

Jhpiego in Pakistan

Quick Facts

Estimated total population:¹
184.5 million

Maternal mortality ratio:¹
276/100,000 live births

Infant mortality rate:¹
74/1,000 live births

Under-five mortality rate:¹
89/1,000 live births

Total fertility rate:¹
3.8

Contraceptive prevalence:¹
26.1% (modern methods)
35.4% (all methods)

HIV prevalence:²
0.1%

Births with skilled provider:¹
52.1%

Sources:

¹ Pakistan Demographic and Health Survey 2012–13;

² UNAIDS 2010 Report on the Global AIDS Epidemic.

Background

Pakistan, home to more than 184 million people, is the sixth most populous country in the world. In response to this figure, along with a population growth rate of 2%, Pakistani government officials recognize that population is the most urgent issue in national development. In addition to a high unmet need for family planning (FP), Pakistan's maternal mortality ratio is much higher than that of its neighbors, due in large part to the fact that nearly 48% of all births in Pakistan take place without a skilled birth attendant.

Jhpiego is addressing these critical public health issues through collaboration with national and local government, training institutions, private practitioners and health educators. Jhpiego began working in Pakistan in 1997, providing technical assistance for an evaluation of Greenstar's social marketing training program. From 2000 to 2004, Jhpiego provided further technical assistance to the Averting Maternal Death and Disability Program in Pakistan, led by UNICEF. For the next two years, Jhpiego worked with the Futures Group International under the Key Social Marketing Project, funded by the U.S. Agency for International Development (USAID). From 2006 to 2010, Jhpiego partnered with the International Rescue Committee under the USAID-funded Primary Healthcare Revitalization, Integration and Decentralization in Earthquake-affected areas (PRIDE) Project, which sought to improve primary health care services for earthquake-affected populations in northern Pakistan.

More recently, under an award from the Research and Advocacy Fund—a grant-making fund led by the British Council and financed by the UK Department for International Development (DFID) and the Australian Agency for International Development (AusAID)—Jhpiego conducted a randomized trial study to introduce a strengthened postpartum care package. In addition, with funding from the Packard Foundation, Jhpiego worked to strengthening and scale up postpartum family planning (PPFP) services in four divisions of Punjab. Jhpiego also implemented the FATA-KP Health Program, a five-year, USAID-funded initiative that aimed to save the lives of mothers, newborns and children in seven target districts of Malakand Division in Khyber Pakhtunkhwa Province and four selected agencies of the Federally Administered Tribal Areas. With financial support from the Health and Nutrition Innovation Fund (HANIF)—a granting mechanism supported by DFID and led by the Futures Group Europe Limited—Jhpiego pilot-tested PPFP interventions in Sargodha District that were designed to increase FP access and utilization of services among postpartum women. In addition, with funding from Saving Lives at Birth: A Grand Challenge for Development, Jhpiego evaluated a low-cost simulation model in Pakistan for postpartum IUD training.

Jhpiego is currently working in Pakistan with multiple donors and partners on several initiatives, all of which are described as follows.

Current Program Highlights

Maternal, Newborn and Child Health Services Project

The USAID-funded Maternal, Newborn and Child Health Services Project aims to prevent maternal, newborn and child deaths in Sindh Province. The project focuses on ensuring skilled birth attendance through a total market approach, empowered community, timely referral of obstetric and neonatal complications to an emergency obstetric and newborn care facility, and improved access to child care. As of the end of Year 3, Jhpiego had established and improved the quality of services for seven key maternal, newborn and child health services at 925 facilities across 15 districts in Sindh. To do this, Jhpiego is developing resources and collaborations with key stakeholders at the provincial and national level; building capacity of health care providers in several MNCH interventions; and implementing quality improvement approaches at the target facilities.

Sukh Initiative

Funded by the Bill & Melinda Gates Foundation, the David and Lucile Packard Foundation and the Aman Foundation, the four-year Sukh Project has the goal of contributing to a 15% increase in the contraceptive prevalence rate for modern methods across a population of approximately one million people in Karachi. Building on momentum from national and international donors and the Government of Pakistan's desire to expand access to high-quality FP in Karachi's growing urban population, Jhpiego is preparing public sector stakeholders, including maternity homes and clinics, to offer a range of modern FP services, as well as high-quality PPF and postabortion care/postabortion family planning (PAFP). The two main focus areas of the Jhpiego-led service delivery activities are to: 1) increase choices of modern methods for all women utilizing FP, and 2) drive an increase in the contraceptive prevalence rate in targeted areas by capitalizing on increasing access to FP during the underutilized postpartum period and at underutilized public health facilities. Using a training approach that minimizes health care providers' time away from their workplace and leverages existing FP resources in the province, Jhpiego aims to achieve the following project outcomes in the selected intervention areas of Karachi:

- Outcome 1: Enhanced enabling environment (policy, sectorial and community levels) for delivery of quality FP services
- Outcome 2: Increased supply of and access to a broad range of FP, PPF and PAFP services at public sector health facilities
- Outcome 3: Improved quality of FP services, including PPF and PAFP, in public sector health facilities

Safe Childbirth Checklist Study

With support from the German international aid group GIZ, Jhpiego is implementing a study to test the hypothesis that the World Health Organization's Safe Childbirth Checklist, combined with a comprehensive, integrated maternal and newborn health training package, will contribute to longer-term gains in improved skills retention by primary health care facility staff and community midwives. The 12-month study is taking place in Haripur and Nowshera Districts of Khyber Pakhtunkhwa and targeting 86 facilities (Mother and Child Health Centers, Rural Health Centers, Basic Health Centers) and 244 providers.

Key Accomplishments

Under the Maternal, Newborn and Child Health Services Project:

- A total of 235 master trainers were developed to train 3,206 Lady Health Workers and 161 Community Health Workers as facilitators for the women's support groups. These health workers conduct 4,500–4,700 support groups every month and have reached more than 771,000 women with messages on maternal, newborn and child care.
- More than 700 public and private health facilities in five districts are providing Helping Babies Breathe® (HBB) services. Trained skilled birth attendants attached to these health facilities are now recognizing asphyxiated babies during childbirth in a timely manner and resuscitating them within the golden minute (first minute after birth) period. To date, 99% (4,725 of 4,758) newborns who were not breathing at birth were successfully resuscitated using HBB.
- The Maternal and Child Health Integrated Program (MCHIP) took on a leadership role at the national and the provincial level for the introduction of chlorhexidine for umbilical cord care in Pakistan to prevent newborn sepsis. Since the Department of Health's approval of the application of chlorhexidine to prevent newborn sepsis in Sindh, MCHIP has distributed over 40,000 chlorhexidine tubes in the community through facilities and Lady Health Workers.



Mother and baby at health care facility, Pakistan.

Under the Packard Foundation-funded PFP initiative:

- Unmet need among the women in the postpartum period (in the project catchment area) was reduced by more than 10% from the baseline.
- Almost 90% of women delivering at targeted facilities are being offered three modern methods of contraception.
- Approximately 15% of women delivering at targeted facilities have accepted a long-acting, permanent method of contraception (postpartum sterilization/postpartum IUD), compared to 0% at baseline, and about 23% of women delivering at targeted facilities have accepted the lactational amenorrhea method of FP.
- More than 15,000 health workers were trained in various skills, including PFP counseling and clinical skills.

Partners and Donors

- Jhpiego's current donors in Pakistan are USAID, GIZ, the Packard Foundation, Bill & Melinda Gates Foundation and Aman Foundation.
- Counterparts in Pakistan include the Ministry of Population Welfare, Ministry of Health, Pakistan Medical and Dental Council and Pakistan Nursing Council, as well as leading medical colleges and private and nongovernmental sector representatives.
- Past and current international partners include the International Rescue Committee, Population Council, Management Sciences for Health, Futures Group International and Futures Group Europe Limited, Greenstar Social Media, Health and Nutrition Development Society, Mercy Corps, Rural Support Program Network, Save the Children, PATH and John Snow, Inc.

References

Joint United Nations Programme on HIV/AIDS (UNAIDS). *2010 Report on the Global AIDS Epidemic*.

National Institute of Population Studies and ICF International. 2013. *Pakistan Demographic and Health Survey 2012–13*.

