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Pakistan's Population Growth: The Need for Action

WITH one of the world's highest population growth rates, Pakistan faces great challenges to achieving fertility reduction. Policy-makers in Pakistan have recognized the problem of population growth for years, but fertility remains high. Despite a national family planning program, contraceptive use remains very low. Most couples desire large families, and there are many cultural and religious objections to contraception.

At the current growth rate of about 3 percent annually, Pakistan's population will exceed 150 million by the year 2000, up from about 120 million at pres-

ent. The population will be more than 280 million by the year 2020 if rates remain at today's levels.

Pakistan is one of the world's poorest countries. Per capita income is under \$400 per year, and the economy is growing very slowly. Rapid population growth puts great pressure on agricultural land and hinders prospects for economic and social development.

A strong commitment to fertility reduction, and the national will to carry out an effective family planning program, including changing social attitudes and improving the status of women, are essential to raising living

standards and avoiding increasingly serious problems of rapid population growth in the future.

FAO/W. Williams



Improving women's status is one of the keys to reducing fertility in Pakistan.

Pakistan's Population Problem

DESPITE successive development plans that point to the importance of slowing population growth, and despite a family planning program that began in 1965, Pakistan continues to have one of the highest fertility rates in the world. While a number of other developing nations have achieved fertility reductions over the past two decades, Pakistan has not. The average woman in Pakistan still has more than six children, the same as two decades ago.

Because Pakistan already has a large, rapidly growing population, continuing high fertility means that the country faces dramatic increases in population size over the coming decades. Even if each woman were to reduce her fertility to just two children, starting immediately, the country's population still would rise to over 160 million before leveling

off. But at the current high fertility rates, the population will rise to over 280 million in only another 30 years and continue growing.

Behind Pakistan's rapid population growth lies the people's strong desire for large families, preference for sons instead of daughters, lack of knowledge of contraceptive methods, and women's low status. "Ignorance, conservatism, fatalism, and religious influence are additional factors exacerbating high fertility rates," according to researchers at the National Institute of Population Studies (NIPS), Islamabad, and the East-West Population Institute (EWPI), Honolulu.

While infant mortality has declined, due to improved public health measures, it remains high in comparison with other countries. In Pakistan, about 100 infants per 1,000 live births die before their first birthday. Half of all deaths in the country occur to infants and children under the age of five. High in-

fant and child mortality means that women must have more births in order to achieve desired family size. Because the death rate is declining faster than the birth rate, the net effect is to speed population growth.

Clearly, Pakistan's birth rate must be rapidly reduced in order to slow the population growth rate. However, only 12 percent of Pakistani couples currently practice contraception, according to the 1985 Contraceptive Prevalence Survey (CPS), about the same percentage as in 1972. Such low contraceptive prevalence implies an enormous task for the national family planning program.

An evaluation of Pakistan's family planning program concluded that administrative and management weaknesses limited success, including "overambitious and unrealistic targets, poor organizational structure, ill-defined communication strategy, lack of commitment and motivation and lack of appropriate research and evaluation." Beyond these deficiencies, "it is possible that the huge effort in Pakistan was, in a socioeconomic development sense, premature," wrote researchers Warren C. Robinson, Makhdoom A. Shah, and Nasra M. Shah in 1981.

A decade later, still, "the environment in Pakistan is not conducive to the successful implementation of a family planning program," according to the NIPS-EWPI report.

Obstacles to Lower Fertility

A MAJOR impediment to fertility decline in Pakistan is the low status of women in society. "Pakistani women's basic role is to act as good mothers and wives and to derive their status from male kin," according to Shahnaz Kazi and Zeba A. Sathar of the Pakistan Institute of Development

A View from Pakistan's Press

"Although it is generally conceded in official quarters in Islamabad that our population growth rate of 3.1 percent is exorbitantly high and has grave implications for the country's socio-economic development and political stability, nothing effective is being done about popularising the small-family norm in our society. . . .

"The key issue is the political will which is sadly missing. . . . No serious effort has been made to create the socio-economic milieu and the condition for women in which family planning can make headway. Literacy continues to be low, the status of women deplorable and poverty rampant. . . . The government has failed to chalk out an ef-

ficient strategy, to motivate the people to change their traditional notions and opt for the small-family norm, and to provide sufficient contraceptive services. . . .

"If the government is really concerned about the population problem, it is time it spruced up its contraceptive services. The overly hush-hush approach must be discarded and family planning must be discussed in public forums and its message conveyed more forthrightly to make the people more aware of its significance for the family, the nation and its economic future."

From: Editorial, *Dawn*, Karachi, December 14, 1990

Economics. In Pakistan, as in other countries, women who work in professional jobs have lower fertility than other women. Women with higher status are more likely to be aware of contraceptive methods. In Pakistan, two-thirds of women with at least nine years of education, and those in professional occupations, have some knowledge of contraception, versus only about one-fourth of those with no education, or who are not working. Few women in Pakistan, however, have advanced education or professional roles.

To achieve fertility reduction, more needs to be done to improve access to education and employment for women and to provide women with the means to limit their family size if they wish to do so. One reason Indonesia and Malaysia have higher contraceptive prevalence rates than Pakistan, for example, may be that women have higher status in those societies. Some positive signs for women's status in Pakistan are a rise in the age at marriage and a reduction in the difference between female and male life expectancy. Women's literacy is also improving.

Family Size and Son Preference. On average, women in



Overcoming high fertility requires improvements in maternal and child health and changes in traditional attitudes toward large families and son preference.

Pakistan Total Fertility Rate (TFR) 1975-88

Year	TFR
1988	6.5
1987	6.9
1986	6.9
1985	7.0
1984	6.9
1975	6.3

Source: Pakistan Federal Bureau of Statistics, 1990.

Pakistan desire five children, a family size that is little changed from two decades ago. The fact that women have more than five births indicates unmet need for contraception. A widespread and powerful preference for sons contributes to high fertility in Pakistan. "The preference for sons is associated with certain social, cultural and economic considerations such as keeping the family name alive and ensuring social and economic security for parents in times of illness, unemployment and old age," according to the NIPS-EWPI report. The costs of rearing additional male children are considered small and the benefits great, especially among poor parents.

Research by demographer Fred Arnold has shown that son preference does not pose a huge barrier to success in family planning pro-

grams, because biological chance assures that most couples will bear their desired minimum number of sons and daughters at a relatively low parity. (See *Asia-Pacific Population & Policy* No. 2.) Nevertheless, when son preference is pervasive in society, and couples desire large families, the effect is to elevate fertility rates and increase family size.

Son preference can be overcome when women participate more fully in education and occupational opportunities, and as the economic value of sons versus daughters declines. Other countries, such as Korea and China, have been able to overcome son preference as an obstacle to lower fertility. The NIPS-EWPI report recommends that in Pakistan "the family planning program should combat son preference through motivational and mass educational efforts and campaigns."

Religious Attitudes. The opposition of Islamic leaders to limiting population growth is a powerful force in some societies, with the notable exception of Indonesia. Pakistan's family planning program was once suspended for two years because of religious opposition. However, other Islamic leaders have supported use of contraception. "Religion-based inhibitions arise out of ignorance of the Islamic position on family planning," according to Zeba Sathar. "Following the example of Bangladesh and Indonesia, Pakistan should induce religious leaders to dispel widespread misconceptions and to support population control as a component of welfare of the Islamic community."

Policy Implications

OVERCOMING the obstacles to fertility reduction will require a commitment from national political, religious, and community leaders. Efforts to raise the status of women, improve maternal and child health and living conditions, and change traditional attitudes toward large families and preference for sons are needed. Family planning programs can motivate couples to practice family planning and provide contraceptive methods and services.

Accurate information is essential to an effective fertility reduction strategy. The Pakistan Demographic and Health Survey, which is cur-

rently in progress, should offer policymakers a new source of valuable data. This survey is conducted by the NIPS, in collaboration with Pakistan's Federal Bureau of Statistics and the Institute for Resource Development in Columbia, Maryland.

The objective is to provide data on fertility, family planning, child survival, breastfeeding, and maternal and child health to planners and policymakers in Pakistan for use in designing and evaluating programs. Publication of the survey results provides policymakers with a new opportunity to revitalize the family planning program and strengthen efforts to slow the rate of population growth.

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