to 4.6 million (19 percent of the population).

References

- Agyei, W.K.A., and E.J. Epema. 1992. Sexual Behavior and Contraceptive Use Among 15-24-Year-Olds in Uganda. *International Family Planning Perspectives*. Vol. 18, No. 1.
- Uganda Ministry of Health and Institute for Resource Development/Macro Systems, Inc. (UMH and IRD). 1989. *Uganda Demographic and Health Survey 1988/1989*. Entebbe.
- Uganda Statistics Department. 1992. *Final Results of the 1991 Population and Housing Census (Pre-Release)*. Entebbe.
- United Nations (UN). 1993. *World Urbanization Prospects: The 1992 Revision*. ST/ESA/SER.A/136. New York.
- United Nations Educational, Scientific and Cultural Organization (UNESCO). 1981. *Statistical Yearbook*. Paris.
- _____. 1991. *Statistical Yearbook*. Paris.
- U.S. Bureau of the Census, Center for International Research. 1993a. HIV/AIDS Surveillance Database. December release.
- _____. 1993b. International Data Base.

CIR collects, assesses, and analyzes population and related statistics from all countries. Based on these data, CIR produces the demographic estimates and projections used in this series of reports. This report, written by Timothy B. Fowler, was prepared with the support of the U.S. Agency for International Development. More detailed information is available from the Chief, Center for International Research, U.S. Bureau of the Census, Washington, DC 20233-3700.

Table 1.
**Population Indicators for Uganda:
1980 to 2010**
(Population in thousands)

Indicator	1980	1990	1994	2000	2010
POPULATION					
Total country ...	12,252	16,927	19,122	21,358	24,584
Urban	1,078	1,896	2,341	3,033	4,622
Rural	11,174	15,031	16,781	18,325	19,962
Male, total country					
All ages	6,070	8,435	9,534	10,693	12,419
0 to 14	2,953	4,108	4,701	5,327	5,790
6 to 12	1,256	1,690	2,010	2,364	2,602
13 to 18	893	1,130	1,278	1,633	2,090
15 to 44	2,348	3,449	3,923	4,425	5,600
15 to 49	2,538	3,656	4,138	4,665	5,873
15 to 64	2,947	4,125	4,612	5,132	6,383
65+	171	201	221	234	245
Female, total country					
All ages	6,182	8,493	9,588	10,666	12,165
0 to 14	2,967	4,086	4,661	5,280	5,719
6 to 12	1,265	1,688	1,995	2,348	2,577
13 to 18	901	1,135	1,284	1,611	2,060
15 to 44	2,470	3,471	3,931	4,341	5,253
15 to 49	2,678	3,717	4,176	4,586	5,552
15 to 64	3,067	4,224	4,719	5,135	6,129
65+	148	183	209	251	317
Females, married					
15 to 49	1,914	2,701	3,044	3,293	3,933
15 to 19	332	421	468	577	767
20 to 24	421	640	704	761	1,078
25 to 29	335	575	643	633	788
30 to 34	265	399	503	505	495
35 to 39	230	283	329	394	339
40 to 44	184	209	223	249	254
45 to 49	147	174	173	173	211
DEPENDENCY RATIO					
Both sexes	103.7	102.7	104.9	108.0	96.5
LIFE EXPECTANCY AT BIRTH (years)					
Both sexes	43.9	41.6	37.5	33.6	31.5
Male	43.2	41.4	37.2	33.6	32.2
Female	44.7	41.8	37.8	33.6	30.8
INFANT MORTALITY RATE (per 1,000 births)					
Both sexes	130.0	112.0	112.2	106.8	94.4
Male	140.1	120.1	119.6	113.3	100.0
Female	119.5	103.6	104.6	100.0	88.5
TOTAL FERTILITY RATE (per woman)					
.....	7.4	7.1	6.8	6.2	5.2

Note: CIR incorporates AIDS mortality in its population projections by assuming that the epidemic will follow current trends and will peak in 2010.

Dependency ratio is the number of persons under age 15 and age 65 and above per 100 persons ages 15 to 64 years.

Source: U.S. Bureau of the Census, 1993b.

Table 2.
**Contraceptive Prevalence Among Currently
Married Women 15 to 49 Years of Age, by
Method: 1988/1989**

	Total	Pill	Female Steril- ization	Other modern	Periodic absti- nence	Other tradi- tional
Percent current users						
Total, 15 to 49	4.9	1.1	.8	.6	1.6	.8
15 to 19	1.7	1.2	.0	.0	.5	.0
20 to 24	2.8	.9	.0	.2	1.4	.3
25 to 29	4.3	1.1	.2	.6	1.8	.6
30 to 34	5.9	1.1	.5	1.0	2.0	1.3
35 to 39	8.1	1.8	1.7	2.5	2.0	.2
40 to 44	8.2	1.0	3.8	.4	.9	2.0
45 to 49	8.0	.0	2.5	.0	3.0	2.5
Percent distribution of users						
Total, 15 to 49	100	22	16	12	33	16
15 to 19	100	71	0	0	29	0
20 to 24	100	32	0	7	50	11
25 to 29	100	26	5	14	42	14
30 to 34	100	19	8	17	34	22
35 to 39	100	22	21	30	24	2
40 to 44	100	12	47	5	11	25
45 to 49	100	0	31	0	38	31
CHILDLESS WOMEN: 1988/1989						
Percent of currently married women aged 45 to 49						
.....	4.2					
AVERAGE DURATION OF POSTPARTUM INFECUNDABILITY: 1988/1989						
Number of months						
.....	13.7					

Source: UMH and IRD, 1989, tables 2.6, 3.5, and 4.6; and U.S. Bureau of the Census, 1994, unpublished tables.

Table 3.
**Average Age of Users
of Selected Methods:
1988/1989**
(Married women aged 15
to 49 years)

Method	Average age
Pill	28.9
IUD	31.7
Injection	34.5
Sterilization	40.5
Periodic abstinence ..	31.8
Withdrawal	33.2

Note: Calculated at the U.S. Bureau of the Census using the 1988/1989 UDHS data on contraceptive prevalence, by age.

Table 4.
**Fertility Rates:
1990 to 2000**
(Per 1,000 women)

Age	1990	1994	2000
15 to 19 ...	181	172	156
20 to 24 ...	319	307	286
25 to 29 ...	311	302	285
30 to 34 ...	260	249	230
35 to 39 ...	209	199	179
40 to 44 ...	95	90	81
45 to 49 ...	38	36	31
Total fertility rate per woman	7.1	6.8	6.2

Source: U.S. Bureau of the Census, 1993b.