

**Government of Pakistan
Finance Department
Gender Responsive Budgeting Initiative**

**Gender Budget Statement (Federal)
2006-2007**

Education – Health – Population Welfare

INTRODUCTION

One of the priority tools for Gender Responsive Budgeting (GRB) is a Gender Budget Statement (GBS). A Gender Budget Statement is a summary document published by a Finance Division/Department, but that is actually produced by concerned line ministries, as it is about THEIR spending. Finance only acts as the overall organiser and publisher. The GBS shows what the programs and budgets of these line ministries are doing in respect of promoting gender equality. It can also be seen as an accountability mechanism in which government reports on its work to advance the cause of gender equality.

A pilot provincial GBS was developed by the Finance Department, Government of Punjab in 2006, which covered four to six programs each for the sectors of Education, Health and Population Welfare. In 2007, a Federal GBS was planned with inputs from the three concerned Ministries. In this respect, a one-day training workshop was organized by the project on 19th April 2007 to orientate the relevant officials of the three focal ministries on the concept and methods to prepare a GBS. External assistance was subsequently required for government officials in finalizing the GBS.

Based on the above process, it was agreed by participants, that a Gender Budget Statement for the Federal Level would be prepared after departments had completed the process of drawing up the budget and allocating resources to different programmes in response to the annual budget call circular. The sub-programmes were chosen on the basis of their relevant importance vis-à-vis gender equality and/or on the basis of sizeable resource allocations.

A Note on Selection of Financial Year

A Gender Budget Statement exercise is ultimately intended to be a regular annual report published on budget day. Therefore, it is meant to focus on the current year at hand and the coming year. A serious shortcoming of this exercise and subsequent published document, was that data available at the Federal level was sporadic and scattered, since the primary data bank was at the provincial level. The Federal level was simply the provider of funds and not responsible for collecting or maintaining monitoring data. Many projects actually had to calculate and consolidate data for this exercise manually through periodic reports received from their various provincial offices. Therefore, for them this was a tedious task. Data for 2005-2006 was already available to them since it was a year earlier. However, data for 2006-2007 (ending June 2007) was still not available to them at the time of compilation for this GBS (August to November 2007), since it had not yet filtered up to them from their provincial offices. Therefore, a decision was made to compile this Gender Budget Statement for 2005-2006 as the “current” year and 2006-2007 as the “future” year.

One of the important aims of this exercise is to encourage better and more timely data collection and reporting. Therefore, for the future, a Gender Budget Statement MUST be developed for the current year at hand, with targets estimated for the next financial year. If information is not yet readily available then one can give what **is** available. If one

does the GBS 'on time' (i.e. for tabling on budget day) one cannot have the full year's performance for the current budget year, as it is not yet finished. In that case, information can be put in for a nine-month period. Or, because of the province-federal gap, for the federal GBS it could be reduced to even a six month period.

Selection of Projects

Projects were selected on the basis of suggestions given by focal persons of all Ministries during a GRBI training workshop in April 2007 on Gender Budget Statements. The outcomes of that workshop were used as a basis for this and relevant projects corresponding to the areas identified by the workshop participants were then suggested by the focal persons met in each Ministry.

Data Collection Methodology

Individual project offices within the ministries were contacted to obtain the data required for compiling the Gender Budget Statements. Since this activity is for the Federal level projects, it has been a difficult task to access data, since the actual figures and performance indicators are housed at the provincial level. The Federal Ministries are only the funding agencies for these projects, while the actual implementers are the provinces. Therefore, data coming from provinces is collected monthly rather than yearly, so collating the data is an issue. Primary information on activities and annual budget allocations and some input and output indicators have been gleaned from PC-1s, while in all other cases, inputs and outputs have had to be identified individually and then their targets found for the specific years.

Therefore, if GBS is to become standard practice it should contribute to improving the monitoring that should be institutionalized at the federal level, rather than the provincial level.

Gender Budget Statement – Education

The following projects were identified for the purpose of compiling a Gender Budget Statement:

- Capacity Building of Teachers training Institutions of MoE and Training of Elementary School Teachers in FANA, FATA, ICT and AJK
- Presidents Education Sector Reforms – Provision of Missing Facilities

These projects were identified after a series of discussions with the Special Advisor, Education in the Planning and Projects Wing of the MoE. This special Wing of the MoE is responsible for the planning and coordination of all government and donor-funded Education projects, both Federal and Provincial. Since however, education is a provincial subject, there were few projects that were managed and funded at the Federal level. Most other projects were purely managed at the provincial level. Others, such as the two selected, were also fairly newly established and/or had experienced delays in start up.

However, both, especially the ESR – Provision of Missing Facilities project, were extremely relevant to gender concerns.

Gender Budget Statement – Health

The following projects were identified for the purpose of compiling a Gender Budget Statement:

- The National Programme for Family Planning and Population Welfare – Lady Health Workers Program
- Improvement of Nutrition through PHC/Public Health Awareness
- ADB Health Reproductive Health Project

The Health projects were selected with the assistance and guidance of MTBF consultants deputed in the Ministry of Health, since the focal persons identified by GRBI were no longer part of the Ministry. Most of the projects in the MoH were geared towards both men and women, but the projects selected were specifically targeted towards women. The Lady Health Workers Programme was national in its scope, while the Nutrition/PH Awareness programme, although recently completed, specifically targeted mothers in its strategy¹. Both these made very relevant cases for the purposes of compiling a Gender Budget Statement. The ADB Reproductive Health Project was one that had been suggested by participants of the April 2007 Gender Budget Statement training conducted by GRBI.

Gender Budget Statement – Population Welfare

The following projects were identified for the purpose of compiling a Gender Budget Statement:

- Communication Strategy (Population Welfare Programme)
- Non-Clinical Training (Population Welfare Programme)
- Clinical Training (Population Welfare Programme)
- Population Welfare Services, Islamabad Capital Territory (Population Welfare Programme)

These projects were all components of the overall Population Welfare Programme, Approved PC-1 Federal Activity 2003-2008. These specific components were selected with the help of the Director, Financial and Technical, MoPW, who was also the focal person for GRBI and who had also attended Gender Budget Statement workshop. Since all projects in this Ministry are targeted towards either women, couples and/or families, the selection amounted to those components which had been identified by participants of the April 2007 training, i.e awareness-raising, service delivery and capacity building.

¹ A GBS is ideally NOT supposed to cover projects that have been completed, rather one that has a budget for the coming year. However, since this was a project that had been pointed out by the Ministry of Health focal persons at the April 2007 workshop, it was included for the purposes of this task.

GENDER BUDGET STATEMENT – EDUCATION

1. Programme

Presidents Education Sector Reform Programme

2. Sub-Programme

Provision of Missing Facilities

3. Gender Issues

The majority of public schools in the country lack physical facilities such as drinking water, electricity, furniture, latrines and in some cases, even buildings. While this is the case for both girls and boys schools, girls suffer more especially due to lack of latrines, as they unlike boys, have nowhere to go. This applies to female school teachers as well. The lack of boundary walls also impact on girls, especially in conservative areas. Therefore, providing such physical facilities is one of the most vital inputs in improving access for girls.

4. Planned Activities

- Construction of additional classrooms
- Provision of clean drinking water and electricity, where available
- Boundary walls for girls schools only
- One computer lab for every girls middle school
- Construction of toilets

5. Budgetary Allocations

FY 2005-2006: Rs. 857.766 million

FY 2006-2007: Rs. 1,000 million

6. Inputs

Required Inputs Provision of 6 basic facilities in 1200 schools	FY 2006-2007 ²		Targets FY 2007-2008
	Target (Quantity)	Actual (June 07)	
Additional classrooms	1127	1127	Conduct survey of schools in 25 districts (Survey completed for finalization of schools where missing facilities are
Water supply	716	716	
Electricity	592	592	
Boundary Wall	378	378	
Toilets	1909	1090	

² The project actually began implementation in 2006, therefore, in this particular Gender Budget Statement, figures are available for 2006-2007 and onward targets for 2007-2008.

Computer Lab	182	182	to be provided as of November 2007)
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7. Outputs

Outputs	FY 2006-2007 ³		Targets FY 2007-2008
	Target (Quantity)	Actual (June 07)	
Completion of school survey	4702 schools	4702	2000 schools selected for execution
Schools selected for execution in 13 districts	1000	1000	
Fast track school	200	200	
Construction work begun	1200	690	

8. Overall Assessment

The project plans to cover 16,000 schools all over the country over a 5 year period. Since the project has only begun in 2006 (although allocations had been made in 2005), it is still too early to estimate its impact. However, out of a target of 1200 schools for the first year, approximately 80% have been covered. Specific targets such as computer labs, construction of toilets and classrooms etc. have been met by 100% completion rate.

* all information received from Project Office Islamabad, unless stated otherwise

³ See footnote on previous page

1. Programme:

N/A

2. Sub-Programme:

Capacity Building of Teachers Training Institutions of MoE and Training of Elementary School Teachers in ICT, FATA, FANA and AJ&K

3. Gender Issues

Teacher training is a mandatory element for quality education service delivery. There are several existing institutions around the country that are meant for teacher training, both men and women. However, they face an acute shortage of physical facilities, materials and training staff which automatically discourages more women than men, as it provides a hostile and unfavourable environment for women to work in. If given the appropriate financial and technical staff, these institutions can help create a trained cadre of men and women who will be able to further train school teachers and increase the standard of education service delivery for boys and girls.

4. Planned Activities

- In-service training of teachers and Head-teachers (male and female) of selected areas
- Scholarships to B.Ed students (male and female) and Diploma in Education
- Support of civil works at NISTE and FCE

5. Budgetary Allocations

FY 2005-2006: Rs. 134 million

FY 2006-2007: Rs. 100 million

6. Inputs

Required Inputs	FY 2005-2006 ⁴		Targets FY 2006-2007
	Target (Quantity)	Actual (June 06)	
Establishing Project Management Unit	-	-	Completed
Purchase of Furniture	-	-	6 Table and computer table sets
Purchase of equipment	-	-	10 PCs; 2 fax machines; 2 printers; 1 colour printer; 1 multi-media; 1 photocopier;

⁴ Figures unavailable as project began implementation in 2006

			1 scanner
Recruitment of staff	-	-	15 staff members recruited

7. Output

Outputs	FY 2005-2006		Targets FY 2006-2007
	Target (Quantity)	Actual (June 06)	
Training of teachers	-	-	4207 teachers and head-teachers (male and female)
Scholarships	-	-	700 scholarships to be awarded to men and women (100 B.Ed and 50 Diploma scholarships in each area government; 100+100 in ICT)
Civil works	-	-	5 Hostels to be renovated

8. Overall Assessment

It is too early to assess this project as it has only become operational at the Federal level this year. This was due to a late release of funds, however, the provinces/area governments began implementation a year earlier. The average number of male elementary school teachers in the project areas versus female elementary teachers is 19,273 male teachers to 13,886 female teachers. These are also traditionally conservative areas therefore a greater emphasis can be placed on female teachers and deserving students to equalize this ratio.

* all figures obtained from Project Office Islamabad, unless stated otherwise

Gender Budget Statement – Population Welfare

1. Programme

Population Welfare Programme

2. Sub-Programme

Communication Strategy

3. Gender Issue

The first step towards an understanding of any issue, comes from having the knowledge and awareness of the issue itself. Most programmes tend to ignore the fact that communication is a vital tool in being able to successfully impart any level of activity. In the case of population welfare, it is first important that both men and women know the benefits of these activities, before they can actually begin to accept it as a common practice. Women in particular, are virtually ignored when it comes to targeted communication regarding family planning and health services. Indeed, even those who are meant to impart such knowledge i.e family welfare workers or population personnel, are often unaware of the benefits and methods of population welfare practices. Therefore it is vital that communication techniques be incorporated into population welfare activities and be targeted towards both men and women.

4. Planned Activities

- Advertisement and publicity through TV /radio spots, press and print material
- Research and surveys (public opinion polls)
- Conducting awareness-raising seminars and conferences on vital population based issues
- Foreign study tours for cross-country experience sharing

5. Budgetary Allocations⁵

FY 2005-2006: Rs.70.973 million
FY 2006-2007: Rs.75.00 million

⁵ Amounts are as per approved PC-1

6. Inputs

Inputs	FY 2005-2006		Targets ⁶ FY 2006-2007
	Target ⁷	Actual ⁸ (June 06)	
TV Jingles/spots	600	1478	900
Radio Spots	600	955	900
Press Ads	200	419	500
Print Material	2,50,000	1,55,189	2,50,000
Seminars/Workshops/Conferences	3	5	3
Research and Surveys	1	-	-
Foreign Study Tours	1	-	-

7. Outputs

Outputs Inputs	FY 2005-2006 ⁹		Targets ¹⁰ FY 2006-2007
	Target	Actual	
Advocacy Seminar	80 participants	80 participants	100 participants
Road Shows	55 shows	55 shows	-
MoPW Monthly Newsletter "Abadinama:	3 issues	3 issues	3 issues
Provincial seminars of religious scholars	8 seminars	8 seminars	-

8. Overall Assessment

The MoPW's communication activities have been fairly visible through its TV spots and outdoor publicity campaigns. However a near accurate number of the population covered through these media campaigns is difficult to estimate since most of the activities are conducted nationwide and there is no monitoring mechanism available to record the number of viewers, readers etc.

⁶ Figures taken from approved Federal PC-1

⁷ Figures taken from approved Federal PC-1

⁸ Figures taken from Project Office, Islamabad

⁹ Figures taken from Population Yearbook 2005-2006

¹⁰ Figures taken from Population Yearbook 2006-2007

1. Programme

Population Welfare Programme

2. Sub-Programme

Non-Clinical Training

3. Gender Issue

Population welfare activities cannot be successful without proper capacity building and motivation of staff, since it is their responsibility to create levels of awareness to beneficiaries in addition to delivering services. Since women are the primary target beneficiaries of such activities both directly and indirectly, it is only logical that majority of the staff (mobilizers, welfare workers, LHWs etc) are also women. Training and sensitizing female staff towards population welfare practices and services, is therefore an extremely important precursor to implementing population welfare programmes.

4. Planned Activities

- Human resource development of field functionaries (programme and non-programme) of population welfare programme at the federal and provincial level.

5. Budgetary Allocations¹¹

FY 2005-2006: Rs. 69.431 million

FY 2006-2007: Rs. 75.958 million

6. Inputs

Required Inputs (Number of Persons Trained)	FY 2005-2006		Targets FY 2006-2007
	Target	Actual (June 06)	
Programme Personnel			
Pre-Service training	1050	616	1150
In-service training	900	1115	950
Non-programme Personnel			
Other departments	600	420	625
Private sector Organizations	550	459	600
Community based groups	1300	5315	1400

¹¹ Amounts are as per approved PC-1

7. Outputs

Outputs	FY 2005-2006 ¹²		Targets ¹³
	Target	Actual	FY 2006-2007
Population Welfare Training Institute (PWTI), Lahore			
Programme Personnel			
Pre-Service training	650	461	750
In-service training	499	527	566
Non-Programme Personnel			
Other departments	300	327	-
Private sector Organizations	250	246	-
Community based groups	3938	4528	7560
Population Welfare Training Institute (PWTI) Karachi			
Programme Personnel			
Pre-Service training	215	155	345
In-service training	775	587	410
Non-Programme Personnel			
Other departments	500	93	-
Private sector Organizations	562	213	-
Community based groups	1814	787	4891

8. Overall Assessment

Non-clinical training component has been focusing on its targeted activities. Particular focus has been on orienting female religious scholars as well as local government representatives. This is a very important target group for such activities, particularly the latter who has a large target audience base among women and can be very influential in spreading an appropriate message to them. Figures show that numbers far exceed the targets set in terms of the number of participants attending the programs, which indicates the level of interest among various target groups of the issue.

* All figures obtained from Directorate of Non-Clinical training, Ministry of Population Welfare, Islamabad

¹² Gender dis-aggregated data unavailable

¹³ Gender dis-aggregated data not available

1. Programme

Population Welfare Programme

2. Sub-Programme

Clinical Training

3. Gender Issue

In the same way that human resource development is a vital need for trained personnel, technical or in the case of population welfare, clinical training is also just as important. The use and application of various forms of contraceptives and the pros and cons on reproductive health for men and women, both require medically trained personnel. Women in particular, who form the bulk of population welfare staff, therefore need to be skilled enough to manage these services.

4. Planned Activities

- To develop and impart career development courses for programme personnel such as Assistant Sister Tutors, FTOs, FWCs and Master Trainers.
- To impart HRD programmes for programme and non-programme staff, including for support organizations

5. Budgetary Allocations¹⁴

FY 2005-2006: Rs. 98.575 million
FY 2006-2007: Rs. 107.043 million

6. Inputs¹⁵

Required Inputs (No. of Persons Trained)	FY 2005-2006		Targets ¹⁶ FY 2006-2007
	Target ¹⁷	Actual ¹⁸ (June 06)	
Basic Training Courses	315	277	350
Advanced Training Courses	35	59	35
Pre-Service Training	25-35	47	25-35
Refresher Training Courses	500	544	500
Training for Non-programme personnel	1200	4098	1500

¹⁴ Amounts are as per approved PC-1

¹⁵ Gender dis-aggregated data not available

¹⁶ PC-1 Federal Activity 2003-2008; pp68-69

¹⁷ PC-1 Federal Activity 2003-2008; pp68-69

¹⁸ Figures taken from Population Yearbook 2005-2006; p14

7. Outputs¹⁹

Outputs	FY 2005-2006 ²⁰		Targets ²¹ FY 2006-2007
	Target	Actual	
Basic Training Course of FFWs (24 months)	315	277	350
Advance Training for FWCs, FTOs, ASTs (3,4,5 months)	35	59	35
Pre-service training of Female FWAs (3 weeks)	35	47	35
Refresher Training of Paramedics (1 and 2 weeks)	500	544	500
Orientation of Non-programme personnel on FP/RH (1-2 days)	2100	4098	2100

8. Overall Assessment

The clinical training component has achieved most of its targets set for the duration of the 5 year programme. In fact, in most cases, it has overshoot its set targets. Since this is a primarily staff-related component, it is not difficult to complete the numbers. Since the emphasis is on female welfare attendants, majority of those targeted are women themselves.

¹⁹ Gender dis-aggregated data not available

²⁰ Information Obtained from Population Yearbook 2005-2006; p14

²¹ Figures obtained from Ministry of Population Welfare, Islamabad

1. Programme

Population Welfare Programme

2. Sub-Programme

Population Welfare Services, ICT

3. Gender Issue

One of the key service delivery tools of population welfare, is the use and practice of contraceptives among men and women. The provision of contraceptives is not simply a matter of providing contraceptive medication. Rather it is also access to services such as counseling, which can help particularly women in better being able to understand the need for and use of contraceptives. Women already have great difficulties in accepting the fact that they have a right to family planning services and that the use of contraceptive is not harmful to them. Men also play a large role in keeping women ignorant of these practices to further their power relationships in society. It is an added burden then that they also do not have appropriately targeted facilities that can provide them with both the advice and the medication that they need. In fact, many reproductive health services also target men which is essential to create overall awareness among the community as a whole.

4. Planned Activities

- Setting up population service centres within the Islamabad Capital Territory
- Provision of reproductive health facilities
- Provision of contraceptives through FWCs, and Mobile Service Units
- Increasing the numbers of current contraceptive users through the recruitment of male mobilizers

5. Budgetary Allocations²²

FY 2005-2006: Rs. 30.557 million

FY 2006-2007: Rs. 31.955 million

6. Inputs

Required Inputs	FY 2005-2006		Targets ²³ FY 2006-2007 N/A
	Target	Actual (June 06)	
Reproductive Health Service "A" Centres	3	3	

²² Amounts are as per approved PC-1

²³ This project no longer uses physical targets to monitor progress. It instead has a list of performance indicators that it uses for monitoring performance.

Vasectomy Centre	1	-	
Mobile Service Units	1	1	
Family Welfare Centres	27	27	
Male Mobilizers	32	23	

7. Outputs

Outputs Inputs	FY 2005-2006		Targets ²⁴ FY 2006-2007 N/A
	Target	Actual	
Condoms	555,000	411,974	
Oral Pills	24,000	18,077	
Copper-T	7,500	7,281	
Injectable	12,000	15,840	
Users	19,896	17,982	

8. Overall Assessment

The project has managed to achieve a sizeable proportion of its targets since inception in 2003. Although its targets have not been very ambitious in terms of size, the area that it is servicing (Islamabad Capital Territory), is primarily urban and educated, hence there has been a greater level of awareness among users of contraception. The highest form of contraception in this area has been of condom use, followed by oral pills. However the percentage use of injectables is the highest in terms of achievement (132% usage), followed by Copper-T (97% achievement rate).

²⁴ Ibid.

GENDER BUDGET STATEMENT – HEALTH

1. Programme

National Programme for Family Planning and Primary Health Care

2. Sub-Programme

Lady Health Workers Programme 2003-2008

3. Gender Issue

Providing primary and basic health facilities to women at their doorstep is the first step to ensure access to curative and preventive healthcare to women, especially those in remote and rural areas. Services at the doorstep are also necessary for many women because of the restrictions on their moving beyond their homes. Many such women lose their lives or suffer from chronic health problems, simply because there are no health facilities available nearby. The Lady Health Worker is therefore, the most essential player in allowing poor women and children, access to equitable healthcare without having to travel to far-flung urban centres.

4. Planned Activities

- Selection, training and deployment of 100,000 LHWs throughout the country

5. Budgetary Allocations²⁵

FY 2005-2006: Rs. 3,862.981 million

FY 2006-2007: Rs. 4,945.734 million

6. Inputs

Required Inputs	FY 2005-2006 ²⁶		Targets ²⁷ FY 2006-2007
	Target	Actual (June 06)	
Drug items procured	47,473,388 units	47,473,388 units	27,521,905 units
Non-drug items procured	321,012 units	321,012 units	167,687 units
Vehicles for Supervisors	1,265 vehicles	1,265 vehicles	Nil

²⁵ Lady Health Workers Programme, Project office, Islamabad

²⁶ Demand of Drugs/Medicines and Non-Drug Items for National Programme for FP and PHC for the Year 2005-06.

²⁷ Cumulative Requirement of Drugs/Medicines and Non-Drug Items for Year 2006-2007 (NP). National Programme for FP and PHC

7. Outputs²⁸

Outputs	FY 2005-2006		Targets FY 2006-2007 ²⁹
	Target	Actual	
Refresher Trainings – Child Health			
Trainers	15,250 men and women	15,220 men and women trained	-
LHWs	86,000 women	84,325 women trained	-
Refresher Trainings – Counseling Cards			
Trainers	10,800 men and women	10,780 men and women trained	-
LHWs	86,000 women	84,260 men and women trained	-
Basic Training			
LHWs	4,890 women	4,845 women trained	-
LHSs	85 women	80 women trained	-
Refresher Training Revised Manual			
District Master Trainers	536 men and women	520 men and women trained	-
LHS	2,380 women	2,340 women trained	-

8. Overall Assessment

The programme is a major contribution in terms of enabling women to pursue employment opportunities, given the ambitious target of employing 100,000 LHWs and 4,000 Supervisors across the country. Through this cadre, approximately 60% of the total population and 80% of the target population (of women and children) is being covered to date.

²⁸ Figures obtained from Project Office, Islamabad

²⁹ Targets unavailable at time of compilation

1. Programme

ADB/GoP Reproductive Health Project

2. Sub-Programme

Reproductive Health Project

3. Gender Issues

Women's reproductive health is one of the most important component of women's health issues. Several women are unaware of the provisions available for them to support their reproductive activities, including safe motherhood and contraception. Access to and awareness of these services, is the key element in developing a strong base for reproductive health activities for women, as well as improving the numbers of contraceptive prevalence rate, maternal mortality and infant mortality indicators, among others.

4. Planned Activities

- Recruitment and Training of LHWs to support the National Programme for Primary Health and PHC – LHW component

5. Budgetary Allocations

FY 2005-2006: Rs. 165 million
FY 2006-2007: Rs. 188.727 million

6. Inputs

Required Inputs	FY 2005-2006		Targets FY 2006-2007
	Target (Quantity)	Actual (June 06)	
Recruitment of Administrative and other staff	4		4
Recruitment of LHWs	289	289	-
Recruitment of LHSs	55	25	30
Recruitment of Drivers	87	27	133
Procurement of Medicine *	19	19	19
Procurement of Vehicles	68	68	73
Computer Hardware	4	4	4
Equipment	6	6	4
Furniture and Fixtures	10	10	15

* Number of drug and non-drug items

7. Outputs³⁰

Outputs	FY 2005-2006		Targets FY 2006-2007
	Target (Quantity)	Actual (June 06)	
TOT Workshop on Injectable Contraceptives			
<ul style="list-style-type: none"> No of work shops conducted 	2	2	Not planned
<ul style="list-style-type: none"> No of personnel trained 	45	43 Male: 34 Female: 09	

8. Overall Assessment

This programme is a component of the overall ADB/GoP project and primarily supports the National Programme in 3 major areas; payment of stipends and salaries for LHWs, procurement of vehicles and drugs and non-drug items. In accordance with the LHW-MIS there has been an appreciable improvement in targeted indicators along with capacity building for RH in terms of recruitments and procurements under taken through RHP. The following improvements have been recorded:

- Increase in CPR from 11% in 1994 to 38% in 2007
- Increased awareness in RH target groups (women and children)
- Capacity building of doctors, LHWs and LHSs regarding contraceptives use

However the impact and utilization status were considerably influenced (adversely) by the complexity of involvement of six executing agencies in ADB funded RHP including disparities between PC1s and Loan Agreements.

* all information received from RPH Project Office, Islamabad

³⁰ The outputs for this project were primarily aimed at recruitment and training, rather than service delivery. This was the responsibility of the larger National Programme for Family Planning and PHC.

1. Programme:

N/A

2. Sub- Programme:

Improvement of Nutrition through PHC/Public Health Awareness

3. Gender Issues

Most women are aware of their own nutritional needs and those of their children but are unable to provide for them due to lack of financial resources or access to proper nutritional sources. As a result, many women and children suffer from malnutrition that leads to many disorders and also creates problems in reproductive health. Therefore, meeting the nutritional requirements of women and children in particular is extremely important, as is making them aware of what is required, so that mothers are able to meet these needs within their own households to the best of their abilities.

4. Planned Activities³¹

- provision of child and maternal health care; promotion of breast feeding;
- prevention of night blindness, iron deficiency anemia, as well as iodine deficiency disease through media awareness and training and distribution of supplements.

5. Budgetary Allocations

FY 2005-06: Rs. 73 million
FY 2006-07 Rs. 76 million

6. Inputs

Required Inputs	FY 2005-06				Targets FY 2006-07
	Target (Quantity)		Actual (June 06)		
IEC Component	TV Spots	1074	TV Spots	1247	TV Spots 780
	CCTV Spots	40235	CCTV Spots	50345	CCTV spots
	Radio spots	1340	Radio spots	1450	28000
	Cinema	214	Cinema	214	Radio Spots 1200 Press Ads 250

³¹ Ministry of Health Yearbook, 2005-2006; p6

Micronutrient Procurement	<p>For 80000 TB Patients</p> <p>Procurement of Iron tablets 3.15 Million Capsule Distributed through 70,000 LHWs</p> <p>Procurement of Micronutrients TB Patients 9738505 Tablets of Glit"Vit for TB Patients</p>	<p>For 80000 TB Patients</p> <p>Procurement of Iron tablets 3.15 Million Capsule Distributed through 70,000 LHWs</p> <p>Procurement of Micronutrients TB Patients 9738505 Tablets of Glit"Vit for TB Patients</p>	-
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7. Outputs

Outputs	FY 2005-06		Targets FY 2006-07
	Target (Quantity)	Actual (June 06)	
PHC Component Training	<p>1. Training of LHWs 70,000 on Nutrition</p> <p>2. CD Cynergy Training 7 Cd Cynergy (230 participants Trained)</p> <p>3. Lactation Management Training 150 participants Trained</p>	<p>1. Training of LHWs 70,000 on Nutrition</p> <p>2. CD Cynergy Training 7 Cd Cynergy (250 participants Trained)</p> <p>3. Lactation Management Training 150 participants Trained</p>	<p>Ghiza aur Sehat Training</p> <p>250 participants T trained</p>
Research Component	<p>Research Studies on data relating to common knowledge, attitudes and practices regarding Nutritional issues</p>	<p>Research Studies on data relating to common knowledge, attitudes and practices regarding Nutritional issues</p>	-

8. Overall Assessment³²

This project has just recently been completed and is in the stages of developing a new PC- 1. The project has seen the following as some of its achievements in its duration:

- The National Plan of action on Micronutrient Control has been launched and approved by the Ministry of Health.
- Iron Wheat Flour Fortification - GAIN Project implementation Unit started in Nutrition Wing, Ministry of Health.
- PC-1 on Nutrition for the 2006 -2010 prepared and submitted to the Ministry of Health for the approval.
- The National TB Control Programme, Ministry of Health required micronutrient supplementation for the TB patients. Purchase of drugs & medicine for the 40,000 T.B patients (combination two micronutrient i.e. Tab Supradyn and Stress Tab 600 (a combination of B-Complex, Zinc, Vitamin C, Folic Acid) that can delay absorption of over dosage and toxic effects of isoniazid, was procured .

* all information received from Project Office Islamabad, unless stated otherwise

³² Ibid. p27