



### 3. Trainings and capacity building activities

- Establishing and building the capacity of Community Health Educators (CHEs) on counseling and communication about RH (including puberty, conception, STIs, FP, GBV etc)
- Skill building of traditional birth attendants.
- Skill Building of public and private medical doctors and LHWs on Safe Motherhood (including EmOC, tetanus toxoid (TT) vaccination, STI management, Modern Methods of FP, Counseling and Communication on RH issues, Youth Friendly Health Services etc.
- Establishing and strengthening community-based RH care services provided by LHWs, CHEs, TBAs and other Birth Attendants (BA); including provision of safe delivery kits, STI management kits, Contraceptives
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### 4. Advocacy

- Establish district advisory groups comprising politicians, tribal elders, government officials and religious leaders.
- Organizing advocacy workshops and seminars at union council, district and provincial level
- Commemorating international days i.e. Health Day, Youth Day, Women's Day,
- Establishing active linkages with provincial and district governments to advocate RH issues
- Producing Radio and TV documentaries



### Project results

1. Community Mobilization at the village level carried out through COs (Community Organizations), LSOs (local Support Organizations) resulting in increased community awareness about RH issues including maternal/neonatal health and family planning issues HIV/AIDS, Sexually Transmitted Infections (STIs), Gender Based Violence (GBV) and improved health seeking behaviors at the time of delivery;
2. A new cadre of Community Health Educators (CHEs) and also the existing LHWs identified, and trained on RH issues including STIs, HIV/AIDS, GBV, Family Planning, Adolescent and Youth Issues, sexual harassment and the Counseling and Communication and working in the project area to provide community-based awareness about RH; and facilitate referral;
3. Increased support of the government for the project interventions at district and provincial level;
4. Management capacity of district health managers enhanced through providing them necessary equipment and training in health system analysis, quality of care, planning, monitoring and evaluation;
5. Accessibility and availability of RH services including comprehensive family planning services, surgical contraception, STI management, HIV/AIDS testing Emergency Obstetric Care services within government health facilities in the project area, Comprehensive EmOC facility at the two THQ Hospitals and Basic EmOC facilities in 6 RHCs in the project area;
7. Traditional Birth Attendants identified, trained in danger signs recognition, use of clean Delivery kits, infection prevention and referral of complicated pregnancies and deliveries for facility-based care;

## Improved Reproductive Health Status of Women, Men, Youth & Adolescents in Pakistan

# Save Mothers





## INTRODUCTION

Balochistan Rural Support Program (BRSP) is an autonomous not-for-profit organization working in the rural areas of Balochistan. BRSP's history goes back to the project "Pak-German self help initiative" that was initiated in 1983 in collaboration with Government of Germany and Pakistan. The overall mission of BRSP is to reduce poverty and improve the quality of life of the rural poor by harnessing the potential of people to manage their own development, through their own institutions. This is accomplished through the mobilization of poor communities to help them plan and implement their own development agenda.



## An Overview of Reproductive Health Status

Deprivation, vulnerability and insecurity define poverty in Pakistan and it is estimated that at present 16 million Pakistanis are living in absolute poverty. The vicious cycle of poverty is exacerbated by ill health. This is perpetuated by lack of

awareness of the importance of rights associated with health, in particular to women and adolescents. The low levels of knowledge about health issues and availability of health services are illustrated in the high maternal mortality rates (MMR), 350-400 deaths per 100,000 live births nationally while in Balochistan it is 530-800 and Infant Mortality Rate (IMR) 90 deaths per 1000 live births nationally while the figure is abysmally 105 in Balochistan. Studies conducted confirm serious disparities in demand and supply of the RH services specifically in the areas of Emergency Obstetric Care (EmOC), Family Planning (FP), HIV/AIDS, Sexually Transmitted Infections (STIs), and Sexual and Gender-based Violence (GBV).

Reproductive Health (RH) is recognized as a basic human right that applies to all, men, women, youth and adolescents. However, there is still an enormous gap in the provision of broadened Reproductive Health Care (RHC) in the areas of Emergency Obstetric Care (EmOC), family planning (FP), HIV/AIDS and Sexually Transmitted Infections (STIs), and Gender-based Violence (GBV). The shift of focus from primary health care to RH, the lack of financial, technical and community resources undoubtedly are impacting the communities living in Balochistan with low literacy levels, rigid tribal setups, and poor road infrastructure. Furthermore, key RH indicators for Balochistan are poorer in comparison to national estimates, reflecting low levels of awareness, gender disparities, poor capacity of service

## GOAL

Improved reproductive health status and overall well being of women, men, youth, and adolescents in Balochistan province;

## Specific Objectives

- To mobilize the communities for increased demand of and use of reproductive health services, including ante-natal and post-natal care, family planning services, STI management, safe delivery practices and referral of complicated pregnancies and deliveries through Community Organizations (COs), Lady Health Workers (LHWs), TBAs and Community Health Educators (CHEs)



- To strengthen governance and management of health sector by expanding and improving the quality and accessibility of emergency obstetric care (EmOC), RH services, Adolescent RH services and family planning services within Government health facilities: Two Tehsil Headquarters (THQ) Hospital, and 6 Rural Health Centers (RHCs)

## Project at a Glance

The project "Improved Reproductive Health Status of Women, Men, Youth and Adolescents in Pakistan" has been designed by BRSP for district Mastung and Pishin. It is a 42 month venture starting from January 2009 that focuses to improve the Reproductive Health and overall well being of women, men, youth, and adolescents in Balochistan province.

BRSP envisages to increase access to, enhance demand for and improve management of Reproductive Health particularly maternal and child health services in public and private sectors RH service facilities. The project will enhance community awareness of RH issues, including the right to RH services, and empower vulnerable people to exercise their right and responsibility to access quality RH services. It also strengthens the service delivery by enhancing the capacities of service providers and service delivery points. Furthermore, BRSP will advocate with key policy makers and opinion leaders to ensure political commitment for developing an enabling environment for RH interventions.

## Major Project Components

The project has four major components:

### 1. Community Mobilization

- Holding sensitization meetings with already existing COs (Community Organizations) and VOs (village organizations) of BRSP;
- Establishing/strengthening male and female Village Health Committees (VHCs) at the community level through Community Organizations and Village Organization;
- Establishing a referral system from the community level to the relevant health facility;
- Sensitizing and educating communities including men, women, youth, adolescents and community gate keepers (decision makers) for improved awareness through community meetings, group counseling, peer education, life skills based education, IEC, Theatre, Popular music and other appropriate means of communication about a broad range of RH issues and rights, health care seeking behaviors, service provision etc.



### 2. Service Provision

- Upgrading and equipping facilities with essential supplies including RH commodities, condoms, contraceptives, delivery kits, resuscitation equipment)
- Establishing and strengthening a functional referral system and village based ambulance services for basic and comprehensive EmOC;
- Recruiting Women Medical officers/LHVs to strengthen the facilities as per requirements
- Strengthening the screening and supply of safe blood through DHQs
- Establishing and strengthening community-based RH care services provided by LHWs, CHEs, TBAs and other Birth Attendants (BA); including provision of safe delivery kits, STI management kits, Contraceptives