## ZAMBIA

### Capital

Lusaka

### **Ethnic Groups**

Bemba 21%, Tonga 13.6%, Chewa 7.4%, Lozi 5.7%, Nsenga 5.3%, Tumbuka 4.4%, Ngoni 4%, Lala 3.1%, Kaonde 2.9%, Namwanga 2.8%, Lunda (north Western) 2.6%, Mambwe 2.5%, Luvale 2.2%, Lamba 2.1, other 18.5%, unspecified 0.4%

### Languages

Bemba 33.4%, Nyanja 14.7%, Tonga 11.4%, Lozi 5.5%, Chewa 4.5%, Nsenga 2.9%, Tumbuka 2.5%, Lunda (North Western) 1.9%, Kaonde 1.8%, Lala 1.8%, Lamba 1.8%, English (official) 1.7%, other 15.8%, unspecified 0.2%

### Religions

Protestant 75.3%, Roman Catholic 20.2%, other 2.7% (includes Muslim, Buddhist, Hindu, and Baha'i), none 1.8%

### Population

Total: 20.2 million Median age: 16.9 years Population growth rate: 2.86% Urban: 46.3% Rural 53.7%

### Fertility

Birth rate: 34.48 births/1,000 population Total fertility rate: 4.49 children born/woman Sex ratio of population: 1 male(s)/female

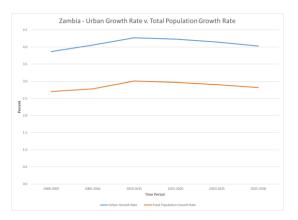
### Mortality

Death rate: 6.02 deaths/1,000 population Life expectancy at birth: 66.6 years Maternal mortality rate: 213 deaths/100,000 live births Infant mortality rate: 36.33 deaths/1,000 live births









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### Migration

Net migration rate: 0.16 migrants/1,000 population

### Health

Current health expenditure: 5.6% of GDP Physician density: 1.17 physicians/1,000 population Adult obesity: 8.1% Alcohol consumption per capita: 3.82 liters of pure alcohol

### Education

Education expenditures: 3.7% of GDP Literacy: 86.7%

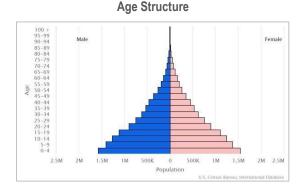
### **Population Distribution**

one of the highest levels of urbanization in Africa; high density in the central area, particularly around the cities of Lusaka, Ndola, Kitwe, and Mufulira

### **Demographic Profile**

Zambia's poor, youthful population consists primarily of Bantu-speaking people representing nearly 70 different ethnicities. Zambia's high fertility rate continues to drive rapid population growth, averaging almost 3% annually between 2000 and 2010, reaching over 3.3% in 2022. The country's total fertility rate has fallen by less than 1.5 children per woman during the last 30 years and still averages among the world's highest, almost 6 children per woman, largely because of the country's lack of access to family planning services, education for girls, and employment for women. Zambia also exhibits wide fertility disparities based on rural or urban location, education, and income. Poor, uneducated women from rural areas are more likely to marry young, to give birth early, and to have more children, viewing children as a sign of prestige and recognizing that not all of their children will live to adulthood. HIV/AIDS is prevalent in Zambia and contributes to its low life expectancy.

Zambian emigration is low compared to many other African countries and is comprised predominantly of the well-educated. The small amount of brain drain, however, has a major impact in Zambia because of its limited human capital and lack of educational infrastructure for developing skilled professionals in key fields. For example, Zambia has few schools for training doctors, nurses, and other health care workers. Its spending on education is low compared to other Sub-Saharan countries.



#### Population Distribution

