Arch Argent Pediatr. 2026;124(4):e202611079

Fewer births, new challenges: The impact of the global decline in fertility on pediatrics

Fernando Ferrero[1]

Over recent decades, the world has experienced a sustained and widespread decline in birth rates, falling from 3.3 births per woman in 1990 to 2.3 in 2024. What initially appeared to be a phenomenon confined to high-income countries has progressively extended to middle- and even low-income regions. In many countries, the total fertility rate now lies below the population replacement level (2.1 children per woman), creating a demographic scenario unprecedented in recent history.[1]

This profound and multifactorial shift[2] is reshaping the structure of societies and directly challenging the field of pediatrics. Although this concern is not new—Gorwitz and Smith already warned of it in 1975—[3] today's discussion takes place within a demographic context of critical and global significance.

In this setting of low fertility, pediatrics faces changes in healthcare demand, service organization, and health priorities. In some countries, the reduction in births has already led to the closure or restructuring of maternity wards and pediatric units, particularly in rural or sparsely populated areas. While concentrating care in higher-complexity centers may improve certain quality and safety indicators in specific areas—such as neonatology—it also raises concerns regarding accessibility and equity.

However, declining birth rates do not necessarily imply a reduced need for pediatric care. On the contrary, in many contexts this demographic transition is accompanied by an epidemiological transition, shifting the focus from infectious diseases and acute conditions toward chronic disorders, neurodevelopmental conditions, mental health problems, and rare diseases.[4] Thus, even if there are fewer children, the average complexity of patients tends to increase.

At the same time, a rapid reduction in births may translate into decreased labor demand for pediatricians, particularly in regions with an adequate supply of professionals. In such settings, not only may employment opportunities decline, but incomes may also fall sharply as a result of fewer consultations, increasing competition for a smaller patient population, and fragmentation of professional practice. This situation can generate economic instability, forced multiple job holding, precarious employment conditions, and professional migration. This phenomenon does not occur in isolation but is embedded within a broader and global crisis of the medical profession, characterized by deteriorating working conditions, low remuneration, loss of

doi: http://dx.doi.org/10.5546/aap.2026-11079.eng

To cite: Ferrero F. Fewer births, new challenges: The impact of the global decline in fertility on pediatrics. *Arch Argent Pediatr.* 2026;124(4):e202611079.

[1] *Editor.*
Archivos Argentinos de Pediatría.

***Correspondence to** Fernando Ferrero: fferrero.publicaciones@sap.org.ar*

This is an open access article under the Creative Commons Attribution–Noncommercial–Noderivatives license 4.0 International. Attribution - Allows reusers to copy and distribute the material in any medium or format so long as attribution is given to the creator. Noncommercial – Only noncommercial uses of the work are permitted. Noderivatives - No derivatives or adaptations of the work are permitted.

social prestige, and emotional burnout.[5] In this framework, low fertility likely acts as an additional source of vulnerability for pediatric practice.

From an educational and professional perspective, low fertility also carries important implications. A sustained reduction in the number of patients may limit the clinical exposure of residents and fellows, particularly for certain conditions or procedures. This compels a reconsideration of training strategies, the strengthening of interinstitutional cooperation networks, and the expansion of complementary teaching modalities, including clinical simulation.

Demographic change is also intertwined with broader social transformations. Delayed childbearing, rising maternal age, and increasingly diverse family structures create new realities for pediatric care.

There is also a risk that child health may lose visibility on political agendas in increasingly aging societies, where health priorities tend to shift toward chronic diseases of adults and older populations. In this context, pediatrics must reaffirm its strategic role, emphasizing that investment in early childhood remains one of the most cost-effective interventions for human and social development.

Nevertheless, it would be a mistake to view declining fertility as a homogeneous phenomenon. Marked inequalities persist both between and within countries. While some regions struggle to sustain pediatric services amid falling birth rates, others continue to confront high infant mortality and limited access to basic care. The global pediatric agenda must therefore adapt to diverse realities, avoiding simplistic responses to a complex phenomenon.

Ultimately, the worldwide decline in fertility may redefine the context in which pediatrics is practiced and taught. Rather than a threat, it represents a call to rethink care models, educational structures, and strategic priorities. In a world with fewer children, each child's social value is further reinforced. Pediatrics, as a discipline committed to the present and future of societies, has the responsibility to lead this reflection and to advocate that, even amid changing demographic landscapes, the rights and health of children and adolescents remain at the center of public policy. ■

REFERENCES

1. United Nations Department of Economic and Social Affairs, Population Division 2024. World Population Prospects 2024: Summary of Results. UN DESA/POP/2024/TR/NO. 9. New York: United Nations; 2024. [Accessed on: February 24, 2026]. Available at: https://desapublications.un.org/file/20847/download
2. Nargund G. Declining birth rate in Developed Countries: A radical policy re-think is required. *Facts Views Vis Obgyn*. 2009;1(3):191-3.
3. Gorwitz K, Smith DC. Some implications of declining birth rates for pediatrics. *Pediatrics*. 1975;56(4):592-7.
4. Moreno-Montoya J, Barrera-López PA. The impact of demographic transition on pediatric practice: a viewpoint. *Pediatr Res*. Published online November 2, 2025. doi:10.1038/s41390-025-04562-4.
5. Ferrero F. The crisis in the medical profession. *Arch Argent Pediatr*. 2024;122(2):e202310225. doi:10.5546/aap.2023-10225.eng