Social Change—The Essence of Development

NAFIS SADIK

This is a critical historical moment, in the 50th year of our independence. Our decisions, commitment and action in the next few years will affect our country for much of the 21st century. The decisions needed would be a challenge for any country: for Pakistan they involve a drastic change in development priorities.

Our development efforts since Independence have gone into building the economy. In the early years this was quite successful: we harnessed the great rivers for power and irrigation; we revolutionised agriculture, we pushed exports up to new levels. For a time economic growth was quite dynamic.

But we were always aware that something was missing. At Independence Pakistan started more or less even with other countries in the region. All our efforts since then have left us lagging behind. In 1950 the Republic of Korea had about the same GNP per head as Pakistan. Today Korea’s GNP is $7,670; ours $476. That is a difference of 1,611 percent.

What went wrong? And what can we do about it?

The fact is the benefits of development have never reached very far into our society. For example, Pakistan is producing more food now than at any time in its history, and food production has more than kept pace with population growth. Yet 38 percent of children are underweight for their age.

Despite the promises of successive development plans, last year the National Institute for Population Studies reported that only 55 percent of the population have access to health facilities, only 55 percent have safe drinking water, and only 24 percent have sanitation.

In 1993-94, there was, on an average, one doctor for every 1,918 persons, one hospital bed for 1,548 persons, and one nurse serving a population of 5,969. The shortage of service providers and supplies is even more acute in rural areas.

Infant mortality in Pakistan remains well above the world average at 85 per 1000 and life expectancy is low at 62 years. Only one in three births have a trained health worker in attendance. Maternal mortality is needlessly high: 340 women die for every hundred thousand live births. The use of modern methods of family planning is very low, at 12 percent.

Nafis Sadik is Executive Director at the United Nations Population Fund, New York.
Male literacy is 50 percent; but for women only 24 percent. Fewer than a third of Pakistan’s girls are at school and only 56 percent of boys.

These figures reflect historically low rates of social investment compared with international norms and the practice of other countries in the region. For example, Pakistan’s investments in health and education were 1 and 1.6 percent of government expenditures respectively in 1990, compared with 4.8 and 11.2 percent in Bangladesh. Despite a much lower income per head in Bangladesh, contraceptive prevalence is 45 percent, and 40 percent of girls are in school.

Whereas 50 years ago priority for large-scale investments in industry and industrial infrastructure was the norm in most countries, today it is clearly recognised that social investment—that is, investment in the human capital of the country—is equally important.

I want to underline this point. Traditional economics has taught that social wellbeing is a desirable by-product of development: Experience, on the other hand, has taught that direct investment in human capital is essential for lasting economic prosperity.

The connection is well illustrated in my own field of expertise, population. One of the keys to more balanced economic development is slower population growth—but we have discovered by experience that successful programmes to slow population growth are based on the ability of individual men and women to make decisions in favour of smaller families. That in turn is based on gender equality, education for all and good health; including family planning programmes which are consistent in their support of reproductive health and reproductive choices.

**GENDER INEQUALITY**

Inequality between the sexes has held back Pakistan’s development from the outset. At every economic level in Pakistan, what resources exist are not equitably distributed between men and women, girls and boys. Girls are less welcome in our families than boys. There is rejoicing over the birth of a boy, only muted congratulations or none at all when the new arrival is a girl.

Girl children are more likely to be malnourished than boys, less likely to be taken to hospital when sick, and more likely to die in infancy. Girls are much less likely to go to school than boys, and much more likely to leave school early. They get married earlier than boys and start having children while they are still in their teens. Although they work very hard, inside the home and out, they can expect recognition for only one of their activities; the bearing and raising of boy children. A mother of many sons is admired and has status in her community. Compared with her all other women are inferior, including for example professionally-qualified women such as myself.

Most women’s opportunities and even their aspirations are strictly limited by the
patriarchal structure of our society, and by conventional interpretations of their role. Many women are hardly aware even of their civil rights.

We suffer in fact from a long history of domination and discrimination against women. There is no justification for this either in our religion or in the traditions of the past: those who use religion or tradition to somehow justify the subjection of women and the crass neglect of women’s needs are simply wrong.

They are wrong on three counts—first because it is an offence against human rights to condemn women to a life of childbearing and menial tasks; second, because it amounts to a systematic neglect of half of Pakistan’s human resources; and third because it means that fertility, family size and population growth are all far higher than they should be.

**POPULATION GROWTH**

Pakistan’s overall condition cannot be separated from the growth in our population. At independence, Pakistan was the 13th most populous country in the world, with 32.5 million people; in 1996 it was seventh, with a population of 140 million. Pakistan’s population growth rate is now one of the highest in Asia at 2.8 percent: at independence we added a million people every year or so; today we are adding a million every three months. No conceivable development plan can sustain such a rate of population growth. If we are to meet the challenges of the 21st century, Pakistan must put slowing population growth at the head of its list of priorities.

At independence, and for some years afterwards, our health services were admired and copied. Beginning in 1965, our early efforts in family planning were an example to other countries in the region. But we have lost direction and impetus. Governments have gone back and forth between different policies, and no one has come forward to state unequivocally that Pakistan needs and must have lower fertility, smaller families and slower population growth.

At the 1994 International Conference on Population and Development, held in Cairo, 179 nations, including Pakistan, agreed that investment in people—promoting equity and equality for women, investing in health and education, and strengthening civil society—is the key not only to social progress and meeting international standards of human rights, but to slower and more balanced population growth.

Here is where development meets human rights, and here lies the challenge to Pakistan. To meet the challenge it is essential that we act now to put social investment at the top of our policy and development agenda. We must provide basic social services for all, and we must provide them in a way that promotes rather than stifles choice. Social development, no less than political development, depends on the ability to chose, and the existence of real choices.

Leaders at all levels, including influential experts such as yourselves, must speak
out on this matter, and they must also act forcefully to secure the social changes that will promote slower population growth. They must work against preference for sons and promote equality within the family. They must encourage and involve men in supporting the empowerment of women, and increase awareness of the contributions made by women. They must point out that our religion promotes the concept of parental responsibility: that parents should plan for the number of children they can support and bring up; and that young people should be taught about reproductive and sexual health and how to become responsible, caring adults.

Such a change may not be easy. It may involve in some cases questioning long-held beliefs, and giving up the habits of a lifetime, but it must be done, because in the end Pakistan’s future depends on all its people: and it will depend as much on its women as its men.

MEETING THE UNMET NEED

It is encouraging that the government has announced plans to increase expenditure in the social sector, though the projected increases are still modest. Already, more than a quarter of married women in both rural and urban areas have an unmet need for family planning. As a first step, Pakistan must make reproductive health services, including family planning, accessible to these women through the primary health-care system without delay. This calls for innovation and imagination: for example, the plan to train 33,000 village health workers to provide primary health and family planning services is a hopeful initiative, but it must be matched by an overall shift in the management of the health services, to respond more closely to users’ needs. Decentralised management accountable to local authorities rather than a centralised bureaucracy will be a step in the right direction.

Users and potential users need information and education about reproductive health and family planning, which will further increase demand for services. To meet the growing demand we must involve not only the government services but women, women’s organisations, and other groups. We must promote men’s participation in reproductive health programmes and insist that they assume responsibility for their sexual and reproductive behaviour. We must assure the highest quality of care in providing information and services, and make available as wide a range as possible of safe and effective modern methods of family planning.

INVESTING IN EDUCATION

Education is a basic human right, but it is also a fundamental building block of sustainable development. To improve the quality of education overall, we should look carefully at imbalances and differences in quality between what is available in urban and rural areas, richer and poorer neighbourhoods; and in public and private sectors.

Education is important for everyone, but it has a special significance for women.
Education empowers women in multiple ways. Educated women know their rights and have the confidence to claim them. They are likely to marry later and have smaller families: they know the importance of health care and how to seek it for themselves and their children. They can work outside the home: but most importantly they can use their education to enrich their lives.

In Pakistan, as in many other developing countries, young girls have many responsibilities—child care, housework, marketing or work around the farm—which prevent them from attending school. We need to look very critically at this use of girls as unpaid labour and ask not only whether the country can afford to waste their potential, but what sort of lives these girls should expect.

We should be clear: there is nothing in the Qur’an or in our culture which says that girls should be kept at home working while their brothers go to school. Closing the gender gap in education must be a first priority.

CONCLUSION

The economic success of Indonesia, the Republic of Korea, Malaysia and Thailand has drawn attention from all over the world, but it is a success for social as well as economic development. They assumed from the start that education and health care were among the essential investments for national development. They also assumed that social investment should include women. They were willing if necessary to confront entrenched tradition and prejudice in order to bring about needed change. Most important, they recognised that such change creates the conditions for slower population growth, and promotes a balance between population and resources.

These countries have emphasised reproductive health and family planning, as an essential part of health care for both women and men. There is an emphasis on quality in education, and on equal access for both boys and girls to education at all levels. Investment in literacy and health—including reproductive health—and above all investment in women, helped to produce the conditions for sustained economic growth in south-east Asia, and will allow it to continue. Most of you would agree that the current economic problems in these countries are likely to be temporary, because their fundamentals are sound. This includes the fundamentals of social development.

Successful social development recognises that success depends not simply on providing services, but on inviting participation. Successful policies respond directly to the needs of ordinary people, for health, education, employment and a more secure existence. Successful social development demands a much higher level of political participation at all levels, and more involvement of women in business, the professions, politics and government. It calls for strong non-governmental organisations, and a willingness on the part of government to accept that NGOs have an important part to play in the civil society. It demands on the part of government a willingness to innovate,
to adapt and to respond. It calls for strong national institutions and dedicated professionals to staff them. Above all it calls for leadership, the sort of leadership which can express our common values and the common desire for development that reaches all of our people. If Pakistan can meet that standard, then the promise of independence will finally be achieved.