

## **CONFRONTING PAKISTAN'S OVERPOPULATION ISSUE FOR LONG-TERM SOLUTIONS**

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Located at a critical junction, Pakistan is a nation brimming with liveliness and diversity. However, the pressing issue of overpopulation has cast a daunting shadow over its social, economic, and healthcare landscape. With a staggering population of nearly 250 million, the effects of this rapid growth go far beyond mere numbers. Indeed, the reach of overpopulation runs deep, affecting critical aspects of Pakistani society such as education, employment, environmental stability, and public health. By examining the interconnected threads of this demographic reality, this article aims to shed light on the pressing issue of overpopulation in Pakistan and explore potential avenues for a healthier, more sustainable future.

Over-population is defined as the condition of having more people than can live on the earth in comfort, happiness and health and still leave the world a fit place for future generations. Overpopulation creates a situation where the number of people in a specific geographic area exceeds the carrying capacity of the environment, leading to a range of negative impacts. The term is often associated with the idea that the resources available in a particular region are insufficient to sustain the population living there.

One of the main contributing factors to Pakistan's overpopulation is the underuse of contraceptive methods. Annual estimates of modern Contraceptive Prevalence Rate during the year 2019-20 in Pakistan was only 41.0%.<sup>1</sup> Moreover, there is disparity in access to contraceptive services, with greater difficulties encountered in rural areas. Disseminating important information regarding contraception is hampered by rural areas' inadequate healthcare facilities and awareness campaigns.

The deficit in female education in Pakistan serves as another critical factor contributing to overpopulation. Research regularly demonstrates a negative relationship between women's levels of education and fertility rates. Women in

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areas with significant gaps in female education tend to marry younger and have larger families. This problem has its roots in sociocultural norms that place a higher value on traditional gender roles than on females' academic aspirations. Women who receive an education are not only able to postpone having children, but they also gain the autonomy and information necessary to make wise choices regarding family planning. A study conducted by Demographic and Health Surveys (DHS) reflected the relationship between fertility and female education: the study showed that females who completed primary education tend to have less children than who were not enrolled.<sup>2</sup> Therefore, addressing the female education deficit is not only a matter of educational equity but also a strategic approach to curbing overpopulation and fostering sustainable development.

In Pakistan, poverty is a complex and deeply ingrained problem that significantly contributes to the challenge of overpopulation. Poverty restricts access to quality education for a substantial portion of the population in Pakistan. According to the Economic Survey of 2023, Pakistan's literacy rate is only around 62 %. As impoverished families struggle to meet their basic needs, education often takes a backseat. This lack of education, particularly among women, leads to a lower awareness and understanding of family planning methods, resulting in larger family sizes. In impoverished households, the lack of access to adequate healthcare facilities contributes to high infant and child mortality rates. To compensate for the uncertainty of child survival, families may choose to have more children, perpetuating a cycle of high fertility rates in impoverished communities. In rural areas where poverty is prevalent, families often rely on agriculture for their livelihoods. The need for additional labor in agricultural activities becomes a driving factor for larger family sizes.

Crude Birth Rate (CBR) is defined as the number of births in a year per 1000 population. Crude Birth Rate is the simple way of measuring current fertility level in any population. The Demographic Survey of Pakistan indicates that the crude birth rate in urban areas was 23 percent in 2020 and 29 percent in rural areas. The Crude Birth Rate is higher in rural areas as compared to urban areas.<sup>3</sup> This statistic accentuates the disparities in the development of rural and urban areas that result from this stark difference in the crude birth rate. While

currently housing a population of 235.82 million, projections by the United Nations Population Division indicate a continued surge, with estimates reaching 263 million by 2030 and a staggering 383 million by 2050, necessitating immediate and effective interventions. The Rate of Natural Increase depicted from Pakistan's Demographic Survey of Pakistan, for the year 2020 2020s is 2.04 percent. High Rate of Natural Increase in Pakistan during the last few decades is the result of a steadily declining trend in mortality and a moderately increasing trend in fertility, that subsequently corresponds to a rise in the population.<sup>4</sup> According to One UN Pakistan's Annual Report of 2021, Pakistan ranked 154th of 189 countries on the Human Development Index 2021 (HDI), falling four places since 2018. Its HDI value of 0.557 is the second lowest among South Asian countries. One in four Pakistanis lives in poverty – income-based poverty stands at 24.3% and multidimensional poverty at 38.3%, a clear indication of the detrimental effects on the economy of Pakistan, owing to a staggering increase in population.<sup>5</sup> Addressing overpopulation in Pakistan requires a multifaceted and evidence-based policy approach that acknowledges the socio-cultural context and is feasible within the country's unique circumstances. The following recommendations are designed to promote sustainable population management while considering the cultural and social dynamics at play:

#### **Comprehensive Family Planning Programs:**

Comprehensive family planning programs that focus on increasing awareness, accessibility, and affordability of contraceptives can be implemented and strengthened. This includes educational campaigns to dispel myths, enhance reproductive health knowledge, and improve the availability of a wide range of contraceptive methods. The emphasis should be on making family planning services culturally sensitive and easily accessible, especially in rural and marginalized communities.

#### **Investment in Education, Especially for Women:**

Promoting and investing in education, particularly for women can be highly advantageous, as higher levels of education are correlated with lower fertility rates. Educational programs should extend beyond urban centers to reach rural areas. Scholarships, incentives for female education, and awareness campaigns highlighting the benefits of education in family planning should be integral parts of this strategy.

**Women's Empowerment Programs:** Implementing programs that empower women economically and socially would greatly aid to deal with the population crisis in Pakistan. Empowered women often make informed decisions about family size and have better access to reproductive healthcare. Initiatives that provide skills training, promote entrepreneurship, and support women's participation in the workforce can greatly contribute to reducing fertility rates.

#### **Healthcare Infrastructure Strengthening:**

Investment in the healthcare infrastructure, especially in rural areas, to improve access to quality healthcare services can be initiated by increasing the number of healthcare facilities, training

healthcare professionals, and ensuring the availability of reproductive health services. Strengthening maternal and child health services will also contribute to lowering fertility rates.

**Public Awareness Campaigns:** Targeted and culturally sensitive public awareness campaigns that address misconceptions about family planning, promote the benefits of smaller family sizes, and highlight the link between family planning and improved socio-economic conditions can be launched. Utilizing various media platforms, including television, radio, and community engagement can help to reach diverse populations.

**Research and Monitoring:** Investing in research to continually monitor the impact of policies and make evidence-based adjustments will help policymakers to understand the evolving dynamics of population trends, enabling them to fine-tune strategies for maximum effectiveness.

By addressing overpopulation in a comprehensive and strategic manner, Pakistan can pave the way for improved healthcare, education, and overall quality of life for its citizens. The time to act is now, and the success of these efforts will shape the well-being and prosperity of generations to come.

## **REFERENCES**

1. Abdullah M., Bilal F, Khan R, Ahmed A, Khawaja AA, Sultan F et al. Raising the contraceptive prevalence rate to 50% by 2025 in Pakistan: an analysis of number of users and service delivery channels. *Health Res Pol Sys* 2023; 21(1): 4.
2. Wazir MA, Alazar YM, Kadirov B. Family planning: smartest investment for achieving the sustainable developments goals for Pakistan. *J Pak Med Assoc.* 2021; 71:S12–9.
3. MacQuarrie KL, Aziz A. Women's decision-making and contraceptive use in Pakistan: an analysis of Demographic and Health Survey data. *Sex. Reprod. Health Matters* 2022; 29(2): p.2020953.
4. Loll D, Fleming PJ, Manu A, Morhe E, Stephen R, King EJ, et al. Reproductive autonomy and modern contraceptive use at last sex among young women in Ghana. *Int Perspect Sex Rep Health.* 2019; 45:1–12.
5. One UN Pakistan : Annual Report 2021 | United Nations in Pakistan. Available from: URL/<https://pakistan.un.org/en/197948-one-un-pakistan-annual-report-2021>