

Chapter 3 | POPULATION

There is a strong relationship between population growth and economic development of the country. All the developed countries of the world have controlled the population and achieved replacement level of fertility. But the case of the developing countries of Asia and Africa is different. As their population growth rate is high, so it has adverse consequences on socio-economic fabric of the country, pressure on limited resources, high rate of dependency and ultimately poverty with all its allied problems. Population stabilization is the key factor for attaining sustainable development.

It is estimated that the population of Pakistan will be around 200 million at the close of year 2017, with the growth rate of 1.9 %. However, exact number will be available after the ongoing population census. This alarmingly high growth rate requires major focus of the federal and provincial governments. Unfortunately during the last few decades, the governments have given little priority to take the serious steps and to devise an effective strategy to tackle the menace of population growth. Illiteracy, deficient family planning & reproductive health outlets, low use of contraceptives, non-acceptance of small family norms, early marriage are some of the major factors responsible for rapid growth of population in our country. It is said that population growth is one of the major problems in the developing countries like lack of educational, health, housing, sanitation facilities, shortage of food, poor infrastructure, high crime rate, and resultantly low literacy rate, unhealthy people and prevalence of poverty.

Review of 2016-17

There is need to improve the performance of Pakistan in family planning and reproductive health when we compare our demographic and family planning indicators with regional countries as our contraceptive prevalence rate (CPR) is low and total fertility rate (TFR), infant mortality rate (IMR) and maternal mortality rate (MMR) are quite high compared to regional countries.

Important demographic indicators of Pakistan are given in the following table:

Table-1
Important demographic indicators of Pakistan

Indicator	Mid 2016	Mid 2017
Population (million)	194.92	198.36
Male (million)	100.42	102.16
Female (million)	94.49	96.20
Urban population (million)	86.40	89.65
Male (million)	44.51	46.17
Female (million)	41.88	43.48

Indicator	Mid 2016	Mid 2017
Rural population (million)	108.52	108.72
Male (million)	55.91	55.99
Female (million)	52.61	52.73
Total Fertility Rate (TFR)	3.8	3.57
Crude Birth Rate (per thousand)	24.8	24.8
Crude Death Rate (per thousand)	6	6
Population Growth Rate (per cent)	1.9	1.9
Contraceptive Prevalence Rate* (per cent)	35	40.6
Life expectancy (year)	69.65	69.8
Females	70	70.2
Males	69.3	69.4
Unmet Need of Contraceptives*	20.1	19.8
Infant Mortality (below 1 year)	62.4	61.4
Infant Mortality (below 5 year)	87	85.4
Maternal Mortality**	171.8	165.6

Source: National Institute of Population Studies (NIPS), Islamabad.

*Source: Track20 Project (FP-2020) Office, Islamabad, Pakistan.

**Source: World Health Organisation (WHO).

Financial review 2016-17

The Population Welfare Programme (PWP) is being executed by the Population Welfare Departments of the provinces and the federating units through the Federal PSDP. Originally the Population Welfare Programme was to end in June 2015 but because of low PSDP allocations during some years, the projects have been extended till June 2017 to utilize the remaining amount of throw-forward. The details of the PSDP funding to PWP from 2013 to 2017, which is the period of the first 4 years of the 11th Five Year Plan, have been given in the following table:

Table-2
PSDP funding to population welfare programme from 2013-14 to 2016-17

Province/ Area	PSDP 2013-14	PSDP 2014-15	PSDP 2015-16	PSDP 2016-17	Total
Punjab	3,288.368	3,633.589	3,608.653	3,583.590	14,114.200
Sindh	2,082.373	2,082.373	2,082.333	2,057.370	8,304.452
Khyber Pakhtunkhwa	1,026.575	1,283.378	1,283.447	1,268.450	4,861.847
Balochistan	523.728	805.736	805.736	795.736	2,930.936
AJ&K	180.021	223.356	223.354	273.356	900.087
Gilgit Baltistan	118.722	118.722	118.722	118.722	474.888
FATA	78.841	78.841	78.841	78.841	315.364
Grand Total	7,298.628	8,225.995	8,201.086	8,176.060	31,901.770

Source: Ministry of Planning, Development and Reform, Islamabad.

The allocation and expenditure of PWP during 2016-17 was around Rs8.2 billion from Federal PSDP, as shown in column 5 of the table). An amount of about Rs32 billion have been spent till now during the 4 years of the 11th Five Year Plan till June 2017. Major portion of the total allocated amount is spent on meeting establishment charges (salary and

employees related expenses). Only a meager share of the allocated funds is utilized on creation and improvement of service delivery centres.

Physical Review

The details of the physical targets during 2016-17 and achievement thereof are given in the following table. It shows that physical targets were achieved reasonably.

Table-3
Physical targets and achievements 2016-17
(Cumulative Number)

Service Delivery Outlet	2016-17 (Targets)	Achievement 2016-17
Family Welfare Centres	3390	3525
Reproductive Health-A Centres	270	276
Mobile Service Units (MSUs)	370	358
Reproductive Health-B Centres	240	209

Source: *Population Welfare Departments of the Provinces and federating units.*

The above table shows that the targets of establishing Family Welfare Centres and Reproductive Health-A Centres were achieved. But the targets of Mobile Service Units (MSUs) and Reproductive Health-B Centres could not be achieved because of financial constraints.

Outlook 2017-18

The present government must be given credit as the long awaited 6th Population and Housing Census was started from 15th March 2017 in two phases. The field operation of census was done in 63 administrative districts under Phase-I and in 87 districts under Phase-II. There were total 458 Census Districts, 3,313 Census Charges, 20,663 Census Circles and 168,294 Census. The census would be very much helpful for government, researchers and planners for critical evidence-based decision making, planning and making effective strategy for population control. It will provide very reliable data on population, its growth and migration trends in different regions/ areas, employment, urban-rural population, male-female ratio, Afghan refugees etc.

The present government has given importance and priority to the population and family planning issues. In the last financial year, two major events viz National Consultative Forum (NCF) on the International Conference on Population and Development (ICPD) beyond 2014 and "Population Summit" were held in Islamabad. The last national population policy was made in 2002 and after the devolution of the subject of population to the provinces, there was no population policy of the country. But now the Prime Minister has assigned the Planning Commission to carry out the strategic review of national policies and preparation of the new National Population Policy. The Ministry of National Health Services Regulation and Coordination will prepare the first draft of the National Population Policy in line with the Provincial Population Policies and after taking inputs from the provinces, federating units, INGOs, NGOs and development partners with bottom-up approach. The first draft of the policy will be presented to the Planning Commission for the improvements, finalization and approval. The Ministry of National Health Services Regulation and Coordination has arranged a consultative meeting with the stakeholders. The UNFPA will assist the federal government in formulating the policy.

The new population policy will address the issues in population, family planning and reproductive health in accordance with the Vision 2025. It will help in improving coordination between federal and provincial governments as well as private sector -, in evolving and integrating strategies and generating more resources. Population Welfare Departments of Punjab, Sindh and Khyber Pakhtunkhwa have formally approved their Population Policies. The draft Population Policy of Balochistan is being processed for the approval of provincial cabinet.

The federal government has also formed the Country Engagement Working Group (CEWG) of the population stakeholders for better implementing FP programme to achieve the targets of 2012 London Summit of Family Planning (FP-2020). Quarterly meeting of the CEWG are being held in different cities to evaluate the progress of our commitments of FP-2020.

Programme

Financial Plan

The extended Population Welfare Programme (2010-15) will be completing in June 2017. The Planning Commission has conveyed to the governments of Punjab, AJ&K, Gilgit Baltistan and FATA to shift their manpower from development budget to non-development budget by June 2017. The Population Welfare Departments of the provinces, AJ&K, Gilgit Baltistan and FATA are preparing new PC-Is for the period of 3 years, from July 2017 to June 2020. In the Public Sector Development Programme (PSDP) 2017-18, an amount of Rs8.176 billion has been allocated for the population sector projects. Details are given in the following table:

Table-4
PSDP allocation for population welfare programme during 2017-18
(Rs million)

Province/ Federating Unit	PSDP allocation 2017-18
Punjab	3,583.589
Sindh	2,057.373
Khyber Pakhtunkhwa	1,268.447
Balochistan	795.736
AJK	273.356
Gilgit-Baltistan	118.722
FATA	78.841
Grand total:	8,176.064

Source: Ministry of Planning , Development and Reform, Islamabad

Physical Targets

Some physical targets during the year 2017-18 for Pakistan are given in the following table. Some other physical activities are also mentioned in the new initiatives of the provinces.

Table-5
Physical Targets 2017-18
(Cumulative number)

	2017-18 (Targets)
Family Welfare Centres	3685
Reproductive Health-A Centres	332
Mobile Service Units (MSUs)	425
Reproductive Health-B Centres	230

If sufficient funds are provided by the provincial governments in addition to PSDP allocation, effective execution, implementing procedures and techniques are used, an efficient monitoring and evaluation system is applied, then the given targets are not difficult to achieve.

New Initiatives

Pakistan Demographic and Health Survey - PDHS 2017–18

National Institute of Population Studies (NIPS) is conducting Pakistan Demographic and Health Survey (PDHS), 2017-18, which will complete in August 2018. The PDHS is a follow-up survey to the 1990-91, the 2006-07 PDHS and the 2012-13 surveys that were also conducted by NIPS. The technical assistance is being provided by ICF International and the financial support will be provided by USAID, DFID and UNFPA.

PDHS 2017-18 will be a nationally representative population based survey with large sample size. The indicators will be collected and presented in terms of national level statistics and for population subgroups such as those defined by age, education, marital status, economic status, urban/rural residence, provinces and regions of the country. The high quality data will be collected on other key indicators like maternal and child health, contraceptive use, infant and especially neonatal mortality, maternal mortality, gender, nutrition, fertility, family planning, immunization, disability, gender, nutrition, HIV/AIDS, TB, Hepatitis etc and internal migration, violence against women. The data will be used to track the SDG indicators, like MMR and IMR. The PDHS data will be very useful for carrying out research on maternal and neonatal morbidity and mortality, and will provide information for evaluation of maternal and child health and family planning programmes for evidence-based planning.

The government of the Punjab is allocating funds in 2017-18 budget for promoting and spreading family planning & reproductive health services. The activities include expansion of Mobile Service Units, aggressive advocacy campaign, M-Governance of FP programme implementation, introduction of Referral System, provision of contraceptives etc.

The government of Sindh is starting E-monitoring system in all the 29 districts of Sindh in 2017-18 to conduct real time monitoring. Two projects namely, Accelerated Family Planning Services and Behavioral Change Communication (BCC) Programme are being launched in Thar draught disaster areas in 2017-18. The “Costed Implementation Plan” (CIP)

Phase-II, on Family Planning will be start at the cost of Rs2.2 billion and about Rs678 million is proposed to be allocated in 2017-18 from the ADP of Sindh.

The government of Khyber Pakhtunkhwa is also expanding its network of Family Welfare Centres (FWCs), Mobile Service Units, strengthening monitoring and evaluation, launching advocacy campaign and involving Imam and religious leaders for promotion of family planning campaigns.

What more can be done

To promote family planning and reproductive health in the country, the following steps are under implementation:

- More funding to the family planning and population welfare projects by the provinces.
- An effective advocacy campaign at national level for promoting family planning by involving civil society, media, religious leaders etc.
- Improvement of service delivery network and infrastructure
- Provision of all time standard contraceptives and universal access to the adult population
- Incorporation of FP in Essential Package for Health Services (EPHS)
- Training and capacity building of the FP staff
- Family Planning education in colleges and universities
- Synergies with development partners, private sector/ NGOs
- A comprehensive and effective monitoring and evaluation system