

PROVISION OF
REPRODUCTIVE HEALTH SERVICES
THROUGH SOCIAL MARKETING
SUCCESS STORIES FROM THE FIELD



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SUCCESS STORIES

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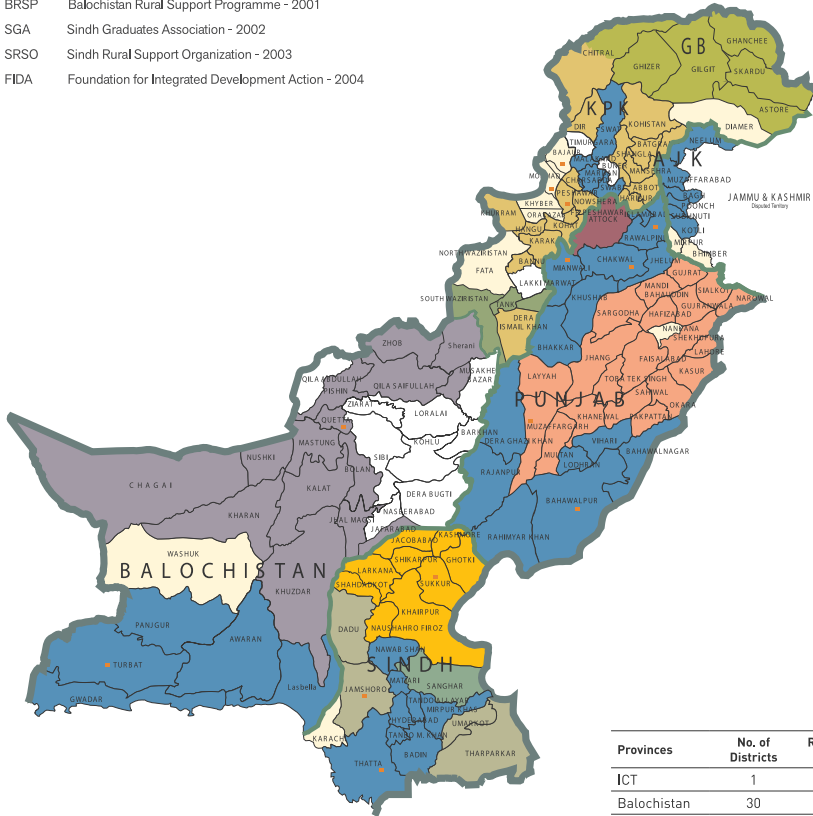
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June 2016

The Outreach of the Rural Support Programmes Across Pakistan

- AKRSP Aga Khan Rural Support Programme - 1982
- SRSP Sarhad Rural Support Programme - 1989
- NRSP National Rural Support Programme - 1992
- IRM Institute of Rural Management - 1993
- GBTI Ghazi Barotha Taraqiati Idara - 1995
- TRDP Thardeep Rural Development Programme - 1997
- PRSP Punjab Rural Support Programme - 1998
- BRSP Balochistan Rural Support Programme - 2001
- SGA Sindh Graduates Association - 2002
- SRSO Sindh Rural Support Organization - 2003
- FIDA Foundation for Integrated Development Action - 2004



Provinces	No. of Districts	RSP's presence in Districts
ICT	1	1
Balochistan	30	22
KPK	24	23
Sindh	23	22
Punjab	36	36
AJK	10	10
GB	7	6
FATA/FRs	13	5
Total	144	125

RSPs are present in 125 districts including 5 FATA/FR Agencies.



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PREFACE

The Rural Support Programmes Network (RSPN) likes to extend its deepest appreciation to all those who provided the possibility to document these case studies. We acknowledge with much appreciation the crucial role of project staff of “Provision of Reproductive Health Services through Social Marketing” to identify these stories from the field. It is through their hard work and dedication that the intervention of the project is visible on the ground and recorded in this document. Also, we extend our gratitude to the higher management, CEOs, and Focal Persons of National Rural Support Programme (NRSP) and Punjab Rural Support programme (PRSP) for their support to the field team.

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Rural Support Programmes Network
Islamabad, Pakistan

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ABBREVIATIONS

AIOU	Allama Iqbal Open University
AJK	Azad Jammu and Kashmir
ANC	Antenatal Care
BHU	Basic Health Unit
BiB	Business in Box
CHW	Community Health Worker
COs	Community Organizations
CRP	Community Resource Person
DHN	District Health Network
DPO	District Project Officer
DTC	District Technical Committee
EDO	Executive Director Officer
FP	Family Planning
GB	Gilgit Baltistan
GSM	Greenstar Social Marketing
IUCD	Intrauterine Contraceptive Device
KM	Kilometer
LHV	Lady Health Visitor
LHW	Lady Health Worker
LSO	Local Support Organization
MNCH	Maternal, Newborn and Child Health
MWRA	Married Women of Reproductive Age
NRSP	National Rural Support Programme
ORS	Oral Rehydration Solution
PRHSSM	Provision of Reproductive Health Services through Social Marketing
PRSP	Punjab Rural Support Programme
PSI	Population Services International
RSPN	Rural Support Programmes Network
RSPs	Rural Support Programmes
SO	Social Organizer
UC	Union Council
UCHC	Union Council Health Committee
VHC	Village Health Committee
VO	Village Organizations
WHO	World Health Organization

ABOUT RSPN AND THE RSPs

The Rural Support Programmes Network is the largest development network of Pakistan, with an outreach to over 40 million rural Pakistanis across 125 districts of Pakistan's five provinces, AJK as well as five FATA areas. It consists of 11 member RSPs that espouse a common approach to rural development: social mobilization. RSPN is the strategic platform for the RSPs with expertise in policy advocacy, grant management, networking, monitoring and evaluation, gender mainstreaming, renewable energy and social sector (health, education, and sanitation) programming and implementation.

The RSPN and the RSPs have adopted a three-tiered approach to social mobilization. At the first tier, rural households are organized into community organizations (COs) at the neighborhood level. At the second tier, the COs are federated at the village level into Village Organizations (VOs). At the third tier, VOs federated at the Union Council (UC) level to form a Local Support Organization (LSO). As of May 2016, the RSPs have presence in 3,710 rural Union Council of Pakistan and have mobilized over 6.03 million households (an estimated population of about 42 million) into 379,285 COs of which 48 percent are women COs. A total of 1,235 LSOs at the union council level have been fostered with some LSOs forming networks at the tehsil and district level.



ABOUT PSI

Population Services International is a global health organization founded in 1970 dedicated to improving the health of people in the developing countries by addressing the main issues like family planning, HIV/AIDs, barriers to maternal health, and malaria, diarrhea, pneumonia, malnutrition in children under five.

A hallmark of PSI is a commitment to the principle that health services and products are most effective when they are accompanied by robust communication and distribution efforts that help ensure wide acceptance and proper use. PSI works in partnership with local governments, ministries of health and local organizations to create health solutions that are built to last.



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ABOUT THE PROJECT

RSPN entered into a partnership with PSI to provide reproductive health services to communities through social marketing in three districts of Punjab province i.e. Bahawalpur, Jhang and Rahim Yar Khan. Under this partnership 55 union councils are covered through NRSP and PRSP. The purpose of the project is to improve the quality of life of women and children in the selected districts by creating new users of family planning methods with the help of District Technical Committee (DTC) chaired by the Health Department. The overall objectives of the project are:

- Improved enabling environment for women, girls, and men to avail healthy reproductive choices.
- Increased availability of quality reproductive health products and services in rural areas.
- Strengthened accountability at all levels with increased transparency and innovative approaches.

To achieve the said objectives, RSPN is implementing proven model of social mobilization through CRPs with population of 900,000 non-LHWs (Lady Health Workers) covered areas. CRPs are activists who are selected from within the community in consultation with the community as per agreed criteria to work in non LHWs covered areas. They undergo intensive six days training on health issues and community mobilization and referral process followed by regular supportive supervision by Social Organizers. CRPs conduct the community mobilization activities through support group meetings and household visits and refer the potential clients to nearby health facilities for MNCH services. Demand for birth spacing has created the demand for reproductive health products which is addressed through community outreach camps at the door steps of the community by involving community institutions i.e. Village Health Committee.



BUSINESS IN BOX (BiB)

To sustain family planning services, the pilot intervention of Business in Box (BiB) was introduced. In the project intervened areas, 450 women Community Resource Persons (out of total 600) were given BiB kits. Later, training on social micro entrepreneurship was organized for these CRPs. The training focused on building the knowledge of the CRPs on community needs for health related products; assess the market potential and marketing of the products during the household visits. These female CRPs were also acquainted with concepts of entrepreneurship so that by the end of project they can establish their microenterprise for continued supply of the health products in order to meet the needs of community. To start the BiB, each female CRP was provided a BiB kit with commodities worth Rs. 3000. Products that were marketed in the community through CRPs included short-term contraceptives (condoms and pills) and other health and hygiene commodities (folic acid, iodized salt, sanitary napkins, iron, zinc, vitamin A, shampoo, toothpaste, pregnancy strips) and over the counter medicines (Panadol, Ponstan, Oral Rehydration Solution (ORS)). As per the need of the community, other products of community interest were also included in this list. The objective behind this initiative was to ensure post project sustainability. BiB was to ensure that beyond project life, the CRP continues to make household visits for referral of the new potential clients to public sector clinics as well as continues to supply short term contraceptive methods (condoms and pills) to those clients who have initially taken these methods from LHVs. Furthermore BiB was also to become an income generating means for the CRP that would serve as an incentive to keep working on reproductive health.

“BiB helped me in making my own way”

Sharifa Bibi resides in Basti Mochiyani in union council Mari Sheikh Shujra of district Bahawalpur. She is 23 years of age, unmarried and is currently teaching and doing her BA in Education, Sociology and Computers from Allama Iqbal Open University (AIU), Bahawalpur campus. Sharifa's neighborhood is very isolated from other settlements. The nearest medical centre and marketplace is at a distance of 20 kilometers. Before the project, there was no LHW, hence there was little awareness about RH and demand for acquiring reproductive health services. Under the PSI/RSPN PRHSSM project, the VHC nominated Sharifa as a CRP of the settlement.



Figure 1: Sharifa Bibi at her shop

Sharifa's work brought a huge change in the village, as many couples were completely unaware of family planning methods, which became readily available through Sharifa and through the project LHWs' mobile camp. Amongst approximately 120 MWRAs, 57 new users of contraceptive methods were created due to Sharifa's efforts. Sharifa was given a monthly honorarium for her efforts, which she would invest in her education. In order to ensure that she remains financially secure through her work even after the project ends, she was given a BiB kit.

Sharifa started reinvesting her profit in female accessories and cosmetics such as bangles, beauty creams, jewelry etc. Due to her outstanding performance and her willingness to work as a micro entrepreneur, she was able to expand her BiB into a small store within the school she works at. Her monthly average profit is Rs 3000, of which she invests in her own household expenses and education. She also purchased a refrigerator with her accumulated profits from BiB.

Sharifa's clients are very happy with her work; they say that BiB is very useful as there are no nearby stores to buy these items from. Before BiB, women used to travel for an hour to the nearest market. "Before it would cost me Rs. 40 to go to the market, now I can just drop by Sharifa's store and buy the things I need. Also I feel more comfortable buying female items like sanitary pads and undergarments from Sharifa than from a male shopkeeper," says one of the clients. Sharifa sells her items slightly above market price but the women are satisfied with her prices, as they know it is more expensive to go to the market. They want Sharifa to expand her business and include more items such as fizzy drinks, biscuits etc.



Figure 2: Sharifa Bibi selling products to the women

Sharifa is also very pleased with her work, as it has empowered her financially and socially. She has become financially independent and wants to continue working for the benefit of her community. "BiB helped me in making my own way, I can now finance my own education and expenses, I don't need to depend on anyone and most of all I am doing something for the benefit of the people which is my biggest motivation," says Sharifa. Sharifa has also become a popular figure amongst the women in her village. She has encouraged her clients to start a committee for rainy days. The committee value goes up to Rs. 5000 sometimes and is saved by community women. Sharifa is very grateful to VHC and the project for giving her this opportunity that has changed her life.

Khadija: A BiB entrepreneur

Khadija Bibi, aged 30, lives in basti Pohnra in union council Jalalabad of district Bahawalpur. Basti Pohnra is situated some 30 kilometers away from Bahawalpur city. Khadija was selected as a CRP in the PSI-RSPN PRHSSM project. After seeing her dedication and her interest in micro social entrepreneurship, she was also given BiB kit. Khadija took keen interest in selling items from BiB to community members at their door step and reinvested her money from the profits she earned each month. Gradually she managed to open her own shop at her home.

She introduces new items in her shop and gets a good profit out of it. During Eid season, she bought mehndi, bangles, cosmetics and jewelry and earned more than Rs. 4000. She states, "I buy those items which are in high demand. This is how I easily cater to the demand of the members and earn good amount in return. During Eid season, my shop remained opened till 12 o'clock at night as women kept coming and buying goods."

One of her customers mentions, "It is difficult for us to go to the city and buy women accessories such as make up, bangles, etc. We have to be dependent on our male members to take us to the city for stuff like this. With Khadija's shop, we can easily get everything any time and it saves us the traveling cost as well. Whenever we need anything which is not available in Khadija's shop, we ask her to include that item in her shop in future and Khadija does so. We are very happy with her shop and wishes that she continues to provide us such items with this ease."

Before the intervention of BiB, Khadija had never worked outside of her home. BiB was her first opportunity to earn and become financially independent. Khadija is very happy with her business and claims to continue working as an entrepreneur in her area. Due to intervention of the project and the BiB initiative, Khadija found a way to earn for herself. She spends the money earned by BiB on her children and her home. Her customers are also very happy with her business and say that it is due to her strong dedication she was able to open a shop in her area. This shop does not only benefit Khadija but also her family, children and the community women.



Figure 3: Khadija Bibi selling bangles to a woman

Age is no barrier for Allah Wasai...!

Seventy years old Allah Wasai is a resident of basti Goth Raza in union council Tibi Izzat of district Bahawalpur. Life has never been easy for her. Not having a baby made her husband to marry again and live with his second wife. Distressed Allah Wasai adopted her niece to live her life with.

As soon as she heard about RSPN's PSI funded PRHSSM project and opening up of recruitment for CRPs, she approached the project selection team to join the project as a CRP. But the team was skeptical to recruit Allah Wasai sighting her old age. She however expressed her strong willingness and commitment to work for her area through the project activities. After holding community dialogue, she was selected as a CRP. With her continued dedication, honesty and hard work, she was given BiB kit in the second phase of the project. Allah Wasai received training and started selling BiB items during household visits. She used to hire a motorcyclist of her area for Rs. 50 to 100 to conduct household visits as she could not commute on foot all day long. Allah Wasai reinvested her monthly income into BiB and expanded her business. On community's demand she also managed to open a small shop in her home. One of her customers says, "We previously had no such shop in our basti to buy the products Allah Wasai now provides us. Now we conveniently purchase women specific products and household items from Allah Wasai."

BiB is her only source of income. She now makes Rs. 1000 – 2000 per month out of BiB that helps her bear her living cost. Allah Wasai also used her BiB savings for the treatment of her niece who contracted a disease and got sick. Allah Wasai recalls, "Only because of BiB intervention, I could manage to spend Rs. 5000 on my niece. I am thankful to NRSP and RSPN who trained me and enabled me to work and earn even in this age."

Allah Wasai is passionate to continue expanding her small business to a larger scale. Her niece, now cured of her disease, also supports her in her business. Allah Wasai believes that this work should pass on from generation to generation so that this area could benefit from the reproductive health services introduced in the project. "Allah Wasai is a respectable member of our catchment area. Due to her old age, people do not only respect her but also listen to the message she spreads in the community," says the President of VHC.



Figure 4: Allah Wasai with her BiB items

“BiB has given me a purpose”

Sadia Bibi, aged 25, is a resident of basti Chak 22DNB of union council Chak 22DNB, district Bahawalpur. Sadia's husband is a policeman who earns just enough to bear the family expenses. She has been a housewife and never stepped out of her house to work for income generation. The VHC fostered under the PSI/RSPN PRHSSM project, had nominated Sadia as the CRP. Amongst approximately 140 MWRA's in her area, 32 new users of contraceptive methods were created due to Sadia's efforts.

In the second phase of the project, Sadia was given the BiB kit. Each month, she earned a small amount of profit. Instead of consuming her profit, she re-invested the profit and expanded her BiB. She brought innovation in her BiB by including items of popular demand such as mehndi (henna), fairness creams, and medicines such as Flagyl and Buscopan. She would purchase these items from the market with the help of her brother or husband. As a result, she started earning a profit of Rs. 600-700 per month. The women of her neighborhood are satisfied with the functioning of BiB in the area as they are more comfortable in purchasing items from Sadia than going into the shops nearby.

According to Sadia, “The profit motivates me to keep working and developing my business. I have realized that I have something of my own which is a great feeling to have. It has given me a purpose in life, before becoming a CRP and having BiB, I had nothing to do. BiB has also really helped the women of the village, now they have an easy access to these products and they don't need to go into town. The women realize that it will cost them more to go into the market and buy them; therefore they prefer buying from me, especially when it comes to buying RH services and sanitary napkins, as they are more comfortable in having them delivered by a woman to their home.” The VHC is also happy with Sadia's work, as it has made life easier for the villagers. One of the VHC members said, “It is much better for the women as before they had to wait for their husbands to take time to visit the market, now they can just buy necessities from Sadia at their own homes.”

Given the importance of her role as CRP and BiB vendor, Sadia is confident that she will continue her work after the completion of the project. She is very satisfied with the project and is grateful to community for selecting her as CRP and to the project for supporting her with BiB.



Figure 5: Sadia Bibi displaying her BiB commodities

“I don't need to rely on others as I have my own business now”

Asma Noureen, married, age 24, resides with her husband in basti Baloucha in union council Chak 22DNB, district Bahawalpur. Chak 22DNB has approximately a population of 32,000 located at 85-88 kilometer distance north of district headquarter Bahawalpur. The basti is characterized by poverty and lack of basic health facilities. The nearest health facility is 14-15 km away. The villagers had no way of accessing reproductive health services. Due to a conservative value system in the village, the women were not allowed to step out of the house. Reproductive health services were made accessible in the village by PRHSSM project.



Figure 6: Asma Noureen with her BiB items

Asthma was selected as a CRP in her village. She was a tailor before she started working as CRP. The VHC convinced her family to allow her to work on this cause. It was very difficult as when she was selected, she was unmarried and reproductive health was a controversial topic for unmarried women to work on. Due to the efforts of the project and VHC, the topic of reproductive health was desensitized which made it easier for Asma to carry out her CRP responsibilities. Amongst approximately 150 MWRAs, 30 new users of contraceptive methods were created due to Asma's efforts.

In order to ensure financial stability for Asma after the project ends, she was given a BiB. Asma took advantage of this opportunity and expanded her BiB by adding stitching items like threads, needles etc. As she was a tailor before, she already had experience in buying stitching items, which she incorporated in her BiB. The items were very popular, as women could not access them before. They had to wait for the male members in their households to take them to the market. “Now we don't need to leave our house to get these things. Sometimes we don't even have the money to afford a trip to the market but now we can just buy them from Asma who lives nearby. It has made our lives much easier,” says one of her clients.

Asthma is very happy with her work. Last month she made a profit of Rs. 500. “I am very glad that I took this opportunity. My profit has been gradually increasing since the last four months from Rs. 200 to Rs. 500 per month. It has given me direction in life and it has empowered me; I don't need to rely on others as I have my own micro business now. When I started working I was unmarried, I got married four months back. I told my husband and in-laws that this business would be a part of my life. Luckily they have been very supporting and encouraging me to expand my business.” Asma says that she will continue working with BiB and in that way she will also carry out her responsibilities as a CRP. She is grateful to community institution VHC, PSI, NRSP and RSPN for an opportunity that has pushed her in the right direction to be a successful young businesswoman. She said that VHC contributed a lot in making her a successful businesswoman.

BiB makes Kalsoom Hameed earn!

"I have three school going children. My husband is a labourer who earns Rs. 6000-8000 per month. My whole family was dependant on the only source of income earned by my husband. The provision of BiB kit in the project did not only make me to contribute in my financial expenses but also provided me an opportunity towards self sustainability," says Kalsoom Hameed (age 28), resident of basti Noor Ahmad Mohana, union council Miani of Bahawalpur district.

Under the PRHSSM project, Kalsoom was provided a BiB kit which contained short term modern contraceptive methods, items of everyday use, few grocery items and few basic medicines. Kalsoom sells these items to the community members at their door steps. The income generated from the sale is reinvested on the items of the kit by Kalsoom. In the project, CRPs are expected to use the profit for themselves and run the business from the sale money. But in the start, Kalsoom did not spend her profit and started re-investing it in order to earn more profit in future. Currently, she earns a profit of Rs. 600 on average from BiB items. Now, this amount is spent on her children's education. In addition to this, she had registered 270 married women of reproductive ages. As a result of her household visits and continuous mobilization, she generated 121 clients out of these and made them family planning users who received services from health camps organized by the project LHV's.

One of the community members says, "There is no health care facility in the village. We had to go ten kilometers away to avail any family planning services. Kalsoom is a very active member. She provides short term method of FP in our household. Other than that, we also purchase daily use items from her. With her services, we are very much pleased and wish her to continue serving people like this."



Figure 7: Kalsoom Hameed visiting a household for BiB sale

BiB empowered me financially and socially

Tasleem Bibi is a native of Basti Jalalabad which is located 40 km from Bahawalpur city and has a population of about 2,000. Tasleem Bibi has primary level education and was a housewife taking care of her seven children, who attend school. Her husband works as a gardener in a local government school with limited resources to manage the family. Tasleem Bibi lives with her family in their own small house in the village for the past four decades.

After the formation of the VHC, Tasleem Bibi was selected as a CRP under the PRHSSM project. Later, Tasleem Bibi received six days training of birth spacing methods and completed the registration of MWRAs in her assigned area. During the second phase of the project, Tasleem Bibi was again selected to cover two thousand population through BiB. She registered 290 MWRAs and managed to motivate 115 women through regular follow ups who adopted birth spacing methods, among whom 68 women adopted long term method. Her efforts resulted in converting 40% of MWRAs towards users in 30 months' time span due to her regular follow up visits and her good presentation skills observed in group meetings and VHC meetings.

With the support of VHC, so far more than 50 percent married women have adopted birth spacing methods in Basti Jalalabad. Tasleem Bibi says, "I belong to a poor family and my area is so backward that people do not give any importance to mother and child health issues. After getting the training, I realized the importance of birth spacing. I have now started my work as a mission to educate the women of my area about the importance of birth spacing. My husband encourages and supports me in my mission."

Tasleem Bibi visits the households to convey important health messages and to sell items from BiB. Her husband also supports her in visiting the households. With the support of VHC, Tasleem Bibi has restocked her BiB by repurchasing items as well as adding new items like cosmetics, jewelry and women related items as per local demand. Tasleem Bibi began to earn a net profit of Rs 600-700 per month from her social enterprise. Starting from BiB, and realizing that she could do more for her family, Tasleem Bibi got an idea of opening her own shop at home. For that, she saved some money and spent it to open a small shop. From this shop, she is now earning approximately Rs. 2000-3000 per month. Tasleem Bibi still regularly pays household visits with BiB and providing contraceptives to the clients. She is very hopeful now for her own family and for her community. "Now I have a small shop. My social and financial status is much improved. I fully intend to carry on the work of serving my community and meet their health needs as well as household consumption needs. Even when the project ends, I will carry on with my activities," says Tasleem Bibi.

"Tasleem Bibi has proved that we made the right choice by selecting her as CRP. She used to provide feedback to VHC about her work in community on regular basis and VHC shared their comments and suggestions to improve her work which she had adopted and managed to bring the change in the behavior of our community members for which we are very happy. This has brought a positive change in her living standard too."

One of the community beneficiaries says, "We are very happy with the working of Tasleem Bibi who provides different items at our doorstep. She supports us in terms of time saving and knowledge sharing."



Figure 8: Tasleem Bibi at her shop

Fulfilling the unmet needs

Sughra Mahboob, aged 35, is the resident of basti Mulani of union council Mari Sheikh Shajra at Bahawalpur district. At her early age, she got married to Muhammad Mahboob, who is a driver. They have four children: two girls and two boys. Before the intervention of the project, basti Mulani was deprived of basic facilities of health and family planning. Due to less awareness about the importance of reproductive health among people, many community members did not prioritize mother and child health. The minimum distance from basti Mulani to the main city is 30 kilometer hence community members did not have the opportunity to take care of their reproductive health as well.

In phase II of the project, Sughra was selected as a CRP through community dialogue. She was assigned the population of 1000 covering basti Chammar, Sham wala, Kalyar and Pull Waly Noranga. As one of her prime duties, she registered 150 married women of reproductive ages and very few of them were availing family planning methods. With her continuous mobilization efforts, she was successful to provide family planning methods to 99 women through outreach mobile camps. Seeing her dedication and efforts to convert non-users into users of family planning, VHC members also decided to pick her up for BiB intervention, thus she was provided the BiB kit.

Later, she started making household visits to MWRA with BiB kit. Initially she sold those items which were provided to her by the project and used her profit to repurchase more items. Through BiB she is not only providing short term contraceptive methods to 150MWRA but also selling other items at the doorstep of the community. Currently, she is earning an average profit of Rs. 1000 to 1500 per month through BiB. She is also getting an honorarium of Rs. 2000 per month from project. With this money, she sends her children to schools and pays their fee. She says, "My husband was a driver so there were many financial constraints in sending my children to school. Through this project, I learned not only about the importance of reproductive health but also the importance of education. Hence I decided to send my children to school from my earning."

"When PRHSSM project was not introduced in the area, community members were not sensitized about this issue. At the moment, more than 66% women are availing family planning methods through mobile camps which shows a huge demand by the community which was never catered before the intervention of the project," says the President of VHC.



Figure 9: Sughra Mahboob conducting household visit for BiB sale



Figure 10: Sughra selling RH products to a client

Creating own opportunities...

Rukhsana Bibi, 40 years old housewife with four daughters, is living in a small basti named Pathan of union council Mian Wali Shaikhan — a dwelling of 320 households located in the north of district Rahim Yar Khan. She was selected as a CRP in the project in 2015 with the approval of VHC. Initially, Rukhsana visited each household in her catchment area and registered 155 married women of reproductive ages. Now she sets up a health mobile camp every month and so far 81 MWRAAs have availed family planning services from her.

VHC Basti Pathan entails the catchment area of two CRPs. The members of VHC with mutual consent decided to engage the other CRP for BiB, thus Rukhsana was not given the BiB kit by the project. Nonetheless, she continued to perform her duties as a CRP.

Rukhsana sought inspiration from other CRPs in BiB and started saving her monthly honorarium to purchase items and start her own BiB activity. The nearest Sardargarh market from her area was at a distance of 60 kilometers. So she introduced those items in her BiB which were not easily available at local shops. She showed a strong motivation to run her own business from her home. She is now the only woman shopkeeper in her area with most of the women as her regular customers and earns a profit of Rs. 1,500 per month.

“When I was not given BiB, I was a bit dejected, but undismayed. I started learning from other CRPs and saved my honorarium. I learned the whole supply chain mechanism from the team and decided to start my own business. I have finally succeeded and created my own opportunity with the support of the project team. I am very thankful to Social Organizers of NRSP who always encouraged me. Without the project team's help, I would not have been able to think about establishing my own shop,” she remarks.



Figure 11 : Rukhsana Bibi opened a small shop at her home

“Now I can stand on my own feet”

Basti Chauk Bhugga in union council Ranjhay Khan, district Rahim Yar Khan is located at approximately eight kilometer from Sadiqabad town. It takes 30 minutes on bike for the villagers to avail health care facilities and basic amenities available in Sadiqabad, and approximately one hour via rickshaw that costs around Rs.100. Even though the public LHW visits the village but she does not cover the entire village. Before the start of the PRHSSM project there were a limited number of couples who availed reproductive health services. This was largely due to religious misconceptions about contraceptives as well as social and cultural values about having larger families. In most cases, the in-laws would pressurize the couple to have more children, disregarding any potential risks to the health of mother and child. “I had six children and I was not allowed to take contraceptives by my father-in-law, it was only after he passed away that I could convince my husband about adopting a contraceptive method,” says one of the villagers. The community more often looked down on birth spacing and therefore contraceptive use was discouraged.



Figur 12: Sadia Hameed with BiB products

After the initiations of PRHSSM project, Sadia was selected as a CRP. Sadia is 25 years old and unmarried. She carries out her CRP responsibilities with full zeal despite a physical deformity in her right foot. Amongst approximately 300 MWRAs, 89 new users of contraceptive methods were created due to Sadia's efforts.

As part of the project, Sadia was given the BiB kit. Sadia brought innovation in her BiB by adding items that were demanded by the women. Items like hair clips, jewelry, bangles, face creams and undergarments were demanded the most. Sadia also adopted a system of flexible payments, so if one client could not pay full price they were allowed to pay in installments. She also managed to make a small store in her house so the women can buy things whenever they want to and they do not have to wait for Sadia's monthly visit. Since they are all well acquainted with each other, the system works well. Her clients are very happy with her work. “Before Sadia we had to wait for one of the male members in the family to be free and take us to Sadiqabad which would be costly as well. Now all the things we need are available in the neighborhood. It is also easier to buy from Sadia as she is flexible in payments,” says one of Sadia's clients.

According to Sadia, she manages to earn average profit of Rs. 250-300 per month; in good months she earns up to Rs 700 profit. Good months are usually during wedding seasons, crop harvest seasons and Eid holidays. This is when the women invest in buying hair accessories, bangles, jewelry, makeup etc. The items that are sold on a regular basis are fairness cream, pampers, medicines and sanitary napkins. Sadia is very proud of her business and wants to continue expanding it. “I wanted to be independent and not rely on my parents. I have a foot deformity, which made it difficult for me to acquire an education, as I couldn't walk long distances and our school was an hour's walk away. I have always felt that I am burdening my parents but now I am financially independent. I may have a foot abnormality but I can definitely say that now I can stand on my own feet.”

The VHC is proud of Sadia's work. “Sadia has outdone herself, initially we had concerns as she has a foot problem but she proved us all wrong,” says one of the members. The VHC wants Sadia to continue working and will help her expand her BiB in the future. Sadia is grateful to her VHC and the project for giving her this opportunity. It has brought a huge change in her life and the lives of many women in her neighborhood.

Baiza becomes a change agent through BiB

Baiza Iftikhar is a resident of basti Kubra Arian, a village of 3000 population, in union council Mian Wali Qureshian of district Rahim Yar Khan. The village is located in the north of Rahim Yar Khan at a distance of 66 kilometer from district headquarter and lacks basic health facilities. Baiza, 28, is a graduate, married with one eight years old son. Her husband is a shopkeeper.

In 2015, NRSP intervened in this uncovered area to implement the project activities. To get the community's support, NRSP organized the community into a VHC which nominated Baiza as a CRP along with a male CRP Muhammad Sajjad.

Initially her family resisted her work but after understanding the importance of the positive impact of the project they not only permitted her but also supported her in project activities. She was assigned a population of 1,000 where she registered 145 MWRAs. She managed to motivate more than 59 women for adoption of birth spacing methods through her social mobilization skills. Considering her good work as a CRP, VHC nominated her for BiB.

Baiza was trained and equipped with different items under BiB. Initially it was very difficult for her to convince the women to adopt birth spacing methods especially in the patriarchal society, but through her commitment and social mobilization women gradually adopted birth spacing methods. Following her advice, women now visit city hospitals for medical treatment and delivery services. Baiza believes that women empowerment is compulsory to bring the economic prosperity in the area. VHC members are very satisfied that she is facilitating the community in provision of health services in their village.

During her household visits, she realized that there was a demand for other items as well so she invested money to purchase these items to increase her income. Baiza now earns around Rs. 1200 to 1500 per month through BiB. She is very confident and expects to scale up her business as her husband and family members are encouraging and supporting her in buying reproductive health commodities, contraceptives and other household items.

Moreover, Baiza has also established a tuition center to educate the children of her community. She voluntarily teaches the children of her area in the evening. She also has a stock of stationery items in her house to facilitate her students and their parents. Baiza is very happy that she is serving her community.

One of her students states, "We are very happy as we get one window services here. We get free tuition, purchase edible and stationery items from Baiza baji". Parents say that they are very lucky that Baiza is among them from where their children get free education and counseling on morality and good behavior.



Figure 13: Baiza selling items from BiB kit

Where there is a will, there is a way!

Budipur Machian village is located in union council Akramabad of district Rahim Yar khan. It has a population of approximately 2000 and is 12 kilometer away from Rahim Yar khan city. There are public school facilities however public health, adequate sanitation and water supply facilities do not exist in the village. There is no basic health unit in the area; the population of the village is severely deprived of basic health facilities. Literacy rate and education level is also very low. There is no awareness on reproductive health and birth spacing; the average number of children in a family is six.

Samina Parveen has been residing in Budipur Machian since the last two decades. She owns a small house in the village.

After completing her matriculation she immediately got married. She gave birth to three children: two boys and one girl. Unfortunately, her husband passed away four years ago leaving her in complete distress. At that time she was in great trouble as she had to manage the household expenses herself along with raising three children.

Project team visited her village and conducted a community meeting to introduce the participants to the PRHSSM project. The VHC nominated Samina and selected her as a CRP along with her family member Zahid Hussain as a male CRP. NRSP trained them on the project interventions and gave them the task to educate locals on reproductive health through group meetings and monthly household visits. Samina is now working with 150 MWRA's. Based on her efforts, 80 new users of contraceptive methods have been registered in the area. In response to her service to the community, she is paid an honorarium of Rs. 1000 per month.

She was later introduced to BiB approach. As she was already skilled for community mobilization and reproductive health issues, she easily incorporated social marketing in her capabilities and successfully sold the items from BiB. People also started demanding consumables beyond her BiB list i.e. toothpaste, brush, cough syrup and other kitchen items. She enhanced her business by adding the items highly demand, which enabled her to make a good profit. She states that in the first quarter, she earned Rs. 350 per month; in the second quarter it went up to Rs. 600 per month; in third quarter Rs. 800 per month and in the last quarter she earned Rs. 1100 per month. BiB enabled her to sustain her income, educate her children and provide for her family, while serving her community.

She believes that BiB is the right way to sustain the services in the community. She says, "The profit will function as the alternative of my honorarium and will enable me to continue working on educating the community on reproductive health. As it is a good cause, I will continue working on it throughout my life. I hope that by expanding my business I can earn more and fulfill the community needs to maximum level. I see my future bright and hope for the best for my children. I would say that this is the way to sustain the services and education level in the community beyond the project life." Samina is grateful to RSPN and NRSP for the project, as not only has it empowered her to sustain herself and her family, it has brought a positive change in the community.



Figure 14: Samina Parveen conducting household visit for BiB sale



Figure 16: Samina selling items to a community woman

Micro social enterprise: An initiative that changed Tasawar's Life

Tasawar Khanum, 30 years old from a Syed family, lives in Chak 08NP, union council Muhammad Pur Lamma located some 35km west of Rahim Yar Khan city. She is married since last 12 years and has no children. She and her husband are matriculates (completed 10 classes of high school). Her husband is a small farmer who earns on average about Rs 12,000 per month. Since Tasawar had no children, her husband married again some five years ago and was not very supportive to her. Tasawar Khanum is poor but eager to explore new possibilities to bring change in her life.



Figure 16: Tasawar Khanum with her BiB kit

In April 2013, Tasawar was selected as a CRP by the community in an open dialogue conducted by the project team in her village and her husband was selected as male CRP. Both the CRPs went through basic training conducted by the NRSP district team. The training enhanced the knowledge, communication and interpersonal skills of CRPs. Tasawar Khanum then started her work in the assigned area by registering 182 married couples from the target community and organized group meetings, a mobilization activity, with all the registered women in a group of 15 to 20 in each group. Her husband conducted the same activity with registered male members of the community. To maintain a regular and sustainable contact, she visits all the registered married women of reproductive age on monthly basis through house to house visits.

Due to her good performance and commitment she was selected for BiB in May 2015 by the VHC. She successfully completed the training in social marketing and received community's support through VHC to promote her micro enterprise on a sustainable basis. She visits her catchment households on fortnightly basis and covers 20 to 25 households daily. Presently she is working with 300 households, 102 family planning users and meeting their needs of reproductive health by providing them contraceptives and other related items at their doorsteps. She also sells small household use items. Her clients trust her and they are happy with her dedicated services and professional approach. With a small but regular income and respect from the community, Tasawar feels herself more strengthened and empowered. With improved livelihoods, she is also improving her life.

"I was tensed with my husband's second marriage and my infertility which worsened my physical and psychological health condition. I was getting weaker day by day but could not do much about it as it was not in my hand to become a mother. I also belong to a Syed family hence it was difficult for me to go out of home and sell items at doorsteps of community members. I took this opportunity to work as an independent woman and convinced my family to support me for this cause. BiB did not only make me earn myself but it also gave me a purpose to live," says Tasawar.

BiB as a stable mean to earn

Sajida Nourin, wife of Anees Abbas, resides in village Chak 269 that is located in union council Chak 159 Sipra in district Jhang. Village Chak 269 has a scattered population of about 2200 and is located on Faisalabad Road, about 38 kilometers from PRSP district office in Jhang. The village lacks basic facilities like safe drinking water, sanitation, health and education facilities. There is no BHU facility available in the village and the nearest BHU is approximately 12-15 kilometers away. The area is characterized by widespread poverty.

In 2014, PRSP identified the village as uncovered by public sector. Under the PRHSSM project, PRSP visited the village Chak 269 and conducted an open dialogue with the community to introduce the project and form a VHC. The VHC selected Sajida Nourin as their CRP for implementation of project activities. Sajida is a housewife having her own house in the village; she is a mother of three young girls. She has only achieved education up to middle school whereas her husband has only studied till 5th grade. He currently drives a Rickshaw from which he earns about 200- 250 per day.

The PRSP team oriented Sajida about the project and her roles and responsibilities as a CRP. She performed very actively and within a timeframe of 06 months she mobilized communities through group meetings and household visits. As a result of her efforts 83 potential clients were referred to service outlets. Out of which 77 have been turned into new users. Considering her good mobilization skills, commitment to her work, her performance and good coordination with VHC members, she was selected for the BiB initiative.

Sajida Nourin began BiB with great enthusiasm and covered about 294 households while providing BiB services. She visits about 10-15 households per day and completes her round to each household on monthly basis. During her six months of BiB, she included some additional items in the bag based on demands of the clients. Her efforts resulted in earning a profit of Rs. 550 per month in the initial months, and later it increased to Rs. 800 - 1000 per month.

Sajida states that her strong ties with the community have enabled her to make BiB a successful venture. "My husband and I have a very strong relationship with the VHC. The VHC has been great in promoting reproductive health services as well as supporting me in BiB. Due to BiB, women and children have more confidence in me and call me a real friend. The business has upgraded my social status in the community and I have learned a lot in terms of confidence, earning a profit and respect in the community. Most of the women in the community now discuss their health and social issues with me and take my advice in consideration. I use my profit in meeting my household needs. I am very pleased with BiB as it has given me financial independence and now I am also contributing financially to my family."

The VHC and Sajida's clients are very happy with her work. One of her client states, "Sajida Nourin has made it easy for all of us to access the reproductive health commodities in the village as earlier we had to go to the local market to buy these things." Sajida wants to continue working with BiB even after the project ends as it has now given her stable means to earn while simultaneously helping her community.



Figure 17: Sajida Nourin selling items from BiB

Small business uplifted my social status

Naeem Akhter, wife of Haroon Shah, is residing in village Sheikh Chohar, union council Mochiwala of district Jhang. Village Sheikh Chohar has a scattered population of about 2000, located on Chinnot Road, 27 kilometers from Jhang city. The village lacks basic facilities like safe drinking water, sanitation, health and education facilities. There is no basic health unit facility available in her village and the distance to the nearest BHU is approximately eight to ten kilometers. The poverty is widely prevalent in the village.

Naeem Akhter is a housewife having her own house in the village and a matriculation degree. She is a mother of two school going children. Her husband has passed eight grade and is a farmer who earns five to six thousand rupees per month. In 2014, PRSP identified the village as uncovered by public sector. PRSP as per their plan visited village Sheikh Chohar and conducted an open dialogue with the community to introduce the project and form a VHC.



Figure 18: Naeem Akhter with her BiB kit

VHC in its first meeting selected Naeem Akhtar as a CRP for the implementation of the project activities. She performed very actively and within a timeframe of six months she mobilized communities through group meetings and household visits and as a result of her endeavor 93 potential clients were referred to service outlets. Out of which 87 clients have been turned into new users. Keeping in view her good work, she was selected for the BiB.

Naeem Akhtar started the intervention of BiB in her area and covered about 300 households. She visited about 10-12 households per day and completed her round to each household on monthly basis. During her six months BiB phase, she included some additional items in the bag and excluded some extra items on community demand. She says, "I was always interested in designing my own clothes and community women used to praise my sense of dressing. I used to design their clothes for free of cost. After BiB intervention, I have now introduced clothes in my kit which are highly demanded by the community members. I buy dresses from the city in bulk during cotton picking seasons as this time of season, women themselves earn and do not ask their male members for money. Hence in this season, I earn a good amount of profit." Her efforts resulted in earning a profit of Rs. 500 per month in the initial months, and later it increased to Rs. 1200 to 1500 per month. In peak season, she earns upto Rs. 2500-3000. She said that this all happened due to regular contact with the community.

While stating her views on BiB, a beneficiary says, "Naeem Akhtar has made it easy for all of us to access the reproductive health commodities because earlier we had to go to the local market to buy these things." Naeem Akhtar says, "All this has happened because of the community organized the VHC, which in turn selected me and supported me in performing my duties as CRP. The VHC is now promoting my business by disseminating the BiB messages, supporting in procurement and cooperating in accessing every household. She said organization of poor communities at grassroots level is the key to uplift the social status of the poor women which can contribute to bring about a positive change. BiB is my social micro enterprise, whereby I serve the community yet also make a small profit that leads to continuous provision of basic reproductive services to my community members."

“Now I am financially contributing to my home”

Umm-e-Kalsoom (age 35), wife of Sarfraz Khan, is a resident of village Chak 460 Jatiana in union council 268 of district Jhang. Chak 460 Jatiana is located on Gojra Road, about 22 kilometers away from main Jhang city, and has a scattered population of 2200 people. The village lacks basic facilities of safe drinking water, proper sanitation, health and education. There is no BHU facility available in her village and the distance to the nearest BHU is approximately eight to ten kilometers.

Umm-e-Kalsoom is a housewife and a mother of four school going children. Her husband and she both did matriculation. Her husband is hakeem (a traditional physician) who earns six to eight thousand rupees per month. In 2014, VHC in its first meeting selected Umm-e-Kalsoom as a CRP for the implementation of the project activities. After project orientation and training, she started working in 1000 population of the area. She performed very actively and within a timeframe of six months, she mobilized communities through group meetings and household visits. She was also selected for the BiB initiative.

Umm-e-Kalsoom started selling the items in the communities at their doorsteps during their household visits. She visits around eight to ten households per day covering 300 household each month. She included some additional items in the kit on community's demand. Her efforts resulted in earning a profit of Rs. 300-400 per month.

She says, “My husband is a member of VHC and he supports me to do my own business. We have a very strong coordination with the VHC so I easily do my work in the community. The BiB has upgraded my social status in the community and I have achieved a lot in terms of enhancing my confidence, earning a good amount of profit for myself and respect in the community. Most of the community women now discuss their health and social issues with me and I strive to solve them. I use my profit on my children's education and home expenses. I can proudly say that now I am contributing financially to my home.”

Community women are very much satisfied with her work. They believe that Umm-e-Kalsoom has made it easy for them to access the reproductive health commodities because earlier they had to go to the local market to buy these things and they wish her to continue working in her area.



Figure 19: Umm-e-Kalsoom with her BiB kit



VILLAGE HEALTH COMMITTEE

The VHC is responsible to organize monthly meetings to oversee the work of the CRPs and extend support to CRPs in addressing issues faced by them in demand creation through group meetings and household visits. An important function of the VHCs is to constantly disseminate the information among the husbands and key notables about the importance of birth spacing. In phase-I, 300 VHCs were formed that continue to work in phase-II. For new areas, additional 150 VHCs were formed. One VHC consists of around 20 members ensuring 50% female participation. VHCs' members were given orientation by the project staff.

VHCs have been given responsibility to identify the poorest of the poor families from their catchment areas so that these families can be provided contraceptives services at subsidized rate under the project. The VHCs are also responsible to help the CRPs to create the maximum number of the new users and for this purpose all members of the VHC are assigned the responsibilities to motivate at least two non-users to become the users. VHCs organize their monthly meetings and during these meetings, they also invite the non-members so that they can also get the benefits of the information being disseminated among the members.

VHC Chak Islamabad eliminates the financial barrier to avail FP services

VHC in village Chak Islamabad is a community organization of tehsil Khair Pur Tamewali, union council Anaity of district Bahawalpur. The village is not covered by the Lady Health Workers Program and thus deprived of basic health facilities. The distance to nearest BHU is nearly four kilometer.

With the intervention of the project, village Chak Islamabad was organized and VHC was formed. VHC Chak Islamabad has 20 members in the committee and to ensure the gender equality in VHC, 50 per cent of the members are women. Like every other VHC, this VHC also has a pair of man and woman CRPs and covers the population of 2000 persons in the village. Monthly meetings are organized for the members of

the VHC to sit together and discuss the work of CRPs and also extend the support to CRPs in addressing the issues faced by them in demand creation through group meeting and household visits. CRP completed the registration of 350 MWRAs; out of them 157 have adopted birth spacing method from mobile camps.

Prior to project intervention, community members had lots of misconceptions about the family planning services. For the residents of village, getting any family planning services from a health care provider was a cumbersome task. One of the most important responsibilities given to VHC members is to identify the poorest of the poor families from their catchment areas so that these families can be provided contraceptives services at a subsidized rate under the project. The Treasurer of VHC is responsible to collect the funds from the community and donates to the poorest of the poor. 5 women have been provided services by project mobile camps in terms of availing family planning method for free of cost by VHC on monthly basis.

Parveen Haider, President of the VHC, overjoyed by the work of VHC says, "The savings really helped VHC in benefitting those poor women who cannot avail family planning services which are provided to them at a subsidized rate. Given a good response by the community, the VHC members are determinant to continue such support to the poor in future.



Figure 20: Monthly meeting of VHC Chak Islamabad

VHC Basti Lehaq: transforming lives

NRSP fostered a VHC in Basti Lehaq, a very remote area of union council 22 DNB, tehsil Yazman of district Bahawalpur, situated about 80 kilometer away from Bahawalpur city. VHC Basti Lehaq has a population of 2,000 spreading over Chak 22/DNB, Basti Ghalwan and Basti Lehaq.

NRSP provided orientation training to VHC members for better understanding of the project and their roles and responsibilities. The VHC members after getting orientation accepted the responsibility and extended full support to the CRPs for the implementation of project activities. The VHC members supported the CRPs in registration of MWRAs, making group meetings with them and in monthly household visit of MWRAs. VHC members hold their meetings on monthly basis to address the issues being faced by the CRPs during implementation and played a vital role in increasing the number of birth spacing clients in their assigned areas. VHC also fully facilitated the arrangement for health camps where project LHV's provided basic services. One of the members says, "In our area, NRSP team for the first time educated us about mother and child health. VHC members were thoroughly explained about the importance of birth spacing and then we gave the message to the community members. Mostly we got positive response but in few areas the people were not receptive to CRPs where we helped the CRPs and convinced them for birth spacing methods."

There are 320 MWRAs in the catchment area of VHC and 110 clients have been enrolled as new users so far with the support of VHC members and by CRPs maintaining regular contact with MWRAs. The members have referred 50% of the users so far. The remaining 210 non users are not using birth spacing methods due to social and religious misconceptions. To address this issue, VHC members got the support of religious leaders and now the misconceptions have almost been addressed. There are about 15% of the MWRAs who are very poor and VHC executive body took special initiatives to generate funds for those women who are not in a position to get services. Under the fund raising initiative, VHC members have supported 25 women financially in getting the reproductive health services. Presently VHC have funds of Rs. 800 to support other poor women only for birth spacing services.

One of the beneficiaries says, "We are very much pleased to get such type of services at our doorsteps. This is first time in the history of our village that community supported the poor women in getting the birth spacing services. This is because of health related information disseminated by VHC members and CRPs and credit also goes to the NRSP team who succeeded in realizing the importance of the birth spacing in the community. NRSP performed very good job and organized the community potential in VHC for the provision of reproductive health services."

VHC has taken another very important initiative to address the serious issue of delays being faced by the pregnant women during delivery. For that purpose they have arrangements of vehicles for poor women to take them to the hospitals during emergencies and owner of vehicle will only charge the cost of petrol which will be covered by the VHC members.



Figure 21: Members of VHC Lehaq conducting monthly meeting

“In our area, people do not give priority even to basic health issues. Project team sensitized us about health and mainly health of child and mother which was totally ignored in our area. Honestly speaking in the beginning I was doubtful how community will react to birth spacing topic but response of community was very positive because it was their need which was not discussed earlier,” says the President of VHC. VHC President takes pride in the work of his community and acknowledged that the NRSP social mobilization team speaks well of VHC Basti Lehaq as it is very productive and committed to support knowledge dissemination and service delivery. VHC is very proactive and takes initiatives for the improved health of women and children. VHC President is very hopeful that the community will continue the project activities in the post-project period on a sustainable basis.

VHC- A catalyst of change

Basti Toba Machian is a settlement of union council Shahpur in district Rahim Yar Khan. It is situated 60 kilometers away from the main city of Rahim Yar Khan. Toba Machian having 2200 population is an underprivileged area deprived of basic facilities. The ratio of poverty is also high which forces poor community members to remain deprived of basic education and good health. The literacy rate of Shahpur union council is also very low as compared to other UCs. There was no school in the area. Nearest school for girls and boys was two to three kilometers away. Non-formal education center was there but it was not properly functional. Hence admitting children to the school was never encouraged. Moreover, the rate of birth registration is also low in the area due to lack of awareness and women's delivery at home. The system of Numberdar (notable person in village), a certified of revenue village, who would assist in birth registration has now been abolished. Hence no emphasis is made on birth registration.



Figure 22: Monthly meeting of VHC Toba Machian

Under the PRHSSM project, VHC Toba Machian collected an amount of Rs. 1000 from community members. The issue of out of school children was taken to the VHC and members of VHC decided to spend the fund on education of children. Therefore, the amount was used to facilitate parents to get 25 children (8 boys and 17 girls) enrolled in the school and to do 20 birth registrations of children. Social Organizers of NRSP accompanied with President of VHC conducted several meetings with teachers and school administration in order to remain involved during the process. Moreover, the President of VHC sent 20 names to the Secretary Union council for registration and paid Rs. 100 fee for each child. Additional cost was borne by parents themselves as they also started taking interests.

The President of VHC states, "Before NRSP started working, community members had no awareness about the process of birth registration. Most of them did not send their children to schools because they believed that schooling would not benefit them in anyway. Now, the mindset of people has changed. VHC members are determined to sensitize people of the area. We are thankful to NRSP who brought our attention to these crucial issues and we are hopeful to continue working for assisting community members in each possible way."

One of the female students says, "I am happy to get enrolled in a school. I will daily go to the school and will become a doctor."

In addition to this, VHC Machain also assisted community members to avail health services. 5 poor women of the area were given financial assistance for their medical checkups and taking birth spacing methods, whereas other 10 women were referred to the health mobile camp. Moreover, 5 pregnant women, who could not afford going to the hospitals for the deliveries, were provided logistic supports by the community members. VHC arranged vehicles for these women and the fuel cost was either shared by the VHC fund or by the family members. Apart from reproductive health, VHC also supported to run a polio campaign and to raise awareness for children vaccination.

VHC members emphasized that with mobilization efforts, few households have taken a step to go forward and do something practical. This process will further be carried out to mobilize more members for the betterment of community in future.

VHC Dars Qadariya bringing change through girls' education

Dars Qadariya is a rural settlement of union council Bhangoo at Jhang district. Basti Dars Qadariya, having 2000 population, is 70 kilometer away from the main Jhang city. It lacks the basic facilities of education and health. The basic health unit is at a distance of 11 kilometer which makes it harder for the community to access it. The literacy rate of the village is low as compared to other settlements. Following the tradition of the village, girls are being married in a very young age.

PRSP team chose this basti for project intervention as it was not covered by any lady health worker. PRSP team held community dialogues and organized the community members at village level by forming VHC. Other than sensitizing community about the importance of reproductive health and providing family planning methods to MWRA, the team encouraged community members to highlight other socio-economic issues of the area. One of the main problems of the basti was compromised educational facilities for young girls which leads to early marriages of girls. VHC members raised the issue of no boundary walls around the school of a village which made community members to not send their girls to the schools. Only boys used to come to the school.

VHC members gathered and conducted a meeting with school management committee. With mutual consent, they reached on the agreement that school management will sell the plants (property of the school) and rest of the money will be provided by VHC fund. The plants were sold and the money was used to build the boundary wall around the school. VHC members added additional Rs. 27,000 from fund on the construction of the wall. After one month, the wall was built. With its completion, VHC members started doing advocacy with the parents to send their girls to the schools. VHC successfully enrolled 35 girls in the school.

The President of VHC says, "We are very thankful to PRSP team who guided us to identify our issues and then to solve them with mutual endeavors. Girls' education has always been neglected in our area and we never talked about this issue before. Now, we listen to the problems of our people, discuss it in monthly meetings and try to come up with a solution."



Figure 23: Constructed boundary wall around the school

INVOLVEMENT OF RELIGIOUS LEADERS THROUGH VHC

VHCs members play an important role to get the support of religious leaders for promotion of birth spacing or family planning. Prayer leaders in mosques or key religious leaders including male and female of the catchment area become VHC members. They are briefed by social organizers through one to one interaction about importance of birth spacing for maternal and child health and approval of Islam for birth spacing. During the monthly meetings of the VHCs, the religious leaders address the religious resistance of community from religious perspective and also motivate the community members to practice spacing for better maternal and child health outcomes. They are also invited to participate in the group meetings that are conducted by the male and female CRPs where they speak on the importance of birth spacing, address their queries from religious point of view and motivate them to adopt birth spacing methods. During VHC meetings, the CRPs discuss the families or a husband who refuses to become the user due to religious resistance. The support of religious leaders is also taken for one to one interaction with such families or husbands to remove their myths and misconception and to convince them to become the user.

Religious support boosts acceptance of birth spacing

In remote areas, religious leaders can play a vital role in improving the reproductive health of women and children. This is because decision-making is guided by social and religious norms, and religious leaders hold a strong influence on decisions regarding family planning. NRSP under the PRHSSM project in Rahim Yar Khan involved a religious leader named Muhammad Akram as a CRP for the project. Muhammad Akram, age 38, is the prayer leader of the mosque in his assigned area. He is an educated and well-respected leader in his community.

Initially, Muhammad Akram was not happy with his selection as a CRP. "I was not willing to be a CRP as I was convinced that like other such initiatives the PRHSSM project would also focus on family planning through only birth control. I reluctantly accepted, but after attending the six-day training program, I found out that the project is not about birth control but about the healthy timing and spacing of pregnancy. Although I have memorized the Holy Quran by heart, I was not taught the translation and therefore remained unaware about the emphasis laid on a minimum of two years birth spacing."

Birth spacing is very helpful health intervention as it ensures better health of both mother and her children," Akram continues. "The training program also helped me understand various methods that a couple can use, and the role of husbands in birth spacing. The presentations and discussions of senior religious leaders further helped me understand the importance of these concepts, and convinced me to enhance my role in the community for the greater cause."

Over the past 15 months, Muhammad Akram educated the villagers through various community platforms about the importance of birth spacing. He maintained that after his training, he organized and conducted seven group meetings with 140 husbands and sensitized them about their role in adopting healthy birth spacing practices. Most importantly, he discussed the issue in a manner that encouraged couples to make joint decisions on spacing. The support of religious leadership is crucial in bringing a positive change in these remote areas.

Muhammad Akram says, "I am thankful to project team and VHC for providing me an opportunity to become a CRP and make me understand the concept of family planning. I also share what I have learned in my weekly Friday sermons as I now firmly believe that family planning and healthy timing and spacing of pregnancy are permitted in Islam and that they are an important foundation for improving family health."

He successfully turned 50 percent of families into new users of RH services. The community responded positively to his guidance, demonstrating that religious support on the topic can ease the acceptance of birth spacing. He proved that proper guidance and continuous education in the light of religious values can improve the reproductive health of women in these uncovered remote areas.



Figure 24: Religious leader conducting a session with male community members

Religious leader supporting the cause!

Farooq Nagar is a small rural settlement in union council Haveli Bahadur Shah of Jhang district. The village lacks the basic facilities of health care. It does not have any basic health unit or dispensary hence community members face hurdles to access basic health care facilities. Moreover, this village is also not covered by lady health workers so very few women were the users of modern contraceptive methods. In addition, due to lack of awareness and prevalent misconception about the usage of family planning methods, community members resist to adopt any method.

Dr. Zafar Iqbal, aged 48, is the resident of basti Farooq Nagar and the prayer leader of a mosque and custodian of a seminary. Dr. Zafar has completed Ph.D in Islamic Studies. He is one of the renowned religious leaders of the area and is very well respected by community members. PRSP team of PRHSSM project along with VHC members approached Dr. Zafar and held a dialogue with him to introduce the project and to seek his support for spreading messages of birth spacing in religious context. Dr. Zafar extended his support to the project team and became a member of VHC.

During monthly meetings of VHC, CRPs shared the number of community members who are reluctant to show up in the health mobile camp for availing any family planning method due to religious constraints. Dr. Zafar held sessions with those community members and with his effective message delivery; he converted 84 non-users into the users of modern contraceptive methods. He conducted separate meetings with male and female members and delivered birth spacing message with reference to Quranic teachings. In addition, he also arranges lectures on the importance of birth spacing in alternative Friday sermons.

The President of VHC says, "The support of religious leader is very essential for this cause. In our basti, community members do not only respect religious leaders but also listen to them. Many people even make their life's biggest decision in consultation with the religious leaders. Thus, Dr. Zafar Iqbal being a part of VHC member is effectively contributing to bring about positive change in people's life with birth spacing."



Figure 25: Religious leader delivering a session during VHC meeting

SERVICE DELIVERY THROUGH OUTREACH CAMP

Social Organizers of the project are responsible to coordinate with LHVs and CRPs and to organize the camps at the locations of the CRPs for services to those clients who are unable to access the service delivery points due to any reason. CRPs arrange the space for camp in the community and invite all clients referred by them for family planning and reproductive health services. Before that, CRPs take full month to mobilize the community and refer the potential clients for services. LHV is assigned to conduct at least three camps per day that permit her to spend more time in a village and it also pushes the CRPs to bring more clients for uptake of the FP services. In phase-II, three LHVs per districts are covering 300 villages (200 village of phase-I and 100 villages of phase-II). Each LHV covers 100 villages per month (3-4 villages per day) and one location is covered once in a month.

CRPs also refer pregnant women for Antenatal Care (ANC) to the camp as these are treated as future FP clients. However to ensure that LHV spends her most of the time for FP services, the clients for FP services are invited first. In each village, LHV spends at least 2 hour for camp out of which one and a half hour is dedicated for FP clients and remaining 30 minutes is given for non FP clients (pregnant women for ANC). Follow up camps at the locations of CRPs are scheduled to ensure the subsequent doses of contraceptive methods. Feedback about the FP and non FP clients of each camp is given to CRPs during their monthly meeting so that they could refer more FP clients for each camp.

A tale of struggle for sustainable growth

Farzana Bibi, aged 33, is a resident of basti Kotha Gali at union council Ranjhay Khan of Rahim Yar Khan District. She has completed her matriculation and taught for two years in a primary school. She is married with two school going children. She started working with NRSP since 2008 in different projects. In the PRHSSM project, after community dialogues she was selected as a CRP in 2013. She registered 300 married women of reproductive age in her catchment area and has been providing family planning services to 66 users.

In the first phase of the project, Government of Punjab announced the opening of Community Health Worker (CHW) courses. NRSP team shared the description of the course with all CRPs and encouraged everyone to apply for it. The minimum education criterion was matriculation hence Farzana Bibi was eligible to apply. She already had developed a lot of interest to work in her area as a CRP in

reproductive health services project thus she eagerly applied for the course and got selected. She was paid monthly Rs. 3500 honorarium which she used to cover her living expenses.

After 18 months of rigorous course, she took her final test and secured second position in the class. She has obtained a diploma and a license to open her own clinic in her basti by the Government of Punjab. She has also been provided a delivery kit which is kept in her clinic, the only clinic of her area. Her monthly reporting of the clinic is made to Executive Director Officer (EDO) Health and Basic Health Unit (BHU) is the incharge of her clinic. Registration of clients in her clinic is checked by EDO Health. Other than that, she also reports to Tehsil Head Quarter on monthly basis. She is required to report for 3 years. After that, her clinic would be independent. In addition to this, she also runs polio campaign which is usually for 5 days. In return, she is paid Rs. 1900 by World Health Organization (WHO).

One of her teachers informed her about an opening at Al-Munir Hospital as a staff member. It was a contract based job where she applied and got selected. She has been hired for Rs. 10,000 per month. In the morning, she comes to the hospital and in the evening she runs her own clinic. With provision of reproductive health services, she also deals with deliveries charging Rs. 1500-2500. Overall now she earns upto 15,000 each month. She uses this money to bear her own living expenses and her children education. Her husband is a driver who cannot afford the schooling of his children.

Despite her other responsibilities, she continued working with NRSP as a CRP with the same passion. She says, "I am very thankful to NRSP who showed me a way to achieve all these things. NRSP team always guided me and polished my skills. I learned a lot and now I am dedicated to contribute to work for my community. I also learned the practical work by observing project LHV's in the field. Now I know the importance of education and eager to learn more so that I could benefit my people from my education."



Figure 26: Farzana Bibi in her clinic at her basti

Young girl adopting family planning method against traditional norms

Saima Liaqat, aged 17, is married to Abdul Rasheed who is 25 years old. They live in village Rasikh Abad. Rasikh Abad is situated on 50 km distance from Jhang city. It is an undeveloped village with little or no education, health and infrastructure facilities. There is no middle school, hospital and a proper road to connect the village to the city. It is an uncovered area where there are no BHUs or LHV. The locals mainly engage in agricultural work.

Under PRHSSM project, Saima and her husband started working as CRPs in the village. PRSP staff gave them six days training and after that they registered 140 MWRAs in their specific area of 1000 population, which was uncovered by LHVs. After identifying MWRAs, Saima conducted 6 group meetings with around 120 female participants. Simultaneously, Abdul Rasheed conducted 5 group meetings with their husbands. During the project life they arranged seven medical camps in which 57 new users have been created. The VHC and clients are very satisfied with their work.

While working in the project, Saima and her husband realized the importance of reproductive health. Since her area is located on a significant distance from the district, there was very little awareness on the topic before the project intervention. Furthermore women are also made to marry at a very early age and adopting family planning methods in an early marriage is considered against the norms of the village. It is believed that females who adopt family planning methods before their first pregnancy become infertile therefore adopting any contraceptive methods is usually frowned upon.

Saima got married at the young age of 16 to Abdul Rasheed who was only 24 at the time of the marriage. It is due to efforts and awareness of PRSP, Saima realized that getting pregnant at such a young age could risk her health and her future child's health. Saima is one of the first young MWRAs in her village who agreed to adopt contraceptive methods. She was advised to use IUCD method by the project LHV. With the consent of her husband, she adopted Copper-T method and is very much at peace as she can focus on her life and her work until she is ready to start a family.

Saima says, "There was no one to tell me about my reproductive health. I would have followed the tradition of bearing child at a young age with no proper birth spacing, had PRSP not have intervened the area. I do not only perform my responsibility as CRP but also I now understand the term of healthy timing and spacing. I am very thankful to PRSP who built my capacity and also sensitized my husband about this important topic, because of which my husband supported me in making this decision."



Figure 27: Saima Liaqat with her husband Abdul Rasheed

Counseling saved Salma's life

Salma Bibi and Zahoor Ahmed got married ten years ago. Salma was 21 years of age at the time of marriage. She is residing in chak number 183 located 38 kilometers away from district Jhang. The couple desired to have a baby boy as their first child. Salma, however, delivered a girl after first year of their marriage. Everyone was happy with the baby girl. However due to the desire of a boy, she did not adopt any birth spacing method and just after one year she became mother of a second girl.

She deliberately conceived every year compromising on her health and her children, and just in ten years she gave birth to seven girls. Salma's health deteriorated with the passage of time. She also became victim of criticism from her in-laws. Her husband, a farmer with meager income of Rs. 2500 per month, failed to send his daughters to school. He was also upset due to desire of a baby boy and bad health condition of her wife.

Salma recalled that it was a bright day when the PRSP team came in her village in 2014 and started providing counseling and reproductive health services. PRSP field team in their first community dialogue discussed the problems of rural life including health, education and sanitation issues and gave suggestion to solve the issues. They structured the community into a VHC by involving men and women equally. VHC in its 1st meeting selected Parveen Sultan and Ijaz Ahmad as CRPs for the implementation of the project activities. Parveen worked actively and within a six months she mobilized communities through group meetings and household visits. Resultantly 83 potential clients were referred to service outlets. Salma was one of them.

Salma interacted with CRP Parveen during group meetings and household visits. Parveen motivated her for birth spacing methods, its benefits for her entire family and particularly for her health. Parveen also sensitized Salma that both boys and girls have their own values in a family and she should not be disappointed for not having a boy. Male CRP Ijaz Ahmad also held discussion with Zahoor Ahmad, Salma's husband, and convinced him that birth spacing is very necessary for his wife's health. In response to the CRPs efforts, Salma Bibi adopted the long term method of Copper-T with the consent of her husband and now her health is improving and she is able to take care of her seven girls in a better way. The couple is happy with their decision.

Salma says that she is thankful to Parveen, Ejaz and VHC for educating them and sensitizing them on birth spacing, thus saving her life.



Figure 28: Salma Bibi sitting with her seven daughters and CRP Parveen

Farzana Bibi: A savior

Farzana Bibi, aged 25, resides in a small village named Bindi Syed Jalal that is located in union council Satiyana of district Jhang. Bindi Syed Jalal has no medical and education facilities. Lady health worker program does not cover the area hence the residents have little awareness or access to reproductive health services. Mostly, the residents of the village are very poor and earn below or upto minimum labor wage. They are mostly small-scale farmers or laborers with little or no education. In order to avail basic health facilities, the residents have to travel long distances to the village Satiyana that has some basic health facilities.

PRSP started working in this area under the PRHSSM project two years ago. Farzana Bibi was appointed as the CRP by the project fostered VHC in the area. Before her work in the area, majority of the women were unaware of birth spacing. Due to a very conservative value system and birth spacing being a taboo topic, initially it was very difficult to persuade the women in her neighborhood. However Farzana has been working very hard and has good communication skills. She visited households of MWRA's regularly in her area and counseled them on the importance of birth spacing.

Her efforts have been very fruitful; her clients are very happy with her work and cooperate with her. One of her clients named Asia Bibi narrated the story of how Farzana Bibi helped her and changed her life. She says, "My parents got me married at the age of 15. I was so young at that time and had little knowledge about how difficult pregnancy and motherhood will be. I started expecting immediately after our marriage and gave birth to a baby girl. Unfortunately she couldn't survive because of weakness. Losing her was one of the most tragic instances of my life. When Farzana Bibi heard about it, she immediately came to see me and explained me that pregnancy in such a young age can be fatal to me and my child. She explained to me about her work and about the significance of family planning. She encouraged me to adopt a birth spacing method as I was already in weak health and was suffering from severe pain. I listened to her and visited the LHV camp organized by the project. After consultation with the LHV, I adopted IUCD methods. I feel that it was the best decision I have made as it gave me time to restore my health and I can focus on myself. My husband is also happy as he wants to save some money before we decide to have another child. I am grateful to Farzana and the project for helping me."

There are many other MWRA's like Asma who are grateful to Farzana for her efforts and support. Farzana has created awareness in her village and is a beacon of support for these women.



Figure 29: CRP Farzana with her client Asia Bibi



RSPN's Vision

Realising people's potential for social and economic development

RSPN's Mission

Strengthen the Rural Support Programmes to foster institutions of the people



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