

Demographic dynamics and development in Nigeria: *Issues and perspectives*

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Abstract

Nigeria is the most populous country in Africa and has a very high population momentum with an annual growth rate of 3.2 per cent per annum. This momentum can be a panacea for development and economic growth if well harnessed. The focus of the article is to provide an overview of population dynamics in Nigeria with a view to situating this within a broader context of contemporary population and development discourse. The article benefited immensely from secondary data sources and desk review of evidence.

Keywords: Nigeria, population, development, people

Résumé

Le Nigeria est le pays le plus peuplé d'Afrique et d'une dynamique de population très élevée, avec un taux de croissance annuel de 3,2 pour cent par an. Cette dynamique peut être une panacée pour le développement et la croissance économique si bien exploitée. L'objectif de cet article est de donner un aperçu de la dynamique de la population au Nigeria en vue de situer cela dans un contexte plus large de la population contemporaine et discours sur le développement. L'article a bénéficié immensément de sources de données secondaires et l'examen de la réception de la preuve..

Mots clés : Le Nigéria, la population, le développement, et la population

Introduction

Nigeria is the most populous country in Africa, with over 160 million population, a land surface area of almost a thousand km² and a national growth rate of 3.2 percent per annum. The amalgamation of the Northern and Southern Protectorates in 1914 by Sir Lord Lugard marked the birth of Nigeria as a British colony. Nigeria became an independent nation in 1960 and a sovereign republic in 1963. In retrospect, Nigeria's 53rd post-independence and 100 years post-amalgamation anniversary, beyond the rhetoric of historical and political transitions and tensions, presents unending demographic questions that constitute frontline issues of national debates and dialogue. Critical among these are the issues of censuses, the population momentum and its implications, and interlinks between population and development. This special volume of the *African Population Studies* is dedicated to providing some evidence and explanations on Nigeria's population situation. This is an attempt to situate the broad demographic issues in Nigeria within the context of the population and demographic nexus, and setting the tone for the carefully selected manuscripts in this special edition.

The Nigeria demographic structure reflects a growing youthful population with a broad based population pyramid (see Fig 1 and Fig 2 for the period 1999 to 2050). According to the 2006 Nigeria cen-

sus, about 42% of the over 140 million people were aged less than 14 years, 29% were aged 15-19 years and 24% were in the prime age 30-59 years, and the proportions are similar for the estimated 158 million population as well as the projected 176 million in 2015 (NPC, 2009; UN, 2013). The population of the elderly was also estimated at 4.8% in 2006 and 5.1% in 2015. The median age of the population was estimated at 17.9 years (17.3 for males and 18.4 for females). This age structure in itself raises some concerns and has serious implications for sectoral planning and developmental arrangement. The age structure of the population has a direct bearing on education, labour force, social security among other factors. For instance, among the key questions are what proportion of the school age population is in formal school? What is the labour force situation as it affects the prime ages? And what sort of work and non-work related social benefits are available to the dependent older population?

A brief appraisal of these three key questions suggest some gaps in delivery of socio-economic benefits as it relates to the age structures of the population. Nigeria's literacy rate is estimated at 61% in 2008 (NPC and ICF Macro, 2009) and 78% in 2010 (NBS, 2010); with an estimated 58% primary school enrolment in 2008-2011 (UNICEF, 2012). Regional estimates of key indicators show that non-school

attendance is highest among states in the North-east and North-west zones, with about 72% of primary age children who never attended school in Borno state. This compares with less than 3% in most southern zones. National unemployment rate is estimated at 24% in 2011 with the highest rate in Bauchi (41%), Niger (39%) and Gombe (38%)

(NBS, 2012). A thorough review of the evidence showed that there is no formal social security benefit for the elderly in Nigeria. Only about two states (Osun and Ekiti) recently launched a policy to provide some paltry sum of money of about ten thousand naira (less than USD70) as monthly benefit to selected vulnerable elderly population.

Figure 1: Age-Sex Nigeria Population Pyramid from 1990-2050

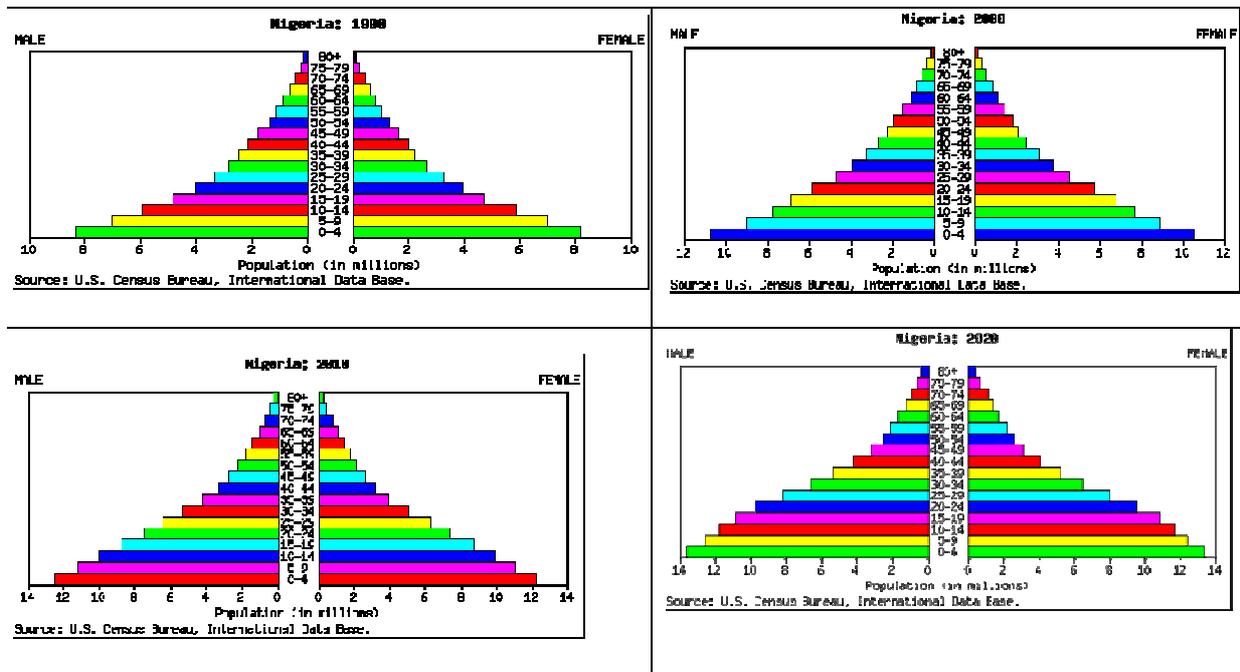
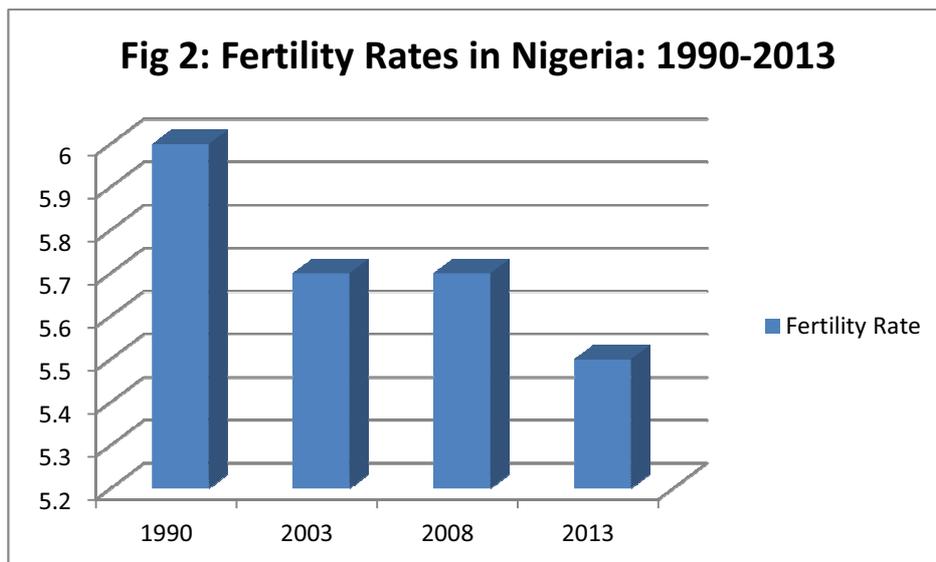


Fig 2: Fertility Rates in Nigeria: 1990-2013



Source: NPC and ICF International, 2013

The age-sex disaggregation of the population is also a critical indicator in the demographic, policy and program dialogue. According to the 2006 Census, Nigeria's population of 140 million comprises

71,709,859 males and 68,293,683 females with a sex ratio of 105. The sex ratios across the age groups are as follows: at birth: 106; 0-14 years: 105; 15-24 years: 105; 25-54 years: 97; 55-64 years: 85; 65

years and over: 85 (CIA, 2013). The age-sex distribution of the population presents some understanding of some basic gender estimates in the population. For instance, the age-sex distribution relative to educational statistics disaggregated by gender provides some estimates of male/female factors in school enrolment. This can also be useful in understanding the labour force and employment statistics of the country. Literacy rate is higher for male than female in Nigeria with an estimated rate of 84% for male compared with 74% for female (NBS, 2010).

Nigeria has one of the fastest growing populations in the world. with an estimated growth rate at about 3.2%. It is projected that at that rate, the population will double in size in just 24 years (NPC, 2009). The spatial distribution and residence pattern showed that about 60% of the population live in rural areas while about 40% live in urban areas. Even within the urban configurations, many settlements can be categorized as urban slums with little or no basic infrastructure. With the neglect of agriculture in the quest for greener pasture by rural dwellers, urban areas are growing more rapidly, and have grown by about 3.7% per annum in the past decade. The urban population is estimated to be 46% in 2020.

Population dynamics

Population figures in absolute terms may be of limited importance in understanding quality of life of the

people. The dynamics of the population provides more useful explanation in quality discourse of both the parameters and implications of the population figures. Three key important population parameters are critical in underpinning population changes. These include fertility indicators, mortality patterns and estimate, and migration. Of course, there are other very important indicators related to economic measure, labour force and development. This section is focused on providing succinct indicators and explanations on the three key indicators identified.

Nigeria has experienced a general decline in the four mortality indicators: infant, child and under-five mortality rates, and maternal mortality rates (Table 1). The NDHS shows that infant mortality rates dropped from the 100 per 1,000 live births in 2003 to 69 per 1,000 live births in 2013; child mortality rates dropped from 112 per 1,000 live-births in 2003 to 88 per 1000 live-births in 2008 and to 64 per 1000 live births in 2013. Under-five mortality rate dropped from 201 per 1000 live births in 2003 to 128 per 1000 live births in 2013 (NPC and, ICF International, 2013). Maternal mortality estimates varied among different sources. Estimates from two sources were presented in tables 1 and 2 below. According to the estimates from the DHS and WHO, a range of between 545 and 630 maternal deaths per 100,000 live births in 2010 is quite high and accounted for 14 percent of global maternal deaths (Table 2).

Table 1 Mortality estimates in Nigeria: 1990-2013

	1990-1998	1998-2003	2003-2008	2008-2013
Infant mortality (<i>Iq0</i>)	97	99	75	69
Child mortality (<i>4q1</i>)	113	97	88	64
Under5 mortality (<i>5q0</i>)	199	187	157	128
Maternal(per 100,000 livebirths)	-	704	545	-

Source: NPC and ICF International, 2013

Table 2 Estimate of maternal mortality in Nigeria- WHO, 2010

Year	Maternal mortality ratio (MMR)	Maternal deaths	Live births	Proportion of maternal deaths among deaths of females of reproductive age (PM)	Life time risk of maternal death
	Per 100,000 live births (1b)	Numbers	Thousands	Percent	1 in
2010	630(370-1200)	40,000(23,000-75,000)	6,334	16.1(9.5-30.3)	29
2005	820(480-1600)	47,000(27,000-88,000)	5,740	17.6(10.4-33.2)	22
2000	970(570-1900)	50,000(29,000-96,000)	5,194	20.1(11.8-38.5)	18
1995	1000(590-2100)	49,000(27,000-95,000)	4,693	24.7(14.0-48.0)	17
1990	1100(590-2100)	46,000(25,000-90,000)	4,280	30.8(17.0-60.9)	15
Annual % change					
1990-2000	-0.9				
2000-2010	-4.3				
1990-2010	-2.6				

World population prospects: the 2010 revision. New York, Population Division, Department of Economic and Social Affairs, United Nations Secretariat, 2011

It is very important to note that there are wide variations in these rates across regions and states with the North-eastern zone having the highest rates in child and maternal deaths while the South-west has the lowest. Also, variations exist across rural-urban, educated and uneducated dichotomies. Two key issues are crucial in explaining the high child and maternal deaths in Nigeria. Firstly, are issues of availability and accessibility of health facilities and services in Nigeria. The facilities, where available, are characterized by systemic challenges and failures, including non-functional facilities, and incessant industrial strikes and actions. Generally, the uptake of immunization is still considerably low with less than 60% national coverage. In many settings, the up-take of maternity care has been relatively low in Nigeria, with only 35 percent of births occurring in a health facility and 39 percent being assisted by a skilled provider (NPC and ICF Macro, 2009). Secondly, are issues related to poverty, citizens' perception and attitude towards health care services. These, in part, explain the high level of patronage of quacks and traditional medicine practitioners in Nigeria

According to the NDHS taken over the years, total fertility rates in Nigeria has assumed a downward trend from an average of 6 children per

woman in 1990 to 5.5 in 2013 (see figure 2). With the modest reduction, Nigeria still ranks high among countries with high fertility in Africa and the world. As with other major indicators, there are wide variations in regional as well as rural-urban fertility rates. According to the NDHS 2008, fertility rate in the North-West (7.3) was the highest followed by the North-East (7.2), while the lowest rates were in the South-West (4.5) and South-South (4.7) (Table 3). Contraceptive prevalence rate remains very low in Nigeria, with only 15 percent of currently married women using any method of contraception, and only 10 percent of currently married women are using modern any method (NPC and ICF International, 2013). Contraceptive use is highest in the South-West, estimated at 38 percent, and lowest in the North East, estimated at only 3percent. Although, many women would like to delay or stop having children, the low rate of contraception particularly in the northern part raises serious challenges of abating the high unmet need for family planning. Consequently, there are challenges of growing numbers of unwanted pregnancies and births, high tendencies for procurement of unsafe abortion, and its consequences on maternal morbidity and mortality.

Table 3 Total fertility rates for women 15-49 1980-2008 by region

Region	1981/82	1990	1999	2003	2008
North East	6.4	6.5	6.8	7.0	7.2
North West	6.8	6.6	6.5	6.7	7.3
North Central	-	-	-	5.7	5.4
Central	-	-	4.5	-	-
South East	6.0	5.6	4.6	4.1	4.8
South West	6.6	5.5	4.5	4.1	4.5
South South	-	-	-	4.6	4.7
National	6.3	6.0	5.2	5.7	5.7

NPC and ICF International, 2013

The Nigerian migration dynamics reflect threesome facets: internal migration, regional migration flow within the ECOWAS and Africa, and international migration beyond Africa. The country's migration profile revealed that of a highly volatile migration flows. With a net migration rate of -0.4, a stock of emigrants as percentage of population estimated at 0.6%, and stock of immigrants as percentage of population estimated at 0.7%, the country portrays a figure of attraction to migrants within her boundary and that of high migration sending country (see table 4). Internal migration pattern is usually from rural to urban. However, there are new dimensions to migration particularly the internally displaced and force migrants due to security challenges in northern parts of the country. Besides, Nigeria's borders attract high volumes of migrants from neighboring countries. The high level of emigration of Nigerian citizens invariably gives rise to high volumes of remittances from abroad with the networks of diaspora communities spread around the world. In

2012, statistics available to the Central Bank of Nigeria on official remittances indicated that Nigerians in the diaspora remitted about 21 billion US dollars, with the possibility that the figure will increase in subsequent years, considering the dynamics of mobility of international labour migrants, frequency of international labour migration and current interventions to engage the population in the diaspora in national development efforts. The migration dynamics portend both positive and negative effects on livelihood and national institutions, policies and security. Nigeria ranked high among 20 countries in the world with the highest remittances flow (World Bank, 2009). However, there are critical issues of concern as it relates to security and political threats as recently experienced in North-East Nigeria, increased crime rates along the borders, smuggling and illicit trade including clandestine migration relating to human and child trafficking.

Table 4 Population and migration characteristics of Nigeria: 1990, 2000 and 2005

	1990	2000	2005	2010
Estimate total population at mid-year ('000)	97,338	124,842	140,879	158,259
Estimate of international migrants at mid-year 9('000)	447	751	972	1,127
International migrants as % of total population	0.5	0.6	0.7	0.7
	1995-2000	2000-2005	2005-2010	
Net number of international migrants ('000)	-19	-34	-60	
Net migration rate (per 1,000 people)	-0.2	-0.3	-0.4	

Source: UNPD, 2009 International Migrant Stock Database.

Population and socio-economic dynamics

According to World Bank estimates, the average life expectancy in Nigeria is 52 years with a poverty head count ratio of 46% (World Bank, 2012). Nigeria has the largest economy in West Africa and the second largest in Sub-Saharan Africa (next to South Africa). The IMF estimate of the Nigerian GDP in 2012 was at USD 375 billion. This places Nigeria's GDP just behind South Africa's GDP of USD 390 billion, making Nigeria the 30th largest economy in the world. The structure of the Nigerian economy is predominantly primary product oriented, largely crude-oil production and export. Starting from the 1970s the role of agriculture and manufacturing sectors in the Nigerian economy diminished. In 2011, the oil and gas sector accounted for 79% of the revenue collected at the federal level and 71% of export revenue. Agriculture, which

remains very vulnerable to climate change, still accounts for relatively significant proportion of the nation's GDP and employs about 70% of the labour force despite infrastructural, production and market support services constraints.

The major question to scholars in population and development studies is the connection between the GDP and the population. There are ample evidence to suggest an unhealthy connection between the huge GDP and quality of life of its citizenry. The country is still battling with the provision of minimal basic infrastructural facilities including electricity supply, transportation and security. Table 5 and 6 below examined poverty indicators and labour force situation as a proxy to quality of life of the citizens. More than half of the population is living below poverty line. There is also a very high unemployment rate of about 10% (the rate is affected by the proportion of people classified as engaged in agriculture).

Table 5 Trends in poverty level, 1980–2004

Year	1980	1985	1992	1996	2004
Poverty level (%)	28	46	43	66	54
Total population (est. in million)	65	75	92	102	126
Population in poverty (in million)	18	35	39	67	69

Source: National Bureau of Statistics (NBS), 2005.

Table 6 Labour force, employment and unemployment rate, 2000–2008

	2000	2001	2002	2003	2004	2005	2006	2007	2008
Labour force (million)	49.7	50.5	51.2	52.7	53.7	56.8	58.3	60.0	61.1
Labour force growth rate (%)	-	1.5	1.6	2.8	1.9	5.8	2.6	2.9	1.8
Employment (million)	41.1	43.6	44.8	46.8	47.8	49.6	52.0	53.9	55.0
Employment growth rate (%)	-	6.1	2.8	4.5	2.1	3.7	4.9	3.7	2.0
Unemployment rate (%)	18.0	13.6	12.6	11.2	11.0	12.8	10.8	10.1	9.9

Source: NISER, 2008

Population and development: sectorial review

Development is far more than the narrowly construed economic viewpoint as increase in Gross Domestic Product (GDP) of a nation. Development is a broad concept that has a direct bearing on the quality of lives of the citizen (UN, 1994; UNDP, 1996). Although what constitute measures of quality of life is numerous, general indicators are mostly used for its evaluation. Development revolves around this and the machinery for achieving this is through developmental planning. It relates to identi-

fying developmental goals, objectives, planning, and problems in order to enhance high quality of life. Two major indicators of assessing quality of life commonly used are the socio-economic indicators (SEI) and the human development index (HDI). Each of these indicators is measured with composite parameters from different sectors of the economy. Population issues within this sector are crucial in arriving at estimates for policy and program interventions. In general, the role of demographic factors in planning derives from their nature as both the determinants and consequences of economic and social progress (UN, 1990).

This is also the case in sectoral planning, which concerns certain segments of the population. As noted by Makinwa-Adebusoye (1999), the notion of interactions between population elements and development planning is better explained through the various paths of population growth, poverty, agriculture and environment. This point was also supported by Todaro (1977; 1997) in his notion of integrating population into development planning. He affirmed the importance of demographic variables in the elaboration of development plans, formulating population policies within the context of development policies; and, integrating the processes of development and population planning with the ultimate goal of eliminating and/ or minimizing poverty, unemployment and inequality. Some of sectoral assessments areas presented:

Governance: politics, governance and democracy

Nigeria returned to democratic governance in 1999 after over three decades of military dictatorship. The country has witnessed successful changes in government through the electoral process. However, there were inherent challenges in the electioneering processes. There was evidence of irregularities in the whole electoral processes from registration of voters to the actual voting and counting processes. The estimate of eligible electorate is not very clear and there are several challenges associated with this. Vital registration in the country is weak; the national identity card project is beclouded in several irregularities and not yet functional. The only valid identity for electorate remains the voter's card. The voters' cards are electronically issued but the efficiency of the biometric encrypt information is not very certain yet. This has serious implications for smooth electioneering processes. Election results are often contested by the opposition and Supreme Court judgments have been necessary to validate presidential and some state elections. The relatively stable democracy is threatened by recent security challenges. Governance assessment by the Mo Ibrahim Foundation ranks Nigeria 43rd out of 52 countries in 2011 (African Development Bank, 2011). Democratic institutions of governance, which are critical for ensuring a viable and effective system of governance, such as the legislature, need some reforms. The judiciary needs to be strengthened to ensure an impartial administration of justice, while the functionality of the legislature needs to be enhanced and parochial interests removed.

Health

We examined two critical indicators of health namely, reproductive health indicators and the

health care carrying capacity in terms of the numbers of professional health care providers to the total population. Health indicators in Nigeria are generally very poor. Nigeria ranked very high among countries with high global burden of diseases. There are indicators to show the evidence the deteriorating health conditions in the country. According to the United Nation (2013) and the World Health Organization (2012) estimates for Nigeria, under-five mortality and maternal mortality rate remained one of the highest in the world, and Nigeria has 5.4% adult HIV prevalence rate. The Nigeria Demographic and Health Survey (NDHS, 2003, 2008 and 2013) also corroborated these poor health indices. According to the report, only 32 percent of all births were delivered at health facilities, while less than 30 percent of all births were attended to by qualified medical practitioners. The re-emergence of non-communicable diseases such as tuberculosis and malaria has also increased the disease burden considerably.

Other evidences (COMPASS, 2005; 2007; 2009) showed that health indicators in Nigeria are worrisome. The prevalence of fake drugs and substandard products are compounding the problems, the AIDS epidemic and unhealthy lifestyles of many individuals are making the matter worse (Orabuchi, 2005). The sustainability and viability of a country's economic and social growth depend largely on vibrant health-care sector of that nation. No country can maintain a steady economic growth in the absence of an adequate healthcare system. Healthcare issues have been enigma in the life of Nigeria (Orabuchi, 2005).

According to the WHO definition of Human Resources for Health, they are those who promote and preserve health as well as those who diagnose and treat diseases (WHO, 2006). They are, therefore, the pivotal of health service delivery and determine the output and outcome of health. Nigeria is one of the countries with huge natural resources but acutely under-funded health system. Access to quality healthcare is very limited in Nigeria. Government expenditure on health as a percentage of GDP was 1.3% in 2003 (UNDP, 2006), a decline from 2.2% in 2000 (WHO, 2006). Health services particularly public health facilities constitute one of the essential (special) services usually exempted from industrial actions and granted special consideration in such situation. Cases of industrial action through prolong strikes by health workers are now common. There were period between year 2005 and 2007 and 2012 to 2014 when government hospitals were closed for over one month nationwide. The carrying capacity in terms of the ratio of qualified medical doctors to the total population in Nigeria is 39 doctors per 100,000 populations. This is grossly inadequate for the opti-

mal health service care.

The shortages are in part linked with the exodus of qualified medical doctors to developed countries largely due to poor working conditions and benefits. It is estimated that about 2,392 and 1,529 Nigerian doctors are legally registered in the US and UK respectively (Adepoju, 2004; AAMC, 2010, Hago-pian et al, 2010). The brain drain of Nigerian medical personnel has resulted in gross scarcity in the country. Table 7 below shows the number of doctors and dentists across Nigeria states. Healthcare systems in both developed and developing countries are in dire need of skilled health professionals. This situation is exacerbated by the emigration of large numbers of

its trained medical and paramedical professionals. Nigeria ranked first among African countries (5th globally) with the largest number of nurses; and fifth in Africa (19th globally) among countries with the largest number of doctors in OECD (in full first before the abbreviation) countries (OECD, 2007). This is a big challenge to the deteriorating health situation in the country and to the realization of the health related goals of the MDGs. Health issues have always topped the priority list of governments over the years but reversing the personnel shortages occasioned by the massive emigration to developed countries and the Middle East has remained unchallenged.

Table 7 Number of qualified doctors and dentists in Nigerian hospitals across the States

STATE	DOCTORS		DENTIST	
	2010	2011	2010	2011
Abia	200	65	5	2
Adamawa	58	6	1	2
Akwa-ibom	179	176	5	1
Anambra	450	375	8	4
Bauchi	31	4	6	2
Bayelsa	147	141	2	4
Benue	103	88	4	2
Borno	154	168	8	7
Cross-River	101	49	2	2
Delta	77	217	19	14
Ebonyi	109	172	1	4
Edo	603	722	53	62
Ekiti	187	233	12	15
Enugu	552	395	16	14
Gombe	76	81	1	3
Imo	354	289	4	2
Jigawa	48	6	4	-
Kaduna	488	323	11	15
Kano	411	315	8	12
Katsina	21	8	-	-
Kebbi	9	-	-	-
Kogi	90	58	1	2
Kwara	306	116	8	10
Lagos	2029	2575	108	159
Nasarawa	75	21	3	1
Niger	116	10	4	1
Ogun	348	379	15	10
Ondo	315	238	8	10
Osun	345	463	23	34
Oyo	517	602	55	66
Plateau	354	368	10	6
River	587	604	19	32
Sokoto	146	9	1	-
Taraba	8	66	-	1
Yobe	34	2	-	-
Zamfara	36	1	1	-
FCT	735	930	29	54
Nigeria	10399	10275	455	553

Source: General Household Survey Report. NBS/CBN 2012 Survey.

Education

Education and literacy statistics in a country constitute critical indicators or proxies for human capital. The general literacy indicator produced by the National Bureau of Statistics (2010) showed that about 8% of children 6-14 years never attended school, while about 3.2 of children in the same age

dropped out of school. Youth literacy rate in English Language was estimated at 76%, and for adult at 58%. However, about half (47%) of illiterate adults had wish to be educated. This is a major a challenge and concern in improving the human capital of the populace. Beyond these, there are critical challenges with Nigeria educational sector. The UNESCO pro-

file (2012) reiterated the fact that the number of schools, facilities and teachers available at the basic education level remain grossly inadequate. Academic curricula are tilted towards academics and less on skills; there is huge apathy for technical and vocational education and although the minimum qualification for teaching is the 3-year post-secondary National Certificate of Examination, many teachers are unqualified. As a result, learning achievements are poor, as illustrated by the Africa Student Learning Index compiled by the World Bank, in which Nigeria receives the lowest score (UNESCO, 2012).

Tertiary education in Nigeria is confronted with numerous challenges. The statistics produced by the Joint Admission and Matriculation Board (JAMB) showed that from over a million applicants to national universities per session from 2006 till date, only about 12% - 15% were able to secure admission. The inadequacy of the tertiary education to absorb many highly qualified candidates has gross implications and resultant consequences. For example, the last decade has witnessed a proliferation of private schools, many lacking the basic minimum thresholds for sound academic environment and culture. Public tertiary institutions in Nigeria relied heavily on government subvention and this has been grossly inadequate in meeting the funding challenges of tertiary education in the country. The overall funding devoted to education between the year 2006 and 2013 is less than 10% of the total national budget, this is a major challenge for tertiary education in Nigeria. Besides, the quality of education in terms of training and research output in the country is also a major concern.

Discussions and conclusion

Most of the development problems faced by Nigeria are directly or indirectly traced to rapid population growth in the country, which does not seem to have an end in sight. Lack of effective governance and rampant corruption complicate the development problems confronting the country. Most indices discussed above are poor (such as education, health, employment, food production, etc.) because apart from large numbers to be served, leakages in project implementation and allocation of funds hinder the achievement of projected development goals. In situating the general overview of Nigeria demographic structure and dynamics, a major thrust of discourse is on the relevance of population indicators on the overall development agenda. The quality and depth of leadership on population development issues will become even more important in Nigeria in the next twenty to fifty years, given the tremendous momentum of the Nigerian population.

It is clear from the presentation above that whereas child survival has improved in Nigeria, declines in fertility have been slow generally; in fact in many parts of the country fertility has not declined at all (Isiugo-Abanihe, 2010). To be sure, this has delayed the demographic transition in the country. Millions of Nigerian women are unable to choose the numbers, timing and spacing of their children; consequently, they have more children than they desire, which results in rapid rate of population growth. In turn this state of affairs underscores Nigeria's challenge in achieving a demographic dividend and the dire need for government action to achieve it. As have been argued by many, the large numbers of young people can represent great economic potential, but only if families can governments can adequately invest in their health and education, and stimulate new economic opportunities for them (Gribble and Bremner, 2012). But given the current family size in Nigeria and the rapid growth of the population, families and governments lack the resources needed to invest adequately in each child. So it will take a long time before Nigeria could achieve the accelerated economic growth that may result from a decline in mortality and fertility, and a subsequent change in the age structure of the population. A recent simulation study by Olaniyan and his colleagues found that the highest benefit will accrue in years 2032 and 2033 when the dividend can account for more than 10 % of the growth of GDP per capita. However, the authors noted that the demographic dividend is not automatic and Nigeria needs to embark on strategies that will develop her human capital (Olaniyan et al, 2012), which is difficult under the current burden of rapid growth in numbers. The political will and farsightedness necessary address Nigeria's population problems are currently lacking, hence Nigeria has continued to postpone its development and demographic dividend.

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