MCSP Pakistan
Family Planning Program, March 2017

Pakistan—Selected Demographic and Health Indicators for Country

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Data</th>
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</thead>
<tbody>
<tr>
<td>Population</td>
<td>188.9 million</td>
<td>TFR (births per woman)</td>
<td>3.2</td>
<td>Polio</td>
<td>75%</td>
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<tr>
<td>Live births/year</td>
<td>4,599,400</td>
<td>CPR (modern methods)</td>
<td>27%</td>
<td>ORT</td>
<td>41.1%</td>
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<tr>
<td>MMR (per 100,000 live births)</td>
<td>170</td>
<td>ANC +4</td>
<td>28%</td>
<td>Stunting (moderate and severe)</td>
<td>43.7%</td>
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<tr>
<td>NMR (per 1,000 live births)</td>
<td>42</td>
<td>SBA</td>
<td>52%</td>
<td>HIV prevalence</td>
<td>&lt;0.1%</td>
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<td>USMR (per 1,000 live births)</td>
<td>86</td>
<td>DTP3</td>
<td>81%</td>
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Strategic Objectives

1. Establish an integrated model of family planning training, on-the-job coaching, and supportive supervision at the provincial and district levels.
2. In selected districts, increase family planning services uptake by developing the capacity of health care providers and community-based health workers to provide quality family planning services, including counseling and interpersonal communication.
3. Strengthen the existing quality improvement and patient safety system to improve quality of family planning services at the service delivery points.

Program Dates
July 2016–December 2017

Financial Summary
Spending through Dec 2016 = [ ]: Remaining funding = [ ]: Total LOP funding = [ ] (program suspended)

Geographic Scope
Provincial and District Level

<table>
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<tr>
<th>Geographic Presence</th>
<th>No. of Provinces</th>
<th>No. of Districts</th>
<th>No. of Facilities (%)</th>
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<tbody>
<tr>
<td></td>
<td>3 of 4 total provinces (there are also 2 autonomous territory, 1 federally administered tribal area, and 1 federal capital territory)</td>
<td>22 administrative districts and one urban neighborhood</td>
<td>TBD (approx. 200)</td>
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Technical Interventions
PRIMARY: Family Planning
CROSS-CUTTING: SBCC, Quality
**Key Accomplishments**

MCSP developed the program design in late 2016 in collaboration with government agencies, USAID, and other stakeholders. Several meetings were held with leading government agencies such as the Department of Health (DoH), Population Welfare Department (PWD), and the Lady Health Workers (LHW) program among others to discuss the family planning situation in Pakistan. Together with the partners and USAID, MCSP identified the program districts within the three target provinces of Sindh, Punjab, and Baluchistan.

In September 2016, MCSP conducted a rapid situation analysis in the three provinces. The purpose of this analysis was to understand the socio-behavioral and health system context of family planning in MCSP program sites in Sindh, Punjab, and Balochistan, in order to inform the design of a strategic approach for increasing family planning uptake. The analysis explored current family planning perceptions and practices, service delivery processes, and factors facilitating and hindering family planning uptake. Fear of side effects, myths and misconceptions, poor quality of counseling, and access to contraceptives were documented as some of the barriers to family planning. The findings from the analysis have informed the program design and the workplan for MCSP Pakistan.

In November 2016, MCSP conducted consultative meetings with the PWD and DoH to identify their urgent needs for accelerating FP programs. One of the needs identified was updating the national standard for family planning. MCSP used this opportunity to conduct a desk review of the existing national standards, training materials, and job aids related to family planning services. The revised materials were then shared with stakeholders during a consultative meeting held November 15–18, 2016, in Karachi and were endorsed by the DoH and PWD of the three provinces.

MCSP submitted an application to the Economic Affairs Division and the Ministry of Interior for project registration which is a requirement in Pakistan prior to implementation. This No Objection Certificate (NoC) was received on January 24, 2017, after several months of consistent follow-up. MCSP has also hired staff and made partial arrangement for the offices in the three provinces.

**Challenges**

MCSP received notification from USAID in January 2017 that all activities must be placed on hold. This is due to a re-strategizing effort by USAID within family planning work in Pakistan. A revised program description and scope will be provided from USAID to MCSP in the coming weeks. The receipt of the NoC, a federal requirement, was delayed, which caused delays in program implementation. Consistent follow-up with the authorities has now resulted in the approval of NoC at the federal level. The volatile security situation in Pakistan remains a challenge overall. MCSP continues to carefully assess the security situation.

**Way Forward**

MCSP Pakistan will continue to hold on the majority of originally proposed activities until further direction is provided by USAID. Upon USAID’s request, MCSP has submitted the details of nationwide implants training and is waiting for further clearance to move forward with this activity.