

PPIF QUARTERLY NEWSLETTER

PUNJAB POPULATION INNOVATION FUND

CREATING A CLASS OF SOCIAL ENTREPRENEURS



Constituted as a catalyst for innovative and potentially-scalable solutions to address Family Planning challenges, Punjab Population Innovation Fund aims to cultivate initiatives through a systematic identification and prioritization of non-traditional opportunities in underserved areas by adopting a measurable and result-driven approach.

PPIF's pilot innovations with contract partners namely, HANDS and AHKRC introducing a social mobilization-based entrepreneurial models in Muzaffargarh and Rawalpindi are currently being tested in the field. By extending social welfare and economic self-sufficiency in non-public health worker areas, the twin projects are spearheading grass-root change in Muzaffargarh and Rawalpindi enabling Social Entrepreneur, Noor, through Business-in-Box at the client door-step.

MESSAGE FROM THE CEO, PPIF



As the Financial Year draws to a close, I am pleased to share the second edition of the Punjab Population Innovation Fund Quarterly Newsletter, spotlighting PPIF's cadre of female entrepreneurs and the momentum gained by them in Rawalpindi and Muzaffargarh. It also introduces our three new partners who will further accelerate PPIF mission of engaging men for family planning to five new districts. We also welcome three trail-blazing individuals whose association with the PPIF is a great source of inspiration and will open new avenues for the organization. Dr. Yasmeen Qazi is renowned expert in the family planning sector and Mr. Salim Ghauri is recognized as pioneer in the field IT. The Fund is privileged to draw on the expertise of Dr. Qazi and Mr. Ghauri

who have joined the ranks of a highly accomplished and diverse group of board members with the desire to see PPIF realise its full potential.

With empirical evidence identifying engaging men as clients and husbands as game-changers for success of family planning initiatives, PPIF ventured into the rarely-tested waters and designed its second program involving men to debunk the myth that Family Planning is a woman-exclusive domain. I am delighted to introduce, the second program cycle innovators: DocHers, Greenstar Social Marketing and International Rescue Committee. 'Kar Buland' By DocHers will harness telemedicine for expanding access to family planning information and services in factories and adjacent villages in Rahim Yar Khan; under 'Mil kar Faisla, Khushali ka Waseela,' PPIF partner Greenstar Social Marketing, will dispense information and services to male clients and couples at male general practitioner clinics and pharmacies in Faisalabad and Bahawalpur whereas, International Rescue Committee's 'Connect4FP' aims to leverage technology and provider networks to reduce unintended pregnancies and strengthen client-provider and provider-provider

interactions in Multan.

I am also proud to announce that our partnership with HANDS and AHKRC, in Muzaffargarh and Rawalpindi, PPIF has introduced a cadre of female social entrepreneurs providing doorstep services through business in box. The 160 Noor workers in 15 uncovered Union Councils of Muzaffargarh and 20 in urban slums of Rawalpindi are not only dispensing information and services but their improved finances, trainings and consequential well-being is a positive by-product. These frontline workers are not only providers of family planning services but heralded as emancipated and self-sustaining females rightly dubbed "Noor", the harbingers of light.

We also extend a warm welcome to the renowned model and thespian Amna Iyas whose tremendous media presence and celebrity platform will assist PPIF in reaching the youth to spread awareness on early marriage, challenge the pervasive myths and misconceptions about family planning and spotlight Census 2017 results and projections.

I thank my team for their perseverance, focus and the will to try new ideas.

JAWAD A. QURESHI

The support and assistance of PPIF through the Business-in-Box venture has contributed to sustainable income generating opportunities, for a sole bread earner widow like me, as well as greater prosperity in the area.

Tasleema Mai, PPIF Noor Worker Muzaffargarh

We are providing doorstep family planning services to women in urban slums of Rawalpindi, as well as selling everyday used commodities, to improve their accessibility and sensitize them about family planning.

Nasreen Bibi, PPIF Noor Worker, Rawalpindi

The Increased Demand and Access to High Quality FP Services in Underserved Areas Project is being implemented in 15 Union Councils of Muzaffargarh in collaboration with Health and Nutrition Development Society (HANDS). By reaching 40,000 Married Women of Reproductive Age, this pilot will create 6000 New Users and generate 37,224 Couple Year Protection thereby increasing Contraceptive Prevalence Rate by 10% in unserved 15 UCs of Muzaffargarh.

The Social Entrepreneurship Model with Business-in-Box and incentivised referral system for self-sustaining family planning services undertaken by Akhtar Hameed Khan Resource Centre (AHKRC) in 4 Union Councils of Rawalpindi estimated to create 4500 New Users with a 7% increase in uptake of long term methods. It will generate 51,267 Couple Year Protection resulting in an increase of Contraceptive Prevalence Rate by 10%.

IN THIS ISSUE



INTEGRATING FAMILY PLANNING WITHIN HEALTH AND BEYOND
PAGE 02-03



INNOVATOR SPOTLIGHT
PAGE 05-07



BOOTS ON THE GROUND
PAGE 08-09

INTEGRATING FAMILY PLANNING



The Punjab Population Innovation Fund hosted a workshop titled "Integrating Family Planning within Health and Beyond" to explore inter-sector collaboration opportunities by examining evidence of projects that had successfully integrated family planning with other services. The workshop was divided into two sessions with the first session focusing on integration of family planning services with health care while the second session focused on a broader social development approach with presenters demonstrating ways in which family planning could be incorporated into programs for gender empowerment and poverty alleviation.

Chief Executive Officer, PPIF, Mr. Jawad Ahmed Qureshi welcomed participants and reaffirmed PPIF's commitment to fostering integration through nurturing strategic partnerships with stakeholders and

emphasized on the need for prioritizing family planning interventions. Highlighting the recent census results, Dr. Inam Ul Haq from the World Bank underscored the importance of integrating population welfare into development planning. He urged the PPIF to increase its scale for greater impact.

The presenters for the first session included Dr. Syed Khurram Azmat from Greenstar Social Marketing and Dr. Agha Xaher Gul from the Marie Stopes Society.

The former shared Greenstar's experience with a voucher scheme that combined immunization services with family planning and their findings that the residual contraceptive prevalence, two years after the intervention period, was significant. The latter demonstrated that despite socio-cultural challenges, delivery of family planning services at the same time and location where a woman received post-abortion treatment could lead to higher contraceptive acceptance among the users.

The panel discussion was moderated by Dr. Yasmeen Sabeeh Qazi who reiterated Bill and Melinda Gates Foundation's commitment toward family planning interventions such as adding more efficacious methods to the clients' basket of choice.

Dr. Muhammad Tayyab emphasized on the need for providing client-centric, Family Planning services with post natal care in public sector hospitals. Dr. Tabinda

Sarosh said that providers should provide Family Planning information and services to clients as a matter of right.

Dr. Tariq Mehmoud Mian, Head of the Pakistan Academy of Family Physician said that the 12,000 physicians who were members of his organization were committed to promoting their clients' best interests including providing them high quality Family Planning services.

Areas of interventions identified by the panelists included:

- i. Developing a new cadre of community workers for urban and peri-urban population.
- ii. Tailoring counseling materials to cater to all clients including rural and urban women, men and adolescents.
- iii. Ensuring regulation of private providers and increasing the role of non-physician cadres.
- iv. Collaborating with associations of medical practitioners for training of service providers.
- v. Employment of social marketing approaches to

"Pakistan is the fifth most populous country in the world with one of the highest population growth rates facing various health, economic and financial challenges. Despite, Public and Private Sector directing their efforts combating this issue, significant impact has been lacking for the past four decades. Collaborative efforts such as this session offer crucial platforms as all stakeholders are working towards a common goal directed at the growth of our country and controlling its population growth.

Prof. Dr. Muhammad Tayyab,
Board of Director, Punjab
Population Innovation Fund

"I am delighted to see the multi-sectoral approach adopted by PPIF for engaging departments as the contraception access is in dire need of cohesive action. Such forums are important as they provide fresh thinking and renewed impetus to accelerate the Family Planning challenge.

Dr. Tabinda Sarosh,
Country Director, Pathfinder
International

"Pakistan's long history of 70 years should be recorded for evidence sharing. We should foster innovation based on previous experiences and learnings.

Dr. Nizam-ud-Din,
Chairperson, Higher Education
Commission

"Inaccessibility of education for girls and limited economic empowerment opportunities directly impact a woman's agency for decision-making, which is intrinsically linked with family size and hence affects the population growth rate. It is therefore, imperative that interventions designed for women take a holistic 'life-cycle' approach.

Ms. Fauzia Viqar, Chairperson,
Punjab Commission on the
Status of Women

WITHIN HEALTH AND BEYOND



introduce conditional cash transfer schemes or voucher schemes.

vii. Positioning family planning as a high priority area for corporate philanthropy.

viii. Utilizing health insurance as a demand side financing intervention.

alleviating poverty and promoting gender empowerment were crucial as these directly addressed the social and financial barriers to the uptake of Family Planning services.

Amongst the panelists, Mr. Faisal Farid urged the consolidation of efforts in improving critical areas as proliferation of limited individual projects was not resulting in the desired cumulative impact; while Dr. Khalid Mehmoud expressed BISP's willingness to collaborate with partners for family planning.

Recommendations made by the panelists included:

- i.** Generating employment for women and increasing awareness on gender rights.
- ii.** Ensuring data reliability by facilitating rigorous research and evidence-generation through technical partnerships and commissioning surveys to identify reproductive health trends.
- iii.** Consolidation and documentation of lessons learnt from high-impact past practices in family planning.
- iv.** Replicating the technology-enhanced solution designed by the PITB for immunization to increase outreach.
- v.** Reaching young couples through Nikah registrars and proffering an essential package of services at the time of marriage.
- vi.** Leveraging outreach of micro-credit programs to

increase client trust in contraceptive products.
vi. Delivery of contraceptive products at all government healthcare facilities.

In the second session, Mr. Sarfaraz Hussain Kazmi, from Rahnuma- Family Planning Association of Pakistan presented their micro-financing project which offered integrated education, health, family planning and income generation services for school students, their mothers and families in 25 districts. Dr. Humera Naeem, from Health and Nutrition Development Society, presented the integrated social entrepreneurship and family planning service delivery model, popularly known as the Marvi Model. Ms. Fauzia Viqar, Chairperson Punjab Commission on the Status of Women gave the final presentation on the bi-directional relationship between women's empowerment and family planning uptake as demonstrated by the difference in fertility rates for women across different income and education levels.

Dr. Muhammad Nizamuddin, Chairperson Punjab Higher Education Commission opened the panel discussion by stating that the programs aimed at

Former Federal Minister for Women Development and Population Planning, Dr. Attiya Inayatullah stated that Pakistan had been a pioneer in introducing family planning programs which other countries like China, Iran and Korea had replicated with considerable success. She stressed on the need for interprovincial cooperation knowledge-sharing and collaborative contraceptive procurement mechanisms.



“ PPIF has created a niche for itself by investing in projects that are financially viable, sustainable beyond the duration of funding and are rigorously monitored to ensure the validity of the results, an approach that is unprecedented in the context of family planning.”

Mr. Jawad A. Qureshi,
Chief Executive Officer,
Punjab Population Innovation Fund



“ We are 207 million Pakistanis indicating a steady rise. This calls for a dispassionate look at our population policy and replication of high impact practices. I am heartened to see the current initiatives undertaken by PPIF and excited about their upcoming projects. I look forward to the results they clock and wish them every success.”

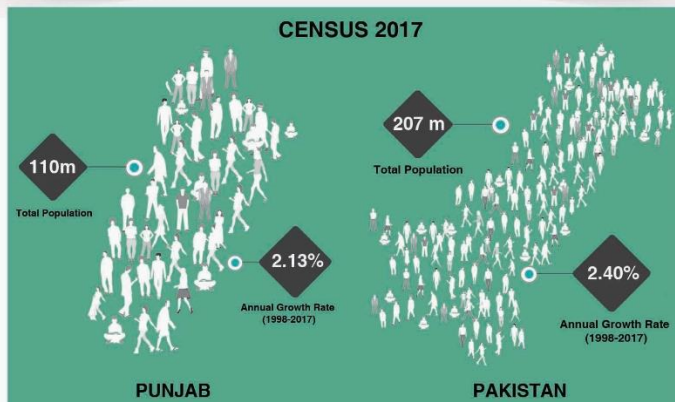
Dr. Attiya Inayatullah,
Former Population Secretary



“ The recent census shows that Pakistan's population has exceeded the most informed estimates of development planners. A new dimension of this population growth is that a predominant segment of the population comprises of young people while the middle class is also expanding. Family Planning interventions must cater to the needs of these demographics and must be informed by research from academic institutions and enabled by technology-driven solutions.”

Mr. Muzaffar Mahmood Qurashi, Director,
Greenstar Social Marketing

POPULATION GROWTH IN PUNJAB QUICK REVIEW OF CENSUS 2017 RESULTS



Population pressure is showing its implications on all aspects of life in Punjab. With a population of 110 million (as enumerated in 2017) the growth rate of 2.13 percent implies that Punjab is recording births to the tune of 2.9 million annually while deaths are estimated between 777 to 783 thousand, annually.

The rapid decline in mortality has resulted in enhanced life expectancy (64 to 66.5 years) between 2010 and 2017. Fertility in Punjab still remains high even though slower decline has been recorded over the last few decades.

“Punjab’s population has increased five folds from 20 million in 1951 has several implications on its development prospects.”

The Census 2017 results continue to show that Punjab remains the most populous province of Pakistan. The proportion of Punjab population to overall population of Pakistan has declined from 60.8 percent to 52.95 percent. Punjab has 25.8 percent area of total Pakistan and home to almost 53 percent of Pakistan’s population. With population increase, population density too has increased over the years. The population density increased from just 100 persons per square km in 1951 to 536 in 2017, which is a five time increase in population density.

As for internal consistency of census data, Punjab has seen a gradual decrease in the sex ratio, reflecting more women being counted for in Census. It declined from 115 in 1951 to 103 in 2017 (better than national average). This is a positive reflection of development process and may be taken as balance in the better coverage of women for Punjab as reflected in the comparative sex ratio data.

Decline in high population growth rate has resulted in a youthful profile of Punjab’s population currently at 65.1 percent indicating high momentum in population growth to continue. Rural Punjab makes the major contribution in the population growth with large proportion of ‘youth bulge’ expected to relocate for employment and education opportunities. Punjab’s urban population was merely 17 percent in 1951, which increased to around 36.7 percent in 2017, reflecting significant rural to urban migration. Urban population currently growing at 4 percent, indicating it will double in less than 17 years, a serious concern for development planners. The migration towards urban centers will particularly result in overcrowding in urban Punjab.

The population change is a challenge to development planners and decision makers and calls for efforts for slowing growth rate using innovative strategies. Punjab’s population must be brought down with greater efforts toward enhancing access to quality family planning services. Strategies towards linking population with development and addressing population redistribution and internal migration to reduce pressure on few selected districts and urban centres are needed.



Dr. Tauseef Ahmed is the Reproductive Health Expert representative of Pathfinder International, with vast experience in family planning, behavior change, policy formulation, and designing large impact surveys including Demographic & Health Surveys.

ENGAGING MEN AS CLIENTS, HUSBANDS AND CHANGE AGENTS



Family Planning Programs in Pakistan are pre-dominantly directed at women with very few interventions focused on men. Existing research shows that men are increasingly interested in gaining information related to family planning services, there is a need for program that reach out to men as family planning users in their own right. Such exclusion of men leads to information barriers for them at various fronts. Insufficient knowledge leads to fear of side effects and contraceptive method failure, which is reported as one of the major reasons for a high contraceptive discontinuation rate of 38% in Pakistan.

“In a pre-dominantly male centered society where more than 30% of husbands make decisions for women healthcare, men’s understanding of family planning is critical as it can significantly affect women’s access and use of contraception and severely limit their capacity to support their wives’ adoption and continuation of Family Planning.”

In a qualitative study conducted by Population Council Pakistan, male respondents expressed their frustration at having no source of information available to them at the community level. While 94.8% of the currently married men have heard of at least one of the modern contraceptive method, their knowledge has not translated into behavior change. There is a need for interventions that look deeper into their knowledge, attitude and practice needs in order for them to make informed choice.

Socio-cultural factors such as; pressure to maximize progeny through sons, myths and misconceptions associated with the use of contraception and understanding of family planning as women’s business play an important role in men’s decision making process. Lack of communication with the partners is another important factor affecting men’s decision-making process.

According to Pakistan Demographic Health Survey, 27% of the couples do not have a mutual agreement on family size. Hence, there is a need for an egalitarian approach to create a more conducive environment for men and promote positive health-related outcomes such as improved communication and shared decision-making needs.

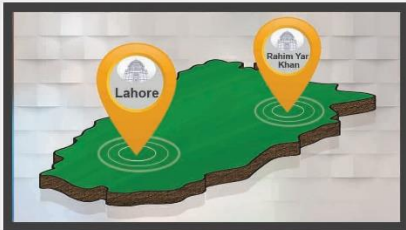
Role of Private Sector in Engaging Men:

In terms of numbers and distribution pharmacies and private providers have the greatest potential for expanding access to contraceptive products. They are quite widespread and an important potential source of not only contraceptive commodities but also information and counsel for men and women especially in area that are underserved by the public sector.

According to the existing research, 82% private static facilities are not providing Family Planning services. While a large number of pharmacists and private providers are increasingly willing and eager to play a role in informing and counseling clients, significant proportions neither sell nor provide family planning services. The oft-cited reason are lack of financial incentive as well as supply constraints, insufficient demand and doubts about religious permissibility of family planning.

Recognizing the criticality of inclusion of men in Family Planning, PPfF has launched a request for proposal for its second innovation cycle, focusing on strengthening engagement of men as clients and husbands, by working closely with private sector to develop and test innovative business solutions while expanding method choice and accessibility of family planning services.

KAR BULAND: (کربلند)



The project goal is to expand access to modern contraceptives in four factories and adjacent villages (within a maximum 10km radius) in Lahore and Rahim Yar Khan.

Target Population

420,000

Project Aim
(Increase in CPR)

10%

Expected New Users

6000



**DR. ASHER HASAN,
FOUNDER AND EXECUTIVE
CHAIRMAN, DOCTHERS**

"With PPIF collaboration, doctHERs will be targeting the factories and deploying male nurses and community health workers at point of care, connecting factory workers with a network of female doctors, through mobile technologies, thereby increasing access to family planning products. A component of Online Pharmacy will also be incorporated in this project, as an alternate method to access products, in case of stockouts."

ORGANIZATION PROFILE

doctHERs

doctHERs is a digital healthcare platform that connects female doctors to health consumers in real-time while leveraging online technology to increase access to quality healthcare for underserved communities and to promote inclusive employment for women. Having a network of eight telemedicine centers across Pakistan, doctHERs is engaged in implementing a Community Health Model to focus on target populations affiliated with the Corporate Sector.

For more information log on to:
www.doctHERs.com

SALIENT FEATURES

1.



Leveraging existing Corporate Value Chains to improve accessibility of family planning information and services among Distribution Sales Reps (DSRs) and Factory Workers and their families as well as among underserved residents of the surrounding villages.

Mobilizing male nurses and unemployed or underemployed LHWs for:

- Providing family planning services at factories point-of-care & conducting door-to-door visits in the communities
- Enrolling clients on telemedicine platform for video consultations with female doctors



2.

3.



Engaging 60 under-utilized home-based female doctors through a telemedicine platform for quality consultations on family planning.

Increasing access to affordable services through Health Insurance program, where:

- Insured factory workers can avail services through a discounted digital payment or cashless option
- Uninsured community residents will be referred to DKT clinics for discounted bundled options.



4.

MIL KAR FAISLA, KHUSHALI KA WASEELA (مل کر فیصلہ، خوشحالی کا وسیلہ)



This project aims to provide Family Planning awareness and services in six Union Councils of Bahawalpur and three in Faisalabad by reaching couples and men at first point of care through a holistic approach to Family Planning.

Target Population

(BHV) 178,647
(FSD) 114,539

Project Aim
(Increase in CPR)

11%
11%

Expected New Users

3193
2016

SALIENT FEATURES

1.



Developing a network of 40 Male General Practitioners under two kinds of clinics:

a. Observing fixed Family Planning days some clinics Establishing LHV assisted Polyclinics, for providing Mother And Child Health and Sexual Reproductive Health

b. Long Term Methods by engaging LHVs or Female Providers

2.

Increasing scope of Family Planning at 20 pharmacies by:

- Establishing male friendly spaces at pharmacies for 24/7 Family Planning counselling helpline service
- Administrating injectables through qualified dispenser, a component derived from Bluestar Program (Bangladesh)



3.



- Inclusion of previously inactive 20 Hakims and 20 Homeopaths for reaching men at predominant male spaces or first contact service point
- Sensitising men on Family Planning, along with providing condoms and referrals

4.

Adopting a comprehensive client-centred Family Planning Model with:

- A greater focus on joint decision making through couple counselling by Female Private Providers and creating linkages for long acting reversible contraceptives

- Removing the barrier of affordability by creating referral network with public providers for free of cost and permanent method services



**DR. SYED AZIZ-UR-RAB,
CHIEF EXECUTIVE OFFICER,
GREENSTAR SOCIAL MARKETING**

"For the last 25 years, Greenstar Social Marketing has been working to regulate the population growth, along with Pakistan Government. Since nearly all family planning interventions implemented in Pakistan are women-centered, Greenstar will collaborate with PPIF to address this gap by introducing a more comprehensive approach where men will also be targeted at their frequently-visited point of care i.e. general practitioners, hakeems and homepaths."

ORGANIZATION PROFILE



An affiliate of Population Services International (PSI) network, Greenstar Social Marketing (GSM) was established in 1991 to improve the sexual and reproductive health of Pakistan by increasing choices and access to quality modern family planning methods. Having a distribution network of over 77,000 franchised clinics and retail outlets, GSM is engaged in providing approximately 53% of all contraceptives, distributed by the private sector, in Pakistan.

For more information log on to:
www.greenstar.org.pk

CONNECT4FP: (کونکٹ فور ایف پی)



This project aims to reduce unintended pregnancies among married couples in nine Union Councils in Multan by disseminating Family Planning information, increasing access to quality services and ensuring uninterrupted supply of products to pharmacies and private health providers.

Target Population

342,000

Project Aim
(Increase in CPR)

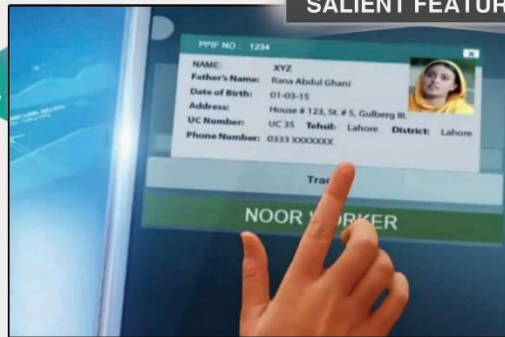
13%

Expected New Users

7387

SALIENT FEATURES

1.



Developing a technology-based solution for a more comprehensive interaction between clients and providers, which will incorporate:

- mapping of service providers
- feedback mechanism
- supply chain visibility,
- IVR or SMS for dumb phone users

2.

- Engaging 20 male/female Agents of Change to ensure access to doorstep family planning information and services including basic counselling and referrals.

- Conducting neighbourhood meetings and sensitization sessions with men, couples, and opinion leaders to address Family Planning barriers



3.



Strengthening client-provider and provider-provider interaction by registering the service providers on the digital platform and ensuring:

- Provision of quality and expanded range of FP services by building capacity of 80 private health providers, 8 public service providers and 8 pharmacists/shopkeepers.
- Uninterrupted supply of affordable Family Planning products by mobilizing manufacturers/ distributors.

4.

- Supporting 5 students for researched thesis on Family Planning-related topics.

- Engaging journalists for publishing 10 articles highlighting best Family Planning practices.



**MR. ADNAN-BIN-JUNAID,
COUNTRY DIRECTOR
INTERNATIONAL RESCUE COMMITTEE**

"IRC is collaborating with PPIF with an aim to control the population issue, through tech-based innovative solutions, for providing Family Planning information and services to the maximum number of people in Multan. Moreover, local community members will be engaged and trained as Change Agent to address family planning issues at grassroots level and to generate demand. IRC and PPIF will also develop a network of public and private facilities to build their capacity for providing quality services and to ensure continuous supply."

ORGANIZATION PROFILE



International Rescue Committee is a global network focusing on improving the lives of people, whose livelihoods are shattered by ongoing natural disasters and poverty. Since 1980, IRC-Pakistan has been providing emergency relief, health care, education, job trainings and other essential services in affected communities of Pakistan, along with raising awareness on key issues related to reproductive health to ensure protection from and treatment for the complications of pregnancy and childbirth.

For more information log on to:
<https://www.rescue.org/country/pakistan>

INCREASED DEMAND AND ACCESS TO HIGH QUALITY FAMILY PLANNING SERVICES IN UNDERSERVED AREAS

"Increased Demand and Access to High Quality Family Planning Services in Underserved Areas" Project is being implemented in 15 Union Councils of Muzaffargarh in collaboration with Health and Nutrition Development Society. Spearheaded by the female entrepreneurs, this community-based project is replicated after the successful MARVIs in Sindh, introduced as Noor in Punjab providing door-step information and services supported by clinical services through Lady Health Visitors. Modelled after BBC Media Action's Ananya Program in India a twin-pronged ICT-based mobile application is also incorporated to deliver audio-learning courses to the Noor workers and disseminate video messages to the target beneficiaries for behaviour change.



providing these clinical services at their centers.

2. Community Mobilization and Promotion of Birth Spacing and Family Planning

The community mobilization activities in the Noor worker's village have been initiated by the project team. During the month of March and April, a total of **217 female group sessions** were conducted in 160 villages with **2794 women participants**.

The sessions were conducted on promotion of birth spacing and associated benefits for maternal and child health, family well-being and short and long-term methods of family planning. The participants were also informed of post-partum family planning, myths and misconception about side effects of the methods, advantages of

modern methods of family planning and promotion of breast feeding.

3. World Health Day Celebrated on 7th April 2018

In collaboration with the District Health Department, HANDS project team and Noor workers arranged community-based awareness sessions for the women in 6 Union Councils of District Muzaffargarh. One village was selected in each union council namely, UC Chak Farazi, Rangpur, Wandher, Gujrat, Ganga and Khan Garh Doma. The Noor workers and LHV's conducted the session on maternal and child health and significance of birth spacing in improving health and well-being of the families.

4. Signing of MoU with Private Health Care Providers

A Memorandum of Understanding has been signed with **15 private health care providers** for provision of Family Planning services in each of the Union Councils. These health care providers were selected after a need

assessment analysis, a stringent mapping process and consent for services in partnership with the project. The providers have been trained from the Center of Excellence of Population Welfare Department at Nishtar Hospital Multan under a workshop organized by HANDS for PPIF-specific interventions.

5. Noor Worker's Health Centers Established

After a rigorous selection process, in April 2018, HANDS launched 160 Noor workers for the promotion of family planning in remote villages of 15 union councils of District Muzaffargarh.

These Noor workers have also established Noor Health Houses in their homes, for providing counselling services by the Lady Health Visitor. Noor worker have been provided with information kits and sign boards with the standardized PPIF branding for easy recognition and recall by the prospective beneficiaries.

Under the project, the following activities were conducted by HANDS:

1. Training of Private Healthcare Providers and Project Team

As part of its activities, Health and Nutrition Development Society, conducted training of private health care providers in two batches, the first on 2nd-7th April, 2018 and the second batch on 7th-12th May, 2018. The training was arranged at Center of Excellence under the Population Welfare Department at Nishtar Medical College and Hospital, Multan. The skills-based training encompassed techniques and practice of IUD insertion, removal and infection prevention and post-partum family planning methodology. All trainees were successfully certified by **Population Welfare Department Punjab** for

This intervention has been introduced by PPIF and HANDS in the remote areas of Muzaffargarh, where neither government nor any other organization has ventured thus far. PPIF and HANDS venture is being appreciated tremendously by the community.

Sadia Nawaz,
Project Manager, HANDS



These two organizations, PPIF & HANDS have come here to facilitate our community which is a great step. According to the law and Holy Quran, a mother must breastfeed her child, for two and a half years, in case of both a boy or a girl.

Syed Aulad Shah, Sarpanch,
Chak Samati, Rangpur, Muzaffargarh

The main focus of this project is to offer client-centered care at the door steps by training the LHV's and Noor workers and enabling them to become high performing health workers. These Noor workers are supported by Business-in-box social enterprise model which allows them to become economically empowered as well as to remain a source of information and promotion of healthy life.

Dr. Shaikh Tanveer Ahmed,
Chief Executive Officer, HANDS



The major health need in this community is the availability of a health worker, which has been addressed by a project implemented through collaboration of PPIF and HANDS, under which a widowed woman has been employed for doorstep visits, to keep a check on the health of mother and child, along with promoting birth-spacing.

Iqbal Husain, Citizen,
Chak Samati, Rangpur, Muzaffargarh

A COMMUNITY DRIVEN MODEL FOR SUSTAINED FAMILY PLANNING IN URBAN SLUMS

"A Community Driven Model for Sustained Family Planning in Urban Slums" by Akhter Hameed Khan Resource Centre encompasses demand creation as well as service provision through a women entrepreneurship model in urban slums of 4 UCs of Rawalpindi. Community mobilizers, Noor worker are providing door-step counselling and short-term contraceptive services to Married Women of Reproductive Ages in Dhok Hassu, Dhok Mangtal and Fauji Colony. As an innovation, Noor also refer prospective clients to the identified private providers for Long Acting Reversible Contraceptives (LARC) for which they will be paid a referral fee. The business model of this initiative is driving an increase in contraceptive prevalence rate and facilitating self-sustaining growth in income and livelihood.



Under the project, the following activities were conducted by AHKRC:

1. Capacity building of Noor Workers Conducted

Keeping in mind the overarching goal of increase in CPR by 10% in program areas, 36 Noor workers and 9 Social Mobilizers (6 Female and 3 Male) were hired. During the reported period, the basic element in sustainability of the project is the capacity building of the Noor workers who are actually part of this community. These skilled and trained women outreach will stay in the community well beyond the project duration. The project staff which includes Project Coordinator, Social Mobilizers

and Noor Workers were given training on Entrepreneurship, Social Mobilization, Communication, Long Acting Reversible Contraceptives and Counseling. AHKRC also conducted 3 Refresher trainings on social mobilization for the Male SMS, on addressing Family Planning myths for all Noor, and training on using Tablets of 7 private providers have been included to join the Hamari Sehat Network, after signing of the MoUs.

2. Noor Workers Spearhead Larc Uptake

Thus far, Noor workers have visited a total 8636 households, higher than the target initially set for the First Quarter. A total 1590 women were referred to healthcare providers for different issues and services related to family planning, this includes 1150 new users. Referrals are confirmed after following-up with clients and collecting back the referral slips from Healthcare providers. So far,

526 individuals have been referred to different organizations for LARCs, among which most individuals opting for implant.

3. Health Camp Established

Health camps has also proved to be an effective strategy for converting more clients towards family planning, registering a total 43 new users and have succeeded of AHKRC office medical camp.

4. Community Awareness Services Arranged for Family Planning

Finally, a total 1118 community awareness sessions have also been conducted with primary focus to engage MWRAs and men for discussing about family planning, and reducing myths and misconception about the method.

5. Cognitive Behaviour Therapy-based Counselling Sessions organised

As part of the proposed 1 year intervention, AHKRC in partnership with NUST seeks to address unmet need and contraceptive uptake among urban poor through a holistic approach that creates demand for Family Planning in communities by providing information and counselling, overcoming myths and promoting Family Planning behaviour as a norm through strategic behaviour change approaches. During the Quarter 1&2, 1925 CBT based counseling session were conducted. This number is ahead of the target for the current quarter. Counseling is one the major component of the project where refusals, myths and misconceptions, and lack of knowledge is address through proper process. It has proved to be an effective strategy in achieving goals of the project.

6. Monitoring & Evaluation Visits Undertaken

To ensure swift and transparent implementation and transparency, AHKRC undertook 548 Social mobilizers supervision visits and an additional 512 number of Monitoring & Evaluation visits.

To ensure sustainability, Noor worker will refer women with existing local health providers and in return of those referrals, private provider, will pay them the referral fees, even after the project life. Noor worker will also disseminate information on long term methods, along with generating profit through their business-in-box.

Dr. Ayesha Khan, Chief Executive Officer, Akhter Hameed Khan Resource Centre



It has been clearly stated that breastfeeding should be continued, until the child is two years of age, hence promoting birth spacing.
Moulvi Nazeer Ahmed, Religious Leader, Dhok Hassue, Rawalpindi



Punjab Population Innovation Fund and Akhter Hameed Khan Resource Centre have implemented a project in our area, under which community mobilizers, Noor Workers, are providing doorstep services to disseminate family planning information and discuss issues related to mother and child health. As a result of this project our community is now more aware of the importance of spacing between births.

Shah Khalid Khan, Citizen of Dhok Hassu, Rawalpindi

DR. INAM-UL-HAQ, PROGRAM LEADER, WORLD BANK



1. What are the economic implications of inaction in the population sector in Punjab?

Pakistan and Punjab's GDP is growing and is expected to grow further in near future. Pakistan's real GDP per capita (constant US\$ in 2007) is projected to grow from \$1,000 in 2015 to \$2,283 in 2050. With the present trend of fertility decline, Pakistan's population is likely to be about 345 million in 2050 (at 2.8 children per woman). However, Pakistan could grow much faster to a per capita GDP of \$3,414 in 2050 if it achieves the South Asian average fertility reduction rate, with a population of 276 million in 2050 (based on 1.84 children per woman), if appropriate actions are effectively implemented. The cost of inaction is huge for Pakistan - a forgone

GDP estimated to be \$2.3 trillion between 2020 and 2050, which means a loss of 76 billion per year. For Punjab, the economic loss will be US\$1.2 trillion from 2020 to 2050 and more than US\$30 billion per year on average. These will have serious economic and social implications for the people of Punjab and Pakistan.

2. Surveys indicate nearly universal awareness on family planning in Pakistan and yet the increase in the uptake of modern contraceptives has remained low. What is the main reason behind this low uptake?

Pakistan's efforts to reduce fertility and population growth were transformed during the 1990s with multiple interventions e.g. expansion of public sector provision, large scale private sector participation including social marketing innovations, improving access to women through community based providers which increased access to services. All the right things that delivered huge results. Fertility declined from around seven to four children per woman, and contraceptives use increased from 10% to over 30% - a 300%. Since then no further efforts were made to further increase access to services. The actions started to wane after 2006 and was followed by a decade of inaction. Public and private sector interventions stagnated, community based service delivery given a deadly blow, and with no new ideas, resources started to dry up. Therefore, for me the

main reason of low uptake is ability of public and private systems to enhance access to products and services.

3. What, in your opinion is one area where the PPIF should invest because it holds the maximum potential for impact on people's behavior?

Large scale private and NGO sector participation including new social marketing innovations with public financing.

4. What would your argument be against the belief that a large family size equals economic prosperity for a low-income household?

There are many social, cultural, religious and economic reasons why parents in the developing world have large families. However, when income is scarce and a family is already struggling, this is an important question for them



and one might not have many arguments as people make choices in their circumstances - sometime with high child mortality rates, parents will intentionally have large families because the children don't survive and secondly majority of poor live in rural areas, with labor-intensive agriculture to survive and need extra hands - for them, a large family might be the only assurance for survival. Besides ensuring access to services our argument should be that having fewer children, whom they can get educated, offers them the best option for prosperity.

5. Which policy related barriers are responsible for private providers' reluctance to contribute toward the delivery of family planning services? How can these be mitigated?

There are many challenges but for me the biggest one is the lack of large scale public financing. I believe public financing should be made available to the private sector to enhance access to services.



DR. HASSAN MOHTASHAMI, UNFPA REPRESENTATIVE



UNFPAs profile of work in Pakistan/ Punjab region

The United Nations Population Fund (UNFPA) is the lead UN agency for delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled. Since 1970, UNFPA in Pakistan (including Punjab) has supported:

- 1) Sexual and reproductive health

information and services;

- 2) Adolescents and youth;
- 3) Women's empowerment and gender equality;
- 4) Population and development.

Q1. What do you perceive as the overall population situation in Pakistan, and specifically in the Punjab region?

Since Punjab is 53% of Pakistan's population, demographic changes for Pakistan are expected to broadly apply to Punjab as well. The delay in reducing the fertility will have three major consequences.

- Higher population growth rate (requiring expansion of infrastructure and services to serve a larger population)
- Higher growth rate of the school-age population (making it harder to achieve educational goals)
- Less favourable age structure for economic development (smaller share of

population in the working-age groups)

Q2. How is PPIF a good addition to the family planning sector in Punjab?

UNFPA strongly considers PPIF as a good entry point for testing and applying innovative approaches for the provision of family planning information and services especially under the Public



Private Partnership. By involving the private sector, the Government can leverage the available resources in the private sector for the provision of family planning information and services and ensure expansion of these services in

remote and rural areas of Punjab. This will help in achieving the commitments of the International Conference on Population and Development and the targets of Family Planning 2020 and Sustainable Development Goals.

Q3. What kind of innovations should be spearheaded by PPIF?

Punjab Population Innovation Fund can play a significant role in bringing the private sector on board to ensure the provision of family planning information and services to the most marginalized population in the rural communities. Pakistan is experiencing a youth bulge, with approximately two thirds of population under the age of 30. Punjab Population Innovation Fund should develop initiatives that focus on the Family Planning Counseling and Services particularly for young people. The availability of trained health care providers to provide family planning services is limited especially in the rural areas of Punjab. This may also include introducing the doctor-less health care centers at the grass roots.

PPIF WARMLY WELCOMES...



DR. YASMEEN SABEEH QAZI

Dr. Yasmeen Sabeeh Qazi has been associated with David and Lucile Packard Foundation since October 2003 as their Senior Country Advisor. She is also a Senior Technical Advisor at Bill and Melinda Gates Foundation. She has closely worked with donors and international agencies on Reproductive Health matters and was awarded "Maymar-e-Watan" from Sindh Government on account of her ground-breaking work on social development.

"Pakistan have really gone very far in its population growth rate, becoming the fifth most populous country in the shortest possible time. Hence our priority agenda is population and its stabilization. As far as health services are concerned, unmet need for family planning is one of the biggest challenge and we need innovative strategies to address it. For that purpose, Punjab Population Innovation Fund is focusing on engaging private sector and scaling up innovations to ensure that every woman would have an access to quality family planning services. This is needed to move the needle and I wish PPIF the best in its journey."



MR. SALIM GHAURI

Mr. Salim Ghauri is the founder and the CEO of NETSOL Technologies, which has emerged as the highest exporter in IT. He received the life time achievement award in IT industry from Governor Punjab in 2013 and 8th Teradata National IT Excellence Award from Leader of the House in Senate. Among his numerous contribution towards the IT sector, Mr. Ghauri has chaired the Federal Government's ICT Task Force to assess Pakistan's IT policy and in addition, he was also appointed as an Honorary Consul of Australia for Punjab.

"I feel honoured to be a part of Punjab Population Innovation Fund Board as I am passionate about raising awareness and finding solutions for Pakistan's mammoth population challenge. Around me, I see couples with meager incomes but large families that lead them to a life-cycle of missed opportunities for themselves and their children. I believe PPIF has tremendous potential to impact such individuals, couples and communities through multi-channel approaches to demystify the misconceptions, strengthen service outreach and employ mHealth technologies to dramatically accelerate the goals envisaged by this organisation. The time, effort and resources dedicated by PPIF to provide access to couples with unmet need is an investment worth making and I wish it the very best."



MS. AMNA ILYAS

Amna Ilyas is a renowned actress and model. She won the Lux Style Awards award for Best Female Model and used her acceptance speech to send across a strong message on the concept of "dark is beautiful". She is also associated with Deplex Smile Again Foundation, which is focusing on providing medical care to acid survivors and in her upcoming movie, she is portraying the role of a feminist to promote gender equality.

"It is a great privilege for me to be part of Punjab Population Innovation Fund, for its awareness campaigns with special focus on the youth. As a pre-requisite to effective healthcare, everyone requires access to reliable and up-to-date Family Planning information in the right language, with the right slant and at the right time. Given the high population growth and Pakistan's youth bulge, the time is ripe for the Youth particularly to become aware of their right to family planning information and education, specifically recognised under the Sustainable Development Goals. As a media person, I am happy to further PPIF's message engaging and educating the young audience of making an informed choice as an informed family leads to a smart family."

HIGHLIGHTS OF THE 7TH PPIF BOARD MEETING

A meeting of the Board of Directors was held on 21st March, 2018 to welcome Dr. Yasmeen Sabeeh Qazi and Mr. Salim Ghauri to the PPIF Board. In his welcome remarks, the Chairman noted that Dr. Qazi's inclusion had greatly enhanced the technical capacity of the Board as she was a well renowned sector specialist while Mr. Salim Ghauri brought a nuanced understanding of the IT sector, and the tools used for effective communication and diffusion of information.

The Board reviewed the progress made in the implementation of the social entrepreneurship based, "Noor" model being implemented in Rawalpindi and Muzaffargarh and issued directions regarding the development of a five-year strategic plan for the PPIF. The Board also advised the PPIF management to develop strategic partnerships with donors and other development programs in order to augment its capacity for implementation on scale. The Board also deliberated on behavior change communications activities that could potentially be undertaken by the PPIF.



PPIF BIDS ADIEU TO...



MR. SYED RASHID ALI
EX-GENERAL MANAGER
FINANCE PPIF

"Mine was very short tenure at PPIF, where professionally, I had an excellent experience, whereas personally it created an urgency in my life as if there is no tomorrow, all due to JAQ."



MR. ZEESHAN AHMED
EX-GENERAL MANAGER
MONITORING AND EVALUATION
PPIF

"PPIF offers a unique platform to work on innovative approaches and projects for targeting population and development related challenges. It was a unique working experience for me, which offered much learning and creative opportunities for expanding the horizon of thinking and for developing creative approaches towards development initiatives."



MS. AMMA HUMAYUN
EX-GRANTS COORDINATOR PPIF

"It was a wonderful experience working with such a committed group of people, so dedicated to the cause of development in Pakistan. I look forward to staying in touch with you all and will always remember the conference room discussions/presentations/time during the initial set-up, excitement of setting the office & launching the first program cycle; a true start-up experience."

EDITORIAL TEAM

Gofer-in-Chief: Sadia Malik
Czar of Content: Khadija Ikram
Head of Doodle: Bakhtawar

LIFE AT PPIF



PEOPLE BEHIND PPIF



Amna Akhsheed is working as General Manager Grants at PPIF since May 2017. She has more than 20 years of experience of developing and implementing various programs related to women empowerment, gender-based violence, child marriages while specializing in youth-friendly family planning and sexual & reproductive health programming. Previously, she was the Director for Adolescent, Women Empowerment and Poverty Alleviation programs at Rahnuma FPAP since 2006.

"In light of the alarming Census 2017 results, Pakistan has one of the worst population indicators in the region. With the growth rate of 2.4% as compared to 1.2% and 1.1% of India and Bangladesh respectively, it is inevitable to suggest that population

programs need utmost programmatic and political priority. There is a dire need to go beyond the traditional frameworks of family planning programming. PPIF, in its 5-year strategy, aims to develop innovative and inclusive solutions that are actionable and measurable, harness technology, reaching the unserved poor and marginalized through effective synergies and collaborations, providing value for money that leverage on untapped and under-utilized private health service providers and most importantly, are sustainable and really hit the scale are needed.

PPIF has adopted a two pronged strategy; 1) Innovation to Scale and 2) Scaling Up Best Practices. The former focuses on piloting innovative solutions and demonstrating potential for scale while the latter focuses on scaling-up by integrating, leveraging and replicating best practices. For the first strategy, PPIF has launched two program cycles; the door-step delivery model through woman social entrepreneurship and the male engagement program for improved joint decision making among couples.

Male engagement strategy was

designed as women-centric programming has been one of the main reason for the slow progress of family planning programming in Pakistan. A little has been done in engaging men, who in most cases, make decisions for women healthcare and have major disagreement on family size with their wives. Though engaging men is challenging due to the inherent socio-cultural barriers, PPIF believes in unconventional programming approach to push the boundaries while de-stigmatizing family planning especially for men and young couples. For the second strategy, PPIF envisions pioneering integrated family planning programming within health systems like immunization, maternal and child health and post-abortion & post partum care as well as programs related to women empowerment, adolescent and youth friendly services and poverty alleviation while harnessing the growing potential of technology. Global evidence suggests that integrated approaches not only help create affordable and scalable solutions reaching the underserved populations especially the poor and marginalized but also significantly improve the population development indicators in the country."

MS. AMNA AKHSHEED

FEEDBACK

+92-423-5913413-5 Fax: +92-42-99231123

125 - Abu Bakar Block, New Garden Town, Lahore