

Table 1. Demographic and reproductive health indicators, Pakistan, 2002–2007

Indicator	Parameter	Year
Total population	164 941 924	2007
Population growth rate	1.9	2007
Crude birth rate (per 1000)	30.7	2007
Crude death rate (per 1000)	8	2007
Urban to rural population, ratio	35:65	2007
Number of women of reproductive age (15–49 years)	45 210 000	2007
Total fertility rate	4.1	2007
Percentage of pregnant women attended by skilled personnel (of all pregnant women)	61	2007
Number of facilities with functioning essential obstetric care per 500 000 persons	N/A	
Percentage of deliveries attended by skilled personnel (of all deliveries)	39	2007
Percentage of deliveries undertaken in health facilities (of all deliveries)	34	2007
Percentage of caesarean sections (of all deliveries)	N/A	
Percentage of pregnant women with anaemia (of all pregnant women)	50	2004
Percentage of newborn infants with low birth weight (of all newborn infants)	20	2007
Maternal mortality per 100 000 live births	276	2007
Neonatal mortality per 1000 live births	54	2007
Life expectancy at birth female (years)	64	2007
Life expectancy at birth male (years)	62	2007
Contraceptive prevalence rate among married women of reproductive age (15–49), all methods (%)	30	2007
<i>Traditional methods (all)</i>	7.9	2007
Withdrawal	4.1	2007
Rhythm	3.6	2007
Lactational amenorrhoea	N/A	
<i>Modern methods (all)</i>	21.7	2007
IUD	2.3	2007
Condom	6.8	2007
Pill	2.1	2007
Injectables	2.3	2007
Implants	0.1	2007
Female sterilization	8.2	2007
<i>Factors for not using modern methods among married women</i>		
Fear of side-effects	3.5	2002
Lack of knowledge	1.4	2002
Cost	1.4	2002
Lack of access	3.0	2002
Traditional misconceptions	6.8	2002
Partner opposes	9.1	2002
Unmet need for modern contraception (%)	30	2007
Receipt of postpartum care and family planning counselling (%)	22	2007
Incidence of sexually transmitted infection (per 100 000)		
Syphilis	N/A	
Gonorrhoea	N/A	
Chlamydia	N/A	
Trichomoniasis	N/A	
HIV prevalence (%)	0.1	2007
Number of verified HIV cases	3874	2007

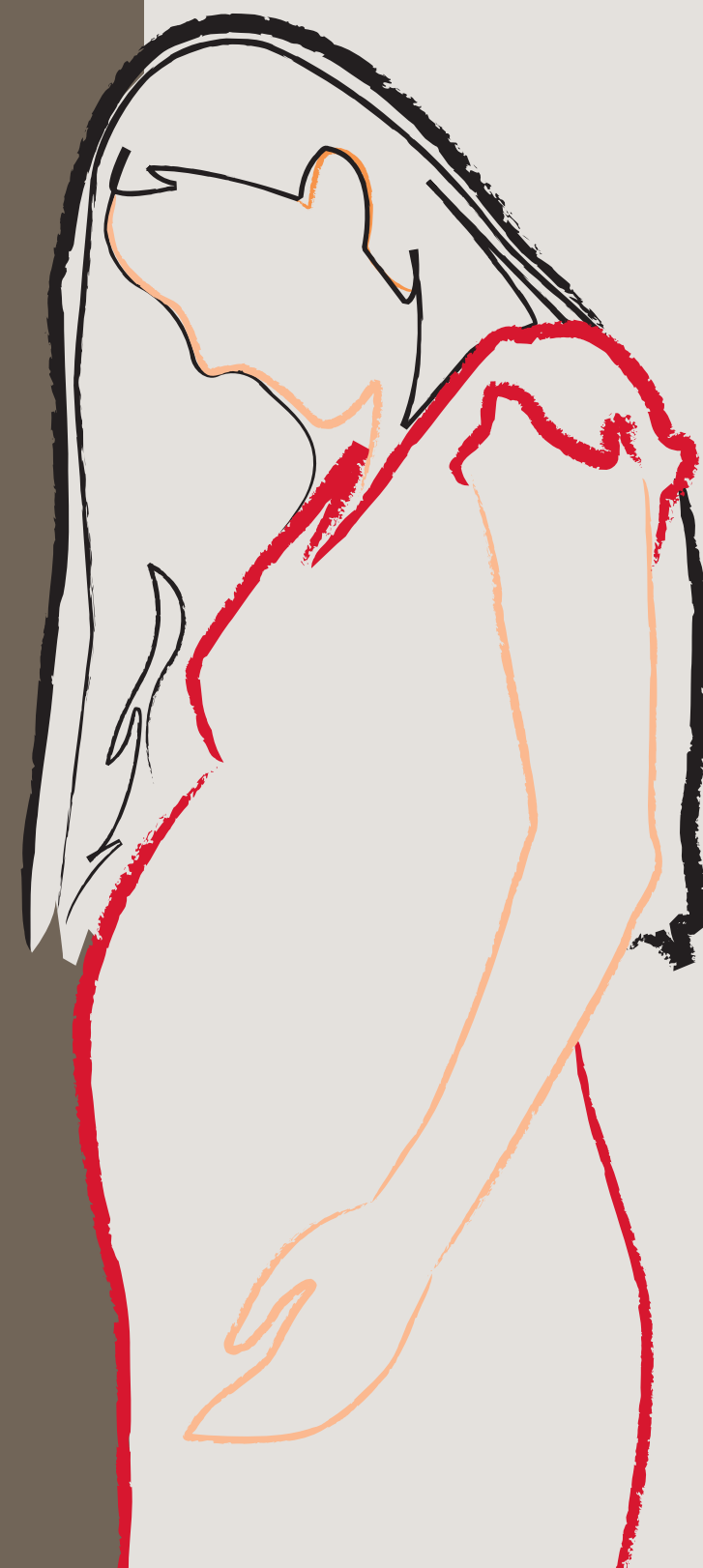
Source:

Pakistan Demographic and Health Survey, 2006–2007.
 Pakistan Economic Survey, 2003–2004.
 Pakistan Reproductive Health and Family Planning Survey, 2001–2002.

Pakistan

Reproductive health profile

2008



Health care system

The health care system of Pakistan is organized in such a way that the Ministry of Health at federal level deals with policy issues and international commitments, while provision of health care services is mainly provincial and the responsibility of the district. There are 5152 basic health units and 604 rural health centres in rural areas, which function as a first-level care facility. Referral services are provided by 219 *tehsil* headquarter hospitals and 73 district headquarter hospitals at their respective levels of care. Tertiary care hospitals are located in the large cities. There is a link to the community through the national programme for primary health care (PHC) and family planning. This operates by way of 100 000 lady health workers who raise community awareness in order to provide preventive and health promotion services. Each lady health worker provides care for 1000 persons in her catchment area. The private sector also plays an important role in the provision of health services. The private sector mainly provides curative services along with some family planning services in collaboration with Green Star Social Marketing. It is estimated that the private sector provides about 60% of curative care. Therefore, despite the progress made by the national health care system, access to care remains unequal and limited. Health financing remains insufficient and socially unfair. This explains the shortage in medical staff, paramedics, hospital infrastructure and the system's poor overall performance. Households have to provide 50% of total health expenditure which thus accentuates inequalities in access to care. The high cost of care and uneven geographical distribution of health facilities creates additional barriers to accessing health services. Introduction of compulsory health insurance AMO and RAMED is expected to have a positive impact on access to care. An autonomous state-sponsored public establishment called "National Agency of the Health Insurance (NAHI/ANAM)" is the first organization to regulate the health insurance system. Its mission is to supervise the obligatory health insurance system and to manage the RAMED resource allocation process.



Reproductive health

The national programme for maternal, newborn and child health has been approved at a cost of Pakistani Rupees (PKR) 20.0 billion (US\$ 350 million) in March 2007. It is based on the national maternal and neonatal health strategy and the national child health strategy formulated in 2005 in line with Millennium Development Goals (MDGs) 4 and 5. The main objectives of the programme are to:

- strengthen district health systems through improvement in technical and managerial capacity at all levels;
- upgrade institutions and facilities;

- streamline and strengthen services for provision of basic and comprehensive emergency obstetric and newborn care;
- integrate all services related to maternal, newborn and child health at district level;

- develop a cadre of skilled community-based birth attendants;
- increase the demand for health services through targeted, socially acceptable communication strategies.