

**ADMINISTRATIVE IMPLICATIONS OF POPULATION GROWTH
WITH SPECIAL REFERENCE TO EDUCATION**

THAILAND*

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I. INTRODUCTION

Development Efforts:

In the first national development plan period in Thailand, 1961-1966, emphasis had been placed on economic growth. With the experience gained from the implementation of the first plan, social development has been recognized as a vital part of overall national development.

To attain maximum increase in the standard of living consistent with the social and security requirements for improving the welfare of the people is the basic objective of the National Development Plan. In order to expand productive capacity and draw all classes of society into the development process, mobilization of the full human and national resources has been sought. It also aims to have the benefits of the development shared equitably, especially in isolated areas where the people cannot effectively help themselves.

During the six-year period (1961-1966) of the first national development plan and part of the present five-year-plan period (1967-1971), Gross Domestic Product increased at an annual rate of 7 per cent. This increase surpassed the targets envisaged in the Plan even after allowing for the population growth rate of 3.3 per cent per annum. Per Capita Gross National Product has been rising at about 4 per cent per annum, from US\$ 100 to approximately US\$ 150 at present. However, inequality of income still prevails among people in different regions of the country.

It is recognized that future development efforts might be hampered by rapid growth of the population. In March 1970 the government finally decided to adopt a national population policy to bring down the growth rate through a family planning program.

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Population Growth:

Thailand's population, which numbered only 8 million persons in 1911, the first official census, is estimated at 36 million in 1970, the year of the latest census. The rate of growth was estimated to be 3.2 per cent per annum in the years between 1947 and the 1960. A slightly higher rate, 3.3 per cent per annum, is continuing at the present time.

The present growth rate is among the highest in the world. This rapid growth rate is the consequence of the sharp decline in the level of mortality during the past few decades, especially after the end of World War II. The death rate declined from the previous constant level of 30 per thousand to a low of 20 per thousand by the mid-1950s and to 11 per thousand by the mid-1960s. The life expectancy increased from about 35 years in 1937 to 55 for men and 62 for women in 1965.

Fertility still remains at a very high level, estimated to be around 45 per thousand. The Population Change Survey which was carried out by the National Statistical Office during the years 1964-1967 gave the fertility rate at 41.8 and the death rate at 10.9.

Only 9 per cent of the population resided in urban areas in 1947. The proportion of urban population increased to 12.5 per cent in 1960 and the proportion of urban population at present is estimated to be about 16-18 per cent of the total population. Approximately 4 out of 5 persons of the economically active population engage in agriculture.

International migration, a major factor of population growth in Thailand during the last half of the nineteenth century, accounts for only about 2,000 immigrants to the country annually, and about 1,000 emigrants.

The size of the future population of Thailand will be a function of the extent to which mortality declines further and of the success of the effort to reduce the birth rate. The lowest projection, based on declining fertility and moderate mortality decline, projects a 1980 population of about 48.5 million, and increase of 80 per cent over 1960.

II. HEALTH

Rapid population growth may affect the health of the people in many ways. The following are some of public health problems which may result from rapid population growth in Thailand.

1. Nutrition: Thailand has been called a food-surplus country. However, one should not ignore the fact that there is evidence of "hidden hunger" among a large proportion of the population, and malnutrition is the most important cause of death in infants and children. While in other Asian countries, malnutrition is principally due to biological and economic causes, Thailand's paradox of hunger in the midst of plenty has its origin in cultural conditions such as eating habits.

2. **Housing and Sanitation:** An increase of more than one million people per year means that 200,000 new houses must be built every year. Inadequate housing has already become a serious problem in this country, particularly in urban communities. Unhealthy conditions are apparent especially in the heart of Bangkok. There is lack of sewage disposal system and public water supply in many overcrowded slum areas.

3. **Maternal and Child Health:** It has been shown that mothers with rapidly successive pregnancies have higher puerperal mortality than mothers who space their pregnancies at longer intervals. The risk of infant mortality has been repeatedly shown to be greatly increased in the higher birth orders. Another danger of repeated pregnancies is cancer. There is a clear association between the incidence of cancer of the cervix and high parity, due to repeated injuries to the cervix during childbirth, which may contribute to the development of malignant tumors.

4. **Public Health and Medical Services:** Public health and medical services in Thailand are already inadequate for the present population. This is mainly due to shortage of trained personnel, particularly doctors and nurses. We now have a physician-population ratio of 1 to 7,000 and a nurse-population of 1 to 2,600 people. The nurse-population ratio in the United States is 1 to 300. At present we can produce only 300 doctors and 800 nurses per year, which are less than half of the numbers the country should produce. The average ratio of hospital beds to population in Thailand is 1 to 1,000, while in industrialized country this ratio is only 1 to 110.

Therefore it may be summarized that the present development of health manpower and health facilities in Thailand can not keep up with the rapid rate of population growth. If the rate of population growth and the rate of health facilities expansion continue at the present level until the year 2000, the ratio will become more unfavourable, 1 to 1,200.

It was only in 1888 that the first modern medical school was founded in Thailand. However, medical education thereafter gradually improved and attained international standards. The Department of Public Health was set up in the Ministry of Interior in 1918. The Department of Public Health was subsequently transferred to the newly founded Ministry of Public Health in 1942.

During the past few decades, effective control of many communicable diseases has been established. There has been no case of smallpox or plague during the past decade. Malaria has been eradicated in some parts of the country and is no longer a major threat to the people. The malaria death rate was brought down from 297 per 100,000 population in 1947 to less than 18 in 1967. Infant mortality rate has decreased two-thirds during the past three decades.

The present policy aims at accelerating the progress in public health for the betterment of health and welfare of the people. The following are the main objectives:

1. accelerating the expansion of public health services to cover all areas of the country and particularly remote areas;
2. expansion and improvement of hospitals and medical facilities both in urban and rural areas;
3. support of research work in medical sciences.

The target of the development calls for the expansion of health personnel and facilities. For example, the second five-year plan calls for the increase of doctors from 4,100 doctors in 1966 to 5,444 doctors in 1971, and the increase of hospital beds from 15,400 in 1966 to 20,300 in 1971.

The development programs may be divided into four major areas: sanitation, control and prevention of disease, research, and medical care seminars.

At present there are 30 health-development projects. The new projects include rural nutrition, vocational health, research and quality control of drugs, and mobile medical care units.

Public health services are distributed among four major component parts of the Ministry of Public Health: the Office of the Under-Secretary of State, the Department of Health, the Department of Medical Services, and the Department of Medical Sciences. In addition, there are a number of committees to coordinate activities in certain specific areas of health services: i.e., the National Nutrition Committee, the National Cholera Research Committee and the National Committee on Coordination of Occupational Health.

All the basic health services are dispensed to rural people by the Provincial Health Offices through the network of health units located in the villages. In the City of Bangkok, the Bangkok Municipality is also providing health services. The Municipal Health Division dispenses services to the people through health centers and hospitals.

For evaluation and planning purposes, vital statistics activities began in 1920 and the scope of work has expanded gradually. The basis of vital statistics is the certificate of birth, death and still-birth completed by the local registrar under the Ministry of the Interior. Improvement of civil registration is needed in order to gain more accurate vital statistics. Since 1959 a program of modernization and improvement of hospital statistics has been carried out by the Department of Medical Service. Monthly reports on hospital activities are prepared.

III. FAMILY PLANNING

It took quite some time to inform the pro-natalist public, opinion leaders and decision-makers about the consequences of rapid population growth and that family planning is necessary for the country.

Even though the majority of married women in the fertile age groups do not want more children and recognize the burden of having too many children, many women are still reluctant to accept available family planning services. And since the service is still not widely available throughout the country, some highly-motivated women have no access to the service.

Lack of proper education seems to be a factor preventing many women from accepting family planning.

During the first half of this century, Thailand's official stance on population was predominantly pro-natalist. One of the major reasons for setting up a public health service in Thailand in 1914 was to increase the rate of population growth by reducing mortality. During World War II a Wedding Promotion Committee was appointed by the Government in an attempt to promote early marriages. In 1956, bonuses for large families were authorized in a social welfare act.

It was only in 1959, after receiving a World Bank report stating that Thailand's growth rate was too high and recommending the dissemination of birth control information, that the Thai government began to evidence serious concern about the rate of population increase. A series of committees were instructed to study the problem and to make recommendations to the Cabinet. In addition, three national population seminars were held, each of which also submitted recommendations to the Government.

With only one exception, all the Thai Government's committees and seminars have warned of the dangers of too rapid population growth and have urged wider adoption of family planning.

As the result of the first National Population Seminar in 1964, the Cabinet assigned the National Research Council, in co-operation with the Ministry of Public Health, to carry out a Family Planning Knowledge, Attitude and Practice survey in a rural district about 50 miles from Bangkok. This was followed by an action program, in which family planning services were made available to women. This pilot project was concluded in 1966.

Similar surveys in other rural and urban areas have documented the considerable interest of Thai women in limiting and spacing their number of children.

In the fall of 1967, the Cabinet approved a report recommending that the "government should provide support and expand the scope of (family planning) assistance for poor families with many children -- especially in rural areas." Early in 1968, the Cabinet gave permission to the Ministry of Public Health to expand family planning services, provided that information on contraception should be restricted to women who already have children.

After the Third National Population Seminar in April 1968, a series of strong recommendations were submitted to the Cabinet for a definite policy regarding population. The Cabinet appointed the National Economic Development Board (NEDB) to study the conclusions of the Seminar and to submit a proposal for consideration.

In March 1970, the Cabinet finally adopted a National Policy on Family Planning. The Policy aims at reduction of the fertility rate through family planning. The government will supply information and make services available, but the final decision whether to accept family planning is up to each individual couple.

Three years prior to the adoption of the National Policy on Family Planning, the Ministry of Public Health initiated a "Three Year Plan for Family Health (1968-70)," the main objectives of which were to train health personnel in the field of family planning and to provide family planning services in hospitals and health centers throughout Thailand.

The Ministry's Plan calls for the expansion of family health services by training a doctor and a nurse from each provincial hospital, plus all doctors, nurses and midwives from the health department of each province, during the period 1968-1970. Upon completion of training, family planning services are initiated in each provincial hospital and first - class health center. Midwives are trained in the education and motivation of married women about family planning for integration into their regular home visits and are also allowed to distribute supplies of oral contraceptives once a patient has had an initial prescription from a physician. In 1968, eighteen provinces were covered, in 1969, twenty-six provinces; and in 1970, training and services will be extended to the remaining twenty-seven provinces. Services in Bangkok and Thonburi are the joint responsibility of the Ministry, the two Municipalities, the medical schools and other non-Ministry hospitals.

The program of future activities will be incorporated in the 5-year national social and economic development plan (1972-1976) which is now in the process of development.

The targets of the program aim at reducing the birth rate by 8 per 1,000 from the present level within the next 6 years.

Along with the decision to adopt an official policy, the Cabinet appointed the National Committee on Family Planning. The Committee consists of representatives of various ministries, other government agencies, and private organizations. It is presided over by the Minister of Public Health. The Committee coordinates the family planning activities and gives recommendations for further action to the cabinet.

A sub-committee is also set up to prepare future programs and targets, and prepare the plan of operations and evaluation.

The family planning activities are carried out mostly within the Department of Public Health through its Maternal and Child Health Division. The division provides services to the people through health centers and midwifery stations. The government hospitals under the Department of Medical Science, the non-government hospitals, the medical schools, hospitals, and the health center and hospitals of the Bangkok Municipality are also providing the services including the family planning education program.

In addition to the Ministry of Public Health program, much has been accomplished during the five-year period prior to the population policy being accepted by the government. Population research centers have been established at two major universities. Several demographic studies have been conducted in rural and urban areas of the country. A program of training leading to the Master's degree in Demography has been developed in a major university. Several hospitals have developed demonstration post-partum programs and carried out interesting research projects.

Every family planning service unit is sending its monthly report and the new-patient record cards to the Family Planning Evaluation Unit of the Ministry of Public Health. The follow-up study of IUD and pill acceptors has also been carried out, although results are not yet available.

The monthly report presently issued by the Evaluation Unit appears punctually. Nonetheless, there is a need for more sensitive instruments to measure the progress of the program. That is, additional information should be reported in detail by each clinic such as expulsions, removals, and reinsertions of IUD's and revisits for resupplies of pills. It also should include reports of activities of other sections, including training, health education, supplies, etc.

The research projects which are being carried out by the universities provide additional information showing the progress of the program. For instance, a National Longitudinal Survey of Social, Economic, and Demographic Change being carried out by the Institute of Population Studies of Chulalongkorn University provides a variety of data related to family planning and population.

IV. MANPOWER AND EMPLOYMENT

In Thailand, unemployment is not at present a serious problem. Low productivity-underemployment appears to be a rather serious obstacle to the social and economic development efforts. Underemployment is found to be most prevalent in agriculture, but there is evidence that this problem also exists within commerce and service sectors in the urban areas. Underemployment is quite extensive for certain categories of work, particularly self-employed persons.

Compared with other sectors, per capita output in the agricultural sector is found to have the lowest labour productivity. Approximately 80 per cent of the employed labour force is engaged in agriculture, forestry, hunting, and fishing. This proportion is rather high given the present level of development in the country.

Another serious problem of manpower and employment is the shortage of high-level manpower. Approximately 2 per cent of the labour force is engaged in the professional, technical and administrative categories. Roughly 13 per cent of the labour force are craftsmen, production workers and salesworkers. Education and training programs must be expanded rapidly in order to raise the skill levels of the labour force.

Future problems will be due to the rapid population growth. It is recognized that one problem is providing employment for the new entrants to the labour force. It is estimated that the labour force will be expanded by 60 per cent during the next 15 years. That means the country must provide approximately 7 million job opportunities in addition to the present 17 million.

It is anticipated that the proportion of labour force in agriculture will decline from approximately 80 per cent at present to 70 per cent at the end of this decade, and that the demands for the professional, technical and managerial manpower as well as skilled labourers and sales personnel will increase sharply. The program of education and training of high-and middle-level manpower must be accelerated.

Therefore, it may be summed up that the future major problem of manpower and employment will include the problem of imbalance between employment opportunity and the rapid increase of the labour force within the low-level manpower sector on one hand. On the other hand, the shortage of high-level manpower will become a serious problem facing the nation.

The manpower and employment problem is well recognized by the government and the development planners. And it is emphasized that manpower planning must be closely integrated with economic development planning at all stages since the human element constitutes not only an important factor of production but also a major force in economic growth. The policy, therefore, is formulated in accordance with the above-mentioned problems.

There are three principal manpower and employment objectives:

- 1) to generate employment opportunities equivalent to the increase in the labour force;
- 2) to promote employment in rural areas with a view to relieving underemployment; and
- 3) to improve the quality of human resources through education, training and upgrading of skills so as to meet present and future manpower requirements.

In the process of formulating the policy, the trend data on manpower and related statistics were required. The existing data are insufficient. Therefore, attempts have been made to collect more data on the subjects in order to help guide planners and policy makers. A survey on manpower requirement was launched. A study on the supply of trained personnel and population projections as well as labour force projections were made.

With the available data, policy and development plans were drawn.

A number of major programs on manpower and employment have been developed. The programs on manpower development include training of professional and managerial personnel, training of administrative personnel and training of skilled craftsmen. The training programs are carried out by both government agencies and by private industry. Private industry cooperate

with the government in apprenticeship programmes. Programs to promote welfare of the workers, such as an employment exchange service, labour protection and labour relations are also carried out.

During the past decades a number of government agencies were established in order to implement the plan. The manpower planning division was set up in the Office of the National Development Board to plan and evaluate the manpower and employment program. The Division of Labour in the Department of Public Welfare was raised in status to an independent department. The tasks of the new Department of Labour include promotion of the welfare of the worker, manpower employment, and collection of labour and employment statistics. The National Institute for skill development was set up three years ago by the Department of Labour.

The technical education program is the responsibility of the Department of Vocational Training of the Ministry of Education. This department runs a number of trade schools which produce skilled labour, and a number of technical colleges which produce graduates at the technical level. Other government agencies also provide vocational training; e.g., the military technical school, the post and telegraph school.

At the administrative and professional level the state-run universities provide the higher education services. The Thailand Management Development and Productivity Center is training managerial personnel at all levels. A half-century-old program to raise the qualifications of the administration personnel in the government service by sending officials for training abroad is continued.

For planning and evaluation purposes, attempts have been made to improve manpower and related statistics. Labour Force Survey data are being collected by the National Statistical Office. A study and estimate of the demand-supply outlook on manpower was carried out. Rural employment surveys are being carried out by the National Economic Development Board, with the cooperation of other government agencies and universities, to assess rural employment and underemployment. The standard Occupational Classification has already been developed and the Standard Industrial Classification is in the process of development.

However, the available statistics are not sufficient. Most of the data are of recent origin or in the process of development. No trend data on manpower and related statistics are available prior to 1965. Data on rural unemployment and underemployment are inadequate. Employment market information and employment exchange statistics are being developed by the Department of Labour.

V. EDUCATION

The high rate of population growth brings about a rapid increase in the number of school age children. With the present rate of population growth, the number of 7-year old children has grown by 50 per cent in less than 14 years. Not only the rapid increase in the school age children,

but the proportion of children who want to go to school and the proportion of school children who want to continue their studies at higher levels are also increasing rapidly.

Since the nation adopted the national development plan for the first time 10 years ago the magnitude of the problem has increased. The government has found that it needs to provide education not only to satisfy social demands for education, but also to satisfy the manpower requirements. In 1962 the government decided to expand compulsory education from 4 years to 7 years throughout the country. It will take many more years before the nation can attain this goal. The 1967 enrolment pyramid clearly shows the problems facing the government. Out of 100 students in the first grade, only 61 are in the fourth grade, 17 are in the fifth grade and 11 are in the seventh grade. To fill the gap between the fourth and the seventh grade is an enormous task.

At the same time, the country is in the process of modernization and industrialization, and the needs for vocational and technical education are increasing. Demand for highly trained professional manpower is also increasing in various fields.

The shortage of teachers at all levels is one of the most serious problem confronting the Thai educational system.

To train Thai citizens in a manner which is consistent with the country's economic requirements and social structure and to provide properly trained citizens capable of participating in a democratic society are the two main objectives of education at present.

The present policy also includes promotion of the development of private education, particularly the improvement of qualitative standards. Private schools are receiving more attention and support from the government. Private schools play a very important role in education particularly secondary education. The seats in private schools are increased at a faster rate than in the government schools.

The educational opportunity for every one at compulsory school ages is a vital social obligation. Provision is made for an adequate number of school buildings and equipment as well as teachers. The target aims at a 20 per cent increase of the number of students during the 5-year period. Compulsory education will gradually expand at the upper primary level.

In teacher training, qualitative and quantitative improvements are being made. The target of the present 5-year plan call for the training of 50,000 additional teachers at all levels.

The expansion of vocational and technical education is being made. At the professional level, efforts are being made to expand the training in most required fields, such as engineering, agriculture, medicine and natural sciences. Attention is also given to the adult education program.

Several agencies of the government are entrusted with the responsibility for providing education. Primary education is the joint responsibility of the Ministry of Education, the Ministry of Interior (through its local administrative organization), and the municipalities. Secondary, vocational and technical education are provided for by the Ministry of Education. The Office of the Prime Minister through the National Education Council is supervising university education.

The reports of activities from schools throughout the country are not up-to-the minute. The process of reporting and compiling the data needs improvement.

The recent development of the school and teacher Census has improved the situation. However, there is still a time lag between the time of data collection and the time the report can be made. The School and Teacher Census, which began in 1964, is planned to be carried out annually. The Population Census also provides some basic data on education.

Since many government agencies are involved in the task of providing education, some of the up-to-date information on education are scattered around. Efforts are being made by the agencies concerned to improve the evaluation system.

Using the administrative problems of education as an illustration of the administrative implications of Rapid Population Growth in Thailand, one can see that rapid population growth is a major factor that hinders the educational development at present and poses a serious problem for future development. Some of the present problems have been caused by the introduction of the modern educational system into the country a century ago. The aim of the government at that time was to educate most of the population only to read and write, and to prepare only a few to serve the government as administrators and technicians. With the low population growth rate, the country was able to provide service to any children who sought education. The major problem facing policy makers early in the 20th century was how to motivate the public to understand the importance of education and to persuade them to send their children to school. The compulsory education law was promulgated. The planners and administrators of earlier days were not aware of the rapid population and social change which would occur a few decades later. No long range plan was prepared. The administrators enjoyed looking at the statistics of rapid increases in school population and literacy rates

A few decades after the introduction of modern education into the country, the people began to realize the importance of education. The adoption of a democratic system of government in the early 1930's brought about new patterns of social mobility. Highly educated persons, regardless of their ascribed status, could be rapidly upward mobile. In the process of modernization, the need for highly trained person was increasing. The society gave a very high value to university degrees, especially those from universities abroad. Then the government began to face the serious problem of providing enough secondary school and university education. Shortage of schools became a political issue. The government also found it very difficult to expand the elementary school system to meet the demand in rural areas because of the shortage of teachers and funds.

Because of the consequences of rapid population growth on the economic situation of the country, the government took another step in its development effort. In 1961 the government began systematic development with the adoption of the first national development plan. In the process of planning, several scientific investigations of the social and economic situation of the country, including a manpower requirement study, were made. Shortages of skilled labour and technicians was a very serious obstacle to future development. The educational administrators had to reorganize themselves, concentrating on vocational and technical education, especially teacher training. In developing the vocational and technical educational programs, the administrators not only faced problems of budget and personnel shortages, but also the problem of motivating the youth to take up this type of training. Before the sharp increase in demand for skilled labourers and technicians by foreign industrial investors, the vocational school graduates were given low salary and prestige. So the youth, regardless of their potential, tried to get into universities and gave little attention to vocational and technical education.

At the level of higher education, shortage of professional manpower has been found in certain fields, i.e. natural sciences, engineering, economics and medical sciences. The prospect of solving the problem of shortages of medical doctors and nurses is not very bright. The present physician-population ratio of 1 to 7,000 and the nurse-population ratio of 1 to 2,600 are far from the acceptable standards. The administrators are facing the same problem: shortages of budget, training facilities and trainers. A very large proportion of nurses and a few physician left the country and took up permanent residence in the United States, where they receive many times higher pay. This brain drain has made the problem more severe. Another major factor is the rapid population growth, which makes it very difficult to improve the physician and nurse ratios. One of the hidden problems in some professional education is the shortage of qualified high school graduates. The demand for high school education is beyond the normal capability of the school systems. A considerable number of high school graduates are not well-trained enough for many fields of higher education. For example, even though the country is able to set up many more medical schools, they might not be able to produce a satisfactory number of doctors because the high school graduates are not trained well enough.

Since the youths are aiming only at university education because of the failure of past efforts to guide and encourage students toward other directions, the high school graduates pose a serious problem to the country. The government tries very hard to satisfy the demand by providing more places in the universities. However, the enrollment in the universities commonly can be expanded at a satisfactory rate only in the fields of the humanities and certain social sciences which already meet the manpower requirement. The country, therefore, is likely to face the problem of unemployment at the professional level in the future.

At the same time the educational planners and administrators faced another problem, the expansion of compulsory education from 4 to 7 years, which requires larger budgets, more teachers and more school facilities. As mentioned earlier, the enrolment pyramid shows that out

of 100 students in the first grade, only 17 remain in the fifth grade and only 11 remain in the seventh grade. At present the government must cope with two major problems of elementary education simultaneously to fill the gap between the fourth grade and the seventh grade and to expand the system for the rapid increase of first grade students.

The impact of rapid population growth is clearly shown by the declining enrolment ratio in recent years. With systematic development efforts during the first development plan of 1961- the enrolment ratio dropped instead of rising, from 50 per cent at the beginning of the plan period to 54 per cent at the end of the plan period.

The dilemma confronting educational planners and administrators may be summarized as follows:

1. With the present available resources, the administrators must compromise or choose whether to satisfy the social demand for education or the manpower requirement.
2. The administrator must compromise or choose between quantity and quality. The cost of providing education for one university student is estimated to be approximately the cost for 30 students in early secondary education.

It is recommended that educational planners and administrators should spend more efforts in the following directions:

1. **Overall Educational Plan.** Central planning for all levels of education should be more effectively carried out. More specialists in educational planning are urgently needed to perform the task of planning and evaluating the results of the implementation of the plan.
 2. **Integrated Educational, Social and Economic Development Plan.** The education development plan must be synchronized with other plans of development, such as manpower planning. The social and cultural aspects are also important. For example, changes in social values might help facilitate educational development and make it easier for the administration to achieve its goals.
 3. **Population and Education Policy.** Since one of the major factors hindering educational development is rapid population growth, the educational planners and administrators must consider population changes in their plan and in their course of action. Education can help to solve population problems and indirectly help to solve education problems by developing curriculums on population education.
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