

THE KOREAN FAMILY PLANNING PROGRAM IN CHARTS

THIRD EDITION

The National Family Planning Center

Republic of Korea

June 1971



FOREWORD

This is the third issue of the Korean Family Planning Program in Charts, the first one being published in 1968 and the second in 1969 by the Family Planning Evaluation Unit of the Ministry of Health and Social Affairs. The purpose of this booklet is to illustrate, in charts and through brief explanations, the progress, acceptability and effect of the Government sponsored family planning program.

Most of the information introduced here is based on administrative records, research findings derived by National Family Planning Center and various studies conducted by research institutions. The text, design, and layout are the result of work done by Mr. Lee Byung Moo, Division Chief and Mr. Cho Kyoung Sik, researcher of the Evaluation Division of the National Family Planning Center and Dr. Walter B. Watson and Mr. David P. Smith, advisors to the Division. English editing was done by Mr. Stanley G. Hudson, peace corps volunteer assigned to the center.

It is the hope of the authors and the undersigned that this report in charts will be useful to all those who are concerned with the progress of the family planning program in Korea.

June 1971

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Director

The National Family Planning Center

INTRODUCTION

When the 1960 census indicated that population growth in Korea was progressing at 3% a year many people were caught unaware of the serious population problem. The revolution brought the need for family planning into the forefront and reduction of the growth rate became a primary goal of the 1st 5 year Economic Plan from 1962-1966 and the second plan from 1967-1971.

The government established a goal for reduced population growth of 2.7% by 1966, and 2% by 1971.

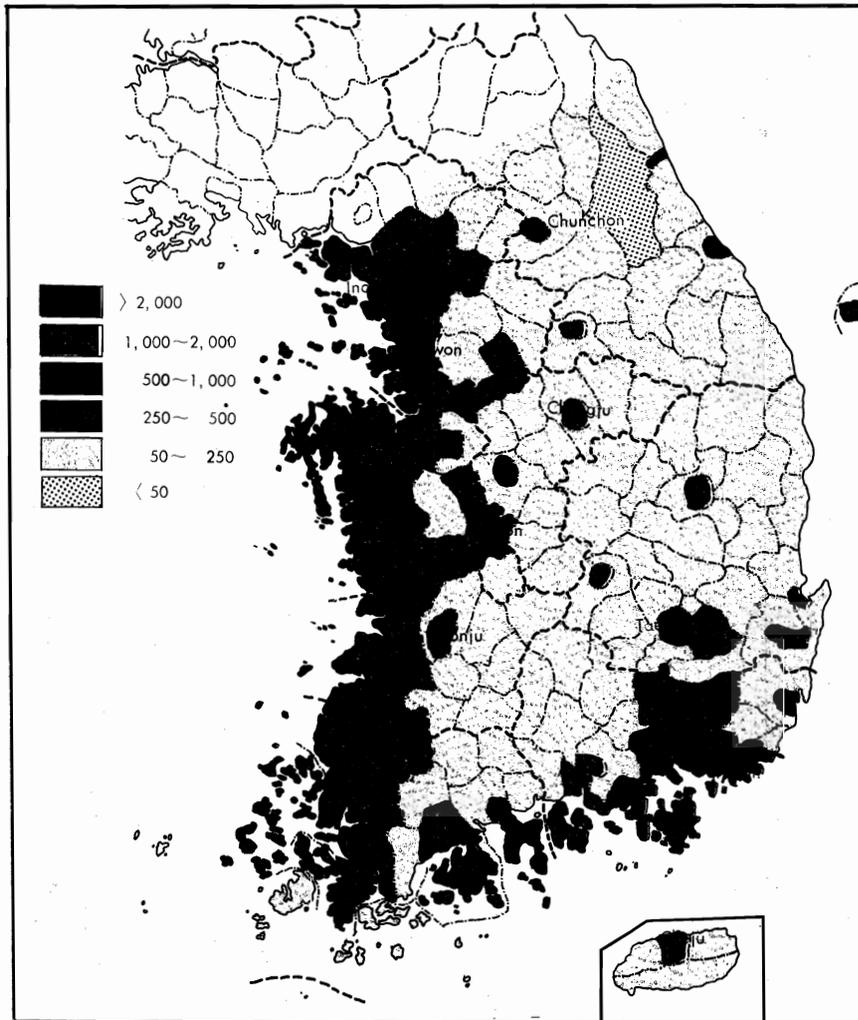
In 1970 the census showed that the annual growth rate was less than 1.9%. It is hoped that the goal of a 1.5% growth rate will be achieved by 1976.

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I. THE LAND, THE PEOPLE, THE ECONOMY

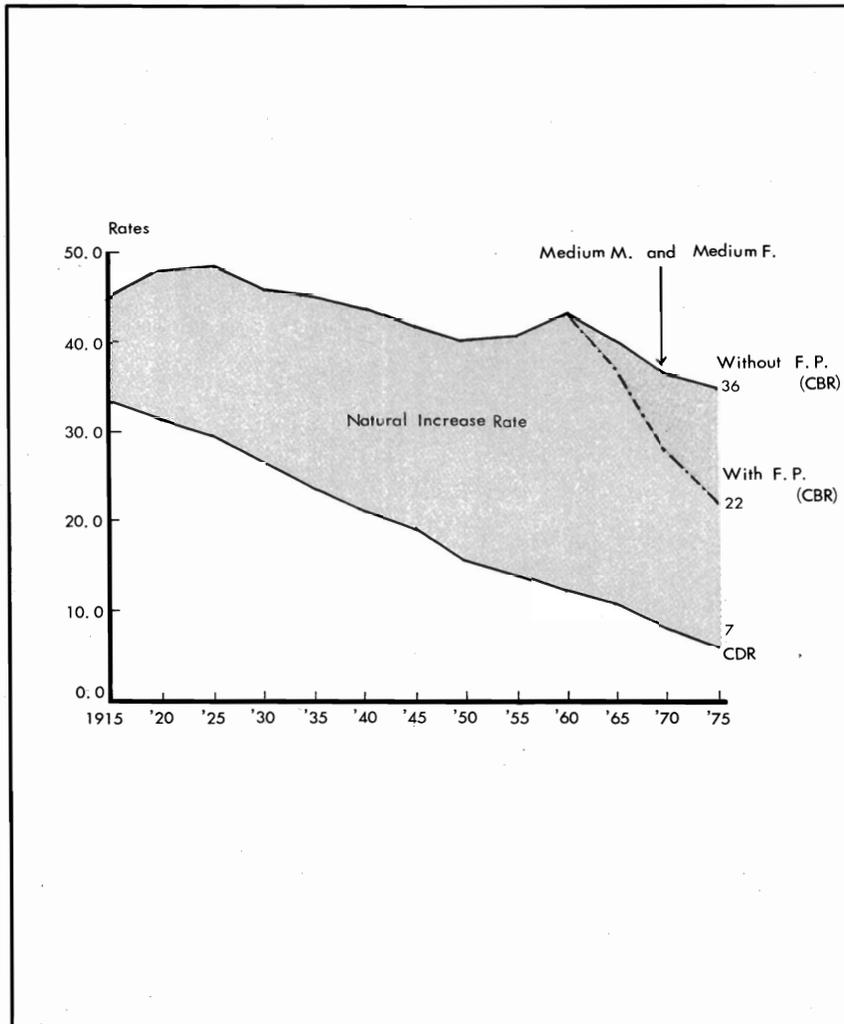
1. The Land and People



According to the 1970 Census a total population in Korea of 31,500,000 live on a land area of 98,500 square kilometers, with a density of 320 persons per square kilometer.

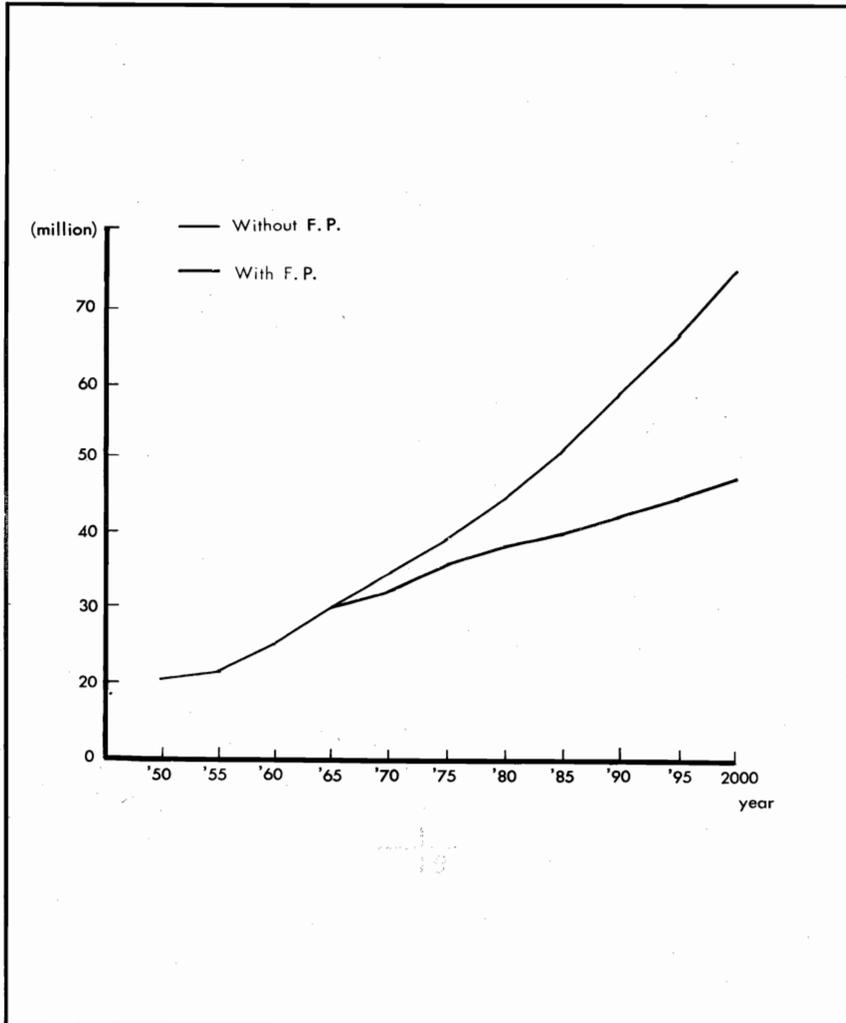
The Republic of Korea is administratively divided into 9 provinces and 2 special cities (Seoul and Pusan) and these are subdivided into 192 counties, districts and small cities. Each of the 192 local units contains a health center, and there is a sub-health center in each of the 1,473 townships.

2. Rate of Natural Increase



As of the end of 1970 the natural increase rate had dropped to 1.9%. It is hoped that this will reach 1.5% or lower by the end of 1976. After 1960, if there had been no family planning, the natural increase rate would have leveled off at about 3.0%.

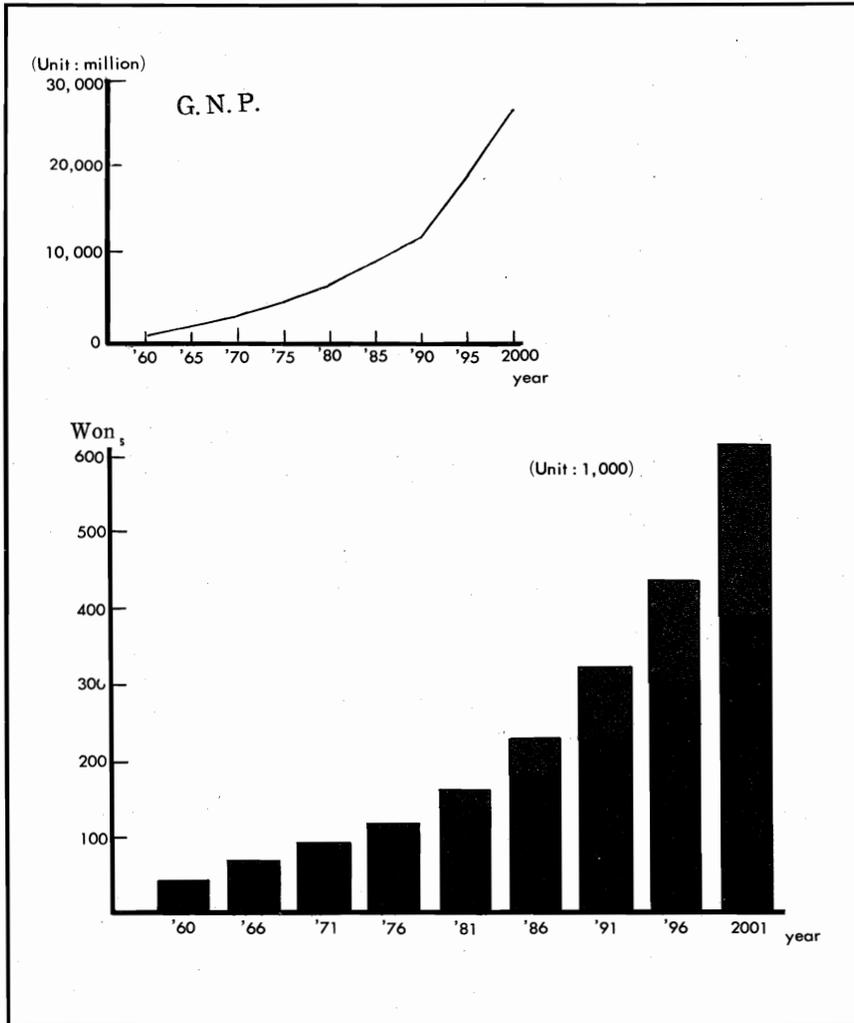
3. Population Growth



Before Liberation, the natural increase rate was 1.5%. After Liberation, the annual rate of population increase dropped from 2.9% in 1955-1960, to 2.7% in 1960-1966, and to 1.9% in 1966-1970, and continues to decline.

This projected population is based on the 1966 census. Without effective family planning, the population will increase to about 38.4 million in 1976, about 43.0 million in 1981 and about 50.5 million in 1986. Under an assumption of active family planning, it will be about 35.3 million, about 37.7 million and about 39.8 million in those years.

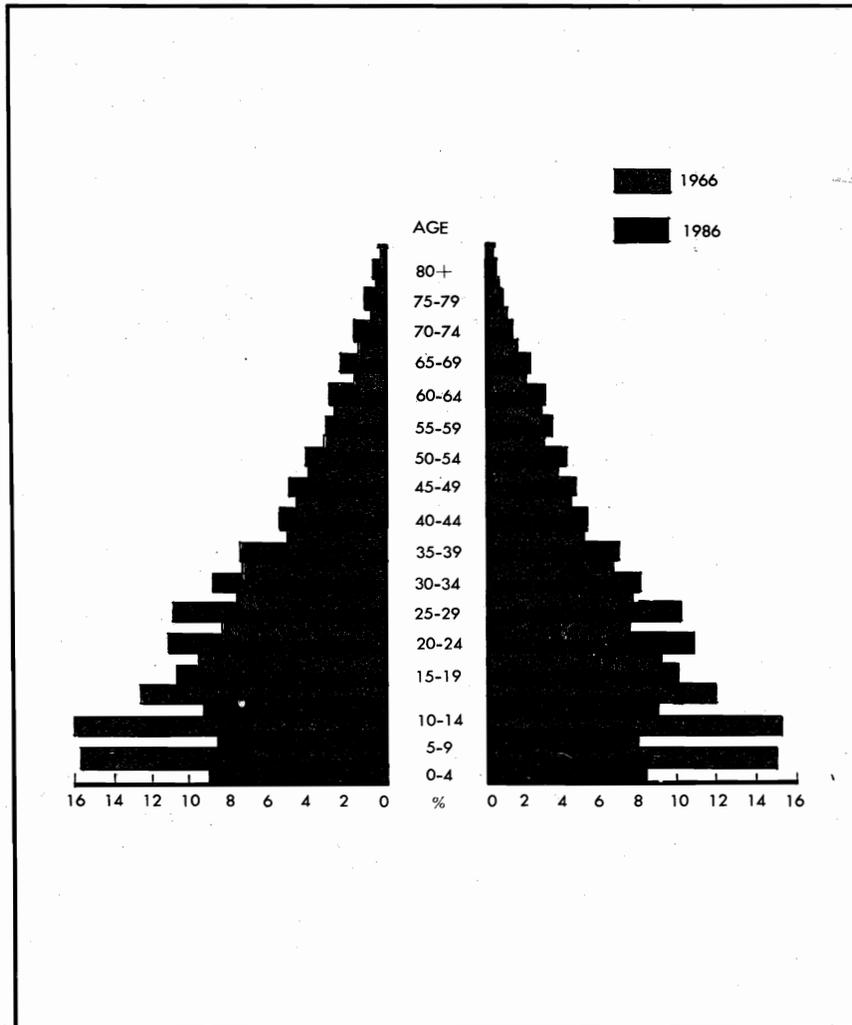
4. Per Capita Income



Between 1971 and 1976 the GNP is expected to increase by 8.5% annually. After 1976 this is expected to be 8% annually.

After 1981 the difference in per capita income between the projections with and without family planning becomes considerable.

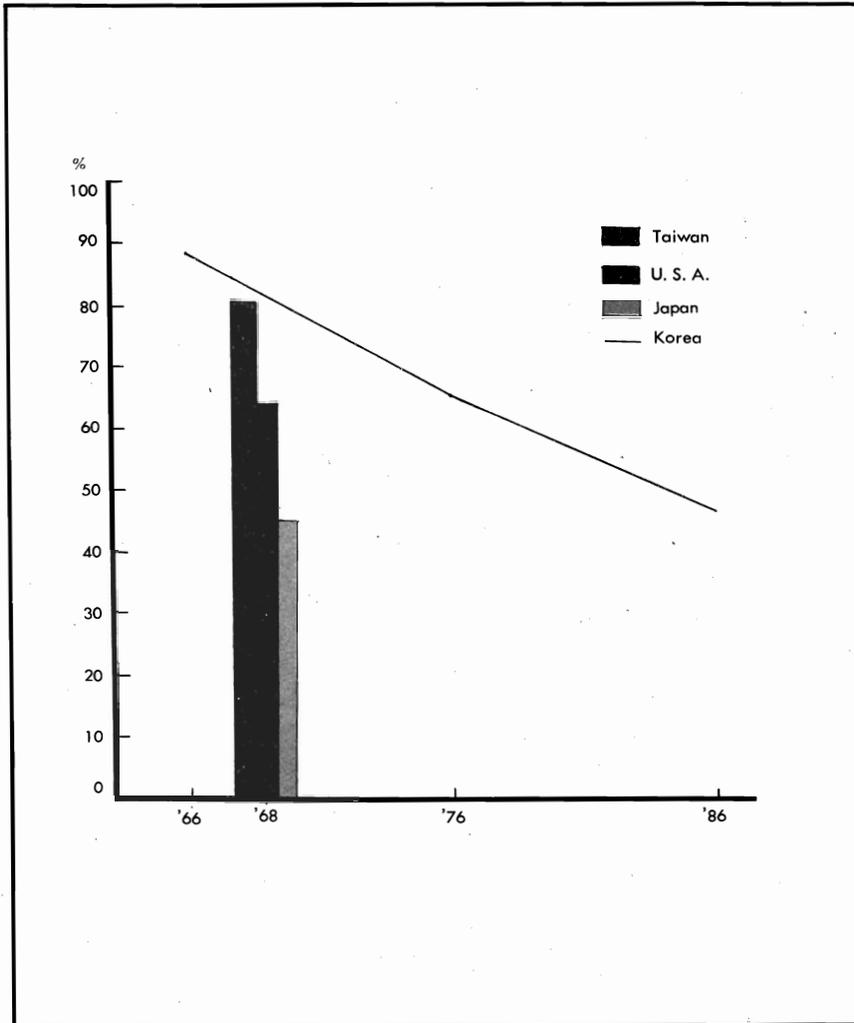
5. Age Composition



In 1966 about 53 % of the population were below age 20. The group aged 20-44 was about 32 %. In the 1986 estimate, the former will be about 37 % and the latter about 43 %.

According to the 1966 census, the age structure of the population was a "Pyramid" as a result of the family planning program this will become "pot shaped" by 1986.

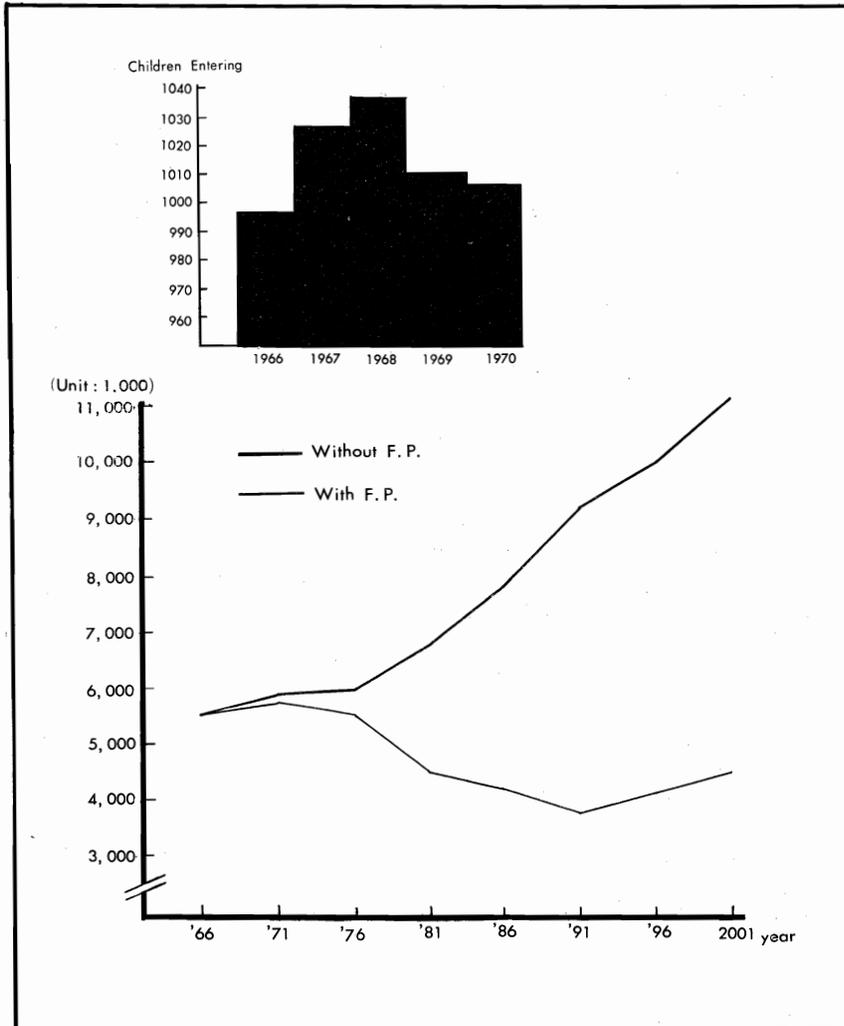
6. Dependency Burden



In the Republic of Korea every hundred people between 15 and 64 had to support 78 dependent persons in 1970.

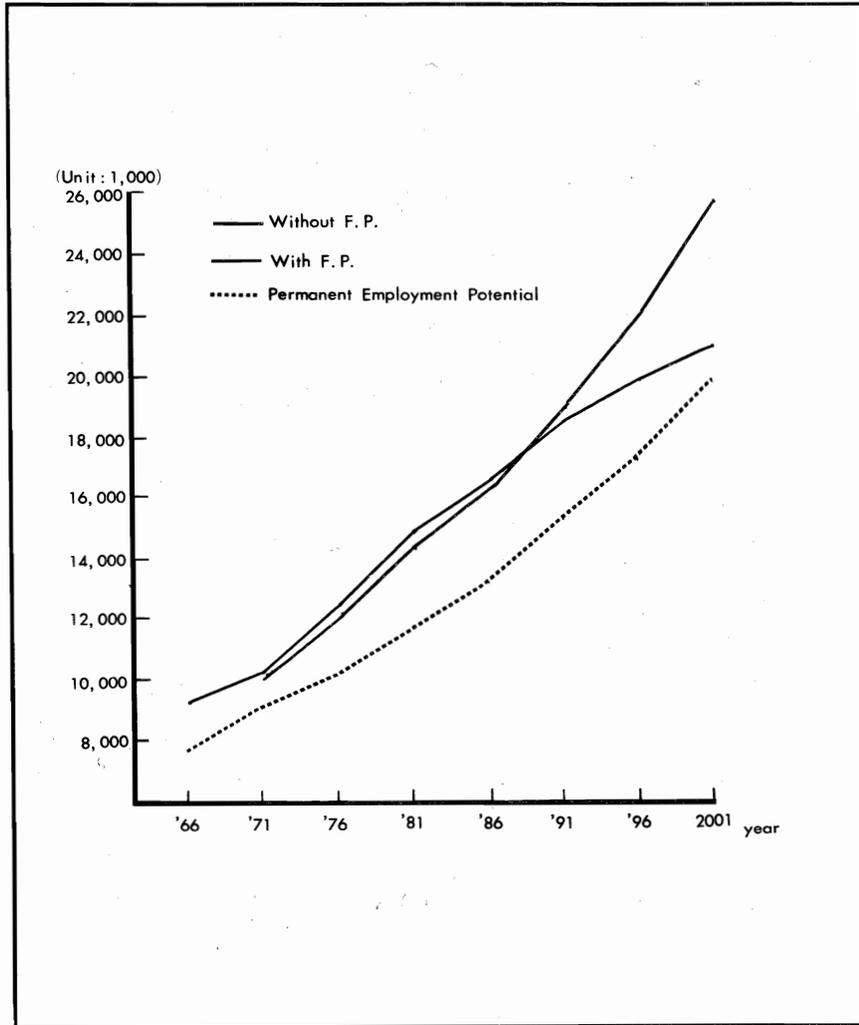
It is expected that the dependency burden will fall to 66 by 1976 and 46 by 1986. Corresponding figures are 45 in Japan, 64 in the United States, and 81 Taiwan as of 1968.

7. Primary School Age Population



With a family planning program, the primary school age population after 1971 will decrease steadily until 1991. Without family planning this population would greatly increase.

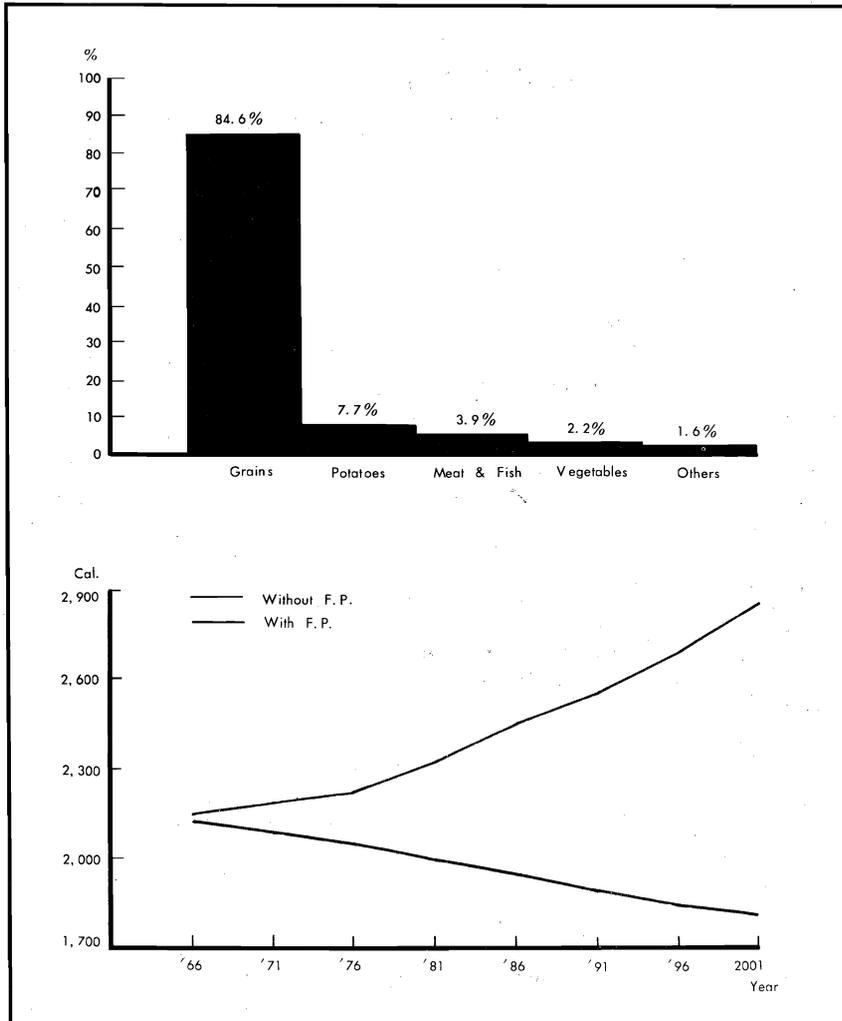
8. Future Labor Supply and Demand



The first effects of the family planning program will be felt in the labor force after 1981.

With family planning there will be no actual labor shortage in the future.

9. Per Capita Calorie Production

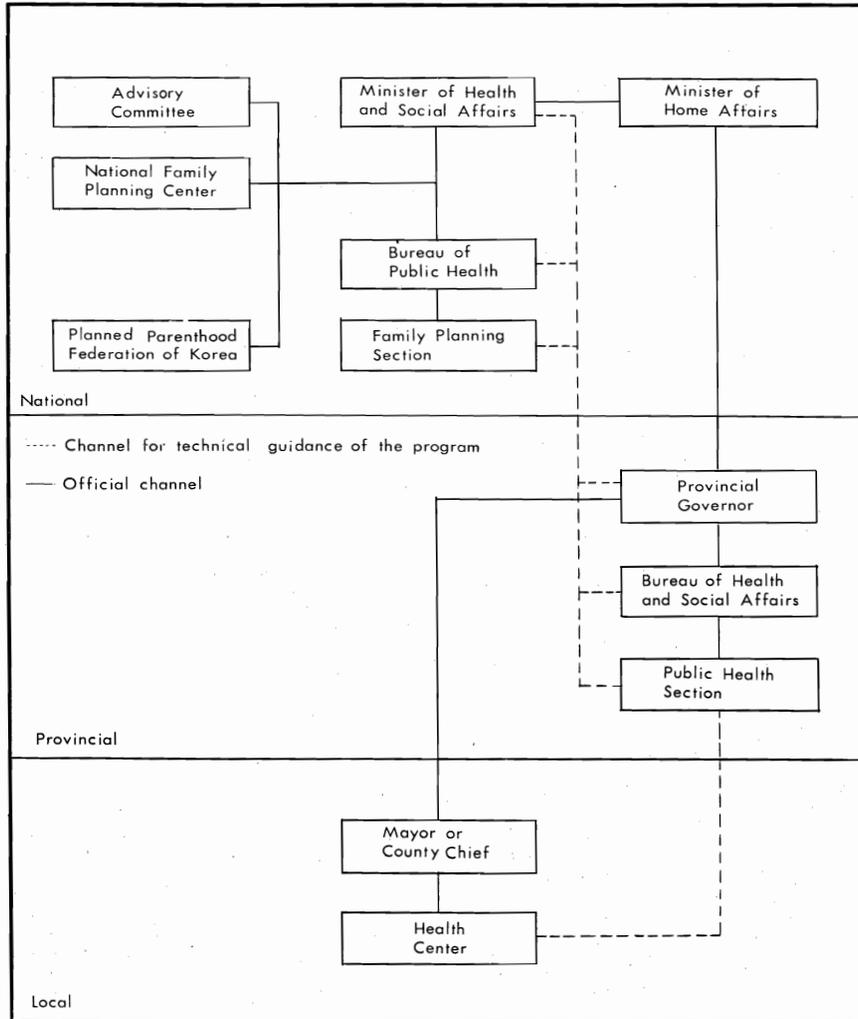


Presently, Korea has a shortage of food. The estimated required calorie intake is about 2,242 calories per day. 1971 per capita calorie production is 2,161.

Korea will become self sufficient with family planning in providing food for the required per capita calorie intake by 1976. Without family planning the per capita calorie production would decline steadily.

II. FAMILY PLANNING PROGRAM

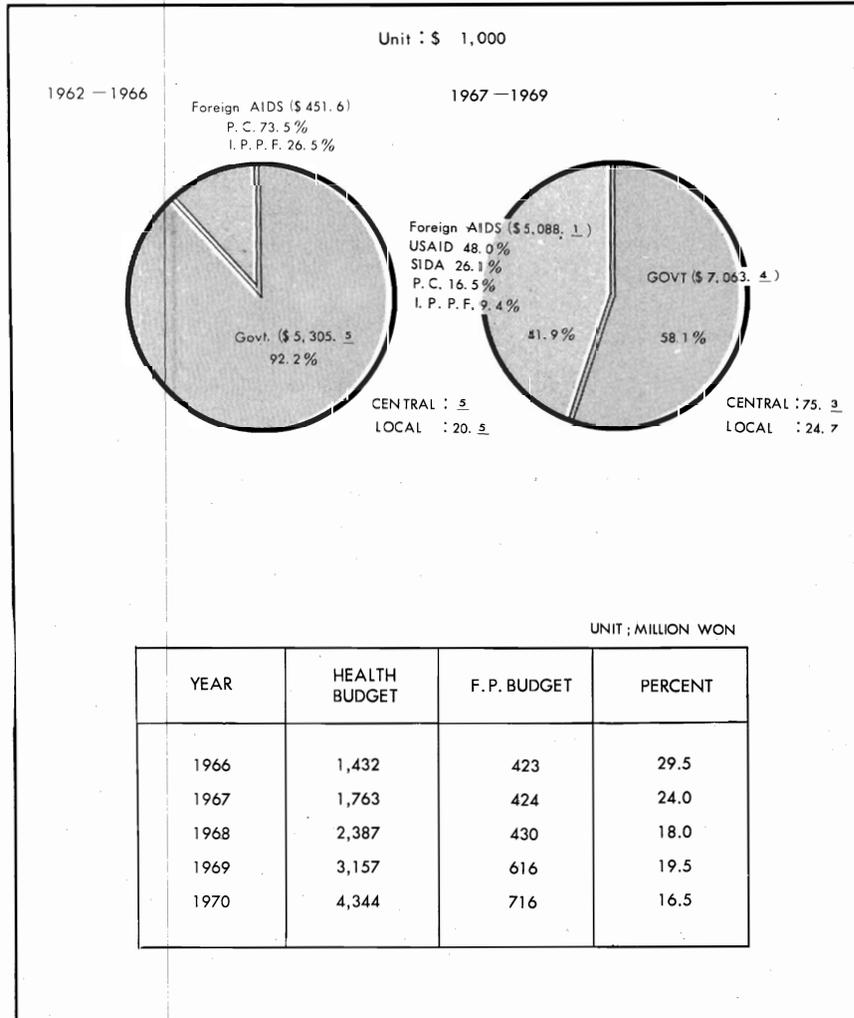
1. Organization



The National Family Planning Program was initiated by the government of the Republic of Korea in 1962 as part of a long-term economic development plan. A family planning section to promote this program, was created within the Ministry of Health and Social Affairs in December 1963 and has administered the program since then.

Following this action at the national level, a family planning network was organized covering the 11 provincial offices, 192 county health centers and 1,473 township offices. Initiated in 1962 the Planned Parenthood Federation of Korea has assisted the program through coordination with the Ministry of Health and Social Affairs. In 1970 The National Family Planning Center was created with assistance from the Swedish International Development Authority.

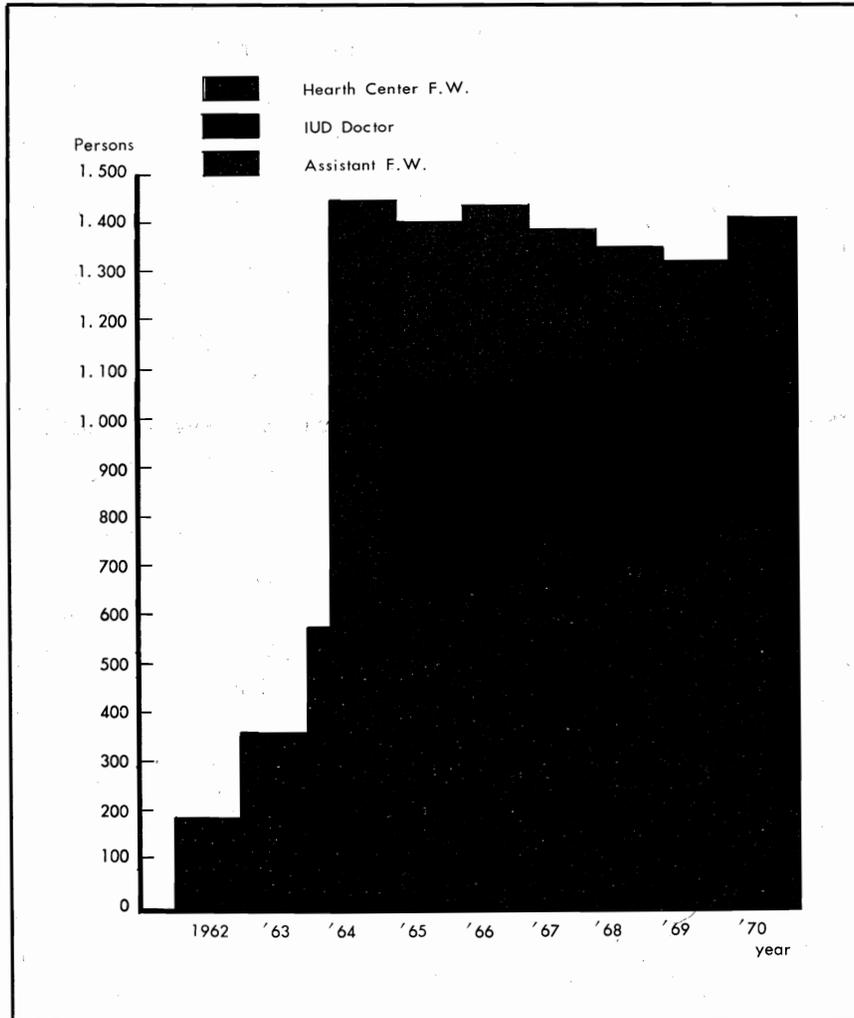
2. Budget



Family Planning expenses are defrayed by the central government, local governments and by foreign assistance. During the initial phase of the program from 1962 to 1963 only the central government provided funds for operations. After 1967 provincial governments shared the expenses of the program. At the same time foreign assistance for the program was begun. Because USAID made a large commodity grant consisting of vehicles and other equipment in 1968, the foreign share of the budget was very high that year.

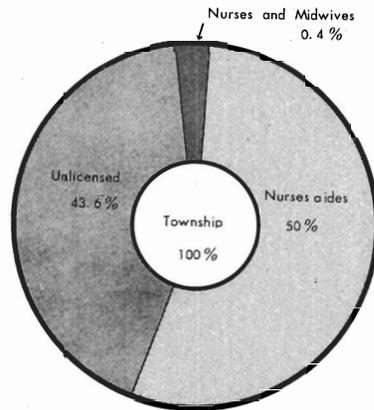
In 1966 the family planning budget was about 30% of the Health budget. This percentage has declined to 17% by 1970. This is not because the absolute achievement is declining but because the amounts in other areas are rising more rapidly. However, the total budget of the Ministry of Health and Social Affairs is less than 1% of the total government budget.

3. Fieldworkers and Designated Private Doctors by Year



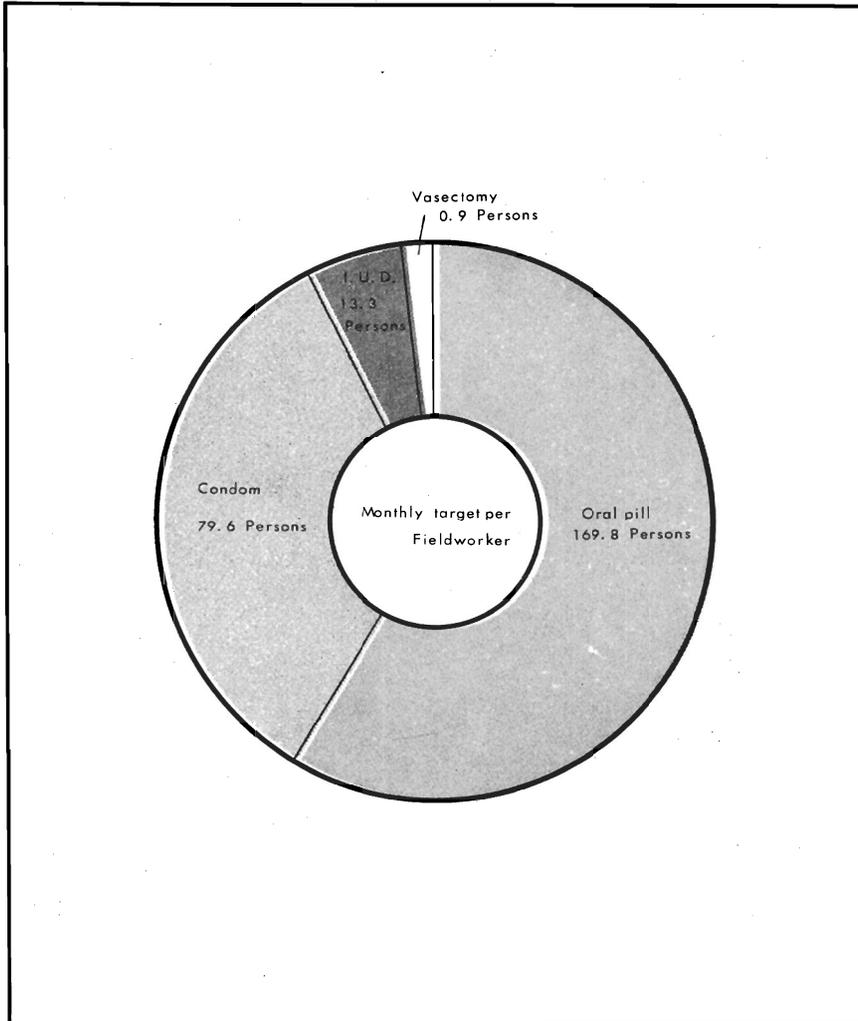
As of the end of December 1970, there were 2,214 family planning fieldworkers and 1,142 government-designated private doctors.

4. Licenses of Fieldworkers



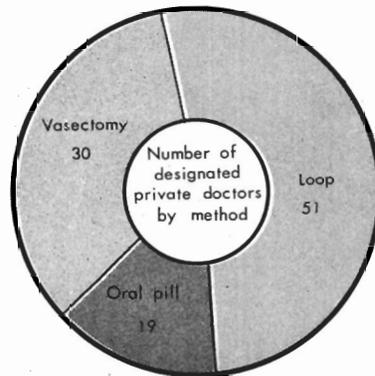
In March 1971, 82% of the 834 county health center fieldworker and 56% the 1,437 township fieldworker had licenses.

5. Monthly Target per Fieldworker



Per fieldworker a monthly target of 264 persons accept contraceptives. This is 13 IUD acceptors per fieldworker, 170 oral pill acceptors, 80 condom acceptors and 1 vasectomy acceptor.

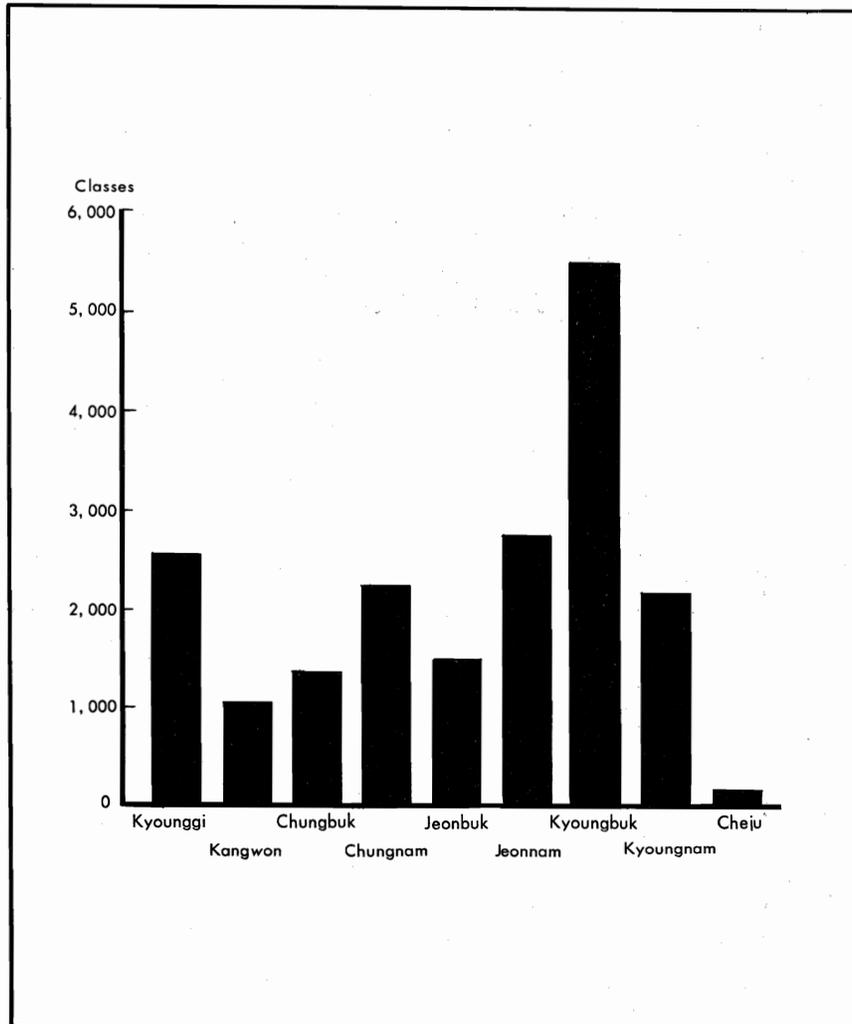
6. Designated private Doctors by Method



Of the 2,221 doctors, 1,126 (51%) do loop insertions.

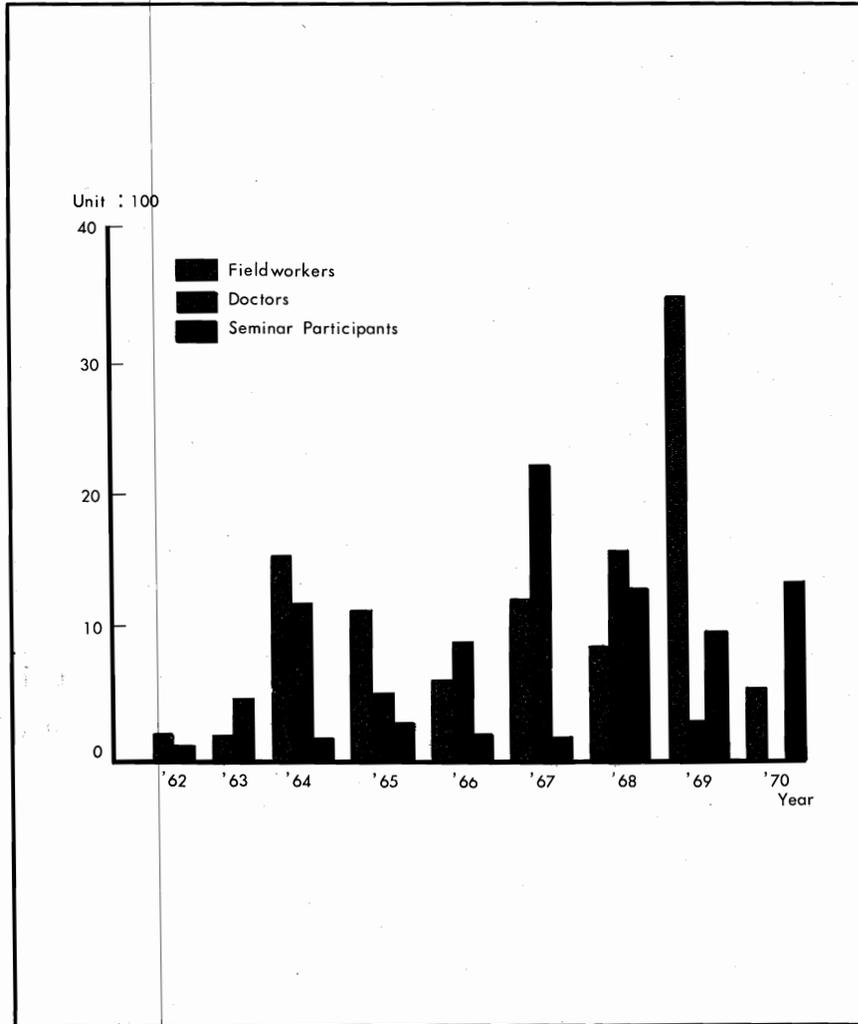
This reflects the emphasis of the program. Also there are 671 (30%) doctors doing vasectomies and 424 (19%) doctors providing oral pill examinations.

7. Number of Mother's Classes by Province



Mother's classes were organized by PPFK and were begun in July 1968. The total number of Mother's classes is 19,700. There are 10-20 members in each Mother's class. The total registered membership of the Mother's classes is about 344,000.

8. Number of Trainees by Year

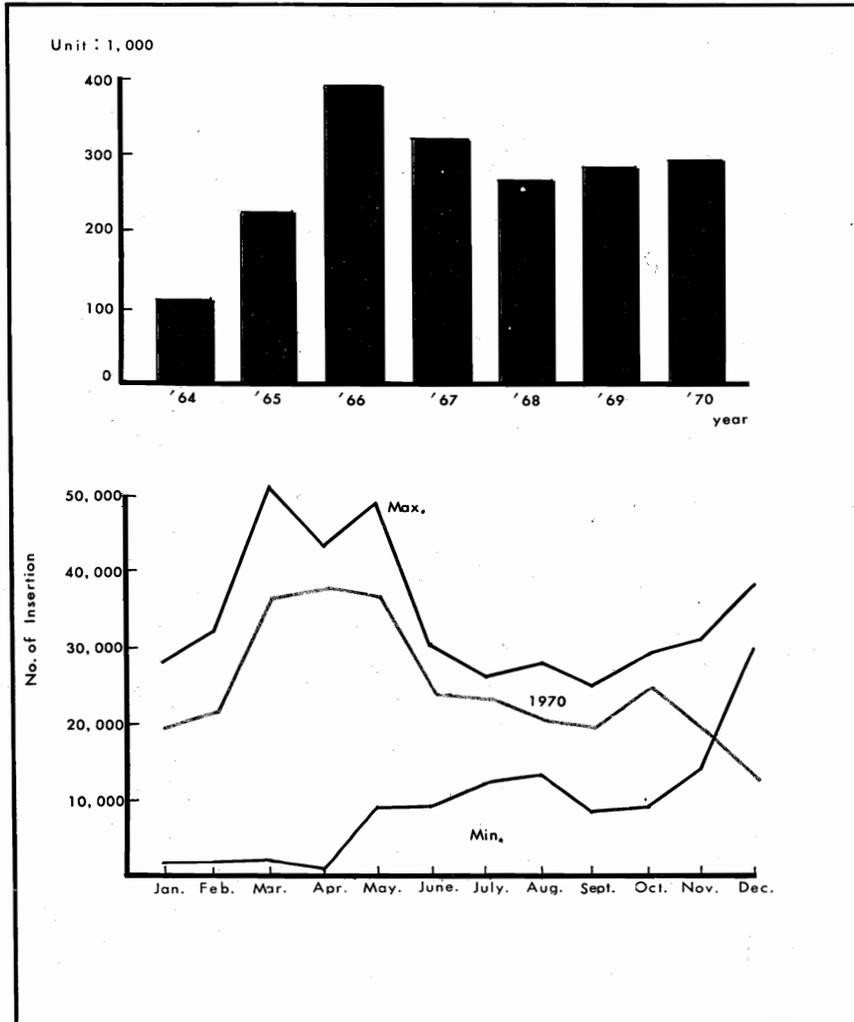


Until 1969, training of family planning field workers was conducted by PPFK in local areas and at the National Institute of Health. After the National Family Planning Center was established in July 1970, the center assumed the responsibilities for this training.

In 1971, 1,533 fieldworkers will be trained.

III. PROGRAM ACHIEVEMENT

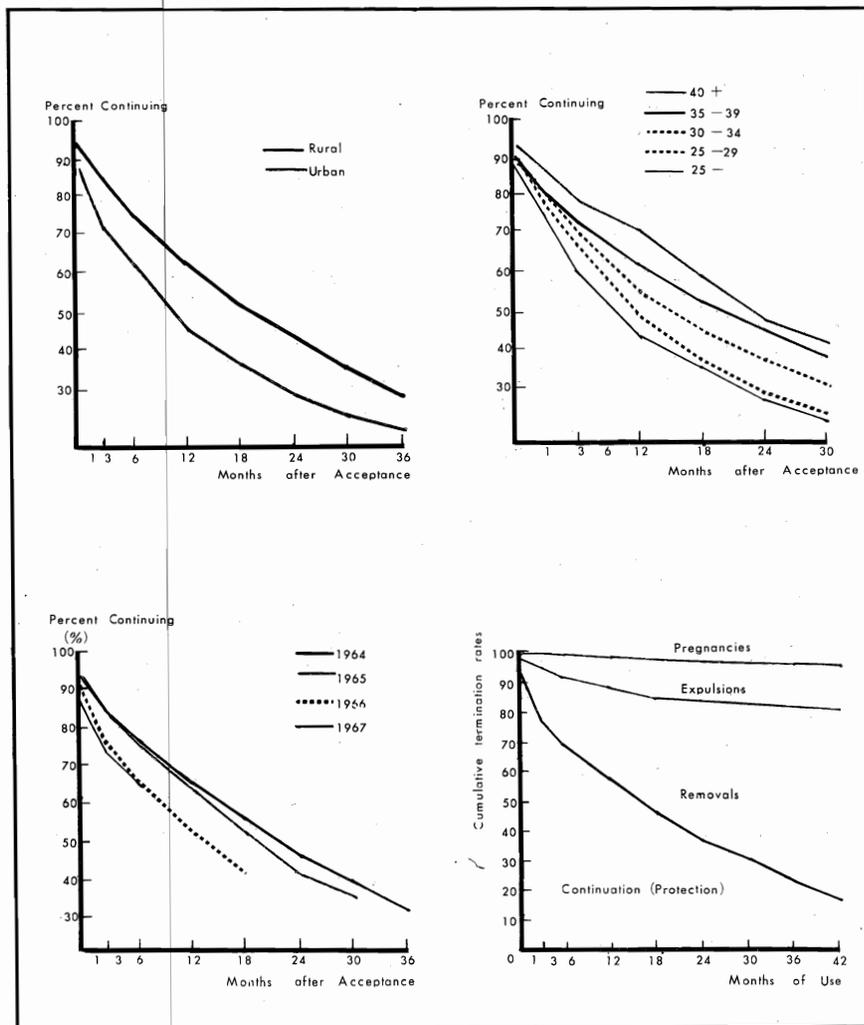
1. IUD Acceptors



The Republic of Korea initiated a nationwide loop program in May 1964. Cumulative loop acceptors reached about 1,890,000 as of December 1970. This is 47 percent of all married couples aged 20-44. The largest number of acceptors are recruited in the spring, and the least number are recruited during the harvest time from August to September.

The drop in the number of acceptors at the end of 1970 is a result of early achievement of the required target.

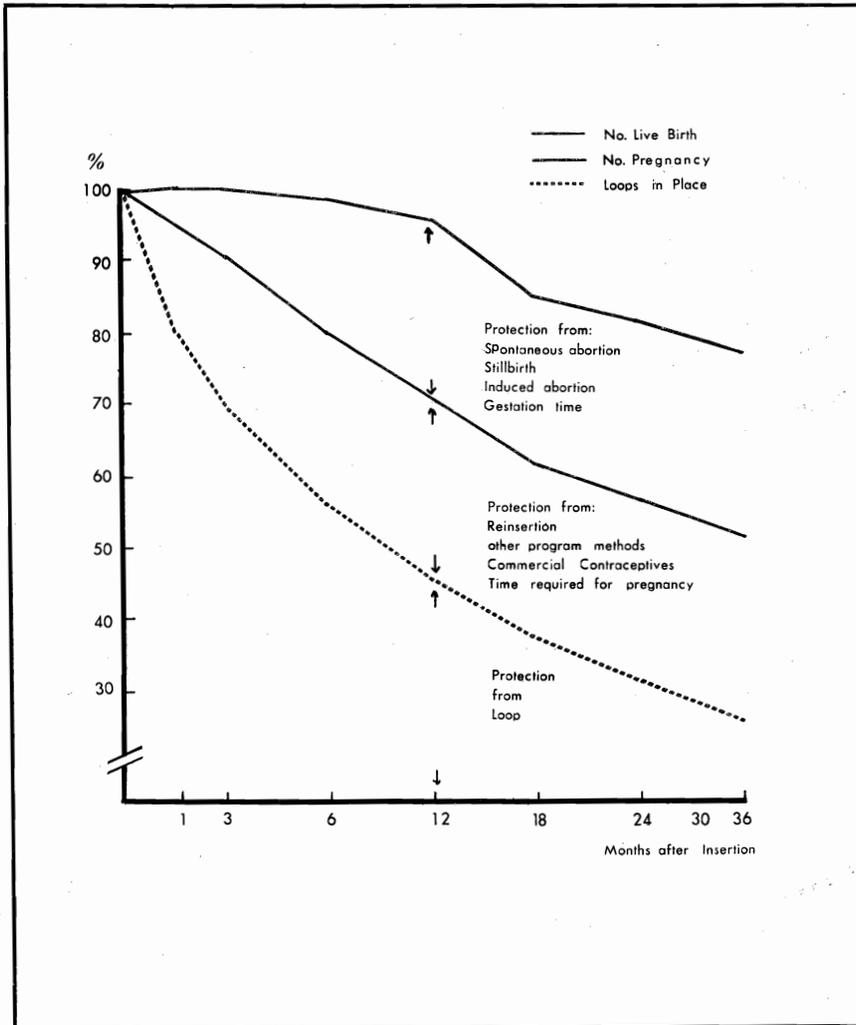
2. IUD Continuation Rates



Since 1964, about 1,890,000 IUD insertions have been performed. As a result of low continuation rates, however, it is estimated that there are only about 500,000 current wearers.

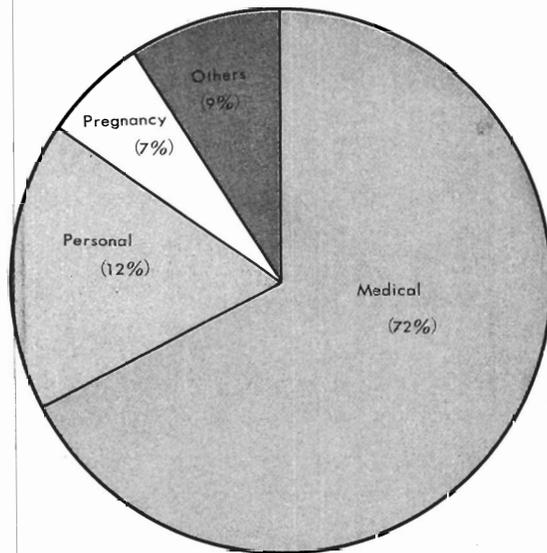
If termination rates are compared by area of residence, by age, and by year of acceptance it can be seen that continuation is higher in the rural areas, is higher among older women, and is higher among women accepting insertions earlier in the program. The largest number of terminations are a result of removals.

3. Continuation, Pregnancies, and Births for loop Acceptors by Months since Insertion.



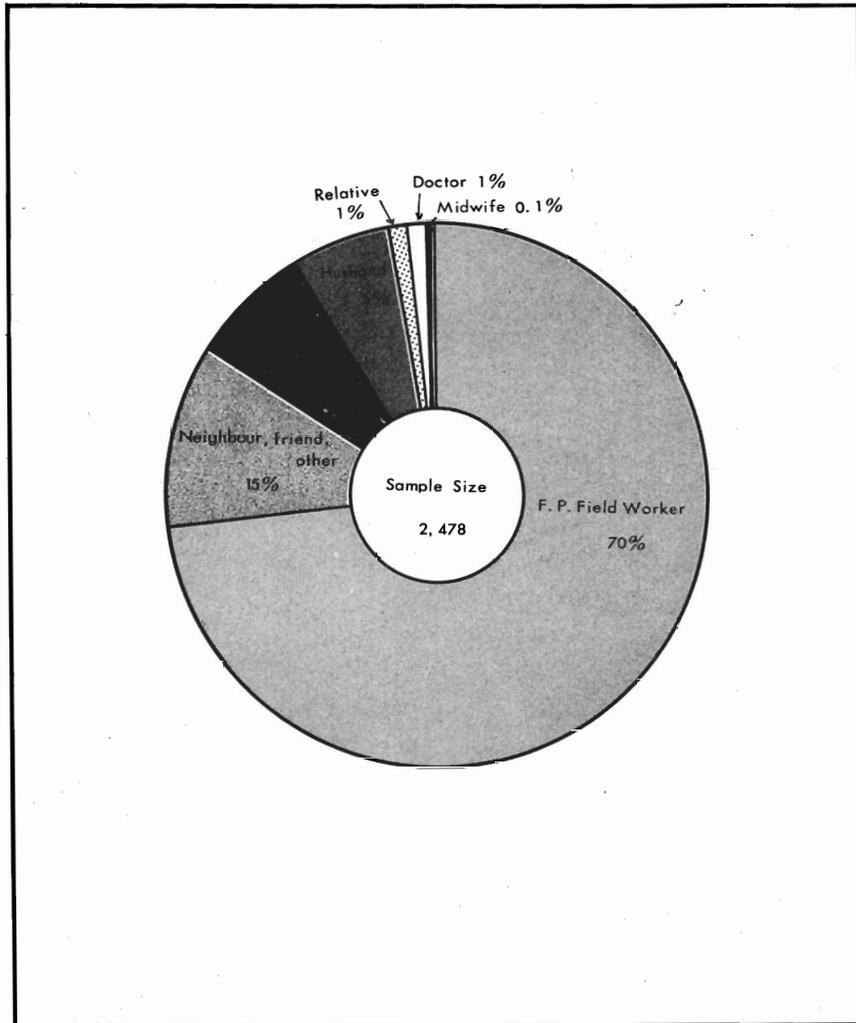
Loop acceptors are very likely to use another method of contraception or induced abortion to control fertility. 57% of women accepting IUD's are still wearing them after 12 months. Of the 43% who terminate IUD use, 23% are using another contraceptive method 12 months after insertion. Thus a total of 80% of the IUD acceptors are protected one year after insertion. If pregnancy wastage is added to this, 97% of the acceptors are protected.

4. Major Reasons for IUD Discontinuation



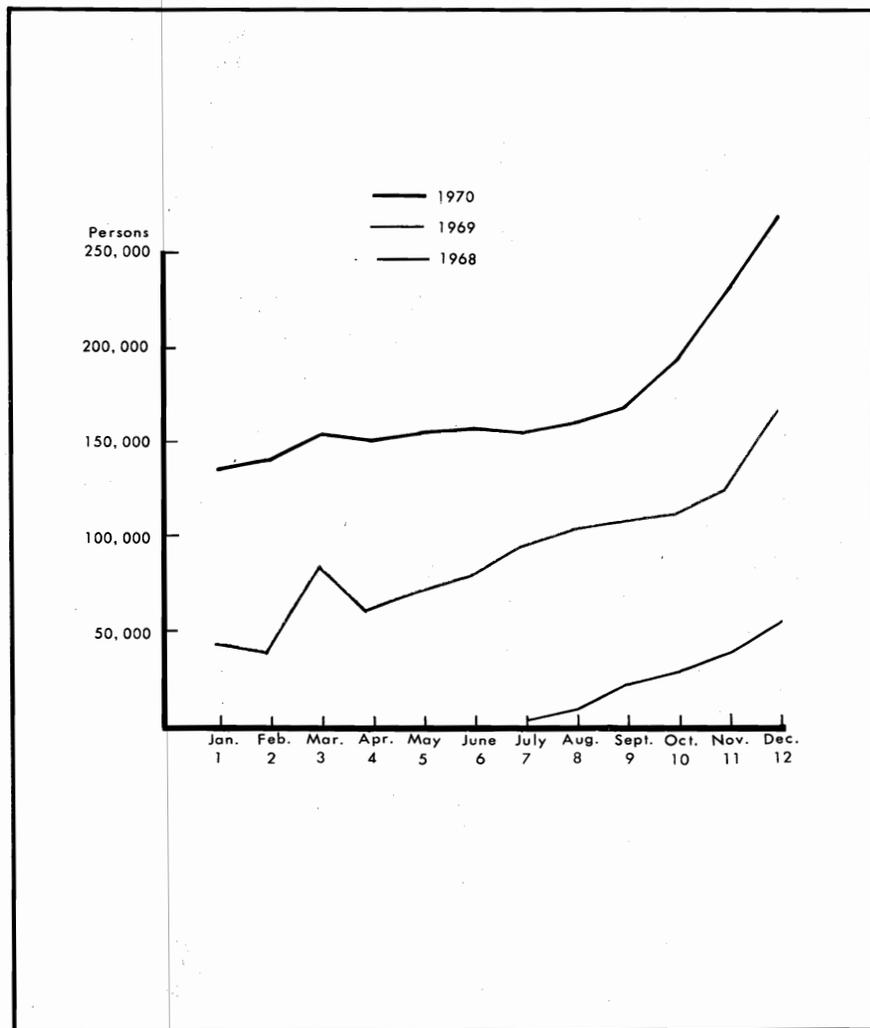
About two-thirds of IUD discontinuations are for medical reasons. About 12% are for personal reasons. Improved continuation rates are expected through increased care in screening prospective users and warning the clients against possible side-effects.

5. Persons Influencing Decision to Accept Loop.



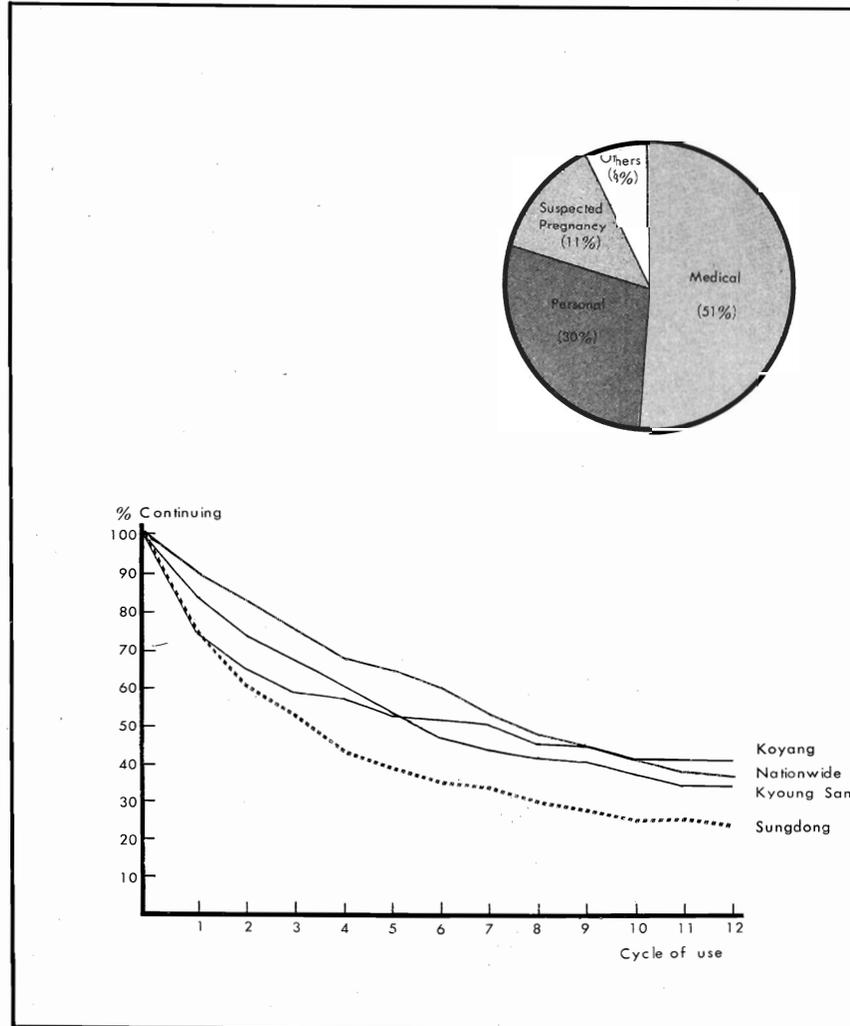
According to a 1967 survey, of all IUD acceptors about 70% accepted insertion after receiving recommendations from Health Center and Township fieldworkers.

6. Oral Pill Users



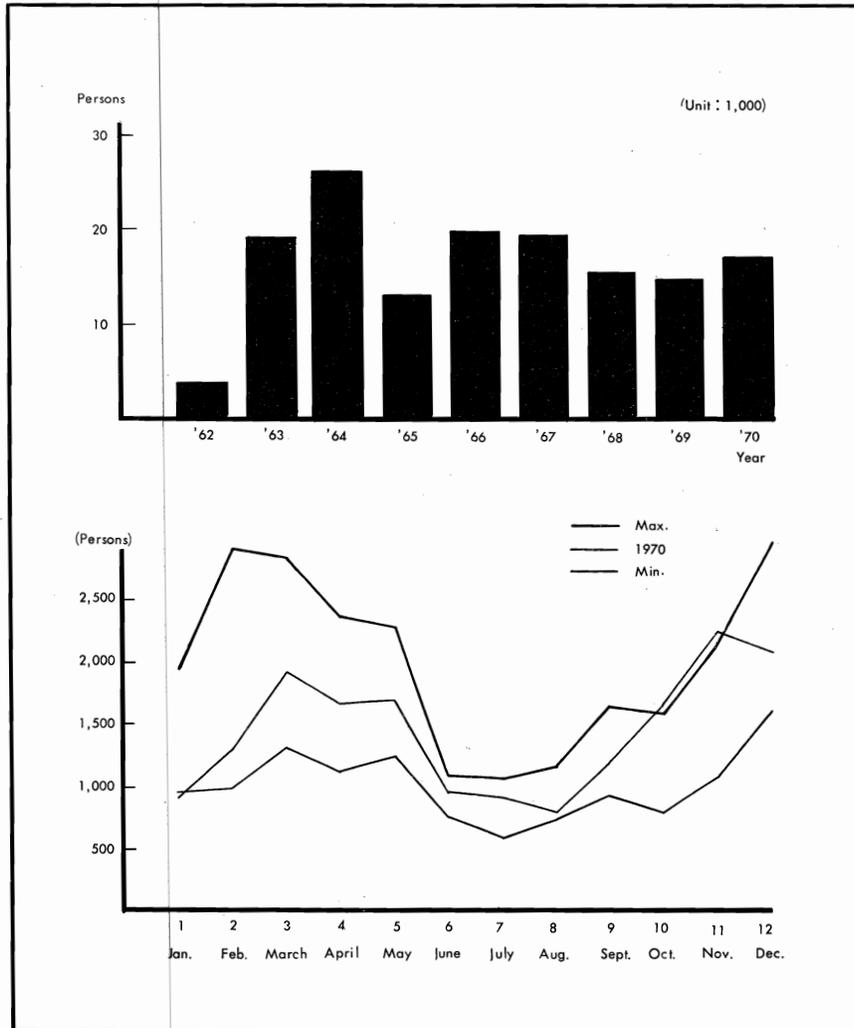
The annual target for oral pill acceptors is 320,000. Oral Pill acceptors have increased since 1968 when pills were introduced into the program.

7. Cumulative Oral Pill Continuation Rates



About 50% of oral pill discontinuations are for medical reasons, and 30% are for personal reasons. As with the IUD, improved continuation rates are expected as a result of more careful screening and improved awareness among the acceptors. When studies of continuation rates are compared it can be seen that over an extended period of time continuation is higher among rural women than among urban. The nationwide study showed that continuation rates were slightly higher than the median rates of the other 3 studies.

8. Sterilization Performance



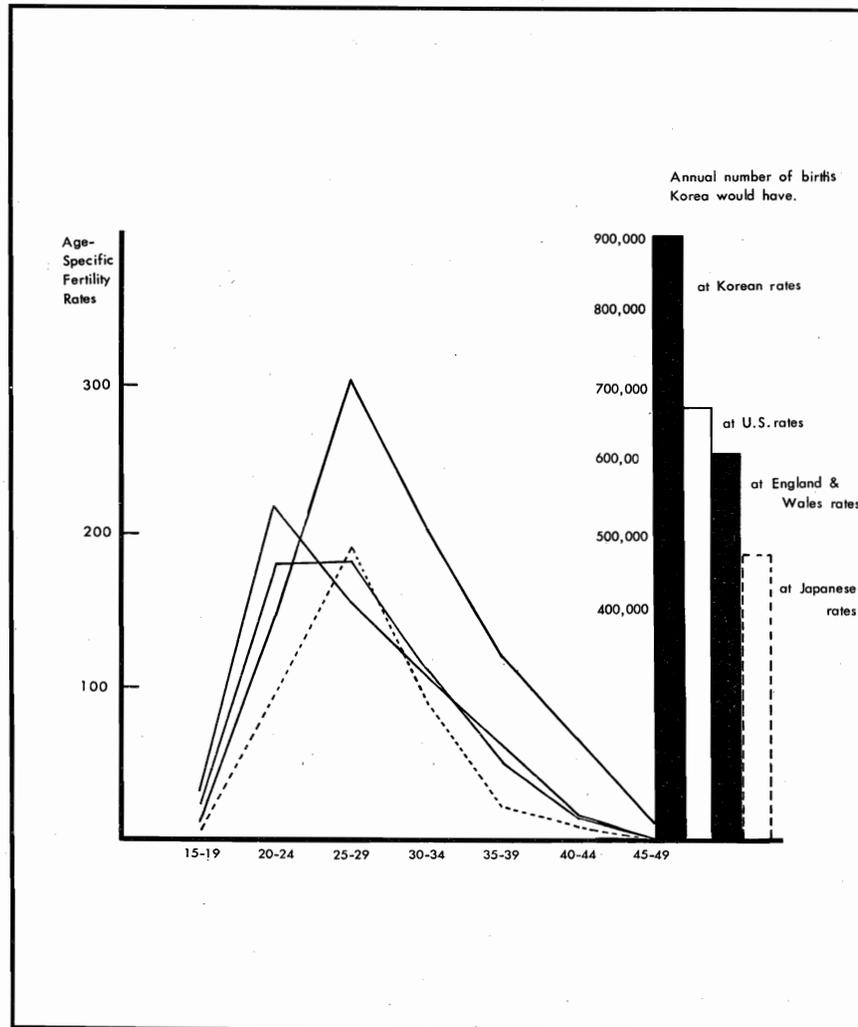
The vasectomy program was begun in 1962. Performance has been slightly below the annual target of 20,000.

Vasectomy is a more popular contraceptive method in urban than rural areas.

The seasonal fluctuation is the considerable with lowest acceptance rates occurring in the summer.

IV. CHANGE OF FERTILITY, KAP AND ABORTION

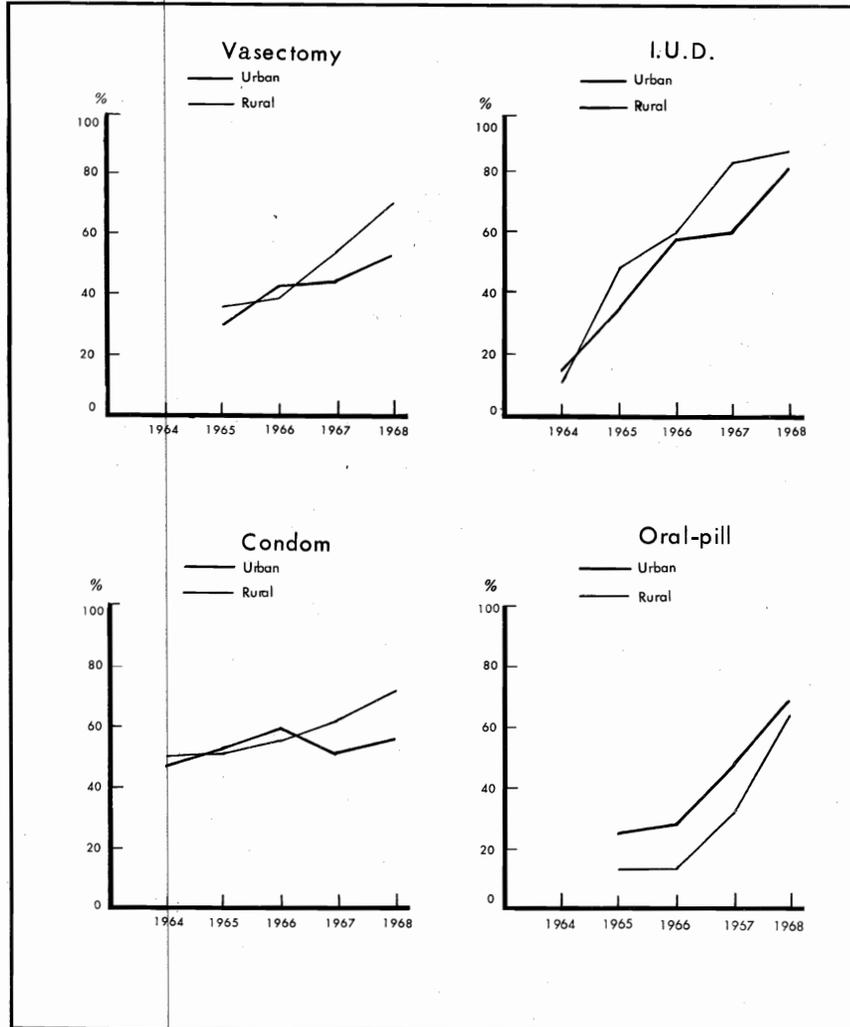
1. Age Specific Fertility and Annual Number of Births to Korean Women



Fertility in 1968 was highest at ages 25-29. Fertility in 1960 was much higher in the 20-24 age group and the 30 and over age groups. The reduction in fertility in the younger group was a result of increased age at first marriage, and in the older groups a result of increased contraception and abortion.

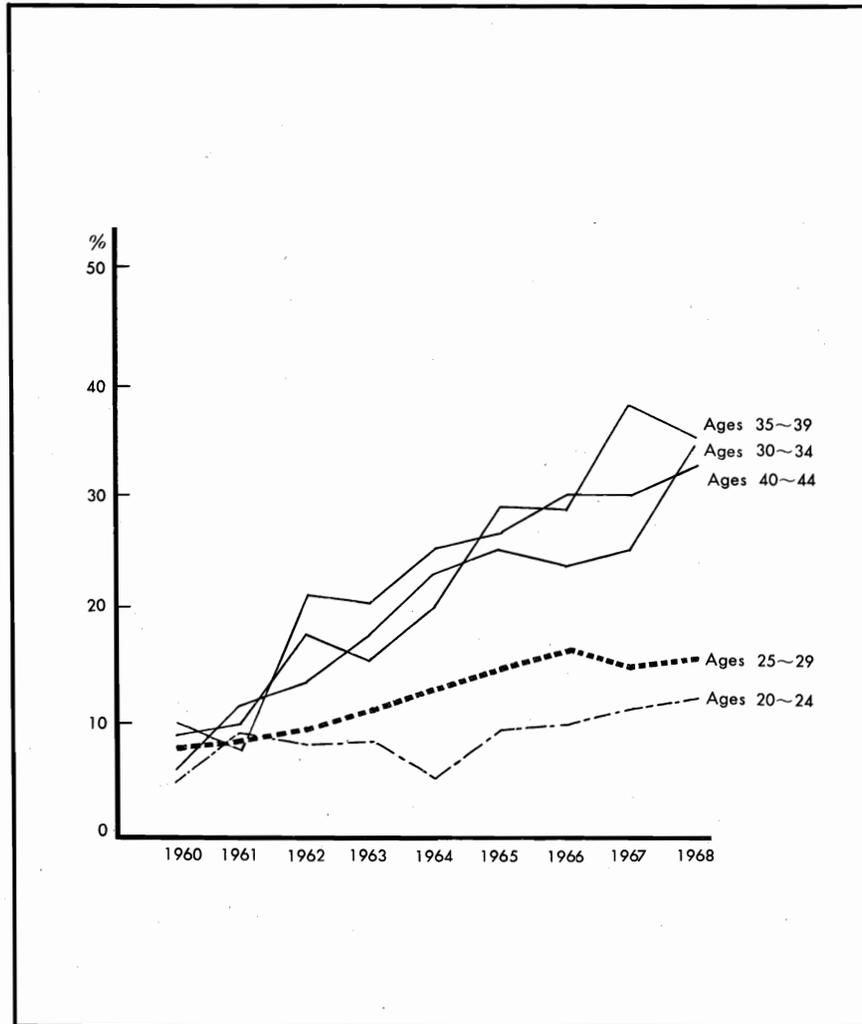
There must be considerable additional reduction in fertility if Korea is to match the rates of more developed countries.

2. Percent of Wives 20-44 Ever Hearing of Specific Contraceptives by Residence



Between 1964 and 1968, the number of people ever hearing of any contraceptive increased considerably. This rate of increase has been more rapid in rural areas than in urban areas.

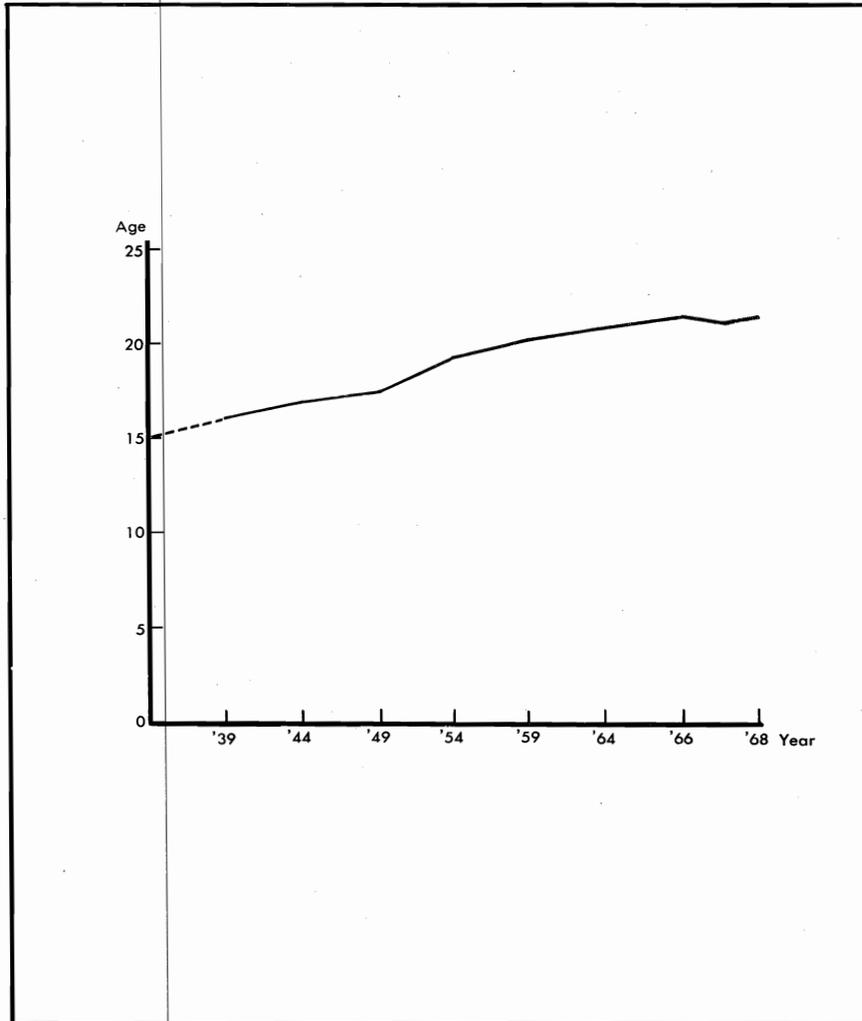
3. Percent of Pregnancies Ending in Fetal Wastage by year and Wife's Age at Event



Between 1960-1968 pregnancy wastage, attributed mostly to induced abortion, was higher in the 30 and above age groups than in the younger ages.

In the age group 30-39 the rate of pregnancy wastage increased from 9% to 35% in eight years.

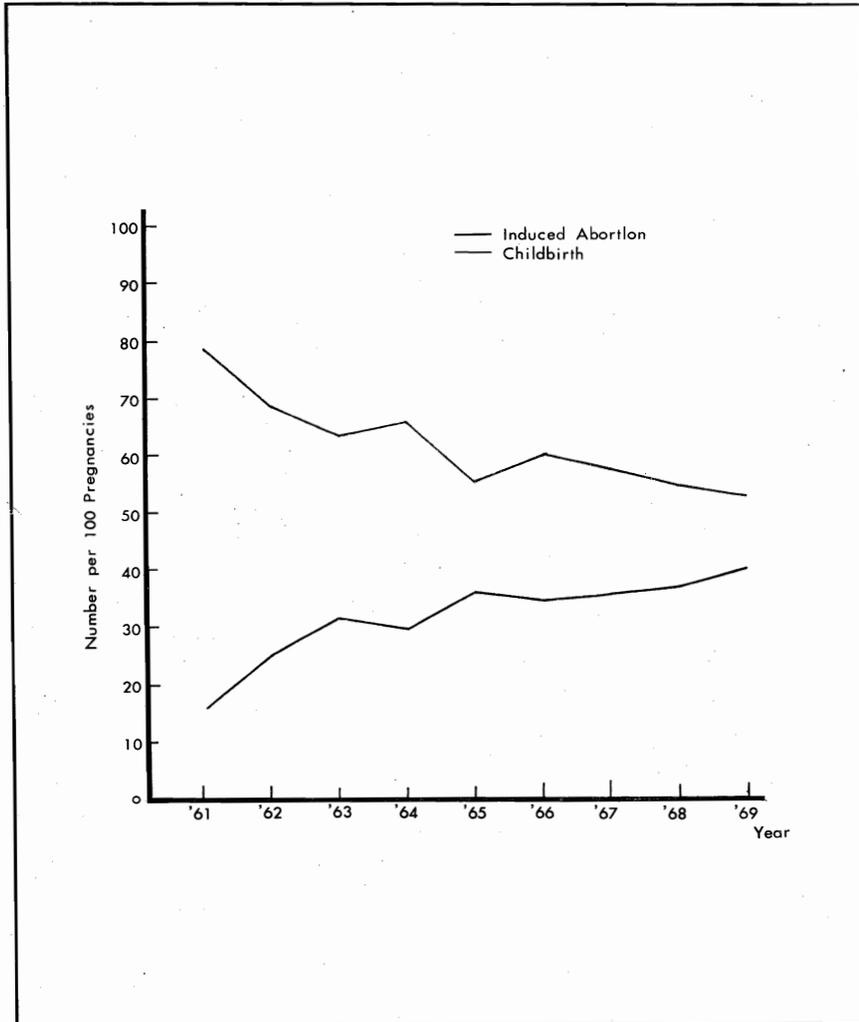
4. Mean Age at First Marriage by Year



Mean age at first marriage has increased by 4 years over the past 20 years. This is a result of various social, economic, and cultural changes. The mean age at first marriage in 1968 was 22.

In 1960, 70 out of a thousand women aged 15-19 were married. By 1968 this had declined to 27 out of a thousand. In the age group 20-24, 648 per thousand women were married in 1960. This declined to 340 per 1,000.

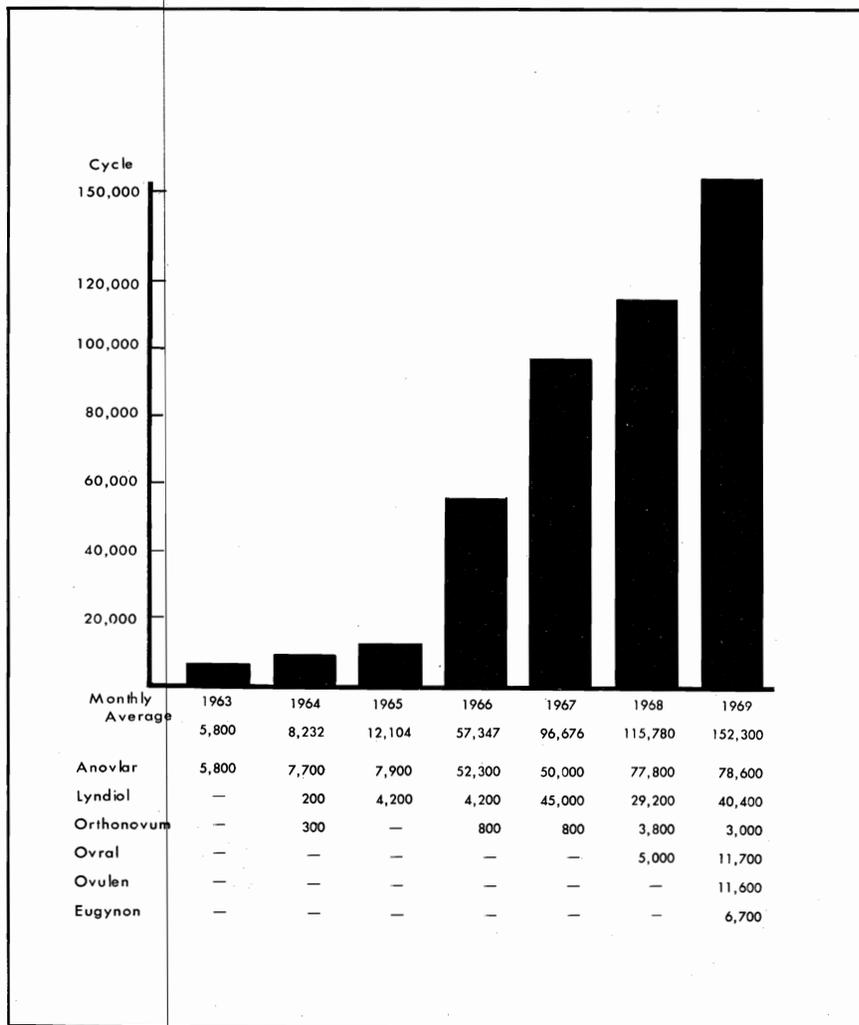
5. Number of Births and Induced Abortions per 100 Pregnancies by Year in Seoul.



In Seoul, the number of abortions per 100 pregnancies is increasing. In 1961 there were 16.6 induced abortions for every 100 pregnancies. By 1969 abortions had increased to 40 per 100 pregnancies.

Births steadily declined to 54 live births per 100 pregnancies by 1969.

6. Commercial Imports of Oral Contraceptives



The attractiveness of oral pills on the commercial market is indicated by the increase in pill imports. As of December 1969, such imports amounted to an average of 152,300 cycles per month.

7. Contraceptive Cost and Charge

Unit: Won

Contraceptives	Private Market price	Government Program					
		Price to government	Price to acceptor	Fee to doctor for operation	Fee to doctor for examination	referral fee to fieldworker	Comperation fee to acceptor
I.U.D.	—	4 ⁵⁰	—	400	—	50	—
Tuballigation	—	—	—	1,900	—	—	—
Oral pill	200 (per cycle)	—	30	—	50	—	—
Vasectomy	—	—	—	1,000	—	100	800
Condom	170 (per dozen)	32 ⁸⁸ (per dozen)	—	—	—	—	—

The government program provides all contraceptives except for the oral pill free of charge, a small service charge of 10c per cycle is charged for the oral pill.

The Lippes Loop IUD is produced domestically with the financial support of the Population Council.

The oral pill is contributed to the program by the Swedish International Development authority free of charge. Oral pills can be purchased commercially for about 60c per cycle.

Condoms can be purchased for 50c per dozen.

Private doctors receive payment for examinations and insertions on a per case basis.

Family Planning Fieldworkers receive a referral fee for each IUD and vasectomy acceptor.

Acceptors of vasectomy operations receive about \$2.50 in compensation for two days loss of work.