

# 25 years of Population Trends

John Fox and David Pearce  
*Demography and Health*  
National Statistics

## INTRODUCTION

The first issue of *Population Trends* was published in September 1975. It cost £2 (or £2.11 including postage). George Paine, the then Registrar General for England and Wales and Director of the Office of Population, Censuses and Surveys, described in the foreword to Issue 1 the new publication strategy. This strategy, relating only to paper products, had been orchestrated by Philip Redfern (Deputy Director) and Norman Davis (the Chief Statistician responsible for population statistics). Census outputs were to be treated separately.

The main planks were that the Registrar General's Quarterly Returns, first published in 1849, should be replaced by *Population Trends*, the three substantial Registrar General's Annual Statistical Reviews should be divided by subject into a series of more manageable volumes (the Annual Reference Volumes) and the early release of basic statistics and information should be achieved through issuing Monitors. Specialised analyses could be published separately, for example, as Occasional Papers. This strategy remained largely unchanged until the beginning of 1999, with the introduction of *Health Statistics Quarterly*. There has however, been a dramatic change, in the array of electronic products now available.

George Graham, the second Registrar General, wrote in the first Quarterly Return that, "marriages, births and deaths produce important effects; are influenced by the prosperity of the county; and express the hopes, fears, enjoyments and sufferings of the people". He went on to emphasise the importance of counting these events, in order "to correct the fallacy of judging the state of a great and various kingdom either from the field of one man's experience - from his own parish or county - or from vague, accidental, prejudiced representations". Over time the General Register Office, the Office of Population, Censuses and

**This article monitors some of the more significant demographic changes over the last twenty-five years, depicted in various issues of *Population Trends*. It is, of necessity, selective in coverage in terms of quotes, figures and topics. Other articles in this issue go into more depth on specific topics, such as families, ethnic minority groups, marriage and divorce, health inequalities and fertility and family planning. Consequently, there is some overlap and the articles could usefully be cross-referenced. Some coverage is also given to the development of sources, international events and selected partnerships outside the Office. Relevant legislation enacted over the period is also mentioned.**

Surveys, and now the Office for National Statistics has continuously counted, analysed and described demographic events, patterns and trends in an independent way. New technology and new sources and new partners, particularly in Europe, have, however, led to some quite fundamental changes in the processes involved in achieving these objectives.

This article attempts to monitor some of the more significant changes over the last 25 years, as seen through the 'eyes' of *Population Trends*. It is, of necessity, selective, in terms of quotes, figures and topics. Coverage is also, of necessity, relatively superficial concentrating more on population than health topics. More detail can be obtained from individual issues, and for this reason specific *Population Trends* are referenced. The article concentrates on changing areas of demographic interest; but it also briefly covers developments in sources, some international events and selected partnerships with the outside world. Where appropriate, relevant legislation is mentioned.

Further, other articles in this issue go into more depth on specific issues. In particular, the article by John Haskey selects three major topics, namely, the ethnic minority population, births and fertility and marriage and divorce, and provides a broader picture by cross referencing commentary in other journals, such as *Population Review* and *Development*, *Population Studies* and *Demography*. Likewise, the article by Peter Goldblatt and Margaret Whitehead examines changes over time in health inequalities and Karen Dunnell and Bev Botting provide an analysis of changes over time in contraceptive methods used.

## CHANGING AREAS OF INTEREST

### FERTILITY

#### *Births outside marriage*

*Population Trends Issue 1* reported that over 90 per cent of births in the early 1970s were within marriage. The analysis and tables for particular groups of women (generation or cohort analysis) were based on women married in particular years, rather than when they were born. By *Issue 9 (Autumn 1977)*, however, *Population Trends* reported on the changing pattern of illegitimate births (note the terminology of the day). The contribution of teenagers and mothers in their early 20s to the total number of births outside marriage was highlighted. Cohort or generation analyses moved to considering women born in particular years in order to cover all births. Such was the interest in this changing phenomenon that *Issue 30 (Winter 1982)* reported that, "marrying the father before the birth of the child was in 1970 the most frequent course of action for an unmarried women who became pregnant; unmarried women were more likely in 1980 to have the pregnancy terminated by abortion or give birth to an illegitimate child".

The significant increase in the 1980s was covered in *Issue 63 (Spring 1991)* which reported that "between 1980 and 1989 the percentage of births outside marriage in England and Wales rose from 12 per cent to 27 per cent; the numbers almost more than doubled". Unsurprisingly, it was demonstrated that extra marital fertility rates rose as cohabitation increased, and noted that the increased incidence of births outside marriage had been a factor in the passing of the Family Law Reform Act in 1987. This Act removed the separate and disadvantageous treatment accorded to children born outside marriage embodied in previous legislation. It also provided definitions of what were previously termed legitimate and illegitimate persons without using these phrases. Consequently, changes in terminology were made in government publications from 1988 (to "within and outside marriage").

*Issue 81 (Autumn 1995)* went a little further in the analysis by describing selected characteristics of the mothers. For example, over half of the parents of such births in 1993 were living at the same address (and assumed to be cohabiting); the main childbearing ages of unmarried mothers continued to be the late 20s; women from a manual (occupation) class background were 2½ times as likely to have a birth outside marriage as women from a non-manual background; half of the women who were unmarried at their first birth were married by the time of their second and unmarried women in a manual social class had the highest low birthweight rates. Currently, around 2 out of every 5 births are outside marriage. Of those outside marriage, only 7 to 8 per cent are registered by the mother alone, a statistics which has not changed over the last ten years; *Issue 98 (Winter 1999)*.

### Smaller Families

The other notable change in fertility over the last twenty-five years has been the decline in the large family. This, together, with an increase in childless women has underpinned the decline in annual fertility rates seen over the last thirty years. As an aside, one of the problems in analysing parity or birth rates is that the particulars collected at birth registration on previous number of live births (or still births) only relate, in principle, to those within marriage (current or previous husband). Consequently, a method was devised using data from the General Household Survey to include *all* previous births, to provide true birth order rates. This method is described in *Issue 45 (Winter 1986)*. Some interesting statistics are also given; for example, the overall probability of a childless women having a first birth fell from 75 births per 1,000 childless women in 1964 to a rate of 52 births in 1985, a decline of 31 per cent. The decline in the corresponding rate was even higher, at over 50 per cent, for women with two children having a third. In contrast, there was a small rise in the rate for women with one child having a second.

The outcome of these changes in parity specific annual rates on generation measurements are described in *Issue 95 (Spring 1999)*, and figures for two generations are shown below.

United Kingdom		
Number of children	Year of birth of women	
(Per cent)	1940	1960
0	11	21
1	13	12
2	37	35
3	22	21
4 or more	17	11
Average family size	2.36	1.95

### FAMILIES

Without doubt one of the most striking features on families over the last 100 issues of *Population Trends* has been the increase in the number of one-parent families. This increase has had social, economic and financial implications. Some twelve articles have been published, eleven written by John Haskey. *Issue 13 (Autumn 1978)* referred back to the Finer Committee Report on the problems of one-parent families. The Report, published in 1974, contained estimates of the number, sex and family characteristics of one-parent families, based mainly on limited data from the 1971 Census of Population. It did, however, recommend that similar estimates should be published regularly. This was the starting point for the considerable amount of methodological work carried out since.

The estimate of one-parent families in 1976 was  $\frac{3}{4}$  million, about 1 in 10 of all families with dependent children. Around half of all lone parents had two or more dependent children, so that, in 1976, more than 1 $\frac{1}{4}$  million dependent children were living in one-parent families. *Issue 45 (Autumn 1986)* took the statistical work further in an article which examined all the available sources - the 1981 Census, the General Household Survey, the Labour Force Survey, the Family Expenditure Survey and Social Security statistics. Various estimates, based on one or more of these sources, were produced. From the different approaches and sources, it was concluded that "940 thousand was a reasonable estimate of the number of one-parent families in Great Britain in 1984". The decline in the proportion of lone families headed by a lone father was also noted; from one in 7 in the early 1970s to one in 11 in the early 1980s.

By 1996, the estimate of the number of one-parent families had risen to 1.6 million (provisional), comprising 2.8 million dependent children - see *Issue 91 (Spring 1998)*. The "In Brief" to this issue also highlighted some analysis from the Longitudinal Study which showed that lone

mothers were more likely to come from less advantaged backgrounds than mothers with partners, and to come from lone parent household themselves. Intervening estimates and the characteristics of one parent families appear in *Issues 55 (Spring 1989)*, *65 (Autumn 1991)*, *71 (Spring 1993)*, *72 (Summer 1993)* and *78 (Winter 1994)*. See also the article by John Haskey in this issue.

### MARRIAGE AND DIVORCE

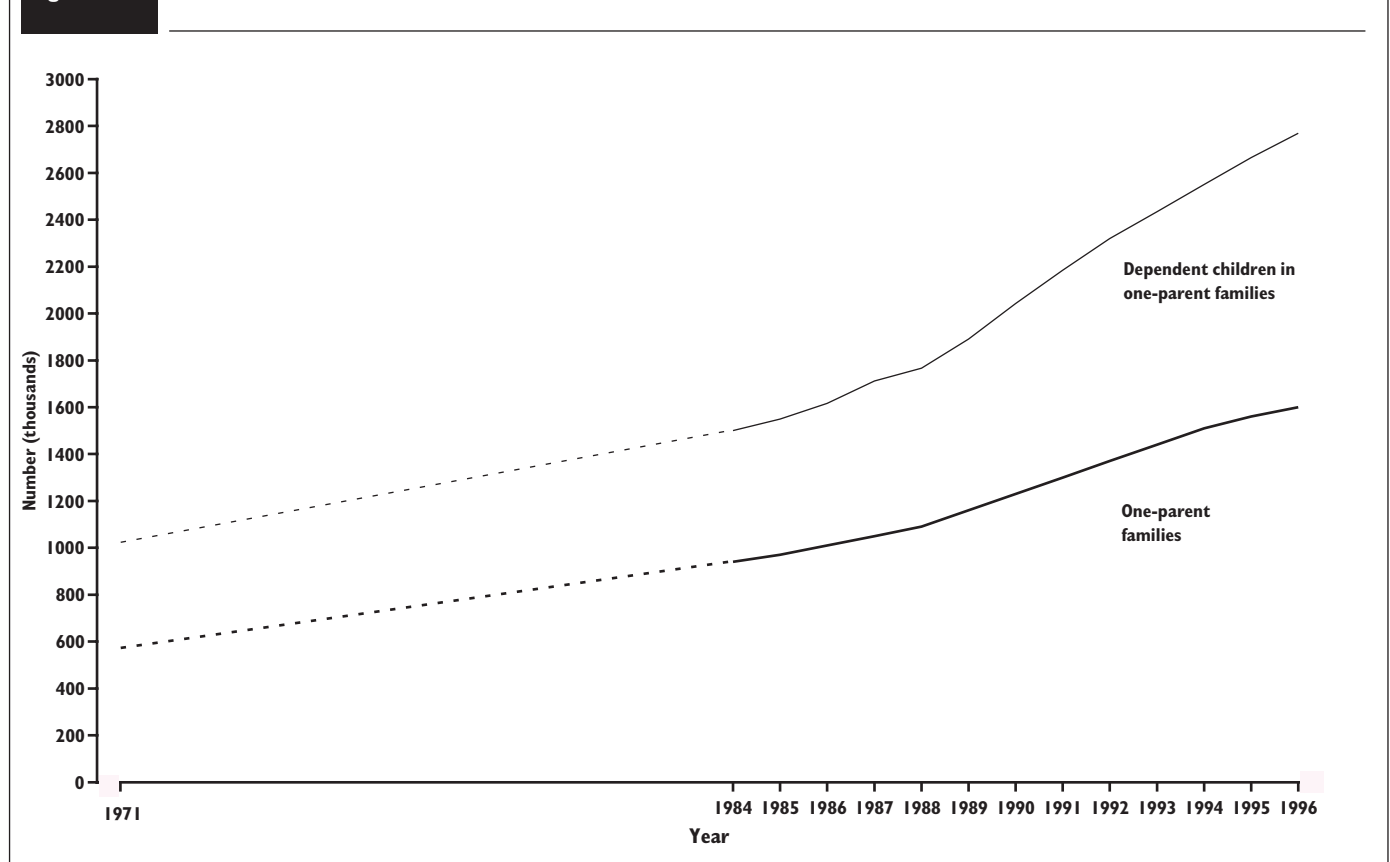
The Editorial of *Issue 2 (Winter 1975)* was devoted to marriage and divorce, because of a recent change in trend. Marriage was fashionable in the 1960s (despite being the 'permissive' age). It was pointed out that the growth in the number of marriages in the mid- to late-1960s was largely the result of three factors; babies born in the post-war boom were passing through the most marriageable ages, people were marrying younger, and a higher proportion of people were getting married. The first issue of *Population Trends*, however, witnessed the decline in the popularity of marriage, which started in 1972, and has more or less continued since. It

**Table 2** 'Best estimates'\* of the numbers of one-parent families, OPFs, and their dependent children, 1971-96, Great Britain Millions

	1971	1976	1981	1984	1986	1988	1990	1991	1992	1993	1994	1995	1996
One-parent families, OPFs	0.57	0.75	0.90	0.94	1.01	1.09	1.23	1.30	1.37	1.44	1.51	1.56	1.60
Dependent children in OPFs	1.0	1.3	1.5	1.5	1.6	1.8	2.0	2.2	2.3	2.4	2.6	2.7	2.8

\* estimates for 1995 and 1996 are provisional.

**Figure 1** 'Best estimates' of the numbers of one-parent families and of the dependent children living in them, 1971-96, Great Britain



was also noted that the tendency to marry at younger ages, given a boost in 1970 by the Family Law Reform Act which lowered the age of majority to 18, had started to change.

On divorce, it was noted that the number of divorces doubled between 1961 and 1969, and then by 1972, the latter partly as a 'one-off' affect of the Divorce Law Reform Act which came into effect in 1971; and though there was a drop in the number of divorces in 1973, the figure rose again in 1974. As to be expected, the trend in re-marriage followed the trend in divorce - from about 20 thousand divorced males and a similar number of divorced females re-marrying each year in the early 1960s, to 60 thousand in the mid-1970s. These figures compare with about 77 thousand today.

Further issues of *Population Trends* have analysed the relationships and interactions between cohabitation, marriage, divorce and re-marriage, and differentials between social classes - *Issue 34 (Winter 1983)*, ethnic groups *Issue 40 (Summer 1985)* and areas - *Issue 52 (Summer 1988)*.

Of more topical interest has been the analysis of marriage by the form of ceremony (Church, Chapel or civil) and, more recently, with the enactment of the 1994 Marriage Act, the number of marriages taking place in approved premises such as Castles, Parks, Halls, Manors and Hotels. As a broad picture, 3 out of every 4 marriages were solemnised with a religious ceremony during the years following the first world war, and remained at this level until the early 1960s. By the mid-1970s, the proportion had fallen to about 1 in 2 *Issue 22 (Winter 1980)*. The ratio remained at about this level until around 1990, but increased slightly thereafter. The introduction of approved premises from April 1995 has led to a small acceleration in civil marriages - from 52 per cent in 1994 to 55 per cent in 1995 to 59 per cent in 1996 - *Issue 93 (Autumn 1998)*.

Increased interest in more recent years, because of the implications for social and financial plans and policies, has centred around the changing levels of cohabitation - *Issue 58 (Winter 1989)* - and the relationship between cohabitation and marriage, and whether children are involved. For example, *Issue 80 (Summer 1995)* pointed out that 7 out of 10 marriages in the early 1990s were preceded by premarital cohabitation, compared with only 1 in 10 just 20 years earlier (the early 1970s). It was also noted that over 1 in 5 non-married women were cohabiting in 1993 compared with 1 in 7 some 10 years earlier (1983).

## PROJECTIONS

Articles on projections, both nationally and for local areas, analysing the rationale behind the assumptions on mortality and fertility have appeared regularly in *Population Trends*. This is not surprising given the importance of population estimates and projections in so many spheres of government - from planning the provision of school places and health care, to the financial implications of an ageing population to the impact of demographic change on the size and age structure of the labour market. Indeed *Issue 3 (Spring 1976)* highlighted some of the economic and social consequences of the changing age structure of Britain's population.

*Issue 44 (Summer 1986)* contained an article by Chris Daykin (now the Government Actuary) which outlined the history of making projections, how variations in the assumptions on mortality can impact on pension costs, and their use. He reminded readers that the Government Actuary's Department had been involved in the production of population projections since the department was created in 1919, originally in connection with advising on National Insurance arrangements. It was only after the Second World War that projections

became more widely used in government planning. For a while there were rival projections made by the Government Actuary and the Registrar General for England and Wales. This difficult situation was resolved in 1954. It was agreed that the Government Actuary should produce the projections but in consultation with the Registrars General for England and Wales, Scotland and Northern Ireland.

Successive issues of *Population Trends* have published the main results from each new set of projections, now carried out every two years. Of particular interest over the period, however, has been the timing and process of reviewing and revising (downward), the long-term assumption on fertility (average family size as a generation measurement). *Population Trends* has monitored these changes, as illustrated below.

<i>Population Trends</i>	3	4	61	72	91
Base for Projections*	Mid-1974	Mid-1983	Mid-1989	Mid-1991	Mid-1996
Fertility Rate	2.2	2.1	2.0	1.9	1.8

Not necessarily the start date of the new assumption.

The most recent national projections (mid-1998 based) were published in *Issue 99 (Spring 2000)*.

## HEALTH AND ILLNESS

Analyses and commentary on health have covered a wide range of topics, reflecting the major health issues at the time. A few examples are included here. *Issue 3 (Spring 1976)* contained an analysis of the incidence of leukaemia between 1911 and 1973 using a cohort approach - tracking the incidence over time for different generations. It was concluded that the decline seen in mortality attributed to leukaemia, which began after 1950 following a steady increase over a long period, was partly due to deaths being postponed by new treatment, and partly to a slight reduction of incidence resulting from more precise techniques in the use of medical radiation.

In contrast, and for the historian or historical demographer, *Issue 4 (Summer 1976)* looked back at the Registrar General's Quarterly Return 1849 and the decline of rabies in London. To quote, "a disease in which the patient is restless, anxious, convulsed, and death stricken the moment he shrinks from the sight of water, was formerly of common occurrence in London. No death from that cause has been recorded in the last five summers... Hydrophobia disappears when the dogs which are liable to become mad or to be bitten every summer are removed by police regulations".

Other topics covered have included, for example, appendicitis - *Issue 5 (Autumn 1976)*; congenital malformations - *Issues 11 (Spring 1978)* and *19 (Spring 1980)* and HIV - *Issue 76 (Summer 1994)*. Asthma has been discussed several times. *Issue 49 (Autumn 1988)* reviewed the increase in asthma mortality in the 1960s, which had not only been seen in England and Wales but also in a number of other countries such as Australia, New Zealand, Norway and Ireland. Debate had centred round whether the increase was associated with the excess use of aerosols, or inadequate therapy with systematic steroids. The article concluded that as there had been appreciable increases in contacting a general practitioner, hospital referrals and in-patient spells, it was not clear whether the increase in mortality was due to an increase in incidence, or prevalence or medical treatment. As with many such studies, charting the statistics is easier than understanding the reasons for change, particularly when diagnosis and treatment are both important factors.

### MORTALITY DIFFERENTIALS

The greatest coverage in *Population Trends* on mortality differentials between sub-groups of the population has been devoted to those by occupation, or a more aggregate measure such as social class. The topic has been covered at regular intervals over the last 25 years. In keeping with the content of early issues, *Issue 6 (Winter 1976)* included a quotable quote from 1861 found in the Registrar General's 35<sup>th</sup> Annual Report, namely:

“Man is naturally an open air animal; he is made to work, and the sky is his native covering. So after taking everything into account, the number, the sportsman and the husbandman in a cultivated land are at present the healthiest of all workmen. All would, no doubt, be better if the higher parts of the brain had their due share of activity; and this, though not often the case now, we may hope will come”.

In the same issue, an article reported on alcoholism and mortality, reflecting that throughout human history drinking alcohol has been an important part of life for many people, and that the total amount consumed in many countries had increased dramatically over the last decade (mid-1960s to mid-1970s). According to the Department of Health and Social Security as many as 1/2 million people in England and Wales may have had a serious drinking problem in 1976; and that was 25 years ago!

On occupational mortality, the gradient by social class has been described several times. *Issue 9 (Autumn 1977)* contained a summary of the 1970-72 Decennial Supplement. It pointed out that the highest mortality rates (for adults, children and infants) were observed in Social Class V (unskilled occupations), and the lowest rates in Social Class I (professional occupations). *Issue 27 (Spring 1982)* took the study of occupational mortality further by using data from the Longitudinal Study (see section on sources). The article covered variations by economic activity, household structure, housing and country of birth.

*Issue 31 (Spring 1983)* reminded readers of the importance of studying mortality differentials between sub-groups of the population by commemorating the centenary of the death of William Farr, the first ‘compiler of abstracts’ at the General Register Office. Farr wrote that:

“diseases are more easily prevented than cured, and the first step to their prevention is the discovering of their existing causes. The Registry will show the agency of these causes by numerical facts and measure the intensity of their influence and will collect information on the laws of vitality with the variation of these laws in the two sexes at different ages and the influence of civilisation, occupation, locality, seasons and other physical agencies either in generating diseases and inducing death or in improving the public health”.

It was William Farr who initiated the first serious analysis of mortality in 1851, combining census information and death registration data. He made extensive use of standardised mortality rates. This is mentioned here because his methods of analysis have remained largely unchanged, though the Longitudinal Study has added a powerful new source.

Analyses of socio-economic differentials in mortality, using Longitudinal Study data were included in articles in *Issue 40 (Summer 1985)* and *Issue 56 (Summer 1989)*. *Issue 80 (Summer 1995)* analysed male mortality by age and cause of death using the then most recently available deaths data (1976-1989). It was concluded, yet again, that “consistent differences in mortality by social class (as defined by occupation) are found through to the late 1980s. On a scale of increasing mortality disadvantage, mortality of men in Social Class I was the lowest and mortality of men in Social Class V was the highest”. The general position was confirmed by using 1991 Census and the

corresponding death registration data, described in the 1991-93 Decennial Supplement. A summary was included in *Issue 86 (Winter 1996)*. The article also pointed out that there had been a widening of the social differentials. In general, “mortality was almost three times higher in Social Class V (SMR 189) than in Social Class I (SMR 66), and Classes III (Manual) and IV had nearly double the mortality of Social Class I. Even larger differentials had been observed for strokes, lung cancer and suicide.”

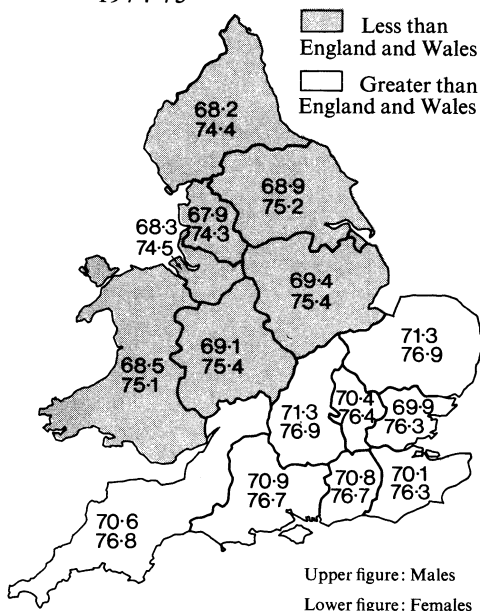
Area and regional differentials have also been monitored continuously - for example, in *Issues 11, 47, 56 and 82*. Deaths from external causes have also been widely covered, particularly in more recent issues. *Issues 67, 71, 80 and 92* contained articles on suicide, and *Issue (Autumn 1998), 93* on drug related mortality, highlighting growing concern. On suicide the analysis showed that there had been a general

Table 2 Median\* expectation of life at birth from the abridged life table for 1974-5 England and Wales

Regional Health Authority	Years	
	Male	Female
East Anglia	74.3	80.3
Oxford	74.3	80.2
Wessex	74.0	80.4
South West Thames	73.9	80.3
South Western	73.8	80.2
North West Thames	73.4	80.0
South East Thames	73.2	79.9
North East Thames	72.9	79.7
Trent	72.5	78.8
West Midlands	72.1	78.9
Yorkshire	72.1	78.7
Wales	71.5	78.4
Mersey	71.3	78.2
Northern	71.2	77.9
North Western	71.2	77.9
England and Wales	72.6	79.2

\* The median expectation of life is the age at which one-half of the population have died.

Fig 1 Average expectation of life, regional health authorities, 1974-75



fall in the 1980s and 1990s. Further, the highest risk occupations were found in Social Class I, perhaps reflecting that medical related professions with easier access to means of suicide could be an important factor. The local authorities in which suicide rates were significantly higher tended to be those characterised as having high levels of 'deprivation'.

**CHANGING SOURCES**

One of the most significant factors affecting the work of the Office, and the content of articles in *Population Trends* has been an increase in the number and variety of sources; though many started in the early 1970s. Like William Farr, demographers in the 1960s would have had to rely heavily on the information collected at the registration of births, deaths and marriages and the decennial Censuses of Population (and the one-off mid-term Sample Census of 1966).

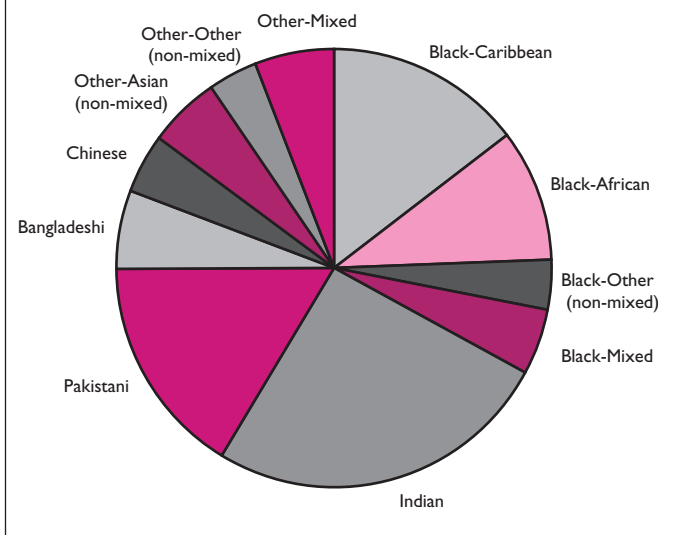
In addition, there were a number of unique statistical exercises, such as the voluntary Family Census of 1946, covering 1.4 million married women resident in Great Britain (a 1 in 10 sample). The Census was carried out by Professor David Glass and Eugene Grebinik, and achieved a response rate of 87 per cent. Administrative datasets provided some additional information, particularly on international migration. In particular, the regulated inflow of foreign and commonwealth citizens under specific Acts generated statistics on immigration, while receiving countries data were used to provide statistics on emigration. These latter sources were replaced in 1964 by the International Passenger Survey.

The proliferation of sources providing demographic data in the 1970s started with the General Household Survey (GHS) in 1971. Some 15 thousand households were sampled each year. This was followed by the biennial Labour Force Survey (LFS) in 1973, covering some 105 thousand households throughout the United Kingdom. Initially, the LFS was conducted and funded by Census Division. The responsibility for carrying out the Survey was transferred to Social Survey Division in the late 1970s; from 1984 the LFS has been conducted annually.

Both surveys have been adapted and modified at various times to meet the needs of demographers within the Office, and this has ultimately fed into the content of articles in *Population Trends*. A couple of instances of their use are included here. The LFS has been used extensively to provide intercensal estimates of the ethnic minority population in Great Britain. The method used in the 1970s was to update estimates based on the 1971 Census (from birthplace and parents birthplaces information), by adding natural change, estimated from vital statistics data classified by country of birth, and net international migration classified by citizenship. However, from 1981 onwards the LFS was used, as it contained direct information about the ethnic origins of the population. *Issue 44 (Summer 1986)* showed that the ethnic minority population was estimated to be 2.1 million (or 3.9 per cent of the total population) in 1981. Subsequent estimates after the 1991 Census, which included a question on ethnic group, are shown below:

Population Trends	Date	Size (millions)	Ethnic minority population Per cent of total population of Great Britain
44 (Summer 1986)	1981	2.1	3.9
84 (Summer 1996)	1994	3.2	5.7
96 (Summer 1999)	1997	3.6	6.4

**Figure 2** Composition of ethnic minority population of Great Britain, 1997



In contrast, the General Household Survey has been increasingly used to analyse cohabitation and family building intentions. It has been a key source in providing estimates of one-parent families. All this is very important with the changes in the types of union, particularly the increase in consensual unions which, by definition, are not recorded in the marriage registration system. The flexibility and adaptability of the GHS has proved invaluable in painting a picture of this aspect of society. In particular, it has added information to the benchmark report from the survey on family formation carried out by Karen Dunnell in 1976. The aim of the family formation survey was to assess the attitudes and behaviour of the population with regard to family formation and childbearing, especially important at that time because of legislative changes such as the Family Planning Services Act 1967, the Abortion Act 1967, the liberalisation of divorce under the Divorce Reform Act of 1969 and the Family Law Reform Act of 1969 in England and Wales, which allowed marriage without parental consent at 18 instead of 21 (*Issue 4, Summer 1976*).

The other major changes in source was the setting up of the Longitudinal Study; a one per cent sample of the usually resident population of England and Wales taken in the 1971 Census of Population. The initial sample consisted of people born on each of four birth dates. It has been updated by adding babies born on the four selected days or immigrants with these birth dates, and registering with the National Health Service. Births, deaths and cancer registrations of sample members are linked as has subsequent information from both the 1981 and 1991 Censuses. Plans are being made to link in the 2001 Census (*Issue 95, Autumn 1999*). More detail on the original setting up of the LS is described in *Issue 37 (Autumn 1984)* whilst *Issue 61 (Autumn 1990)* contains some reflections on its history.

Thus, the LS has become an increasingly powerful and useful source over the lifetime of *Population Trends*, as more events and Census information have been linked. The uses are legion. A few are mentioned here; Employment during pregnancy and infant mortality - *Issue 26 (Summer 1981)*; family circumstances and young children - *Issue 43 (Spring 1986)*; differences in mortality by housing tenure and car access - *Issue 81 (Autumn 1995)* and the incidence of Health of the Nation Cancers by social class - *Issue 90 (Winter 1997)*.

## INTERNATIONAL ACTIVITY

*Population Trends* has been used to report on international issues in two main ways. Firstly, to report on the demographic situation in other countries, principally in Europe. The amount of commentary is too substantial to report here. Suffice it to say that *Issues 6, 24, 25, 41, 47, 51, 89, 95, 96 and 98* cover various demographic aspects, from population changes, actual and projected, to mortality, fertility, marriage and cohabitation. In most articles the emphasis has been on comparing this country with other countries, thus giving guidance to planners and policy makers on potential targets.

The second aspect covered has been international conferences, particularly those convened by the United Nations on population with consequent programmes of action. The Mexico Conference of 1984 was described in *Issue 37 (Summer 1984)*. The position on population policy in the United Kingdom was articulated by Lord Glencothur, the Parliamentary Under Secretary of State, during a plenary session of the Conference. Indeed, the general demographic position was outlined when he said:

“I represent a country which, viewed from a global perspective, has attained both low death rates and low birth rates. The expectation of life is already high at 73 years; our aim remains to extend further the span of healthy life.... The two-child family is by far the most popular size, and through the provision of information and services in the field of family planning we aim to help people plan and space their births and avoid unwanted pregnancies. The overall size of the population has changed little in the decade since the Bucharest Conference (held in 1974) ... Against this background the Government of the United Kingdom is concerned with the well-being of the population rather than its overall size. An ageing population, and one of high geographic density and consequent pressures on the environment, means that there are many problems to be surmounted in the field of social and economic policy making. But the search for solutions and the deployment of resources will be easier in the virtual absence of population growth than it would be with the added pressure of ever increasing numbers”.

This position on a UK population policy was reaffirmed at the next United Nations Conference on Population and Development held in

Cairo in September 1994. The overall theme of the Cairo Conference was population, sustained economic growth and sustainable development. With the onus changing to one of donor issues rather than general demographic monitoring responsibility for leading the delegation and monitoring and reporting UK progress on the Programme of Action was transferred from OPCS to the Overseas Development Agency (now Department for International Development).

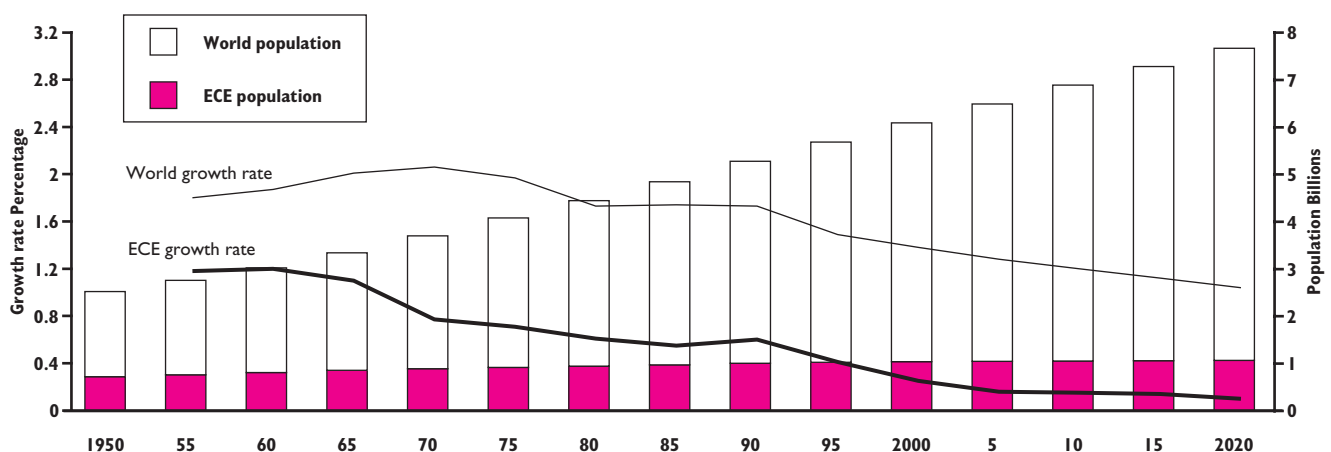
The preparatory UN regional conference organised by the United Nations Economic Commission for Europe, the Council of Europe and the United Nations Population Fund and held in Geneva in March 1993 was reported in *Issue 72 (Summer 1993)*. The statement for the United Kingdom covered key issues such as international migration, paid employment and family responsibilities, contraception and abortion, mortality and health and international co-operation.

## RELEVANCE

Over the last two centuries, the Registrar General has reported on the ‘State of the population’. Indeed, the Census Act 1920, at paragraph 6, laid a duty on the Registrar-General “to collect and publish any available statistical information with respect to the number and condition of the population in the interval between one census and another, and otherwise to further the supply and provide for the better co-ordination of such information”. In fulfilling this legal commitment attention has been paid to both those issues of prevailing relevance, particularly but not exclusively to government, and to provide a general demographic picture, on mortality, morbidity, fertility, population change and so on.

Moreover, at the beginning of the 1970s, with a then projected relatively high annual growth in the population of the United Kingdom, a Population Panel was appointed by the Government to consider the need for a population policy. One of their major recommendations, published in a Report (Cmnd 5258) in March 1973 was that “periodic demographic reviews should be issued”. This has been met in two ways. Firstly, two substantial reviews by Eugene Grebenik, an eminent demographer, were published in 1978 and 1987. Second, an annual summary cover all demographic aspects has been published in *Population Trends*. The first summary, for 1975, appeared in *Issue 6 (Winter 1976)*, while the latest, for 1998, was published in *Issue 98 (Winter 1999)*.

**Figure 2** Population size and annual average rate of growth 1950 to 2020



Notes: Rates of growth are average rates for 5 year periods, 1950-1955 through to 2015-2020. In this chart, ECE population is given as the total population of those countries which are now member countries of the ECE.

Source: World Population Prospects, 1996 Revision, UN

Some selected examples of reporting on demographic issues of prevailing government need or interest have already been mentioned, such as the number of one-parent families, the future size and structure (ageing) of the population, the changing incidence of leukemia and asthma. A few more examples are mentioned here. The trend in the number of abortions has been monitored since the 1967 Abortion Act came into effect in April 1968. In particular, there was interest in the working of the Act, as demonstrated by the setting up of the committee chaired by the Hon Mrs Justice Lane DBE in 1971 to do just that. *Issue 64 (Summer 1991)* analysed patterns and trends between 1968 and 1989. The questions of interest were whether there had been a transfer of abortions from the illegal to the legal sector, whether women from abroad (and Northern Ireland) were coming to England and Wales for abortions, the contribution of prenatal diagnosis of abnormal foetuses to the totals, and whether attitudes to abortion had changed. This work was updated to 1990-1995 in *Issue 87 (Spring 1997)*, which also examined the impact of the reduction of a legal abortion from 28 to 24 weeks gestation under Clause 37 of the Human Fertilisation and Embryology Act 1990, which came into effect in April 1991. It was concluded that “the factors most likely to affect present and future trends in abortion include patterns of fertility, access to family planning services and education, contraceptive practices to prevent pregnancies, and sexual attitudes and behaviour”.

A further example is deaths associated with the use of alcohol, drugs and volatile substances. In particular, the increase in suicides among young men (but not young women) in the 1970s and 1980s was partly placed on an increased in the misuse of alcohol and other drugs, as well as singleness, increasing marital breakdown, high unemployment rates, exposure to armed combat, increasing risk of imprisonment and the HIV virus *Issue 71, (Spring 1993)*. Thus, two of the three targets in the mental illness area, under the Governments’ Health of the Nation Strategy, published in a White Paper in 1992, were to reduce deaths from suicide. A further example of reporting on a Health of the Nation initiative for England concerns cancer where the stated aim was to reduce the incidence of specific cancers (breast, lung, cervical and skin) within five to ten years. The monitoring work on this, using data from the Longitudinal Study, was included in *Issue 90 (Winter 1997)*. The article also pointed out that “measuring the incidence of cancers with a preventable component, such as lung, cervical and malignant melanoma of the skin”, can help public health planners target prevention strategies sensitively. Likewise, the action plan in the White Paper *Saving Lives: Our Healthier Nation* presented to Parliament in July 1999 will require that the 2010 targets on reducing death rates from cancer, coronary heart disease and strokes, accidents and injuries and suicides will be monitored. The analysis will be covered in future issues of *Population Trends (or Health Statistics Quarterly)*.

## PARTNERSHIP WITH OUTSIDE AUTHORS

Finally, a reference needs to be made to the invaluable contribution of outside authors to *Population Trends*, which has added to the richness of the publication over the last 25 years. The majority have worked in higher education, but not exclusively so. Local government officers and international civil servants have both provided important input.

Only a selection is mentioned here. Tony Champion from the University of Newcastle has provided several articles on migration, from population trends in rural Britain in *Issue 26 (Winter 1981)* to one on migration to, from and within the United Kingdom in *Issue 83 (Spring 1996)*. Kath Kiernan from the London School of Economics has published 4 articles on cohabitation, two covering Great Britain (*Issues 25 and 58*), and two devoted to international comparisons (*Issues 96 and 98*). David Martin from the University of Southampton described producing Census output areas (*Issues 88 and 94*), while David Rhind, while at the University of Durham, provided an article on mapping the 1971 Census by computer. All this work has added to and stimulated work undertaken in the Office, a true partnership.

## THE FUTURE

Life has not stood still. As part of the strategy to provide more analysis and commentary on relevant policy issues, and to be more theme or pillar specific, *Health Statistics Quarterly* was launched in February 1999. At the same time the content of *Population Trends* was reviewed, as well as including Monitors (retitled Reports) in the appropriate Quarterly.

However, while there will always be a demand and a place for ‘paper’ outputs an increasing number of users want electronic access to the data and electronic products. As a result, and in line with National Statistics, all the tables in *Population Trends* and *Health Statistics Quarterly* are now available on StatBase® (at GSS Website: <http://www.statistics.gov.uk> (see *Issue 98 (Winter 1999)*). The next 25 years are likely to be even more dynamic and interesting.

## Key Findings

- Increase in births outside marriage, from 1 in 10 in 1970s to 4 in 10 today.
- Increasing childless from 1 in 10 for women born in 1940 to 1 in 5 for women born in 1960.
- Increase in one-parent families, from  $\frac{3}{4}$  million in 1976 to over 1½ million in 1996.
- Widening of social differentials in mortality.
- Increasing number of sources and usage, such as the Longitudinal Study and General Household Survey.