

Ap human geography chapter 2 study guide

[Science](#), [Geography](#)



AP Human Geography Chapter 2 Study Guide Terms: population density - a measurement of the number of people per given unit of land ·arithmetic population density - the population of a country or region expressed as an average per unit area ·physiologic population density - the number of people per unit area of arable land ·population distribution - description of locations on the Earth's surface where populations live ·dot maps - maps where one dot represents a certain number of a phenomenon, such as population ·megapolis - term used to designate large coalescing supercities that are forming in diverse parts of the world ·census - a periodic and official count of a country's population ·doubling time - time required for a population to double population explosion - rapid growth of world's human population during the last century ·natural increase - population growth measured as excess of live births over live deaths ·crude birth rate (CBR) - number of live births yearly per thousand people ·crude death rate (CDR) - number of live deaths yearly per thousand people ·demographic transition - multi stage model of changes in population growth in countries undergoing industrialization ·stationary population level (SPL) - level at which national population ceases to grow ·population composition - structure of a population in terms of age, sex, and other properties ·population pyramids - visual representation of age and sex composition of a population ·infant mortality rate (IMR) - describes the number of babies that die within the first year of their lives ·child mortality rate (CMR) - number of children that die between the first and fifth year of their lives ·life expectancy - how long, on average, a person may be expected to live ·AIDS - Acquired Immune Deficiency Syndrome ·chronic diseases - long lasting afflictions now more common

because of higher life expectancies ·expansive population policies -
 government policies that encourage large families ·eugenic population
 policies - government policies to favor one racial sector ·restrictive
 population policies- government policies to reduce the rate of natural increase

Notes ·Change in population is calculated using the following: Global

Population Formula - $p_1 = p_0 + b(\text{irths}) - d(\text{eaths})$ Sub-Global Population

Formula - $p_1 = p_0 + b - d + i(\text{mports}) - e(\text{xports})$ Net Migration Formula - p_1

- $p_0 + RNI + nm$ ·Types of population density: arithmetic density, agricultural

density, physiological density, urban density, residential density ·Major World

Population Centers - China, India, Russia, Central Europe, Asia, Northeast

Africa, Northeast U. S. ·Overpopulation- a generally undesirable condition

where an organism's numbers exceed the carrying capacity of its habitat

Malthus's Theory, though incorrect, states population rate increases
 geometrically and the rate of food increase grows arithmetically.

·Demographic Transition Model ([http://www. main-vision. com/richard/demographic. htm](http://www.main-vision.com/richard/demographic.htm))

Stage 1: Stage one of the demographic transition model is the most primitive of the stages where there is a high fluctuating birth and death rate. Because of this there is no great population growth. These countries or even tribes have very basic living standards such as those in the Amazon rainforest where they hardly have any education, medicaments or birth rates such that population is based on food supply, health of tribe members etc.

Other factors involved are no family planning therefore many children or because of the faith of the people which may look at large families as a sign of verity etc. Stage 2: In this stage of the demographic transition model

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there are a lot of births, however the death rate has gone down to about 20/1000 infants who die. This results in a rise in population due to the fact that more infants are surviving. Reasons for which more people may be surviving may be better health care, improved sanitation such as water etc, more transport and medical care as well as inventions relating to this. In other words this stage involves a slight modernisation in health care raising people's living standards as well as their life expectancy.

Stage 3: Stage three is the stage at which there is already a low death rate as well as a declining birth rate therefore leading to a slight increase in population. The reason for the fall in births may be due to family planning, better education, lower infant mortality rate, a more industrialised way of life and the want for more material possessions as well as women being able to go out to work. In other words these countries are in the final stages of becoming like the western countries such as the states and those in Europe.

Stage 4: Stage four is the one at which Switzerland is. There is a stable population without much change because both the death and birth rate are low and in some cases there are more deaths than births therefore leading to a possible stage five. Possibly a stage five? A country such as Sweden is currently entering into the negative growth rate meaning that there are less births than deaths so that the country's population size is decreasing leading to problems which will be discussed later on this page. A population pyramid, also called an age structure diagram, is a graphical illustration that shows the distribution of various age groups in a population (typically that of a country or region of the world), which forms the shape of a pyramid when the population is growing. There is a predicted stage 5 of population growth

that will level off at 10 billion people. The world's population will progressively increase until it ultimately reaches this point. ·Geography of health is the application of geographical information, perspectives, and methods to the study of health, disease, and health care. Epidemiological transition is a phase of development witnessed by a sudden and stark increase in population growth rates brought about by medical innovation in disease or sickness therapy and treatment, followed by a re-leveling of population growth from subsequent declines in fertility rates. The epidemiological transition model represents the developments resulting from epidemiological transition (disease and treatment). ·The People's Republic of China has pursued anti-natalist policies, notably the ' one-child' strategy, for over a decade. While anti-natalist government policies may be instrumental in lowering birth rate, state coercion may have unexpected and damaging results; reports in 1995 suggested that abortion of female children had become common in China, so that male : female sex ratios at birth had become grotesquely imbalanced.