

Missing Voices: Why Youth Must Be Central to Pakistan's Family Planning Agenda

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Pakistan's government has a decades-old commitment to family planning, but the population indicators show that the progress is far from ideal. The modern contraceptive prevalence rate has been at 24% for a decade while the unmet need for family planning is quite high at 17 percent (1). Population researchers and experts are working to understand the reasons behind this slow and inconsistent progress. One significant yet less discussed factor is the non-inclusion of young people in family planning. Pakistan is currently going through a demographic transition; a significant portion of its population, approximately 60 percent, is below the age of 30 (2). Modern contraceptive prevalence rate drops to six percent for married girls aged 15-19 and 13 percent for married women aged 20-24 years (1). These findings indicate that young people are far behind in their access to family planning information and services. It is imperative for the population sector policymakers to come up with well-structured youth-inclusive family planning programs to ensure that the country has the full support of this crucial segment of its population.

Thus far youth has not received the due attention in policy and practice around family planning even though they represent the largest population segment of Pakistan, they have never received the proportionate attention regarding their sexual and reproductive health (SRH), including information and access to family planning. They come across significant sexual and reproductive health challenges such as limited or no access to necessary information, stigma related to contraceptives use, and a lack of youth-friendly health information and services (3). The conservative culture and traditional taboos around sexuality, and sexual and reproductive health of youth in Pakistan contributes to creating barriers to awareness and service delivery, which consequently results in low modern contraceptive prevalence rate amongst youth (4).

Adding to the aforementioned problem, the rapid urbanization and access to media, both regional and global, have contributed to changing attitudes among the young people towards family, reproductive autonomy, marriage and sexuality. However, despite this situation, Pakistan's current health policies and infrastructure remain non-responsive to reflect this change in their budgets and plans. With reference to sexual and reproductive health, the government's health models are not youth inclusive, let aside family planning. In a few areas where sexual reproductive health services are being offered, young people often experience judgmental attitudes and, in some cases, clear rejection of service (5).

The necessity to engage youth in family planning practice and policy cannot be overstated. Different studies have highlighted that when a country equips its young population with comprehensive sexuality education and access to family planning services, young people are more likely to delay their childbearing, complete their education, and contribute positively to their communities (5). In addition to this, the inclusion of youth in family planning programs ensures that services are being planned and delivered with their actual needs in mind, fostering increased uptake of services and overall satisfaction.

Usually, youth policies encompass all the challenges that need to be addressed, but unfortunately, Pakistan's policy scenario presents a different picture as the *National Youth Policy 2021* recognizes youth empowerment and health, but it falls short in including concrete strategies for SRH and family planning. Provincial youth policies from Khyber Pakhtunkhwa, Punjab, Sindh, and Baluchistan lack clear directions or strategies with reference to youth involvement in family planning.

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Previously, youth engagement programs were focused on traditional in-person models where youth groups were engaged through workshops and meetings. One recent development that governments need to acknowledge is that young people are spending a great amount of time on digital platforms; the traditional ways to engage them are no longer relevant. They are digital natives who access information through digital platforms and telehealth services. Tabooed topics like sexual and reproductive health and family planning are being searched on these platforms, as these platforms provide anonymity, reduce stigma, and bridge geographic gaps, especially for those in traditional, conservative, or underserved areas. For instance, national helplines and mobile applications that provide correct and evidence-based information on family planning methods and connect users with healthcare providers have demonstrated encouraging results in urban and peri-urban areas (5).

Nevertheless, such digital initiatives are underfunded and fragmented. National and provincial governments should prioritize and institutionalize such digital health solutions into the national and provincial family planning framework, ensuring that they are sustainable, scalable, and inclusive of diverse young populations. It is a need of the hour to ensure that young people are considered and included as active stakeholders to improve the family planning-related indicators. This simple yet effective step would ensure that the youth play their role for the achievement of national and international development agendas and bring forward their energies and focus to tackle challenges

like rising population, dearth of resources, unemployment, climate change, and many others.

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References

1. NIPS, ICF. Pakistan Demographic and Health 2017-18 [Internet]. Islamabad, Pakistan and Rockville, Maryland, USA: NIPS and ICF; 2019. Available from: <https://dhsprogram.com/pubs/pdf/FR354/FR354.pdf>
2. Pakistan Bureau of Statistics. 6th Population and Housing Census - 2017. Islamabad: Government of Pakistan; 2017. (Population and Housing Census, Pakistan Bureau of Statistics).
3. Meherali S, Najmi H, Nausheen S, Lassi Z, Memon ZA, Mian A, et al. Engaging adolescents for sexual and reproductive health and rights and family planning advocacy in Pakistan: a qualitative study protocol. *BMJ Open*. 2025 Feb;15(2):e093894.
4. Sathar Z, Singh S, Shah IH, Niazi MR, Parveen T, Mulhern O, et al. Abortion and unintended pregnancy in Pakistan: new evidence for 2023 and trends over the past decade. *BMJ Glob Health*. 2025 Jan;10(1):e017239.
5. Chandra-Mouli V, McCarraher DR, Phillips SJ, Williamson NE, Hainsworth G. Contraception for adolescents in low and middle income countries: needs, barriers, and access. *Reprod Health*. 2014 Dec;11(1):1.