

Evaluation and Assessment of Quality of Care at Family Welfare Centres

ALI ANWAR BURIRO
RABIA ZAFAR

National Institute of Population Studies
Planning and Development Division



**EVALUATION AND ASSESSMENT
OF QUALITY OF CARE AT
FAMILY WELFARE CENTRES
(2010-11)**

**ALI ANWAR BURIRO
RABIA ZAFAR**



**National Institute of Population Studies (NIPS)
Planning & Development Division
House No. 485, Street No. 9
F-10/2, Islamabad**



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FOREWORD

The National Institute of Population Studies (NIPS) undertakes applied and inter-disciplinary research in the field of population and development. It provides research based support and analytical input in the area of population, family planning, reproductive health for planning and policy making to the Planning and Development Division and other concerned Federal Ministries/Institutions, Provincial Government Departments/District Local Government. The Universities and other academic institutions also take advantage of the publication of NIPS.

Family Welfare Centres (FWC's) Project is a very prominent component of Population Welfare Program on supply side. The Family Welfare Centers (FWCs) are the main service delivery outlets of the Population Welfare Programme in public sector providing family planning services, maternal and child health care and reproductive health services across the country. A sizeable amount is being spent on the various components of the Population Welfare Programme.

This called for In-depth evaluation of the FWCs for identifying the root causes of underutilization of FWC's and to take remedial measures for the better utilization of the FWCs services. The study has produced worthwhile findings regarding various aspects of FWCs and reveals a clear picture about the current level of their services regarding family planning. The difficult task of data collection through quantitative research was efficiently and successfully accomplished by the field teams. Dedication and hard work of the supervisors and interviewers in carrying out their assignment in field deserve special appreciation.

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The task was accomplished in a professionally conducive environment by a team of NIPS under the leadership of Mr. Amanullah Bhatti, Project Director, Mr. Ali Anwar Buriro, Principal Investigator, Mr. Faateh ud din Ahmad, Data Processing Manager, Ms. Rabia Zafar, Co-Principal Investigator deserve special commendation for successfully conducting the survey and producing this report.

I hope the findings of the study of FWCs will be helpful for improvement the quality of services of FWCs for the betterment of population welfare and health sectors. The study also provides valuable information and could be used as a benchmark for the development plans and the strategy of all the sectors particularly services delivery system of Population Welfare Programme.

SAEED AHMAD KHAN
Executive Director

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Target group comprised the following broad categories: In-charge of the FWCs, District and Tehsil Population Welfare Officers, registered and exit clients and general public (male/female). The sample was drawn from four provinces, ICT, GB and AJK.

We acknowledge the contribution of several individuals, organizations and technical committee of the project for their assistance at different stages of the project. Special thanks to the DPWOs, TPWOs, In-charges of FWCs, Clients and general public, who spared their precious time and provided us their valuable, honest and frank opinions. . The financial and technical support for the project provided by United Nations Population Fund (UNFPA) is highly acknowledged. Without their support it would not have been possible to conduct this survey.

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*Ali Anwar Buriro
Principal Investigator
Rabia Zafar
Co- Principal Investigator*

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SUMMARY FINDINGS

(A) Situation Analysis of FWCs

The Family Welfare Center (FWC) is the main service delivery outlet of the Population Welfare Programme in the public sector providing family planning, maternal and child health care, and reproductive health services in the country. Module-I of study used for situation analysis of the FWCs to identify internal and external forces that may influence the center's performance and to assess FWCs existing strengths and weaknesses. It covered various areas such as availability of water and source of its supply, electricity, maintenance of privacy of clients while getting services, location and condition of centre's building, distance of centers from District and Tehsil Population Welfare Offices, installation of sign boards, staff strength and availability of contraceptives, medicines, furniture and equipment, knowledge of job responsibilities as incharge of FWC, then place of residence, education, training, skill and work efficiency while serving clients and community persons, coordination with other FP & RH services providers, availability of IEC material and details about various services provided by the centers and problems faced by FWC's In-charges.

Summary Findings (Module-I) Situation Analysis

Indicator and Type/Condition	Punjab	Sindh	KPK	Balochistan	Region	Total
Residence of In-charges in the same city/village of posting to FWCs						
Residence in same city/village of posting to FWCs	53.1	67.6	64.0	50.0	57.1	57.5
Installation of main direction and sign board installed						
Main direction/ sign board installed	78.6	64.7	36.0	90.0	100.0	71.3
FWC's staff position						
FWA (F) working as In-charge of FWCs	9.2	8.8	0.0	20.0	0.0	8.0
FWWs/Cs	94.9	78.6	79.6	91.8	81.6	96.6
FWA (Female)	97.1	88.2	82.4	79.4	88.2	82.8
FWA (Male)	100.0	84.0	92.0	96.0	92.0	82.8
Aya	100.0	90.0	90.0	100.0	90.0	90.8
Chowkidar	100.0	100.0	85.7	100.0	85.7	85.1
Rooms available in FWC building						
One	7.1	23.5	32.0	10.0	14.2	14.4
Two	36.7	44.1	24.0	70.0	28.5	37.9
Three or more	56.1	32.4	44.0	20.0	42.7	44.7
Availability of Medical Examination Rooms for Clients						
Audio/Visual Privacy	86.7	82.4	100.0	90.0	85.7	87.9
Cleanliness	90.8	88.2	100.0	100.0	85.7	92.0
Adequate light	92.9	67.6	92.0	70.0	100.0	86.8
Availability of IEC material						
Posters	91.8	91.2	72.0	80.0	85.7	87.9
Pamphlets/Leaflets	93.9	97.1	80.0	90.0	71.4	91.4
Books	66.3	88.2	68.0	100	71.4	73.0
Others	18.4	5.6	00	00	14.3	12.1
Maintain Baseline Data of Households Level in Catchment						
Baseline data of Households	59.2	58.8	76.0	50.0	100.0	62.6
Referrals clients to different sources						
Refer to RHS center	73.4	69.7	72.0	50.0	33.3	69.9
Consult other Doctor	52.1	18.2	28.0	87.5	33.3	42.8
Others	14.9	24.2	24.0	37.5	66.7	21.1
Transportation provided by FWCs to their CS Clients						
Transport from residence to hospital and back	19.4	26.5	12.0	20.0	28.6	20.1
From hospital to residence only	6.1	32.4	4.0	20.0	57.1	13.8
Fare paid to clients for public transport	11.8	48.0	10.0	28.6	22.4	20.4
No fare was paid to clients for public transport	35.7	5.9	20.0	40.0	42.9	28.2
Number of clients who dropped the family planning method (s)						
Less than 25	49.4	40.0	36.4	60.0	66.7	47.2
25-100	36.7	33.3	36.4	40.0	33.3	36.2
101-800	8.9	20.0	22.7	0.0	0.0	11.8
DK	5.1	6.7	4.5	0.0	0.0	4.7
Community level Activities of FWCs						
Health Talks	81.3	80.0	85.7	87.5	100.0	82.5
Sukhi Ghar Mehfls	29.6	50.0	56.0	20.0	14.3	36.2
Mohallah Sangats	26.5	50.0	32.0	11.1	14.3	30.6
Monitoring visits by TPWOs during financial year 2009-10						
No visit	16.3	70.6	40	90	100	37.9
Upto 3	18.4	14.7	40	10	0.0	19.5
4+	65.3	14.7	20	0.0	0.0	42.5
Monitoring visits by Officers of provincial Population Welfare Departments						
No any visit	78.6	70.6	76	100	100	78.7
Upto 3	13.3	29.4	16	0.0	0.0	15.5
4 and more	8.1	0.0	8	0.0	0.0	5.7
Monitoring visits by Officers of Ministry of Population Welfare						
No any visit	16.3	70.6	40	90	100	37.9
Upto 3	18.4	14.7	40	10	0.0	19.5
4 and more	65.3	14.7	20	0.0	0.0	42.5

(B) Perception of Clients

FWC Clients observations are assumed to play a significant role to evaluate the performance of the FWCs. Two types of clients were interviewed for the study. The clients who have received FP services and registered in the sampled centers and the exit clients those came to obtain any service from the centre at the day of interview. Module – II, Female Client’s Perception used to cover the information on client’s background characteristics, knowledge about FWCs, home visits of staff, client’s visit to center, their views about services, use of contraception, reasons of non use, experience of side effects, future intentions to use contraception and suggestions to improve the working of centers to achieve the targets. The Summary of indicators with major findings about client’s perception is presented in the table below.

Summary Findings (Module – II) Perception of Clients

Indicators and type/ condition	Punjab	Sindh	KPK	Balochistan	Region	Total
Knowledge of Registered Clients						
Knowledge of registered clients about FWCs	93.7	100.0	86.1	100.0	100.0	94.4
Main Source of Knowledge about FWCs						
Friends/ Relatives	62.0	68.2	24.7	63.3	60.2	58.1
FWA	31.6	43.3	47.8	58.2	50.0	38.7
FWW/Councilor	27.9	50.6	33.7	27.8	45.5	34.0
FWC Visits by Clients						
Registered Clients Ever visited to FWC	96.9	97.6	97.0	100.0	98.1	97.3
Home visits of Staff						
FWW/C visited	30.1	69.8	37.6	48.1	63.6	41.7
FWA Visited	43.7	60.4	70.8	64.6	60.2	52.7
Method to be used in future						
Female sterilization	35.1	40.0	25.0	0.0	0.0	28.2
Pills	8.1	15.0	50.0	16.7	60.0	16.7
IUCD	13.5	10.0		25.0		12.8
Injectables	13.5	15.0	25.0	25.0	40.0	17.9
Condom	18.9	15.0	0.0	33.3	0.0	17.9
Implant/Other	10.8	5.0	0.0	0.0	0.0	6.4
Non users motivated by staff to restart contraceptive use	60.3	80.6	60.0	47.4	62.5	63.5
Satisfaction with the services of FWC						
Provision of contraceptives	97.1	97.5	92.0	100.0	87.5	96.1
Home visits by FWW/C & FWA (F)	57.4	87.3	68.2	74.7	79.5	66.9
Counseling services	87.8	82.0	52.3	72.2	86.4	81.0
Waiting place	92.2	90.6	51.7	97.5	83.0	86.2
Timely treatment	89.6	91.0	48.9	96.2	86.4	84.6
Attitude of In-charge	97.0	93.9	55.1	96.2	79.5	89.6
Attitude of FWA (F)	80.7	82.0	54.0	94.9	85.2	78.5
Punctuality maintained by staff	68.7	74.6	46.6	91.1	63.6	67.9
Timely referring	53.4	54.9	41.5	75.9	51.1	53.3
Handle complications promptly	46.6	52.0	38.6	70.9	37.5	47.4
IEC material distribution	24.5	28.3	35.8	24.1	35.2	27.4
Shows organized by FWCs						
Sukhi Ghar Mehfls	14.8	22.5	24.4	8.9	25.0	17.8
Mohallah Sangats	7.0	10.7	6.8	1.3	19.3	8.1
Baby Show	13.9	28.7	31.8	10.1	12.5	18.7
Cultural Carft	1.2	3.7	3.4	0.0	1.1	1.9

(C) Perception of Community Persons

Perception of community about the service delivery outlets and their expectations can help in improving service delivery and higher utilization of family planning and health care services available at the centers. Module – III, Perception of Community Persons was developed to assess the community's perception and their satisfaction of family planning and primary health care services available at FWCs in the community. The Summary of indicators with major research findings about community's perceptions is presented in the following table.

Summary Findings (Module - III) Perception of Community Persons

Indicators and type/ condition	Punjab	Sindh	KPK	Balochistan	Region	Total
Knowledge and Visit to FWC						
Knowledge about FWC	81.9	81.8	72.8	87.3	97.1	81.5
FWC staff ever visited community	62.9	76.3	61.5	62.5	85.3	66.4
Ever visited FWC	73.4	76.3	78.0	56.3	91.2	74.3
Accompanied any client to FWC	57.5	66.0	64.8	51.9	71.0	60.7
Views about the Facilities/ General Condition						
Privacy maintained by FWC In-charge	93.9	96.2	98.6	100.0	90.3	95.1
Staff always present at the time of visit	83.7	90.6	81.7	81.5	96.8	85.4
Only some times present	10.9	8.5	18.3	18.5	3.2	11.3
Staff properly provide information	93.2	95.3	93.0	92.6	100.0	94.0
Cleanliness maintained in centre	94.9	97.2	93.0	92.6	96.8	95.1
Future Plans to Obtain Services from FWCs	28.6	21.2	40.0	23.8	33.3	28.0
Reasons not to plan to go FWC						
No need of family Planning	58.7	54.5	50.0	14.3	100.0	52.4
Center is usually closed/staff not present/behavior not good	15.9	27.3	50.0	35.7	0.0	21.4
Its against religion/family Opposed	12.7	4.5	0.0	0.0	0.0	8.7
Views about the Community Meetings						
FWC ever arranged meetings	44.1	46.0	35.2	25.0	58.8	42.8
Ever attended meetings	55.1	70.3	68.8	83.3	70.0	61.8
Attended less than 3 meetings	80.4	73.3	77.3	50.0	42.9	73.9
Attended 3 and More meetings	19.6	26.7	22.7	50.0	57.1	26.1
Views about Information provided by FWC's staff						
Information Useful	80.2	79.1	72.5	79.2	97.1	79.7
Information Covers different Areas						
MCH Care	27.5	20.9	37.9	50.0	27.3	28.9
Population control	13.8	3.6	12.1	13.2	27.3	12.3
Family planning	35.9	41.8	21.2	42.1	33.3	35.6
Better health	14.4	14.5	13.6	13.2	9.1	13.9
Economic/social benefits of family planning	21.3	34.5	10.6	2.6	12.1	20.8
Birth spacing/family size	25.9	36.4	45.5	10.5	6.1	28.0

(D) Supervision and Monitoring by DPWOs and TPWOs

(i) DPWOs:-

The District Population Welfare Officers are responsible for implementation of Population Welfare Programme in their respective district across the country through service delivery outlets. Coordination with the other family planning and reproductive service providers in the district is also the one of the main responsibilities of DPWOs. They are also responsible for supply of contraceptives to all the service delivery outlets working under their supervision and responsible to provide contraceptives, IEC material, activities regarding creating awareness about family planning at the district level. Total forty eight DPWOs (thirty eight percent of total district) were interviewed throughout the country including regions (GB/ICT/AJK). The following summary table shows the key findings:-

Summary Findings (Module-IV) Supervision and Monitoring

Indicators and type/condition	Punjab	Sindh	KPK	Balochistan	Region	Total
Monitoring and Supervision by DPWOs						
Average Monitored per month	44.4	54.0	24.4	74.0	5.1	0.0
Monitored in last month (prior to study)	26.5	53.1	22.8	69.0	4.8	0.0
Frequency of Monitoring visits by DPWOs						
Weekly	28.6	60.0	33.3	20.0	60.0	37.5
Fortnightly	0.0	0.0	0.0	20.0	0.0	4.2
Monthly	21.4	20.0	44.4	50.0	40.0	33.3
2-Months+	14.3	10.0	0.0	10.0	0.0	8.3
Others (twice a week or per tour program)	35.7	10.0	22.2	0.0	0.0	16.7
DPWOs addressed tasks during monitoring of FWCs						
Contraceptive stock	92.9	100.0	100.0	90.0	100.0	95.8
Follow-up visits of FWCs staff to Family Planning clients	57.1	50.0	77.8	40.0	80.0	58.3
IEC material	57.1	80.0	88.9	90.0	80.0	77.1
Accompanied FWWs/FWCs for clients verification	42.9	20.0	44.4	50.0	80.0	43.8
Furniture and equipments	78.6	60.0	66.7	100.0	80.0	77.1
Visit hard core couples for motivation	21.4	60.0	55.6	30.0	60.0	41.7
Assess the training needs of centre's staff	57.1	50.0	55.6	90.0	100.0	66.7
Newly married couple's registration	42.9	60.0	44.4	40.0	60.0	47.9
Observe signboards installation	57.1	70.0	77.8	40.0	40.0	58.3
Eligible couples registered	50.0	90.0	77.8	80.0	80.0	72.9
Eligible couples visited by staff per month	42.9	40.0	66.7	20.0	60.0	43.8
Current users of FP	78.6	60.0	77.8	100.0	100.0	81.3
Switched methods during a month	57.1	30.0	66.7	80.0	40.0	56.3
Dropouts clients during a month	64.3	40.0	66.7	20.0	60.0	50.0
Vasectomy cases	35.7	40.0	66.7	30.0	40.0	41.7
New clients during a month	50.0	50.0	66.7	80.0	80.0	62.5
Availability of medicines	85.7	80.0	100.0	100.0	100.0	91.7
Record of health talks	57.1	50.0	66.7	90.0	60.0	64.6
Others (cleanliness, cash book preparation, FWCs friends meeting and instructions for more coordination)	7.1	20.0	22.2	0.0	20.0	12.5
DPWOs ever attended Community level Programmes arranged by FWCs in their areas						
attended Health Talks/Group Meetings	71.4	80.0	88.9	50.0	80.0	72.9

(ii) TPWOs:-

TPWOs are responsible to provide administrative and logistic support to different service outlets, coordinate with other departments for the promotion of family planning particularly with health departments and other Provincial Line Departments (PLDs), to compile and consolidate reports for onward submission to the district officers. The TPWO is also responsible to organize meetings/group meetings, film shows and other activities of Information Education and Communication (IEC) in their respective tehsils. Total forty four tehsil officers were covered. Following summary table shows their performance:-

Summary Findings TPWOs (Supervision and Monitoring)

Indicators and type/condition	Punjab	Sindh	KPK	Balochistan	Region	Total
Monitoring visits by TPWOs						
Weekly	62.1	50.0	0.0	0.0	0.0	52.3
Monthly	27.6	40.0	100.0	0.0	0.0	38.6
2 and more	3.4	0.0	0.0	0.0	0.0	2.3
Others <i>(twice a week, as per tour programme or surprise visits)</i>	6.9	10.0	0.0	0.0	0.0	6.8
TPWOs attended community level programmes arranged by FWCs in their areas						
Health talks/ Group meetings	64.3	70.0	100.0	0.0	0.0	69.8
0 meeting	10.7	44.4	0.0	0.0	0.0	16.7
1 meeting	89.3	55.6	100.0	0.0	0.0	83.3

Chapter 1

INTRODUCTION

Population Welfare Programme (PWP) in the country is an ongoing development endeavors operating since 1960 within the framework of nationally accepted broad-based and strategically focused population and development policies. With the aim of encouraging voluntary adoption of small family norms, to provide safe and reliable family planning to couples of reproductive age (15-49 years) to space and limit family size according to their desire. The Family Welfare Centres (FWCs) project was initiated in 1980. These were integrated into the National Population Welfare Programme during 6th Five-Year Plan (1983-88).

FWC component is one of the cornerstone and most extensive institutional network of PWP in the country including Azad Jammu and Kashmir (AJK) and Gilgit Baltistan. The major functions of FWCs are to provide fertility regulatory services to the community (catchment areas) as a static facility in the areas of family planning, reproductive health services, maternal and child health care (MCH) and general ailment to population (7000 to 12000 population) and also through its outreach satellite clinics to about 20,000 to 25,000 population in the catchment areas.

The scope of work of FWC was expanded after International Conference on Population and Development (ICPD, 1994) and Fourth World Conference on Women in 1995, there has been dramatic change in population policies and programmes around the world. Particularly in developing countries, consequence of this paradigm shift has changed the focus of these policies and programmes from population control to reproductive health emphasizing a holistic approach to women's health and well-being. The ICPD recommended that the family planning programme should respect the reproductive rights of individuals in general and women in particular, it should also aim at narrowing the gender inequalities. It was further advocated that population programmes aimed to facilitate couples to have children as they desire in timing number and also to assist mothers through pregnancy and child birth safely, so that the outcome of pregnancy is successful in terms of maternal and infant survival and well-being (Evaluation of Urban FWCs in Karnataka, Ministry of Health and Family Welfare, Government of India, New Delhi, 2005). Thereafter several other elements were included relating to reproductive health, safe-motherhood, infant's health care, and management of Reproductive Tract Infections-RTI/Human

Immune Virus-HIV/Acute Immune Deficiency Syndrome-AIDS. In the 9th plan period, following specific measures to uplift the activities of FWCs were adopted and decided that the same will continue during this plan period:-

- i. Every centre has to prepare baseline data (total population, number of eligible couples and number of old and new acceptors of contraception) at household level in their catchment areas.
- ii. Ensured visibility of FWCs through display of signboards and direction boards at appropriate place with complete address.
- iii. Every centre has to provide with adequate IEC material consisting of posters, pamphlets, leaflets and brochures dealing with “Know-how of family planning”.
- iv. Every FWW has to receive in-service training of two weeks at least every two years. In addition, on-job technical guidance was ensured through field visits by Deputy. District Population Welfare Officer (DDPWO) (Technical).
- v. In-charge of each centre to hold satellite clinics twice a week in the nearby villages on fixed days. A minimum of six camps were to be held during a month in the identified villages where no other service outlet exists.
- vi. Availability of Essential Inputs: Equipment, Medicines, Furniture, Contraceptives, IEC material, Registration/Counseling/Follow-up of eligible couples, Daily Client Register, Client Record Card (CRC), Diary for Injectables.
- vii. Future Vision for strengthening of FWCs:
- viii. Following additional activities will be undertaken to ensure client centered approach and enhance community participation (Community mobilization through Social Mobilizers (Male and Female).
 - a. **Coordination with other Government Departments and Civil Society Organizations:** Coordination with line departments and civil society organizations will be strengthened. The Department of Health will be specifically involved through LHWs programme.

- b. **Management Committee:** Every FWC will have a Management Committee consisting of satisfied clients, wives of local influential, social workers and teachers, to generate community support for improved working. This will be expanded to include besides others, LHWs/LHVs, representatives of NGOs, TBAs, lady councilors etc. Involvement of elected female leadership will not only enhance political support, but also advance empowerment of women.
- c. **Career Planning of FWC Staff:** provide upward mobility, career path for staff of FWCs up to Field Technical Officer (BS-16).
- d. **Monitoring/Supervision:** Monthly visits by the District Managers for monitoring/supervision of the staff of the centers. DDPWO (Technical) provides on job training during such supervisory visits and conduct exit interview of clients to assess quality of services and satisfaction of clients.

1.1 Functions of FWCs

Each Family Welfare Centre performs the following functions:-

- i. Family Planning information, counseling, services and follow-up for all family planning methods except implants and contraceptive surgery.
- ii. MCH services through static facility as well as through satellite clinics.
- iii. Infant health care including nutritional advice, growth monitoring and treatment of common ailments.
- iv. Regular health education sessions on topics according to the need of the community through 'Muhalla Sangat' to create awareness on small family norms, female literacy, human rights and gender equity.
- v. Orientation sessions for elected female counselors on the topics such as family planning, population and development, gender equity and status of women in Islam.
- vi. Availability of contraceptives, medicines and other supplies and maintaining equipment in good working condition.
- vii. Referrals of hardcore cases of family planning, infertility, HIV/AIDS and those seeking contraceptives surgery/implants to appropriate facility.

1.2 Staffing Pattern

According to the Federal PC-1 of MoPW (defunct) each centre will have the following staff for all activities:-

Table 1.1: Staffing Pattern for each Family Welfare Centre

S. No.	Position	BS	Number
1.	FWW/ Counselor	9/11	1
2.	FWA (Male)	7	1
3.	FWA (Female)	7	1
4.	Female Attendant (Aya)	1	1
5.	Chowkidar	1	1
Total			5

1.3 Literature Review

An evaluative pilot study titled “Evaluation of Outreach Component in the Family Welfare Centers” was conducted by NIPS in Rawalpindi District in 1986. This study concluded that the clientele of both urban and rural FWCs were pre-dominantly local. Use of the FWCs was constrained by the prevailing low-level of awareness of the existence. It was also found that most of the women coming to centres for the health care services and quarter of eligible women were using contraceptives provided by FWCs. Staff of centres need to undertake motivation effort in the vicinity for adoption of family planning methods by the eligible women. (Michael Semple, Yasmeen Mitha, 1986 (NIPS).

A study “Functional Task Analysis of Family Welfare Centres; A district level study” carried out in four Tehsils of Sheikupura (Punjab). The study found that in general the FWWs spent fifty nine percent of their time in non productive activities, only forty one percent of time they spent on direct services, of which twenty percent time was spent on family planning, twelve percent on general ailment and eight percent on maternal health. (Manzoor, NIPS).

Ministry of Population Welfare conducted a study titled “Family Welfare Centres Vicinity Study, 1993” based on sample of 1290 functioning FWCs in all four provinces and in the Federal District Islamabad. One of the main findings of the study was that sixty four percent of the respondents in the catchment area (currently married women age 15-49 years) didn’t have

knowledge about FWCs' however, the reasons mentioned that location of centres were not properly guided through signboards (Hashmi et.al, 1993).

Study titled "Evaluation Report of 52-Family Welfare Centres in the NGO Sector" was undertaken in 1994 pointed out that there are deficiency in available furniture, poor record keeping, staff lacked capabilities of office management and technical capabilities, and irregular supply of medicines and contraceptives. Study recommended that in order to enhance the performance of FWCs the pay scales of FWWs and Motivators should be revised, frequent group meetings should be arranged with the maximum participation, (Hakim & Parveen, 1994, NIPS).

NIPS undertook an important evaluative study titled "Evaluation of FWCs; *An Assessment of the Quality of Services and Situation Analysis*" in 2000 at national level, the study revealed that:-

- i. Out of total 5840 sampled FP acceptors, only 1614 (28%) clients were traced.
- ii. About twenty seven percent cases were found fake.
- iii. Duplicate entries were found in the centers record.
- iv. Apart from the clients who had accepted a method for the first time, FWWs have misreported old cases as new ones to increase number of cases.
- v. Seventeen percent of the clients stopped using contraceptives due to having side-effects.
- vi. Forty-eight percent of the clients were found not current users at the time of study.
- vii. Thirteen percent clients reported that centre's staff didn't explain all contraceptives, whereas seventeen percent reported that they were not briefed about merits and side-effects.
- viii. Forty-nine percent of the FWCs reported that no supervisory visits were paid by the DPWOs/TPWOs.
- ix. It was identified that only twenty four percent FWAs visited at home and registration of the clients by them was found dissatisfactory.

The key issues for the success of Population Welfare Programme are to improve coverage and accessibility to family planning services, and to meet the large unmet need that exists. Factors promoting small family norms and use of contraception suggest that knowledge of a source and

easy access to a service outlet are strongly related to contraceptive use for both urban and rural women (Mahmood and Ringheim, 1997).

The credibility of FWCs as a source of family planning or MCH outlet is also not yet established, as most of the clients come to these centers for general ailments considering it to be a centre of basic health services (World Bank, 1989). According to estimate of Population Welfare Division, an average of about 2 to 3 clients per day visited these centers for family planning services (PWD, 1986).

Improving the quality of care for service providers means understanding their cultural values previous experience and perception of the role of health system and then arranging reproductive health providers and the community together to map out the shared vision of quality. Similarly, enhancing the quality of care for providers required identifying their motivations, addressing their needs and helps them to better understand and address client's concepts of quality (Creal et al, 2003).

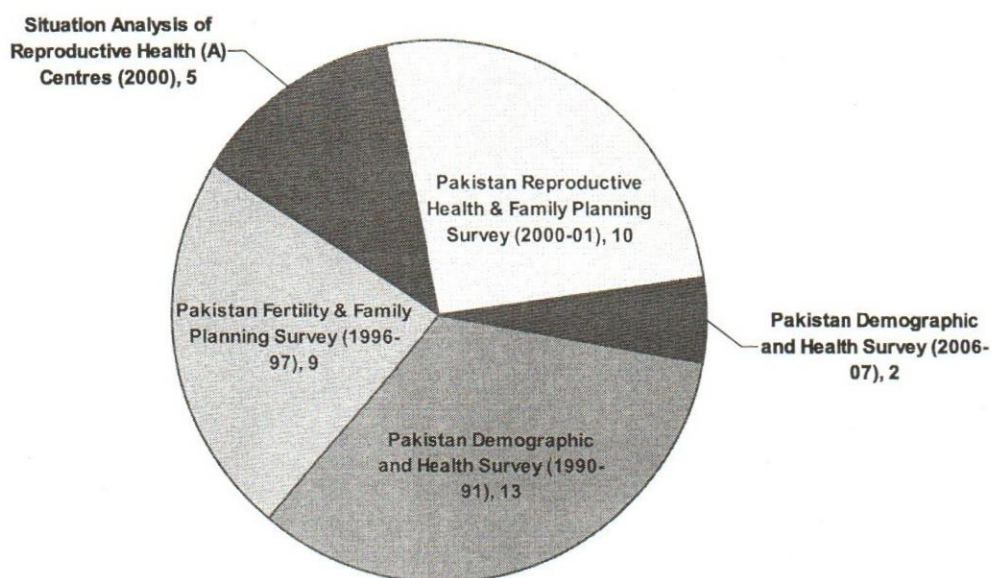
1.4 Study's Rationale

According to various evaluation studies as mentioned above (literature review) and Pakistan Demographic and Health Survey, 2006-07 conducted by NIPS, that the performance of FWCs is declining. The following table (1.2) reveals that the current users of family planning at the time of survey periods (PDHS, 2006-07) who obtained contraceptives from FWCs has considerably declined from thirteen percent in 1990-91 to less than two percent in 2006-07 (PDHS, 2006-07, NIPS).

Table 1.2: Percentage of Ever Married Women who Used FWCs as a Source of Contraceptives Supply by Various Studies

Title & Year of Survey	FWCs as a Source of Contraceptive Supply (1990 – 2007)
Pakistan Demographic and Health Survey (1990-91)	12.8
Pakistan Fertility & Family Planning Survey (1996-97)	9.4
Situation Analysis of Reproductive Health (A) Centres (2000)	4.5
Pakistan Reproductive Health & Family Planning Survey (2000-01)	9.9
Pakistan Demographic and Health Survey (2006-07)	1.8

Figure 1.1: Ever Married Women who Used FWCs as a Source of Contraceptives Supply by Various Studies



Keeping in view the above findings it is important to conduct an in depth study to evaluate the performance of FWCs and to identify reasons for this decline in the performance and to suggest remedial measures for its improvement.

1.5 Objectives

The following were the objectives of the study:

- i. To undertake situation analysis of FWCs in terms of location (visibility, accessibility), physical facilities, staffing strength, logistics etc.
- ii. To determine the knowledge and skills of the service providers.
- iii. To find out the quality of services provided to clients.
- iv. To assess the level of client satisfaction with the services provided at the FWCs.
- v. To examine the supervisory and monitoring mechanism at district and tehsil level.

1.6 Sample Design

Three stage stratified random sampling design was adopted for the study. At the first stage 176 FWCs were selected by systematic random sampling from the four provinces, Islamabad, AJK and Gilgit Baltistan. It is about seven percent of the existing functional FWCs (2518) at the time of study, excluding FWCs under UNFPA project and FATA. At the second stage forty percent DPWOs were randomly selected from the districts of the sampled FWCs and TPWOs of selected

districts were also covered. Finally, ten clients of family planning who obtained services during 1st July, 2009 to 30th June 2010 from the selected FWCs were randomly selected from the record. Five exit clients were also interviewed those received services at the day when survey teams were visiting the FWC. In all a total of 1377 clients were successfully interviewed. Besides, five persons from the community of the selected FWCs were also interviewed who were available in the vicinity.

1.7 Coverage of Sample

The table below presents the details of selected samples for each category:

Table 1.3: Module-wise Sample Size by Region

Regions	Total functional FWCs (October, 2010)	Sampled (7%)	Module-i	Module-ii	Module-iii	Module -iv	
		Selected FWCs	Situation analysis of FWCs	Clients (10 of record+ 5, exit)	5-Community Persons (2-M and 3-F)	DPWOs	TPWOs
Punjab	1398	98	98	1304	490	14	29
Sindh	489	34	34	441	170	10	10
KPK	376	26	25*	329	125	9	5
Balochistan	154	11	10**	133	55	10	--
G-B	37	3	3	45	15	2	--
Islamabad	29	2	2	20	10	1	--
AJK	35	2	2	29	10	2	--
Total	2518	176	174	2301	875	48***	44

* One FWC of KPK (Chitral District) was not covered due to extreme weather conditions

** One FWC found locked by field team while data collection

1.8 Questionnaires/Modules/Methodology

In order to meet the study objectives, four types of modules (questionnaires) were developed and consequently utilized for data collection. All modules were developed in English and were translated into Urdu for better understanding of the enumerators and the respondents. Both pre-coded and open ended questions were asked in the study. Modules were pre-tested in the field before finalization.

The brief methodology for each module is as under:-

(i) Module-I (Situation Analysis of FWCs)

Centre's situation was assessed on the information provided by In-charges of FWCs; as a result, total 174 interviews were conducted. In different sections it was also examined that

how effective the quality of care is being maintained during providing services to the clients at centre and door-step.

(ii) Module-II (Female Client's Perception)

To know the general perception of clients about family planning services and centres, the information was gathered from ten-registered clients randomly selected from the centre's registers who obtained family planning services during financial year, 2009-10 and five-exit clients were also interviewed after they received services from the centre on the day of visit.

(iii) Module- III (Community Person)

This module was used to interview community persons to assess the performance of staff of selected centers regarding planning for different activities i.e. talks/shows, health meetings, counseling and promotion of family planning, reproductive health and other issues of population. Data was collected from five ever married community persons, two males and three females from the vicinity of each FWC.

(iv) Module- IV (Supervision & Monitoring by DPWOs/TPWOs)

The module was used to interview the district managers; to know the management tiers functions and their monitoring and supervision mechanism of service providers at the district and tehsil levels, total forty eight DPWOs and forty four TPWOs were covered.

1.9 Field Staff and their Responsibilities

Thirteen teams were recruited for carrying out field work of the study. The selection was made considering their previous field experience and qualifications (Master's degree for Supervisors and Bachelor's degree for Interviewers in subjects of Sociology, Anthropology, Economics, Population Studies, Demography and Social Sciences). Regional language preference was an important criterion for the selection of the field staff.

Each team is consisting of one male supervisor and two female Interviewers. The team supervisor was responsible for the overall team management i.e.; arranging vehicles/logistics, establishes close contact with NIPS office, lodging and boarding of team members, arrangement of suitable accommodation for team including driver of vehicle and also ensured the quality of data collected by interviewers. The most important responsibility of the supervisor was to dispatch completed modules of the selected FWCs to NIPS head office.

The female interviewers have collected information on the modules design for the clients. The interviews were conducted at the residences of registered female clients and at the centre for exit clients, just after they received the services. The female interviewer was responsible to cover selected clients as per instructions of supervisor. Before leaving the client's household, she was responsible to ensure that module is completed in all respect. She was also responsible to edit the modules after completing the day work and hand over these to the team supervisor. After quick review of filled- in modules, supervisor has to ensure that the modules are completed in all respect, if he found any incomplete response he has to asked the interviewer to re-visit the client's household for completing remaining questions. Interviewer was also bound to extend cooperation with other team members.

To maintain the data quality, core team of the project visited field to monitor and assess the team's performance and observed the process of data collection and verified sampled clients.

1.10 Institutional Framework

The National Institute of Population Studies (NIPS) undertook the responsibility of implementing the project with financial support by Government of Pakistan (MoPW) and UNFPA. The logistic support was provided by Provincial Population Welfare Departments including AJK during the field work. A Technical Advisory Committee (TAC) consisting of population professionals/experts, and researchers from relevant fields was formed to provide guidance and support at various stages of the survey. NIPS was responsible for planning, organizing, and overseeing the survey operations, including hosting meetings to discuss the survey like; recruiting, training, and supervising fieldworkers and data processing, finally analyzing and writing the report.

1.11 Field Supervision and Monitoring

Ensuring high-quality data was a prime objective of the study, it was assured through regular supervision and monitoring of NIPS teams during fieldwork. Core team members visited the teams in the sampled areas on a regular basis. All members followed the field teams to support and facilitate them in conducting the interviews, understanding the sample selection procedures, conducting interviews in all questionnaires, assigning interviewers, editing the questionnaires, observing team coordination/management and ensuring efficient use of their time in field. The core team members visited the teams at least once a month. Team supervisors were responsible

for the performance of their teams. Team performance was judged by team cohesion and discipline, timely arrival in sampled FWCs/areas and revisited centres/households of registered clients accordingly. The Project Director, Principal Investigator, and Co- Principal Investigator monitored the field activities regularly throughout the survey duration in sampled areas. A set of quality control checklists for critical indicators were given to monitoring members during the visits. Problems emerged were reviewed and solved timely and were discussed with the relevant teams. Regular meetings of the core members were held at NIPS to exchange views on progress, performance, problems, solutions, and future strategies. These meetings were helpful in resolving field problems and improving the quality of data collected from the field.

Filled Modules were returned regularly from the field to NIPS headquarter in Islamabad, where they were edited and entered by the data processing teams who were specifically trained for this task.

1.12 Field Problems

To cover the costs of operating official vehicles, communications and per diem payments to all team members, NIPS established a comprehensive system to ensure adequate funds but due to the devolution of the MoPW, in the light of 18th Amendments and surrendering the funds of NIPS along with MoPW, the funds flow to the teams was disturbed, consequently, the data collection process was badly suffered.

1.13 Training of Field Teams

Ten days training programme includes the detailed description of the concepts/contents of the modules, interviewing techniques, and lectures on demographic indicators such as fertility, reproductive health, family planning, quality of care at FWCs, procedure for data collection and selecting sample randomly from registers maintained at the FWCs.

The training held at local hotel Islamabad to provide better environment to the field force/trainees came from different parts of the country. The training on modules was given by NIPS master trainer and experts were invited from different reputed organizations/ministries/departments for special lectures during the training.

The training also covered various aspects/topics such as historical perspective of Population Welfare Programme (PWP), district management tiers, role of FWCs in PWP as a core component of service delivery network, importance of evaluation and assessment, quality control

procedure to be adopted during data collection, introduction of family planning methods, sources of family planning & reproductive health services delivery in Pakistan, Information Education and Communication strategy for the promotion of PWP, use of survey findings in policy implications, importance of surveys, contraceptive and logistic support adopted by MoPW (defunct), field experience with reference to reliability and quality of data, lectures on accounts and administrative matters, mock interviews, pre-testing/practical training (discussed problems identified during pre-testing) and trainees assessment.

1.14 Data Collection

After conducting a centralized comprehensive training, teams were sent to their respective sampled areas. The female Interviewers were responsible for conducting the interviews and editing the filled-in questionnaires, the supervisors were responsible for dispatching the filled-in modules to head quarter on daily basis.

To maintain quality of the data while its collection, core team of NIPS visited field to assess the data collection procedure adopted by the teams, to observe live interviews, to record any other problem (s) being faced by the team members and logistic support by the district and tehsil managers.

1.15 Data Processing and Analysis

In-charge of computer laboratory (NIPS) developed a programme for entering the data. He arranged training sessions for Data Entry Operators at NIPS in order to enter data simultaneously in to the computers. A group of Office Editors was responsible to edit and check data range, structure and a selected set of checks for internal consistency. In addition, editors were responsible to deal with open-ended responses recorded by the Interviewers. The filled-in modules were entered accordingly.

1.16 Financial Outlay and its Management

To carry out all activities of the project, the Executive Director of NIPS was the competent and implementing authority of study for administrative and financial matters. The Director (R&S) has taken over the responsibility of administrative and financial matters after Executive Director. To conduct the project activities, Principal Investigator (P.I) and Co-Principal Investigator were responsible for completion of the study and preparation of the final report.

Chapter 2

SITUATION ANALYSIS OF FWCs

The Family Welfare Center (FWC) is the main service delivery outlet of the Population Welfare Programme in the public sector providing family planning, maternal and child health care, and reproductive health services in the country. This chapter presents situation analysis of the FWCs to identify internal and external forces that may influence the center's performance and to assess FWCs existing strengths and weaknesses. Module-1 of the study used for this purpose it covered various areas such as availability of water and source of its supply, electricity, maintenance of privacy of clients while getting services, location and condition of centre's building, distance of centers from District and Tehsil Population Welfare Offices, installation of sign boards, transportation facilities available in the area, staff strength and availability of contraceptives, medicines, furniture and equipment, posting of Family Welfare Worker/Counselor as In-charge at FWCs their background characteristics, job responsibilities, experience in Population Welfare Programme and as In-charge of FWC, place of residence, education, training, skill and work efficiency while serving clients and community persons, coordination with other FP & RH services providers, availability of IEC material and details about various services provided by the centers and problems faced by FWC's In-charges.

2.1 Status of Posting of FWW/FWCs as In-Charges of the Centers

According to existing rules of business for FWCs the Family Welfare Worker or Counselor is to be the In-charge of the center. The results in table 2.1 below indicate that at the time of survey eight percent centers were such where FWWs/Cs not posted and Family Welfare Assistants (female) were working as In-charge of the centers. Province wise analysis reveals that one fifth (20 percent) of the FWCs in Balochistan did not have FWW/Cs and about one in ten FWCs in Punjab and Sindh were such where FWA (female) working as In-charge of the centers. It means that these centers are not fully functional and working below their capacity. The FWA may keep the center open and supply contraceptives to the clients, however, she may not be able to deal cases of serious nature of family planning (side effect) or suggest suitable method of contraceptive to new visiting FP clients and others maternal and reproductive health cases, as

special training is required for handling such cases. The province of Balochistan is more affected than other provinces as twenty percent of centers did not have FWWs/Cs.

Table 2.1: Status of posting of FWW/FWC as In-Charges of Centre at the time of Survey by Designation and Province/Region (Percentage)

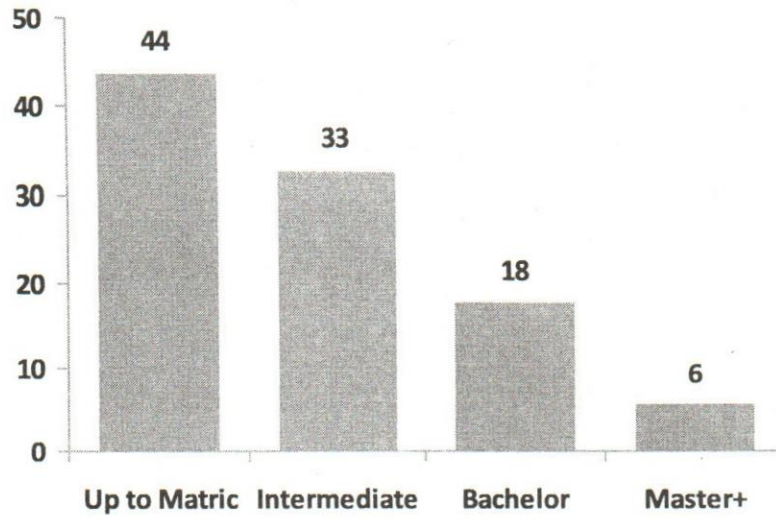
Province/Region	FWW/C	FWA (F)	Total
Punjab	90.8	9.2	98
Sindh	91.2	8.8	34
KPK	100.0	0.0	25
Balochistan	80.0	20.0	10
GB/ AJK /ICT *	100.0	0.0	7
Total (%)	92.0	8.0	100.0
Total (N)	160	14	174

* GB=3, ICT=2, AJK=2

2.2 Background Characteristics of In-Charges of FWCs

The background characteristics (Socio-Demographic) of head of any organization or service delivery outlet have an impact on its performance. An analysis of their qualification, experience and skill is important to judge the performance of the organization. The FWW/C is a key person to run the centre according to her job responsibility. Table 2.2 presents the background characteristics of the In-charges of FWCs, the results indicate that slightly more than one fifth (22 percent) of the In-charges of FWCs are below thirty years of age, and about two third FWCs in the country have In-charges less than forty years of age. Province wise analysis indicates that Balochistan has two fifth In-charges below thirty years of age, whereas; Punjab has more than one fifth In-charges above fifty years of age. Majority (77 percent) of the In-charges having either metric or intermediate level of education, six percent of the In-charges have masters degree. Figure 2.1 below present the distribution of FWCs In-charge by level of education.

Figure 2.1: Education Level of In-charges of FWCs



Province wise analysis indicates that twenty four percent of the In-charges in Sindh having masters degree of education. Three fourth of the In-charges were unmarried; the Punjab has the highest unmarried In-charges as compared to other provinces. Those who are married more than half (52 percent) have three or more living children which is near to the Total Fertility Rate (TFR) of the country (PDHS, 2006-07). Picture is more visible in the following figure.

Figure 2.2: Number of Living Children of In-charges of FWCs

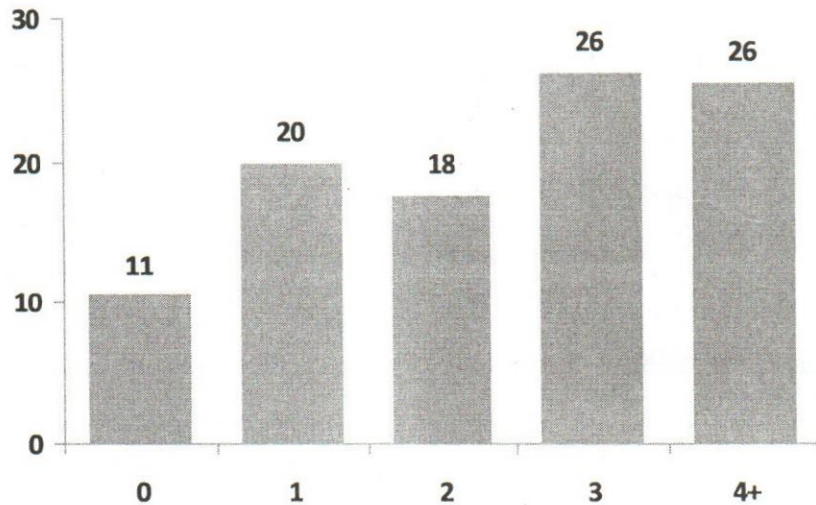


Table 2.2: Percent distribution of In-charges by their Background Characteristics by Region

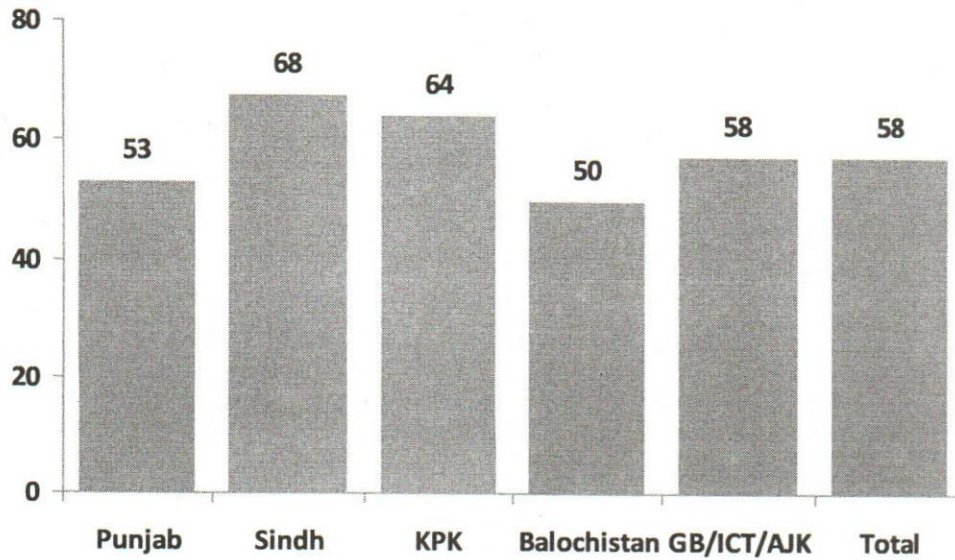
Background Characteristics		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Age groups	>30	18.4	17.6	28.0	40.0	42.9	21.8	38
	30 – 39	41.8	44.1	44.0	60.0	42.9	43.7	76
	40 – 49	18.4	20.6	12.0	0.0	14.3	16.7	29
	50 +	21.4	17.6	16.0	0.0	0.0	17.8	31
Educational level	Up to Matric	49.0	23.5	56.0	40.0	28.6	43.7	76
	Intermediate	34.7	38.2	24.0	20.0	28.6	32.8	57
	Bachelor	15.3	14.7	16.0	40.0	42.9	17.8	31
	Master+	1.0	23.5	4.0	0.0	0.0	5.7	10
Marital Status	Unmarried	83.7	61.8	64.0	70.0	57.1	74.7	130
	Married	9.2	32.4	28.0	30.0	42.9	19.0	33
	Formerly Married	7.1	5.9	8.0	0.0	0.0	6.3	11
Total (N)		98	34	25	10	7	100.0	174
Number of living children								
0		10.1	8.7	16.7	14.3	0.0	10.6	15
1		19.1	26.1	11.1	42.9	0.0	19.9	28
2		21.3	4.3	11.1	14.3	50.0	17.7	25
3		27.0	21.7	27.8	14.3	50.0	26.2	37
4+		22.5	39.1	33.3	14.3	0.0	25.5	36
Total (N)		89	23	18	7	4	100.0	141

* GB=3, ICT=2, AJK=2, System Missing=33

2.2.1 Place of residence, mode of transportation experience in PWP and number of years served as In-charge

One of the key indicator to assess performance of employee is the observation of office timings, it depends on the distance from residence to place of duty and mode of traveling, in case of service providers of family planning it is even more important that they posted in the vicinity of residence, because they have to work in the community for the promotion and motivation of family planning. It is an additional advantage if the service provider is resident of the same village/city. Tables 2.3, 2.3(a&b) reveal that more than half (58 percent) of the In-charges are residents of same village/city where the center is located. Province wise analysis indicates that more than two third of the In-charges in Sindh are posted in the same village/city, followed by KPK (64 percent), Punjab (53 percent) and Balochistan (50 percent). Figure 2.3 presents the distribution of in-charge of FWCs who are residence of the same city/village.

Figure 2.3: Family Welfare Workers/Councilors by Local Residence



Area wise analysis indicates that more than ninety percent of the In-charges of urban areas (table, 2.3.a) are posted in the same city where the centers are located. Among the province about thirty six percent of the In-charges of KPK and one fourth of Balochistan are posted in other places than their cities of residence, the position is reverse in rural areas, where only thirty six percent of In-charges are of the same village, and remaining are posted in other villages. Province wise analysis indicates that about a quarter of In-charges in Punjab are posted in the same village, followed by Balochistan where one third are the residents of same village, KPK has better posting plan than other provinces where sixty four percent of the In-charges are posted in the same village where the centers are located. It means the centers are more functional in the rural areas of KPK as compared to other provinces (Table 2.3b).

Table 2.3: Different Characteristics of Family Welfare Workers/Councilors by Region

FWWs/Cs (Nearest Residence)		Punjab	Sindh	KPK	Balochistan	G-B/AJK/ Islamabad*	Total	
		%					%	N
Resident of this city village	Yes	53.1	67.6	64.0	50.0	57.1	57.5	100
	No	46.9	32.4	36.0	50.0	42.9	42.5	74
Mode of transportation	Public transport	63.3	70.6	64.0	40.0	28.6	62.1	108
	Personal transport	19.4	2.9	8.0	20.0	28.6	14.9	26
	On foot	16.3	26.5	24.0	20.0	14.3	19.5	34
	Other	1.0	–	4.0	20.0	28.6	3.4	6
FWWs/Cs (experience in PWP)								
Join PWP	Less Than 6 years	24.5	32.4	36.0	20.0	42.9	28.2	49
	6-10 years	11.2	11.8	12.0	60.0	42.9	15.5	27
	11-15 years	23.5	14.7	8.0	10.0	14.3	18.4	32
	16 years and above	40.8	41.2	44.0	10.0	–	37.9	66
FWWs/Cs (number of years posted in same center)								
Join this FWC	Less Than 6	69.4	70.6	72.0	40.0	85.7	69.0	120
	6-10	17.3	14.7	12.0	40.0	–	16.7	29
	11-15	6.1	2.9	4.0	20.0	14.3	6.3	11
	16+	7.1	11.8	12.0	–	–	8.0	14
FWWs/Cs (working as In-charge)								
Performance as In-charge	Less Than 6 years	52.0	41.2	60.0	30.0	42.9	49.4	86
	6-10 years	15.3	11.8	4.0	60.0	42.9	16.7	29
	11-15years	19.4	11.8	4.0	10.0	14.3	14.9	26
	16+	13.3	35.3	32.0	–	–	19.0	33
Total (N)		98	34	25	10	7	100.0	174

* GB=3 Islamabad=2 AJK=2

Table 2.3a: Different Characteristics of Family Welfare Workers/Councilors by Urban Residence

FWWs/Cs (Nearest Residence)		Punjab	Sindh	KPK	Balochistan	G-B/AJK/ Islamabad*	Total	
		%					%	N
Resident of this city village	Yes	90.7	83.3	64.3	75.0	83.5	90.7	66
	No	9.3	16.7	35.7	25.0	16.5	9.3	13
Mode of transportation	Public transport	55.8	66.7	57.1	0.0	55.7	55.8	44
	Personal transport	23.3	0.0	14.3	50.0	17.7	23.3	14
	On foot	18.6	33.3	21.4	25.0	22.8	18.6	18
	Other	2.3	0.0	7.1	25.0	3.8	2.3	3
FWWs/Cs (experience in years)								
Join PWP	Less Than 6	16.3	33.3	35.7	50.0	25.3	16.3	20
	6-10	4.7	5.6	7.1	0.0	5.1	4.7	4
	11-15	27.9	11.1	14.3	25.0	21.5	27.9	17
	16+	51.2	50.0	42.9	25.0	48.1	51.2	38
FWWs/Cs (number of years posted in same center)								
Join this FWC	Less Than 6	65.1	77.8	64.3	50.0	67.1	65.1	53
	6-10	20.9	16.7	14.3	0.0	17.7	20.9	14
	11-15	4.7	0.0	0.0	50.0	5.1	4.7	4
	16+	9.3	5.6	21.4	0.0	10.1	9.3	8
FWWs/Cs (number of years working as In-charge)								
Performance as In-charge	Less Than 6	46.5	44.4	57.1	50.0	48.1	46.5	38
	6-10	16.3	5.6	7.1	25.0	12.7	16.3	10
	11-15	20.9	11.1	7.1	25.0	16.5	20.9	13
	16+	16.3	38.9	28.6	0.0	22.8	16.3	18
Total (N)		43	18	14	4	79		43

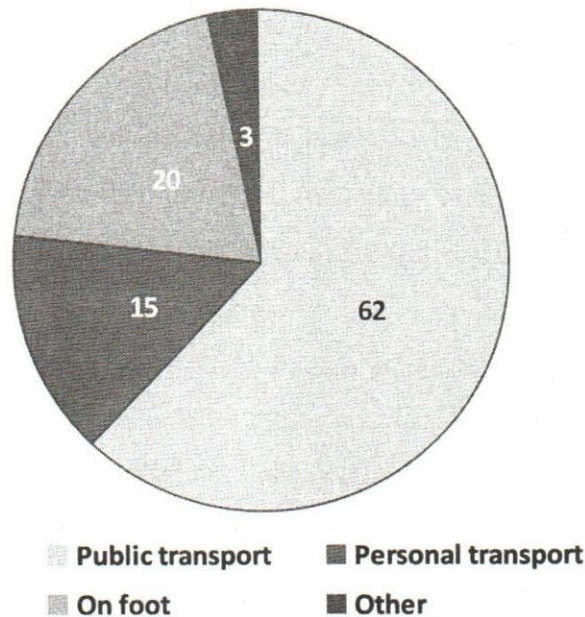
* GB=3 Islamabad=2 AJK=2

Table 2.3b: Different Characteristics of Family Welfare Workers/Councilors by Rural Residence

FWWs/Cs (Nearest Residence)		Punjab	Sindh	KPK	Balochistan	G-B/AJK/ Islamabad*	Total	
		%					%	N
Resident of this city village	Yes	23.6	50.0	63.6	33.3	57.1	35.8	34
	No	76.4	50.0	36.4	66.7	42.9	64.2	61
Mode of transportation	Public transport	69.1	75.0	72.7	66.7	28.6	67.4	64
	Personal transport	16.4	6.3	0.0	0.0	28.6	12.6	12
	On foot	14.5	18.8	27.3	16.7	14.3	16.8	16
	Other	0.0	0.0	0.0	16.7	28.6	3.2	3
FWWs/Cs (experience in PWP)								
Join PWP	Less Than 6 years	30.9	31.3	36.4	0.0	42.9	30.5	29
	6-10 years	16.4	18.8	18.2	100.0	42.9	24.2	23
	11-15 years	20.0	18.8	0.0	0.0	14.3	15.8	15
	16+	32.7	31.3	45.5	0.0	0.0	29.5	28
FWWs/Cs (number of years posted in same center)								
Join this FWC	Less Than 6	72.7	62.5	81.8	33.3	85.7	70.5	67
	6-10	14.5	12.5	9.1	66.7	0.0	15.8	15
	11-15	7.3	6.3	9.1	0.0	14.3	7.4	7
	16+	5.5	18.8	0.0	0.0	0.0	6.3	6
FWWs/Cs (working as In-charge)								
Performance as In-charge	Less Than 6 years	56.4	37.5	63.6	16.7	42.9	50.5	48
	6-10 years	14.5	18.8	0.0	83.3	42.9	20.0	19
	11-15 years	18.2	12.5	0.0	0.0	14.3	13.7	13
	16+	10.9	31.3	36.4	0.0	0.0	15.8	15
Total (N)		55	16	11	6	7		95

A question was asked from the In-charges regarding mode of transportation they usually used to reach the center. Table 2.3, (a & b) above presents the details, it reveals that sixty two percent of the In-charges reported that they use public transport, about one fifth come by foot and fifteen percent coming by their own transport. Figure 2.4 present the mode of transport used by FWW/C. Province wise analysis indicates that seventy percent of the In-charges in Sindh using public transport, followed by KPK (64 percent), Punjab (63 percent) and Balochistan (40 percent).

Figure 2.4: Mode of Transport Used by FWWs/Cs



Area wise analysis indicates that more than two third of the In-charges posted in rural areas are using public transport as compared to this fifty six percent of In-charges of urban areas coming to centers by public transport. Three fourth of the In-charges posted in Sindh and KPK rural areas have to take public transport.

Above table also presents the length of service in PWP, experience and number years of posting as In-charge in FWCs of the respondents, it reveals that fifty six percent of the In-charges have more than eleven years or more working experience in the PWP, slightly over one fourth have less than six years of experience in PWP. Punjab has more experience FWW/Cs than other provinces. Sixty nine percent of the In-charges stay at the present center is less than six years; eight percent In-charges have sixteen or more years of stay in the same FWCs. Province wise position is almost similar. Half of the In-charges have less than six years of experience as In-charge of the FWC. Less than one fifth have sixteen or more years of experience, Sindh and KPK have more experienced In-charges as compared to other provinces. Half of the In-charges in rural areas have less than six years of experience as In-charge of FWCs.

2.3 Situation and Inventory of FWCs

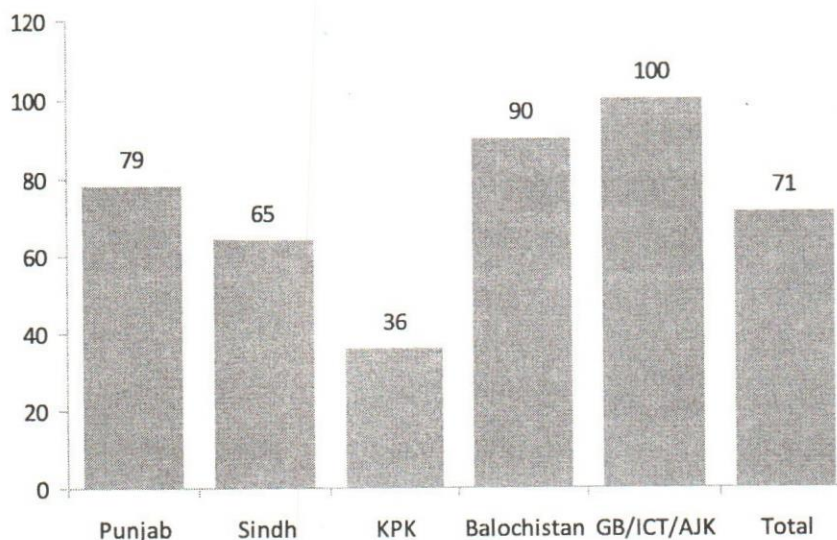
2.3.1 Type of roads to FWCs and installation of sign boards

Easy access to the service delivery centers in terms of roads and direction board is important to attract the clients, besides, to create awareness among the community the sign boards play a

measure role. Table 2.4 below reveals that half of the sampled centers are linked with the paved asphalted roads, and about twenty nine percent with gravel road, whereas, slightly over one fifth of the centers either have access through katcha roads or no proper way to reach the centers by vehicles. Province wise analysis indicates that slightly less than two third of the FWCs in Sindh have access either through gravel or katcha roads, one third of the KPK's centers have no proper roads the access to these centers is through katcha paths, in Balochistan half of the centers are linked with the paved asphalted roads and remaining centers have no road link. Infrastructure plays a positive role in order to link rural with urban areas and services delivery points with potential clients in the community, it appears from the study that about one fifth of the surveyed FWCs are not located at proper places. The situation in Balochistan and KPK is more alarming.

Table 2.4 shows that twenty nine percent of the FWCs are such where no main direction or sign boards are installed. Province wise data indicates that in KPK about two third of the FWCs do not have main direction or sign boards, followed by Sindh where thirty five percent of FWCs do not have such facilities, slightly above one fifth of the FWCs in Punjab also do not have main direction or sign boards. Picture is more clear in the following figure.

Figure 2.5: FWCs having Main Direction/Sign Board Installed



FWCs where main direction and sign boards are installed, eighty seven percent have clear address of the centers. Various evaluation studies conducted in the past reveal that the majority

of the potential clients did not know the availability of FWCs services in the vicinity, because, the proper sign/ direction boards were not installed (NIPS-1986) and (NIPS-1998).

Table 2.4: Types of Roads Lead to FWCs, Direction/Sign Boards Installed by Region

Type of Road		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Mode of access	Paved Asphalted Road	54.1	35.3	48.0	50.0	71.4	50.0	87
	Gravel Road	27.6	52.9	8.0	0.0	28.6	28.2	49
	Kacha Road	10.2	11.8	12.0	0.0	0.0	9.8	17
	Off Road/Kacha Path/Other	8.2	0.0	32.0	50.0	0.0	12.1	21
Main direction/sign board installed	Yes	78.6	64.7	36.0	90.0	100.0	71.3	124
	No	21.4	35.3	64.0	10.0	0.0	28.7	50
Total (N)		98	34	25	10	7	100.0	174
Direction/sign board installed	With Clearly Addressed	86.8	80.0	100.0	88.9	100.0	87.4	104
	Without Clearly Addressed	13.2	20.0	0.0	11.1	0.0	12.6	15
Total (N)		76	20	8	9	6	100.0	119

* GB=3 ICT=2 AJK=2, System Missing=55

2.3.2 Distance from FWCs to the offices of DPWOs/TPWOs

Proper monitoring and supervision depends on reachable time and access to the service delivery points by the managers, if it is in the vicinity of five to ten Kms, than such centers can be monitored on regular basis. Similarly, if the FWC's In-charge need to see TPWO/DPWO or to collect her pay or contraceptives she may visit and return in two to three hours at the maximum. The problems were observed in monitoring and supervision for those centers which are located away. The In-charges of centers which are more than ten Kms away also reported that they need a whole day to visit the TPWO or DPWO, which badly affect the work and even in some cases they have the shortages of contraceptives and other medicines, they have to wait for the monthly meetings to avoid closure of centers as well as expenditures of traveling. To evaluate this aspect a question was asked about the distance of FWC to the immediate supervisor (TPWO) and the senior manager (DPWO), table 2.5 below presents the distance from FWCs to TPWO/DPWO offices.

Table 2.5: Distance of FWCs from Offices of DP/TPWOs by Region

Distance of FWCs from TPWO	Distance	Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
	Within 1 Km	6.1	35.3	36.0	80.0	71.4	23.0	40
	1-10	31.6	5.9	8.0	0.0	14.3	20.7	36
	11-20	15.3	5.9	0.0	0.0	0.0	9.8	17
	21-30	22.4	8.8	8.0	0.0	0.0	15.5	27
	31 and Above	20.4	17.6	20.0	0.0	0.0	17.8	31
	Don't Know	4.1	26.5	28.0	20.0	14.3	13.2	23
Distance of FWCs from DPWO	Within 1 Km	2.0	5.9	0.0	20.0	0.0	3.4	6
	1-10	23.5	14.7	24.0	30.0	0.0	21.3	37
	11-20	10.2	14.7	20.0	10.0	14.3	12.6	22
	21-30	17.3	8.8	12.0	20.0	28.6	15.5	27
	31 and Above	43.9	38.2	36.0	20.0	57.1	40.8	71
	Don't Know	3.1	17.6	8.0	--	0.0	6.3	11
	Total (N)		98	34	25	10	7	

Above table reveals that less than a quarter of the FWCs are located in a vicinity of one km of TPWOs offices, forty four percent of the FWCs are within the range of ten Kms from TPWOs offices and about one third are at a distance of twenty or more Kms. Province wise data shows that only six percent of the FWCs in Punjab are located in the vicinity of one km of the TPWOs offices, whereas, one fifth of the centers in Punjab and KPK are at a distance of more than thirty Kms. Only three percent of the FWCs are located in the vicinity of one Km from DPWOs offices, whereas, two fifth are at a distance of more than thirty Kms and above; it means the In-charges of these centers are facing more hardship in visiting DPWOs offices, similarly the DPWOs cannot monitor these centers regularly. Province wise analysis indicates that forty four percent of the FWCs in Punjab are located at thirty or more Kms from DPWOs offices, and more than one third centers in Sindh and KPK are also at the distance of more than thirty Kms and above. Eighteen percent of In-charges in Sindh did not know about the distance from their centers to DPWO offices.

2.3.3 Availability of family planning and health services in the catchment areas of FWCs

The knowledge of the availability of FP and health services in the vicinity of FWC is important for the In-charge of the center, in case of emergency or complications she may refer or take the client to the nearest outlet for treatment. Table 2.6 indicates that three fourth of the FWCs have the facility of Govt. hospitals or RHS-A centers in their vicinity, more than half have BHUs, and forty four percent have Govt. Dispensaries. It is important to note that about a quarter of the

FWCs in the rural areas are such where no Govt. health out let is located in their catchment areas; the referral FP clients had to travel at a long distance for treatment. Among the provinces about three fourth of the FWCs in Sindh have the Govt. hospitals or RHS-A centers, whereas, slightly more than one third centers in Punjab and KPK have that facilities in their vicinity. In addition to this private sector's health services are also available in most of the areas; three fourth FWCs have private hospitals. Dais and LHW houses are also available in catchment areas of most of the FWCs; the FWCs staff may coordinate with them for the referral of potential FP clients.

Table 2.6: Status of FP & Health Services Available in the Catchment of FWCs by Region

Type of Facilities		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
A. Public Sector:-								
Govt. Hospital/ RHS (A)	Yes	37.8	73.5	36.0	50.0	42.9	73.5	79
	No	62.2	26.5	64.0	50.0	57.1	26.5	95
Govt. Dispensary	Yes	35.7	44.1	36.0	50.0	28.6	44.1	66
	No	64.3	55.9	64.0	50.0	71.4	55.9	108
MCH Centre	Yes	22.4	38.2	12.0	50.0	28.6	38.2	45
	No	77.6	61.8	88.0	50.0	71.4	61.8	129
MSU	Yes	22.4	41.2	16.0	50.0	0.0	41.2	45
	No	77.6	58.8	84.0	50.0	100.0	58.8	129
LHW House	Yes	86.7	88.2	40.0	70.0	71.4	88.2	137
	No	13.3	11.8	60.0	30.0	28.6	11.8	37
BHU	Yes	36.7	52.9	60.0	50.0	28.6	52.9	76
	No	63.3	47.1	40.0	50.0	71.4	47.1	98
RHC	Yes	22.4	44.1	16.0	30.0	14.3	44.1	45
	No	77.6	55.9	84.0	70.0	85.7	55.9	129
DAI	Yes	82.7	91.2	48.0	60.0	57.1	91.2	134
	No	17.3	8.8	52.0	40.0	42.9	8.8	40
Pak. Primary Health Initiative	Yes	3.1	35.3	12.0	30.0	14.3	35.3	22
	No	96.9	64.7	88.0	70.0	85.7	64.7	152
Other	Yes	5.1		4.0	0.0	0.0	0.0	6
	No	94.9	100.0	96.0	100.0	100.0	100.0	168
B. Private/NGO/Medical Sector:-								
Private Hospital	Yes	57.1	73.5	28.0	40.0	42.9	73.5	95
	No	42.9	26.5	72.0	60.0	57.1	26.5	79
NGO Clinic	Yes	11.2	29.4	20.0	40.0	42.9	29.4	33
	No	88.8	70.6	80.0	60.0	57.1	70.6	141
Pharmacy Chemist	Yes	56.1	64.7	48.0	50.0	85.7	64.7	100
	No	43.9	35.3	52.0	50.0	14.3	35.3	74
Private Doctor/Clinic	Yes	72.4	82.4	44.0	60.0	42.9	82.4	119
	No	27.6	17.6	56.0	40.0	57.1	17.6	55
Homeopath/Hakeem	Yes	84.7	55.9	52.0	50.0	14.3	55.9	121
	No	15.3	44.1	48.0	50.0	85.7	44.1	53
Dispenser/Compounder	Yes	73.5	76.5	52.0	50.0	71.4	76.5	121
	No	26.5	23.5	48.0	50.0	28.6	23.5	53
Other	Yes	2.0	0.0	8.0	0.0	0.0	0.0	4
	No	98.0	100.0	92.0	100.0	100.0	100.0	170
Total (N)		98	34	25	10	7		174

2.3.4 Staff position at FWCs

Family Welfare Worker (FWW) or Family Welfare Councilor is a key person of FWC, female and male welfare assistants are the helping hands of the In-charge of a center. The availability of the sanctioned staff is important to assess the performance of the center. Table 2.7 presents the staff position at the sampled FWCs. It was observed that more than ninety percent of the centers have FWW/Cs; about seventeen percent centers do not have FWA (F&A), besides fifteen percent of FWCs reported that they do not have chowkidars. Province wise analysis indicate that about forty three posts of FWAs male and female are lying vacant in Punjab province which is the highest among the provinces.

Table 2.7: Percent distribution of Current Staff Position of FWCs by Region

Province/Region	FWW/Cs		FWA (F)		FWA (M)		Aya		Chowkidar		Total
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	N
Punjab	94.9	5.1	78.6	21.4	79.6	20.4	91.8	8.2	81.6	18.4	98
Sindh	97.1	2.9	88.2	11.8	82.4	17.6	79.4	20.6	88.2	11.8	34
KPK	100.0	0.0	84.0	16.0	92.0	8.0	96.0	4.0	92.0	8.0	25
Balochistan	100.0	0.0	90.0	10.0	90.0	10.0	100.0	0.0	90.0	10.0	10
GB/ AJK /ICT *	100.0	0.0	100.0	0.0	85.7	14.3	100.0	0.0	85.7	14.3	7
Total (%)	96.6	3.4	82.8	17.2	82.8	17.2	90.8	9.2	85.1	14.9	100.0
Total (N)	168	6	144	30	144	30	158	16	148	26	174

2.3.5 General/condition of FWCs buildings

The environment of the service delivery outlet play important role in attracting clients, it includes cleanliness, availability of seating and waiting space, furniture, electricity, water and equipments. Table 2.8 below indicates that two third of the sampled FWCs are either in excellent or good condition, one third just satisfactory and eleven percent were not in good condition. Province wise position is almost similar, about twelve percent of the FWCs in Punjab and KPK are below satisfactory level, in Sindh and Balochistan one in ten FWC fall in this category.

Table 2.8: Outlook/Condition of the Centre's Building by Region

Condition of buildings	Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
						%	N
Excellent	23.5	8.8	12.0	60.0	42.9	21.8	38
Good	37.8	23.5	36.0	30.0	42.9	34.5	60
Satisfactory	26.5	58.8	40.0	0.0	14.3	32.8	57
Not Satisfactory	12.2	8.8	12.0	10.0	0.0	10.9	19
Total (N)	98	34	25	10	7	100.0	174

To assess the availability of various facilities observations were recorded through asking different questions about availability of rooms for center, accommodation of In-charge, attached with the center, building status (rental or donated), provision of electricity and heating facility, toilet facilities, source and type of water supply into FWCs. Table 2.9 below presents the number of rooms available at the FWCs. Fourteen percent of the centers have only a single room, whereas, thirty eight percent have two rooms and the remaining have three or more. As per requirement a center must have at least two rooms, one for the staff and visitors/clients and another for examination, IUD insertion and stock of contraceptives and medicines. Provincial analysis indicates that one third of the centers of KPK and about a quarter in Sindh have only one room, these FWCs need to be shifted to other buildings, because the clients may face problem of privacy. Figure below presents the distribution of number of rooms available at FWCs by provinces.

Figure 2.6: Number of Rooms Available in FWC Buildings

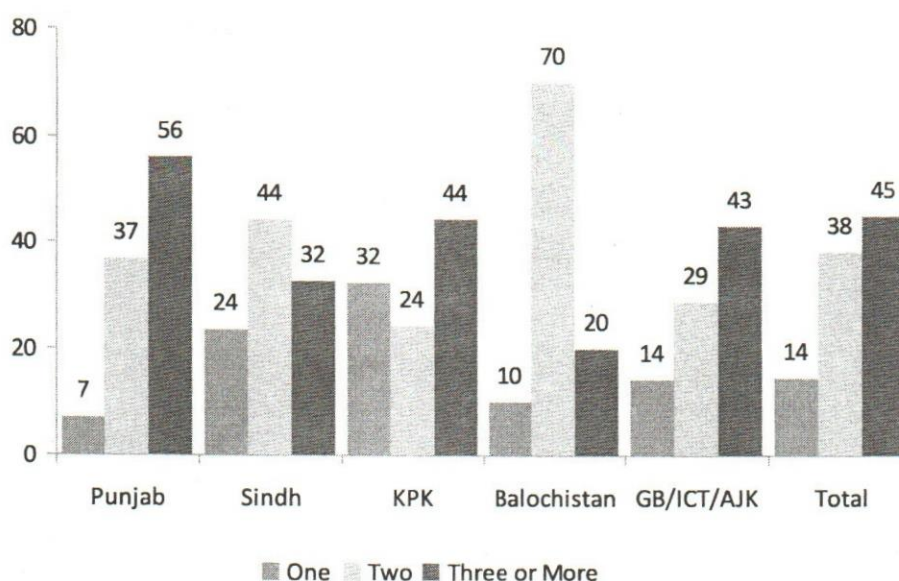


Table 2.9: Number of Rooms Available in FWC Building by Region

Number of Rooms	Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
						%	N
One	7.1	23.5	32.0	10.0	14.2	14.4	25
Two	36.7	44.1	24.0	70.0	28.5	37.9	66
Three or more	56.1	32.4	44.0	20.0	42.7	44.7	83
Total (%)	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Total (N)	98	34	25	10	7	100.0	174

Results of the study shown in table 2.9 (a) reveal that ninety five percent centers have rooms for their offices. Thirteen percent centers have the facilities of attached accommodation for residence, sixteen percent of the FWCs were not properly whitewashed, all centers have facility of electricity, among these centers one third use electricity as a source of heating and rest utilize gas (26 percent), whereas, seventeen percent using kerosene oil/charcoal/wood for heating. It is essential that hygienic conditions should be maintained in the centers and any waste material should be disposed off in proper manners. Table: 2.9 (a) shows that eighty six percent FWCs have flush toilet facilities, and slightly over half of the centers have piped water. Three percent of the FWCs do not have any water facility. Province wise analysis indicates FWCs in Punjab and Sindh do not have attached accommodation facility for the staff, whereas, sixty percent of the FWCs in Balochistan have attached accommodation for staff. Fifteen percent of the FWCs in Sindh, ten percent in Balochistan and eight percent in KPK do not have toilet facilities, twenty percent FWCs in Balochistan and twelve percent in Sindh do not have any type of water supply.

Table 2.9 (a): Facilities/Utilities Available at FWC by Region

Rooms for:-		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Availability of Rooms	For Centre	98.5	(100.0	88.7	72.4	89.5	95.28	424
	For Residence	1.53	0	11.3	27.6	10.5	4.72	21
Total (N)		261	74	62	29	19	100.0	445
Attached Residential Accommodation	Yes	5.1	5.9	24.0	60.0	42.9	12.6	22
	No	94.9	94.1	76.0	40.0	57.1	87.4	152
Building of FWC	Rented	83.7	61.8	76.0	90.0	57.1	77.6	135
	Donated / Others	16.3	38.2	24.0	10.0	42.9	22.4	39
Maintenance of the FWC	Whitewashed (Walls & Roof)	74.5	76.5	76.0	90.0	85.7	76.4	133
	Not at all	19.4	17.6	8.0	10.0	--	16.1	28
	Others	6.1	5.9	16.0	--	14.3	7.5	13
Electricity Available	Yes	100.0	100.0	100.0	100.0	100.0	100.0	174
	No	0.0	0.0	0.0	0.0	0.0	0.0	0
Heating facility available	Gas	20.4	29.4	36.0	30.0	57.1	26.4	46
	Electricity	38.8	47.1	12.0	10.0	14.3	33.9	59
	Kerosene oil/ Charcoal/ Wood	17.3	11.8	24.0	10.0	14.3	16.7	29
	Others	23.5	11.8	28.0	50.0	14.3	23.0	40
Toilet facilities available for FWC	Flush	95.9	52.9	92.0	80.0	100.0	86.2	150
	No flush/Others	3.1	32.4	0.0	10.0	0.0	8.6	15
	None	1.0	14.7	8.0	10.0	0.0	5.2	9
Type water supply to FWC	Piped	45.9	58.8	68.0	50.0	42.9	51.7	90
	Hand-pump	16.3	17.6	12.0	10.0	0.0	14.9	26
	Other	37.8	11.8	20.0	20.0	57.1	29.9	52
	None	0.0	11.8	0.0	20.0	0.0	3.4	6
Total (N)		98	34	25	10	7	100.0	174

2.3.5 Availability of waiting and examination rooms

Table 2.10 shows that most of the centers (80 percent) have weather protected rooms and three fourth have proper seating place for clients. Eighty eight percent of the centers are maintaining complete audio/visual privacy, cleanliness and adequate light source.

Province wise analysis indicates that one third of the centers in Sindh and Balochistan do not have weather protected rooms and adequate light source.

Table 2.10: Waiting Area/Examination Room for Clients in FWCs by Region

Waiting / Examination Rooms			Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
								%	N
Availability of Rooms	Weather/protected	Yes	81.6	67.6	96.0	70.0	71.4	79.9	139
		No	18.4	32.4	4.0	30.0	28.6	20.1	35
	Proper seating	Yes	70.4	79.4	72.0	80.0	85.7	73.6	128
		No	29.6	20.6	28.0	20.0	14.3	26.4	46
	Others	Yes	3.1	8.8	4.0	--	--	4.0	7
		No	96.9	91.2	96.0	100.0	100.0	96.0	167
Medical Examination Room	Audio/Visual Privacy	Yes	86.7	82.4	100.0	90.0	85.7	87.9	153
		No	13.3	17.6	--	10.0	14.3	12.1	21
	Visual Privacy	Yes	92.9	67.6	100.0	90.0	100.0	89.1	155
		No	7.1	32.4	--	10.0	--	10.9	19
	Cleanliness	Yes	90.8	88.2	100.0	100.0	85.7	92.0	160
		No	9.2	11.8	--	--	14.3	8.0	14
	Adequate light source	Yes	92.9	67.6	92.0	70.0	100.0	86.8	151
		No	7.1	32.4	8.0	30.0	--	13.2	23
Total (N)			98	34	25	10	7	100.0	174

* GB=3 ICT=2 AJK=2

2.3.7 Availability of IEC Material

Information, Education and Communication (IEC) material play vital role in promoting family planning and reproductive health services in the country. Information about availability of different types of IEC material at the centres was gathered. Table 2.11 shows that on the average about ninety five percent of the FWCs have at least any one type of IEC material. Five percent of the centers do not have any IEC material. Among the available material at the centers posters and pamphlets are more common as compared to books on family planning. Province wise data reveals that sixteen percent of the FWCs in KPK and nine percent in Balochistan do not have any type of IEC material. About two third of the centers have all type of material available with them

Table 2.11: Percent distribution of Availability of IEC Material in the FWCs by Region

Regions	Posters		Pamphlets/Leaflets		Books		Others		Total
	Yes	No	Yes	No	Yes	No	Yes	No	N
Punjab	91.8	8.2	93.9	6.1	66.3	33.7	18.4	81.6	98
Sindh	91.2	8.8	97.1	2.9	88.2	11.8	5.9	94.1	34
KPK	72.0	28.0	80.0	20.0	68.0	32.0	0.0	100.0	25
Balochistan	80.0	20.0	90.0	10.0	100.0	0.0	0.0	100.0	10
GB/AJK/ ICT*	85.7	14.3	71.4	28.6	71.4	28.6	14.3	85.7	7
Total (%)	87.9	12.1	91.4	8.6	73.0	27.0	12.1	87.9	98
Total (N)	153	21	159	15	127	47	21	153	174

* GB=3 ICT=2 AJK=2

2.4 Activities of FWC Staff

Primarily, FWCs staff has to provide FP, RH, maternal and child health care and general ailment services along with effective follow-up of the users of various contraceptives and motivational activities in the catchment area. Various questions were asked in this study to get information from the In-charge about FP and its follow-up, MCH services, infant health care, regular health and FP education sessions in community, orientation sessions with female councilors, status of contraceptives/medicines/supplies/maintenance/ equipment, and referrals of hardcore cases of FP, infertility, HIV/AIDS and referral contraceptives surgery/implants.

2.4.1 Activities within the catchment areas

To maintain demographic baseline data of the community with proper registration of eligible couples at the household level is an important job of the male and female assistants of centre. Table 2.12 indicates that sixty three percent of the centers are maintaining the baseline data of households in the catchment areas. Three fourth of the In-charges have the knowledge of approximate population of their catchment areas. Seventy eight percent of the FWC's are covering population between 5000 or above in their catchment areas. Eighteen percent of the centers have registered more than one thousand eligible couples; forty four percent centers have registered less than three hundred eligible couples during July, 2009 to June 2010. Among the provinces eighty three percent FWCs of Balochistan have registered less than three hundred eligible couples from households of the catchment areas; fifty percent of the FWCs of Punjab

and forty eight percent centers of Sindh also fall in this category. The performance of the KPK centers is better than other provinces in registering eligible couples.

Table 2.12: Percent distribution of FWCs Carried-out Baseline Activities in their Catchment Areas by Region

Demographic indicators		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Maintain Baseline data of households	Yes	59.2	58.8	76.0	50.0	100.0	62.6	109
	No	40.8	41.2	24.0	50.0	0.0	37.4	65
Total (approx.) Population	Unknown	3.1	8.8	0.0	0.0	0.0	3.4	6
	500-5000	7.1	29.4	32.0	50.0	14.3	17.8	31
	5947-15000	42.9	35.3	24.0	40.0	42.9	38.5	67
	16000 +	46.9	26.5	44.0	10.0	42.9	40.2	70
	Total (N)	98	34	25	10	7	100.0	174
Registered Eligible Couples during July 2009-June 2010	>300	50.0	47.6	21.7	83.3	14.3	43.9	54
	300-1000	42.4	23.8	43.5	16.7	42.9	38.2	47
	1113-4500	7.6	28.6	34.8	0.0	42.9	17.9	22
	Total (N)**	66	21	23	6	7	100.0	123

* GB=3 ICT=2 AJK=2, ** System Missing=51

2.4.2 Status of Family Planning Clients

The performance of the FWCs depends upon the turn over of clients who received FP methods from them. Data of FP Clients for last two years was compiled from the sampled FWCs. Table 2.12-a shows that the performance of the FWCs in terms of Clients of all methods declined during the year 2009-10 as compared to previous year. Provincial analysis also indicates almost similar trends.

Table 2.12 (a): Number of Family Planning Clients during July 2008- June 2010 by Region

Provinces/Regions	Pills	Condom	Injections	IUCD	Female Sterilization	Male Sterilization	Implants
JULY 2008-JUNE 2009							
Punjab	33190	56742	52276	57866	8696	422	--
Sindh	31746	111313	36164	13991	1600	4	--
KPK	19428	76872	39296	17083	352	--	2
Balochistan	4068	7720	3150	1368	16	2	--
GB/ICT/AJK	2024	1842	6162	2772	602	--	60
Total	90456	254489	137048	93080	11266	428	62
JULY 2009 - JUNE 2010							
Punjab	28808	51958	38300	47274	7620	372	32
Sindh	22456	73588	21048	11426	1414	8	18
KPK	14426	51092	28168	15076	378	--	2222
Balochistan	2512	3979	1524	986	46	--	--
GB/ICT/AJK	2086	1099	4572	3010	794	--	74
Total	70288	181716	93612	77772	10252	380	2346

2.4.3 Status of general medicines at FWCs

One of the major job responsibilities of In-charge is to ensure availability of contraceptives and general medicines at centre to deal with family planning, reproductive health and general ailment clients. Generally, a centre should have at least one month stock according to its consumption pattern. Table 2.13 indicates that most of the prescribed medicines were not available at the majority of the centers, only Buscopan tablets are available at eighty seven percent FWCs, other supplementary commodities such as Gloves (64 percent), Cotton (55 percent), were available at more than half of the centers. Gloves, Cotton and Bandages are important items, which were also not available at various centers, details may be seen in the following table.

Table 2.13: Availability of Medicines at FWCs as per Standard List by Region

S. No.	Standard list-1	Available	Not Available	If not available then Demand given	
				Yes	No
PAKISTAN					
1.	Tablets Paracetamol	28.2	71.8	76.8	23.2
2.	Syrup Paracetamol	22.4	77.6	74.1	25.9
3.	Tablets Soluble Aspirin	4.6	95.4	62.0	38.0
4.	Tablets Buscopan	87.4	12.6	66.4	33.6
5.	Tablets Intestopan	9.2	90.8	63.9	36.1
6.	Tablets Chloroquin	27.0	73.0	72.4	27.6
7.	Tablets Piriton	13.8	86.2	65.3	34.7
8.	Tablets Avomine	22.4	77.6	66.7	33.3
9.	Syrup Chloroquin	24.7	75.3	70.2	29.8
10.	Syrup Maxalon	6.3	93.7	63.2	36.8
11.	Tablets Ketrax	20.7	79.3	68.8	31.2
12.	Chlorayphecil Eye Drops 10-20	9.8	90.2	60.5	39.5
13.	Polyfax Eye Ointment	13.2	86.8	64.2	35.8
14.	Otosporin Ear Drops	6.9	93.1	59.3	40.7
15.	Tablets Ferrous Gluconate	13.2	86.8	60.3	39.7
16.	Tablets B Complex	11.5	88.5	66.9	33.1
17.	Syrup Vitamin B Complex	10.9	89.1	63.9	36.1
18.	ORS Packets	42.5	57.5	76.0	24.0
19.	Folic Acid Tablet	29.9	70.1	72.1	27.9
20.	Tincture Iodine	32.2	67.8	68.6	31.4
21.	Methylated Spirit	40.8	59.2	73.8	26.2
22.	Bandages	26.4	73.6	71.9	28.1
23.	Sticking Plaster	9.2	90.8	63.9	36.1
24.	Gloves	64.4	35.6	60.6	39.4
25.	Cotton	55.7	44.3	64.2	35.8
26.	Other	19.0	81.0	10.5	89.5

It is obvious from table 2.13 that most of medicines are not available in centers as per standard list. At the time of survey, out of stock medicines were tablets Soluble Aspirin at ninety five percent centers followed by Syrup Maxalon (94 percent), Otosporin Ear Drops (93 percent), tablets Intestopan and Sticking Plaster (91 percent), Chlorayphecil Eye Drops (90 percent), tablets B Complex & Syrup Vitamin B Complex (89 percent), Polyfax Eye Ointment & tablets Ferrous Gluconate (87 percent), tablets Piriton (86 percent), tablets Ketrax (79 percent) and Syrup Chloroquin (75 percent) respectively.

The shortage of medicines was higher in Punjab followed by KPK and Sindh as compared to Balochistan except tablets Intestopan and ketrax. The supplementary commodities such as Gloves, Cotton, ORS Packets, Methylated Spirit, Tincture Iodine, Folic Acid tablet and Bandages are available in more centers than the medicines. (See Annexure-II)

Table 2.14 shows reasons for shortage of medicines. This question was open ended and In-charges of the centers were allowed to express their concerns, some of the common reasons are presented in the following table. The main reason for scarcity in medicines is 'Non availability of medicine at the DPWO office/Not provided by DPWO office (64 percent) and funds shortage (32 percent). Among provinces, Sindh province has been suffering more where more than eighty two percent of the In-charges reported that medicines are not provided by district manager/DPWOs, followed by Punjab (62 percent), Balochistan (60 percent), GB/ICT/AJK (57 percent) and KPK (52 percent). The shortage in funds is mainly reported by Punjab (46 percent) as compared to other provinces/regions.

Table 2.14: Reasons for not having the Required Medicines as per Standard List by Region

S.No.	Reasons	Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
1	Non availability of medicine at the DPWO office/Not provided by DPWO office.	62.2	82.4	52.0	60.0	57.1	64.4	112
2	Shortage of funds	45.9	8.8	16.0	10.0	28.6	31.6	55
3	Side effects of F.P	1.0	0.0	0.0	0.0	0.0	0.6	1
4	Centre remains closed.	0.0	0.0	0.0	10.0	0.0	0.6	1
5	Medicine supplied to flood affected	4.1	5.9	12.0	0.0	0.0	5.2	9
6	Extensive usage/ distribution of medicines	1.0	0.0	0.0	0.0	0.0	0.6	1
7	No need of medicines	0.0	0.0	4.0	0.0	0.0	0.6	1
8	Due to security issues/Taliban factor	0.0	0.0	4.0	0.0	0.0	0.6	1
9	We have sufficient medicines.	0.0	0.0	8.0	10.0	0.0	1.7	3
Total (N)		98	34	25	10	7	100.0	174

* GB=3 ICT=2 AJK=2

2.4.4 Contraceptives stock position

The primary objective of the FWCs is to provide contraceptives to the visiting clients. The availability of contraceptives plays an important role in enhancing the performance of the center. Table 2.15, shows that overall status of contraceptives at the centers is satisfactory, ninety three percent of the centers have contraceptives. One fifth of the FWCs in Balochistan and twenty nine percent in other region did not have contraceptives, which is an alarming situation, if the center is out of stock for contraceptives than what happened to the follow-up clients of injectables and pills.

Table 2.15: Contraceptive availability at FWCs by Region

Stock Position		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Contraceptive availability	Yes	91.8	100.0	100.0	80.0	71.4	93.1	162
	No	8.2	0.0	0.0	20.0	28.6	6.9	12
Total (N)		98	34	25	10	7	100.0	174

* GB=3 ICT=2 AJK=2

2.4.5 Availability of furniture

For better performance of the center it is important to facilitate the staff with proper furniture and place for seating, there is standard list of approved furniture for the center. Table 2.16 shows the status of furniture at the sampled FWCs. Table below indicates that most of the centers have furniture according to the standard list, however, about two percent centers reported that they did not have insertion/ examination table, it is strange than how the In-charge is dealing with IUD insertion cases.

Table 2.16: Availability of Furniture at FWCs as per List by Region

S. No	Standard list-1	Available	Not Available	If not available then Demand given	
1.	Examination Couch/Insertion Table-1	97.7	2.3	75.0	25.0
2.	Steps for Table (1)	82.8	17.2	56.7	43.3
3.	Office Table (1)	100.0	0.0	N/A	N/A
4.	Chairs (2)	99.4	0.6	N/A	N/A
5.	Benches (1)	92.0	8.0	78.6	21.4
6.	Screen (1)	87.9	12.1	57.1	42.9
7.	Revolving Stools	87.9	12.1	57.1	42.9
8.	Cupboards	94.3	5.7	66.7	33.3
9.	Ceiling/Pedestal Fan	83.9	16.1	40.7	59.3
10.	Heater/Cylinder (for weather care)	35.6	64.4	36.0	64.0

2.4.6 Status of equipment

Certain equipments for the center are necessary for proper examination and treatment of FP and MCH clients, table 2.17 below presents the availability of standard equipments at sampled FWCs, an analysis of data indicates that majority of the centers have reported that they have almost all the standard equipments required for the centers. However, more than half of the centers reported that they do not have 5cc syringes, about a quarter are out of stock with 2cc syringes, about thirteen percent do not have BP apparatus and stethoscopes, slightly over one third do not have weighing machines for baby and a quarter are without weighing machines for adults, seventy one percent FWCs reported that they do not have urine test with 12 tubes (10) and talquist hemoglobin scale (1). The equipments which were not available are all very important, without these the In-charges must be facing difficulties in their day to day dealing with the FP and MCH clients.

Table 2.17: Availability of Standard Equipment at FWCs

PAKISTAN					
S.No	Items	Available	Not Available	If not available then Demand given	
				Yes (%)	No (%)
1.	Dressing Trolley (1)	92.0	8.0	50.0	50.0
2.	Kidney Trays (Set of 3) S.S	96.0	4.0	83.3	16.7
3.	Bowls (6" diameter) S.S (2)	89.1	10.9	63.2	36.8
4.	Deep Tray with Lid Large Size S.S (1)	90.8	9.2	53.3	46.7
5.	Tray with lid (2x10x6) S.S (1)	83.3	16.7	44.8	55.2
6.	Glass Jar (Medium) (1)	55.7	44.3	46.8	53.2
7.	Syringes 5 cc (1)	44.3	55.7	41.2	58.8
8.	Syringes 2 cc (1)	75.9	24.1	53.8	46.2
9.	Vaginal Speculum, I-valve (Medium-3)	93.7	6.3	63.6	36.4
10.	Vaginal Speculum, I-valve (Large) (1)	89.1	10.9	61.1	38.9
11.	Sponge Forceps (3)	92.5	7.5	83.3	16.7
12.	Volcellim, double toothed (3)	87.4	12.6	66.7	33.3
13.	Dressing Forceps, Medium (1)	86.8	13.2	69.6	30.4
14.	Scissors, blunt ended, medium (2)	89.1	10.9	84.2	15.8
15.	Artery Forceps (1)	92.0	8.0	64.3	35.7
16.	Chettel's Forceps (1)	92.0	8.0	66.7	33.3
17.	Tongue Depressor (1)	76.4	23.6	48.8	51.2
18.	B.P Apparatus (1)	86.2	13.8	83.3	16.7
19.	Feotoscope (1)	87.9	12.1	50.0	50.0
20.	Stethoscope (1)	87.4	12.6	66.7	33.3
21.	Mid-arm Circumference Tape (1)	31.6	68.4	52.9	47.1
22.	Weighing Machine Baby (1)	64.4	35.6	57.4	42.6
23.	Weighing Machine Adult (1)	74.7	25.3	60.5	39.5
24.	Dai Kit (1)	54.0	46.0	48.8	51.2
25.	Midwifery (1)	47.1	52.9	47.3	52.7
26.	Sterilizer boiling type	86.8	13.2	51.9	48.1
27.	Gloves-1	81.6	18.4	58.1	41.9
28.	Urine test with 12 tubes (10)	28.6	71.4	50.9	49.1
29.	Talquist Hemoglobin Scale (1)	28.7	71.3	46.7	53.3
30.	Thermometer (2)	78.2	21.8	57.9	42.1
31.	Nail Brush (2)	62.6	37.4	57.8	42.2
32.	Spirit Lamp (1)	56.3	43.7	50.0	50.0
33.	Flit Pump (1)	37.4	62.6	51.9	48.1
34.	Torch, Large (3- Cell) Size (1)	66.7	33.3	59.6	40.4
35.	Wall Clock (1)	82.2	17.8	60.0	40.0
36.	Blanket (1)	52.3	47.7	56.1	43.9
37.	Towels (24"x 12") (3)	73.6	26.4	60.0	40.0
38.	Draw Sheets, Latha, 2 meters each (6)	75.9	24.1	65.9	34.1
39.	Macintosh Steel ½ Meter (1)	46.0	54.0	57.6	42.4
40.	Plastic water cooler, medium (1)	66.1	33.9	53.4	46.6
41.	Water set (Plastic) (1)	47.7	52.3	48.9	51.1
42.	Kerosene Stove (where needed) (1)	28.2	71.8	58.1	58.1
43.	Gas Cylinder (1)	28.7	71.3	39.3	60.7
44.	Degcha with Led, 12-14" diam S.S 10	42.5	57.5	46.5	53.5
45.	Plastic Bucket (medium)-1with Mug-1	78.7	21.3	43.2	56.8
46.	Plastic Lota (1)	82.8	17.2	33.3	66.7

* GB=3 ICT=2 AJK=2

2.4.7 Record Maintenance at FWCs

Maintenance of proper record is an important indicator to evaluate the performance of the service delivery outlets. It is also use full for the staff to assess their own performance. Table 2.18 shows that majority the FWCs are maintaining all types of record, however, about twenty percent of the FWCs are not maintaining the client record cards, which is very important for follow-up of injectables and pills clients. Provincial analysis indicates that about twenty eight percent of FWCs of Punjab not maintaining CRCs, followed by KPK where one fifth FWCs and fifteen percent of Sindh do not have proper record of CRCs.

Table 2.18: Status of Proper Record Maintenance at FWCs by Region

Record Maintenance		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Printed registers for record keeping	Yes	88.8	82.4	100.0	90.0	100.0	89.7	156
	No	11.2	17.6	0.0	10.0	0.0	10.3	18
Clients Record Cards (CRCs)	Yes	71.4	85.3	80.0	90.0	100.0	77.6	135
	No	28.6	14.7	20.0	10.0	0.0	22.4	39
Contraceptive Stock Registers	Yes	100.0	97.1	100.0	90.0	100.0	98.9	172
	No	0.0	2.9	0.0	10.0	0.0	1.1	2
Medicines Stock Registers	Yes	98.0	94.1	100.0	90.0	100.0	97.1	169
	No	2.0	5.9	0.0	10.0	0.0	2.9	5
Other	Yes	58.2	35.3	40.0	30.0	57.1	49.4	86
	No	41.8	64.7	60.0	70.0	42.9	50.6	88
Total (N)		98	34	25	10	7	100.0	174

2.4.8 Status of referral cases

Table 2.19 below presents the status of referral cases of side-effects to various health service providers; it indicates that seventy percent of the side-effect cases are being sent to RHS Centers, slightly more than half stated that they also advice clients to consult with other doctors keeping in view of the nature of the side-effect. Slightly over a quarter of the In-charges not referring cases to RHS centers. Province wise analysis shows that half of the In-charges in Balochistan not referring cases to RHS center and eighty eight percent of the cases are being referred to other health service providers.

Table 2.19: Percent Distribution of Referred Cases to other Service Providers by Region

Other Service Providers		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total (N)	
							%	N
Refer to RHS center	Yes	73.4	69.7	72.0	50.0	33.3	69.9	116
	No	26.6	30.3	28.0	50.0	66.7	30.1	50
Consult other Doctor	Yes	52.1	18.2	28.0	87.5	33.3	42.8	71
	No	47.9	81.8	72.0	12.5	66.7	57.2	95
Others	Yes	14.9	24.2	24.0	37.5	66.7	21.1	35
	No	85.1	75.8	76.0	62.5	33.3	78.9	131
Total (N)		94	33	25	8	6	100.0	166

* GB=3 ICT=2 AJK=2

2.4.9 Referral of contraceptive surgery cases

One of the main responsibilities of the FWC is to motivate the FP clients who do not want more children to opt for the contraceptive surgery, and arrange camps with the help of RHS center in their area. Table 2.20 presents the number of cases of contraceptive surgery referred during last three months by the FWCs, table below shows that slightly less than one third of the centers did not refer any CS case to RHS centers, it is strange to note that FWCs are referring cases to other doctors. Province wise analysis indicates that eighty percent of FWCs of Balochistan, forty four percent of KPK and about a quarter of Punjab and Sindh did not refer any case of CS to RHS centers during last three months.

Table 2.20: Contraceptive Surgery Cases Referred in Last Three Months by Region

CS Referred cases		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total (N)	
							%	N
Refer to RHS center	None	23.5	23.5	44.0	80.0	57.1	31.0	54
	1-10	51.0	41.2	44.0	10.0	42.9	45.4	79
	11-20	15.3	26.5	4.0	0.0	0.0	14.4	25
	21 +	10.2	8.8	8.0	10.0	0.0	9.2	16
Other Doctor	None	77.6	94.1	84.0	80.0	71.4	81.6	142
	1-5	15.3	2.9	8.0	10.0	0.0	10.9	19
	6 +	7.1	2.9	8.0	10.0	28.6	7.5	13
Others	None	76.5	97.1	84.0	80.0	100.0	82.8	144
	1-9	14.3	2.9	16.0	10.0	0.0	11.5	20
	10 +	9.2	0.0	0.0	10.0	0.0	5.7	10
Total (N)		98	34	25	10	7	100.0	174

* GB=3 ICT=2 AJK=2

2.4.10 Transport facility for CS referral cases/clients

There is a provision of pick and drop facilities to the clients who under go contraceptive surgery from RHS centers, or payment of fare where vehicle is not available. Table 2.21 shows that eighty percent of the FWCs reported that they do not provide transport facility to clients of CS from residence to hospital and back, fourteen percent provide transport facility from hospital to residence after surgery. One fifth FWCs reported they paid fare for public transport to the clients. Province wise analysis indicates that twenty seven percent of the FWCs in Sindh, and one fifth of Punjab and Balochistan reported that pick and drop facility from residence to hospital was provided to the CS clients.

Table 2.21: Transport facility for CS Referral Cases /Clients by Region

Status of Transportation provision to CS clients		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Transport from residence to hospital and back	Yes	19.4	26.5	12.0	20.0	28.6	20.1	35
	No	80.6	73.5	88.0	80.0	71.4	79.9	139
From hospital to residence only	Yes	6.1	32.4	4.0	20.0	57.1	13.8	24
	No	93.9	67.6	96.0	80.0	42.9	86.2	150
Fare paid to clients for public transport	Yes	11.8	48.0	10.0	28.6	22.4	20.4	39
	No	88.2	52.0	90.0	71.4	77.6	79.6	135
No fare was paid to clients for public transport	Yes	35.7	5.9	20.0	40.0	42.9	28.2	49
	No	64.3	94.1	80.0	60.0	57.1	71.8	125
Refer surgery cases	Yes	92.9	79.4	60.0	20.0	71.4	80.5	140
	No	7.1	20.6	40.0	80.0	28.6	19.5	34
No of referred surgery cases	None	6.1	20.6	32.0	60.0	28.6	16.7	29
	1-10	54.1	44.1	52.0	30.0	57.1	50.6	88
	11-30	33.7	29.4	8.0	0.0	14.3	26.4	46
	30 +	6.1	5.9	8.0	10.0	0.0	6.3	11
Others	Yes	10.2	5.9	12.0	40.0	--	10.9	19
	No	89.8	94.1	88.0	60.0	100.0	89.1	155
Total (N)		98	34	25	10	7	100.0	174

* GB=3 ICT=2 AJK=2

2.4.11 Drop out of FP methods

Table 2.22 presents the status of maintenance of record of dropped out clients of FP methods, the results shows that slightly less than three fourth of the FWCs are maintaining the record of

dropped out clients of FP methods, provincial analysis indicates that only forty four percent FWCs of Sindh and fifty six percent in Balochistan are maintaining the record of drop out clients, whereas the situation is better in Punjab and KPK and Punjab.

Table 2.22: Record Maintenance of Client who dropped the FP Method by Region

Clients Record		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Record maintenance of client (dropped the FP Method)	Yes	80.6	44.1	88.0	55.6	85.7	73.4	127
	No	19.4	55.9	12.0	44.4	14.3	26.6	46
Total (N)		98	34	25	9	7	100.0	173

* GB=3 ICT=2 AJK=2

2.4.12 Status of drop out clients of FP methods

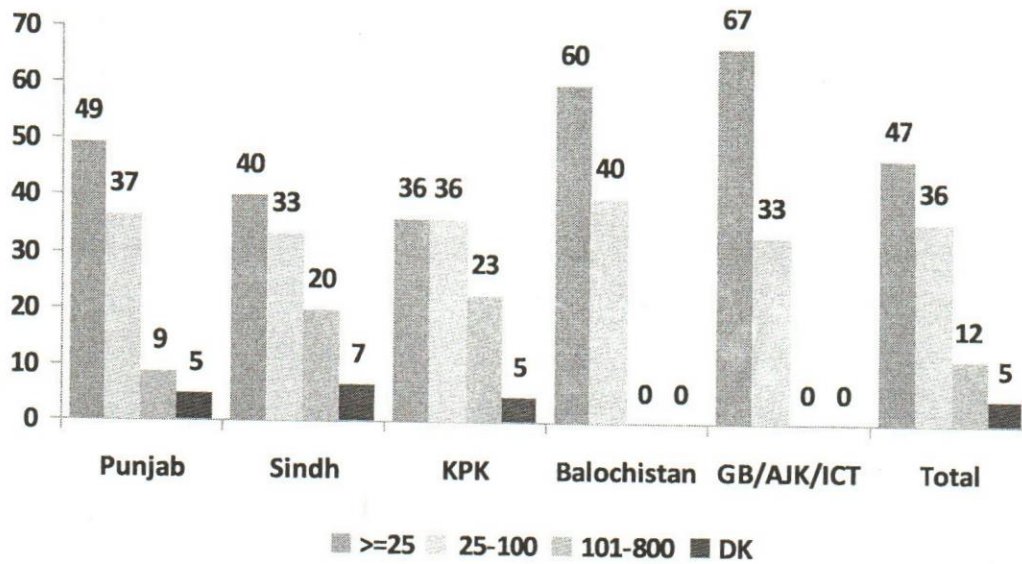
Table 2.23 shows that forty seven percent FWCs were such where twenty five or less FP clients have dropped FP methods during last one year. Province wise analysis indicates almost the same pattern. The position is more visible in the following figure.

Table 2.23: Clients who dropped the FP Method (s) during the Year July 2009 to June 2010 by Region

Drop out of Family Planning methods	Number	Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Clients who were dropped the FP method	>=25	49.4	40.0	36.4	60.0	66.7	47.2	60
	25-100	36.7	33.3	36.4	40.0	33.3	36.2	46
	101-800	8.9	20.0	22.7	0.0	0.0	11.8	15
	DK	5.1	6.7	4.5	0.0	0.0	4.7	6
Total (N)		79	15	22	5	6	100.0	127

* GB=3 ICT=2 AJK=2

Figure 2.7: Clients who Dropped the Family Planning Method during July 2009-June 2010



2.4.13 Reasons for dropout of FP methods

Table 2.24 presents the reasons of dropout of FP clients as stated by In-charges of the centers. The main reasons for dropout were: due to side effects, desire of more children and due to migration/shifting of clients from their areas. The dropout due to side effects was high as compared to other reasons. Provisional analysis highlights in Punjab the ratio of those dropped out due to side effect is high as compared to other provinces. In KPK the migration factor of clients was high as compared to other reasons.

Table 2.24: Main Reasons for Dropouts by Region

S.#	Main Reasons	Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
1	Due to side effects	54.1	17.6	32.0	10.0	42.9	40.8	71
2	Desire of more children	36.7	8.8	20.0	20.0	28.6	27.6	48
3	Due to migration/shifting of clients.	12.2	2.9	36.0	10.0	0.0	13.2	23
4	The maximum duration of the method expired, and client didn't revisit for follow-up.	5.1	2.9	0.0	0.0	28.6	4.6	8
5	Husband was out of country/Husband died/Woman was divorced	2.0	0.0	20.0	10.0	28.6	5.7	10
6	Client crossed the reproductive age limit	2.0	0.0	8.0	20.0	0.0	3.4	6
7	Due to family restriction/ family opposition.	6.1	2.9	12.0	0.0	14.3	6.3	11
8	The duration of FP methods completed.	1.0	0.0	0.0	0.0	0.0	0.6	1
9	Clients started taking FP services from other sources.	0.0	2.9	0.0	0.0	0.0	0.6	1
10	Health problems	0.0	8.8	0.0	0.0	0.0	1.7	3
11	Because we have no training/no capacity to handle/treat the serious issues caused by contraceptive use.	0.0	2.9	0.0	0.0	0.0	0.6	1
12	Due to irregularity of menses	1.0	0.0	8.0	0.0	0.0	1.7	3
13	Due to Talibanization factor/extremism	0.0	0.0	4.0	0.0	0.0	0.6	1
14	Client demands method of longer duration that is unavailable.	1.0	0.0	0.0	0.0	0.0	0.6	1
Total (N)		98	34	25	10	7	100.0	174

* GB=3 ICT=2 AJK=2

2.5 Maternal Care

2.5.1 Antenatal care services

Table 2.25 indicates that about nineteen percent of the FWCs were such where no antenatal client has visited during last three months, 31-50 clients were visited in thirty five percent FWCs, and about one fifth FWCs reported that fifty or more antenatal clients visited during last three month. Province wise analysis indicates that thirty seven percent of the FWCs in Sindh reported that no antenatal client has visited their centers.

Table 2.25: Numbers of Clients who Visited Centers during Last 3 Months for Antenatal Care by Region

Number of Clients			Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
								%	N
Clients who visited	Actual Number	None	16.9	36.8	8.3	20.0	0.0	18.7	20
		1-30	16.9	47.4	33.3	20.0	66.7	27.1	29
		31-50	43.1	10.5	25.0	40.0	33.3	34.6	37
		51+	23.1	5.3	33.3	20.0	0.0	19.6	21
	Sub-total		65	19	12	5	6	100.0	107
	Estimated Number	None	29.4	62.5	28.6	66.7	0.0	38.9	14
		1-30	35.3	37.5	14.3	0.0	100.0	30.6	11
		31-50	35.3	0.0	28.6	33.3	0.0	25.0	9
		51+	0.0	0.0	28.6	0.0	0.0	5.6	2
	Sub-total		17	8	7	3	1	100.0	36
Grand Total (N)			82	27	19	8	7	100.0	143

* GB=3 ICT=2 AJK=2

2.5.2 Complications managed by the In-charges

Table 2.26 presents the nature of complicated cases dealt by the In-charges of FWCs; it indicates that in about ninety percent or above cases of backache, discharge and bleeding are managed at the centers; same pattern is also observed in the provinces.

Table 2.26: Type of complications managed by In-Charges by Region

Complications Managed by In-charge		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Backache	Yes	93.8	84.6	91.3	100.0	100.0	92.0	115
	No	6.3	15.4	8.7	0.0	0.0	8.0	10
Discharge	Yes	95.3	73.1	78.3	100.0	100.0	88.0	110
	No	4.7	26.9	21.7	0.0	0.0	12.0	15
Bleeding	Yes	95.3	92.3	82.6	100.0	66.7	91.2	114
	No	4.7	7.7	17.4	0.0	33.3	8.8	11
Others	Yes	40.6	3.8	34.8	16.7	33.3	30.4	38
	No	59.4	96.2	65.2	83.3	66.7	69.6	87
Total (N)		64	26	23	6	6	100.0	125

* GB=3 ICT=2 AJK=2

2.5.3 Complicated cases referred to health outlets

The FWCs in-charges referred complicated cases which they could not able to handle mostly to Govt. hospitals, thirty five percent cases were referred to private hospitals and twenty eight percent cases to nearest clinics.

Table 2.27: Referred more Complicated Cases to different Health Outlets by Region

Referred complicated cases to;		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Govt. Hospital	Yes	90.3	83.3	87.0	90.0	85.7	88.3	144
	No	9.7	16.7	13.0	10.0	14.3	11.7	19
Private Hospital	Yes	35.5	26.7	34.8	30.0	71.4	35.0	57
	No	64.5	73.3	65.2	70.0	28.6	65.0	106
Nearest Clinic	Yes	30.1	23.3	30.4	20.0	14.3	27.6	45
	No	69.9	76.7	69.6	80.0	85.7	72.4	118
Other	Yes	10.8	3.3	8.7	10.0	14.3	9.2	15
	No	89.2	96.7	91.3	90.0	85.7	90.8	148
Total (N)		93	30	23	10	7	100.0	163

* GB=3 ICT=2 AJK=2

2.6 Child Care

Child health care is an important activity of FWC, table 2.28 below presents the number of children provided health care services from the sampled FWCs during last year prior to the survey. The data reveals that three fifth of the FWCs provided child health care services to 100 or more children during one year. Six percent of the centers were such where no child came for health care services and one fifth reported that they provided services to fifty or less children; it indicates that the performance of forty percent of the FWCs is below average for child health care services. Province wise analysis shows that FWCs in Balochistan has the lowest turnover of child health care clients.

Table 2.28: Number of children who have Received Health Care Services Provided by Centre during July 2009-June 2010 by Region

Child health care services		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
New Born	None	25.5	23.5	8.0	30.0	14.3	22.4	39
	1-50	48.0	52.9	48.0	70.0	71.4	51.1	89
	51-100	17.3	11.8	20.0	0.0	0.0	14.9	26
	101+	9.2	11.8	24.0	0.0	14.3	11.5	20
Infants	None	15.3	26.5	8.0	30.0	--	16.7	29
	1-50	48.0	38.2	40.0	70.0	71.4	47.1	82
	51-100	25.5	20.6	32.0	0.0	0.0	23.0	40
	101+	11.2	14.7	20.0	--	28.6	13.2	23
Child	None	4.1	20.6	8.0	30.0	--	9.2	16
	1-50	38.8	35.3	28.0	40.0	57.1	37.4	65
	51-100	33.7	17.6	36.0	10.0	14.3	28.7	50
	101+	23.5	26.5	28.0	20.0	28.6	24.7	43
Total	None	3.1	11.8	4.0	30.0	--	6.3	11
	1-50	17.3	8.8	8.0	--	28.6	13.8	24
	51-100	17.3	23.5	20.0	40.0	14.3	20.1	35
	101+	62.2	55.9	68.0	30.0	57.1	59.8	104
	Total N	98	34	25	10	7	100.0	174

* GB=3 ICT=2 AJK=2

2.7 Community Activities

The FWCs are also mandate to arrange community activities for the awareness of family planning and health care programmes. Table 2.29 presents the activities carried out by the FWCs at the community level. It reveals that majority (83 percent) of the centers have arranged health talks, the Sukhi ghar mehfilis were arranged by thirty six percent and Mohallah sangat by less than one third of the centers. Province wise analysis shows that Sukhi ghar mehfilis were more arranged by FWCs in the provinces of Sindh and KPK as compared to others. Picture is more visible in the following figure.

Figure 2.8: Community Activities Carried Out by FWCs

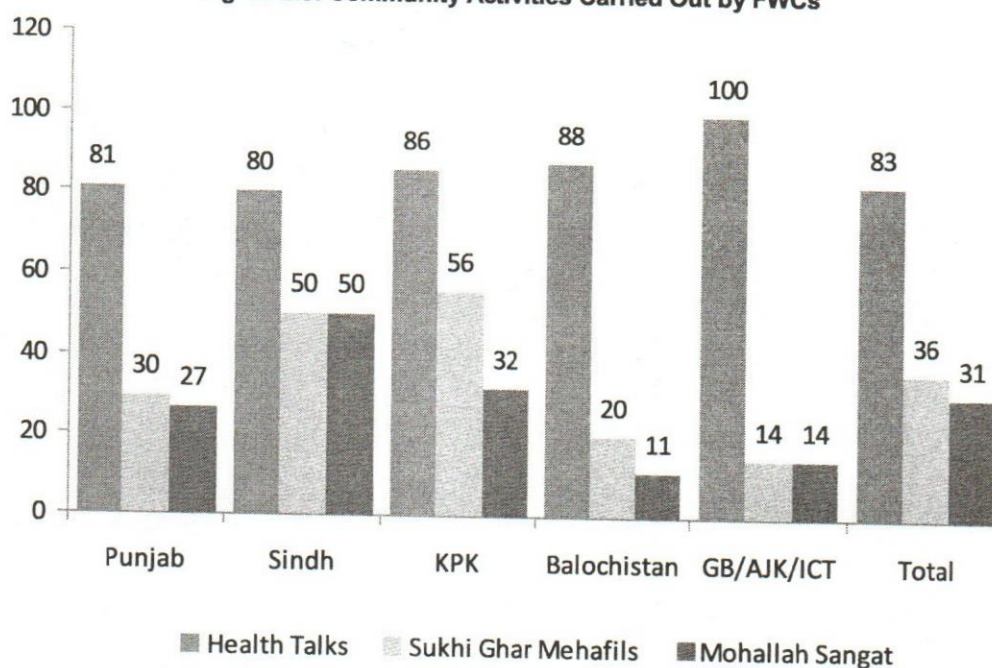


Table 2.29: Activities at Community Level Carried out by FWC Staff by Region

Type of activities		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Health Talks	Yes	81.3	80.0	85.7	87.5	100.0	82.5	113
	No	18.8	20.0	14.3	12.5	0.0	17.5	24
	Total (N)	96	15	14	8	4	100.0	137
Sukhi Ghar Mehfilis	Yes	29.6	50.0	56.0	20.0	14.3	36.2	63
	No	70.4	50.0	44.0	80.0	85.7	63.8	111
	Total (N)	98	34	25	10	7	100.0	174
Mohallah Sangat	Yes	26.5	50.0	32.0	11.1	14.3	30.6	53
	No	73.5	50.0	68.0	88.9	85.7	69.4	120
	Total (N)	98	34	25	10	7	100.0	173

* GB=3 ICT=2 AJK=2

2.8 Refresher Training

The Government has arranged refresher courses from time to time for the FWW/Cs (In-charges of the FWCs). Table 2.30 presents the refresher courses attended by the In-charges of the sampled FWCs. Slightly over three fifth of the In-charges reported that they have not attended any refresher training during financial year, 2009-10, twenty six percent attended one and thirteen percent have chance twice or more in a year. Those attended, ninety percent were satisfied with training. Province wise data shows that Sindh and KPK have arranged more refresher trainings than others.

Table 2.30: Refresher Trainings Attended by the In-charge of FWCs since July 2009-June 2010 by Region

Refresher Trainings		Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
Refresher Trainings	None	69.4	50.0	56.0	70.0	14.3	61.5	107
	1	23.5	26.5	28.0	10.0	71.4	25.9	45
	2+	7.1	23.5	16.0	20.0	14.3	12.6	22
	Total (N)	98	34	25	10	7	100.0	174
Satisfied with Refresher Trainings	Yes	93.3	100.0	100.0	100.0	100.0	97.0	65
	No	6.7	0.0	0.0	0.0	0.0	3.0	2
	Total (N)	30	17	11	3	6	100.0	67

* GB=3 ICT=2 AJK=2

2.9 Monitoring Visits by the Officers of Provincial/Tehsil/ HQ at FWCs

The In-charges were asked about the visits of TPWO/DPWO and other senior officers from the Provincial Head Quarters and others during last year. Table 2.31 shows the detail of visits to FWCs at different levels. About two fifth of the FWCs reported that not a single visit was conducted by TPWOs during last year prior to the survey. Slightly over one fifth reported 6-10 visits by TPWOs, about ninety percent of the centers were either visited on the average less than one time in a year or not visited at all, indicates poor monitoring by the immediate managers. Provincial analysis of data reveals that majority of FWCs in Sindh and Balochistan reported not a single visit by the TPWOs. The TPWOs in Punjab have some regular visits, where only sixteen percent of the FWCs were not visited during last year. Surprisingly the DPWOs have visited more as compared to TPWOs. Slightly over one fifth FWCs reported no visit of DPWOs during last one year. About seventy nine percent of the FWCs were not visited by the officers from the

provincial head quarters. More monitoring visits are reported from the Federal level as compared to the PWDs. It appears from the data that the monitoring is weak at all levels.

Table 2.31: Percent Distribution of FWCs according to Number of Inspection Visits by Type of Managers and Region

Number of visits made by:		Punjab	Sindh	KPK	Balochistan	GB/AJK/ISB	Total
TPWO	None	16.3	70.6	40.0	90.0	100.0	37.9
	Up to 3	18.4	14.7	40.0	10.0	--	19.5
	04-05	11.2	8.8	12.0	--	--	9.8
	06-10	35.7	5.9	4.0	--	--	21.8
	11-20	14.3	--	4.0	--	--	8.6
	21+	4.1	--	--	--	--	2.3
DPWO	None	12.2	38.2	32.0	50.0	--	21.8
	Upto 3	40.8	38.2	48.0	10.0	57.1	40.2
	04-05	13.3	8.8	8.0	--	28.6	11.5
	06-10	15.3	8.8	--	20.0	14.3	12.1
	11-20	16.3	5.9	8.0	20.0	--	12.6
	21+	2.0	--	4.0	-	--	1.7
Officer from PWD	None	78.6	70.6	76.0	100.0	100.0	78.7
	Upto 3	13.3	29.4	16.0	--	--	15.5
	04-05	1.0	--	8.0	--	--	1.7
	06-10	6.1	--	--	--	--	3.4
	11-20	1.0	--	--	--	--	0.6
Officer from MoPW	None	16.3	70.6	40.0	90.0	100.0	37.9
	Up to 3	18.4	14.7	40.0	10.0	--	19.5
	04-05	11.2	8.8	12.0	--	--	9.8
	06-10	35.7	5.9	4.0	--	--	21.8
	11-20	14.3	--	4.0	--	--	8.6
	21+	4.1	--	--	--	--	2.3
Total	Percent	100.0	100.0	100.0	100.0	100.0	100.0
	Number	98.0	34.0	25.0	10.0	7.0	174.0

2.10 Observations/Recommendations Stated By In-charges of FWCs

Table 2.32 shows the observation/recommendations given by the In-charges on various issues. Less than half were satisfied with the incentives provided by the government, three fifth were happy with the career planning, two third reported the power delegated to them are enough to carry out day to day work, funds shortage was mentioned by about twenty nine percent of the FWCs. Few of the In-charges have complaint about delay in salaries and three fourth have reported un-necessary delay in their TA/DA.

Table 2.32: Observations and Recommendations stated by the In-charges of FWCs by Region

Nature of problems	Recommendations	Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT	Total	
							%	N
Incentives	1 Satisfactory	50.0	32.4	44.0	90.0	42.9	47.7	83
	2 Non-Satisfactory	21.4	55.9	48.0	0.0	42.9	31.6	55
	3 Double all allowances	14.3	0.0	4.0	0.0	14.3	9.2	16
	4 Pay EID allowance	2.0	0.0	0.0	0.0	0.0	1.1	2
	5 Pay CS case referral Fees to FWW/FWA	3.1	0.0	0.0	0.0	0.0	1.7	3
	6 Pay traveling allowance	5.1	0.0	0.0	0.0	0.0	2.9	5
Job career	1 Satisfactory	46.9	76.5	76.0	90.0	57.1	59.8	104
	2 Non-Satisfactory	12.2	8.8	8.0	0.0	28.6	10.9	19
	3 Award promotion on priority basis	24.5	2.9	12.0	0.0	14.3	16.7	29
	4 There should be more refresher trainings to staff	4.1	2.9	0.0	0.0	0.0	2.9	5
	5 Give permanent job	7.1	0.0	0.0	0.0	0.0	4.0	7
	6 Pay pension after benefits	1.0	0.0	0.0	0.0	0.0	0.6	1
Delegation of powers to In-charge	1 Satisfactory	60.2	55.9	80.0	90.0	100.0	65.5	114
	2 Non-Satisfactory	7.1	20.6	8.0	0.0	0.0	9.0	16
	3 Increase administration powers of In-charge	21.4	2.9	8.0	0.0	0.0	13.8	24
	4 There should be Full control on FWC staff	1.0	0.0	0.0	0.0	0.0	0.6	1
	5 Reduce political influence	1.0	0.0	0.0	0.0	0.0	0.6	1
Funds (shortage or sufficient)	1 Satisfactory	23.5	14.7	32.0	90.0	71.4	28.7	50
	2 Non-Satisfactory	30.6	61.8	56.0	0.0	14.3	37.9	66
	3 Not available at DPW office	6.1	2.9	0.0	0.0	0.0	4.0	7
	4 Funds should be released on priority basis	7.1	0.0	0.0	0.0	0.0	4.0	7
	5 Funds for FWC should be increased	26.5	8.8	8.0	0.0	14.3	18.4	32
Disbursement of salaries (on time/delay)	1 Satisfactory	82.7	64.7	88.0	90.0	57.1	79.3	138
	2 Unnecessary delay in salaries should be avoided	3.1	0.0	0.0	0.0	28.6	2.9	5
Disbursement of TA/DA (on time/delay)	1 Satisfactory	27.6	23.5	52.0	80.0	28.6	33.3	58
	2 Non-Satisfactory	28.6	52.9	36.0	0.0	42.9	33.3	58
	3 Late clearance of TA/DA bills should be avoided	34.7	11.8	12.0	10.0	14.3	24.7	43
	4 Revise TA/DA rules	3.1	0.0	0.0	0.0	14.3	2.3	4
Supervision/ management by Authority	1 Satisfactory	79.6	70.6	88.0	70.0	85.7	78.7	137
	2 Non-Satisfactory	9.2	17.6	12.0	20.0	14.3	12.1	21
	3 Authorities should inform us before visit.	2.0	0.0	0.0	0.0	0.0	1.1	2
Total (N)		98	34	25	10	7	100.0	174

* GB=3 ICT=2 AJK=2

Chapter 3

PERCEPTION OF CLIENTS

User's perception regarding service providers is important for evaluation and improving the quality of services, FWC Clients, especially the Family Planning clients are the key users of the services provided by the centers. Their views are considered more important to evaluate the performance of the FWCs. Further, their suggestions are helpful in improving the quality of services and for promotion of family planning programme in the country. For this purpose two types of clients were interviewed for the study. The clients who have received FP services and registered in the sampled centers and the exit clients those came to obtain any service from the centre at the day of interview. This chapter presents information on client's background characteristics, knowledge about FWCs, home visits of staff, client's visit to center, their views about services, use of contraception, reasons of non use, experience of side effects, future intentions to use contraception and suggestions to improve the working of centers to achieve the targets.

3.1 Coverage of Registered Clients

The survey team found lot of problems in locating the residence of registered clients due to incomplete address of the total 1720 selected registered clients from the record of FWCs only 786 were successfully interviewed, interviews of 11 clients were incompleted, 78 clients were not found at home, 15 clients refused to give response, nearly half (724) of the clients were not identified due to wrong or incomplete addresses. Ninety three clients have shifted to other places while 13 clients were not approached because of security reasons and law & order situations. At provincial level main reason for non-response among registered clients was the failure to find out their addresses which were taken from FWCs client's registers. Over all, 591 exit clients were successfully interviewed during the survey.

Table 3.1: Coverage of Registered Clients by Region

Regions	Completed	No completed						Total (N)	
	Successfully Interviewed	Incompleted	Not at Home	Client Refused	Address not Available or Fake	Shifted to other Places	Security/ Law and order Situation		
Punjab	45.60	0.00	4.80	1.00	41.50	5.80	1.00	980	
Sindh	38.8	0.00	5.90	0.30	52.50	2.50	0.00	320	
KPK	46.00	3.60	2.00	1.60	37.60	8.00	1.20	250	
Balochistan	46.00	0.00	5.00	0.00	41.00	8.00	0.00	100	
Gilgit- Baltistan	96.7	0.00	0.00	0.00	3.30	0.00	0.00	100	
Islamabad	65.00	0.00	10.00	0.00	25.00	0.00	0.00	20	
AJK	60.00	0.00	0.00	0.00	40.00	0.00	0.00	20	
Total	Number	786	11	78	15	724	93	13	1720
	Percent	45.70	0.60	4.50	0.90	42.10	5.40	0.80	100

3.1.1 Socio-Demographic Characteristics of Clients

Table 3.1(a) gives the socio-demographic profile of the 786 registered and 591 exit clients of the sampled FWCs located in urban and rural areas. Results reveal that sixty percent registered clients were from rural areas. The percentage of exit clients interviewed in rural FWCs was slightly less as compared to registered clients (57 percent). Three fourth of the clients were of age between 25-39 years, nine percent below twenty five years of age and sixteen percent of age group 40-years and above. Education has a strong relationship with the use of family planning because education empowered woman to take decisions of her life specially related to her fertility behavior. Women were asked about their education in the form of number of classes passed. It is observed from table 3.1(a) that fifty three percent of the interviewed clients have no education, twenty three percent were below metric level of schooling and about seven percent having secondary or above level of education. As regards their husband's education, it is observed that forty percent of the husbands have up to metric level education. Husband's with secondary and higher education is more than two times higher (16 percent) than women (7 percent). More than three fourth of the respondents were not doing any work or paid jobs at the time of the study. Only twenty six percent clients were engaged in any type of paid work.

Table 3.1(a): Percent Distribution of Clients according to their Background Characteristics

Background characteristics		Type of Client		Total	
		Registered Client	Exit Client	Percent	Number
Area of residence	Urban	39.8	43.0	41.2	567
	Rural	60.2	57.0	58.8	810
Age	Less Than 25	9.0	9.1	9.1	125
	25-29	22.5	25.0	23.6	325
	30-34	28.4	29.9	29.0	400
	35-39	24.2	21.0	22.8	314
	40 and more	15.9	14.9	15.5	213
Women's Education	No education	53.7	52.5	53.2	732
	Up to primary	16.5	17.9	17.1	236
	Up to metric	23.7	22.2	23.0	317
	Secondary +	6.1	7.4	6.7	92
Husband's Education	No education	31.4	33.5	32.3	445
	Up to primary	13.1	11.0	12.2	168
	Up to metric	41.0	38.6	39.9	550
	Secondary +	14.5	16.9	15.5	214
Currently Working	Currently working	26.2	24.7	25.6	352
	Not working	73.8	75.3	74.4	1025
Age at marriage	< 20 years	62.2	64.0	63.0	867
	20 - 24	31.9	28.4	30.4	419
	25 and more	5.3	7.6	6.3	87
	No information	0.5	0.0	0.3	4
Husband's Age at marriage	< 25 years	55.1	54.5	54.8	755
	25 - 29	30.9	32.3	31.5	434
	30 and more	11.7	11.7	11.7	161
	No information	2.3	1.5	2.0	27
Total		786	591	100	1377

Age at marriage is considered an important indicator of fertility. By increasing age at marriage, fertility span can be reduced to control the population. Interestingly, the majority (63 percent) of the clients visiting FWCs were married in younger age i.e. below twenty years. While less than

one-third (30 percent) began their marital life at the age between 20-24 years. A meager number (6 percent) got married at the age of 25 years and above.

Women were asked about their husbands age at marriage, more than half (55 percent) of women reported that their husbands were not more than twenty five years when they got married followed by 25-29 years (32 percent) and 30 years and above age group (12 percent). Almost similar trend is followed among registered and exit clients.

3.2 Fertility Status

Table 3.2 highlighted the fertility behavior of the registered and exit clients which also an important factor to judge the family planning motivation to the clients and their attitude towards adoption of FP methods to space or control births. One-fifth (21 percent) of the women had 1-2 children, more than half (53 percent) have 3-5 and one-fourth (25 percent) mentioned five and more children ever born to them. As indicated from Figure 3.1, mean number of children ever born is slightly higher (4.3) than the mean of surviving children (3.9). In response to surviving children one fourth (24 percent) reported to have 1-2 children, more than half (58 percent) have 3-5 children, while eighteen percent have more than 5 children. Not much variation is found among the responses of registered and exit clients.

Table 3.2: Percent Distribution of Clients according to their Fertility Status

Fertility Status		Type of Client		Total
		Registered Client	Exit Client	Percent
Children Ever born	None	.7	.2	.5
	1 – 2	20.1	22.8	21.2
	3 – 5	55.7	50.2	53.4
	5 +	23.5	26.9	24.9
Surviving children:	None	.7	.4	.5
	1 – 2	23.5	23.9	23.7
	3 – 5	59.3	56.4	58.0
	5 +	16.5	19.4	17.8
Total	Percent	100.0	100.0	100.0
	Number	757	566	1323
Mean children ever born		4.3	4.4	4.3
Mean surviving children		3.9	4.0	3.9
Current Pregnancy Status	Yes	5.7	2.3	4.3
	No	92.9	95.9	94.2
	Not Sure	1.3	1.8	1.5
Desire for Children	Yes	24.2	24.8	24.4
	No	61.7	59.5	60.7
	Up to God	7.5	9.0	8.1
	No Desire	6.7	6.7	6.7
Total	Percent	100.0	100.0	100.0
	Number	749	565	1314
Desire for Boys	None	22.2	22.6	22.3
	1	47.7	51.9	49.5
	2 and more	30.1	25.6	28.2
Desire for Girls	None	51.4	50.0	50.8
	1	32.8	40.9	36.2
	2 and more	15.8	9.1	12.9
Total	Percent	100.0	100.0	100.0
	Number	176	133	309
Either	None	92.0	90.8	91.5
	1	4.0	3.8	3.9
	2 and more	4.0	5.3	4.6
Total	Percent	100.0	100.0	100.0
	Number	175	131	306

*NOTE: Q113 has missing observations and don't know categories that have the observation 11 to 15.

At the time of survey ninety four percent clients were not pregnant only four percent confirmed that they are pregnant and about two percent were not sure about their pregnancy. Women were asked about their desire for children in future and found that slightly over three-fifth (61 percent) had no desire for more children. A meager number have not yet decided or left the matter on God to decide. The number of clients, who wanted to have more children, were further asked about their desire for a boy or a girl or either. Half of them wanted to have one son while slightly over one-third (36 percent) have desired for a girl child. Only four percent mentioned to have a child of either sex. Unexpectedly, desire for one boy and a girl is higher among exit clients while desire for two and more boys and girls is higher among registered clients.

3.3 Knowledge and Source of Knowledge about FWCs

Table 3.3 indicates that ninety four percent registered clients have confirmed the presence of FWC in their area. Province wise analysis indicates that six percent clients from Punjab and fourteen percent from KPK were unaware of the existence of the FWC in the area. As regards source of knowledge about FWC the interpersonal communication with reference to friends and relatives is seems to be a more prominent source of knowledge (58 percent) followed by FWA (39 percent), FWW/C (34 percent), another acceptor (32 percent) and husband (21 percent) while eight percent mentioned male mobilizer, Doctors, print media, paramedics and electronic media were also mentioned by a small proportion of registered clients as their source of information about the centre. Figure 3.1 give the details. At provincial level two third (62 percent) clients in Punjab were informed by the friends/relatives and one third (35 percent) got knowledge from other acceptors. About sixty eight percent clients in Sindh got information from friends and relatives and fifty seven percent also mentioned FWW/Cs as commonly cited source after friends and relatives, the more common source of knowledge about the center in KPK are the staff of FWCs, while in Balochistan majority (63 percent) mentioned friends/relatives, another acceptors and FWA (58 percent) as their major sources of information. Almost similar pattern emerged about the source of knowledge of registered and exit clients.

Figure 3.1: Source of Knowledge by Type of Clients

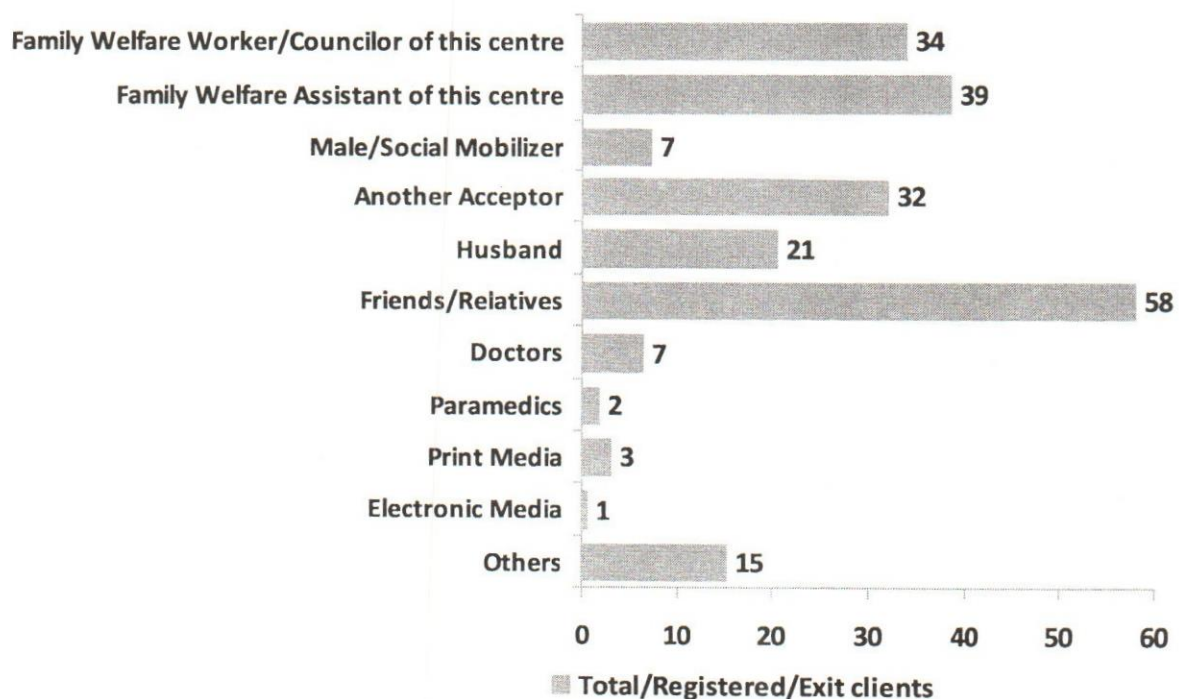


Table 3.3: Percentage of Clients according to their Knowledge about FWC by Region

Knowledge about FWC			Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
Registered Client	Knowledge about FWC*	Yes	93.7	100.0	86.1	100.0	100.0	94.4	742
		No	6.3	00.0	13.9	0.0	0.0	5.6	44
	Total		447	124	115	46	54	100.0	786
	Source of Knowledge	Family Welfare Worker/Councilor	26.7	57.3	30.3	26.1	40.7	33.3	247
		Family Welfare Assistant	32.5	47.6	35.4	58.7	48.1	38.1	283
		Male/Social Mobilizer	4.3	12.9	2.0	8.7	40.7	8.4	62
		Another Acceptor	34.4	37.9	11.1	63.0	33.3	33.6	249
		Husband	18.4	17.7	29.3	21.7	44.4	21.8	162
		Friends/ Relatives	61.1	70.2	31.3	65.2	64.8	59.2	439
		Doctors	3.6	12.9	1.0	10.9	14.8	6.1	45
		Paramedics	0.5	0.8	0.0	0.0	16.7	1.6	12
		Print media	4.8	0.0	0.0	0.0	7.4	3.2	24
Electronic media		0.2	0.8	0.0	0.0	3.7	0.5	4	
Others	15.3	14.5	8.1	10.9	25.9	14.7	109		
Total		419	124	99	46	54		742	
Exit Clients	Source of Knowledge	Family Welfare Worker/Councilor	29.3	43.8	38.0	30.3	52.9	34.9	206
		Family Welfare Assistant	30.6	38.8	63.3	57.6	52.9	39.4	233
		Male/Social Mobilizer	3.1	6.6	5.1	9.1	29.4	5.9	35
		Another Acceptor	34.6	28.9	11.4	45.5	20.6	30.1	178
		Husband	19.8	12.4	11.4	27.3	41.2	18.8	111
		Friends/ Relatives	63.3	66.1	16.5	60.6	52.9	56.9	336
		Doctors	4.9	12.4	1.3	3.0	23.5	6.9	41
		Paramedics	1.9	0.0	1.3	0.0	14.7	2.0	12
		Print media	4.9	0.0	0.0	3.0	5.9	3.2	19
		Electronic media	0.9	0.8	0.0	0.0	0.0	0.7	4
	Others	18.8	19.0	3.8	9.1	14.7	16.1	95	
Total		324	121	79	33	34	591		
All Client	Source of Knowledge	Family Welfare Worker/Councilor	27.9	50.6	33.7	27.8	45.5	34.0	453
		Family Welfare Assistant	31.6	43.3	47.8	58.2	50.0	38.7	516
		Male/Social Mobilizer	3.8	9.8	3.4	8.9	36.4	7.3	97
		Another acceptor	31.5	33.5	11.2	55.7	28.4	32.0	427
		Husband	19.0	15.1	21.3	24.1	43.2	20.5	273
		Friends/ relatives	62.0	68.2	24.7	63.3	60.2	58.1	775
		Doctors	4.2	12.7	1.1	7.6	18.2	6.5	86
		Paramedics	1.1	0.4	0.6	0.0	15.9	1.8	24
		Print media	4.8	0.0	0.0	1.3	6.8	3.2	43
	Electronic media	0.5	0.8	0.0	0.0	2.3	0.6	8	
Others	16.8	16.7	6.2	10.1	21.6	15.3	204		
Total		743	245	178	79	88		1333	

* Figures are reported in percent distribution

3.4 FWC Visits by Clients

Table 3.4 below presents the distribution of clients by ever visit to FWC, advise to visit center, visits of FWC's staff at their residences, and purpose of visits i.e. for motivation or follow-up etc.

Table 3.4: Percentage of Registered and Exit Clients according to FWC Visit by Region

Visit to FWC			Punjab	Sindh	KPK	Balochistan	GB/CT/AJK	Total	Number	
Registered Client	Ever visit to FWC*	Yes	96.9	97.6	97.0	100.0	98.1	97.3	722	
		No	3.1	2.4	3.0	0.0	1.9	2.7	20	
		Total	419	124	99	46	54	100.0	742	
	Advised to attend/visit FWC	FWW/C	9.6	18.2	15.6	10.9	22.6	12.9	93	
		FWA(F)	13.5	19.0	24.0	26.1	17.0	16.9	122	
		Male/Social Mobilizer	0.5	1.7	—	0.0	11.3	1.4	10	
		Another Acceptor/client	7.9	6.6	8.3	17.4	15.1	8.9	64	
		Husband	16.3	11.6	17.7	10.9	1.9	14.3	103	
		Friends/relatives	35.0	30.6	25.0	26.1	11.3	30.6	221	
		Doctor	0.5	0.8	2.1	2.2	0.0	0.8	6	
		TBA/Dai	2.2	0.8	4.2	2.2	0.0	2.1	15	
		LHW	5.4	2.5	0.0	2.2	11.3	4.4	32	
		Others	7.9	8.3	3.1	2.2	9.4	7.1	51	
		No information	1.2	0.0	0.0	0.0	0.0	0.7	5	
		Total	406	121	96	46	53	722	—	
		Staff of FWC ever visit	FWW/C visited	27.9	72.6	39.4	45.7	50.0	39.6	294
	FWA Visited		43.7	65.3	66.7	58.7	51.9	51.9	385	
	Others		12.6	7.3	15.2	0.0	3.7	10.6	79	
	Total		419	124	99	46	54	742	—	
	Discussion during home visit	Discussed on FP	83.1	95.1	82.5	87.0	75.9	84.8	617	
		General Health	7.6	8.1	12.4	15.2	13.0	9.2	67	
		MCH Care	10.3	31.7	23.7	19.6	13.0	16.5	120	
		Hygiene/Cleanliness /Nutrition	1.2	16.3	19.6	30.4	29.6	10.2	74	
		Total	408	123	97	46	54	728	—	
	Exit Clients	Advised to attend/visit FWC	FWW/C	12.3	19.8	17.7	3.0	29.4	15.1	89
			FWA(F)	9.3	17.4	59.5	33.3	17.6	19.5	115
			Male/Social Mobilizer	0.6	0.0	0.0	0.0	5.9	.7	4
			Another acceptor/client	10.2	3.3	3.8	6.1	0.0	7.1	42
			Husband	15.4	5.0	8.9	24.2	11.8	12.7	75
			Friends/relatives	34.0	32.2	7.6	30.3	26.5	29.4	174
Doctor			1.5	6.6	0.0	0.0	0.0	2.2	13	
Paramedics			0.6	0.0	0.0	0.0	0.0	0.3	2	
TBA/Dai			0.9	0.0	0.0	3.0	—	0.7	4	
LHW			1.5	2.5	1.3	0.0	5.9	1.9	11	
Others			11.4	12.4	1.3	0.0	2.9	9.1	54	
No information			2.2	0.8	0.0	0.0	0.0	1.4	8	
Staff of FWC ever visit			FWW/C visited	33.0	66.9	35.4	51.5	85.3	44.3	262
		FWA Visited	43.8	55.4	75.9	72.7	73.5	53.8	318	
		Others	13.9	19.0	11.4	3.0	17.6	14.2	84	
Discussion during home visit		Discussed on FP	15.4	10.7	34.2	3.0	26.5	16.9	491	
		General health	92.3	97.5	82.3	78.8	82.4	90.7	55	
		MCH care	91.7	62.0	84.8	78.8	79.4	83.2	99	
		Hygiene/Cleanliness /Nutrition	100.0	87.6	78.5	90.9	82.4	93.1	41	
		Total	324	121	79	33	34	591	—	
All Clients		Advised to attend/visit FWC	FWW/C	10.8	19.0	16.6	7.6	25.3	13.9	182
			FWA(F)	11.6	18.2	40.0	29.1	17.2	18.1	237
			Male/Social Mobilizer	.5	.8	0.0	0.0	9.2	1.1	14
			Another Acceptor/client	8.9	5.0	6.3	12.7	9.2	8.1	106
			Husband	15.9	8.3	13.7	16.5	5.7	13.6	178
			Friends/relatives	34.5	31.4	17.1	27.8	17.2	30.1	395
			Doctor	1.0	3.7	1.1	1.3	0.0	1.4	19
			Paramedics	0.3	0.0	0.0	0.0	0.0	0.2	2
			TBA/Dai	1.6	0.4	2.3	2.5	0.0	1.4	19
			LHW	3.7	2.5	.6	1.3	9.2	3.3	43
	Others		9.5	10.3	2.3	1.3	6.9	8.0	105	
	No Information		1.6	0.4	0.0	0.0	0.0	1.0	13	
	Total		730	242	175	79	87	1313	—	
	Staff of FWC ever visit	FWW/C visited	30.1	69.8	37.6	48.1	63.6	41.7	556	
		FWA Visited	43.7	60.4	70.8	64.6	60.2	52.7	703	
		Others	13.2	13.1	13.5	1.3	9.1	12.2	163	
		Total	743	245	178	79	88	1333	—	
	Discussion during home visit	Discussed on FP	83.7	92.2	75.0	91.1	75.0	84.0	1108	
		General health	7.7	5.3	14.8	17.7	14.8	9.2	122	
		MCH care	9.4	34.8	19.9	20.3	15.9	16.6	219	
		Hygiene/Cleanliness /Nutrition	0.7	14.3	20.5	21.5	25.0	8.7	115	
		Total	732	244	176	79	88	1319	—	

* Figures are reported in percent distribution.

3.4.1 Registered client's visits to FWC and reasons for not visiting

To confirm the fake or actual clients of FWCs, women were asked whether they ever visited FWC. Ninety seven percent registered clients verified their visit to FWC some time in the past. Only three percent of respondents reported that they never gone to FWCs for any purpose. To further explore the matter, reasons were obtained for never visiting the FWC. The commonly cited reasons by a meager number of women were services provided at their door step, women preferred to go to other service providers and satisfied with their services, due to the location of FWC they never visited there, no need to visit to FWC, unaware about the services available at the centers and they want more children.

3.4.2 Advise to attend the FWC

Women who ever visited the centers were asked that who motivated or advised them to use the services from the centre. Nearly one-third (30 percent) reported that their friends and relatives insisted to visit there. Eighteen percent motivated by FWA, slightly less than fourteen percent counseled by FWWs/Cs and by husbands. Less than one-tenth provoked by another acceptor/client, LHW, TBS/Dai, doctor, male mobilizer and paramedic staff. Province wise analysis indicates that in Punjab and Sindh main source of motivation to attend the services of FWCs is friends/relatives while in KPK and Balochistan FWAs are the main source of motivation. Variation in the motivating of other sources is not very significant among the provinces.

3.4.3 Visits of FWC staff

Forty two percent clients confirmed the home visits of FWW/C, fifty three percent reported that FWAs visited their home and twelve percent mentioned about other staff's visits. More home visits were made by FWA in all provinces except in Sindh where FWW/C's were more frequently visited than FWAs. Comparison of registered and exit clients data indicates that in Punjab and Balochistan, slightly less proportion of registered clients confirmed the visits of FWW/C, FWA and other staff's visits than exit clients, while in Sindh share of registered clients is little higher than exit clients who confirmed home visits of FWW, FWA and other staff.

3.4.4 Discussions during visits

Information was gathered on the discussions held at the centre or at home during visits. Table 3.4 above shows that eighty four percent of the respondents reported issues of family planning were discussed, followed by MCH care (17 percent), general health and hygiene/cleanliness/nutrition (9 percent). Provincial data indicates that family planning issues were usually discussed. Majority of registered clients also mentioned about this, however, a significantly high proportion of exit clients reported that discussions were held about personal hygiene, general health and MCH care during the visit at the centre or at home.

3.5 FP Services Provided by FWCs

The basic function of FWC is to provide family planning services including advise and provision of contraception, motivation, follow up visits and treatment of general ailments. Respondents were asked about the methods advised and discussed by the FWC staff (Table 3.5).

Table 3.5: Percentage of Registered and Exit Clients according to their Views about FP Services Provided by FWCs by Region

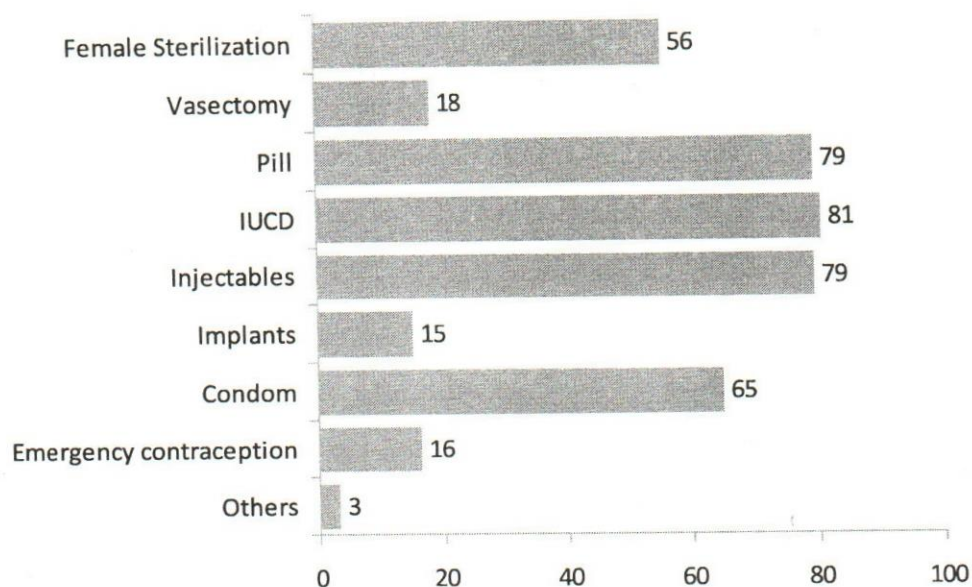
Services Provided by Staff			Punjab	Sindh	KPK	Balochistan	GB/ICT/ AJK	Total	Number	
Registered Client	FP method(s) advised by the staff	Female sterilization	47.8	73.2	69.1	23.9	64.8	54.7	398	
		Vasectomy	10.5	29.3	17.5	10.9	42.6	17.0	124	
		Pill	73.5	92.7	93.8	80.4	70.4	79.7	580	
		IUCD	81.1	87.8	79.4	80.4	81.5	82.0	597	
		Injectables	77.2	91.1	89.7	71.7	83.3	81.3	592	
		Implants	9.3	26.0	18.6	8.7	33.3	15.1	110	
		Condom	64.7	71.5	80.4	30.4	68.5	66.1	481	
		Emergency contraception	7.8	17.9	28.9	0.0	7.4	11.8	86	
		Others	1.2	4.9	7.2	0.0	0.0	2.5	18	
	Explained merits and demerits of FP methods	Merits	64.7	95.1	53.6	93.5	83.3	71.6	521	
		Demerits	44.9	72.4	30.9	95.7	25.9	49.5	360	
		Total	408	123	97	46	54		728	
	Explained merits of FP methods	Good for health	25.4	21.4	17.3	58.1	28.9	26.7	139	
		Small family/birth spacing and birth control	45.5	46.2	50.0	55.8	33.3	45.9	239	
		Economic/financial benefit	8.3	12.0	0.0	2.3	4.4	7.5	39	
		Knowledge about methods use and side effects	34.5	27.4	48.1	18.6	31.1	32.6	170	
		MCH care	17.8	48.7	3.8	20.9	48.9	26.3	137	
		Easy to use/easy to handle	4.2	12.0	5.8	2.3	0.0	5.6	29	
		Total	264	117	52	43	45		521	
	Explained demerits of FP methods	May cause dooziness, bleeding, swelling, vomiting, etc	84.7	94.4	76.7	84.1	71.4	85.8	309	
		Side effects	10.4	10.1	20.0	11.4	28.6	11.9	43	
		Less effective method	4.9	3.4	13.3	18.2	140.3	7.2	26	
		Total	183	89	30	44	14		360	
	Exit Clients	FP method(s) advised by the staff	Female sterilization	44.8	78.5	83.5	33.3	55.9	56.9	336
			Vasectomy	9.6	40.5	20.3	12.1	52.9	20.0	118
			Pill	70.1	90.1	94.9	87.9	76.5	78.8	466
			IUCD	73.8	86.0	88.6	72.7	85.3	78.8	466
Injectables			68.5	86.0	93.7	78.8	82.4	76.8	454	
Implants			5.9	33.9	19.0	6.1	41.2	15.4	91	
Condom			56.2	70.2	83.5	51.5	73.5	63.5	375	
Emergency Contraception			9.3	33.9	59.5	6.1	23.5	21.7	128	
Others			99.1	90.1	89.9	100.0	94.1	95.8	566	
Explained merits and demerits of FP methods		Merits	62.0	93.4	43.0	100.0	97.1	70.1	414	
		Demerits	41.0	52.9	21.5	100.0	44.1	44.3	262	
		Total	324	121	79	33	34		591	
Explained merits of FP methods		Good for health	14.9	14.2	14.7	60.6	15.2	18.4	76	
		Small family/birth spacing and birth control	44.3	54.0	52.9	63.6	45.5	49.3	204	
		Economic/financial benefit	4.5	9.7	0.0	3.0	6.1	5.6	23	
		Knowledge about methods use and side effects	37.3	34.5	14.7	18.2	21.2	31.9	132	
		MCH care	22.9	36.3	17.6	24.2	45.5	28.0	116	
		Easy to use/easy to handle	4.0	7.1	0.0	0.0	0.0	3.9	16	
		Total	201	113	34	33	33		414	
Explained demerits of FP methods		May cause dooziness, bleeding, swelling, vomiting, etc	77.4	98.4	70.6	93.9	66.7	83.6	219	
		Side effects	13.5	4.7	29.4	12.1	20.0	12.6	33	
	Less effective method	5.3	4.7	11.8	9.1	20.0	6.9	18		
	Total	133	64	17	33	15		262		

Services Provided by Staff			Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
All Clients	FP method(s) advised by the staff	Female sterilization	46.4	75.8	75.6	27.8	61.4	55.6	734
		Vasectomy	10.1	34.8	18.8	11.4	46.6	18.3	242
		Pill	72.0	91.4	94.3	83.5	72.7	79.3	1046
		IUCD	77.9	86.9	83.5	77.2	83.0	80.6	1063
		Injectable	73.4	88.5	91.5	74.7	83.0	79.3	1046
		Implants	7.8	29.9	18.8	7.6	36.4	15.2	201
		Condom	60.9	70.9	81.8	39.2	70.5	64.9	856
		Emergency contraception	8.5	25.8	42.6	2.5	13.6	16.2	214
		Others	1.1	7.4	8.5	0.0	2.3	3.3	43
	Explained merits and demerits of FP methods	Merits	63.5	94.3	48.9	96.2	88.6	70.9	935
		Demerits	43.2	62.7	26.7	97.5	33.0	47.2	622
		Total	732	244	176	79	88		1319
	Explained merits of FP methods	Good for health	20.9	17.8	16.3	59.2	23.1	23.0	215
		Small family/birth spacing and birth control	44.9	50.0	51.2	59.2	38.5	47.4	443
		Economic/financial benefit	6.7	10.9	0.0	2.6	5.1	6.6	62
		Knowledge about methods use and side effects	35.7	30.9	34.9	18.4	26.9	32.3	302
		MCH Care	20.0	42.6	9.3	22.4	47.4	27.1	253
		Easy to use/easy to handle	4.1	9.6	3.5	1.3	0.0	4.8	45
		Total	465	230	86	76	78		935
	Explained demerits of FP methods	May cause dizziness, bleeding, swelling, vomiting, etc	81.6	96.1	74.5	88.3	69.0	84.9	528
		Side effects	11.7	7.8	23.4	11.7	24.1	12.2	76
		Less effective method	5.1	3.9	12.8	14.3	17.2	7.1	44
		Total	316	153	47	77	29		622

3.5.1 FP Methods advised by staff

The most commonly advised method was IUCD (81 percent), followed by injectables and pills (79 percent), condom (65 percent) and female sterilization (56 percent) while less than one-fifth of clients reported about vasectomy, emergency contraception, and implants.

Figure 3.2: Family Planning Methods Advised by FWC Staff



Provincial data indicates that in Punjab more commonly suggested method as reported was IUCD in Sindh and KPK, respondents mentioned that more emphasis was given on the use of pills. According to respondents in Balochistan, pill and IUCD were the most commonly advised method. Slight variation is found in the advised methods mentioned by registered and exit clients, except for emergency contraception which is reported two times higher by exit clients than registered clients.

3.5.2 Merits and demerits of methods

The clients were asked whether the FWC's staff explained the merits and demerits of methods they are proposing to adopt. Seventy one percent of the clients mentioned that merits of the methods were discussed by the staff, while nearly half of the clients (47 percent) reported that clarification of demerits were also given at the time of advising methods by the FWC's staff. Similar trend is observed in Punjab, Sindh and KPK while in Balochistan no variation was found in the reporting of merits and demerits during advising method for adoption by FWC staff (Table 3.5). Clients who were briefed about the merits and demerits of the methods, further informed that they were told about small family through birth spacing and birth control with the use of method (47 percent), followed by given full knowledge how to use the method and the side effects of particular method (32 percent), twenty seven percent were informed that method is useful for mother and child health care, twenty three percent were explained that it is good for

mother's health. Economic and financial benefits were explained by seven percent of women while five percent told that emphasis was given on easy use of method.

Benefit of small family was discussed across the provinces. Knowledge about method's utility and side effects were commonly explained in Punjab (36 percent) and KPK (35 percent), aspect of MCH care was given more importance in Sindh (43 percent). Feature of mother's good health was highlighted in Balochistan (59 percent).

Majority (85 percent) of the clients were made aware about the dizziness, bleeding, swelling and vomiting etc. Twelve percent were informed about general side effects of the methods and only seven percent were told that method is less effective. No large variations are found in the demerits explained at provincial level. Similar finding were found between registered and exit clients (Table 3.5).

3.6 Contraceptive use and Reasons for Choice

Table 3.6 provides information on the current use of contraceptives by exit and registered clients, reasons to choose a method and supplies of methods.

Table 3.6: Percent Distribution of Registered and Exit Clients according to their Current Contraceptive Use by Region

Current Contraceptive Use			Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number	
Registered Clients	currently using	Yes	86.5	87.0	94.8	60.9	85.2	86.0	626	
		No	13.5	13.0	5.2	39.1	14.8	14.0	102	
		Total	408	123	97	46	54	100.0	728	
	current method	Female sterilization	5.9	4.7	2.2	0.0	13.0	5.4	34	
		Pill	9.6	19.6	19.6	21.4	8.7	13.3	83	
		IUCD	34.6	13.1	23.9	14.3	10.9	26.7	167	
		Injectable	30.0	35.5	39.1	28.6	54.3	34.0	213	
		Condom	17.0	27.1	15.2	35.7	10.9	18.8	118	
		Emergency/ implants/ other	2.8	0.0	0.0	0.0	2.2	1.8	11	
	Reason to choose current method*	Less or no side-effects	4.5	9.3	12.0	17.9	2.2	6.9	43	
		Effective	12.2	12.1	16.3	21.4	34.8	14.9	93	
		Recommended by FWW	42.8	29.0	46.7	25.0	34.8	39.6	248	
		Advised by another acceptor	3.1	0.9	1.1	14.3	0.0	2.7	17	
		Recommended by husband	15.3	27.1	12.0	17.9	13.0	16.8	105	
		Recommended by friends/relatives	10.8	10.3	6.5	3.6	4.3	9.3	58	
	Choice not available/ media/ others	11.3	11.2	5.4	0.0	10.9	9.9	62		
	Supplies on demand	Yes	98.3	99.1	97.8	100.0	97.8	98.4	616	
		No	1.7	0.9	2.2	0.0	2.2	1.6	10	
		Total	353	107	92	28	46	100.0	626	
	Exit Clients	current use	Yes	97.5	87.6	100.0	97.0	100.0	95.9	567
No			2.5	12.4	0.0	3.0	0.0	4.1	24	
Total			324	121	79	33	34	100.0	591	
current method		Female sterilization	4.4	7.5	2.5	0.0	2.9	4.4	25	
		Pill	19.3	24.5	24.1	31.3	14.7	21.3	121	
		IUCD	26.6	15.1	21.5	9.4	26.5	22.8	129	
		Injectables	26.6	39.6	43.0	43.8	35.3	32.8	186	
		Condom	23.1	13.2	8.9	15.6	20.6	18.7	106	
Reason to choose current method*		Less or no side-effects	3.5	2.8	30.4	31.3	2.9	8.6	49	
		Effective	19.3	21.7	15.2	9.4	17.6	18.5	105	
		recommended by FWW	37.3	24.5	39.2	31.3	58.8	36.2	205	
		advised by another acceptor	7.6	1.9	2.5	9.4	0.0	5.5	31	
		recommended by husband	11.7	26.4	7.6	12.5	14.7	14.1	80	
		recommended by friends/relatives	9.5	11.3	2.5	6.3	0.0	8.1	46	
Choice not available/media/others		11.1	11.3	2.5	0.0	5.9	9.0	51		
Supplies on demand		Yes	98.7	98.1	97.5	100.0	100.0	98.6	559	
		No	1.3	1.9	2.5	0.0	0.0	1.4	8	
		Total	316	106	79	32	34	100.0	567	
All Clients		current use	Yes	91.4	87.3	97.2	75.9	90.9	90.4	1193
			No	8.6	12.7	2.8	24.1	9.1	9.6	126
	Total		732	244	176	79	88	100.0	1319	
	current method	Female sterilization	5.2	6.1	2.3	0.0	8.8	4.9	59	
		Pill	14.2	22.1	21.6	26.7	11.3	17.1	204	
		IUCD	30.8	14.1	22.8	11.7	17.5	24.8	296	
		Injectables	28.4	37.6	40.9	36.7	46.3	33.4	399	
		Condom	19.9	20.2	12.3	25.0	15.0	18.8	224	
		Emergency/ implants/ other	1.5	0.0	0.0	0.0	1.3	0.9	11	
	Reason to choose current method*	less or no side-effects	4.0	6.1	20.5	25.0	2.5	7.7	92	
		effective	15.5	16.9	15.8	15.0	27.5	16.6	198	
		recommended by FWW	40.2	26.8	43.3	28.3	45.0	38.0	453	
		advised by another acceptor	5.2	1.4	1.8	11.7	0.0	4.0	48	
		recommended by husband	13.6	26.8	9.9	15.0	13.8	15.5	185	
		recommended by friends/relatives	10.2	10.8	4.7	5.0	2.5	8.7	104	
	Choice not available/media/others	11.2	11.3	4.1	0.0	8.8	9.5	113		
	Supplies on demand	Yes	98.5	98.6	97.7	100.0	98.8	98.5	1175	
		No	1.5	1.4	2.3	0.0	1.3	1.5	18	
		Total	669	213	171	60	80	100.0	1193	

* Figures are reported in percentage

3.6.1 Current use by method

Ninety percent of the interviewed clients were currently using any method at the time of survey. Eighty six percent registered and ninety six percent exit clients were currently using

contraceptives. In KPK, percentage of current users was slightly higher (97 percent) than other regions while it was lowest in Balochistan (76 percent). Most commonly used current method was injectables (33 percent) followed by IUCD (25 percent), condom (19 percent), pills (17 percent), sterilization (5 percent) and other methods (emergency pills, implant) were reported by a small number of clients.

At Provincial level more than one-third of clients were currently using injectables except in Punjab where IUCD was more popular. Current use of injectables was higher among registered clients. Registered clients belong to Punjab mostly using IUCD while in Sindh and KPK injectables were frequently reported and in Balochistan majority of registered clients were using condoms. As far as the exit clients are concerned injectables were more frequently reported as current method in all the provinces.

3.6.2 Reasons to choose current method

Frequently cited reasons to choose current method were, specific method recommended by FWW (38 percent), method is more effective (17 percent), husband suggested (16 percent) choice of method was not available (10 percent), friends or relatives motivated (9 percent), method has less side effects (8 percent) and method was recommended by some other user. Similar findings are observed by province and among registered and exit clients.

3.6.3 Demand and supply of contraceptives

Analysis of data at table 3.6 shows that supply system was quite efficient as ninety nine percent of clients reported that they always got supplies when ever they demand. Negligible variations are observed at provincial level and by registered and exit clients.

3.7 Side Effects of Contraceptives

Fear of actual and perceived side effects is attributed to a low use of contraception. The clients were further probed about any experience of side effect with the current method. Table 3.7 below presents the results.

Table 3.7: Percentage of Registered and Exit Clients according to the Experience of Side Effects of Contraceptive Use by Region

Side Effects of Contraceptive Use			Punjab	Sindh	KPK	Balochistan	GB/CT/AJK	Total	Number
Registered Client	Side effects of current method*	Yes	15.6	15.9	14.1	21.4	17.4	15.8	99
		No	84.4	84.1	85.9	78.6	82.6	84.2	527
		Total	353	107	92	28	46	100.0	626
	Major side effects	Obesity weight gain	7.3	17.6	53.8	0.0	25.0	16.2	16
		Headaches	12.7	29.4	23.1	0.0	62.5	20.2	20
		Nausea/dizziness	12.7	0.0	0.0	0.00.0	50.0	11.1	11
		Irregular bleeding	36.4	41.2	38.5	50.0	25.0	37.4	37
		Irregular / no menses	41.8	47.1	7.7	66.7	25.0	38.4	38
		Psychological	3.6	0.0	0.0	0.0	25.0	4.0	4
		Others	10.9	17.6	15.4	0.0	62.5	16.2	16
	Medical advice or treatment by FWC	Getting treatment from FWC	67.3	76.5	46.2	50.0	75.0	65.7	65
		Getting treatment from other service provider	5.5	5.9	0.0	0.0	25.0	6.1	6
		Not getting any treatment	21.8	17.6	7.7	50.0	0.0	19.2	19
		Total	55	17	13	6	8	100.0	99
	Exit Client	Side effects of current method*	Yes	13.3	19.8	7.6	9.4	23.5	14.1
No			86.7	80.2	92.4	90.6	76.5	85.9	487
Total			316	106	79	32	34	100.0	567
Major side effects		Obesity weight gain	14.3	19.0	50.0	0.0	0.0	16.3	13
		Headaches	14.3	28.6	33.3	33.3	25.0	21.3	17
		Nausea/dizziness	11.9	0.0	0.0	0.0	12.5	7.5	6
		Irregular bleeding/	47.6	47.6	33.3	0.0	37.5	43.8	35
		Irregular/no Menses	26.2	38.1	0.0	0.0	12.5	25.0	20
		Psychological	4.8	9.5	0.0	66.7	12.5	8.8	7
		Others	16.7	23.8	16.7		37.5	20.0	16
Medical advice or treatment by FWC		Getting treatment from FWC	69.0	71.4	50.0	66.7	75.0	68.8	55
		Treatment from other service provider	7.1	14.3	0.0	0.0	25.0	10.0	8
		Not getting any treatment	16.7	9.5	0.0	33.3	12.5	13.8	11
		Total	42	21	6	3	8		80
All Clients		Side effects of current method*	Yes	14.5	17.8	11.1	15.0	20.0	15.0
	No		85.5	82.2	88.9	85.0	80.0	85.0	1014
	Total		669	213	171	60	80		1193
	Major side effects	Obesity weight gain	10.3	18.4	52.6	0.0	12.5	16.2	29
		Headaches	13.4	28.9	26.3	11.1	43.8	20.7	37
		Nausea/dizziness	12.4				31.3	9.5	17
		Irregular bleeding/	41.2	44.7	36.8	33.3	31.3	40.2	72
		Irregular/no Menses	35.1	42.1	5.3	44.4	18.8	32.4	58
		Psychological	4.1	5.3	0.0	22.2	18.8	6.1	11
		Others	13.4	21.1	15.8		50.0	17.9	32
	Medical advice or treatment by FWC	Treatment from FWC	68.0	73.7	47.4	55.6	75.0	67.0	120
		Treatment from other service provider	6.2	10.5	0.0	0.0	25.0	7.8	14
		Not getting any treatment	19.6	13.2	5.3	44.4	6.3	16.8	30
		Total	97	38	19	9	16		179

* Figures are reported in percent distribution

3.7.1 Experience of side effects

A review of table 3.7 explains that more than one-tenth (15 percent) reported some side effects while the others were satisfied with the method they are using. Among the provinces, experience of side effects was slightly higher in Sindh (18 percent) and lowest in KPK (11 percent). Occurrence of side effects was higher in registered clients especially in Balochistan (21 percent) while among exit clients it is high in Sindh (20 percent).

3.7.2 Type of side effects

Further investigations about the side effects were made and found that two-fifth (40 percent) of clients complained about irregular vaginal bleeding, disturbance in menstrual cycle (32 percent), headache (21 percent), obesity/ weight gain (16 percent), and less than ten percent complained about dizziness or nausea and psychological issues.

The study also focused on the provincial data analysis and noted that in Punjab and Sindh more commonly reported side effect was irregular bleeding, in KPK obesity or weight gain was frequently recorded as major side effect while in Balochistan menstrual imbalance was often seen. Among registered clients irregular menses problem was commonly recorded while complain of irregular bleeding was higher among exit clients. An unusual trend is emerged in Balochistan as registered clients faced only irregular bleeding and menses problem while exit clients had psychological issues and headache (Table 3.7).

3.7.3 Received medical advice

To check the response of clients towards FWC services, respondents were asked about the type of service providers from whom they are taking advice or treatment. It is found that slightly over two-third (67 percent) of the respondents went to FWCs to seek treatment for side effects only eight percent depended upon other service providers and seventeen percent not taking any treatment for the side effects.

Use of FWCs as a source to cater the side effects of contraception was higher in Sindh (74 percent) and lowest in KPK (47 percent) Provincial data reveals that registered and exit clients differentials are not much higher to get treatment of side effects from FWCs or other service providers as shown in table 3.7.

3.8 Future intentions to use contraceptives

Intentions to use contraceptives in future provide data base for the formulation of policies and demand and supply mechanism of contraceptives. The respondents who are not currently using any contraception were asked about their future intension, table 3.8 below shows the distribution of respondents by future intension to use contraceptives and provinces.

Table 3.8: Percent Distribution of Clients according to their Future Intention to Use Contraceptives by Region

Future Intentions to Use Contraceptive			Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
All Clients	Intention to use in future	Yes	58.7	64.5	80.0	63.2	62.5	61.9	78
		No	22.2	25.8	0.0	31.6	0.0	22.2	28
		Not decided	19.0	9.7	20.0	5.3	37.5	15.9	20
		Total	63	31	5	19	8	100.0	126
	Method to use in future	Female sterilization	35.1	40.0	25.0	0.0	0.0	28.2	22
		Pill	8.1	15.0	50.0	16.7	60.0	16.7	13
		IUCD	13.5	10.0	--	25.0	--	12.8	10
		Injectables	13.5	15.0	25.0	25.0	40.0	17.9	14
		Condom	18.9	15.0	0.0	33.3	0.0	17.9	14
		Implant/Other	10.8	5.0	0.0	0.0	0.0	6.4	5
Total	37	20	4	12	5	100.0	78		

3.8.1 Future intentions and methods to be used

Results in table 3.8 regarding future intention to use contraceptives are very progressive as slightly less than two-third (62 percent) of clients shown the intentions to adopt family planning or to restart the use of contraceptive in future. Only sixteen percent were still undecided about contraceptive use. Future intentions were reported unexpectedly lowest in Punjab (59 percent) and who have decided not to use family planning methods in future were higher in Balochistan (32 percent) among all the provinces.

Clients those shown future intention to use contraception were further asked about the method they intend to use. Twenty eight percent have decided to go for sterilization which is the highest it shows the intention to control the birth, eighteen percent will prefer injectables and condoms, slightly lower seventeen percent will choose pills and six percent will use implant or other methods. Provincial data unfolds that majority of respondents from Punjab and Sindh will go for birth control by female sterilization, KPK and Balochistan clients will stick on spacing by using oral pills and condoms.

3.9 Services Provided by FWC Staff

FWCs are assigned various activities (both indoor and outdoor) for promotion of family planning programme in the country. The clients were asked about services provided by FWCs to evaluate the performance of staff; results are presented in table 3.9.

Table 3.9: Percentage of Registered and Exit Clients according to their Views about the Services of FWC Staff by Region

Services Provided by Staff			Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	N	
Registered Clients	Motivate to Restart Contraceptive Use*	Yes	56.4	93.8	60.0	44.4	62.5	60.8	62	
		No	43.6	6.3	40.0	55.6	37.5	39.2	40	
		Total	55	16	5	18	8	100.0	102	
	Satisfaction with the services of FWC	Provision of contraceptives	96.1	98.4	88.7	100.0	87.0	95.1	692	
		Follow-up care	65.2	91.1	64.9	78.3	92.6	72.4	527	
		Home visits by FWW/C & FWA (F)	56.9	88.6	68.0	67.4	75.9	65.8	479	
		Cleanliness	94.4	94.3	79.4	97.8	90.7	92.3	672	
		Infection prevent	51.7	61.8	51.5	80.4	68.5	56.5	411	
		Counseling services	87.0	80.5	63.9	73.9	88.9	82.1	598	
		Waiting place	92.9	90.2	64.9	97.8	85.2	88.5	644	
		Timely treatment	89.0	91.9	57.7	95.7	83.3	85.3	621	
		Attitude of In-charge	97.1	93.5	64.9	95.7	81.5	90.9	662	
		Attitude of FWA (F)	79.4	82.1	67.0	91.3	87.0	79.5	579	
		Punctuality maintained by staff	65.9	75.6	59.8	89.1	66.7	68.3	497	
		Timely referring	50.0	63.4	49.5	78.3	42.6	53.4	389	
		Cooperative	93.1	92.7	64.9	91.3	66.7	87.2	635	
		Handle complications promptly	44.9	59.3	48.5	76.1	33.3	48.9	356	
		IEC material distribution	23.5	28.5	45.4	8.7	25.9	26.5	193	
		Others	4.7	4.1	2.1	6.5	1.9	4.1	30	
		Organized different shows	Sukhi Ghar Mehfil	12.7	29.3	28.9	10.9	14.8	17.7	129
			Mohallah Sangat	6.9	12.2	8.2	00.0	22.2	8.7	63
			Baby Show	15.0	32.5	38.1	8.7	5.6	19.9	145
	Cultural Carft		1.5	4.9	4.1	00.0	—	2.2	16	
	Others		8.1	—	—	00.0	1.9	4.7	34	
	Total		408	123	97	46	54	1728		
	Ever Attended Shows	Sukhi Ghar Mehfil	27.5	32.7	50.0	44.4	31.3	33.5	81	
		Mohallah Sangat	13.3	14.5	16.7	00.0	50.0	16.1	39	
		Baby Show	25.0	52.7	57.1	33.3	—	35.5	86	
		Cultural Craft	.8	1.8	7.1	00.0	—	2.1	5	
		Others	16.7	—	—	00.0	6.3	8.7	21	
		Total	120	55	42	9	16	242		
	Exit Clients	Motivated to Restart Contraceptive Use*	Yes	7	10	—	1	—	—	18
			No	1	5	—	0	—	—	6
			Total	8	15		1		24	
		Satisfaction with the services of FWC	Provision of contraceptives	98.5	96.7	96.2	100.0	88.2	97.3	575
			Follow-up care	65.1	78.5	78.5	81.8	94.1	72.3	427
			Home visits by FWW/C & FWA (F)	58.0	86.0	68.4	84.8	85.3	68.2	403
			Cleanliness	95.1	94.9	68.4	97.0	88.2	91.2	536
			Infection prevent	51.9	47.9	39.2	78.8	55.9	51.1	302
			Counseling services	88.9	83.5	38.0	69.7	82.4	79.5	470
			Waiting place	91.4	90.9	35.4	97.0	79.4	83.4	493
			Timely treatment	90.4	90.1	38.0	97.0	91.2	83.8	495
			Attitude of In-charge	96.9	94.2	43.0	97.0	76.5	88.0	520
			Attitude of FWA (F)	82.4	81.8	38.0	100.0	82.4	77.3	457
			Punctuality maintained by staff	72.2	73.6	30.4	93.9	58.8	67.3	398
			Timely referring	57.7	46.3	31.6	72.7	64.7	53.1	314
			Cooperative	95.7	95.0	31.6	93.9	70.6	85.4	505
Handle complications promptly			48.8	44.6	26.6	63.6	44.1	45.5	269	
IEC material distribution			25.6	28.1	24.1	45.5	50.0	28.4	168	
Others			5.6	1.7	—	00.0	2.9	3.6	21	
Organized different shows			Sukhi Ghar Mehfil	17.3	15.7	19.0	6.1	41.2	17.9	106
			Mohallah Sangat	7.1	9.1	5.1	3.0	14.7	7.4	44
			Baby Show	12.7	24.8	24.1	12.1	23.5	17.3	102
		Cultural Carft	.9	2.5	2.5	00.0	2.9	1.5	9	
		Others	5.2	—	—	00.0	2.9	3.0	18	
		Total	324	121	79	33	34	591		
Ever Attended Shows		Sukhi Ghar Mehfil	17.3	15.7	19.0	6.1	41.2	17.9	90	
		Mohallah Sangat	7.1	9.1	5.1	3.0	14.7	7.4	36	
		Baby Show	12.7	24.8	24.1	12.1	23.5	17.3	79	
		Cultural Craft	.9	2.5	2.5	00.0	2.9	1.5	6	
		Others	5.2	00.0	00.0	00.0	2.9	3.0	9	
		Total	96	37	20	6	22	181		

Services Provided by Staff			Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	N
All Clients	Motivate to Restart Contraceptive Use*	Yes	60.3	80.6	60.0	47.4	62.5	63.5	80
		No	39.7	19.4	40.0	52.6	37.5	36.5	46
		Total	63	31	5	19	8	100.0	126
Satisfaction with the services of FWC	Provision of contraceptives	97.1	97.5	92.0	100.0	87.5	96.1	1267	
	Follow-up care	65.2	84.8	71.0	79.7	93.2	72.3	954	
	Home visits by FWW/C & FWA (F)	57.4	87.3	68.2	74.7	79.5	66.9	882	
	Cleanliness	94.7	94.6	74.4	97.5	89.8	91.8	1208	
	Infection prevent	51.8	54.9	46.0	79.7	63.6	54.1	713	
	Counseling services	87.8	82.0	52.3	72.2	86.4	81.0	1068	
	Waiting place	92.2	90.6	51.7	97.5	83.0	86.2	1137	
	Timely treatment	89.6	91.0	48.9	96.2	86.4	84.6	1116	
	Attitude of In-charge	97.0	93.9	55.1	96.2	79.5	89.6	1182	
	Attitude of FWA (F)	80.7	82.0	54.0	94.9	85.2	78.5	1036	
	Punctuality maintained by staff	68.7	74.6	46.6	91.1	63.6	67.9	895	
	Timely referring	53.4	54.9	41.5	75.9	51.1	53.3	703	
	Cooperative	94.3	93.9	50.0	92.4	68.2	86.4	1140	
	Handle complications promptly	46.6	52.0	38.6	70.9	37.5	47.4	625	
	IEC material distribution	24.5	28.3	35.8	24.1	35.2	27.4	361	
	Others	5.1	2.9	1.1	3.8	2.3	3.9	51	
Organized different shows	Sukhi Ghar Mehfil	14.8	22.5	24.4	8.9	25.0	17.8	235	
	Mohallah Sangat	7.0	10.7	6.8	1.3	19.3	8.1	107	
	Baby Show	13.9	28.7	31.8	10.1	12.5	18.7	247	
	Cultural Carft	1.2	3.7	3.4	00.0	1.1	1.9	25	
	Others	6.8	—	—	00.0	2.3	3.9	52	
	Total	732	244	176	79	88	1319		
Ever Attend Shows	Sukhi Ghar Mehfil	38.4	33.7	51.6	40.0	50.0	40.4	171	
	Mohallah Sangat	17.1	16.3	12.9	6.7	36.8	17.7	75	
	Baby Show	29.6	51.1	62.9	46.7	21.1	39.0	165	
	Cultural Craft	1.9	2.2	4.8	0.0	5.3	2.6	11	
	Others	13.0	0.0	0.0	0.0	5.3	7.1	30	
	Total	216	92	62	15	38	423		

* Figures are reported in percent distribution

3.9.1 Motivate to restart contraception

Motivation campaign in the catchment area of FWCs is one of the most powerful tools to promote family planning and to make FWCs more popular among masses. About two-third (64 percent) of not currently using clients stated that the staff of FWC always kept in touch and convinced to use or restart contraception in future. At Provincial level FWC staff motivation to restart the method was found highest in Sindh (81 percent) and lowest in Balochistan (47 percent.) More registered clients (61 percent) reported the motivation activities of FWCs to practice methods than the exits clients (Table 3.9).

3.9.2 Satisfaction with the services of FWC

Client satisfaction is necessary to promote services with quality checks. Respondents were asked about different services of the centers provided to them. Ninety six percent have agreed on the smooth provision of contraceptives at the centre. About Ninety percent confirmed the maintenance of cleanliness in the centre and good behavior of the staff. More than eighty percent verified the availability of waiting place in the centre, cooperation of staff, timely treatment, and counseling. More than seventy percent mentioned the supportive attitude of FWA (F), follow up

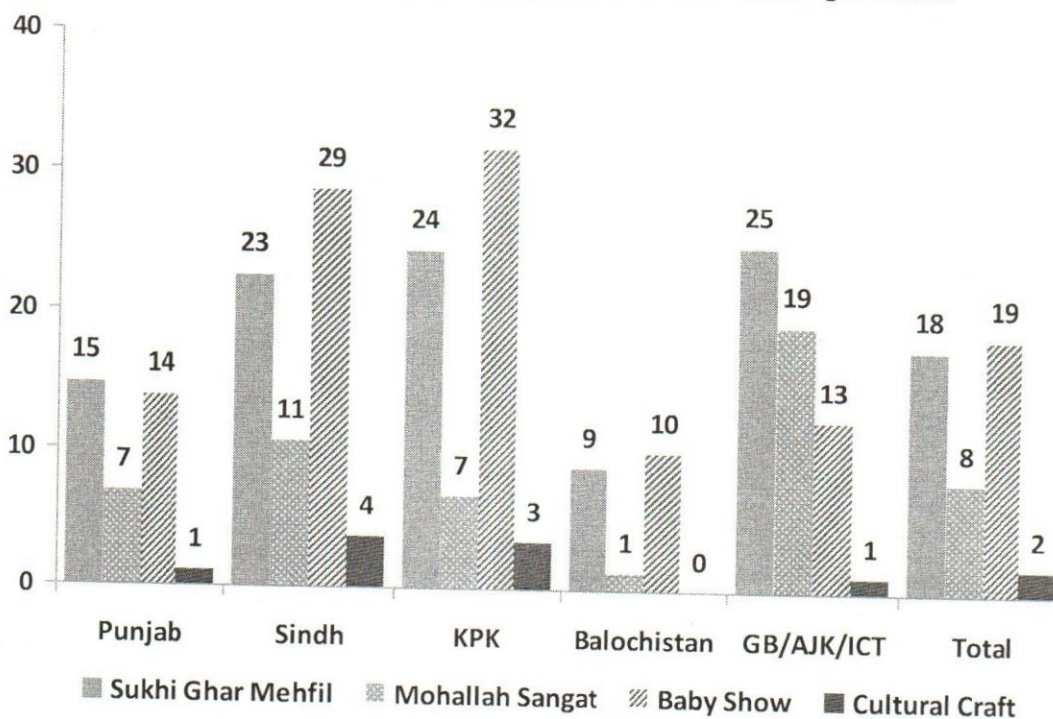
care the punctuality maintained by staff and home visits of Family Welfare Work/Councilor and female Family Welfare Assistance found slightly lower. About half of the clients showed their satisfaction on infection prevention care, timely referring to another service provider, to handle complications on the spot and distribution of IEC material for general awareness.

Provincial data analysis show that clients from all the provinces agreed on one point that provision of contraceptives is satisfactory. In Punjab, majority concentrated on better counseling services, good attitude of In-charge and staff cooperation. Clients in Sindh appreciated the follow up care and home visits of FWW/FWA. Distribution of IEC material was cited by a large percentage in KPK. As compared to other provinces, clients in Balochistan agreed more on cleanliness of centre, infection prevention, waiting room facility, in time treatment by staff, friendly behaviour of FWW, punctuality in staff, timely referring of patient to another service point and efficiently handle the complications. Same findings are found among registered and exit clients (Table 3.9).

3.9.3 Shows organized by FWC

FWC staff organized different shows as a healthy activity to promote the programme by enhancing the benefits of the family planning. Sukhi Ghar Mehfil is organized to aware people about advantages of a healthy and peaceful environment at home. Mohallah Sangat includes the examples of other neighbors and community couples who are using methods and enjoying a happy life. Baby shows promote the good health of children and hand made items displayed in cultural and craft shows as an economic activity for local women. The knowledge of respondents about shows was judged in the study and observed that a very small percentage i.e. less than one fifth are aware of such activities, baby shows (19 percent) and Sukhi Ghar Mehfil (18 percent) are more popular among clients than Muhallah Sangat (8 percent). Sukhi Ghar Mehfil was well recognized in Punjab while baby shows had familiarity in other provinces. Figure 3.3 gives the distribution of activities of FWCs by province. More registered clients were familiar with these shows than the exit clients.

Figure 3.3: Community Activities Shows of FWCs According to Clients



3.9.4 Ever attended the shows

It is evident from the data that those aware of such activities, two-fifth (40 percent) of the respondents attended the Sukhi Ghar Mehfil, slightly less than two-fifth (39 percent) have seen the baby shows. Nearly one-fifth (18 percent) participated in Muhallah Sangat. Three percent went in cultural and craft shows. In Punjab majority of clients attended the Sukhi Ghar Mehfil while in other provinces higher percentage have participated in baby Shows. The findings suggest that FWC staff should pay more attention on the Shows activity and try to motivate community to attend and participate in these shows. Percentages of registered clients are higher for those who have attended such shows than the exit clients.

3.10 Contraceptive Charges

There is general complaint from the clients regarding charging money for contraceptives and other services provided by the FWC's staff. To know the client's perception, a question was asked whether they have charged for the contraceptives and other services by the staff, if so, how much for each. Table 3.10 presents the results.

Table 3.10: Percent Distribution of Registered and Exit Clients according to their Views about Contraceptive Charges by FWC by Region

Contraceptive Charges			Punjab	Sindh	KPK	Balochistan	Other regions	Total	Number
Registered Clients	Charges for Pills	00	49.8	79.7	46.4	58.7	22.2	52.9	385
		UPTO 5	12.0	11.4	14.4	2.2	57.4	15.0	109
		6-10	1.7	0.0	10.3	8.7	1.9	3.0	22
		More than 10	1.7	0.0	1.0	6.5	1.9	1.6	12
		DK/No Info	34.8	8.9	27.8	23.9	16.7	27.5	200
	Condom	00	53.9	75.6	48.5	58.7	13.0	54.1	394
		UPTO 5	11.0	5.7	9.3	8.7	61.1	13.5	98
		5 and more	1.0	1.6	3.1	0.0	0.0	1.2	9
		DK/No Info	34.1	17.1	39.2	32.6	25.9	31.2	227
	Injectables	00	51.0	72.4	44.3	52.2	20.4	51.5	375
		1-10	16.9	12.2	23.7	0.0	59.3	19.1	139
		11-20	2.5	0.8	2.1	6.5	1.9	2.3	17
		21-30	1.0	0.8	1.0	8.7	1.9	1.5	11
		More Than 30	1.5	-	12.4	6.5	5.6	3.3	24
		DK	27.2	13.8	16.5	26.1	11.1	22.3	162
	IUCD	00	47.1	70.7	48.5	34.8	20.4	48.5	353
		1-10	12.7	3.3	6.2	2.2	50.0	12.4	90
		More than 10	9.6	0.8	4.1	8.7	0.0	6.6	48
		DK/No Info.	30.6	25.2	41.2	54.3	29.6	32.6	237
	Reproductive health services	00	47.5	75.6	50.5	32.6	79.6	54.1	394
		Upto 5	2.7	0.0	0.0	0.0	0.0	1.5	11
		More than 5	1.7	1.6	1.0	8.7	1.9	2.1	15
		DK/No Info	48.0	22.8	48.5	58.7	18.5	42.3	308
	General ailment	00	54.2	80.5	50.5	39.1	90.7	59.9	436
		Upto 5	5.4	0.0	1.0	0.0	0.0	3.2	23
		More than 5	4.7	1.6	1.0	2.2	3.7	3.4	25
		DK/No Info	35.8	17.9	47.4	58.7	5.6	33.5	244
Others	None	40.4	60.2	51.5	28.3	96.3	48.6	354	
	5 and More	0.7	0.8	0.0	0.0	1.9	0.7	5	
	DK/No Info	58.8	39.0	48.5	71.7	1.9	50.7	369	
	Total	408	123	97	46	54	100.0	728	
Exit clients	Charges for Pills	00	52.2	88.4	31.6	48.5	23.5	55.0	325
		UPTO 5	13.3	-	24.1	30.3	67.6	16.1	95
		6-10	1.5	0.0	21.5	6.1	0.0	4.1	24
		More than 10	0.0	0.8	2.5	3.0	0.0	.7	4
		DK/No Info	33.0	10.7	20.3	12.1	8.8	24.2	143
	Condom	00	55.2	87.6	40.5	60.6	11.8	57.7	341
		UPTO 5	12.7	0.0	13.9	6.1	47.1	11.8	70
		5 and more	0.9	0.0	11.4	12.1	32.4	4.6	27
		DK/No Info	31.2	12.4	34.2	21.2	8.8	25.9	153
	Injectables	00	49.7	83.5	32.9	42.4	5.9	51.4	304
		1-10	14.8	3.3	39.2	12.1	76.5	19.1	113
		11-20	1.5	0.8	1.3	24.2	0.0	2.5	15
		21-30	1.5	0.0	0.0	0.0	0.0	.8	5
		More Than 30	1.2	5.0	7.6	0.0	2.9	2.9	17
		DK/No info	31.2	7.4	19.0	21.2	14.7	23.2	137
	IUCD	00	44.1	83.5	31.6	45.5	8.8	48.6	287
		1-10	12.0	2.5	6.3	3.0	64.7	11.8	70
		More than 10	3.7	0.8	13.9	3.0	5.9	4.6	27
		DK/No Info.	40.1	13.2	48.1	48.5	20.6	35.0	207
	Reproductive health services	00	45.7	84.3	35.4	45.5	82.4	54.3	321
		Upto 5	3.4	0.0	0.0	0.0	0.0	1.9	11
		More than 5	1.5	0.0	2.5	6.1	5.9	1.9	11
		DK/No Info	49.4	15.7	62.0	48.5	11.8	42.0	248
	General ailment	00	49.1	84.3	34.2	51.5	91.2	56.9	336
		Upto 5	6.8	0.0	0.0	0.0	5.9	4.1	24
		More than 5	1.9	0.0	7.6	3.0	0.0	2.2	13
		DK/No Info	42.3	15.7	58.2	45.5	2.9	36.9	218
	Other Medical Services	None	32.4	53.7	36.7	48.5	100.0	42.1	249
		5 and More	0.3	0.0	1.3	0.0	0.0	0.3	2
		DK/No Info	67.3	46.3	62.0	51.5	0.0	57.5	340
		Total	324	121	79	33	34	100.0	591

Contraceptive Charges			Punjab	Sindh	KPK	Balochistan	Other regions	Total	Number
All Clients	Charges for Pills	00	50.8	84.0	39.8	54.4	22.7	53.8	710
		UPTO 5	12.6	5.7	18.8	13.9	61.4	15.5	204
		6-10	1.6	0.0	15.3	7.6	1.1	3.5	46
		More than 10	1.0	0.4	1.7	5.1	1.1	1.2	16
	Condom	DK/No Info	34.0	9.8	24.4	19.0	13.6	26.0	343
		00	54.5	81.6	44.9	59.5	12.5	55.7	735
		UPTO 5	11.7	2.9	11.4	7.6	55.7	12.7	168
		5 and more	1.0	.8	6.8	5.1	12.5	2.7	36
	Injectables	DK/No Info	32.8	14.8	36.9	27.8	19.3	28.8	380
		00	50.4	77.9	39.2	48.1	14.8	51.5	679
		1-10	16.0	7.8	30.7	5.1	65.9	19.1	252
		11-20	2.0	.8	1.7	13.9	1.1	2.4	32
		21-30	1.2	.4	.6	5.1	1.1	1.2	16
		More Than 30	1.4	2.5	10.2	3.8	4.5	3.1	41
		DK	29.0	10.7	17.6	24.1	12.5	22.7	299
	IUCD	00	45.8	77.0	40.9	39.2	15.9	48.5	640
		1-10	12.4	2.9	6.3	2.5	55.7	12.1	160
		More than 10	7.0	0.8	8.5	6.3	2.3	5.7	75
		DK/No Info.	34.8	19.3	44.3	51.9	26.1	33.7	444
	Reproductive health services	00	46.7	79.9	43.8	38.0	80.7	54.2	715
		Upto 5	3.0	0.0	0.0	0.0	0.0	1.7	22
		More than 5	1.6	.8	1.7	7.6	3.4	2.0	26
		DK/No Info	48.6	19.3	54.5	54.4	15.9	42.2	556
	General ailment	00	51.9	82.4	43.2	44.3	90.9	58.5	772
		Upto 5	6.0	0.0	0.6	0.0	2.3	3.6	47
		More than 5	3.4	0.8	4.0	2.5	2.3	2.9	38
		DK/No Info	38.7	16.8	52.3	53.2	4.5	35.0	462
Other Medical Services	None	36.9	57.0	44.9	36.7	97.7	45.7	603	
	5 and More	0.5	0.4	0.6	0.0	1.1	0.5	7	
	DK/No Info	62.6	42.6	54.5	63.3	1.1	53.8	709	
	Total	732	244	176	79	88	100.0	1319	

3.10.1 Charges for the provision of services and contraceptives

Table 3.12 provides the description of payments made by the clients to take contraceptives and other RH services at the centre. It is evident that more than half of the clients agreed on the free provision of contraceptives including pills, condoms, injectables, IUCD, RH services and general ailments. More than one-tenth of clients stated that FWC staff charge not more than 5 rupees for pills per cycle and condom per unit. The cost of per unit injectables was up to 10 rupees, confirmed by one-fifth (19 percent) of clients. Up to 10 rupees charges for one IUCD were reported by twelve percent, while the payment of other services was too small and reported by a meager number of respondents.

Among provinces, up to 5 rupees for a cycle of pills were mentioned by higher percentage (18 percent) of clients living in KPK and by a lowest percentage in Sindh (6 percent) while condoms charges up to 5 rupees were reported by an equal percentage in Punjab and KPK (11 percent). Injectables price up to 10 rupees was reported highest in KPK (31 percent) and lowest in Balochistan (5 percent). Up to 10 rupees cost of IUCD was commonly cited by clients belong to

Punjab (12 percent) while the percentages in other regions are not much higher. Small variations are observed among the registered and exit clients with reference to the cost of contraceptives.

3.11 Information /Services Provided by FWCs

The major responsibilities assigned to the staff of the FWCs is to create awareness by informing couples about family planning, birth spacing and control, MCH care and other social and financial benefits of small family and use of contraception. Clients' views regarding the services/information provided by FWC's staff is given in table 3.11 below.

Table 3.11: Percentage of All Clients according to their Views about the Information/Services Provided by FWC Staff by Region

Information /Services Provided by Staff			Punjab	Sindh	KPK	Balochistan	GB/ICT /AJK	Total	Number
All Client	Information provided by FWC staff*	Useful	90.4	97.1	75.0	100.0	100.0	90.8	1198
		Not useful	0.5	0.4	1.1	0.0	0.0	0.5	7
		DK	9.0	2.5	23.9	0.0	0.0	8.6	114
		Total	732	244	176	79	88	100.0	1319
	Information useful	Free Advice/ medicine/ contraceptives	29.9	37.1	3.0	16.5	31.8	27.6	331
		FP knowledge birth spacing & control	61.5	58.6	59.8	41.8	56.8	59.1	708
		MCH Care	32.9	33.8	64.4	67.1	48.9	40.0	479
		Economic/Social/Financial Benefit	24.8	19.8	1.5	1.3	20.5	19.4	232
		Total	662	237	132	79	88		1198
	Quality of FWC services	No shortcomings at all	48.8	54.7	20.1	24.1	31.8	43.3	596
		Behavior of staff was good/satisfactory	11.4	6.9	8.8	69.6	1.1	12.9	178
		Poor services and no community meetings	8.3	6.1	20.1	3.8	10.2	9.4	130
		Staff absent/ more requires/center often closed	4.3	9.8	5.7	1.3	0.0	5.0	69
		Shortage of contraceptives/ medicines/ charges for contraceptives	8.3	4.9	6.2	8.9	12.5	7.7	106
		Center is not accessible/too far	1.3	0.4	0.5	0.0	0.0	0.9	12
	Suggestions to improve FWCs	Medical facilities like BP apparatus should be provided	13.4	8.6	1.5	7.6	3.4	9.9	136
		Free medicines/contraceptives	16.7	7.3	10.3	7.6	20.5	13.9	191
		regular provision of medicines should be ensured	33.1	38.0	31.4	57.0	48.9	36.1	497
		FP facilities should be provided	9.9	14.7	5.2	26.6	22.7	11.8	163
		More staff should be appointed including doctors/ TBAs etc	9.3	16.7	1.5	20.3	28.4	11.4	157
		Frequent visit of FWA/ improve counseling	5.3	4.9	11.9	11.4	2.3	6.3	87
		Centers should open for 24 hours	5.3	6.1	0.0	2.5	9.1	4.8	66
		Building/signboards/waiting room/water/cleanliness	6.4	11.0	4.1	3.8	8.0	6.8	94
	Total	771	245	194	79	88		1377	

* Figures are reported in percent distribution

3.11.1 Views about information provided by FWCs

Majority (91 percent) of the respondents appreciated the information received through staff; about nine percent were not sure. Province wise analysis highlights that in Balochistan all the clients were of the view that the information is useful to them, while in KPK three fourth were of the same opinion, one percent viewed that information was not useful and twenty four percent have no idea whether the information was beneficial or not. There is slight variation among the exit clients (92 percent) and registered clients (90 percent) who considered that useful information was provided to them. The small variation is observed in Punjab province, more exit clients were in the favour of provided information than registered clients (see table 3.1 at Annex).

3.11.2 Useful Information on different issues

About three-fifth (59 percent) reported that information given on the knowledge about family planning including spacing and birth control are useful. Two-fifth (40 percent) benefited with the knowledge provided of MCH care, more than one-fourth (28 percent) added the facility of free advice, medicines, contraceptives and the social and financial benefits them.

In Punjab and Sindh majority of the respondents were of the view that they got useful information about FP including spacing and birth control, in KPK and Balochistan comprehensive information on MCH care was cited as useful by majority of clients.

3.11.3 Information not useful

Only 7 clients were found dissatisfied with the information given by FWC staff and cited some reasons like most of the time the staff of FWC remain absent, attitude is not cooperative and they never visit to them at home for follow up. The clients also complained that staff provided a limited knowledge about methods and side effects. Some has given religious excuses to get information and use FP. They also mentioned that medicines and contraceptives are available in market so they felt no need to go to the centre. Variations are not visible at regional level.

3.11.4 Quality of FWC services

The comments of respondents were obtained on the weaknesses of services and behavior of FWC staff. Both type of clients (43 percent) fully satisfied and found no shortcomings at all in the working. Thirteen percent exclusively mentioned about good behavior of staff. Nine percent seems to be unsatisfied with the services and also reported that no community meetings were

held. Eight percent added the unavailability of contraceptives, medicines and charges of contraception. Other meager percentage reported about staff absentees, need for more staff, centre remained closed and centre is not accessible or too far to reach. Similar findings are observed in provinces.

3.11.5 Suggestions to improve FWCs

It is always good to look into the past experience for lesson learned and get new ideas on how to manage challenges. The suggestions help to improve managerial as well as behavior part of any organization to achieve the targets. Respondents have given suggestions related to the facilities, provision of medicines and contraceptives follow up visits and timings of the centre etc. Majority (36 percent) emphasized on regular provision of contraceptives should be ensured in future. Fourteen percent stressed on free medicines and methods for all. Eleven percent emphasized on better facilities of family planning and to increase the FWC staff strength. Less than ten percent recommended the other medical facilities like availability of BP apparatus, provision of building for FWCs with the facility of waiting room, water and cleanliness. Attention should be paid on filed visits of FWAs for motivation and centers should be remained open 24 hours. Similar trend followed at provincial level. No large variations are found among registered and exit clients (See table at 3.1 Annex).

Chapter 4

PERCEPTION OF COMMUNITY PERSONS

Community's perception about the service delivery outlets is important to evaluate the performance of the service providers. A thorough understanding of the needs and expectations of the community about the services provided by the family welfare centres can help in improving service delivery and higher utilization of family planning and health care services available at the centers. Scarcity of information on this aspect of health care services provided by the staff of FWCs, encouraged carrying out the present evaluation study of FWCs at the national level. This chapter attempts to assess the community's perception and their satisfaction of family planning and primary health care services available at FWCs in the community.

4.1 Background Characteristics

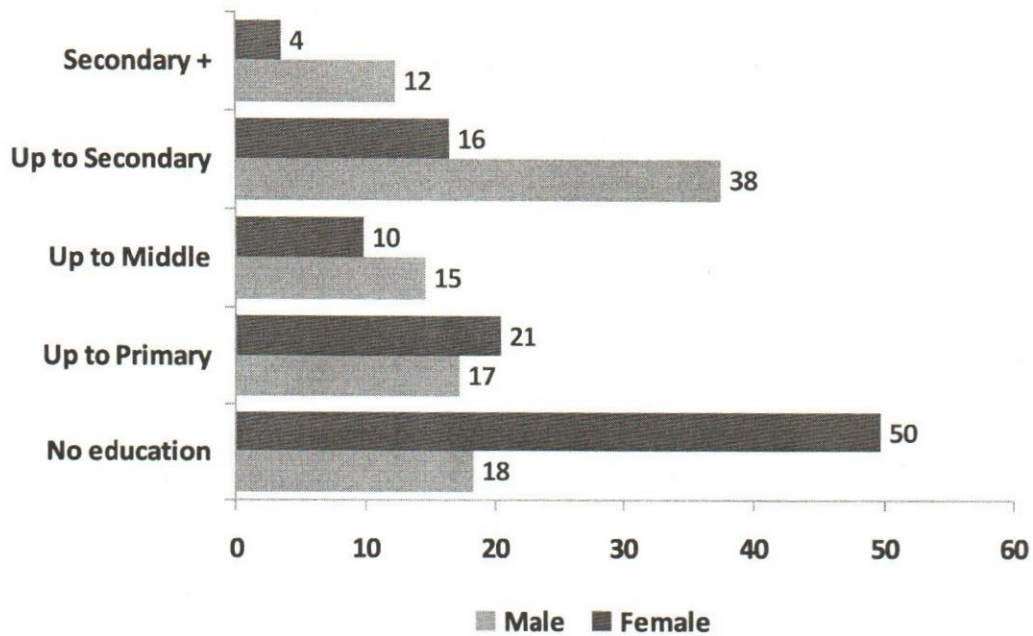
The table 4.1 provides information on basic characteristics such as age, sex, and marital status, level of education and employment status of the respondents selected from the catchment area of the sampled FWCs. The selected persons from the community belong to all age groups i.e. below 25 years to more than 50 years. Half of the respondents are among the younger age groups (below 25 to 34 years) and about two third are below forty years of age. Sex wise analysis indicates that three fourth of the female respondents are of below forty years of age and only three percent are fifty years or above, as compared to this three fifth of the male respondents are below forty years and thirteen percent are of fifty years or above age, the data reveals that the majority of the female respondents are of the target age groups for the family planning point of view and their comments/perception about the FWCs are more useful for the planners and policy makers.

Table 4.1: Percent Distribution of Community Persons by Sex and Background Characteristics

Background characteristics		Percent		Number		Total	Number
		Male	Female	Male	Female		
Age	< 25 years	7.4	11.3	26	59	9.7	85
	25 - 29	14.0	21.2	49	111	18.3	160
	30 - 34	19.5	24.1	68	126	22.2	194
	35 - 39	18.1	17.4	63	91	17.7	154
	40 - 44	18.1	12.8	63	67	14.9	130
	45 - 49	10.0	10.1	35	53	10.1	88
	50 and More	12.9	3.1	45	16	7.0	61
Marital status	Married	99.1	96.6	346	505	97.6	851
	Widowed	0.9	3.4	3	18	2.4	21
Level of Education	No education	18.3	49.7	64	260	37.2	324
	Up to primary	17.2	20.5	60	107	19.2	167
	Up to middle	14.6	9.8	51	51	11.7	102
	Up to secondary	37.5	16.4	131	86	24.9	217
	Secondary +	12.3	3.6	43	19	7.1	62
Currently Working	Currently working	90.3	20.1	315	105	48.2	420
	Not working	8.6	73.2	30	383	47.4	413
	No information	1.1	6.7	4	35	4.5	39
Total		100.0	100.0	349	523	100.0	872

Majority of the respondents are currently married (98 percent) and a meager number of surveyed males and females were widowed. Education is an important factor influencing an individual's attitude and outlook on various aspects of life. However, as noticed from other studies that the female population is less educated than male, similar findings depict from this study as well, where half of the female respondents having no education and they are nearly three times more as compared to males (18 percent), one-fifth (19 percent) of respondents were up to primary passed and only seven percent have attained secondary and higher education. Sex wise data by level of education indicates that, about half of the male respondents having secondary or above level of education and as against this one fifth of the female respondents have similar level of education (Table 4.1). Picture is more visible in the following figure 4.1.

Figure 4.1: Education Level of Community Respondents by Sex



Work status is important characteristic that shed light on the economic status of respondents in the community. Looking at work status, it is noted that ninety percent of the male respondents are currently employed as compared to this only one fifth of the females are currently working (Table 4.1).

4.2 Awareness and Visit to FWC

Findings on awareness about the existence of FWC, visits of FWC staff in the community and respondents to the centers are given in table 4.2. Awareness about the availability of services regarding family planning and health care can better be assessed through community surveys. About eighty two percent of the respondents were aware of the availability of family welfare centre. Provincial distribution of data suggested that higher level of selected males and females from the community are aware of the presence of centre in their area, the percentages varies from seventy three percent to ninety seven percent across the provinces/regions with lowest in KPK and highest in Balochistan (87 percent) followed by Punjab and Sindh (82 percent). Twenty seven percent of the respondents from the catchment areas of the centers of KPK have no knowledge of the existence of FWCs is a matter of great concern, it indicates less interaction between the FWCs staff in the community and the location of the centers. Differentials by sex

are prominent as the knowledge about the existence of FWC in the area is higher among females (83 percent) than males (79 percent) (Table 4.1 at Annex).

Table 4.2: Percent Distribution of Community Persons by their Knowledge and Visit to FWC by Region

Community Person's knowledge about FWCs staff visits		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
Knowledge about FWC	Yes	81.9	81.8	72.8	87.3	97.1	81.5	711
	No	18.1	18.2	27.2	12.7	2.9	18.5	161
	TOTAL	487	170	125	55	35	100.0	872
FWC staff ever visited community	Yes	62.9	76.3	61.5	62.5	85.3	66.4	472
	No	28.1	14.4	19.8	29.2	11.8	23.6	168
	DK	9.0	9.4	18.7	8.3	2.9	10.0	71
Ever visited FWC	Yes	73.4	76.3	78.0	56.3	91.2	74.3	528
	No	26.6	23.7	22.0	43.8	8.8	25.7	182
	TOTAL	399	139	91	48	34	100.0	711
Accompanied any client to FWC	Yes	57.5	66.0	64.8	51.9	71.0	60.7	321
	No	42.5	34.0	35.2	48.1	29.0	39.3	208
	Total	294	106	71	27	31	100.0	529

4.2.1 Community visits by FWC staff

To obtain the real picture about the performance of FWC staff, community people were asked about the visits ever made by the service providers. The findings reveal that two-third (66 percent) of the respondents reported that FWC staff made community visits to meet people for motivation, follow up and to discuss general health issues. A lower percentage (10 percent) of people including males and females did not aware with staff's community visits. At provincial/regional level similar pattern with negligible variations are observed, except in Sindh where slightly higher percentage of respondents confirmed the staff's community visits. The data shows that more female respondents (67 percent) confirmed the community visits by FWC staff being the target population to be motivated for the acceptance of family planning methods (See table 4.1 at Annex).

4.2.2 Community visits to FWC

Community response towards FWCs can change the whole scenario of the staff performance to achieve targets. It is equally important to obtain the personal experiences of people visited the centre. It is encouraging to observe that from the community three-fourth (74 percent) of the respondents who have knowledge of the existence of the FWC in their area have ever visited the centre. Similar findings are observed at provincial/regional level, except in Balochistan where percentage is slightly lower (56 percent) for those who went to center some times in the past. It is

observed that males are less likely to visit FWCs (59 percent) than females (84 percent) (See table 4.1 at Annex).

4.2.3 Accompanied clients to FWC

Respondents were asked about their experience of accompanying any client to FWC. Slightly above three fifth (61%) of the selected males and females reported that they went along with some one to the centre. Thirty one percent did not accompany with anybody else. Province wise data depicts some visible differentials between Balochistan and other provinces as only fifty two percent males and females reported that they used to escort other clients to the centre while in other provinces percentages are considerably high. Analysis by sex shows that women are more likely to accompanied other clients to the centre (62 percent) than males (59 percent) (See table 4.1 at Annex).

4.3 Views of Respondents about Facilities Provided by FWCs

4.3.1 Maintenance of privacy for examination

It is obligatory for a service provider of the centre to have a separate place for client examination and case history. Information was gathered about the privacy maintained by the FWC In-charge. Table 4.3 depicts that ninety five percent of the respondents have positive opinion about the privacy of examination place. In Balochistan all the respondents were agreed upon the good maintenance of privacy in the centers for patients while among other provinces slight variation is found. As discussed earlier that more females visit the centers so the information about privacy maintained by the staff was confirmed by ninety eight percent of women and eighty nine percent of male respondents (See table 4.2 Annex).

Table 4.3: Percent Distribution of Community Persons according to their Views about the Facilities Provided by FWC by Region

Facilities/General Condition	Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number	
Privacy maintained by FWC In-charge	Yes	93.9	96.2	98.6	100.0	90.3	95.1	503
	No/DK	6.1	3.8	1.4	0.0	9.7	4.9	26
Staff present at the time of visit	Yes always	83.7	90.6	81.7	81.5	96.8	85.4	452
	Some time	10.9	8.5	18.3	18.5	3.2	11.3	60
	No/DK	5.4	0.9	0.0	0.0	0.0	3.2	17
Staff provide information properly	Yes	93.2	95.3	93.0	92.6	100.0	94.0	497
	No/DK	6.8	4.7	7.0	7.4	0.0	6.0	32
Cleanliness of centre	Yes	94.9	97.2	93.0	92.6	96.8	95.1	503
	No/DK	5.1	2.8	7.0	7.4	3.2	4.9	26
Total	294	106	71	27	31	100.0	529	

4.3.2 Presence of staff at the time of visit

The presence of staff during working hours is an important indicator to evaluate the performance of the service outlet. Respondents were asked whether the staff was present at the time of their visit to the centre to verify the staff availability, majority of the respondents (85%) confirmed the availability of staff at the centre. Only one in ten (11%) respondents argued that most of the time they did not find staff at the centre. A meager percentage (3 percent) stated that staff was never available or they do not know about their presence at the centre. Provincial differential is not much higher. The percentage who always found the staff at the center varies between 82 to 91 percent. It is highest (91 percent) in Sindh while in Balochistan the percentage of respondents who found them some times at the centre was higher (19 percent) than other provinces. The percentage of males was slightly higher (88 percent) who reported the presence of staff at the time of visit than their counterparts (Table 4.2 at Annex).

4.3.3 Proper delivery of information

Delivery of information and guidance contributes a lot in the motivation of target groups. Ninety four percent respondents were satisfied with information provided by the staff. Similar pattern is observed in the provinces. The contentment of public is an evidence of a satisfactory performance of the staff. Sex wise data indicates slight variation about the satisfaction of information provided by the staff (See table 4.2 at Annex).

4.3.4 General cleanliness of centre

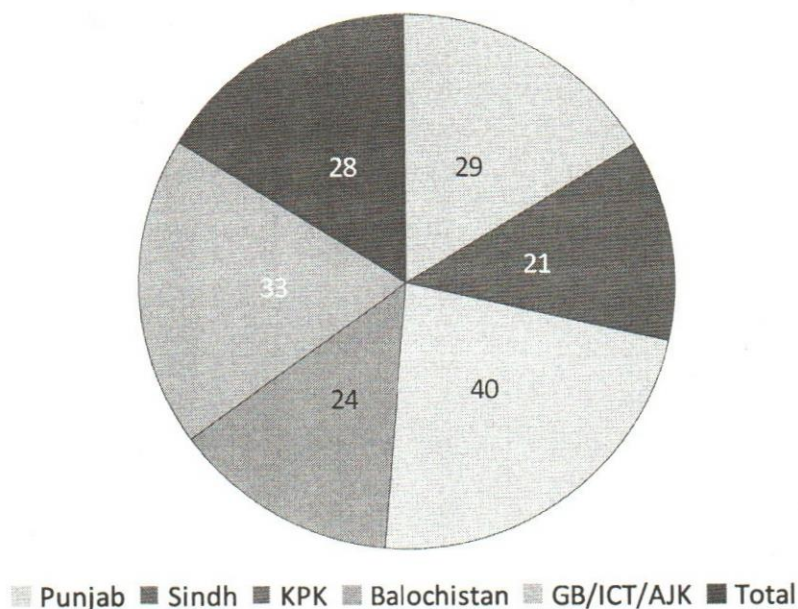
Almost all the respondents (95 percent) reported that they found centers clean whenever they visited. No visible variations appeared among the provincial data.

4.4 Future Plans to Obtain Services from FWC

Table 4.4 presents the findings about future plans of respondents to visit FWC and reasons to refuse to go for services. Respondents who never visited FWC were asked about their future intention to visit and obtain services from FWC. Slightly over one-fourth (28 percent) of the respondents reported that they have planned to visit the FWCs for services in near future, while fifty seven percent did not want to avail services from centers. Fifteen percent of respondents confused to take the decision. Among provinces, a higher proportion of respondents from KPK (40 percent) have planned to visit the centers in future, as compared to this only one fifth of the respondents having same opinion in Sindh. In Sindh and Balochistan two third (67 percent)

respondents do not have any plan to go to center for services. Figure below presents the distribution of respondent by provinces who have planed to obtain service from FWCs.

Figure 4.2: Future Plans to go and Obtain Services from FWCs



4.4.1 Reasons to plan to go FWC

Respondents who planned to go to FWC, cited reasons like; for getting services from FWC, for family planning or to get awareness about methods (33 percent), for birth spacing (31 percent); to take better care of mother and children (29 percent) and due to economic or social benefits like easy access to the centre, nearest health outlet and advantage to get free medicines (14 percent). In Balochistan eighty percent respondents plan to visit the centre for family planning purposes including awareness followed by KPK (50 percent) and Punjab (27 percent). Half of the males and females from KPK want to go for getting MCH services, forty three percent of Sindh preferred to visit FWCs due to economic and social benefits while equal percentage from Punjab want to acquire services of birth spacing from these service outlets (Table 4.4).

Table 4.4: Percent Distribution of Community Persons according to their Future Plans to obtain Services from FWC by Region

Future Plans to obtain Services		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
Plan to go FWC	Yes	28.6	21.2	40.0	23.8	33.3	28.0	51
	No	60.0	66.7	10.0	66.7	66.7	56.6	103
	DK	11.4	12.1	50.0	9.5	0.0	15.4	28
Total		105	33	20	21	3	100.0	182
Reasons to plan to go FWC*	For Family planning/get aware about FP methods	26.7	—	50.0	80.0	100.0	33.3	17
	For better care of mother and children	30.0	28.6	50.0	0.0	0.0	29.4	15
	Economic/social benefits/easy access	10.0	42.9	12.5	0.0	0.0	13.7	7
	For birth spacing	43.3	14.3	0.0	40.0	0.0	31.4	16
Total		30	7	8	5	1		51
Reasons not to plan to go FWC*	Center provide services specifically to females	7.9	0.0	0.0	50.0	0.0	11.7	12
	No need of family planning	58.7	54.5	50.0	14.3	100.0	52.4	54
	Center is usually closed/staff not present/behavior not good	15.9	27.3	50.0	35.7	0.0	21.4	22
	Its against religion/family opposed	12.7	4.5	0.0	0.0	0.0	8.7	9
	Due to health concerns/side effects	1.6	9.1	0.0	0.0	0.0	2.9	3
	Total		63	22	2	14	2	

* Figures are reported in percentage

4.4.2 Reasons for not to visit FWC

Though the awareness about the FWC was quite high, more than half of the respondents did not have any plan to obtain services from FWCs. The reasons cited for not to utilize services in future were; no need of family planning (52 percent) due to certain conditions like desire for more children, menopause, have no time to visit the centre. The other common reasons were dissatisfaction with the staff and services as cited by the respondents that centers are usually remain closed in their working hours, staff absenteeism, or behavior of staff is not good enough to motivate people to attend the FWC (21 percent). A small number mentioned that centers provide services related to female issues (12 percent), Islam and family opposed (9 percent), and due to health concerns or fear of side effects (3 percent). Provincial data in table 4.4 shows that in Punjab, Sindh, and KPK commonly cited reason for not to utilize was no need of family

planning and in Balochistan centers provide services on female issues and centers remain closed or staff not present in duty hours.

4.5 Group Meetings/Health Talks Organized by FWC

One of the primary objectives of the programme is to arrange group meetings, health talks for advocacy of family planning in the community. Community persons were asked about their involvement, frequency of participation and the contents discussed during these meetings, results are presented in table 4.5.

As discussed earlier that eighty three percent of FWCs arranged health talks/group meetings only two-fifth (43 percent) of respondents confirmed such meetings while slightly over one-fourth (26 percent) were unaware about this activity. At provincial level majority of the respondents agreed that community meetings are being organized with the cooperation of FWC staff to advocate people except in Balochistan where more than half of the respondents mentioned that no meetings ever arranged by the staff in the community, while people who totally ignorant about this activity of FWCs were lowest (19 percent) and it is highest in KPK (33 percent).

Table 4.5: Percent Distribution of Community Persons according to their Views about the Community Meetings/Health Talks Arranged by FWC by Region

Community Person's views for:		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
FWC ever arranged meetings	Yes	44.1	46.0	35.2	25.0	58.8	42.8	304
	No	27.8	30.9	31.9	56.3	29.4	30.9	220
	DK	28.1	23.0	33.0	18.8	11.8	26.3	187
Total		399	139	91	48	34	100.0	711
Ever attended meetings	Yes	55.1	70.3	68.8	83.3	70.0	61.8	188
	No	44.9	29.7	31.3	16.7	30.0	38.2	116
Total		176	64	32	12	20	100.0	304
Number of meetings attended	Less than 3	80.4	73.3	77.3	50.0	42.9	73.9	139
	3 and more	19.6	26.7	22.7	50.0	57.1	26.1	49
Discussion during meetings*	FP method	92.8	86.7	68.2	90.0	85.7	87.8	165
	Importance of small family	71.1	73.3	63.6	50.0	78.6	70.2	132
	Reproductive health issues	61.9	33.3	77.3	30.0	57.1	54.8	103
	General health	57.7	66.7	68.2	60.0	42.9	60.1	113
	Other	2.1	13.3	4.5	0.0	7.1	5.3	10
Total		97	45	22	10	14		188

* Figures are reported in percentage

4.5.1 Participation in group meetings/health talks

Table 4.5 above reveals that nearly about two-third (62 percent) of the selected males and females ever attended the group meetings/ health talks. The provincial data shows that participation is highest in Balochistan (83 percent) and lowest in Punjab (55 percent) while more than two-third respondents of Sindh and KPK have participated in the meetings arranged by the FWCs. As far as the frequency of participation is concerned respondents who ever attended such meetings or talks, about three-fourth (74 percent) of them attended one or two group meetings/talks and the remaining one-fourth (26 percent) have attended three and more meetings during last six months. Majority (80 percent) of respondents from Punjab have participated in one or two community meetings followed by Sindh (73 percent), KPK (77 percent) and Balochistan (50 percent), three and more meetings/talks were attend by half of the respondents from Balochistan and about one-fifth from Punjab and about a quarter from other provinces.

Data highlighted that males are (45 percent) less likely to attend the community meetings than females (72 percent) although percentage of males and females was equal who have the knowledge about such meetings. A reason for it may be that more frequent meetings are arranged for the females (See table 4.3 at Annex).

4.5.2 Contents of group meetings/health talks

Respondents reported that the focused areas and issues like family planning methods, importance of small family norm, RH issues and general ailment are normally discussed during group meetings. The commonly reported topics were family planning methods (88 percent), importance of small family norm (70 percent), while sixty percent mentioned about general health and discussion on reproductive health issues was reported by fifty five percent respondents. Province wise data shows that majority of the respondents from all the provinces reported that family planning methods are discussed during group meetings except Balochistan where majority claimed that RH issues are being highlighted. Most of the respondents from Sindh recalled that importance of small family norm was told by the FWC staff during the health talks and meetings. Respondents from KPK pointed out that mostly general health was discussed in health talks. Majority of the men and women mentioned that family planning methods were discussed during these meetings (Table 4.3 at Annex).

4.6 Views about Contraceptive Charges Asked by FWCs Staff

Community persons were asked about the charges that FWCs staff is demanding for their services and contraceptives.

Table 4.6: Percent Distribution of Community Persons according to their Views about the Contraceptive Charges by FWC according to Sex and Region

Contraceptive Charges		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
Pills	None	91.7	96.4	79.1	9.8	57.6	89.7	637
	Up to 5 (Rs)	5.8	3.6	11.0	2.1	42.4	7.0	54
	6 and more	2.5	0.0	9.9	2.1	0.0	2.8	20
Condom	None	43.4	67.6	30.8	33.3	32.4	45.3	322
	Up to 5 (Rs)	7.5	3.6	17.6	2.1	41.2	9.3	66
	6 and more (Rs)	1.0	0.7	9.9	4.2	0.0	2.3	16
	DK/No Info	48.1	28.1	41.8	60.4	26.5	43.2	307
Injectables	None	43.1	64.7	31.9	31.3	20.6	44.0	313
	Less than 10 (Rs)	3.3	3.6	4.4	2.1	38.2	5.1	36
	10 and more (Rs)	5.0	2.9	11.0	2.1	5.9	5.2	37
	DK/No Info	48.6	28.8	52.7	64.6	35.3	45.7	325
IUCD	None	40.4	67.6	33.0	33.3	32.4	43.9	312
	Less Than 10 (Rs)	3.8	0.7	3.3	0.0	29.4	4.1	29
	10 and more (Rs)	6.0	0.0	5.5	0.0	5.9	4.4	31
	DK/No info	49.9	31.7	58.2	66.7	32.4	47.7	339
Reproductive health services	None	42.9	72.7	34.1	3.4	76.	48.7	346
	Up to 20 (Rs)	2.3	0.0	1.1	0.0	0.0	1.4	10
	20 and more (Rs)	1.3	0.0	0.0	4.2	0.0	1.0	7
	DK/No info	53.6	27.3	64.8	60.4	23.	48.9	348
General ailment	None	45.4	71.2	33.0	39.6	76.5	49.9	355
	Less Than 10 (Rs)	4.0	0.0	0.0	0.0	2.9	2.4	17
	10 and more (Rs)	4.3	2.2	7.7	2.1	0.0	3.9	28
	DK/No info	46.4	26.6	59.3	58.3	20.6	43.7	311
Others	None	41.4	56.1	33.0	29.2	88.2	44.6	317
	Less Than 10 (Rs)	0.8	0.0	1.1	0.0	0.0	0.6	4
	10 and more (Rs)	1.0	0.0	1.1	0.0	0.0	0.7	5
	DK	56.9	43.9	64.8	70.8	11.8	54.1	385
Total		399	139	91	48	34	100.0	711

Ninety percent males and females supported that staff never charged money for pills and less than half given similar statement for other methods and services. Only seven percent reported that staff charged up to 5 rupees and 3 percent mentioned about 6 and more rupees for pills per unit. Different prices are observed across the Provinces. Ninety two percent of respondents from

Punjab reported about the free delivery of pills but this percentage declined sharply to below fifty percent for injectables, IUCD and other RH services and general health care. Similar decline is seen in Sindh and KPK while this decline is below ten percent in Balochistan for pills may be due to more demand of pills.

4.7 Information Delivered by Staff

The community persons were asked about the services provided by the FWCs. Extracted from their responses; table 4.7 portrays Province wise summarized data based on their views about information/services provided by FWCs. The data reveals that majority (80 percent) of the respondents found the information being useful, however it varies from seventy three percent to eighty percent across the provinces. A small proportion of respondents (less than two percent) reported that the information provided by FWCs is not useful, whereas, about one fifth are not sure whether the information is useful or not.

Table 4.7: Percent Distribution of Community Persons according to their Views about the Information/Services Provided by FWC Staff by Sex and Region

Services Provided by Staff		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
Information provided by FWC Staff	Useful	80.2	79.1	72.5	79.2	97.1	79.7	567
	Not useful	1.5	1.4	3.3	2.1	0.0	1.7	12
	DK	18.3	19.4	24.2	18.8	2.9	18.6	132
Total		399	139	91	48	34	100.0	711
Information useful*	Useful information about MCH care	27.5	20.9	37.9	50.0	27.3	28.9	164
	Population control	13.8	3.6	12.1	13.2	27.3	12.3	70
	Information/awareness about FP	35.9	41.8	21.2	42.1	33.3	35.6	202
	Information regarding better health	14.4	14.5	13.6	13.2	9.1	13.9	79
	Economic/social benefit of FP	21.3	34.5	10.6	2.6	12.1	20.8	118
	Birth spacing/family size	25.9	36.4	45.5	10.5	6.1	28.0	159
	All services are easily available/privacy/free contraceptives	19.1	19.1	3.0	5.3	30.3	16.9	96
	Information about hygiene and cleanliness	0.3	5.5	9.1	31.6	9.1	4.9	28
Total		320	110	66	38	33		567
Information not useful*	No visit by FWC staff/staff absent	33.3		66.7	100.0	Data Not	41.7	5
	It is against the religion/method affects health	66.7	--	66.7	0.0	available	50.0	6
Total		6	2	3	1			12

* Figures are reported in percentage

4.7.1 Importance of information delivered by staff

The respondents who agreed that the information is useful further probed about the type of information they found useful, table 4.7 presents the data. More than one third stated that information about FP awareness was useful. About twenty eight percent found information on MCH care, birth spacing and small family norm is useful, one fifth or less reported that the information create awareness on different issues like economic and social benefits of FP, contraceptives, health care and personal hygiene and cleanliness. More than ten percent described that FWCs provide not only the useful information but also render free and easily available services with full privacy and supply of contraception, educate people to have better health and control over population More interest was shown on awareness about family planning, in Punjab and Sindh. Respondents from KPK received detailed knowledge about birth spacing and MCH care, awareness about family planning was considered useful by Balochistan's respondents.

The proportion of respondents who agreed with the usefulness of information delivered by FWC staff higher than those who disagreed with services of FWCs and perceived that the staff of FWC never visited the community for motivation, follow up and advocacy. More over the staff members are also found absent during working hours. Negligible number of respondents was of the view that family planning is against religion and contraceptives are harmful for health.

4.8 Suggestions for the Advancement of FWCs

Respondents stressed on the need for improvement in the services provided by FWCs. Nearly one-third (31%) proposed that free and quality medicines should be available on regular basis at every FWC. One-fifth (20 percent) float the idea to increase the staff strength at each outlet. Fifteen percent of community people emphasized on frequent field visit for motivation and follow up. Slightly less than fourteen percent stressed on the provision of facilities like delivery care and some initial investigation like sugar test, etc. about ten percent suggested for the posting of qualified MBBS doctor at the center, awareness about FP through media campaign, regular monitoring of centres by management and liaison of FWC with other services outlets to cater health problems of people visiting the centre.

Respondents from all the provinces stressed on the regular availability of free of cost high quality medicines except of Sindh. Need for more frequent field visit was felt mostly in KPK (24

percent). In Punjab, Sindh, and KPK less than ten percent respondents were more concerned about regular monitoring of FWCs. Slight variations are found on the suggestion of doctor's posting at FWCs among the provinces. Provision of delivery care and sugar test was least recommended in KPK, to create awareness about FP through media campaign was suggested mostly in Balochistan and KPK.

Table 4.8: Percentage of Community Persons according to their Suggestions to Improve FWCs by Region

Services Provided by Staff		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
Suggestions to improve FWCs	More and frequent field visits	16.3	8.6	24.2	12.5	8.8	15.2	108
	Proper and regular monitoring of FWCs must be ensured	7.0	4.3	8.8	0.0	0.0	5.9	42
	Services of doctors should be available	6.8	10.1	11.0	12.5	26.5	9.3	66
	Provide all standard medicines all time and free of charges	27.8	18.0	34.1	68.8	55.9	30.8	219
	Increase strength/center/working hours	17.5	21.6	20.9	35.4	8.8	19.5	139
	Provide facilities like delivery/sugar test etc	15.8	12.2	4.4	10.4	26.5	13.8	98
	Awareness regarding media campaign of FP	5.3	4.3	9.9	18.8	11.8	6.9	49
	Liaison of FWC staff etc	3.0	.7	5.5	2.1	2.9	2.8	20
Suggestions to improve family planning programme	Increase awareness campaign/proper-more FP services	22.8	25.9	16.5	35.4	38.2	24.2	172
	Knowledge about FP should be enhanced	11.8	5.8	8.8	20.8	32.4	11.8	84
	Increase FWCs/accessible place/permanent staff	8.0	4.3	4.4	20.8	0.0	7.3	52
	Govt's focus FP program/more funds	9.3	2.9	2.2	6.3	0.0	6.5	46
	Free medicines/services at doorstep	9.3	7.9	27.5	16.7	5.9	11.7	83
	New FP methods should be introduced with less side effects	3.8	0.0	5.5	4.2	26.5	4.4	31
	Medical facilities like hospitals/doctors/x-rays should be provided	10.3	12.2	8.8	4.2	5.9	9.8	70
	proper monitoring of FWC/capacity building	5.5	7.9	8.8	4.2	0.0	6.0	43
	Others	2.5	4.3	0.0	4.2	2.9	2.7	19
Total	399	139	91	48	34		711	

Among provinces majority (35 percent) of respondents of Balochistan interested to increase the staff strength, number of centers and working hours to facilitate more clients followed by Sindh (22 percent), KPK (21 percent) and Punjab (18 percent).

Majority of males suggested that strength of staff, number of centers' and working hours should be increased. Higher percentage of women proposed that standard medicines should be available free of cost and all the time at every centre (See table 4.4 at Annex).

4.9 Suggestions to Improve FP Programme

The respondents have given various suggestions for the improvement of population welfare programme. About a quarter (24 percent) of the respondents of both sex suggested that FP awareness campaign and services should be increased followed by enhancement of FP knowledge, free medicines and quality services at door step (21 percent), need to strengthen healthy infrastructure facilities including hospitals, trained staff, doctors and equipment and need to introduce new contraceptives with less side effects were suggested by ten percent of respondents. At provincial level from Punjab, Sindh and Balochistan more emphasis was given on enhancement of awareness campaign and delivery of services, while in KPK respondents were interested in the provision of free medicines and FP services at their door step. It appears from the suggestions/recommendations given by the selected people from the community that the people have shown their interest for the improvement of the family planning programme in the country. It is necessary to consider the prevailing needs to develop new policies for a positive change in the demand and supply of contraceptives and services of family planning.

Chapter 5

SUPERVISION AND MONITORING BY DISTRICT AND TEHSIL MANAGEMENT TIERS

This chapter is based on the interviews conducted from the selected District and Tehsil Population Welfare Officers responsible for management, supervision and monitoring of the Family Welfare Centers. Module-IV of the study was used to conduct the interviews from them, it covers background characteristic of respondents, their knowledge about jobs description, schedule of monitoring visits, number of visits conducted, training sessions with FWC staff, and trainings availed during job, status and supply system of contraceptives and medicines supply to centers.

5.1 District Population Welfare Officer

The District Population Welfare Officers are the supervisory head of the Population Welfare Programme at district level. They are responsible for implementation of family welfare programme in the district through Family Welfare Centers (FWCs), Reproductive Health Services Centers, Social/Male Mobilizers, Provincial Line Departments, Registered Medical Practitioners, and coordination with the health departments. They are also responsible for supply of contraceptives to all the service delivery outlets providing FP services and conducting IEC activities (preparation of material and its distribution) for creating awareness about family planning programme at the district level.

5.1.1 Coverage of DPWOs

Out of total 125 districts (MoPW, 2009-10) 48 DPWOs and 44 TPWOs were interviewed, which are about thirty eight percent of the total district and tehsil officers. Province of Balochistan, AJK, GB, and Islamabad do not have TPWO. The complete coverage of DPWOs and TPWOs is given in the following table:-

Table 5.1: Percent Distribution of coverage of DPWOs/TPWOs by Region

Province/Region	DPWOs		TPWOs	
	Percent	Number	Percent	Number
Punjab	29.2	14	65.9	29
Sindh	20.8	10	22.7	10
KPK	18.8	9	11.4	5
Balochistan	20.8	10	0	0
Islamabad	4.2	2	0	0
GB	2.1	1	0	0
AJK	4.2	2	0	0
Total	100.0	48	100.0	44

5.2 Background Characteristics

To understand the linkages between effective management and personal skill/capacity of district managers it is important to know the background characteristics of DPWOs. Different questions were asked from DPWOs about age, educational level, working experience in Population Welfare Programme and as DPW Officer.

Table 5.2: Percent Distribution of DPW Officers according to their Background Characteristics by Region

Background Characteristics		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK*	Total	
		%					%	N
Age	Less than 40 years	57.1	0.0	22.2	10.0	60.0	29.2	14
	40 years and above	42.9	100.0	77.8	90.0	40.0	70.8	34
Educational level	Up to Bachelors	7.1	10.0	55.6	20.0	0.0	18.8	9
	Masters and Higher	92.9	90.0	44.4	80.0	100.0	81.3	39
Working since in PWP	Less than 10	71.4	0.0	33.3	0.0	80.0	35.4	17
	10 and Above	28.6	100.0	66.7	100.0	20.0	64.6	31
TOTAL (N)		14	10	9	10	5	100.0	48
Working as a DPWO *	Less than 10	92.9	100.0	57.1	90.0	40.0	81.4	35
	10 and Above	7.1	0.0	42.9	10.0	60.0	18.6	8
TOTAL (N)		14	7	7	10	5	100.0	43

* GB/ICT/AJK=5 Officers,

** 5 missing

Table 5.2 shows that majority of the working DPWOs are in age group of forty years or above and twenty nine percent are below forty years of age in sampled districts. However, more than half of the DPWOs in Punjab are below forty years of age, whereas Sindh has not a single DPWO in this age bracket indicates a force of young senior officers in Punjab as compared to other provinces. Majority of the DPWOs have masters or higher level of education. Among the provinces only KPK has forty four percent DPWOs with this level of education. Seventy one percent of the DPWOs in Punjab, having less than ten years working experience in Population Welfare Programme, which indicates more direct recruitments of new persons in the PWP as compared to other provinces. Sindh and Balochistan do not have any DPWO with less than ten years of working experience in PWP, majority (81 percent) of the DPWOs in the sampled districts have below ten years working experience as DPWO. Among the provinces, KPK has about forty three percent DPWOs working in the same position since more than ten years, ninety percent or more of the DPWOs in other provinces have below ten years working experience as DPWO.

5.3 Knowledge about Job Responsibilities

The major responsibilities of DPWOs are to coordinate, supervise and monitor/manage population welfare programme. According to their job descriptions, they have to look after the service delivery outlets under the provincial population welfare departments, and coordinate with provincial health departments, provincial line departments, registered medical practitioners, Information, Education and Communication (IEC) activities, liaise and supply contraceptives to target group institution, homeopaths and NGOs activities at district level is also one of the main responsibilities of DPWOs. Table 5.3 below presents the distribution of respondents by their knowledge about job responsibilities.

Table 5.3: Percentage of knowledge of DPWOs about their Job Responsibilities by Region

S. No	Job Responsibilities (105)	Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK*	Total	
		%					%	N
1	Plan/organize & implement FP/RH advocacy & service delivery activities through FWCs, MSUs, RHSCs, RMPs, Health outlets of Health Dept, other LD, Hakeem, Homeopaths and PPSOs	100.0	100.0	88.9	100.0	100.0	97.9	47
2	Organize advocacy/ communication activities through mass media & interpersonal communication through programme & non-programme channels.	78.6	80.0	66.7	80.0	100.0	79.2	38
3	Maintain demographic profile covering pop. & develop variables and update the same periodically.	57.1	30.0	66.7	80.0	80.0	60.4	29
4	Identify training needs and impart local level training to programme & non-programme personnel include sterilization workshops (for Nazims/Naib Nazims/Councilors).	64.3	60.0	66.7	90.0	100.0	72.9	35
5	Involve, liaise & coordinate with district officials of other public service providers/LD, PPSOs, NGOs and private sector extending FP services.	85.7	60.0	66.7	100.0	80.0	79.2	38
6	Monitor, supervise & provide on job guidance to service providers through field visits, periodic meetings and contact with clients.	85.7	90.0	88.9	90.0	80.0	87.5	42
7	To disburse and maintain financial record of expenditure incurred in district on programme activities & submit reports to concerned quarters.	78.6	50.0	77.8	90.0	80.0	75.0	36
8	Involve community based agents for contraceptives distribute.	50.0	70.0	77.8	50.0	100.0	64.6	31
9	Ensure male involvement at grass-root level through Male/Social mobilizers located at UC level.	35.7	70.0	66.7	40.0	60.0	52.1	25
10	To be a focal point of programme in district level committee.	35.7	40.0	66.7	60.0	40.0	47.9	23
11	Collect, compile & consolidate performance reports of all reporting units & ensure transmission to the designated authorities and provide feedback to service outlets.	50.0	60.0	88.9	90.0	60.0	68.8	33
12	Provide logistic support for supplies to programme and non-programme service outlets to maintain inventories.	78.6	70.0	88.9	100.0	100.0	85.4	41
TOTAL (N)		14	10	9	10	5		48

* GB/ICT/AJK=5 Officers

Table 5.3 shows that knowledge of main responsibility of Plan/organize implement FP/RH advocacy and service delivery activities through various outlets of PWD, health department, other line department private medical practitioners Hakeem, Homeopaths is universal among the DPWOs, however, about one in ten DPWOs in KPK not aware of his/her major responsibility. The knowledge of other responsibilities of DPWOs varies from eighty eight percent to forty eight percent. The knowledge about a focal point of programme in district level committee is less among the respondents. Province wise analysis indicates variation of knowledge about various jobs among the provinces.

5.4 Supply of IEC Material

District Population Welfare Office has to provide IEC material to the FWCs. Table 5.4 reveals that majority of the DPWOs provided all important IEC material to the FWCs. However, calendars were provided by fifty four percent of the DPWOs, which is lowest among all types of IEC material. Province wise data reveals that in Punjab books and leaflets are provided to FWCs by less than ten percent of the DPWOs which indicates shortage of such material in the province, DPWOs in Balochistan did not supply leaflets and pamphlets to FWCs.

Table 5.4: Percentage of IEC Material Supplied to FWCs by DPWOs by Region

IEC Material Supplies to FWCs from DPWO	Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK*	Total	
	%					%	N
Books	7.1	90.0	88.9	90.0	80.0	79.2	38
Posters	92.9	100.0	88.9	90.0	80.0	91.7	44
Leaflets	8.7	90.0	77.8	0.0	80.0	77.1	37
Pamphlets	92.9	100.0	77.8	0.0	80.0	81.3	39
Calendars	78.6	60.0	33.3	40.0	40.0	54.2	26
Flip charts	78.6	80.0	66.7	60.0	60.0	70.8	34
Others	21.4	10.0	33.3	0.0	40.0	18.8	9
TOTAL (N)	14	10	9	10	5		48

5.5 Supervision and Monitoring

FWC is a core component of the PWP and its supervision is one of the main responsibilities of DPWO. Table 5.5 shows that the monitoring and supervision is better in Sindh, Balochistan and GB, as compared to other provinces and regions, DPWOs of Sindh and Balochistan followed their average schedule programme of monitoring during last month prior to the survey, whereas,

the monitoring visits conducted by DPWOs of Punjab and KPK were less than to their planned visits. The monitoring visits should be planned in a way to cover all the FWCs in the jurisdiction of DPWO on quarterly basis, so that each FWC be visited thrice in a year by the DPWO. An analysis of the data at table 5.5 indicates that the planned visits of DPWOs of KPK and Islamabad are far below to the required monitoring visits per month. Figure below presents the distribution of monitoring visit at DPWOs by province.

Figure 5.1: Monitoring Visits of DPWOs

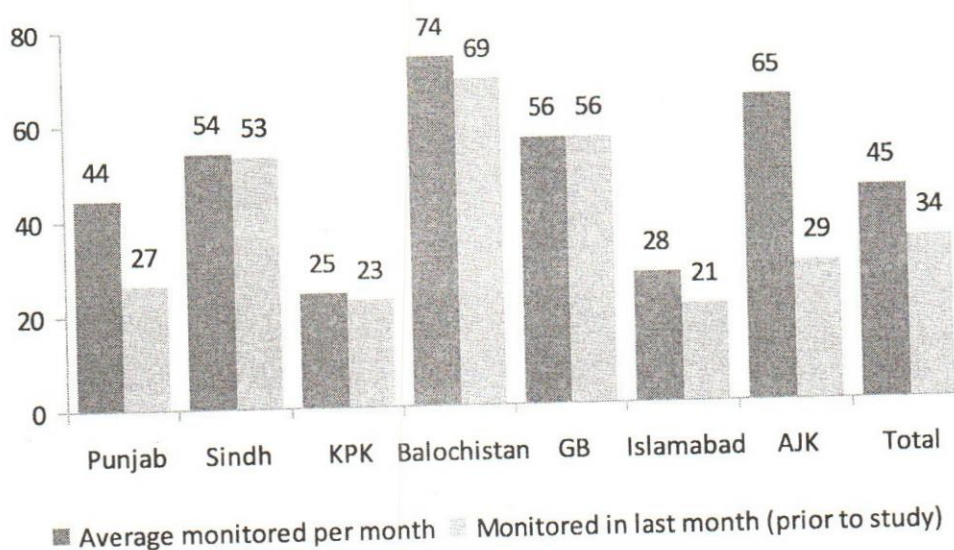


Table 5.5: Total FWCs working in Sampled Districts on Average Monitored per Month and Monitored in the Last Month Prior to the Survey by Region

Province/ Region	Total FWCs under DPWOs in Sampled Districts		Average Monitored per month		Monitored in last month (prior to study)	
	%	N	%	N	%	N
Punjab	51.74	626	44.41	278	26.52	166
Sindh	19.92	241	54.00	130	53.11	128
KPK	16.28	197	24.36	48	22.84	45
Balochistan	6.94	84	74.00	62	69.04	58
GB	1.32	16	56.25	9	56.25	9
Islamabad	2.40	29	27.58	8	20.68	6
AJK	1.40	17	64.7	11	29.41	5
Total	100.00	1210	45.12	546	34.46	417

5.5.1 Monitoring visits of DPWOs

One of the major responsibilities of DPWO is to monitor all on-going programme activities at district level. The findings in table 5.6 demonstrate that most of DPWOs visited FWCs either on weekly (38 percent) or monthly basis (33 percent). Less than ten percent reported that they visit in two months time or more.

Among provinces, three fifth of the DPWOs in Sindh have weekly visits (60 percent) which is the highest among the provinces, followed by one third in KPK, and twenty nine percent in Punjab and quarter in Balochistan. Monthly visits by DPWOs are higher (50 percent) in Balochistan and KPK (44 percent). The monitoring visits should be a regular activity to enhance the performance of the centers; the schedule of visits by DPWOs may be made in such a way that all the FWCs under them be visited on quarterly basis. To cover all the FWCs in their jurisdiction, they have to visit at least thirty three percent of the total FWCs of the district in a month.

Table 5.6: Percent Distribution of Supervision and Monitoring Visits by DPWOs by Region

Province/ Region	Weekly	Fortnightly	Monthly	2-Months or more	Others	Total	
	%			N			
Punjab	28.6	0.0	21.4	14.3	35.7	14	
Sindh	60.0	0.0	20.0	10.0	10.0	10	
KPK	33.3	0.0	44.4	0.0	22.2	9	
Balochistan	20.0	20.0	50.0	10.0	0.0	10	
GB/ICT/AJK*	60.0	0.0	40.0	0.0	0.0	5	
Total	Numbers	18	2	16	4	8	48
	Percent	37.5	4.2	33.3	8.3	16.7	100.0

5.5.2 Record of visits

Proper record keeping and its maintenance is an important indicator to judge the performance of a particular office, data in table 5.7 reveals that seventy one percent of the DPWOs maintained office record of their visits. Among provinces/regions, ninety percent of the DPWOs of the KPK had maintained record of their visits, followed by Punjab (86 percent), GB/ICT/AJK (80 percent), Sindh and Balochistan (50 percent) respectively. Half of the DPWOs of Sindh and Balochistan did not have record of their visits which need to be maintained properly.

Table 5.7: Percent Distribution of DPWOs according to Record keeping of their visits by Region

Record Keeping of DPWOs visits	Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK*	Total	
	%					%	N
Record checked by the visiting teams	85.7	50.0	88.9	50.0	80.0	70.8	34
Record not checked by the visiting teams but available	14.3	0.0	0.0	0.0	20.0	6.3	3
No record available	0.0	50.0	11.1	50.0	0.0	22.9	11
Total (N)	14	10	9	10	5	100.0	48

5.6 Monitoring of Tasks Performed by FWCs

Regular monitoring and supervision of service delivery outlets is important to ensure uninterrupted services to the clients it is also useful to enhance quality of services provided by the service providers. The DPWO's monitoring and supervision visits are also important to keep-up the pace of the current activities and for the future as well. The information was gathered in this survey by asking a question; usually, what do you do during monitoring and supervisory visits? The data demonstrates (Table 5.8) that ninety six percent of DPWOs usually checked 'contraceptive stock', 'all registers' and 'staff attendance' respectively followed by 'availability of medicines' (92 percent) 'IEC materials' (83 percent), 'work plan' and 'current users of family planning' (81 percent) respectively. To observe the accessibility and users-friendliness by common people of the available centers is important. Data in table 5.8 show that about fifty eight percent of DPWOs observed 'sign board installation' which should be hundred percent, because the installation of sign board is important to locate the service delivery outlet and to attract clients.

Among the Provinces/Regions, the same trend has been observed for checking contraceptive stock, all registers, staff attendance, availability of medicines, IEC material, work plan and current users of family planning. Regarding sign board installation, seventy eight percent of DPWOs of KPK observed fixing the sign boards of FWCs followed by Sindh (70 percent), Punjab (57 percent), Balochistan and GB/ICT/AJK (40 percent) respectively. The client verification is also important to avoid false reporting, which at present exists in many centers, as observed in locating selected registered clients from the FWCs record during the survey. This practice was observed by only forty four percent of the DPWOs, among the province majority of DPWOs from Sindh did not verified clients.

Table 5.8: Percentage of Items Checked During Monitoring Visits by Region

S.N	Tasks addressed/ completed during monitoring/supervision visits	Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	
		%					%	N
1	Contraceptive stock	92.9	100.0	100.0	90.0	100.0	95.8	46
2	Registers all types	92.9	100.0	88.9	100.0	100.0	95.8	46
3	Follow-up visits of FWCs staff to FP clients	57.1	50.0	77.8	40.0	80.0	58.3	28
4	Work plan	85.7	70.0	88.9	70.0	100.0	81.3	39
5	IEC material	57.1	80.0	88.9	90.0	80.0	77.1	37
6	Accompanied FWWs/FWCs for clients verification	42.9	20.0	44.4	50.0	80.0	43.8	21
7	On job guidance to FWW/FWC	42.9	80.0	100.0	90.0	60.0	72.9	35
8	Furniture and equipments	78.6	60.0	66.7	100.0	80.0	77.1	37
9	Visit hard core couples for motivation	21.4	60.0	55.6	30.0	60.0	41.7	20
10	Register (Section-Wise	78.6	90.0	77.8	90.0	80.0	83.3	40
11	Assess the training needs of centre's staff	57.1	50.0	55.6	90.0	100.0	66.7	32
12	Newly married couple's registration	42.9	60.0	44.4	40.0	60.0	47.9	23
13	Observe signboards installation	57.1	70.0	77.8	40.0	40.0	58.3	28
14	Eligible couples registered	50.0	90.0	77.8	80.0	80.0	72.9	35
15	Eligible couples visited by staff during a month	42.9	40.0	66.7	20.0	60.0	43.8	21
16	Current users of FP	78.6	60.0	77.8	100.0	100.0	81.3	39
17	Switched methods during a month	57.1	30.0	66.7	80.0	40.0	56.3	27
18	Dropouts clients during a month	64.3	40.0	66.7	20.0	60.0	50.0	24
19	Vasectomy cases	35.7	40.0	66.7	30.0	40.0	41.7	20
20	New clients during a month	50.0	50.0	66.7	80.0	80.0	62.5	30
21	Referred clients	50.0	60.0	77.8	40.0	40.0	54.2	26
22	Staff attendance	92.9	90.0	100.0	100.0	100.0	95.8	46
23	Availability of medicines	85.7	80.0	100.0	100.0	100.0	91.7	44
24	Record of health talks	57.1	50.0	66.7	90.0	60.0	64.6	31
25	Others	7.1	20.0	22.2	0.0	20.0	12.5	6
TOTAL (N)		14	10	9	10	5		48

Survey findings reveal that eighty one percent of DPWOs have observed status of 'family planning current users', switched methods during a month was observed by fifty six percent and 'dropout clients of family planning in a month by half of the DPWOs.

Among the provinces/regions, eighty percent DPWOs of Balochistan observed 'switched methods during a month' followed by KPK (67 percent) and Punjab (57 percent) as compared Sindh where percentage of DPWOs for observing dropout clients is lower (30 percent), which need to be observed regularly.

5.7 Instructions given during visits

Instructions by the managers play a positive role in improving the overall performance of the centers. In this survey, the information was collected about 'given instructions by the DPWOs during their visits of FWCs' Table 5.9 shows that DPWOs are giving prime focus to 'staff punctuality/staff must remain present in the centre' (58 percent) followed by 'proper record keeping' (44 percent), 'advise to maintain atmosphere clean and hygienic' (33 percent) and 'motivation of family planning methods' (25 percent). Among the provinces/regions, more than half of the DPWOs from Punjab advised to centre's staff about 'maintaining atmosphere clean and hygienic' followed by KPK (44 percent), Sindh and GB/ICT/AJK (20 percent and Balochistan (10 percent) respectively. Majority (80 percent) of the district managers of GB/ICT/AJK conveyed instructions while visiting centre's for 'proper record keeping' followed by KPK (56 percent), Punjab (50 percent), Sindh (30 percent) and Balochistan (20 percent). It is observed from the data that some important performance indicators are less instructed by the DPWOs, such as; follow up of clients, registration of new clients, ensured availability of medicines, referral of contraceptive surgery cases, community activities, work plan, increase number of family planning clients and proper storage of contraceptives.

Table 5.9: Percentage of Instructions Given to In-charges and other Staff of FWCs by DPWOs during their Monitoring Visits by Region

S.No	Instructions given	Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	
		%					%	N
1.	Advise to maintain atmosphere clean and hygienic	57.1	20.0	44.4	10.0	20.0	33.3	16
2.	Proper record keeping	50.0	30.0	55.6	20.0	80.0	43.8	21
3.	Motivation regarding FP methods	21.4	30.0	22.2	10.0	60.0	25.0	12
4.	Increase field visits/home visits	14.3	0.0	22.2	20.0	0.0	12.5	6
5.	Staff punctuality/ staff must remain present in the centre	50.0	60.0	88.9	50.0	40.0	58.3	28
6.	Action against complaints	7.1	0.0	0.0	0.0	0.0	2.1	1
7.	Do not charge amount for medicines	0.0	0.0	11.1	0.0	0.0	2.1	1
8.	Follow rules and regulations	7.1	0.0	11.1	20.0	20.0	10.4	5
9.	Availability of medicines should be ensured	7.1	0.0	0.0	0.0	0.0	2.1	1
10.	Facilitate and cooperate with the clients	7.1	10.0	11.1	40.0	20.0	16.7	8
11.	Referral of Contraceptive Surgery (CS) Cases	7.1	20.0	11.1	0.0	0.0	8.3	4
12.	Follow-up of clients	0.0	0.0	11.1	0.0	0.0	2.1	1
13.	Registration of new couples	0.0	0.0		10.0		2.1	1
14.	Community Activities	0.0	10.0	22.2	0.0	0.0	6.3	3
15.	Work Plan	7.1	10.0	0.0	0.0	0.0	4.2	2
16.	Increase number of FP clients	7.1	20.0	0.0	0.0	0.0	6.3	3
17.	Proper storage of contraceptives	0.0	10.0	0.0	20.0	0.0	6.3	3
Total (N)		14	10	9	10	5		48

5.8 Training Sessions for In-Charges of FWCs Arranged by DPWOs

To impart regular trainings (refresher) of the FWCs staff by DPWOs is important for the service providers to enhance their knowledge, table 5.10 indicates that about two third of the DPWOs have arranged training sessions for the In-Charges of FWCs. Half of the training sessions were arranged on monthly basis and one third on quarterly basis. Almost same trend has been observed in Provinces/Regions.

Table 5.10: Percent Distribution of Training Sessions for In-charges of FWCs whenever they were called by DPWOs by Region

Training sessions for In-charges		Punjab	Sindh	KPK	Balochistan	GB/ICT /AJK***	Total	
		%					%	N
Arranged trainings	Yes	64.3	80.0	77.8	40.0	80.0	66.7	32
	No	35.7	20.0	22.2	60.0	20.0	33.3	16
Total (N)		14	10	9	10	5	100.0	48
Frequency of Training sessions	Monthly	11.1	75.0	57.1	50.0	75.0	50.0	16
	Quarterly	55.6	12.5	42.9	50.0	0.0	34.4	11
	Yearly	22.2	12.5	0.0	0.0	0.0	9.4	3
	Other	11.1	0.0	0.0	0.0	25.0	6.3	2
Total (N)		9	8	7	4	4	100.0	32

* Filtered=1 Cases; ** Filtered=31 cases; *** GB/ICT/AJK= Officers

5.9 Ever Attended Health Talks/Group Meetings Organized by FWCs

Another job assignment of DPWOs is to attend health talks/group meetings organized by the FWCs in the community/catchment areas. Table 5.11 reveals that about three fourth of the DPWOs have attended health talks/group meetings arranged by the In-charges of centers. Among the provinces/regions, DPWOs of KPK (89 percent) took more interest to attend the talks/meetings as compared to other provinces; half of the DPWOs from Balochistan have attended such meetings which is the lowest among the provinces. District managers in Balochistan need to increase inter-action with FWCs staff to encourage them to hold community level activities in their catchment areas.

The data reveals that fifty seven percent of the DPWOs attended six or more talks/meetings at community level in the financial year (July 2009 to June 2010). Seventy five percent of the DPWOs from GB, ICT and AJK attend six or more meetings/talk shows, which is the highest among the provinces/region followed by Sindh (50 percent), Punjab (40 percent), and KPK (38 percent).

Table 5.11: Percent Distribution of DPWOs Ever Attended Health Talks/Group Meetings Organized by FWCs in their Catchments/Areas by Region

DPWOs ever attended health talks/group meetings		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK*	Total	
		%					%	N
Health talks/ group meetings	Yes	71.4	80.0	88.9	50.0	80.0	72.9	35
	No	28.6	20.0	11.1	50.0	20.0	27.1	13
Total (N)		14	10	9	10	5	100.0	48
Frequency of Health talks/ group meetings (Jul 2009– Jun 2010)	0-5	40.0	50.0	37.5	60.0	25.0	42.9	15
	6 and More	60.0	50.0	62.5	40.0	75.0	57.1	20
Total (N)		10	8	8	5	4	100.0	35

* Filtered Cases=22

5.10 Supply of Contraceptives to FWCs

To provide contraceptives to FWCs is one of the major responsibilities of DPWOs. Table 5.12 shows that about seventy one percent DPWOs have been providing contraceptives to FWCs on monthly basis as per demand of centers and slightly above one fifth on quarterly basis.

Province wise data indicates that except Sindh, most of the DPWOs (two third or above) of other provinces are supplying contraceptives on monthly basis, while in Sindh two fifth providing contraceptives on monthly and the remaining either on quarterly or as per requirement

of FWC whenever needed. Table 2.15 (chapter-2) of the study reveals that seven percent of the FWCs (Punjab 8 percent, Balochistan 20 percent) did not have any contraceptives at the time of visits of survey teams.

Table 5.12: Percent Distribution of Supply of Contraceptives to FWCs according to their Demand and Period for Distribution by Region

Supply of contraceptives	Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK*	Total	
	%					%	N
Per/month distribution as per FWC's demand	71.4	40.0	66.7	100.0	80.0	70.8	34
3- Month distribution as per FWC's demand	28.6	30.0	22.2	0.0	20.0	20.8	10
Others	0.0	30.0	11.1	0.0	0.0	8.3	4
Total (N)	14	10	9	10	5	100.0	48

* GB/ICT/AJK= Officers

5.11 Supply of Medicines to FWCs

Non-availability of contraceptives and medicines at the service delivery outlets directly affect their performance, the DPWO is responsible to ensure that each center in his/her jurisdiction have sufficient stock of medicines and contraceptives. The DPWOs were asked about the usual timings of supply of the medicines to the FWCs. Table 5.13 shows that slightly more than two fifth (42 percent) of DPWOs distributing medicines to the FWCs on quarterly basis, whereas fifteen percent reported that the supplies are according to the needs of FWCs, based on their demand. More than one third did not have any specific schedule for supply of medicine, they are placed in category of others which includes: (when available, yearly, after 6 months, depends on DPWOs/Provincial HQ and performance based of centers).

Among provinces/regions, majority of DPWOs of Sindh and Punjab have no specific schedule of supplying medicine to FWCs, they reported that it depends on the supply of medicine from provincial office, availability of funds and as per demand of FWCs. In GB/ICT/AJK, DPWOs eighty percent of DPWOs are supplying medicines 'after 3-months' followed by KPK (79 percent), Balochistan (70 percent). Table 2.13 chapter of the study reveals that most of the important prescribed medicines were not available at most of the centers, and the reasons mentioned by In-charges were; shortage of funds, non availability of medicines at DPW Office, medicines supplied to flood affected areas. A comparison of data at tables 5.13 and 2.13 clearly

indicates that the procedure of procurement of medicines need to be reexamine and uniform policy may be adopted to ensure regular supply of medicines to the FWCs.

Table 5.13: Percent Distribution of DPWOs by Schedule of Supplies Medicines to FWCs by Region

Supply of Medicines	Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK*	Total	
	%					%	N
Monthly	0.0	20.0	0.0	20.0	0.0	8.3	4
After 3-months	7.1	10.0	77.8	70.0	80.0	41.7	20
Need-based supply	35.7	10.0	0.0	10.0	0.0	14.6	7
Others **	57.1	60.0	22.2	0.0	20.0	35.4	17
Total (N)	14	10	9	10	5	100.0	48

* GB/ICT/AJK= Officers

** Others:- when available, yearly, after 6 months, depends on DPWOs/provincial HQ and performance based of FWCs

5.12 Monthly Work Plans and Performance Reports of FWW/Cs

Generally, the In-Charge (Family Welfare Worker, Family Welfare Counselor or any staff member) is required to submit monthly work plan and performance report to DPWOs. Table 5.14 shows that all the DPWOs in three provinces receive monthly work plans and maintained record at their district offices, except Balochistan where only thirty percent of DPWOs reported that they receive performance report and work plan of FWCs on monthly basis. It is important to note that how the DPWOs of Balochistan who did not receive performance reports from FWCs are submitting their monthly reports to the provincial head quarter, which is mandatory for them. Ninety-two percent DPWOs confirmed that centre's staff has been working according to their submitted work plans.

Table 5.14: Distribution of DPWOs who received Monthly Work Plans, maintained Record of Plans, Work Plans followed by FWCs and information conveyed to DPWOs in case of change in Plans by Region

Monthly Work Plan		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	
		%					%	N
Received monthly work plan	Yes	100.0	100.0	100.0	30.0	80.0	83.3	40
	No	0.0	0.0	0.0	70.0	20.0	16.7	8
Total (N)		14	10	9	10	5	100.0	48
Maintain record of work plan	Yes	100.0	90.0	100.0	100.0	100.0	97.3	36
	No	0.0	10.0	0.0	0.0	0.0	2.7	1
Centre's staff work according to submitted work plan	Yes	75.0	100.0	100.0	100.0	100.0	91.9	34
	Depends upon	25.0	0.0	0.0	0.0	0.0	8.1	3
If work plan changed do they inform	Yes	91.7	100.0	100.0	100.0	75.0	94.6	35
	No	8.3	0.0	0.0	0.0	25.0	5.4	2
Total (N)		12	10	9	2	4	100.0	37

Table 5.15 indicates percentage of DPWOs who took any actions against staff of centers for not sending work plans to them, table below shows that eighty one percent of DPWOs took actions i.e. 'issued explanation/show-cause notices. One sixth of the DPWOs did not take any action, whereas, a small percentage of DPWOs took serious action by stopping their salaries and TA/DA.

Table 5.15: Percentage of DPWOs who Took Actions against FWC's Staff who Failed to Send Work Plans by Region

S No.	Types of actions taken by DPWOs	Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK*	Total	
		%					%	N
1.	Explanation/Show-cause notice is issued	7	9	6	3	7	81.3	39
2.	No T.A/D.A is allowed/paid	1	0	0	0	0	2.1	1
3.	No action	0	2	0	4	2	16.7	8
4.	Salary is stopped	0	0	2	0	0	4.2	2
5.	Transfer the staff	1	0	0	0	0	2.1	1
TOTAL (N)		14	10	9	10	5		48

5.13 Satisfaction Level of DPWOs for Performance of In-charges

The study reveals that majority of the DPWOs are satisfied with the performance of the In-charges of FWCs working under them (table 5.16). The level of satisfaction is higher in KPK and GB/ICT/AJK (100%) respectively; however, about twenty nine percent of DPWOs of Punjab were not satisfied with the performance of In-charges, which is the highest among the provinces.

Table 5.16: Percent Distribution of DPWOs who Satisfied with the Performance of In-charge of by Region

Satisfactory stated by DPWOs for Performance of In-charge		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	
		%					%	N
Satisfaction	Yes	71.4	90.0	100.0	80.0	100.0	85.1	40
	No	28.6	10.0	0.0	20.0	0.0	14.9	7
TOTAL (N)		14	10	9	10	4	100.0	47

* Filtered Case=1

5.14 On-Job Trainings of DPWOs

On job training play an important role in human resource development of the organization, it is essential to keep them up date with the new development in their field of occupation; it is even essential for the district managers of population welfare, because they have the responsibility of imparting training to the staff working under them.

5.14.1 In country trainings received

Table 5.17 shows that all the DPWOs attended on-job training (in-country), and slightly less than two third (64 percent) attended training last year prior to this study, while, twenty nine percent received last training 2-3 years back, and a small proportion of DPWOs (7 percent) attended training more than 4 years ago.

Among the provinces/regions, all the DPWOs of Sindh received training during last year, whereas, in other provinces those received training last year prior to the survey; it ranges between seventy one percent in Punjab to thirty percent in Balochistan.

A specific question was asked to know contents covered in these trainings. Study reveals that more than half (54 percent) of DPWOs received trainings in the field of 'supervision and monitoring' followed by management & finance' (48 percent), 'family planning' (40 percent), 'health education' (31 percent), 'project formulation' (29 percent) and 'preparation of IEC material' (25 percent). More or less same trend has been observed in provinces/regions.

Substantial proportion of DPWOs (40 percent) reported different contents and placed in the category of others; such as in the fields of Reproductive Health, 'Gender Issues', 'Social Research', 'Leadership', 'Communication Skills', 'Monitoring & Evaluation', 'Understand formula of Couple Year Protection (CYP) normally used for applying the formula to convert family planning method units into births', 'Logistics', 'Demography', 'Evaluation Techniques' and 'DDO Duties'.

Table 5.17: Percent Distribution of DPWOs Received On-Job In-Country Trainings by Region

Trainings/last attended training's years/Number of Trainings		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	
		%					%	N
In-Country Trainings	Yes	100.0	100.0	100.0	100.0	100.0	100.0	48
	No	0.0	0.0	0.0	0.0	0.0	0.0	0
Total (N)		14	10	9	10	5	100.0	48
Attended last training (Year)	Up to 1year	71.4	100.0	62.5	30.0	60.0	64.4	29
	2 – 3	28.6	0.0	12.5	60.0	40.0	28.9	13
	4 +	0.0	0.0	25.0	10.0	0.0	6.7	3
Total (N)		14	8	8	10	5	100.0	45
Contents of In-Country Training (s)								
Supervision & Monitoring		35.7	70.0	77.8	30.0	80.0	54.2	26
Family Planning		21.4	50.0	77.8	10.0	60.0	39.6	19
Maternal and Child Health		21.4	30.0	55.6	0.0	40.0	27.1	13
Health Education		21.4	40.0	44.4	10.0	60.0	31.3	15
Preparation of IEC material		14.3	30.0	44.4	0.0	60.0	25.0	12
Management and Finance		28.6	40.0	66.7	60.0	60.0	47.9	23
Project Formulation		28.6	30.0	44.4	20.0	20.0	29.2	14
Other*		64.3	40.0	33.3	10.0	40.0	39.6	19
Total (N)		14	10	9	10	5	100.0	48

5.14.2 Foreign training received

Foreign training plays a positive role in improving the capacity and skill. Results in table 5.18 reveal that majority (90 percent) of DPWOs have not received any on-job foreign training. All DPWOs of Balochistan reported that they have not received any foreign training, last foreign trainings (within 10 years time period) were attended by one DPWO each from Sindh, KPK and GB/ICT/AJK respectively and one DPWO each from KPK and Punjab have received foreign training more than ten years back. The study indicates that the chances of foreign training are rare in the Population Welfare Programme in the country.

The contents which were covered by the DPWOs in last attended trainings; Monitoring, Evaluation and Supervision, Maternal and Child Health, Motivation and Counseling, Reproductive Health, Family Planning, Health Education, IEC material, Management and Finance, Human Resources Development & Record Management.

Table 5.18: Percent Distribution of DPWOs who Ever Received Foreign Training along with Contents by Region

Attended training's & Topics Covered		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	
		%					%	N
Foreign Training (s)	Yes	7.1	10.0	22.2	0.0	20.0	10.4	5
	No	92.9	90.0	77.8	100.0	80.0	89.6	43
Total (N)		14	10	9	10	5	100.0	48
Number								
Attended last training (Year)	Less 10	0	1	1	No Data	1	60.0	3
	10 +	1	0	1	No Data	0	40.0	2
Total (N)		1	1	2	No Data	1	100.0	5
Contents of Foreign Training (s) Number								
01. Monitoring, Evaluation & Supervision		0	0	0	No Data	1	1	
02. Maternal and Child Health		0	0	1	No Data	0	1	
03. Motivation and Counseling		0	0	0	No Data	1	1	
04. Reproductive Health		0	0	0	No Data	1	1	
05. Family Planning		0	1	0	No Data	0	1	
06. Health Education		1	0	0	No Data	0	1	
07. IEC material		0	0	1	No Data	1	2	
08. M&F		0	0	0	No Data	1	1	
09. HRD		0	0	0	No Data	1	1	
10. Record Management		0	1	0	No Data	1	2	
11. Others		1	0	0	No Data	0	1	

Desire for getting foreign training among the DPWOs is high, i.e. eighty five percent of them want to have foreign training (Table 5.19). Surprisingly one third of the DPWOs from Balochistan were not interested to avail any foreign training.

Table 5.19: Percent Distribution DPWOs according to their Need for Further Foreign Training(s) by Region

Need for Further Training (s)		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK*	Total	
		%					%	N
Foreign Training (s)	Yes	92.9	90.0	66.7	80.0	100.0	85.4	41
	No	7.1	10.0	33.3	20.0	0.0	14.6	7
Total (N)		14	10	9	10	5	100.0	48

5.15 Tehsil Population Welfare Officers

TPWOs are responsible to provide administrative and logistic support to FWCs, MSUs, and Male/Social Mobilizers and monitor the Programme activities at tehsil level, coordinate with other departments for the promotion of family planning particularly with health departments and other Provincial Line Departments (PLDs), to compile and consolidate reports for onward submission to the district officers. The TPWO is also responsible to organize meetings/group meetings, film shows and other activities of Information Education and Communication (IEC) in their respective tehsils.

5.16 Coverage of TPWOs

FWCs are the cornerstone and most extensive institutional network of PWP in the country including AJK. For this study, using stratified random sampling technique, 44 TPWOs were selected from the same districts of three provinces Punjab, Sindh and KPK. (Balochistan and Gilgit Baltistan, Islamabad and Azad Jammu & Kashmir do not have tehsil tier).

5.17 Background Characteristics of TPWOs

Table 5.20 presents the background characteristics of TPWOs, and specific information was gathered regarding current age, educational level, working experience in PWP and as a TPWO. The data shows that at the time of survey slightly more than half (52 percent) of the TPWOs were below forty years of age. Punjab and KPK have more young TPWOs as compared to Sindh, where one fifth of the TPWOs were below forty years.

Sixty one percent TPWOs have masters or higher level of education and slightly more than half have (52 percent) have ten years or above work experience in PWP and one-third (33 percent) are working as TPWO since more than ten years.

Table 5.20: Percent Distribution of TPWOs by Background Characteristics & Province

Background Characteristics		Punjab	Sindh	KPK	Total	
		%			%	N
Age (years)	Less than 40	62.1	20.0	60.0	52.3	23
	40 and More	37.9	80.0	40.0	47.7	21
Educational level	Up to Bachelors	34.5	50.0	40.0	38.6	17
	Masters and Higher	65.5	50.0	60.0	61.4	27
Working since in PWP	Less than 10	55.2	20.0	60.0	47.7	21
	10 and Above	44.8	80.0	40.0	52.3	23
Total (N)		29	10	5	100.0	44
Working as a TPWO **	Less than 10	69.0	60.0	100.0	67.5	27
	10 and Above	31.0	40.0	0.0	32.5	13
Total (N)		29	10	1	100.0	40

* GB/ICT/AJK=5 Officers; ** Missing = 4

5.18 Knowledge of TPWOs about their Job Responsibilities

To assess the knowledge, TPWOs were asked about their job responsibilities, table 5.21 presents the results. It shows that majority of the TPWOs are aware of their main responsibilities, such as ‘monitoring, supervising and providing on job guidance through field visits, periodic meetings and contact with clients’, ‘plan/organize & implement Family Planning/Reproductive Health advocacy & service delivery activities through FWCs, MSUs, RHSCs, RMPs, Health outlets of Health Dept, other Line Department, Hakeems, Homeopaths and PPSOs’.

Same trend has been observed in the provinces except KPK where none of the tehsil officer is aware of the responsibility about ‘disbursing and maintaining financial records of expenditure incurred on programme activities and submission of reports to concerned quarters. It may be due to a reason that TPWOs in KPK were not given the financial responsibility and are directly under the control of DPWOs.

Table 5.21: Percentage of TPWOs according to the knowledge about their job responsibilities by Province

S. No	Job Responsibilities	Punjab	Sindh	KPK	Total	
		%			%	N
1	Plan/organize & implement FP/RH advocacy & service delivery activities through FWCs, MSUs, RHSCs, RMPs, Health outlets of Health Dept, other LD, Hakeems, Homeopaths and PPSOs	69.0	100.0	100.0	79.5	35
2	Organize advocacy/ communication activities through mass media & interpersonal communication through programme & non-programme channels.	65.5	60.0	80.0	65.9	29
3	Maintain demographic profile covering population & development variables and update the same periodically.	24.1	70.0	80.0	40.9	18
4	Identify training needs and impart local level training to programme & non-programme personnel include sterilization workshops (for Nazims/Naib Nazims/Councilors).	55.2	60.0	80.0	59.1	26
5	Involve, liaise & coordinate with district officials of other public service providers/LD, PPSOs, NGOs and private sector extending FP services.	44.8	70.0	80.0	54.5	24
6	Monitor, supervise & provide on job guidance to service providers through field visits, periodic meetings and contact with clients.	96.6	90.0	100.0	95.5	42
7	To disburse & maintain financial record of expenditure incurred in district on programme activities & submit reports to concerned quarters.	27.6	50.0	00.0	29.5	13
8	Involve community based agents for contraceptives distribute.	37.9	80.0	80.0	52.3	23
9	Ensure male involvement at grass-root level through Male/Social Mobilizers located at UC level.	44.8	50.0	80.0	50.0	22
10	To be a focal point of programme in tehsil level committee.	37.9	20.0	100.0	40.9	18
11	Collect, compile & consolidate performance reports of all reporting units & ensure transmission to the designated authorities and provide feedback to service outlets.	72.4	30.0	100.0	65.9	29
12	Provide logistic support for supplies to programme and non-programme service outlets to maintain inventories.	58.6	80.0	80.0	65.9	29
Total (N)		29	10	5		44

5.19 Type of IEC Material Supplied by TPWOs

TPWO Office is responsible to distribute IEC material received from DPWO. Table 5.22 shows that over three fourth of the TPWOs supplied 'Pamphlets' (80 percent), 'Leaflets', 'Posters' (77 percent) respectively, Books were supplied by less than two third, and calendars and flip charts by half of the TPWOs.

Supply of IEC material to FWCs was satisfactory in Sindh such as 'books' (100 percent) and 'posters' (90 percent) as compared to KPK and Punjab.

Table 5.22: Percentage of IEC Material Supplied to FWCs by TPWO by Province

IEC Material Supplies to FWCs from DPWO	Punjab	Sindh	KPK	Total	
	%			%	N
Books	48.3	100.0	80.0	63.6	28
Posters	72.4	90.0	80.0	77.3	34
Leaflets	75.9	80.0	80.0	77.3	34
Pamphlets	79.3	80.0	80.0	79.5	35
Calendars	55.2	40.0	40.0	50.0	22
Flip charts	44.8	80.0	40.0	52.3	23
Others	13.8	0.0	0.0	9.1	4
Total (N)	29	10	5		44

5.20 Supervisory and Monitoring Visits

Supervision and monitoring and to check performance of staff of the FWCs at tehsil level is one of the main responsibilities of TPWOs. Table 5.23 shows that more than half (52 percent) of the TPWOs paid weekly visits while about two fifth conduct monthly visits and meager number (2 percent) after two months.

Among the provinces, (62 percent) TPWOs of Punjab and (50 percent) Sindh usually visit centres on weekly basis. Data reveals that not a single TPWO from KPK paid ‘weekly’ visit but they all monitored through ‘monthly’ visits. The responses for category ‘others’ identified that (10 percent) TPWOs of Sindh and (7 percent) from Punjab supervise & monitor FWCs ‘twice a week’, ‘as per tour programme’ or pay ‘surprise visits’ to their centers.

Table 5.23: Percent Distribution of Supervision & Monitoring Visits by TPWOs by Province

Province	Weekly	Monthly	2+ Months	Others (twice a week, as per tour programme or surprise)	Total	
Punjab	62.1	27.6	3.4	6.9	29	
Sindh	50.0	40.0	0.0	10.0	10	
KPK	0.0	100.0	0.0	0.0	5	
Total	Numbers	23	17	1	3	44
	Percent	52.3	38.6	2.3	6.8	100.0

5.21 Monitoring of Tasks Performed by FWCs

TPWOs are responsible to monitor and supervise the performance of FWCs in their jurisdiction. They have to visit all centers on monthly basis. During their visits they have to check various items. Data in table 5.24 shows that all the TPWOs checked 'contraceptive stock' during their usual visits followed by 'checked all types of registers' (93 percent) 'staff attendance' (91 percent), 'availability of medicines' (77 percent), availability and distribution of IEC material (71 percent).

Some of the items not checked by the majority of tehsil officers were; 'vasectomy cases' and 'record of health talks', 'switched family planning methods by clients during a month' 'visit to hard core couples for family planning motivation. Only thirty nine percent of the TPWOs accompanied FWW/FWCs to verify clients, it is an important segment to control fake reporting by FWCs, which is ignored by the majority of the TPWOs.

Among the provinces, contraceptive stock was checked by all the TPWOs during their visits to FWCs. All TPWOs of KPK 'supervise/monitored all types of registers', providing on job guidance to FWWs/Cs and checked clients who dropped-out family planning methods within a month. In Sindh, concentration of TPWOs on IEC material, found (100 percent) followed by 'checking of staff attendance' (90 percent), 'providing on-job guidance to FWWs/Cs', 'observed signboard installation' and availability of medicines' (70 percent) respectively. While, in Punjab, usual visits of tehsil officers for supervision & monitoring focused on, 'providing on-job guidance' 'section-wise registers checking' and 'availability of medicines'

Table 5.24: Percentage of Items Checked during Monitoring & Visits by TPWOs by Province

S.N	Tasks addressed/ completed during monitoring/supervision visits	Punjab	Sindh	KPK	Total	
		%			%	N
1	Contraceptive stock	100.0	100.0	100.0	100.0	44
2	Registers all types	93.1	90.0	100.0	93.2	41
3	Follow-up visits of FWCs staff to FP clients	69.0	50.0	60.0	63.6	28
4	Work plan	75.9	50.0	60.0	68.2	30
5	IEC material	58.6	100.0	80.0	70.5	31
6	Accompanied FWWs/FWCs for clients verification	34.5	40.0	60.0	38.6	17
7	On job guidance to FWW/FWC	37.9	70.0	100.0	52.3	23
8	Furniture and equipments	55.2	70.0	80.0	61.4	27
9	Visit hard core couples for motivation	24.1	20.0	20.0	22.7	10
10	Register (Section-Wise)	79.3	50.0	60.0	70.5	31
11	Assess the training needs of centre's staff	37.9	40.0	80.0	43.2	19
12	Newly married couple's registration	41.4	40.0	60.0	43.2	19
13	Observe signboards installation	44.8	70.0	80.0	54.5	24
14	Eligible couples registered	55.2	60.0	80.0	59.1	26
15	Eligible couples visited by staff during a month	55.2	30.0	80.0	52.3	23
16	Current users of FP	55.2	30.0	60.0	50.0	22
17	Switched methods during a month	24.1	20.0	40.0	25.0	11
18	Dropouts clients during a month	44.8	40.0	100.0	50.0	22
19	Vasectomy cases	31.0	30.0	80.0	36.4	16
20	New clients during a month	55.2	30.0	80.0	52.3	23
21	Referred clients	58.6	20.0	60.0	50.0	22
22	Staff attendance	93.1	90.0	80.0	90.9	40
23	Availability of medicines	79.3	70.0	80.0	77.3	34
24	Record of health talks	34.5	20.0	80.0	36.4	16
25	Others	0.0	0.0	20.0	2.3	1
Total (N)		29	10	5		44

5.22 Attended Health Talks/Group Meetings Organized by FWCs

TPWOs are responsible to attend health talks/group meetings along with district officers or individually organized by the FWCs in the catchment areas. Table 5.25 reveals that about seventy percent of the tehsil officers have attended health talks/group meetings. Provinces wise data indicates that, TPWOs of KPK attended all health talks/group meetings arranged by the FWCs, more than one third TPWOs of Punjab and thirty percent of Sindh did not attend any talk show or group meeting. To encourage the FWC staff it is important for the immediate supervisors to actively participate in such occasions, as it is one of the important motivational activities for the awareness of family planning and reproductive health for the target population in the catchment areas of the FWCs.

Table 5.25: Percent Distribution of TPWOs Ever Attended Health Talks/Group Meetings Organized by FWCs in their Catchments/Areas by Province

TPWOs ever attended health talks/group meetings		Punjab	Sindh	KPK	Total	
		%			%	N
Health talks/ Group meetings	Yes	64.3	70.0	100.0	69.8	30
	No	35.7	30.0	0.0	30.2	13
Total (N)		28	10	5	100.0	43

It is evident from the data in table 5.26 and trend shown in fig.5.1 that eighty three percent of the TPWOs held monthly meetings with In-Charges of FWCs. Among the provinces forty four percent of the TPWOs from Sindh and eleven percent of Punjab did not held any meeting with the FWCs staff.

Table 5.26: Percent Distribution of Meetings of In-Charges with TPWOs in a month by province

Number of Meetings)	Punjab	Sindh	KPK	Total	
	%			%	N
0 meeting	10.7	44.4	0.0	16.7	7
1 meeting	89.3	55.6	100.0	83.3	35
Total (N)	28	9	5	100.0	42

Note: Filtered=2; * GB/ICT/AJK=5 Officers

5.23 Supply of Contraceptives to FWCs

To ensure regular supply of contraceptives to service delivery outlet and submission of sale proceeds to the district office is one of the important responsibilities of TPWO. Table 5.27 reveals that about half of the TPWOs have been distributing contraceptives to FWCs as per their monthly demand and one fifth after three months. A significant percentage (30 percent) of TPWOs is supplying contraceptives when available or depends upon supply from DPWO office.

Province wise data indicates that three fifth of the TPWOs in Sindh have no specific schedule for supply of contraceptives to the FWCs, only thirty percent are providing on monthly and one in ten on quarterly basis. The distribution pattern of KPK is found satisfactory, while in Punjab three fourth of the TPWOs are supplying on monthly or Quarterly basis.

Table 5.27: Percent Distribution of Supply of Contraceptives to FWCs according to their Demand and as per Distribution Plan by Region

Supply of contraceptives	Punjab	Sindh	KPK	Total	
	%			%	N
Per/month distribution as per FWC's demand	55.2	30.0	60.0	50.0	22
Three-Month distribution as per FWC's demand	20.7	10.0	40.0	20.5	9
Others	24.1	60.0	0.0	29.5	13
Total (N)	29	10	5	100.0	44

5.24 Supply of Medicines to FWCs for General Ailment

Another important tasks of TPWOs is to ensure sufficient supply of the medicines to the FWCs. Table 5.28 shows that supply of medicines to centers is regular, half of the TPWOs reported that the medicines are supplied directly from DPWOs; as and when available or after six months. Province wise data indicates that KPK has better distribution mechanism than other provinces, whereas, in Sindh there is no proper arrangement for supply of medicine to FWCs.

Table 5.28: Percent Distribution of Supplies of Medicines to the FWCs by Province

Supply of Medicines for General Ailments	Punjab	Sindh	KPK	Total	
	%			%	N
Monthly	10.3	20.0	0.0	11.4	5
After 3-months	6.9	10.0	80.0	15.9	7
Need Based Supply	31.0	0.0	20.0	22.7	10
Others*	51.7	70.0	0.0	50.0	22
Total (N)	29	10	5	100.0	44

* Others (when available, yearly, after 6 months, up to DPWO, FWC's performance based and direct supply from provincial population departments)

5.25 Work Plans and Performance Reports by In-charges of FWCs

Coordination and perusal of work plans are also main function of TPWOs as per their job descriptions. The work plan compilation and timely submission is being assessed in the study. Table 5.29 shows that majority (84 percent) of the TPWOs receive monthly work plans from FWCs regularly. Among provinces, all TPWOs of Punjab and KPK received work-plans regularly as compared to Sindh where only one-third of them received monthly work-plans. It shows that the mechanism of submission of work plans in Sindh needs to be improved and In-charges of the centers be instructed to follow the procedure and time frame.

Table 5.29: Percent Distribution of TPWOs who Received Work Plans from FWCs, Maintained Record of Plans, Work Plan followed by FWCs and Information to TPWOs about any change in Plan by Province

Monthly Work Plan		Punjab	Sindh	KPK	Total	
		%			%	N
Received monthly work plan	Yes	100.0	30.0	100.0	84.1	37
	No	0.0	70.0	0.0	15.9	7
TOTAL (N)		29	10	5	100.0	44
Maintain record of work plan	Yes	100.0	100.0	100.0	100.0	34
	No	0.0	0.0	0.0	0.0	0
Centre's staff work according to submitted work plan	Yes	84.6	66.7	100.0	85.3	29
	No	3.8	0.0	0.0	2.9	1
	Depends upon	11.5	33.3	0.0	11.8	4
If work plan changed do they inform 126	Yes	88.5	100.0	80.0	88.2	30
	No	11.5	0.0	20.0	11.8	4
Total (N)		26	3	5	100.0	34*

* Filtered Cases=10

In addition, a question was asked regarding action(s) taken against the In-charges who fail to send reports, the majority (77 percent) of tehsil officers reported that they issue explanation or show-cause notices to staff of centers. In Punjab province ninety three percent of the TPWOs issued explanation or show-cause notices which is the highest as compared to other provinces, (table 5.30). The picture is more visible in fig. 5.2 below.

Table 5.30: Percentage of TPWOs who Took Actions against Centre's Staff Failed to Send Work Plans by Province

S No.	Types of actions taken by TPWOs (127)	Punjab	Sindh	KPK	Total	
		Numbers			%	N
1.	Explanation/ Show-cause notice is issued	27	3	4	77.27	34
2.	No action	0	2	1	6.82	3
3.	Political Influence restricts us to take any action	1	0	0	2.27	1
4.	Report to DPWO	3	2	1	13.64	6
5.	Suspend the staff	2	0	0	4.55	2
Total (N)		29	10	5		44

The TPWOs were also asked about the performance of the FWCs under their jurisdiction. Table 5.31 presents the results, the data shows that majority of the TPWOs were satisfied with the performance of the In-charges of the centers, whereas, one fifth were not comfortable. Province wise data indicates that all the TPWOs of KPK were satisfied with the performance of In-charges of the FWCs.

Table 5.31: Percent Distribution TPWOs Satisfied with the Performance of In-charge by Province

Satisfaction stated by TPWOs for Performance of In-charge		Punjab	Sindh	KPK	Total	
		%			%	N
Satisfaction	Yes	79.3	70.0	100.0	79.5	35
	No	20.7	30.0	0.0	20.5	9
Total (N)		29	10	5	100.0	44

5.26 On- Job Trainings Received by TPWOs

The TPWO is a important tier in the population welfare programme for the monitoring and supervision of service delivery outlets at the tehsil level. Effective monitoring and supervision can contribute to the overall performance of the FP programme in the Country. The capacity building of TPWOs play vital role in improving their performance. a person who could play positive role if he/she has received trainings. TPWOs were asked about the status of on-job training they received.

5.26.1 In -country training received

Table 5.32 shows that majority (91 percent) of TPWOs received on-job in-country trainings, more than three fifth received during last year prior to the survey, one fifth 2-3 years back and about eighteen percent more than four years ago. Among the provinces, two third tehsil officers of Sindh and Punjab availed training during last year, one fifth of the tehsil officers of KPK also received training last year.

Table 5.32: Percent Distribution of TPWOs Received On-Job In-Country Trainings by Province

Attended In-country Trainings		Punjab	Sindh	KPK	Total	
		%			%	N
In-Country Trainings	Yes	86.2	100.0	100.0	90.9	40
	No	13.8	0.0	0.0	9.1	4
Training Attended in last year	Up to 1	64.0	66.7	40.0	61.5	24
	2 – 3	20.0	11.1	40.0	20.5	8
	4+	16.0	22.2	20.0	17.9	7
	TOTAL (N)	25	10	5	100.0	40
Contents of In-Country Training (s)*						
1. Supervision & Monitoring		60.0	50.0	40.0	55.0	22
2. Family Planning		32.0	20.0	80.0	35.0	14
3. Maternal and Child Health		20.0	20.0	60.0	25.0	10
4. Health Education		16.0	30.0	40.0	22.5	9
5. Preparation of IEC material		16.0	30.0	60.0	25.0	10
6. Management and Finance		32.0	30.0	60.0	35.0	14
7. Project Formulation		28.0	0.0	40.0	22.5	9
8. Other**		48.0	40.0	20.0	42.5	17
Total (N)		25	10	5		40

*Figures are reported in percentage

**Others:- Reproductive Health, Gender Issues, Social Research, Leadership, Communication Skills, Monitoring & Evaluation, Understand formula of Couple Year Protection (CYP) used for applying the formula to convert family planning method units into births control, Logistics, Demography, Evaluation Techniques, DDO Duties.

Above table also reveals that more than half (55 percent) of TPWOs have received training in the field of 'supervision & monitoring', 'others**' (43 percent), 'family planning' and 'Management & Finance' (35 percent) respectively, followed by MCH and preparation of IEC material (25 percent). The similar trend is observed in provinces.



Chapter 6

CONCLUSION AND RECOMMENDATIONS

6.1 Conclusion

6.1.1 Situation analysis of FWCs

The situation analysis of the Family Welfare Centers suggests that the overall performance of the centers is satisfactory. However, the study identified certain areas which need urgent attention. About ten percent of the FWCs did not have FWW/C posted at the time of survey; the female assistants were working as In-charge of the centers. The position in Balochistan was more serious where twenty percent of the centers did not have FWW/C. The posting of In-charge is important as the female assistant do not have the required level of training and experience to deal with complicated cases of family planning and reproductive health.

The element of over reporting/false reporting was observed among the sampled 174 FWCs. Of the total 1720 selected registered clients from the record of FWCs, only 786 clients were traced and interviewed, whereas, about seven percent were either migrated to some other area or refused to give interviews, about two fifth of the selected registered clients could not be traced at the given addresses.

The location of more than one fifth of the centers was not suitable as these do not have proper road links, of these twelve percent have even no katcha roads and the clients faced difficulties in reaching the centers. The overall staff position was satisfactory; however seventeen percent of the posts of FWA male and female were lying vacant and fifteen percent centers do not have Chowkidars at the time of the survey. The physical position of the centers was generally satisfactory; however, about eleven percent centers were below satisfactory level.

About fifteen percent of the centers were located in one room, whereas, situation in the provinces of KPK (32 percent), and Sindh (24 percent) was more critical. The clients may be facing the problems of privacy; even it is problem for providing services of IUD insertions.

About nine percent centers were such where there was no toilet facility was available; the position in Sindh was worst where more one third centers do not have such facility.

An important activity of the FWC is to maintain base line data of the catchment areas to identify eligible clients, thirty seven percent of the centers were not maintaining such record. More than forty percent of the FWCs in Punjab and Sindh and half of Baluchistan fall in this category.

Overall performance of FWCs in terms of acceptors (for all methods of FP clients) decline in 2009-10 as compared to previous year.

More than seventy percent of the centers do not essential recommended medicines at the time of survey; the supply mechanism of medicines was not satisfactory. The clients of general ailment and clients having side effects of any FP methods facing problems, the FWC staff referring such clients to other health facilities, which may affect the performance of centers. The main reason stated by the staff for scarcity in medicines is 'non availability of medicine at the DPWO office/not provided by DPWO' (64 percent) and funds shortage (32 percent). Among provinces, Sindh province has been suffering more where more than eighty-two percent of the In-charges reported that medicines are not provided by DPWOs, followed by Punjab (62 percent), Balochistan (60 percent), GB/ICT/AJK (57 percent) and KPK (52 percent). The shortage in funds is mainly reported by In-charges from Punjab (46 percent) as compared to other provinces/regions.

Seven percent of the centers do not have any contraceptive at the time of the survey. The position in Balochistan was more critical where one fifth of the centers do not have stock.

About one third of the FWCs did not refer any Contraceptive Surgery case to RHS centers during last three months prior to the survey. About 16 to seventeen percent FWCs reported that they referred CS cases to other doctors. It needs further investigation that why the cases are referred to others and not to RHS centers. About eighty percent of the centers reported that any pick and drop facility was not provided to CS clients.

It is observed that more than a quarter of the FWCs were not maintaining any record for clients who dropped FP methods. The study reveals that quite a large number of FP clients dropped out during last year prior to the survey. The main reason stated by the FWCs staff is the side effect of method.

Refresher training is important for the capacity building of the employees, sixty two percent of the In-charges reported that they did not have any training during last year prior to the survey.

6.1.2 Perception of Clients

Fourteen percent of the registered clients of family planning methods were not currently using any contraceptive method; the dropout rate was high in Balochistan where thirty nine percent of FP clients were not current users of any method. About sixteen percent of the clients have complaints of side effect of current method. Thirty nine percent of dropped out clients reported they were not approached by the FWCs staff to restart the method. Ninety five percent of the clients were satisfied with the services provided by the FWCs staff; however, more than a quarter were not satisfied for follow-up care. About two fifth of the clients reported that they have ever attended the shows organized by the centers.

Forty six percent of the clients reported that they were charged for the FP services.

Forty three percent of the clients were fully satisfied with the working of FWCs and behavior of staff, nine percent were not satisfied and they also reported that no community meetings were held in their areas.

6.1.3 Perception of Community persons

About twenty percent of the community persons those interviewed are not aware of the existence of FWC in their area, twenty three percent of the respondents reported that FWC staff never visited in the community and one in ten were not aware of any such visits.

Seventy four percent of the respondents have at least one visit to the center of their area and sixty one percent accompanied clients. Majority of the respondents those visited were satisfied with the working of the centers, however, about twelve percent have reported that the staff were not available when they visited. As regards the group meetings/health talks organized by FWCs, only forty three percent were aware of these, and among these sixty two percent have ever attended such shows/meetings. Eighty percent of the community persons were satisfied with the information provided by FWCs staff about family planning and reproductive health.

6.1.4 Supervision and Monitoring

The monitoring and supervision was found weak among the DPWOs and TPWOs. The DPWOs have visited only thirty five percent of the FWCs during the month prior to the survey. Quarter of the DPWOs reported that they visit the centers in either two months time or more. Twenty three percent of the DPWOs did not maintain any record of their visits to the centers.

During their visits most of the DPWOs not verified the clients who obtained services from the centers, it is very important to verify the clients to control false reporting, which do exist.

One third of the DPWOs did not hold any training session for In-charges of the FWCs. Fifty percent held such sessions on monthly basis, and one third on quarterly and ten percent on yearly basis.

Twenty seven percent of the DPWOs never attended any group meetings/health talks organized by the center.

The supply of contraceptives was found regular, however, the medicines are not supplied properly, the shortage was also observed in the FWCs.

Eighty five percent of the DPWOs were satisfied with the performance of the centers under their jurisdiction.

Almost similar trends were observed among the TPWOs.

6.2 Recommendations

6.2.1 Suggestions given by FWCs

The location of the center and the facilities available at the service delivery points play an important role in the performance. The centers which are located in single room needs to be shifted to other buildings and installation of sign boards/ direction boards be properly installed at the visible places to facilitate the clients. The centers which do not have toilet facilities may immediately be shifted to some other buildings.

The female staff of the rural FWCs may be posted either in the same village or to the near village to ensure their presence in the centers and to solve their transportation problems.

The supply of medicines to the centers may be ensured, as it is affecting the performance of the centers.

The FWCs may be instructed to maintain client record cards especially for the pills and injctable clients to reduce the number dropout of clients. The follow-up visits by the FWC staff are important to check dropout of FP methods, it is an area which need to be strengthened.

The base line data is important for motivational activities and identifying potential clients of FP. The FWCs those maintaining such record may be directed to this.

One of the important activities of the FWC is to assist in arranging CS camps and refer clients to the RHS centers, this area found weak, more emphasis may be given on it.

The equipments and furniture required at the center may be provided to all the centers, the insertion tables, weighing machines, BP apparatus and other important equipments should be made available at all the centers.

The monitoring and supervision needs to be strengthened, the DPWOs and TPWOs may visit at least one third of the centers under their jurisdiction on monthly basis so that all centers are visited in a quarter. During visits the verification of few FP clients who recently avail services may be ensured to avoid false reporting.

The DPWOs/TPWOs must attend the talk shows/group meetings organized by the centers at least one of each centers in a month to encourage the staff and for improvement in the contents of the meetings. It will also motivate the community people to attend such shows.

For capacity building of the FWCs staff training sessions may regularly be arranged, refresher training may be given to those who do not have such trainings in the past.

6.2.2 Suggestions given by the clients

It is always good to look into the past experience for lesson learned and get new ideas on how to manage challenges. The suggestions help to improve managerial as well as behavioral part of any organization to achieve the targets. Respondents have given suggestions related to the facilities, provision of medicines and contraceptives follow-up visits and timings of the centre etc. Majority (36 percent) emphasized on regular provision of contraceptives should be ensured in future. Fourteen percent stressed on free medicines and methods for all. Eleven percent emphasized on better facilities of family planning and to increase the FWC staff strength. Less than ten percent recommended the other medical facilities like availability of BP apparatus, provision of building for FWCs with the facility of waiting room, water and cleanliness. Attention should be paid on field visits of FWAs for motivation and centers should be remained open 24 hours.

6.2.3 Suggestions given by the Community persons

Respondents stressed on the need for improvement in the services provided by FWCs. Nearly one-third (31%) proposed that free and quality medicines should be available on regular basis at

every FWC. One-fifth (20 percent) float the idea to increase the staff strength at each outlet. Fifteen percent of community people emphasized on frequent field visits for motivation and follow-up. Slightly less than fourteen percent stressed on the provision of facilities like delivery care and some initial investigation like sugar test, etc. about ten percent suggested for the posting of qualified MBBS doctor at the center, awareness about FP through media campaign, regular monitoring of centres by management and liaison of FWC with other services outlets to cater health problems of people visiting the centre.

Respondents from all the provinces stressed on the regular availability of free of cost high quality medicines except of Sindh. Need for more frequent field visits were felt mostly in KPK (24 percent). In Punjab, Sindh, and KPK less than ten percent respondents were more concerned about regular monitoring of FWCs. Slight variations are found on the suggestion of doctor's posting at FWCs among the provinces. Provision of delivery care and sugar test was least recommended in KPK, to create awareness about FP through media campaign was suggested mostly in Balochistan and KPK.

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Annexures



Additional Tables



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Table 2.1: Number of different Activities Arranged by the FWC Staff during July 2009-June 2010 by Region

Number of activities (July 2009-June 2010)	Punjab	Sindh	KPK	Balochistan	GB/AJK/ ICT*	Total		
						%	N	
Health Talks	Actual							
	0-10	45.5	60.0	50.0	0.0	50.0	50.0	10
	11-20	45.5	40.0	50.0	0.0	50.0	45.0	9
	21+	9.1	0.0	0.0	0.0	0.0	5.0	1
	Sub-2	11	5	2	0	2	100.0	20
	Estimated							
	0-10	42.4	33.3	55.6	57.1	50.0	44.4	40
	11-20	37.9	33.3	22.2	14.3	0.0	33.3	30
	21+	19.7	33.3	22.2	28.6	50.0	22.2	21
	Sub-2	66	6	9	7	2	100.0	91
	SUM							
	0-10	43.6	45.5	54.5	57.1	50.0	45.9	51
	11-20	38.5	36.4	27.3	14.3	25.0	35.1	39
21+	17.9	18.2	18.2	28.6	25.0	18.9	21	
Total (N)	78	11	11	7	4	100.0	111	
Sukhi Ghar Mehfiles	Actual							
	<=5	41.7	58.3	71.4	0.0	100.0	56.3	18
	5-10	16.7	8.3	0.0	0.0	0.0	9.4	3
	11+	41.7	33.3	28.6	0.0	0.0	34.4	11
	Sub-1	12	12	7	0	1	100.0	32
	Estimated							
	<=5	35.3	40.0	57.1	50.0	0.0	41.9	13
	5-10	35.3	20.0	42.9	0.0	0.0	32.3	10
	11+	29.4	40.0	0.0	50.0	0.0	25.8	8
	Sub-2	17	5	7	2		100.0	31
	SUM							
	<=5	37.9	52.9	64.3	50.0	100.0	49.2	31
	5-10	27.6	11.8	21.4	0.0	0.0	20.6	13
11+	34.5	35.3	14.3	50.0	0.0	30.2	19	
Total (N)	29	17	14	2	1	100.0	63	
Mohallah Sangat	Actual							
	<= 10	66.7	80.0	80.0	0.0	100.0	78.9	15
	10+	33.3	20.0	20.0	0.0	0.0	21.1	4
	Sub-1	3	10	5	0	1	100.0	19
	Estimated							
	<= 10	56.5	57.1	66.7	0.0	0.0	55.9	19
	10+	43.5	42.9	33.3	100.0	0.0	44.1	15
	Sub-2	23	7	3	1	0	100.0	34
	SUM							
	<= 10	57.7	70.6	75.0	0.0	100.0	64.2	34
	10+	42.3	29.4	25.0	100.0	0.0	35.8	19
	Total (N)	26	17	8	1	1	100.0	53
	DAI's (Aya) met for promotion of RH & FP services	<= 5	41.7	67.6	60.0	66.7	57.1	51.5
5-10		32.3	26.5	16.0	33.3	28.6	28.7	49
11+		26.0	5.9	24.0	0.0	14.3	19.9	34
Total (N)		96	34	25	9	7	100.0	171
Religious Persons	<=5	61.5	64.7	52.0	66.7	71.4	61.4	105
	5-10	24.0	20.6	20.0	22.2	14.3	22.2	38
	11+	14.6	14.7	28.0	11.1	14.3	16.4	28
	Total (N)	96	34	25	9	7	100.0	171
LHW	<= 5	32.3	44.1	28.0	55.6	57.1	36.3	62
	5-10	32.3	8.8	8.0	11.1	14.3	22.2	38
	11-15	10.4	14.7	24.0	33.3	28.6	15.2	26
	15-25	12.5	14.7	24.0	0.0	0.0	13.5	23
	26+	12.5	17.6	16.0	0.0	0.0	12.9	22
	Total (N)	96	34	25	9	7	100.0	171
Community Influential persons	<= 5	60.4	64.7	56.0	88.9	57.1	62.0	106
	5-10	21.9	26.5	4.0	0.0	14.3	18.7	32
	11+	17.7	8.8	40.0	11.1	28.6	19.3	33
	Total (N)	96	34	25	9	7	100.0	171

* GB=3 ICT=2 AJK=2

Table 2.2: Percentage of Topics discussed in the Health Talks Arranged by FWCs by Region

S#	Topics discussed in Health Talks	Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total	
							%	N
1	Immunization	2.0	5.9	0.0	0.0	0.0	2.3	4
2	Hygiene/Cleanliness	22.4	11.8	16.0	30.0	14.3	19.5	34
3	Nutrition	27.6	8.8	8.0	40.0	42.9	22.4	39
4	Birth Spacing	7.1	5.9	8.0	10.0	28.6	8.0	14
5	Safe Drinking Water	1.0	0.0	0.0	0.0	0.0	0.6	1
6	Regular Checkup	2.0	0.0	0.0	0.0	0.0	1.1	2
7	Female related issues	1.0	0.0	0.0	10.0	28.6	2.3	4
8	FP Methods	14.3	5.9	4.0	10.0	0.0	10.3	18
9	Gynae	3.1	0.0	0.0	0.0	0.0	1.7	3
10	FP Education	14.3	5.9	24.0	10.0	0.	13.2	23
11	Community Activities	2.0	0.0	0.0	0.0	0.0	1.1	2
12	Antenatal Care	4.1	0.0	0.0	0.0	0.0	2.3	4
13	Parenting Skills	1.0	2.9	8.0	10.0	0.0	2.9	5
14	Breast Cancer	1.0	0.0	0.0	0.0	0.0	0.6	1
15	Breast Feeding	7.1	5.9	12.0	10.0	0.0	7.5	13
16	General Ailments	3.1	0.0	4.0	0.0	0.0	2.3	4
17	Women Diseases	1.0	2.9	0.0	0.0	0.0	1.1	2
18	Early marriages	1.0	0.0	0.0	0.0	0.0	0.6	1
19	Anemia	0.0	0.0	4.0	0.0	0.0	0.6	1
20	Antenatal Care	1.0	0.0	0.0	0.0	0.0	0.6	1
21	Side effects of F.P Methods	1.0	0.0	0.0	0.0	0.0	0.6	1
22	General Health	1.0	0.0	4.0	0.0	0.0	1.1	2
Total (N)		98	34	25	10	7		174

*GB=3 ICT=2 AJK=2

Table 2.3: Satellite Clinics Arranged by FWC in a Month by Region

Satellite clinics Activities (July 2009-June 2010)	Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	AJK	Total
						%	N
None	64.3	67.6	12.0	10.0	14.3	52.3	91
1-3	7.1	29.4	64.0	10.0	42.9	21.3	37
3-6	25.5	0.0	24.0	70.0	42.9	23.6	41
DK	3.1	2.9	0.0	10.0	0.0	2.9	5
Total (N)	98	34	25	10	7	100.0	174

*GB=3 ICT=2 AJK=2

Table 2.4: Observations Recorded by Senior Officers during Inspections Visits for the Year July 2009 to June 2010 by Region

Designation/ Department/ Ministry	Recorded Observations	Punjab	Sindh	KPK	Balochistan	GB/AJK/ICT*	Total		
							%	N	
TPWO	1	Advised about record improvement.	7.1	5.9	12.0	0.0	0.0	6.9	12
	2	Increase field visits.	5.1	0.0	0.0	0.0	0.0	2.9	5
	3	Observe cleanliness in the centre.	11.2	0.0	4.0	0.0	0.0	6.9	12
	4	Attendance of staff	14.3	5.9	28.0	0.0	0.0	13.2	23
	5	No Remarks	42.9	8.8	24.0	0.0	0.0	29.3	51
	6	Improve performance Improve performance	6.1	2.9	4.0	0.0	0.0	4.6	8
	7	Repair and maintain equipments	3.1	0.0	0.0	0.0	0.0	1.7	3
DPWO	1	No Remarks	49.0	17.6	44.0	20.0	42.9	40.2	70
	2	Record Keeping	6.1	2.9	8.0	10.0	0.0	5.7	10
	3	Improve Performance of FWC staff	10.2	8.8	12.0	0.0	0.0	9.2	16
	4	Attendance Register	6.1	11.8	16.0	10.0	14.3	9.2	16
	5	Increase CS Clientage	4.1	8.8		0.0	0.0	4.0	7
	6	Maintain centre/equipments	1.0	–	4.0	0.0	0.0	1.1	2
	7	Cleanliness	4.1	11.8	8.0	0.0	0.0	5.7	10
	8	Help the flood affectees	1.0	2.9	0.0	0.0	0.0	1.1	2
PWD	1	Increase clientage	3.1	5.9	0.0	0.0	0.0	2.9	5
	2	Maintain proper record	1.0	0.0	0.0	0.0	0.0	.6	1
	3	Cleanliness	–	5.9	0.0	0.0	0.0	1.1	2
	4	No Remarks	15.3	2.9	20.0	0.0	0.0	12.1	21
	5	MCH Care	0.0	2.9		0.0	0.0	.6	1
	6	Performance	0.0	8.8	4.0	0.0	0.0	2.3	4
MoPW	1	Change building of the centre/shift from present place.	1.0	0.0	0.0	0.0	0.0	.6	1
	2	Increase CS Cases	1.0	0.0	4.0	0.0	0.0	1.1	2
	3	No remarks	1.0	0.0	12.0	0.0	14.3	2.9	5
	4	Very poor performance	0.0	2.9	0.0	0.0	0.0	.6	1
Total (N)			98	34	25	10	7		174

* GB=3 ICT=2 AJK=2

Table 3.1: Percentage of Registered and Exit Clients according to their Views about the Information/Services Provided by FWC Staff by Region

Information /Services Provided by Staff			Punjab	Sindh	KPK	Balochistan	GB/CT/A JK	Total	Number		
Registered Client	Information provided by FWC staff*	Useful	88.7	98.4	76.3	100.0	100.0	90.2	657		
		Not Useful	0.7	0.0	1.0	0.0	0.0	0.5	4		
		DK	10.5	1.6	22.7	0.0	0.0	9.2	67		
		Total	408	123	97	46	57	100.0	728		
	Information useful	Free Advice/Medicine/Contraceptives	29.6	43.8	2.7	19.6	31.5	28.6	188		
		FP Knowledge/birth spacing & control	60.5	53.7	63.5	34.8	57.4	57.5	378		
		MCH Care	33.1	28.1	66.2	67.4	50.0	39.7	261		
		Economic/Social/Financial Benefit	22.7	19.0	1.4	0.0	20.4	17.8	117		
		Total	362	121	74	46	54		657		
	Quality of FWC services	No short comings	45.2	58.1	18.3	30.4	27.8	41.2	324		
		Behavior of staff good/satisfactory	13.4	8.1	9.6	71.7	1.9	14.6	115		
		Poor services and no community meetings	8.9	5.6	23.5	2.2	11.1	10.3	81		
		Staff absent/ more requires/center often closed	2.9	9.7	4.3	2.2	0.0	3.9	31		
		Shortage of contraceptives/medicines/charges for contraceptives	8.1	6.5	8.7	4.3	11.1	7.9	62		
		Center not accessible/too far	1.3	0.8	0.9	0.0	0.0	1.0	8		
		Medical facilities like BP apparatus should be provided	12.5	8.9	1.7	8.7	5.6	9.7	76		
		Total	447	124	115	46	54		786		
	Suggestions to improve FWCs	Free medicines/contraceptives	15.9	8.1	8.7	4.3	27.8	13.7	108		
		Regular provision of medicines should be ensured	29.8	42.7	30.4	47.8	38.9	33.6	264		
		FP facilities should be provided	10.3	16.9	6.1	15.2	27.8	12.2	96		
		More staff should be appointed including doctors/TBAs etc	9.2	15.3	2.6	10.9	37.0	11.2	88		
		Frequent visit of FWA/ improve counseling	4.7	5.6	13.0	13.0	3.7	6.5	51		
		Centers should open for 24 hours	6.7	10.5	0.0	4.3	5.6	6.1	48		
		Building/signboards/waiting room/water/cleanliness	5.1	12.1	5.2	4.3	11.1	6.6	52		
		Total	447	124	115	46	54		786		
		Exit Clients	Information provided by FWC staff*	Useful	92.6	95.9	73.4	100.0	100.0	91.5	541
				Not Useful	0.3	0.8	1.3	0.0	0.0	0.5	3
DK	7.1			3.3	25.3	0.0	0.0	8.0	47		
Total	324			121	79	33	34	100.0	591		
Information useful	Free advice/medicine/ contraceptives		30.3	30.2	3.4	12.1	32.4	26.4	143		
	FP knowledge birth spacing & control		62.7	63.8	55.2	51.5	55.9	61.0	330		
	MCH Care		32.7	39.7	62.1	66.7	47.1	40.3	218		
	Economic/social/financial benefit		27.3	20.7	1.7	3.0	20.6	21.3	115		
	Total		300	116	58	33	34		541		
Quality of FWC services	No shortcomings at all		53.7	51.2	22.8	15.2	38.2	46.0	272		
	Behavior of staff was good/satisfactory		8.6	5.8	7.6	66.7	0.0	10.7	63		
	Poor services and no community meetings		7.4	6.6	15.2	6.1	8.8	8.3	49		
	Staff absent/ more requires/center often closed		6.2	9.9	7.6	0.0	0.0	6.4	38		
	Shortage of contraceptives/medicines/charges for contraceptives		8.6	3.3	2.5	15.2	14.7	7.4	44		
	Center is not accessible/too far		1.2	0.0	0.0	0.0	0.0	0.7	4		
	Medical facilities like BP apparatus should be provided		14.5	8.3	1.3	6.1	0.0	10.2	60		
	Total		324	121	79	33	34		591		
Suggestions to improve FWCs	Free medicines/contraceptives		17.9	6.6	12.7	12.1	8.8	14.0	83		
	regular provision of medicines should be ensured		37.7	33.1	32.9	69.7	64.7	39.4	233		
	FP facilities should be provided		9.3	12.4	3.8	42.4	14.7	11.3	67		
	More staff should be appointed including doctors/ TBAs etc		9.6	18.2	0.0	33.3	14.7	11.7	69		
	Frequent visit of FWA/ improve counseling		6.2	4.1	10.1	9.1	0.0	6.1	36		
	Centers should open for 24 hours		3.4	1.7	0.0	0.0	14.7	3.0	18		
	Building/signboards/waiting room/water/cleanliness		8.0	9.9	2.5	3.0	2.9	7.1	42		
	Total		324	121	79	33	34		591		

* Figures are reported in percent distribution

Table 4.1: Percent Distribution of Community Persons by their Knowledge and Visit to FWC by Sex and Region

Male								
Knowledge about FWC		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
Knowledge about FWC	Yes	84.4	59.1	72.0	90.5	100	78.9	276
	No	15.6	40.9	28.0	9.5	0	21.1	74
Total		199	66	50	21	14	100.0	350
FWC staff ever visited community	Yes	66.1	59.0	50.0	68.4	100	64.9	179
	No	15.5	20.5	8.3	10.5	0	14.1	39
	DK	18.5	20.5	41.7	21.1	0	21.0	58
Ever visited FWC	Yes	60.7	56.4	52.8	31.6	100	59.1	163
	No	39.3	43.6	47.2	68.4	0	40.9	113
Total		168	39	36	19	14	100.0	276
Accompanied any client to FWC	Yes	54.4	59.1	63.2	100.0	64.3	58.5	96
	No	45.6	40.9	36.8	0.0	35.7	41.5	68
Total		103	22	19	6	14	100.0	168
Female								
Knowledge about FWC	Yes	80.3	96.1	73.3	85.3	95.2	83.3	435
	No	19.7	3.9	26.7	14.7	0.8	16.7	87
Total		289	103	75	34	21	100.0	522
FWC staff ever visited community	Yes	60.3	83.8	69.1	58.6	75	67.4	293
	No	37.1	12.1	27.3	41.4	20	29.7	129
	DK	2.6	4.0	3.6	0.0	5	3.0	13
Ever visited FWC	Yes	82.3	84.8	94.5	72.4	85	83.9	365
	No	17.7	15.2	5.5	27.6	15	16.1	70
Total		232	99	55	29	20	100.0	435
Accompanied any client to FWC	Yes	59.2	67.9	65.4	38.1	76.5	61.6	225
	No	40.8	32.1	34.6	61.9	23.5	38.4	140
Total		191	84	52	21	17	100.0	365
Both								
Knowledge about FWC	Yes	82.0	81.7	72.8	87.3	97.1	81.5	711
	No	18.0	18.3	27.2	12.7	2.9	18.5	161
Total		488	169	125	55	35	100.0	872
FWC staff ever visited community	Yes	62.8	76.8	61.5	62.5	82.4	66.4	472
	No	28.0	14.5	19.8	29.2	11.8	23.6	168
	DK	9.3	8.7	18.7	8.3	2.9	10.0	71
Ever visited FWC	Yes	73.3	76.8	78.0	56.3	91.2	74.3	528
	No	26.8	23.2	22.0	43.8	8.8	25.7	183
Total		400	138	91	48	34	100.0	711
Accompanied any client to FWC	Yes	57.5	66.0	64.8	51.9	71	60.7	321
	No	42.5	34.0	35.2	48.1	29	39.3	208
total		294	106	71	27	31	100.0	529

Table 4.2: Percent Distribution of Community Persons according to their Views about the Facilities Provided by FWC by Sex and Region

Male								
Knowledge about FWC		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
Privacy maintained by FWC In-charge	Yes	86.4	90.9	100.0	100.0	85.7	89.0	146
	No	13.6	9.1	0.0	0.0	14.3	11.0	18
Staff present at the time of visit	Yes always	82.5	95.5	100.0	100.0	92.9	87.8	144
	Some time	12.6	0.0	0.0	0.0	7.1	8.5	14
	No/dk	4.9	4.5	0.0	0.0	0	3.7	6
Staff provide information properly	Yes	92.2	86.4	94.7	100.0	100	92.7	152
	No/DK	7.8	13.6	5.3	0.0	0	7.3	12
Cleanliness of centre	Yes	94.2	95.5	94.7	100.0	100	95.1	156
	No	5.8	4.5	5.3	0.0	0	4.9	8
Total		103	22	19	6	14	100.0	164
Female								
Privacy maintained by FWC In-charge	Yes	97.9	97.6	98.1	100.0	52.9	97.8	357
	No	2.1	2.4	1.9	0.0	5.9	2.2	8
Staff present at the time of visit	Yes always	84.3	89.3	75.0	76.2	100	84.4	308
	Some time	9.9	10.7	25.0	23.8	0	12.6	46
	No/DK	5.8	0.0	0.0	0.0	0	3.0	11
Staff provide information properly	Yes	93.7	97.6	92.3	90.5	100	94.5	345
	No/DK	6.3	2.4	7.7	9.5	0	5.5	20
Cleanliness of centre	Yes	95.3	97.6	92.3	90.5	100	95.1	347
	No/DK	4.7	2.4	7.7	9.5	0	4.9	18
Total		191	84	52	21	17	100.0	365

Table 4.3: Percentage Distribution of Community Persons according to their Views about the Community Meetings Arranged by FWC by Sex and Region

Male								
Knowledge about FWC		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
FWC ever arrange meetings	Yes	47.6	46.2	16.7	21.1	57.1	42.0	116
	No	16.7	33.3	11.1	47.4	21.4	20.7	57
	DK	35.7	20.5	72.2	31.6	21.4	37.3	103
Total		168	39	36	19	14	100.0	276
Ever attended meetings	Yes	38.8	61.1	33.3	100.0	50	44.8	52
	No	61.3	38.9	66.7	0.0	50	55.2	64
Total		80	18	6	4	8	100.0	116
Number of meetings attended	Less Than 3	87.1	72.7	50.0	75.0	25	76.9	40
	3 and More	12.9	27.3	50.0	25.0	100	23.1	12
Discussion during meetings*	FP Method	100.0	81.8	50.0	75.0	75	90.4	47
	Importance of small family	83.9	45.5	0.0	50.0	50	67.3	35
	Reproductive health issues	45.2	9.1	0.0	25.0	50	34.6	18
	General health	58.1	45.5	50.0	75.0	50	55.8	29
	Other	6.5	36.4	0.0	0.0	0	11.5	6
Total		31	11	2	4	4		52
Female								
FWC ever arrange meetings	Yes	41.4	46.5	47.3	27.6	50	43.2	188
	No	36.2	29.3	45.5	62.1	45	37.5	163
	DK	22.4	24.2	7.3	10.3	5	19.3	84
Total		232	99	55	29	20	100.0	435
Ever attended meetings	Yes	68.8	73.9	76.9	75.0	91.7	72.3	136
	No	31.3	26.1	23.1	25.0	8.3	27.7	52
Total		96	46	26	8	12	100.0	188
Number of meetings attended	Less Than 3	77.3	73.5	80.0	33.3	50	72.8	99
	3 and More	22.7	26.5	20.0	66.7	50	27.2	37
Discussion during meetings*	FP Method	89.4	88.2	70.0	100.0	90	86.8	118
	Importance of small family	65.2	82.4	70.0	50.0	90	71.3	97
	Reproductive health issues	69.7	41.2	85.0	33.3	60	62.5	85
	General health	57.6	73.5	70.0	50.0	40	61.8	84
	Other	0.0	5.9	5.0	0.0	10	2.9	4
Total		66	34	20	6	10		136

* Figures are reported in percentage

Table 4.4: Percentage Distribution of Community Persons according to Suggestions for Improving FWCs by Sex and Region

Male								
Services Provided by Staff		Punjab	Sindh	KPK	Balochistan	GB/ICT/AJK	Total	Number
Suggestions to improve FWCs	More and Frequent Field Visits	15.6	9.1	18.0	9.5	0.0	13.7	48
	Proper and regular monitoring of FWCs must be ensured	9.0	9.1	10.0	0.0	0.0	8.3	29
	Services of Doctors should be available	5.5	7.6	12.0	4.8	28.6	7.7	27
	Provide all standard medicines all time and free of charges	19.6	13.6	22.0	47.6	14.3	20.3	71
	Increase Strength/Center/working hours	9.5	12.1	6.0	4.8	14.3	9.4	33
	Provide facilities like delivery/sugar test etc.	13.1	7.6	18.0	66.7	57.1	17.7	62
	Awareness Regarding Media Campaign of FP	4.5	6.1	8.0	14.3	7.1	6.0	21
	OTHER/Liaison of FWC Staff etc	3.0	0.0	6.0	4.8	0.0	2.9	10
	TOTAL	199	66	50	21	14	350	
Female								
Suggestions to improve FWCs	More and Frequent Field Visits	12.1	4.9	17.3	11.8	14.3	11.5	60
	Proper and regular monitoring of FWCs must be ensured	3.5	0.0	4.0	0.0	0.0	2.5	13
	Services of Doctors should be available	5.5	8.7	5.3	14.7	23.8	7.5	39
	Provide all standard medicines all time and free of charges	10.7	20.4	10.7	20.6	4.8	13.0	68
	Increase Strength/Center/working hours	15.2	8.7	1.3	11.8	33.3	12.5	65
	Provide facilities like delivery/sugar test etc	29.4	19.4	29.3	55.9	52.4	30.1	157
	Awareness Regarding Media Campaign of FP	4.2	1.9	6.7	17.6	14.3	5.4	28
	OTHERS Liaison of FWC Staff etc	1.7	1.0	6.7	0.0	4.8	2.3	12
Total	289	103	75	34	21	522		

Table 4.5: (FWCs Furniture)

Province/region	Furniture Standard list-1	Available	Not Available	If not available then Demand given	
Punjab					
1.	Examination Couch/Insertion Table-1	98.0	2.0	100.0	0.0
2.	Steps for Table (1)	80.6	19.4	68.4	31.6
3.	Office Table (1)	100.0	0.0	NA	NA
4.	Chairs (2)	100.0	0.0	NA	NA
5.	Benches (1)	89.8	10.2	90.0	10.0
6.	Screen (1)	88.8	11.2	90.9	9.1
7.	Revolving Stools	88.8	11.2	54.5	45.5
8.	Cupboards	94.9	5.1	100.0	0.0
9.	Ceiling/Pedestal Fan	96.9	3.1	66.7	33.3
10.	Heater/Cylinder (for weather care)	100.0	0.0	43.5	56.5
Sindh					
1.	Examination Couch/Insertion Table (1)	97.1	2.9	0.0	100.0
2.	Steps for Table (1)	79.4	20.6	42.9	57.1
3.	Office Table (1)	100.0	0.0	NA	NA
4.	Chairs (2)	97.1	2.9	NA	NA
5.	Benches (1)	89.8	10.2	50.0	50.0
6.	Screen (1)	94.1	5.9	16.7	83.3
7.	Revolving Stools	76.5	23.5	62.5	37.5
8.	Cupboards	88.2	11.8	25.0	75.0
9.	Ceiling/Pedestal Fan	44.1	55.9	42.1	57.9
10.	Heater/Cylinder (for weather care)	40.0	60.0	26.9	73.1
KPK					
1.	Examination Couch/Insertion Table-1	96.0	4.0	100.0	0.0
2.	Steps for Table (1)	88.0	12.0	0.0	100.0
3.	Office Table (1)	100.0	0.0	NA	NA
4.	Chairs (2)	100.0	0.0	NA	NA
5.	Benches (1)	100.0	0.0	50.0	50.0
6.	Screen (1)	92.0	8.0	25.0	75.0
7.	Revolving Stools	92.0	8.0	50.0	50.0
8.	Cupboards	96.0	4.0	0.0	0.0
9.	Ceiling/Pedestal Fan	88.0	12.0	50.0	50.0
10.	Heater/Cylinder (for weather care)	60.0	40.0	10.0	90.0
Balochistan					
1.	Examination Couch/Insertion Table-1	100.0	0.0	0.0	0.0
2.	Steps for Table (1)	100.0	0.0	0.0	0.0
3.	Office Table (1)	100.0	0.0	NA	NA
4.	Chairs (2)	100.0	0.0	NA	NA
5.	Benches (1)	100.0	0.0	0.0	0.0
6.	Screen (1)	100.0	0.0	0.0	0.0
7.	Revolving Stools	100.0	0.0	NA	NA
8.	Cupboards	100.0	0.0	0.0	0.0
9.	Ceiling/Pedestal Fan	70.0	30.0	NA	100.0
10.	Heater/Cylinder (for weather care)	40.0	60.0	33.3	66.7
GB/AJK/ICT*					
1.	Examination Couch/Insertion Table-1	100.0	0.0	0.0	0.0
2.	Steps for Table (1)	85.7	14.3	100.0	0.0
3.	Office Table (1)	100.0	0.0	NA	NA
4.	Chairs (2)	100.0	0.0	NA	NA
5.	Benches (1)	100.0	0.0	0.0	0.0
6.	Screen (1)	100.0	0.0	0.0	0.0
7.	Revolving Stools	100.0	0.0	0.0	0.0
8.	Cupboards	100.0	0.0	0.0	0.0
9.	Ceiling/Pedestal Fan	100.0	0.0	0.0	0.0
10.	Heater/Cylinder (for weather care)	100.0	0.0	0.0	0.0

* GB=3 ICT=2 AJK=2

Table 4.6: (FWCs Medicines)

Province/region	Medicines Standard list-1	Available	Not Available	If not available then Demand given	
				Yes (%)	No (%)
Punjab					
1.	Tablets Paracetamol	0.0	100.0	79.6	20.4
2.	Syrup Paracetamol	0.0	100.0	79.6	20.4
3.	Tablets Soluble Asprin	0.0	100.0	78.6	21.4
4.	Tablets Buscopan	0.0	100.0	78.6	21.4
5.	Tablets Intestopan	1.0	99.0	76.3	23.7
6.	Tablets Chloroquin	3.1	96.9	80.0	20.0
7.	Tablets Piriton	2.0	98.0	79.2	20.8
8.	Tablets Avomine	0.0	100.0	77.6	22.4
9.	Syrup Chloroquin	11.2	88.8	80.5	19.5
10.	Syrup Maxalon	1.0	99.0	77.3	22.7
11.	Tablets Ketrax	1.0	99.0	78.4	21.6
12.	Chlorayphecil Eye Drops 10-20	0.0	100.0	75.5	24.5
13.	Polyfax Eye Ointment	1.0	99.0	75.3	24.7
14.	Otosporin Ear Drops	0.0	100.0	74.5	25.5
15.	Tablets Ferrous Gluconate	5.1	94.9	78.5	21.5
16.	Tablets B Complex	0.0	100.0	78.6	21.4
17.	Syrup Vitamin B Complex	1.0	99.0	76.3	23.7
18.	ORS Packets	19.4	80.6	78.5	21.5
19.	Folic Acid Tablet	4.1	95.9	78.7	21.3
20.	Tincture Iodine	13.3	86.7	74.1	25.9
21.	Methylated Spirit	15.3	84.7	74.7	25.3
22.	Bandages	18.4	81.6	75.0	25.0
23.	Sticking Plaster	6.1	93.9	75.0	25.0
24.	Gloves	64.3	35.7	69.2	30.8
25.	Cotton	54.1	45.9	69.4	30.6
26.	Other	82.7	82.7	8.4	91.6
Sindh					
1.	Tablets Paracetamol	88.2	11.8	75.0	25.0
2.	Syrup Paracetamol	61.8	38.2	46.2	53.8
3.	Tablets Soluble Asprin	14.7	85.3	27.6	72.4
4.	Tablets Buscopan	64.7	64.7	31.8	68.2
5.	Tablets Intestopan	32.4	67.6	34.8	65.2
6.	Tablets Chloroquin	88.2	11.8	50.0	50.0
7.	Tablets Piriton	17.6	82.4	39.3	60.7
8.	Tablets Avomine	88.2	11.8	25.0	75.0
9.	Syrup Chloroquin	70.6	29.4	50.0	50.0
10.	Syrup Maxalon	5.9	94.1	37.5	62.5
11.	Tablets Ketrax	88.2	11.8	50.0	50.0
12.	Chlorayphecil Eye Drops 10-20	0.0	100.0	29.4	70.6
13.	Polyfax Eye Ointment	23.5	76.5	38.5	61.5
14.	Otosporin Ear Drops	0.0	100.0	29.4	70.6
15.	Tablets Ferrous Gluconate	29.4	70.6	20.8	79.2
16.	Tablets B Complex	82.4	82.4	42.9	57.1
17.	Syrup Vitamin B Complex	11.8	88.2	40.0	60.0
18.	ORS Packets	79.4	20.6	71.4	28.6
19.	Folic Acid Tablet	91.2	8.8	66.7	33.3
20.	Tincture Iodine	91.2	8.8	100.0	0.0
21.	Methylated Spirit	94.1	5.9	50.0	50.0

Province/region	Medicines Standard list-1	Available	Not Available	If not available then Demand given	
22.	Bandages	32.4	67.6	69.6	30.4
23.	Sticking Plaster	20.6	79.4	40.7	59.3
24.	Gloves	58.8	41.2	42.9	57.1
25.	Cotton	47.1	52.9	55.6	44.4
26.	Other	0.0	100.0	11.8	88.2
KPK					
1.	Tablets Paracetamol	32.0	68.0	64.7	35.3
2.	Syrup Paracetamol	32.0	68.0	70.6	29.4
3.	Tablets Soluble Asprin	4.0	96.0	45.8	54.2
4.	Tablets Buscopan	8.0	92.0	47.8	52.2
5.	Tablets Intestopan	12.0	88.0	40.9	59.1
6.	Tablets Chloroquin	44.0	56.0	50.0	50.0
7.	Tablets Piriton	44.0	56.0	42.9	57.1
8.	Tablets Avomine	12.0	88.0	36.4	63.6
9.	Syrup Chloroquin	16.0	84.0	42.9	57.1
10.	Syrup Maxalon	8.0	92.0	47.8	52.2
11.	Tablets Ketrax	4.0	96.0	45.8	54.2
12.	Chlorayphecal Eye Drops 10-20	32.0	68.0	35.3	64.7
13.	Polyfax Eye Ointment	40.0	60.0	46.7	53.3
14.	Otosporin Ear Drops	16.0	84.0	38.1	61.9
15.	Tablets Ferrous Gluconate	12.0	88.0	40.9	59.1
16.	Tablets B Complex	80.0	80.0	45.0	55.0
17.	Syrup Vitamin B Complex	16.0	84.0	42.9	57.1
18.	ORS Packets	68.0	32.0	62.5	37.5
19.	Folic Acid Tablet	24.0	76.0	42.1	57.9
20.	Tincture Iodine	4.0	96.0	45.8	54.2
21.	Methylated Spirit	56.0	44.0	72.7	27.3
22.	Bandages	28.0	72.0	61.1	38.9
23.	Sticking Plaster	8.0	92.0	52.2	47.8
24.	Gloves	60.0	40.0	60.0	40.0
25.	Cotton	60.0	40.0	60.0	40.0
26.	Other	48.0	52.0	15.4	84.6
Balochistan					
1.	Tablets Paracetamol	60.0	40.0	50.0	50.0
2.	Syrup Paracetamol	50.0	50.0	40.0	60.0
3.	Tablets Soluble Asprin	10.0	90.0	33.3	66.7
4.	Tablets Buscopan	60.0	40.0	50.0	50.0
5.	Tablets Intestopan	0.0	100.0	40.0	60.0
6.	Tablets Chloroquin	0.0	100.0	30.0	70.0
7.	Tablets Piriton	10.0	90.0	22.2	77.8
8.	Tablets Avomine	70.0	70.0	28.6	71.4
9.	Syrup Chloroquin	20.0	80.0	37.5	62.5
10.	Syrup Maxalon	30.0	70.0	28.6	71.4
11.	Tablets Ketrax	0.0	100.0	30.0	70.0
12.	Chlorayphecal Eye Drops 10-20	70.0	30.0	33.3	66.7
13.	Polyfax Eye Ointment	30.0	70.0	28.6	71.4
14.	Otosporin Ear Drops	50.0	50.0	40.0	60.0
15.	Tablets Ferrous Gluconate	10.0	90.0	22.2	77.8
16.	Tablets B Complex	50.0	50.0	40.0	60.0
17.	Syrup Vitamin B Complex	50.0	50.0	40.0	60.0

Province/region	Medicines Standard list-1	Available	Not Available	If not available then Demand given	
18.	ORS Packets	60.0	40.0	50.0	50.0
19.	Folic Acid Tablet	60.0	40.0	50.0	50.0
20.	Tincture Iodine	70.0	30.0	33.3	66.7
21.	Methylated Spirit	60.0	40.0	50.0	50.0
22.	Bandages	70.0	30.0	33.3	66.7
23.	Sticking Plaster	10.0	90.0	33.3	66.7
24.	Gloves	80.0	20.0	0.0	100.0
25.	Cotton	80.0	20.0	0.0	100.0
26.	Other	0.0	100.0	10.0	90.0
GB/AJK/ ICT*					
1.	Tablets Paracetamol	71.4	28.6	100.0	0.0
2.	Syrup Paracetamol	71.4	28.6	100.0	0.0
3.	Tablets Soluble Asprin	14.3	85.7	66.7	33.3
4.	Tablets Buscopan	28.6	71.4	80.0	20.0
5.	Tablets Intestopan	14.3	85.7	100.0	0.0
6.	Tablets Chloroquin	42.9	57.1	100.0	0.0
7.	Tablets Piriton	57.1	42.9	100.0	0.0
8.	Tablets Avomine	42.9	57.1	75.0	25.0
9.	Syrup Chloroquin	71.4	71.4	100.0	0.0
10.	Syrup Maxalon	42.9	57.1	75.0	25.0
11.	Tablets Ketrax	57.1	42.9	100.0	0.0
12.	Chlorayphecal Eye Drops 10-20	28.6	71.4	80.0	20.0
13.	Polyfax Eye Ointment	14.3	85.7	83.3	16.7
14.	Otosporin Ear Drops	42.9	57.1	75.0	25.0
15.	Tablets Ferrous Gluconate	57.1	42.9	66.7	33.3
16.	Tablets B Complex	57.1	42.9	100.0	0.0
17.	Syrup Vitamin B Complex	71.4	28.6	100.0	0.0
18.	ORS Packets	71.4	28.6	100.0	0.0
19.	Folic Acid Tablet	71.4	28.6	100.0	0.0
20.	Tincture Iodine	57.1	42.9	100.0	0.0
21.	Methylated Spirit	57.1	42.9	100.0	0.0
22.	Bandages	42.9	57.1	100.0	0.0
23.	Sticking Plaster	0.0	100.0	85.7	14.3
24.	Gloves	85.7	14.3	100.0	0.0
25.	Cotton	71.4	28.6	100.0	0.0
26.	Other	57.1	42.9	33.3	66.7

* GB=3 ICT=2 AJK=2

Table 4.7: (FWCs Equipment/utensils)

Province/region	Equipments/utensils Standard list-1	Available	Not Available	If not available then Demand given	
Punjab					
1.	Dressing Trolley (1)	94.9	5.1	100.0	0.0
2.	Kidney Trays (Set of 3) S.S	93.9	6.1	83.3	16.7
3.	Bowls (6" diameter) S.S (2)	86.7	13.3	61.5	38.5
4.	Deep Tray with Lid Large Size S.S (1)	92.9	7.1	33.3	66.7
5.	Tray with lid (2x10x6) S.S (1)	85.7	14.3	50.0	50.0
6.	Glass Jar (Medium) (1)	53.1	46.9	52.2	47.8
7.	Syringes 5 cc (1)	43.9	56.1	54.5	45.5
8.	Syringes 2 cc (1)	71.4	28.6	70.4	29.6
9.	Vaginal Speculum, I-valve (Medium-3	92.9	7.1	71.4	28.6
10.	Vaginal Speculum, I-valve (Large) (1)	88.8	11.2	60.0	40.0
11.	Sponge Forceps (3)	91.8	8.2	100.0	0.0
12.	Volcellim, double toothed (3)	86.7	13.3	83.3	16.7
13.	Dressing Forceps, Medium (1)	87.8	12.2	75.0	25.0
14.	Scissors, blunt ended, medium (2)	88.8	11.2	90.9	9.1
15.	Artery Forceps (1)	94.9	5.1	80.0	20.0
16.	Chettel's Forceps (1)	93.9	6.1	66.7	33.3
17.	Tongue Depressor (1)	76.5	23.5	60.9	39.1
18.	B.P Apparatus (1)	89.8	10.2	100.0	0.0
19.	Feotoscope (1)	87.8	12.2	72.7	27.3
20.	Stethoscope (1)	90.8	9.2	75.0	25.0
21.	Mid-arm Circumference Tape (1)	32.7	67.3	59.1	40.9
22.	Weighing Machine Baby (1)	75.5	24.5	66.7	33.3
23.	Weighing Machine Adult (1)	74.5	25.5	70.8	29.2
24.	Dai Kit (1)	56.1	43.9	60.0	40.0
25.	Midwifery (1)	48.0	52.0	59.6	40.4
26.	Sterilizer boiling type	92.9	7.1	54.5	45.5
27.	Gloves-1	92.9	7.1	83.3	16.7
28.	Urine test with 12 tubes (10)	26.5	73.5	57.7	42.3
29.	Talquist Hemoglobin Scale (1)	20.4	79.6	40.0	60.0
30.	Thermometer (2)	77.6	22.4	68.2	31.8
31.	Nail Brush (2)	68.4	31.6	70.0	30.0
32.	Spirit Lamp (1)	54.1	45.9	55.6	44.4
33.	Flit Pump (1)	30.6	69.4	58.2	41.8
34.	Torch, Large (3- Cell) Size (1)	64.3	35.7	55.9	44.1
35.	Wall Clock (1)	89.8	10.2	66.7	33.3
36.	Blanket (1)	44.9	55.1	64.2	35.8
37.	Towels (24``x 12``) (3)	74.5	25.5	75.0	25.0
38.	Draw Sheets, Latha, 2 meters each (6)	74.5	25.5	75.0	25.0

Province/region	Equipments/utensils Standard list-1	Available	Not Available	If not available then Demand given	
39.	Macintosh Steel ½ Meter (1)	41.8	58.2	65.5	34.5
40.	Plastic water cooler, medium (1)	69.4	30.6	51.7	48.3
41.	Water set (Plastic) (1)	46.9	53.1	49.0	51.0
42.	Kerosene Stove (where needed) (1)	21.4	78.6	46.1	53.9
43.	Gas Cylinder (1)	21.4	78.6	47.4	52.6
44.	Degcha with Led, 12-14`diam S.S 10	30.6	69.4	49.3	50.7
45.	Plastic Bucket (medium)-1with Mug-1	58.8	41.2	45.5	54.5
46.	Plastic Lota (1)	94.9	5.1	60.0	40.0
Sindh					
1.	Dressing Trolley (1)	82.4	17.6	0.0	100.0
2.	Kidney Trays (Set of 3) S.S	100.0	0.0	NA	NA
3.	Bowls (6" diameter) S.S (2)	82.4	17.6	66.7	33.3
4.	Deep Tray with Lid Large Size S.S (1)	82.4	17.6	50.0	50.0
5.	Tray with lid (2x10x6) S.S (1)	76.5	23.5	37.5	62.5
6.	Glass Jar (Medium) (1)	50.0	50.0	35.3	64.7
7.	Syringes 5 cc (1)	35.3	64.7	27.3	72.7
8.	Syringes 2 cc (1)	79.4	20.6	16.7	83.3
9.	Vaginal Speculum, I-valve (Medium-3	97.1	2.9	0.0	100.0
10.	Vaginal Speculum, I-valve (Large) (1)	94.1	5.9	50.0	50.0
11.	Sponge Forceps (3)	88.2	11.8	50.0	50.0
12.	Volsellim, double toothed (3)	82.4	17.6	33.3	66.7
13.	Dressing Forceps, Medium (1)	76.5	23.5	50.0	50.0
14.	Scissors, blunt ended, medium (2)	85.3	14.7	60.0	40.0
15.	Artery Forceps (1)	85.3	14.7	40.0	60.0
16.	Chettel's Forceps (1)	91.2	8.8	66.7	33.3
17.	Tongue Depressor (1)	67.6	32.4	27.3	72.7
18.	B.P Apparatus (1)	73.5	26.5	66.7	33.3
19.	Feotoscope (1)	85.3	14.7	20.0	80.0
20.	Stethoscope (1)	79.4	20.6	57.1	42.9
21.	Mid-arm Circumference Tape (1)	17.6	82.4	39.3	60.7
22.	Weighing Machine Baby (1)	23.5	76.5	48.0	52.0
23.	Weighing Machine Adult (1)	61.8	38.2	46.2	53.8
24.	Dai Kit (1)	41.2	58.8	35.0	65.0
25.	Midwifery (1)	29.4	70.6	29.2	70.8
26.	Sterilizer boiling type	61.8	38.2	46.2	53.8
27.	Gloves-1	58.8	41.2	35.7	64.3
28.	Urine test with 12 tubes (10)	29.4	70.6	33.3	66.7
29.	Talquist Hemoglobin Scale (1)	29.4	70.6	75.0	25.0
30.	Thermometer (2)	76.5	23.5	25.0	75.0
31.	Nail Brush (2)	41.2	58.8	50.0	50.0

Province/region	Equipments/utensils Standard list-1	Available	Not Available	If not available then Demand given	
32.	Spirit Lamp (1)	35.3	64.7	36.4	63.6
33.	Flit Pump (1)	35.3	64.7	31.8	68.2
34.	Torch, Large (3- Cell) Size (1)	58.8	41.2	50.0	50.0
35.	Wall Clock (1)	67.6	32.4	81.8	18.2
36.	Blanket (1)	41.2	58.8	30.0	70.0
37.	Towels (24``x 12``) (3)	64.7	35.3	33.3	66.7
38.	Draw Sheets, Latha, 2 meters each (6)	64.7	35.3	50.0	50.0
39.	Macintosh Steel ½ Meter (1)	32.4	67.6	34.8	65.2
40.	Plastic water cooler, medium (1)	41.2	58.8	50.0	50.0
41.	Water set (Plastic) (1)	29.4	70.6	41.7	58.3
42.	Kerosene Stove (where needed) (1)	17.6	82.4	28.6	71.4
43.	Gas Cylinder (1)	14.7	85.3	14.3	85.7
44.	Degcha with Led, 12-14``diam S.S 10	32.4	67.6	21.7	78.3
45.	Plastic Bucket (medium)-1with Mug-1	58.8	41.2	21.4	78.6
46.	Plastic Lota (1)	52.9	47.1	7.1	92.9
KPK					
1.	Dressing Trolley (1)	92.0	8.0	100.0	0.0
2.	Kidney Trays (Set of 3) S.S	96.0	4.0	na	NA
3.	Bowls (6" diameter) S.S (2)	100.0	0.0	NA	NA
4.	Deep Tray with Lid Large Size S.S (1)	92.0	8.0	100.0	0.0
5.	Tray with lid (2x10x6) S.S (1)	88.0	12.0	33.3	66.7
6.	Glass Jar (Medium) (1)	72.0	28.0	14.3	85.7
7.	Syringes 5 cc (1)	40.0	60.0	13.3	86.7
8.	Syringes 2 cc (1)	84.0	16.0	0.0	100.0
9.	Vaginal Speculum, I-valve (Medium-3	92.0	8.0	50.0	50.0
10.	Vaginal Speculum, I-valve (Large) (1)	92.0	8.0	50.0	50.0
11.	Sponge Forceps (3)	96.0	4.0	100.0	0.0
12.	Voisellim, double toothed (3)	96.0	4.0	100.0	0.0
13.	Dressing Forceps, Medium (1)	92.0	8.0	100.0	0.0
14.	Scissors, blunt ended, medium (2)	96.0	4.0	100.0	0.0
15.	Artery Forceps (1)	92.0	8.0	100.0	0.0
16.	Chettel's Forceps (1)	92.0	8.0	50.0	50.0
17.	Tongue Depressor (1)	80.0	20.0	20.0	80.0
18.	B.P Apparatus (1)	84.0	16.0	75.0	25.0
19.	Feotoscope (1)	84.0	16.0	25.0	75.0
20.	Stethoscope (1)	84.0	16.0	50.0	50.0
21.	Mid-arm Circumference Tape (1)	44.0	56.0	42.9	57.1
22.	Weighing Machine Baby (1)	72.0	28.0	42.9	57.1
23.	Weighing Machine Adult (1)	80.0	20.0	40.0	60.0
24.	Dai Kit (1)	52.0	48.0	25.0	75.0

Province/region	Equipments/utensils Standard list-1	Available	Not Available	If not available then Demand given	
25.	Midwifery (1)	60.0	40.0	30.0	70.0
26.	Sterilizer boiling type	96.0	4.0	0.0	100.0
27.	Gloves-1	72.0	28.0	57.1	42.9
28.	Urine test with 12 tubes (10)	68.0	32.0	37.5	62.5
29.	Talquist Hemoglobin Scale (1)	64.0	36.0	33.3	66.7
30.	Thermometer (2)	88.0	12.0	0.0	100.0
31.	Nail Brush (2)	72.0	28.0	28.6	71.4
32.	Spirit Lamp (1)	84.0	16.0	50.0	50.0
33.	Flit Pump (1)	56.0	44.0	45.5	54.5
34.	Torch, Large (3- Cell) Size (1)	84.0	16.0	75.0	25.0
35.	Wall Clock (1)	76.0	24.0	0.0	100.0
36.	Blanket (1)	92.0	8.0	50.0	50.0
37.	Towels (24``x 12``) (3)	88.0	12.0	33.3	66.7
38.	Draw Sheets, Latha, 2 meters each (6)	92.0	8.0	50.0	50.0
39.	Macintosh Steel ½ Meter (1)	68.0	32.0	50.0	50.0
40.	Plastic water cooler, medium (1)	84.0	16.0	25.0	75.0
41.	Water set (Plastic) (1)	84.0	16.0	50.0	50.0
42.	Kerosene Stove (where needed) (1)	68.0	32.0	25.0	75.0
43.	Gas Cylinder (1)	64.0	36.0	22.2	77.8
44.	Degcha with Led, 12-14`` diam S.S 10	96.0	4.0	100.0	0.0
45.	Plastic Bucket (medium)-1with Mug-1	84.0	16.0	50.0	50.0
46.	Plastic Lota (1)	84.0	16.0	50.0	50.0
Balochistan					
1.	Dressing Trolley (1)	100.0	0.0	NA	NA
2.	Kidney Trays (Set of 3) S.S	100.0	0.0	NA	NA
3.	Bowls (6" diameter) S.S (2)	100.0	0.0	NA	NA
4.	Deep Tray with Lid Large Size S.S (1)	90.0	10.0	100.0	
5.	Tray with lid (2x10x6) S.S (1)	70.0	30.0	66.7	33.3
6.	Glass Jar (Medium) (1)	70.0	30.0	100.0	0.0
7.	Syringes 5 cc (1)	100.0	0.0	NA	NA
8.	Syringes 2 cc (1)	100.0	0.0	NA	NA
9.	Vaginal Speculum, I-valve (Medium-3	90.0	10.0	100.0	0.0
10.	Vaginal Speculum, I-valve (Large) (1)	70.0	30.0	100.0	0.0
11.	Sponge Forceps (3)	100.0	0.0	NA	NA
12.	Voisellim, double toothed (3)	90.0	10.0	100.0	0.0
13.	Dressing Forceps, Medium (1)	90.0	10.0	100.0	0.0
14.	Scissors, blunt ended, medium (2)	80.0	20.0	100.0	0.0
15.	Artery Forceps (1)	90.0	10.0	100.0	0.0
16.	Chettel's Forceps (1)	90.0	10.0	100.0	0.0
17.	Tongue Depressor (1)	80.0	20.0	100.0	0.0

Province/region	Equipments/utensils Standard list-1	Available	Not Available	If not available then Demand given	
18.	B.P Apparatus (1)	90.0	10.0	100.0	0.0
19.	Feotoscope (1)	100.0	0.0	NA	NA
20.	Stethoscope (1)	80.0	20.0	100.0	0.0
21.	Mid-arm Circumference Tape (1)	30.0	70.0	85.7	14.3
22.	Weighing Machine Baby (1)	80.0	20.0	100.0	0.0
23.	Weighing Machine Adult (1)	100.0	0.0	NA	NA
24.	Dai Kit (1)	70.0	30.0	100.0	0.0
25.	Midwifery (1)	70.0	30.0	100.0	0.0
26.	Sterilizer boiling type	90.0	10.0	100.0	0.0
27.	Gloves-1	80.0	20.0	100.0	0.0
28.	Urine test with 12 tubes (10)	60.0	40.0	75.0	25.0
29.	Talquist Hemoglobin Scale (1)	20.0	80.0	75.0	25.0
30.	Thermometer (2)	60.0	40.0	100.0	0.0
31.	Nail Brush (2)	40.0	60.0	66.7	33.3
32.	Spirit Lamp (1)	60.0	40.0	75.0	25.0
33.	Flit Pump (1)	40.0	60.0	83.3	16.7
34.	Torch, Large (3- Cell) Size (1)	60.0	40.0	100.0	0.0
35.	Wall Clock (1)	80.0	20.0	100.0	0.0
36.	Blanket (1)	50.0	50.0	100.0	0.0
37.	Towels (24``x 12``) (3)	50.0	50.0	80.0	20.0
38.	Draw Sheets, Latha, 2 meters each (6)	90.0	10.0	100.0	0.0
39.	Macintosh Steel ½ Meter (1)	50.0	50.0	100.0	0.0
40.	Plastic water cooler, medium (1)	50.0	50.0	100.0	0.0
41.	Water set (Plastic) (1)	30.0	70.0	85.7	14.3
42.	Kerosene Stove (where needed) (1)	20.0	80.0	87.5	12.5
43.	Gas Cylinder (1)	20.0	80.0	75.0	25.0
44.	Degcha with Led, 12-14``diam S.S 10	20.0	80.0	87.5	12.5
45.	Plastic Bucket (medium)-1with Mug-1	40.0	60.0	83.3	16.7
46.	Plastic Lota (1)	60.0	40.0	75.0	25.0
GB/AJK/ ICT*					
1.	Dressing Trolley (1)	85.7	14.3	0.0	100.0
2.	Kidney Trays (Set of 3) S.S	100.0	0.0	NA	NA
3.	Bowls (6" diameter) S.S (2)	100.0	0.0	NA	NA
4.	Deep Tray with Lid Large Size S.S (1)	100.0	0.0	NA	NA
5.	Tray with lid (2x10x6) S.S (1)	85.7	14.3	0.0	100.0
6.	Glass Jar (Medium) (1)	42.9	57.1	50.0	50.0
7.	Syringes 5 cc (1)	28.6	71.4	40.0	60.0
8.	Syringes 2 cc (1)	57.1	42.9	33.3	66.7
9.	Vaginal Speculum, I-valve (Medium-3	100.0	0.0	NA	NA
10.	Vaginal Speculum, I-valve (Large) (1)	85.7	14.3	0.0	100.0

Province/region	Equipments/utensils Standard list-1	Available	Not Available	If not available then Demand given	
11.	Sponge Forceps (3)	100.0	0.0	NA	NA
12.	Voisellim, double toothed (3)	85.7	14.3	0.0	100.0
13.	Dressing Forceps, Medium (1)	100.0	0.0	NA	NA
14.	Scissors, blunt ended, medium (2)	100.0	0.0	NA	NA
15.	Artery Forceps (1)	85.7	14.3	0.0	100.0
16.	Chettel's Forceps (1)	71.4	28.6	50.0	50.0
17.	Tongue Depressor (1)	100.0	0.0	48.8	51.2
18.	B.P Apparatus (1)	100.0	0.0	Na	Na
19.	Feotoscope (1)	100.0	0.0	NA	NA
20.	Stethoscope (1)	100.0	0.0	NA	NA
21.	Mid-arm Circumference Tape (1)	42.9	57.1	25.0	75.0
22.	Weighing Machine Baby (1)	57.1	42.9	66.7	33.3
23.	Weighing Machine Adult (1)	85.7	14.3	100.0	0.0
24.	Dai Kit (1)	71.4	28.6	0.0	100.0
25.	Midwifery (1)	42.9	57.1	0.0	100.0
26.	Sterilizer boiling type	85.7	14.3	100.0	0.0
27.	Gloves-1	71.4	28.6	100.0	0.0
28.	Urine test with 12 tubes (10)	28.6	71.4	40.0	60.0
29.	Talquist Hemoglobin Scale (1)	28.6	71.4	40.0	60.0
30.	Thermometer (2)	85.7	14.3	100.0	0.0
31.	Nail Brush (2)	85.7	14.3	0.0	100.0
32.	Spirit Lamp (1)	85.7	14.3	0.0	100.0
33.	Flit Pump (1)	71.4	28.6	0.0	100.0
34.	Torch, Large (3- Cell) Size (1)	85.7	14.3	100.0	0.0
35.	Wall Clock (1)	71.4	28.6	50.0	50.0
36.	Blanket (1)	71.4	28.6	0.0	100.0
37.	Towels (24``x 12``) (3)	85.7	14.3	0.0	100.0
38.	Draw Sheets, Latha, 2 meters each (6)	71.4	28.6	50.0	50.0
39.	Macintosh Steel ½ Meter (1)	85.7	14.3	0.0	100.0
40.	Plastic water cooler, medium (1)	100.0	0.0	NA	NA
41.	Water set (Plastic) (1)	42.9	57.1	25.0	75.0
42.	Kerosene Stove (where needed) (1)	42.9	57.1	0.0	100.0
43.	Gas Cylinder (1)	85.7	14.3	0.0	100.0
44.	Degcha with Led, 12-14``diam S.S 10	100.0	0.0	NA	NA
45.	Plastic Bucket (medium)-1with Mug-1	71.4	28.6	50.0	50.0
46.	Plastic Lota (1)	85.7	14.3	NA	NA

* GB=3 ICT=2 AJK=2

Core Team of Project

S. No.	Name of Core Team	Designation
1.	Mr. Amanullah Bhatti	Director (Research & Surveys), Project Director
2.	Mr. Ali Anwar Buriro	Associate Fellow, Principal Investigator
3.	Mrs. Rabia Zafar	Associate Fellow, Co-Principal Investigator
4.	Mr. Faateh ud Din Ahmad	Data Processing Manager
5.	Mr. Zafar Iqbal Niazi	Secretary (M&F)
6.	Mr. Muhammad Arif	Accountant
7.	Mr. Sikandar Ali Bhatti	Coordinator (Sindh and Balochistan)
8.	Mr. Muhammad Nazim Siddiqui	Coordinator (Punjab)/Supervisor/data Editing Team
9.	Mr. Muhammad Rafiq Raza Kamboh	Coordinator (Punjab)
10.	Mr. Muhammad Danish Anjum	Coordinator (KPK)

Technical Team (Computer Section) of Project

S. No	Name	Designation/Participated as:
1.	Mr. Faateh ud Din Ahmad	Data Processing Manager
2.	Mr. Faisal Zeb	Asst Programmer/Data Entry Supervisor
3.	Mr. Waqas Imran	Research Associate
4.	Mr. Muhammad Shoib Khan Lodhi	Data Entry Supervisor
5.	Mr. Farman Ali Panhwar	Data Entry Operator
6.	Mr. Shakeel Ahmad	Data Entry Operator
7.	Mr. Qamer-ur-Rasool	Data Entry Operator
8.	Mr. Rashid Mehmood Abbasi	Data Entry Operator
9.	Mr. Dilnawaz Khan	Data Entry Operator

Data Editing Team of Project

S. No	Name	Designation/Participated as:
1.	Mr. Sikandar Ali Bhatti	Coordinator and Office Editor
2.	Mr. Muhammad Nazim Siddiqui	Coordinator and Office Editor
3.	Mr. Muhammad Rafiq Raza Kamboh	Coordinator and Office Editor
4.	Mr. Muhammad Danish Anjum	Coordinator and Office Editor
5.	Ms. Kiran Umbar	Office Editor
6.	Ms. Samina Abbas	Office Editor
7.	Ms. Fareeha Iqbal	Office Editor

Field Teams worked in 'Evaluation and Assessment of Quality of Care of Family Welfare Centres (2010-11)'

Team No.	Name	Designation
Punjab		
Team - 1	1. Mr. Arsalan Mehtab Abbasi	Supervisor
	2. Ms. Kiran Umber	Interviewer
	3. Ms. Samina Abbas	Interviewer
Team - 2	1. Mr. Asad Raza Khan	Supervisor
	2. Ms. Shamsa Noushahi	Interviewer
	3. Ms. Almas Kazmi	Interviewer
Team - 3	1. Mr. Amir Zeb	Supervisor
	2. Ms. Madiha Shahid	Interviewer
	3. Ms. Ghazala Parveen	Interviewer
Team - 4	1. Mr. M. Farooq Sheikh	Supervisor
	2. Ms. Shabana Shafat	Interviewer
	3. Ms. Sobia Noreen (Sahiwal)	Interviewer
Team - 5	1. Mr. Zahoor Ahmad	Supervisor
	2. Ms. Samina Rafiq	Interviewer
	3. Ms. Aasiya Malik	Interviewer
Team - 6	1. Mirza Adnan Khan	Supervisor
	2. Ms. Nuzhat Yasmin	Interviewer
	3. Ms. Shazia Kalsoom	Interviewer
Team - 7	1. Mr. Abid Hussain	Supervisor
	2. Ms. Sobia Noreen (Jhang)	Interviewer
	3. Ms. Shahida Shaheen	Interviewer
Sindh		
Team - 8	1. Mr. Abid Hussain Babar	Supervisor
	2. Ms. Nida Ahmad	Interviewer
	3. Ms. Asma Kausar	Interviewer
Team - 9	1. Mr. Muhammad Ramzan	Supervisor
	2. Ms. Hameeda Thahim	Interviewer
	3. Ms. Rukhsana Hussain	Interviewer
Team - 10	1. Mr. Sarfaraz Ali	Supervisor
	2. Ms. Irum Shumaila	Interviewer
	3. Ms. Sanam Naz	Interviewer
Khyber Pakhtonkhwa (KPK)		
Team - 11	1. Mr. Khan Rahim	Supervisor
	2. Ms. Falak Shahid	Interviewer
	3. Ms. Shamim Sabra	Interviewer
Team - 12	1. Mr. Hafeez-ul-Islam Siddiqui	Supervisor
	2. Ms. Huma Bint-e-Nayyar	Interviewer
	3. Ms. Kosir Bibi	Interviewer
Balochistan		
Team - 13	1. Mr. Qari Moin-Ud-Din (Team No. 13)	Supervisor
	2. Ms. Maria Sarwar	Interviewer
	3. Ms. Saeeda Jatoi	Interviewer

Technical Advisory Committee (TAC)

S. No	Name and Designation	Participation in TAC meeting as:
1	Dr. Sajid Ahmad, Executive Director, NIPS, Islamabad	Chairman
2	Mr. Abdul Gaffar Khan, DG (Projects), MoPW, Islamabad	Member
3	Dr. Mumtaz Esker, DG (Technical), MoPW, Islamabad	Member
4	Mr. Tariq Masood, Project Coordinator, UNFPA-MoPW, lbd.	Member
5	Mr. Amanullah Bhatti, Director (R&S), NIPS, Islamabad	Member
6	Syed Mubashir Ali, Former PI (PDHS), Islamabad	Member
7	Mr. Ayazuddin, Director, FBS, Islamabad	Member
8	Mrs. Azra Aziz, Senior Fellow, NIPS, Islamabad	Member
9	Ms. Aysha Sheraz, Fellow, NIPS, Islamabad	Member
10	Mr. Zafar Zahir, Associate Fellow NIPS, Islamabad	Member
11	Mr. Mubashir Baqai, Associate Fellow, NIPS, Islamabad	Member
12	Ms. Rabia Zafar, Associate Fellow, NIPS, Islamabad	Member
13	Mr. Faateh ud Din Ahmad, Programmer, NIPS, Islamabad	Member
14	Mohammad Rafique Raza Coordinator , FWCs, NIPS, lbd	Member
15	Mr. Muhammad Nazim, Coordinator, FWCs, NIPS, lbd.	Member
16	Mian Muazzam Shah, Former DG, MoPW, Islamabad	Member
17	Mr. Iqbal Ahmad, Former DG, MoPW, Islamabad	Member
18	Mr. Shehzad Ahmad, DG, MoPW, Islamabad	Member
19	Dr. Athar Qayum, Director (FWCs), MoPW, Islamabad	Member
20	Mr. Hamid Khalil, Director, MoPW, Islamabad	Member
21	Dr. Badar-ud-Din Abbasi, Director, MoPW, Islamabad	Member
22	Mr. Ali Anwar Buriro, Associate Fellow, NIPS, Islamabad	Member/Secretary

Questionnaires



PROCESSING CODE

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FWC

**EVALUATION & ASSESSMENT OF QUALITY OF CARE AT
FAMILY WELFARE CENTRES (FWCs)
(EAQCFWCs, 2010-11)**

QUESTIONNAIRE

MODULE – I

SITUATION ANALYSIS OF FWCs



**NATIONAL INSTITUTE OF POPULATION STUDIES
House No. 485, Street No. 9, F-10/2, ISLAMABAD
(Phone No. 051-9267113)**

SECTION - I		
BACKGROUND CHARACTERISTICS		
No.	Question and Filters	Coding categories
101	What is your age? (Record age in completed years)	آپ کی عمر کیا ہے؟ <input type="text"/> <input type="text"/>
102	What is your qualification? 1. Under Matric 2. Matric 3. Intermediate 4. Bachelors 5. Masters 6. Others _____ (Specify)	آپ کی تعلیم کیا ہے؟ <input type="checkbox"/>
103	What is your marital status? 1. Married 2. Widow 3. Divorced 4. Separated 5. Unmarried → [Skip to 105]	آپ کی ازدواجی حیثیت کیا ہے؟ <input type="checkbox"/>
104	How many children do you have?	آپ کے کتنے بچے ہیں؟ Boys <input type="text"/> <input type="text"/> Girls <input type="text"/> <input type="text"/> Total <input type="text"/> <input type="text"/>
105	Are you the resident of this city/village? 1. Yes 2. No	کیا آپ اس شہر یا گاؤں کی رہائشی ہیں؟ <input type="checkbox"/>
106	How do you come to this centre? 1. Public Transport 2. Personal Transport 3. On foot 4. Other _____ (Specify)	آپ اس مرکز میں کس ذریعے سے آتے ہیں؟ <input type="checkbox"/>
107	When did you join Population Welfare Programme? آپ بہبود آبادی پروگرام میں کب شامل ہوئیں؟	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Day Month Year DK Day/Month=98 DK Year=9998
108	What is the date of joining of this Centre? آپ نے اس مرکز کو کب جوائن کیا؟	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Day Month Year DK Day/Month=98 DK Year=9998

109	How long you have been performing as an in-charge of FWC? آپ کتنے عرصے سے بطور in-charge کام کر رہی ہیں؟ [LESS THAN ONE YEAR RECORD "00"]	No. of years <input type="text"/>												
SECTION - II														
SITUATION AND INVENTORY OF FACILITIES														
No.	Question and Filters	Coding categories												
201	What is the timing of this centre? اس مرکز کے اوقات کیا ہیں؟ [USE 24 HOURS CLOCK]	<table border="1"> <tr><td colspan="2">Opening Timing</td></tr> <tr><td>Hours</td><td>Minutes</td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> </table> <table border="1"> <tr><td colspan="2">Closing Timing</td></tr> <tr><td>Hours</td><td>Minutes</td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> </table>	Opening Timing		Hours	Minutes	<input type="text"/>	<input type="text"/>	Closing Timing		Hours	Minutes	<input type="text"/>	<input type="text"/>
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Hours	Minutes													
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Closing Timing														
Hours	Minutes													
<input type="text"/>	<input type="text"/>													
202	Is the timing suitable for public? کیا یہ اوقات عوام کیلئے مناسب ہیں؟ 1. Yes <input type="checkbox"/> → [Skip to 204] 2. No <input type="checkbox"/>	<input type="checkbox"/>												
203	In your opinion what is the suitable timing? آپ کے خیال میں مناسب اوقات کیا ہیں؟ [USE 24 HOURS CLOCK]	<table border="1"> <tr><td colspan="2">Opening Timing</td></tr> <tr><td>Hours</td><td>Minutes</td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> </table> <table border="1"> <tr><td colspan="2">Closing Timing</td></tr> <tr><td>Hours</td><td>Minutes</td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> </table>	Opening Timing		Hours	Minutes	<input type="text"/>	<input type="text"/>	Closing Timing		Hours	Minutes	<input type="text"/>	<input type="text"/>
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Closing Timing														
Hours	Minutes													
<input type="text"/>	<input type="text"/>													
204	What is the main mode of access of FWC? Type of Road or Path: 1. Paved Asphalted Road 2. Gravel Road 3. Kacha Road 4. Off Road 5. Kacha Path 6. Other----- (Specify) اس مرکز تک پہنچنے کے کیا ذرائع ہیں؟	<input type="checkbox"/>												
205	Is there any direction/sign board installed? کیا مرکز تک پہنچنے کیلئے علامتی بورڈ لگا ہوا ہے؟ 1. Yes <input type="checkbox"/> → [Skip to 207] 2. No <input type="checkbox"/> → [INTERVIEWER: PL. OBSERVE SIGN BOARD]	<input type="checkbox"/>												
206	Direction/Sign board installed is: 1. With clearly addressed 2. Without clearly addressed سائن بورڈ ہے تو:	<input type="checkbox"/>												

207	<p>What is the distance of this centre from TPWO and DPWO? TPWO اور DPWO سے اس مرکز کا فاصلہ کیا ہے؟</p> <p>[IF LESS THAN 1 KM RECORD "000"]</p>	<p>In Kms</p> <table border="1"> <tr> <td>TPWO</td> <td></td> <td></td> <td></td> </tr> <tr> <td>DPWO</td> <td></td> <td></td> <td></td> </tr> </table> <p>DK= 998</p>	TPWO				DPWO																																																				
TPWO																																																											
DPWO																																																											
208	<p>How each of the following facilities (family planning & health) near to the centre? اس میں سے کون سی سہولیات اس مرکز کے نزدیک ہیں؟</p> <p>A. Public Sector:</p> <ol style="list-style-type: none"> Government Hospital/RHS (A) Centre Govt. Dispensary MCH Centre MSU LHW House BHU RHC Dai PPH Other Public _____ (Specify) <p>B. Private/NGO/Medical Sector</p> <ol style="list-style-type: none"> Private Hospital NGO clinic Pharmacy Chemist Private Doctor/clinic Homeopath/Hakeem Dispenser/Compounder Other _____ (Specify) 	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td><td>2</td></tr> <tr><td>3</td><td>1</td><td>2</td></tr> <tr><td>4</td><td>1</td><td>2</td></tr> <tr><td>5</td><td>1</td><td>2</td></tr> <tr><td>6</td><td>1</td><td>2</td></tr> <tr><td>7</td><td>1</td><td>2</td></tr> <tr><td>8</td><td>1</td><td>2</td></tr> <tr><td>9</td><td>1</td><td>2</td></tr> <tr><td>10</td><td>1</td><td>2</td></tr> </tbody> </table> <table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td><td>2</td></tr> <tr><td>3</td><td>1</td><td>2</td></tr> <tr><td>4</td><td>1</td><td>2</td></tr> <tr><td>5</td><td>1</td><td>2</td></tr> <tr><td>6</td><td>1</td><td>2</td></tr> <tr><td>7</td><td>1</td><td>2</td></tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2	6	1	2	7	1	2	8	1	2	9	1	2	10	1	2		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2	6	1	2	7	1	2
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209	<p>What is the current staff position at FWC? مرکز میں آجکل عملے کی تعداد کیا ہے؟</p> <ol style="list-style-type: none"> Family Welfare Worker/Councilor Family Welfare Assistant (Male) Family Welfare Assistant (Female) Aya Chowkidar 	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td><td>2</td></tr> <tr><td>3</td><td>1</td><td>2</td></tr> <tr><td>4</td><td>1</td><td>2</td></tr> <tr><td>5</td><td>1</td><td>2</td></tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2																																							
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210	<p>What is the outlook/condition of the Centre's Building? (Observational) مرکز کی عمارت کی ظاہری حالت کیسی ہے؟</p> <ol style="list-style-type: none"> Excellent Good Satisfactory Not Satisfactory 	<table border="1"> <tr> <td></td> <td></td> </tr> </table>																																																									
211	<p>How many rooms are available in FWC? مرکز میں کمروں کی تعداد کتنی ہے؟</p>	<table border="1"> <tr> <td>For Centre</td> <td></td> </tr> <tr> <td>Residence</td> <td></td> </tr> <tr> <td>Total</td> <td></td> </tr> </table>	For Centre		Residence		Total																																																				
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212	Is there attached residential accommodation for in-charge of FWC? 1. Yes 2. No	کیا مرکز کی انچارج کیلئے مرکز سے ملحقہ رہائشی سہولت موجود ہے؟	<input type="checkbox"/>												
213	Whether the building of FWC: 1. Rented 2. Donated by community 3. Donated by donor/funding agency 4. Others _____ (Specify)	کیا مرکز کی عمارت:	<input type="checkbox"/>												
214	Is the electricity available? (OBSERVATIONAL) 1. Yes 2. No	کیا بجلی کی سہولت میسر ہے؟	<input type="checkbox"/>												
215	Is the heating facility available? 1. Gas 2. Electricity 3. Kerosene 4. Charcoal/Wood 5. Others _____ (Specify)	کیا ایندھن یا گرم رکھنے کی سہولت موجود ہے؟	<input type="checkbox"/>												
216	What type of toilet facilities available in FWC? 1. Flush 2. Non-Flush 3. None 4. Others _____ (Specify)	رفع حاجت کیلئے کونسی سہولت موجود ہے؟	<input type="checkbox"/>												
217	Type of water supply to FWC: 1. Piped Water 2. Hand Pump 3. None 4. Others _____ (Specify)	مرکز میں پانی کس ذریعے سے حاصل ہوتا ہے؟	<input type="checkbox"/>												
218	Waiting area/room for clients/patients: 1. Weather protected 2. Proper seating arrangement for clients 3. Others _____ (Specify)	کلینٹس کیلئے انتظار گاہ:	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td>2</td> </tr> <tr> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>3</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2
	Yes	No													
1	1	2													
2	1	2													
3	1	2													

219	<p>Medical Examination Room:</p> <p style="text-align: right;">طبی معائنے کا کمرہ</p> <ol style="list-style-type: none"> 1. Separate Audio/Visual Privacy 2. Separate Visual Privacy 3. Cleanliness 4. Adequate light source 	<table border="1" style="width: 100%;"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td>2</td> </tr> <tr> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>3</td> <td>1</td> <td>2</td> </tr> <tr> <td>4</td> <td>1</td> <td>2</td> </tr> </tbody> </table> <p style="text-align: center;">If circle 2 in options 3 then ask</p>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2
	Yes	No															
1	1	2															
2	1	2															
3	1	2															
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220	<p>If not clean, ask the reasons for not maintaining proper cleanliness?</p> <p style="text-align: right;">اگر صفائی نہیں ہے تو وجہ معلوم کریں؟</p> <hr/> <hr/> <hr/>	<table border="1" style="width: 100%; height: 100%;"> <tr> <td style="width: 50%; height: 30px;"></td> <td style="width: 50%; height: 30px;"></td> </tr> <tr> <td style="width: 50%; height: 30px;"></td> <td style="width: 50%; height: 30px;"></td> </tr> </table>															
221	<p>State the Maintenance of the FWC:</p> <p style="text-align: right;">مرکز کی مرمت وغیرہ۔</p> <ol style="list-style-type: none"> 1. Whitewashed (Walls & Roof) 2. Not at All 3. Other _____ (specify) 	<table border="1" style="width: 100%; height: 100%;"> <tr> <td style="width: 50%; height: 100px;"></td> <td style="width: 50%; height: 100px;"></td> </tr> </table>															
222	<p>Do you have the following types of IEC material?</p> <p style="text-align: right;">کیا آپ کے پاس درج ذیل IEC مواد موجود ہے؟</p> <ol style="list-style-type: none"> 1. Posters 2. Pamphlets/Leaflet 3. Books 4. Others _____ (Specify) 	<table border="1" style="width: 100%;"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td>2</td> </tr> <tr> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>3</td> <td>1</td> <td>2</td> </tr> <tr> <td>4</td> <td>1</td> <td>2</td> </tr> </tbody> </table> <p style="text-align: center;">If any "Yes" skip to 301</p>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2
	Yes	No															
1	1	2															
2	1	2															
3	1	2															
4	1	2															
223	<p>State the reasons for not having IEC material:</p> <p style="text-align: right;">IEC مواد نہ ہونے کی وجوہات بتائیں؟</p> <hr/> <hr/> <hr/>	<table border="1" style="width: 100%; height: 100%;"> <tr> <td style="width: 50%; height: 60px;"></td> <td style="width: 50%; height: 60px;"></td> </tr> <tr> <td style="width: 50%; height: 60px;"></td> <td style="width: 50%; height: 60px;"></td> </tr> </table>															

SECTION-III Activities of In-Charge of the Centre								
NO.	Questions And Filters	Coding Categories						
ADMINISTRATION & SUPERVISION:								
301	Do you maintain baseline data of households in catchment area? کیا آپ اپنے علاقے میں گھرانوں کی بنیادی معلومات کا ریکارڈ رکھتی ہیں؟ 1. Yes 2. No	<input type="checkbox"/>						
302	What is the total (approximately) population of your catchment area? آپ کے کام کے علاقہ میں آبادی کتنی ہے؟	<input type="text"/>						
303	Has FWA completed register (s) of eligible couples during July 2009-June 2010? کیا FWA نے جولائی 2009 سے جون 2010 کے دوران موزوں جوڑوں کا ریکارڈ مرتب کیا ہے؟ 1. Yes 2. No (305)	<input type="checkbox"/>						
304	How many Eligible Couples were registered during the period July 2009-June 2010? جولائی 2009 سے جون 2010 تک کتنے موزوں جوڑوں کو رجسٹر کیا گیا؟	<input type="text"/>						
[RECORD ESTIMATED NUMBER IF NOT MAINTAINED THE REGISTER]		Total Number						
305	Please give the total number of family planning clients registered during July 2008-June 2009; جولائی 2008 سے جون 2009 کے دوران کتنے خاندانی منصوبہ بندی کے کلینٹس رجسٹر کئے گئے؟							
Registered clients during July 2008- June 2009								
Month/ Year	Pills	Condom	Injection	IUCD	Female Sterilization	Male Sterilization	Implant	Total
July.08								
Aug. 08								
Sep. 08								
Oct. 08								
Nov. 08								
Dec. 08								
Jan. 09								
Feb. 09								
Mar. 09								
Apr. 09								
May 09								
Jun. 09								
Total								
If no client registered record "00"								

Please give the total number of **new** family planning clients registered during July 2009-June 2010;

جولائی 2009 سے جون 2010 کے دوران خاندانی منصوبہ بندی کے کتنے نئے جوڑوں کو رجسٹر کیا گیا؟

Registered clients during July 2009- June 2010															
Month/ Year	Pills		Condom		Inject.		IUCD		F. Ster.		M. Ster.		Implant		Total
July.09															
Aug. 09															
Sep. 09															
Oct. 09															
Nov. 09															
Dec. 09															
Jan. 10															
Feb. 10															
Mar. 10															
Apr. 10															
May 10															
Jun. 10															
Total															

If no client registered record "00"

LIST - 1
STANDARD LIST OF MEDICINES FOR FAMILY WELFARE CENTRE

S.No.	Standard	Available			
		YES=1	NO=2	If No then given demand	
				Yes	No
1.	Tablets Paracetamol	1	2	1	2
2.	Syrup Paracetamol	1	2	1	2
3.	Tablets Soluble Aspirin	1	2	1	2
4.	Tablets Buscopan	1	2	1	2
5.	Tablets Intestopan	1	2	1	2
6.	Tablets Chloroquin	1	2	1	2
7.	Tablets Piriton	1	2	1	2
8.	Tablets Avomine	1	2	1	2
9.	Syrup Chloroquin	1	2	1	2
10.	Syrup Maxalon	1	2	1	2
11.	Tablets Ketrax	1	2	1	2
12.	Chlorayphecal Eye Drops 10% & 20%	1	2	1	2
13.	Polyfax Eye Ointment	1	2	1	2
14.	Otosporin Ear Drops	1	2	1	2
15.	Tablets Ferrous Gluconate	1	2	1	2
16.	Tablets B Complex	1	2	1	2
17.	Syrup Vitamin B Complex	1	2	1	2
18.	ORS Packets	1	2	1	2
19.	Folic Acid Tablet	1	2	1	2
20.	Tincture Iodine	1	2	1	2
21.	Methylated Spirit	1	2	1	2
22.	Bandages	1	2	1	2
23.	Sticking Plaster	1	2	1	2
24.	Gloves	1	2	1	2
25.	Cotton	1	2	1	2
26.	Others _____ (Specify)	1	2	1	2

308	<p>If missing as per standard list what are the reasons for not having the required medicines:</p> <p>اگر ادویات متعین شدہ لسٹ کے مطابق نہیں ہیں تو ضروری ادویات نہ ہونے کی وجوہات کیا ہیں؟</p> <p>_____</p> <p>_____</p> <p>_____</p>	<table border="1" style="width: 100px; height: 100px; margin: auto;"> <tr><td style="width: 50px; height: 50px;"></td><td style="width: 50px; height: 50px;"></td></tr> <tr><td style="width: 50px; height: 50px;"></td><td style="width: 50px; height: 50px;"></td></tr> </table>																																																																																				
309	<p>Do you have enough contraceptives in stock?</p> <p>کیا آپ کے پاس کافی تعداد میں مائع حمل ادویات موجود ہیں؟</p> <p>1. Contraceptives available → [Skip to 312]</p> <p>2. Out of stock (311)</p> <p>3. Others _____ (Specify)</p>	<table border="1" style="width: 100px; height: 100px; margin: auto;"> <tr><td style="width: 100px; height: 100px;"></td></tr> </table>																																																																																				
310	<p>Please give details of contraceptives stock:</p> <p>مائع حمل ادویات کی تفصیل بتائیں:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Month/ Year</th> <th style="width: 15%;">Pills</th> <th style="width: 15%;">Condom</th> <th style="width: 15%;">Inject.</th> <th style="width: 15%;">IUCD</th> <th style="width: 15%;">Total</th> </tr> </thead> <tbody> <tr><td>July.09</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Aug. 09</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Sep. 09</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Oct. 09</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Nov. 09</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Dec. 09</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Jan. 10</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Feb. 10</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Mar. 10</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Apr. 10</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>May 10</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Jun. 10</td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>Total</td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>		Month/ Year	Pills	Condom	Inject.	IUCD	Total	July.09						Aug. 09						Sep. 09						Oct. 09						Nov. 09						Dec. 09						Jan. 10						Feb. 10						Mar. 10						Apr. 10						May 10						Jun. 10						Total					
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311	<p>State the reasons for not having the required contraceptives in stock?</p> <p>مطلوبہ مائع حمل ادویات نہ ہونے کی وجوہات بتائیں؟</p> <p>_____</p> <p>_____</p> <p>_____</p>	<table border="1" style="width: 100px; height: 100px; margin: auto;"> <tr><td style="width: 50px; height: 50px;"></td><td style="width: 50px; height: 50px;"></td></tr> <tr><td style="width: 50px; height: 50px;"></td><td style="width: 50px; height: 50px;"></td></tr> </table>																																																																																				

312

Do you have **furniture** as per standard list?

کیا آپ کے پاس List کے مطابق فرنیچر موجود ہے؟

STANDARD LIST OF FURNITURE FOR FAMILY WELFARE CENTRE

S.No.	Standard	Available		If No then given demand	
		YES=1	NO=2	YES=1	NO=2
1.	Examination Couch/Insertion Table (1)	1	2	1	2
2.	Steps for Table (1)	1	2	1	2
3.	Office Table (1)	1	2	1	2
4.	Chairs (2)	1	2	1	2
5.	Benches (1)	1	2	1	2
6.	Screen (1)	1	2	1	2
7.	Revolving Stools	1	2	1	2
8.	Cupboards	1	2	1	2
9.	Ceiling/Pedestal Fan	1	2	1	2
10.	Heater/ Cylinder heater (if required according to weather of the district/area)	1	2	1	2

Record additional information:

Please give details of available **equipments** as per standard list;

لسٹ کے مطابق موجود آلات کی تفصیل بتائیں؟

STANDARD LIST OF EQUIPMENTS FOR FAMILY WELFARE CENTRE

S.No.	Standard	Available			
		YES=1	NO=2	If No then give demand	
				Yes	No
1.	Dressing Trolley (1)	1	2	1	2
2.	Kidney Trays (Set of 3) S.S	1	2	1	2
3.	Bowls (6" diameter) S.S (2)	1	2	1	2
4.	Deep Tray with Lid Large Size S.S (1)	1	2	1	2
5.	Tray with lid (2x10x6) S.S (1)	1	2	1	2
6.	Glass Jar (Medium) (1)	1	2	1	2
7.	Syringes 5 cc (1)	1	2	1	2
8.	Syringes 2 cc (1)	1	2	1	2
9.	Vaginal Speculum, I-valve (Medium) (3)	1	2	1	2
10.	Vaginal Speculum, I-valve (Large) (1)	1	2	1	2
11.	Sponge Forceps (3)	1	2	1	2
12.	Voisellim, double toothed (3)	1	2	1	2
13.	Dressing Forceps, Medium (1)	1	2	1	2
14.	Scissors, blunt ended, medium (2)	1	2	1	2
15.	Artery Forceps (1)	1	2	1	2
16.	Chettel's Forceps (1)	1	2	1	2
17.	Tongue Depressor (1)	1	2	1	2
18.	B.P Apparatus (1)	1	2	1	2
19.	Feotoscope (1)	1	2	1	2
20.	Stethoscope (1)	1	2	1	2
21.	Mid-arm Circumference Tape (1)	1	2	1	2
22.	Weighing Machine Baby (1)	1	2	1	2
23.	Weighing Machine Adult (1)	1	2	1	2
24.	Dai Kit (1)	1	2	1	2
25.	Midwifery (1)	1	2	1	2
26.	Sterilizer boiling type	1	2	1	2
27.	Gloves	1	2	1	2
28.	Urine test with 12 tubes (10)	1	2	1	2
29.	Talquist Hemoglobin Scale (1)	1	2	1	2
30.	Thermometer (2)	1	2	1	2
31.	Nail Brush (2)	1	2	1	2
32.	Spirit Lamp (1)	1	2	1	2
33.	Flit Pump (1)	1	2	1	2
34.	Torch, Large (3- Cell) Size (1)	1	2	1	2
35.	Wall Clock (1)	1	2	1	2
36.	Blanket (1)	1	2	1	2
37.	Towels (24" x 12") (3)	1	2	1	2
38.	Draw Sheets, Latha, 2 meters each (6)	1	2	1	2
39.	Macintosh Steel ½ Meter (1)	1	2	1	2
40.	Plastic water cooler, medium (1)	1	2	1	2
41.	Water set (Plastic) (1)	1	2	1	2
42.	Kerosene Stove (where needed) (1)	1	2	1	2
43.	Gas Cylinder (1)	1	2	1	2
44.	Degcha with Led, 12" to 14" diameter S.S (10)	1	2	1	2
45.	Plastic Bucket (medium) (1) with Mug (1)	1	2	1	2
46.	Plastic Lota (1)	1	2	1	2

Record additional information:

314	<p>Do you maintain proper record of :</p> <p>کیا آپ درج ذیل ریکارڈ مرتب کرتی ہیں؟</p> <ol style="list-style-type: none"> 1 Printing registers for record keeping 2 Clients Record Cards (CRCs) 3 Contraceptive Stock Registers 4 Medicines Stock Registers 5 Other..... <p>(specify)</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td>2</td> </tr> <tr> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>3</td> <td>1</td> <td>2</td> </tr> <tr> <td>4</td> <td>1</td> <td>2</td> </tr> <tr> <td>5</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2
	Yes	No																		
1	1	2																		
2	1	2																		
3	1	2																		
4	1	2																		
5	1	2																		
315	<p>Do you usually send monthly performance report of the contraceptives to DPWO?</p> <p>کیا آپ مائع حمل ادویات کی ماہانہ کارکردگی کی رپورٹ DPWO کو بھیجتی ہیں؟</p> <ol style="list-style-type: none"> 1. Yes → [Skip to 317] 2. No <p>[PLEASE ATTACH COPY OF LAST REPORT]</p>	<input type="checkbox"/>																		
316	<p>State the reasons for not sending monthly performance report to DPWO;</p> <p>مائع حمل ادویات کی ماہانہ کارکردگی کی رپورٹ DPWO کو نہ بھیجوانے کی وجوہات بتائیں؟</p> <p>_____</p> <p>_____</p> <p>_____</p>																			
317	<p>Do you maintain record of visits done by you or your staff in catchment area?</p> <p>کیا آپ اپنے اور سٹاف کے علاقے میں کئے گئے دوروں کا ریکارڈ مرتب کرتی ہیں؟</p> <ol style="list-style-type: none"> 1. Yes → [Skip to 319] 2. No <p>[INTERVIEWER: PLEASE CHECK THE RECORD AND ATTACH COPY.]</p>	<input type="checkbox"/>																		
318	<p>Reasons for not maintaining visit record?</p> <p>دورے کا ریکارڈ نہ رکھنے کی وجوہات بیان کریں؟</p> <p>_____</p> <p>_____</p> <p>_____</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>														
<input type="checkbox"/>	<input type="checkbox"/>																			
<input type="checkbox"/>	<input type="checkbox"/>																			
319	<p>Do you hold staff meetings to review the activities?</p> <p>کیا آپ سرگرمیوں کا جائزہ لینے کیلئے سٹاف میٹنگز منعقد کرتی ہیں؟</p> <ol style="list-style-type: none"> 1. Yes 2. No → [Skip to 321] 	<input type="checkbox"/>																		
320	<p>What kind of issues do you usually discuss in review meetings?</p> <p>آپ جائزہ میٹنگز میں کن مسائل پر بات چیت کرتی ہیں؟</p> <p>_____</p> <p>_____</p>																			

FAMILY PLANNING:																	
321	<p>Do you counsel clients about family planning?</p> <p>کیا آپ خاندانی منصوبہ بندی کے بارے میں کلائنٹس کو مشورہ دیتی ہیں؟</p> <p>1. Yes 2. No</p>	<input type="checkbox"/>															
322	<p>How many family planning clients did you attend in last 3 months?</p> <p>آپ نے گزشتہ تین ماہ میں خاندانی منصوبہ کے کتنے کلائنٹس کو خدمات دیں؟</p> <p>PLEASE CHECK RECORD</p>	<p>Number</p> <input type="text"/>															
323	<p>In which, how many clients did you visit for follow-up of Family Planning?</p> <p>ان میں سے کتنے کلائنٹس نے خاندانی منصوبہ بندی کیلئے دوبارہ رجوع کیا؟</p> <p>PLEASE CHECK RECORD</p>	<p>Number</p> <input type="text"/>															
324	<p>Which of the following follow-up services did you provide for Family Planning?</p> <p>آپ نے درج ذیل فالو آپ خدمات میں سے کونسی خاندانی منصوبہ بندی کیلئے فراہم کیں؟</p> <p>1. Continuous follow-up visits 2. At the time of Problem (s) reported by clients 3. Routine visits 4. Other _____ (Specify)</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td>2</td> </tr> <tr> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>3</td> <td>1</td> <td>2</td> </tr> <tr> <td>4</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2
	Yes	No															
1	1	2															
2	1	2															
3	1	2															
4	1	2															
325	<p>How many satisfied FP clients helped you in introducing of new clients in the last 3 months?</p> <p>گزشتہ تین ماہ میں خاندانی منصوبہ بندی کے مطمئن کلائنٹس نے نئے کلائنٹس کو متعارف کروایا؟</p>	<input type="text"/> <p>DK-998</p>															
326	<p>How many new clients were referred to you by satisfied clients?</p> <p>مطمئن کلائنٹس نے کتنے نئے کلائنٹس کو آپ کے پاس بھیجا؟</p>	<p>Number</p> <input type="text"/> <p>DK= 998</p>															
327	<p>Which of the following F.P methods mostly do you recommend to clients?</p> <p>درج ذیل خاندانی منصوبہ بندی کے طریقوں میں سے زیادہ تر کونسا طریقہ کلائنٹس کو تجویز کرتی ہیں؟</p> <p>1. Female Sterilization 2. Pills 3. IUCD 4. Injections 5. Implants 6. Condoms 7. Other _____ (Specify)</p>	<input type="checkbox"/>															

327(a)	<p>Reasons to recommend that method:</p> <p>اس طریقے کو تجویز کرنے کی وجوہات بتائیں:</p> <hr/> <hr/> <hr/>	<table border="1" style="width: 100px; height: 100px; margin: auto;"> <tr><td style="width: 50px; height: 50px;"></td><td style="width: 50px; height: 50px;"></td></tr> <tr><td style="width: 50px; height: 50px;"></td><td style="width: 50px; height: 50px;"></td></tr> </table>																								
327 (b)	<p>Do you usually discuss the side effects of each method while introducing? کیا آپ عام طور پر طریقہ دیتے ہوئے اسکے مضر اثرات پر بات چیت کرتی ہیں؟</p> <ol style="list-style-type: none"> 1. Female Sterilization 2. Pills 3. IUCD 4. Injections 5. Implants 6. Condoms 7. Other _____ (Specify) 	<table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td><td>2</td></tr> <tr><td>3</td><td>1</td><td>2</td></tr> <tr><td>4</td><td>1</td><td>2</td></tr> <tr><td>5</td><td>1</td><td>2</td></tr> <tr><td>6</td><td>1</td><td>2</td></tr> <tr><td>7</td><td>1</td><td>2</td></tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2	6	1	2	7	1	2
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7	1	2																								
327 (c)	<p>Do you aware about the expiry date of method? کیا آپ کو ان طریقوں کی معیاد پوری ہونے کی تاریخ معلوم ہوتی ہے؟</p> <ol style="list-style-type: none"> 1. Pills 2. IUCD 3. Injections 4. Implants 5. Condoms 	<table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td><td>2</td></tr> <tr><td>3</td><td>1</td><td>2</td></tr> <tr><td>4</td><td>1</td><td>2</td></tr> <tr><td>5</td><td>1</td><td>2</td></tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2						
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3	1	2																								
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5	1	2																								
327(d)	<p>Do you manage the side effects at centre? کیا آپ مرکز میں مضر اثرات کی وجہ سے آنے والے کلائنٹس کو دیکھتی ہیں؟</p> <ol style="list-style-type: none"> 1. Yes 2. No 3. Sometime 	<table border="1" style="width: 100px; height: 100px; margin: auto;"> <tr><td style="width: 50px; height: 50px;"></td></tr> </table>																								
328	<p>Do you refer cases having side effect? 1. Yes 2. No → [Skip to 330]</p>	<table border="1" style="width: 100px; height: 100px; margin: auto;"> <tr><td style="width: 50px; height: 50px;"></td></tr> </table>																								
329	<p>Where do you refer side effect cases? آپ مضر اثرات والے کلائنٹس کو زیادہ تر کہاں بھیجتی ہیں؟</p> <ol style="list-style-type: none"> 1. Refer to RHS center 2. Refer to other Doctor 3. Other _____ (Specify) 	<table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td><td>2</td></tr> <tr><td>3</td><td>1</td><td>2</td></tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2												
	Yes	No																								
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330	<p>In last three months how many female sterilization cases did you refer and where did you refer? گزشتہ تین ماہ میں آپ نے کتنے نس بندی کے کیسز کو ریفر کیا اور کس جگہ ریفر کیا؟</p> <p>1. Refer to RHS center's Doctor 2. Refer to other Doctor 3. Other _____ (Specify)</p>	<p>Number of cases</p> <table border="1"> <tr> <td>1.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3.</td> <td></td> <td></td> <td></td> </tr> </table>	1.				2.				3.									
1.																				
2.																				
3.																				
330(a)	<p>For referral surgery cases, do you provide transportation to the clients? سرجری کیسز کے لئے ریفر کرتے ہوئے کیا آپ کلائنٹس کو ٹرانسپورٹ کی سہولت دیتی ہیں؟</p> <p>1. Transport from residence to hospital and back 2. From hospital to residence only 3. Fare paid to clients for public transport 4. No fare was paid to clients for public transport 5. Others _____ (Specify)</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td>2</td> </tr> <tr> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>3</td> <td>1</td> <td>2</td> </tr> <tr> <td>4</td> <td>1</td> <td>2</td> </tr> <tr> <td>5</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2
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331	<p>Do you maintain record of client dropouts? کیا آپ Dropout کلائنٹس کا ریکارڈ رکھتی ہیں؟</p> <p>1. Yes 2. No (334)</p>	<input type="checkbox"/>																		
332	<p>How many clients were dropped out in last year (July 2009 to June 2010)? گزشتہ سال کتنے کلائنٹس Drop ہوئے؟</p> <p>[RECORD ESTIMATED NUMBER, IF NO RECORD MAINTAINED]</p>	<table border="1"> <tr> <td></td> <td></td> </tr> </table>																		
333	<p>What are the main reasons of client dropouts? کلائنٹس DropOut کی اہم وجوہات کیا تھیں؟</p> <p>_____</p> <p>_____</p>	<table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>																		
334	<p>Do you or FWA-F conduct home visits for counseling/ motivation/ health education? کیا آپ یا خاندانی منصوبہ بندی کے متعلق ترغیب دینے اور صحت کی تعلیم کے لئے گھر گھر دورہ کرتی ہیں؟</p> <p>1. Yes 2. No → [Skip to 336]</p>	<input type="checkbox"/>																		
335	<p>In last 3-months how many visits were paid by: پچھلے تین ماہ کے دوران کتنے دورے کئے گئے؟</p>	<p>FWC: <table border="1"><tr><td></td><td></td></tr></table></p> <p>FWA(F): <table border="1"><tr><td></td><td></td></tr></table></p> <p>FWA(A): <table border="1"><tr><td></td><td></td></tr></table></p>																		

MATERNAL CARE:		
336	<p>How many clients visited this center during last 3 months for antenatal care? گزشتہ تین ماہ میں کتنے کلائنٹس نے Antenatal Care کیلئے مرکز کا دورہ کیا؟</p> <p>1. Actual Number 2. Estimated Number</p> <p>[RECORD ESTIMATED NUMBER IF RECORD NOT MAINTAINED]</p>	<input type="text"/> <input type="text"/> <input type="text"/> None Skip to 342
337	<p>Do you counsel for maternal nutrition? کیا آپ زچگی کے دوران خوراک کے حوالے سے مشورہ دیتی ہیں؟</p> <p>1. Yes 2. No</p>	<input type="text"/>
338	<p>Do you provide iron and folates tablets and treat anemic women? کیا آپ کمزور عورتوں کا علاج اور انہیں فولاد کی گولیاں فراہم کرتی ہیں؟</p> <p>1. Yes 2. No</p>	<input type="text"/>
339	<p>Do you recognize high risk pregnancy promptly? کیا آپ فوری طور پر حمل کی خطرناک علامات کی شناخت کر لیتی ہیں؟</p> <p>1. Yes 2. No</p>	<input type="text"/>
340	<p>How many complicated cases were referred by you in last 3 months? گزشتہ تین ماہ میں آپ نے کتنے پیچیدہ کیسز کو ریفر کیا؟</p> <p>1. Actual Number 2. Estimated Number</p> <p>[RECORD ESTIMATED NUMBER IF RECORD NOT MAINTAINED]</p>	<input type="text"/> <input type="text"/> <input type="text"/>
341	<p>Do you prepare/motivate pregnant women for breastfeeding? کیا آپ حاملہ عورتوں کو پنا دودھ پلانے کیلئے تامل کرتی ہیں؟</p> <p>1. Yes 2. No</p>	<input type="text"/>
342	<p>How many women came to you for post-partum care during last 3 months? گزشتہ تین ماہ میں کتنی خواتین نے بعد از زچگی دیکھ بھال کیلئے آپ سے رجوع کیا؟</p> <p>1. Actual Number 2. Estimated Number</p> <p>[RECORD ESTIMATED NUMBER IF RECORD NOT MAINTAINED]</p>	<input type="text"/> <input type="text"/> <input type="text"/> If None Skip to 346
343	<p>Did you manage women with post partum complications? کیا آپ بعد از زچگی پیچیدگیوں کا علاج کرتی ہیں؟</p> <p>1. Yes 2. No → [Skip to 345]</p>	<input type="text"/>

344	<p>What kind of complications did you manage? ان میں سے کونسی پیچیدگیوں کا انتظام کرتی ہیں؟</p> <p>1. Backache 2. Discharge 3. Bleeding 4. Other _____ (Specify)</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td>2</td> </tr> <tr> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>3</td> <td>1</td> <td>2</td> </tr> <tr> <td>4</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2
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345	<p>Where do you usually refer more complicated cases? آپ عموماً پیچیدہ کیسز کہاں بھیجتی ہیں؟</p> <p>1. Govt. Hospitals 2. Private Hospitals 3. Nearest Clinic 4. Other _____ (Specify)</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td>2</td> </tr> <tr> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>3</td> <td>1</td> <td>2</td> </tr> <tr> <td>4</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2
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3	1	2															
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346	<p>Did you counsel maternal nutrition for lactating mothers? کیا آپ دودھ پلانے والی ماؤں کو اچھی خوراک لینے کا مشورہ دیتی ہیں؟</p> <p>1. Yes 2. No → [Skip to 348]</p>	<input type="checkbox"/>															
347	<p>How many lactating mothers were provided counseling during last 3 months? گزشتہ تین ماہ کے دوران دودھ پلانے والی کتنی ماؤں کو یہ مشورہ دیا گیا؟</p> <p>1. Actual Number 2. Estimated Number [RECORD ESTIMATED NUMBER IF RECORD NOT MAINTAINED]</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>															
348	<p>Do you counsel lactating mother for Family Planning? کیا آپ دودھ پلانے والی ماؤں کو خاندانی منصوبہ بندی کا مشورہ دیتی ہیں؟</p> <p>1. Yes 2. No → [Skip to 350]</p>	<input type="checkbox"/>															
349	<p>What type of counseling did you mostly provide? آپ زیادہ تر کس قسم کا مشورہ دیتی ہیں؟</p> <p>1. Spacing 2. Limiting the birth 3. Other _____ (Specify)</p>	<input type="checkbox"/>															
CHILD CARE:																	
350	<p>How many children were provided child health care services during July 2009-June 2010? جولائی 2009 سے جون 2010 تک کتنے بچوں کو صحت کے حوالے سے خدمات فراہم کی گئیں؟</p> <p>[RECORD ESTIMATED NUMBER IF RECORD NOT MAINTAINED]</p>	<p>Neo-born Infants Child</p> <table border="1"> <tbody> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </tbody> </table>															

351	Do you provide immunization to the children? کیا آپ بچوں کو حفا ظقی ٹیکوں کی سہولت مہیا کرتی ہیں؟ 1. Yes 2. No → [Skip to 353]	<input type="checkbox"/>																					
352	How many infants did you provide immunization in last 3 months? گزشتہ تین ماہ میں کتنے شیرخوار بچوں کو حفا ظقی ٹیکے لگائے گئے؟ 1. Actual Number 2. Estimated Number [RECORD ESTIMATED NUMBER IF RECORD NOT MAINTAINED]	Number <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																					
353	Did you counsel on: کیا آپ ان معاملات پر مشورے دیتی ہیں؟ 1. Child Nutrition 2. Exclusive breastfeeding 3. Discourage formula milk 4. Timely and appropriate weaning 5. Parenting skills 6. Others _____ (Specify)	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td>2</td> </tr> <tr> <td>2</td> <td>1</td> <td>2</td> </tr> <tr> <td>3</td> <td>1</td> <td>2</td> </tr> <tr> <td>4</td> <td>1</td> <td>2</td> </tr> <tr> <td>5</td> <td>1</td> <td>2</td> </tr> <tr> <td>6</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2	6	1	2
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COMMUNITY ACTIVITIES																							
354	Do you arrange health talks? کیا آپ صحت کے موضوع پر گفتگو کا اہتمام کرتی ہیں؟ 1. Yes 2. No → [Skip to 356]	<input type="checkbox"/>																					
355	What topics are discussed? کن موضوعات پر گفتگو کی جاتی ہے؟ _____ _____ _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																					
355(a)	How many health talk were arranged during the period July 2009-June 2010 جولائی 2009 سے جون 2010 تک صحت کے موضوع پر کتنی مرتبہ گفتگو کا اہتمام کیا گیا؟ 1. Actual 2. Estimated [RECORD ESTIMATED NUMBER, IF NO RECORD IS MAINTAINED]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																					
356	Did your centre arrange Sukhi Ghar Mehfil in the community? کیا آپ علاقے میں سکھی گھر محفلیں منعقد کرتی ہیں؟ 1. Yes 2. No → [Skip to 358]	<input type="checkbox"/>																					

357	<p>How many Sukhi Ghar Mehfiles were arranged during the period July 2009-June 2010?</p> <p>جولائی 2009 سے جون 2010 کے دوران کتنی سکھی گھر محفلیں منعقد کی گئیں؟</p> <p>1. Actual Number 2. Estimated Number</p> <p>[RECORD ESTIMATED NUMBER IF RECORD NOT MAINTAINED]</p>	<input type="text"/> <input type="text"/> <input type="text"/>
358	<p>Did your centre arrange Mohallah Sangat in the community?</p> <p>کیا آپ نے علاقے میں محلہ سنگت منعقد کی؟</p> <p>1. Yes 2. No → [Skip to 360]</p>	<input type="checkbox"/>
359	<p>If yes, how many Mohallah Sangat were arranged during the period July 2009-June 2010?</p> <p>جولائی 2009 سے جون 2010 کے دوران کتنی محلہ سنگت منعقد کی گئیں؟</p> <p>1. Actual Number 2. Estimated Number</p> <p>[RECORD ESTIMATED NUMBER IF RECORD NOT MAINTAINED]</p>	<p style="text-align: right;">Number</p> <input type="text"/> <input type="text"/> <input type="text"/>
360	<p>How many DAIs did you meet for promotion of reproductive health or family planning services during the period July 2009-June 2010?</p> <p>جولائی 2009 سے جون 2010 کے دوران آپ نے خاندانی منصوبہ بندی یا تولیدی صحت کی خدمات کے فروغ کیلئے کتنی دائیوں سے ملاقات کی؟</p> <p>[RECORD '00' IF NONE]</p>	<input type="text"/> <input type="text"/>
361	<p>How many religious women did you meet for promotion of reproductive health or family planning during the period July 2009-June 2010?</p> <p>جولائی 2009 سے جون 2010 کے دوران آپ نے خاندانی منصوبہ بندی یا تولیدی صحت کی خدمات کے فروغ کیلئے کتنی مذہبی عورتوں سے ملاقات کی؟</p> <p>[RECORD '00' IF NONE]</p>	<input type="text"/> <input type="text"/>
362	<p>How many lady health workers did you meet for promotion of reproductive health or family planning during the period July 2009-June 2010?</p> <p>جولائی 2009 سے جون 2010 کے دوران آپ نے خاندانی منصوبہ بندی یا تولیدی صحت کی خدمات کے فروغ کیلئے کتنی لیدی ہیلتھ ورکرز سے ملاقات کی؟</p> <p>[RECORD '00' IF NONE]</p>	<input type="text"/> <input type="text"/>
363	<p>How many Community Influential persons did you meet for promotion of reproductive health or family planning services during the period July 2009-June 2010?</p> <p>جولائی 2009 سے جون 2010 کے دوران آپ نے خاندانی منصوبہ بندی یا تولیدی صحت کی خدمات کے فروغ کیلئے کتنے بااثر لوگوں سے ملاقات کی؟</p> <p>[RECORD '00' IF NONE]</p>	<input type="text"/> <input type="text"/>
364	<p>On average how many satellite clinics are arranged in a month?</p> <p>اوسطاً ایک مہینے میں کتنے سیٹیلٹ کلینکس کا اہتمام کیا جاتا ہے؟</p> <p>Total Satellite clinics arranged _____</p>	<input type="text"/>

365	As per SOP, how many satellite clinics are to be arranged in a month? SOP کے مطابق ایک مہینے میں کتنے سیٹلائٹ کلینکس لگانے چاہئیں؟ Total Satellite clinics arranged _____	<input type="text"/>																							
366	How many refresher trainings you have attended at RTI since July 2009-June 2010? جولائی 2009 سے جون 2010 کے دوران آپ نے کتنی ریفریشر ٹریننگز میں شرکت کی؟	<input type="text"/> <input type="text"/> IF '00' SKIP TO 370																							
367	Are you satisfied with refresher training? کیا آپ ریفریشر ٹریننگز سے مطمئن ہیں؟ 1. Yes → [Skip to 369] 2. No	<input type="text"/>																							
368	State reasons for dissatisfaction? غیر مطمئن ہونے کی وجوہات بیان کریں؟ _____ _____ _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>																							
369	Do you have any inspections during July 2009- June 2010? کیا جولائی 2009 سے جون 2010 کے دوران آپ کا معائنہ ہوا ہے؟ 1. Yes 2. No → [Skip to Section-IV]	<input type="text"/>																							
370	Inspections by the following during July 2009-June 2010; جولائی 2009 سے جون 2010 کے دوران نگرانی کے دوروں کی تفصیلات بیان کریں؟																								
	<table border="1"> <thead> <tr> <th></th> <th>Number of visits</th> <th>Any remarks by officers and observation</th> </tr> </thead> <tbody> <tr> <td>TPWO</td> <td></td> <td></td> </tr> <tr> <td>DPWO</td> <td></td> <td></td> </tr> <tr> <td rowspan="3">Officers from PWD</td> <td>1.</td> <td></td> </tr> <tr> <td>2.</td> <td></td> </tr> <tr> <td>3.</td> <td></td> </tr> <tr> <td rowspan="3">Officers from MoPW</td> <td>1.</td> <td></td> </tr> <tr> <td>2.</td> <td></td> </tr> <tr> <td>3.</td> <td></td> </tr> </tbody> </table>		Number of visits	Any remarks by officers and observation	TPWO			DPWO			Officers from PWD	1.		2.		3.		Officers from MoPW	1.		2.		3.		
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	2.																								
	3.																								
NOTE: PLEASE ATTACH A COPY OF INSPECTION REPORT.																									

SECTION-IV

Problems	Recommendations
1. Facilities (Overall)	
2. Location of centre	
3. Manpower/Staff	
4. Supply of medicines and IEC material	
5. Contraceptive Supply	
6. Prices of contraceptives	
7. Incentives	
8. Job Career	
9. Delegating Power In-charge	
10. Responsibilities	
11. Funds (Shortage Sufficient)	
12. Disbursement of Salaries (on time or delay)	
13. Disbursement of TA/DA (on time or delay)	
14. Supervision and management by authority	
15. Transport of referrals,	
16. Others	

INTERVIEWER'S OBSERVATIONS:

END TIME

--	--	--	--

Hours Minutes

Name of Interviewer: _____

Processing Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Province	FWC			Client No.	

**EVALUATION AND ASSESSMENT OF QUALITY OF CARE AT
FAMILY WELFARE CENTRES
(EAQCFWCs, 2010-11)**

QUESTIONNAIRE

MODULE – II

FEMALE CLIENT'S PERCEPTION



**NATIONAL INSTITUTE OF POPULATION STUDIES
House No. 485, Street No. 9, F-10/2, ISLAMABAD
(Phone No. 051-9267113)**

Processing code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Province	FWC	Client No.	

Date of Interview

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day		Month		Year		

Time of start

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hours		Minutes	

IDENTIFICATION					
1.	Province/ Region	1. Punjab 2. Sindh 3. KPK 4. Balochistan	5. Gilgit-Baltistan 6. Islamabad 7. AJK	<input type="text"/>	
2.	District	-----		<input type="text"/>	
3.	Tehsil	-----			
4.	Area/ Residence	1. Urban 2. Rural		<input type="text"/>	
5.	Sampled FWC	Name of In-charge: -----		<input type="text"/>	
		Address of Centre: ----- -----			
6 (a).	Sampled Client	Name & Address; ----- -----		1=Registered 2=Exit <input type="text"/>	
6(b).	Client Number	Client Number on Register of FWC		<input type="text"/>	
6(c).		Methods using by client as per register of centre: 1. Female sterilization 2. Male Sterlization 3. Pills 4. IUCD 5. Injectables 6. Implants 7. Condom		<input type="text"/>	
7.	Result	1. Completed 2. Incomplete 3. Not at home 4. Client refused 5. Others (Specify)		<input type="text"/>	
CODES:-		Supervisor <input type="text"/>	Interviewer <input type="text"/>	Office Editor <input type="text"/>	Keyed By <input type="text"/>

SECTION – I
BACKGROUND CHARACTERISTICS

No.	Questions and Filters	Coding categories
101	What is your date of birth? آپ کی تاریخ پیدائش کیا ہے؟	Day <input type="text"/> <input type="text"/> 1. Day and month Month <input type="text"/> <input type="text"/> DK=98 Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 2. DK year=9998
101 (a)	How old are you? آپ کی عمر کیا ہے؟ Age in completed years	<input type="text"/> <input type="text"/>
102	What is your education? آپ کی تعلیم کیا ہے؟ 1. No education <input type="checkbox"/> → [Skip to 103] 2. Informal education <input type="checkbox"/> 3. Formal education <input type="checkbox"/> Number of Classes Passed: 00 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 → [Skip to 104]	<input type="text"/> <input type="text"/> <input type="text"/>
103	Can you read and write a simple letter with full understanding? کیا آپ ایک سادہ خط سمجھ کے ساتھ لکھ اور پڑھ سکتے ہیں؟ 1. Yes 2. No	<input type="text"/>
104	What is your husband's education? آپ کے شوہر کی تعلیم کیا ہے؟ 1. No education <input type="checkbox"/> → [Skip to 105] 2. Informal education <input type="checkbox"/> 3. Formal education <input type="checkbox"/> 8. Don't Know <input type="checkbox"/> Number of Classes Passed; 00 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 → [Skip to 106]	<input type="text"/> <input type="text"/> <input type="text"/> DK=98
105	Can your husband read and write a simple letter with full understanding? کیا آپ کے شوہر ایک سادہ خط سمجھ بوجھ کے ساتھ پڑھ اور لکھ سکتے ہیں؟ 1. Yes 2. No 8. Don't know	<input type="text"/>
106	Are you currently doing any work for which you are being paid? کیا آپ آجکل کوئی کام کر رہی ہیں جس کا آپ کو معاوضہ ملتا ہے؟ 1. Yes 2. No → [Skip to 107]	<input type="text"/>

106 (a)	What kind of work do you mainly do? Kind of work/occupation; _____	آپ زیادہ تر کون سا کام کرتی ہیں؟ Occupation code	<input type="text"/>
107	Your age when you (first) got married? (پہلی شادی کے وقت آپ کی عمر کیا تھی؟)	Completed years	<input type="text"/>
108	What was your husband's age when you (first) got married? (پہلی شادی کے وقت آپ کے شوہر کی عمر کتنی تھی؟)	Completed years	<input type="text"/>
109	How many live births have you had? (Please be sure include all the children you have given birth to, even if some survived for a short time) آپ نے کتنے زندہ بچوں کو جنم دیا؟ [If '00' live birth, Skip to 111]	Boys Girls Total	<input type="text"/>
110	How many of your children are living now? اب آپ کے کتنے زندہ بچے ہیں؟	Boys Girls Total	<input type="text"/>
110 (a)	Check Q6(c) Not sterilized <input type="checkbox"/> Sterilized <input type="checkbox"/> →	201	
111	Are you pregnant now? 1. Yes 2. No 3. Not Sure کیا آپ آج کل حاملہ ہیں؟		<input type="text"/>
112	Do you want to have more children in future? (in addition to the one you are expecting now) 1. Yes 2. No 3. Upto God 4. Not Decided کیا آپ مستقبل میں مزید بچے چاہتی ہیں؟ [Skip to 201]		<input type="text"/>
113	How many daughters and sons do you want? آپ کتنی بیٹیاں اور کتنے بیٹے چاہتی ہیں؟	Number Boys Girls Either Other _____ 96 (Specify)	<input type="text"/>

**SECTION-II
QUALITY OF SERVICES**

No.	Question & Filters	Coding Categories																																				
201	<p>Do you know that there is a Family Welfare Centre (FWC) working in your area? کیا آپ جانتی ہیں کہ آپ کے علاقے میں کوئی فلاحی مرکز کام کر رہا ہے؟</p> <p>1. Yes 2. No → [END INTERVIEW-FAKE CASE]</p>	<input type="checkbox"/>																																				
202	<p>How did you come to know about this FWC which is located in your area? آپ کو اپنے علاقے کے فلاحی مرکز کے بارے میں کہاں سے پتا چلا؟</p> <p>1. Family Welfare Worker/Councilor of this centre 2. Family Welfare Assistant of this centre 3. Male/Social Mobilizer 4. Another Acceptor 5. Husband 6. Friends/ Relatives 7. Doctors 8. Paramedics 9. Print media 10. Electronic media 11. Others _____ (Specify)</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td><td>2</td></tr> <tr><td>3</td><td>1</td><td>2</td></tr> <tr><td>4</td><td>1</td><td>2</td></tr> <tr><td>5</td><td>1</td><td>2</td></tr> <tr><td>6</td><td>1</td><td>2</td></tr> <tr><td>7</td><td>1</td><td>2</td></tr> <tr><td>8</td><td>1</td><td>2</td></tr> <tr><td>9</td><td>1</td><td>2</td></tr> <tr><td>10</td><td>1</td><td>2</td></tr> <tr><td>11</td><td>1</td><td>2</td></tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2	6	1	2	7	1	2	8	1	2	9	1	2	10	1	2	11	1	2
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203	<p>Did you ever visit this FWC? کیا آپ نے کبھی فلاحی مرکز کا دورہ کیا؟</p> <p>1. Yes → [Skip to 205] 2. No</p>	<input type="checkbox"/>																																				

204	<p>Why did you not visit FWC so far? آپ نے ابھی تک فلاحی مرکز کا دورہ کیوں نہیں کیا؟</p> <p>Reasons for not visiting FWC (Multiple)</p> <ol style="list-style-type: none"> 1. No knowledge of services available at FWC 2. Never needed services 3. Want more children 4. Contraceptives are against Islam 5. Contraceptives are immoral 6. Contraceptives are unnatural 7. Fear of side effects of FP Methods 8. FWC's location is not suitable 9. Visit/attend another service provider 10. Services were provided at door-step 11. Others _____ (Specify) 	<table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td><td>2</td></tr> <tr><td>3</td><td>1</td><td>2</td></tr> <tr><td>4</td><td>1</td><td>2</td></tr> <tr><td>5</td><td>1</td><td>2</td></tr> <tr><td>6</td><td>1</td><td>2</td></tr> <tr><td>7</td><td>1</td><td>2</td></tr> <tr><td>8</td><td>1</td><td>2</td></tr> <tr><td>9</td><td>1</td><td>2</td></tr> <tr><td>10</td><td>1</td><td>2</td></tr> <tr><td>11</td><td>1</td><td>2</td></tr> </tbody> </table> <p style="text-align: center;">Skip to 205(a)</p>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2	6	1	2	7	1	2	8	1	2	9	1	2	10	1	2	11	1	2
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205	<p>Who advised you first to attend/visit this FWC? آپ کو اس فلاحی مرکز میں جانے کیلئے سب سے پہلے کس نے مشورہ دیا؟</p> <ol style="list-style-type: none"> 01. FWW/C of this centre 02. FWA of this centre 03. Male/Social Mobilizer 04. Another Acceptor/client 05. Husband 06. Friends/relatives 07. Doctor 08. Paramedics 09. TBA/Dai 10. LHW 11. Others (specify)..... 	<table border="1" style="width: 100%; height: 100px;"> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> </table>																																				
205 (a)	<p>Did staff of FWC ever visit you at home? کیا کبھی فلاحی مرکز کے عملے نے آپ کے گھر کا دورہ کیا؟</p> <ol style="list-style-type: none"> 1. FWW/C visited 2. FWA Visited 3. Others..... 	<table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> </tbody> </table>	YES	NO	1	2	1	2	1	2																												
YES	NO																																					
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205 (b)	<p>Check 203 and 205(a)</p> <p style="text-align: center;">Any Yes <input type="checkbox"/> Else <input type="checkbox"/> → END OF INTERVIEW</p> <p style="text-align: center;">↓</p>																																					
206	<p>What did they discuss during home visit? اپنے دورے کے دوران انہوں نے کیا بات چیت کی تھی؟</p> <p>_____</p> <p>_____</p> <p>_____</p>	<table border="1" style="width: 100%; height: 100px;"> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> <tr><td style="width: 50%;"></td><td style="width: 50%;"></td></tr> </table>																																				

207	<p>Which of the other FP method(s) was (were) advised you by the staff of FWC?</p> <p>فلاجی مرکز کے عملے نے کن طریقوں کے بارے میں مشورہ دیا تھا؟</p> <p>01. Female sterilization 02. Male sterilization 03. Pill 04. IUCD 05. Injectables 06. Implants 07. Condom 08. Emergency Contraception 09. Rhythm 10. Withdrawal 11. Folk methods 12. Other-----</p> <p>(Specify)</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td><td>2</td></tr> <tr><td>3</td><td>1</td><td>2</td></tr> <tr><td>4</td><td>1</td><td>2</td></tr> <tr><td>5</td><td>1</td><td>2</td></tr> <tr><td>6</td><td>1</td><td>2</td></tr> <tr><td>7</td><td>1</td><td>2</td></tr> <tr><td>8</td><td>1</td><td>2</td></tr> <tr><td>9</td><td>1</td><td>2</td></tr> <tr><td>10</td><td>1</td><td>2</td></tr> <tr><td>11</td><td>1</td><td>2</td></tr> <tr><td>12</td><td>1</td><td>2</td></tr> </tbody> </table>		Yes	No	1	1	2	2	1	2	3	1	2	4	1	2	5	1	2	6	1	2	7	1	2	8	1	2	9	1	2	10	1	2	11	1	2	12	1	2
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208	<p>Did they explain merits (effectiveness) and demerits (side effects) of the F.P methods during your first visit at FWC?</p> <p>کیا آپ کے پہلے فلاجی مرکز کے دورے کے دوران مرکز کے عملے نے خاندانی منصوبہ بندی کے طریقوں کے فوائد اور مضر اثرات کے بارے میں بتایا تھا؟</p> <p>1. Merits 2. Demerits</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>1</td><td>2</td></tr> <tr><td>2</td><td>1</td><td>2</td></tr> </tbody> </table> <p>If all no skip to 211</p>		Yes	No	1	1	2	2	1	2																														
	Yes	No																																							
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2	1	2																																							
209	<p>Can you explain right now the <u>merits</u> of the FP methods told by centre's staff?</p> <p>کیا آپ وضاحت کر سکتے ہیں کہ مرکز کے عملے نے منصوبہ بندی کے طریقوں کے کیا فوائد بیان کیے تھے؟</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>[Record "00", If no merits explained]</p>	<table border="1"> <tbody> <tr><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td></tr> </tbody> </table>																																							
210	<p>Can you explain right now the <u>demerits</u> of the FP methods told by centre's staff?</p> <p>کیا آپ وضاحت کر سکتے ہیں کہ خاندانی منصوبہ بندی کے طریقوں کے کیا مضر اثرات بیان کیے تھے؟</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>[Record "00", If no demerits explained]</p>	<table border="1"> <tbody> <tr><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td></tr> </tbody> </table>																																							

As you told that you used contraceptive method/s, please tell me for each method, the main reason to choose and prefer it, how long did you use it and if changed or dropped, the main reason to change or drop? Please start from the first method.

جیسا کہ آپ نے بتایا کہ آپ نے _____ طریقہ استعمال کیا/کئے۔ برائے مہربانی مجھے ہر طریقہ کے بارے میں بتائیں کہ آپ نے وہ طریقہ خاص طور پر کیوں منتخب کیا۔ آپ نے اسے کتنا کرصہ استعمال کیا اور اگر تبدیل کیا یا چھوڑا تو چھوڑنے یا تبدیل کرنے کی سب سے اہم وجہ کیا تھی؟ (برائے مہربانی پہلے طریقہ سے بتانا شروع کریں)

S.#	Method (Code A)	Main reason for choice/preference (Code B)	Period of use in months (if less than one month record "00")	1. Current User Skip to next method 2. Method dropped 3. Method changed	Main reason to drop or change (Code E)
	(A)	(B)	(C)	(D)	(E)
01					
02					
03					
04					
05					

Codes for Column A

01. Female sterilization
02. Male sterilization
03. Pill
04. IUCD
05. Injectables
06. Implants
07. Condom
08. Emergency Contraception
09. Rhythm
10. Withdrawal
11. Folk methods

Codes for column B

01. Method has less /no side-effects
02. Method is effective
03. No other methods were available
04. FWW recommended
05. Another acceptor
06. Husband
07. Friend or relative
08. Chose the method on the basis of information from media
09. No knowledge about other methods
10. Others _____

(Specify)

Codes for column E

1. Wanted more children
2. Side effects
3. Health Problems
4. Methods of choice/supply was not available
5. Method is not effective
6. Husband did not like the method
7. FWW recommended
8. Some-one else recommended
9. Others _____

(Specify)

212	<p>Are you currently using any family planning method? کیا آپ آجکل خاندانی منصوبہ بندی کا کوئی طریقہ استعمال کر رہی ہیں؟</p> <p>1. Yes 2. No → [Skip to 219]</p>	<input type="checkbox"/>																
213	<p>What is that method? وہ طریقہ کیا ہے؟</p> <p>01. Female sterilization 02. Male sterilization 03. Pill 04. IUCD 05. Injectables 06. Implants 07. Condom 08. Emergency Contraception 09. Rhythm 10. Withdrawal 11. Folk methods 12. Other----- (Specify)</p>	<input type="checkbox"/>																
214	<p>Why did you make a choice of that method for current use? آپ نے موجودہ طریقہ کو کس بنا پر منتخب کیا؟</p> <p>1. Method has less /no side-effects 2. Method is effective 3. Methods of choice is not available Methods was recommended by: 4. FWW 5. Another acceptor 6. Husband 7. Friend or relative 8. Chose the method myself on the basis of information from media 9. Others _____ (Specify)</p>	<input type="checkbox"/>																
215	<p>Do you always get the supplies of methods when needed? کیا ضرورت پڑنے پر ہمیشہ آپ کو طریقے ملتا ہے؟</p> <p>1. Yes 2. No</p>	<input type="checkbox"/>																
216	<p>Have you ever experience of side-effects/problems with FP method which you are presently using? کیا آپ کو کبھی اپنے موجودہ طریقے کے مضر اثرات کا تجربہ ہوا؟</p> <p>1. Yes 2. No → [Skip to 222]</p>	<input type="checkbox"/>																
217	<p>What major side effect (s)/problem (s) did you experience? وہ کون سے بڑے مضر اثرات ہیں جن کا آپ کو تجربہ ہوا؟</p> <p>1. Obesity weight gain 2. Headaches 3. Nausea/Dizziness 4. Irregular bleeding 5. Irregular Menses/no menses 6. Psychological 7. Others _____ (Specify)</p>	<table border="1"> <thead> <tr> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> </tbody> </table>	Yes	No	1	2	1	2	1	2	1	2	1	2	1	2	1	2
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218	<p>Are you seeking medical advice or taking some treatment in this regard from the FWC? کیا آپ اس سلسلے میں فلاحی مرکز سے کوئی مشورہ یا علاج کروا رہی ہیں / کر دیا تھا؟</p> <p>1. Getting treatment from FWC 2. Getting treatment from other service provider 3. Not getting any treatment</p>	<table border="1"> <thead> <tr> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> </tbody> </table> <p>Skip to 222</p>	Yes	No	1	2	1	2	1	2								
Yes	No																	
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219	<p>Would you use a contraceptive method in future? کیا آپ مستقبل میں کوئی مانع حمل طریقہ استعمال کریں گی؟</p> <p>1. Yes 2. No <input type="checkbox"/> → [Skip to 221] 3. Not decided <input type="checkbox"/></p>	<input type="checkbox"/>																																																																				
220 (a)	<p>Which method would you like to use? آپ کون سا طریقہ استعمال کرنا پسند کریں گی؟</p> <p>01. Female sterilization 02. Male sterilization 03. Pill 04. IUCD 05. Injectables 06. Implants 07. Condom 08. Emergency Contraception 09. Withdrawal 10. Rhythm 11. Folk 12. Other _____ (Specify)</p>	<input type="checkbox"/> <input type="checkbox"/>																																																																				
221	<p>Does FWC staff home visits to keep in touch with you for motivation or advising you to restart contraception in future when needed? کیا فلاحی مرکز کا عملہ آپ کو منصوبہ بندی کے استعمال پر راغب کرنے کیلئے رابطے میں رہتا ہے یا آپ کو ضرورت پڑنے پر مستقبل میں مانع حمل ادویات کے دوبارہ استعمال کا مشورہ دیتا ہے؟</p> <p>1. Yes 2. No</p>	<input type="checkbox"/>																																																																				
222	<p>Are you satisfied with the following services of this FWC? (Record all mentioned) کیا آپ اس فلاحی مرکز کی درج ذیل خدمات سے مطمئن ہیں؟ (تمام خدمات کے بارے میں پوچھیں)</p> <p>1. Provision of contraceptives 2. Follow-up care 3. Home visits by FWW/C & FWA (F) 4. Cleanliness 5. Infection prevent 6. Counseling services 7. Waiting place 8. Timely treatment 9. Attitude of In-charge 10. Attitude of FWA (F) 11. Punctuality maintained by staff 12. Timely referring 13. Cooperative 14. Handle complications promptly 15. IEC material distribution 16. Others _____</p>	<table border="1"> <thead> <tr> <th>Yes</th> <th>No</th> <th>Not Received</th> <th>DK</th> </tr> </thead> <tbody> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>8</td></tr> </tbody> </table>	Yes	No	Not Received	DK	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8	1	2	3	8
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223	<p>Do you know that FWC organized different shows at community level? کیا آپ جانتی ہیں کہ فلاحی مرکز کیوںٹی کی سطح پر مختلف شوز کرواتا ہے؟</p> <p>1. Sukhi Ghar Mehfil 2. Mohallah Sangat 3. Baby Show 4. Cultural Carft 5. Other _____ (Specify)</p>	<table border="1"> <thead> <tr> <th>Yes</th> <th>No</th> <th>DK</th> </tr> </thead> <tbody> <tr><td>1</td><td>2</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>8</td></tr> <tr><td>1</td><td>2</td><td>8</td></tr> </tbody> </table>	Yes	No	DK	1	2	8	1	2	8	1	2	8	1	2	8	1	2	8																																																		
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[IF NOT A SINGLE "YES" SKIP TO 225]

224	<p>Did you ever attend such activity organized by FWC? کیا آپ نے فلاحی مرکزی طرف سے منعقد کی گئی اس قسم کی سرگرمی میں شرکت کی، اگر کی تو پچھلے 6 ماہ میں کتنی مرتبہ شمولیت کی؟</p> <ol style="list-style-type: none"> 1. Sukhi Ghar Mehfil _____ 2. Mohallah Sangats _____ 3. Baby Shows _____ 4. Cultural Crafting _____ 5. Other _____ <p>(Specify)</p>	<table border="1"> <thead> <tr> <th>Yes</th> <th>No</th> <th>DK</th> <th>No. of times</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>1</td> <td>2</td> <td>8</td> <td></td> </tr> </tbody> </table>	Yes	No	DK	No. of times	1	2	8		1	2	8		1	2	8		1	2	8		1	2	8																																					
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225	<p>Do you know that the staff of FWC charges for:- کیا آپ جانتی ہیں کہ فلاحی مرکز کا عملہ کلائنٹس سے پیسے لیتا ہے؟</p> <p>(Methods Per Unit /Rs)</p> <ol style="list-style-type: none"> 1. Pills _____ 2. Condom _____ 3. Injectables _____ 4. IUCD _____ 5. Reproductive Health Services _____ 6. General ailment _____ 7. Others _____ <p>(Specify)</p>	<p>Rs.</p> <table border="1"> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> <p>IF NOT CHARGED RECORD "000.00"</p> <p>DK=999.98</p>																																																												
226	<p>Do you think the information provided by centre's staff was useful for people of this community? کیا آپ سمجھتی ہیں کہ فلاحی مرکز کے عملے کی مہیا کردہ معلومات علاقے کے لوگوں کے لیے فائدہ مند ہیں؟</p> <ol style="list-style-type: none"> 1. Useful 2. Not useful 3. DK <p>→ [Skip to 228]</p>	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto;"></div>																																																												
227	<p>Explain if useful? اگر مفید ہیں تو وضاحت کریں؟</p> <p>_____</p> <p>_____</p> <p>_____</p>																																																													
228	<p>Explain if not useful? اگر مفید نہیں ہیں تو وضاحت کریں؟</p> <p>_____</p> <p>_____</p> <p>_____</p>																																																													

SECTION-III
SUGGESSTIONS AND OBSERVATIONS

S.#		
301	<p>What are shortcomings relating to FWC's Quality of Service and behavior of Staff (If any)</p> <p align="center">فلائی مرکز کی خدمات کے معیار اور عملے کے رویے سے متعلق خامیاں کیا ہیں؟</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<div style="text-align: right;"> <input type="checkbox"/><input type="checkbox"/> <input type="checkbox"/><input type="checkbox"/> </div>
302	<p>Suggestions for the improvement of FWC (If any)</p> <p align="center">فلائی مرکز کو بہتر بنانے کے لیے مشورے (اگر ہیں تو)</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <p>Interviewer's Observation;</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<div style="text-align: right;"> <input type="checkbox"/><input type="checkbox"/> <input type="checkbox"/><input type="checkbox"/> </div>

END TIME

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Hours Minutes

Name of Interviewer: _____

Processing Code

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Prov

FWC

C/P

**EVALUATION AND ASSESSMENT OF QUALITY OF CARE AT
FAMILY WELFARE CENTRES
(EAQCFWCs, 2010-11)**

QUESTIONNAIRE

MODULE – III

**COMMUNITY PERSON
(Ever Married Male/Female)**



**NATIONAL INSTITUTE OF POPULATION STUDIES
House No. 485, Street No. 9, F-10/2, ISLAMABAD
(Phone No. 051-9267113)**

Processing Code

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Prov	FWC	C/P		

Date of Interview

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Day		Month		Year			

Time of start

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hours		Minutes	

IDENTIFICATION

1.	Province/Region 1. Punjab 5. Gilgit-Baltistan 2. Sindh 6. Islamabad 3. KPK 7. AJK 4. Balochistan	<input type="checkbox"/>		
2.	District: _____	<input type="text"/>		
3.	Tehsil: _____	<input type="text"/>		
4.	Sampled FWC _____	<input type="text"/>		
5.	Name and Address of Community Person: _____ _____	Community person <input type="checkbox"/>		
6.	Gender 1. Male 2. Female	<input type="checkbox"/>		
7.	Result: 1. Completed 2. Incomplete 3. Other _____ (Specify)	<input type="checkbox"/>		
CODES:-	Supervisor <input type="text"/>	Interviewer <input type="text"/>	Office Editor <input type="text"/>	Keyed By <input type="text"/>

SECTION-I

BACKGROUND INFORMATION

No.	Questions and Filters		Coding Categories/ Skip
101	How old are you? آپ کی عمر کیا ہے؟	Age in completed years: -----	<input type="text"/> <input type="text"/> DK=98
102	What is your current marital status آپ کی موجودہ ازدواجی حیثیت کیا ہے؟	Currently Married1 Widowed.....2 Divorced.....3 Separated4	<input type="text"/>
103	Have you ever attended school? کیا آپ نے کبھی اسکول میں تعلیم حاصل کی؟	Yes.....1 No2 → Skip 105	<input type="text"/>
104	What highest class you have passed? آپ نے آخری کون سی جماعت پاس کی؟ Write '00' if class 1 not passed. 01,02,03,04,05,06,07,08,09,10,11,12,13,14,15 Write '16' = MA, MPhil, PhD., MBBS.	Class	<input type="text"/> <input type="text"/>
105	Are you currently doing any work other than domestic work for which you are being paid? کیا آپ گھر بیرون کام کے علاوہ کوئی ایسا کام کرتی ہیں جس کا آپ کو معاوضہ ملتا ہے؟	Yes1 No.....2 → Skip 106	
105 (a)	What is your occupation? آپ کا پیشہ کیا ہے؟	Kind of work/occupation _____	<input type="text"/> <input type="text"/>
106	Is there any Family Welfare Centre in your community? کیا آپ کے علاقے میں کوئی فلاحی مرکز موجود ہے؟	Yes.....1 No2 DK8 → End Interview	<input type="text"/>
107	Where is that centre? وہ مرکز کہاں ہے؟ Address: _____ _____		FWC code <input type="text"/> <input type="text"/> <input type="text"/>
	[MATCHED WITH SAMPLED FWC'S CODE]		
108	Whether any of the staff of Family Welfare Centre ever visited this community? کیا فلاحی مرکز کے عملے نے کبھی اس علاقے کا دورہ کیا؟	Yes.....1 No2 DK8	<input type="text"/>

109	Did you ever visit FWC? کیا آپ کبھی فلاحی مرکز گئے/ گئیں؟	Yes.....1 No2 → Skip 114a	<input type="checkbox"/>
110	Have you ever accompanied any client to FWC? کیا آپ کبھی کسی کلائنٹ کو فلاحی مرکز لے کر گئے/ گئیں ہیں؟	Yes.....1 No2	<input type="checkbox"/>
111	Is there privacy maintained by In-charge? کیا انچارج نے وہاں پردے کا انتظام کیا ہوا ہے؟	Yes.....1 No2 DK8	<input type="checkbox"/>
112	Did you find the centre's staff always present when you visited? جب آپ مرکز گئے/ گئیں تو وہاں عملہ موجود تھا؟	Yes always.....1 Some times2 No3 DK8	<input type="checkbox"/>
113	Did the staff provide the information properly to clients? کیا عملہ نے مناسب معلومات مہیا کیں تھیں؟	Yes.....1 No2 DK8	<input type="checkbox"/>
114	Did you find cleanliness? کیا وہاں صفائی تھی؟	Yes.....1 No2 DK8	<input type="checkbox"/>
114(a)	Check Q102 Currently Married <input type="checkbox"/> Else (Widowed, Divorced, Separated) <input type="checkbox"/> → 118		
114(b)	Check Q109 Never Visited FWC <input type="checkbox"/> Visited FWC <input type="checkbox"/> → 118		
115	Do you plan to go FWC for getting services? کیا آپ نے فلاحی مرکز سے خدمات لینے کے بارے میں سوچا ہے؟	Yes.....1 No2 → Skip 117 DK8 → Skip 118	<input type="checkbox"/>
116	Why do you plan to go FWC for getting services? آپ نے فلاحی مرکز سے خدمات لینے کے بارے میں کیوں سوچا ہے؟	_____ _____ _____	<input type="checkbox"/>
117	Why you do not plan to go FWC for getting services? آپ نے فلاحی مرکز سے خدمات لینے کے بارے میں کیوں نہیں سوچا ہے؟	_____ _____ _____	<input type="checkbox"/>

125	<p>Why the information is not useful? یہ معلومات کیوں مفید نہیں ہوتی ہیں؟</p> <hr/> <hr/> <hr/>	<table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>				
126	<p>Please give suggestions for improving the working of FWC? فلاحی مرکز کی کارکردگی کو بہتر بنانے کے لئے تجاویز دیں؟</p> <hr/> <hr/> <hr/>	<table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>				
127	<p>What are your suggestions for improving family planning programme? خاندانی منصوبہ بندی کے پروگرام کو بہتر بنانے کے لئے آپ کی کیا تجاویز ہیں؟</p> <hr/> <hr/> <hr/>	<table border="1"> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </table>				
<p>Interviewer's Observation:</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>						

END TIME

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Hours Minutes

Name of Interviewer: _____

Processing Code

Province District DPWO/TPWO

**EVALUATION AND ASSESSMENT OF QUALITY OF CARE AT
FAMILY WELFARE CENTRES
(EAQCFWCs, 2010-11)**

QUESTIONNAIRE

**MODULE – IV
SUPERVISION & MONITORING
BY
DPWOs/TPWOs**



**NATIONAL INSTITUTE OF POPULATION STUDIES
House No. 485, Street No. 9, F-10/2, ISLAMABAD
(Phone No. 051-9267113)**

Processing code

 Province District DPWO/TPWO

Date of Interview

 Day Month Year

Time of start

 Hours Minutes

IDENTIFICATION					
1.	Province/Region 1. Punjab 5. Gilgit-Baltistan 2. Sindh 6. Islamabad 3. KPK 7. AJK 4. Balochistan	<input style="width: 40px; height: 40px;" type="checkbox"/>			
2.	District: -----	<input style="width: 60px; height: 30px;" type="checkbox"/>			
3.	Tehsil: -----	<input style="width: 60px; height: 30px;" type="checkbox"/>			
4.	Name of DPWO/TPWO: ----- 1. DPWO 2. TPWO	<input style="width: 40px; height: 40px;" type="checkbox"/>			
5.	Address of DPWO/TPWO: ----- -----	<input style="width: 60px; height: 30px;" type="checkbox"/>			
6.	RESULT OF INTERVIEW: 1. Completed 2. Incomplete 3. DPWO/TPWO on Tour 4. DPWO/TPWO on Leave 5. DPWO/TPWO Found Absent 6. Other (Specify) _____	<input style="width: 40px; height: 40px;" type="checkbox"/>			
CODES		Supervisor <input style="width: 60px; height: 30px;" type="checkbox"/>	Interviewer <input style="width: 60px; height: 30px;" type="checkbox"/>	Office Editor <input style="width: 40px; height: 40px;" type="checkbox"/>	Keyed By <input style="width: 40px; height: 40px;" type="checkbox"/>

SECTION - I**SUPERVISION & MONITORING**

101	What is your age? (Record age in completed years)	آپ کی عمر کیا ہے؟	<input type="text"/> <input type="text"/>								
102	What is your qualification? 1. Intermediate 2. Bachelors 3. Masters 4. PhD/M Phil and more 5. Others _____ (Specify)	آپ کی تعلیم کیا ہے؟	<input type="text"/>								
103	How long you have been working with PWP? آپ کب سے بہبود آبادی پروگرام میں کام کر رہے ہیں؟		<table border="1"><tr><td><input type="text"/></td><td><input type="text"/></td><td colspan="2">DK Day/Month=98</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table> DK Year= 9998	<input type="text"/>	<input type="text"/>	DK Day/Month=98		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	DK Day/Month=98									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>								
104	How long have you been working as DPWO/TPWO in this District/Tehsil? آپ بحیثیت DPWO/TPWO اس ضلع یا تحصیل میں کب سے کام کر رہے ہیں؟ IF LESS THEN ONE YEAR RECORD '00'		<table border="1"><tr><td><input type="text"/></td><td><input type="text"/></td><td colspan="2">DK Day/Month=98</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr></table> DK Year= 9998	<input type="text"/>	<input type="text"/>	DK Day/Month=98		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	DK Day/Month=98									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>								

Do you know your job responsibilities? **(unprompted & multiple)**

کیا آپ اپنی ذمہ داریوں سے آگاہ ہیں؟

- a To plan, organize and implement FP/RH, advocacy and service delivery activities *through the FWCs, MSUs, RHSCs, RMPs, health outlets of Health Department, other line departments, Hakeems and Homeopaths and PPP*
- b To organize advocacy/communication activities *through mass media and interpersonal communication through program and non-program channels.*
- c To maintain demographic profile covering population and development variables and update the same periodically.
- d To identify training needs and impart local level training to the program and non-program personnel include sterilization workshops (for Nazims/Naib Nazims/Councilors).
- e To involve, liaise and coordinate with the district officials of other public service/line departments, PPP, NGOs and private sector extending FP services.
- f To monitor, supervise and provide on the job guidance to the service providers *through field visits, periodic meetings and contact with clients.*
- g To disburse and maintain financial record for all expenditure incurred in the district on program activities and submit reports to concerned quarters.
- h Involve community based agents for contraceptives distribute.
- i To ensure male involvement at the grass-root level through male/social mobilizers located at union council level.
- j To be a focal point of program in district level committee.
- k To collect, compile and consolidate performance reports of all reporting units and ensure transmission to the designated authorities and provide feedback to service outlets.
- l To provide logistic support for supplies to the program and non-program service outlets to maintain inventories.

	Yes	No
a	1	2
b	1	2
c	1	2
d	1	2
e	1	2
f	1	2
g	1	2
h	1	2
i	1	2
j	1	2
k	1	2
l	1	2

106	<p>What kind of IEC material do you supply to FWCs? آپ فلاحی مرکز کو کس قسم کا IEC مواد مہیا کرتے / کرتی ہیں؟</p> <ol style="list-style-type: none"> 1. Books 2. Posters 3. Leaflets 4. Pamphlets 5. Calendars 6. Flip charts 7. Others <p>(Specify)</p>	<table border="1"> <thead> <tr> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> </tbody> </table>	Yes	No	1	2	1	2	1	2	1	2	1	2	1	2	1	2
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107	<p>How many FWCs have been working in your District/Tehsil? آپ کے ضلع / تحصیل میں کتنے فلاحی مراکز کام کر رہے ہیں؟</p>	<table border="1"> <tr> <td> </td> <td> </td> <td> </td> </tr> </table> <p>(Total FWCs)</p>																
108	<p>How many FWCs are working under your supervision? آپ کی زیر نگرانی کتنے فلاحی مراکز کام کر رہے ہیں؟</p> <p>[INTERVIEWER: Check Record]</p>	<table border="1"> <tr> <td> </td> <td> </td> </tr> </table> <p>(Total FWCs)</p>																
109 (a)	<p>On average how many FWCs do you monitor in a month? اوسطاً آپ ایک مہینے میں کتنے فلاحی مراکز کی نگرانی کرتے / کرتی ہیں؟</p>	<table border="1"> <tr> <td> </td> <td> </td> </tr> </table>																
109 (b)	<p>How many FWCs did you monitor in the last month? پچھلے ایک مہینے میں آپ نے کتنے فلاحی مراکز کا معائنہ کیا؟</p>	<table border="1"> <tr> <td> </td> <td> </td> </tr> </table>																
110	<p>How often do you pay monitoring visits? آپ کتنی مرتبہ معائنہ کے لئے جاتے ہیں؟</p> <ol style="list-style-type: none"> 1. Weekly 2. Fortnightly 3. Monthly 4. 2-Months or more 5. Never visited in a year 6. Others _____ <p>(Specify)</p>	<table border="1"> <tr> <td> </td> </tr> </table>																
111	<p>Do you keep record of your visits? کیا آپ اپنے دوروں کا ریکارڈ رکھتے ہیں؟</p> <ol style="list-style-type: none"> 1. Yes (Record checked) 2. Yes (Record not checked but available) 3. No <p>[CHECK RECORD]</p>	<table border="1"> <tr> <td> </td> </tr> </table>																

112	<p>Usually, what do you do during monitoring & supervisory visits? (Unprompted) عموماً آپ اپنے معائنہ کے دورے کے دوران کیا کرتے / کرتی ہیں؟</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 30px;">1</td><td>Check contraceptive stock/supply</td></tr> <tr><td>2</td><td>Check registers (all types of record)</td></tr> <tr><td>3</td><td>Check follow up visits to Family Planning clients</td></tr> <tr><td>4</td><td>Check work plan</td></tr> <tr><td>5</td><td>Check IEC material</td></tr> <tr><td>6</td><td>Accompanied FWWs/FWCs for clients verification</td></tr> <tr><td>7</td><td>On job guidance to FWW/FWC</td></tr> <tr><td>8</td><td>Furniture and equipments</td></tr> <tr><td>9</td><td>Visit hard core couples for motivation</td></tr> <tr><td>10</td><td>Check register (Section-Wise)</td></tr> <tr><td>11</td><td>Assess the training needs of centre's staff</td></tr> <tr><td>12</td><td>Newly married couple's registration</td></tr> <tr><td>13</td><td>Observe signboards installation (MoPW & UNFPA)</td></tr> <tr><td>14</td><td>Eligible couples registered</td></tr> <tr><td>15</td><td>Eligible couples visited by staff during a month</td></tr> <tr><td>16</td><td>Current users of Family Planning</td></tr> <tr><td>17</td><td>Switched methods during a month</td></tr> <tr><td>18</td><td>Dropouts clients during a month</td></tr> <tr><td>19</td><td>Vasectomy cases</td></tr> <tr><td>20</td><td>New clients during a month</td></tr> <tr><td>21</td><td>Referred clients</td></tr> <tr><td>22</td><td>Staff attendance</td></tr> <tr><td>23</td><td>Availability of medicines</td></tr> <tr><td>24</td><td>Record of health talks</td></tr> <tr><td>25</td><td>Other _____ (Specify)</td></tr> </table>	1	Check contraceptive stock/supply	2	Check registers (all types of record)	3	Check follow up visits to Family Planning clients	4	Check work plan	5	Check IEC material	6	Accompanied FWWs/FWCs for clients verification	7	On job guidance to FWW/FWC	8	Furniture and equipments	9	Visit hard core couples for motivation	10	Check register (Section-Wise)	11	Assess the training needs of centre's staff	12	Newly married couple's registration	13	Observe signboards installation (MoPW & UNFPA)	14	Eligible couples registered	15	Eligible couples visited by staff during a month	16	Current users of Family Planning	17	Switched methods during a month	18	Dropouts clients during a month	19	Vasectomy cases	20	New clients during a month	21	Referred clients	22	Staff attendance	23	Availability of medicines	24	Record of health talks	25	Other _____ (Specify)	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>1.</td><td>1</td><td>2</td></tr> <tr><td>2.</td><td>1</td><td>2</td></tr> <tr><td>3.</td><td>1</td><td>2</td></tr> <tr><td>4.</td><td>1</td><td>2</td></tr> <tr><td>5.</td><td>1</td><td>2</td></tr> <tr><td>6.</td><td>1</td><td>2</td></tr> <tr><td>7.</td><td>1</td><td>2</td></tr> <tr><td>8.</td><td>1</td><td>2</td></tr> <tr><td>9.</td><td>1</td><td>2</td></tr> <tr><td>10.</td><td>1</td><td>2</td></tr> <tr><td>11.</td><td>1</td><td>2</td></tr> <tr><td>12.</td><td>1</td><td>2</td></tr> <tr><td>13.</td><td>1</td><td>2</td></tr> <tr><td>14.</td><td>1</td><td>2</td></tr> <tr><td>15.</td><td>1</td><td>2</td></tr> <tr><td>16.</td><td>1</td><td>2</td></tr> <tr><td>17.</td><td>1</td><td>2</td></tr> <tr><td>18.</td><td>1</td><td>2</td></tr> <tr><td>19.</td><td>1</td><td>2</td></tr> <tr><td>20.</td><td>1</td><td>2</td></tr> <tr><td>21.</td><td>1</td><td>2</td></tr> <tr><td>22.</td><td>1</td><td>2</td></tr> <tr><td>23.</td><td>1</td><td>2</td></tr> <tr><td>24.</td><td>1</td><td>2</td></tr> <tr><td>25.</td><td>1</td><td>2</td></tr> </tbody> </table>		Yes	No	1.	1	2	2.	1	2	3.	1	2	4.	1	2	5.	1	2	6.	1	2	7.	1	2	8.	1	2	9.	1	2	10.	1	2	11.	1	2	12.	1	2	13.	1	2	14.	1	2	15.	1	2	16.	1	2	17.	1	2	18.	1	2	19.	1	2	20.	1	2	21.	1	2	22.	1	2	23.	1	2	24.	1	2	25.	1	2
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113	<p>What type of instructions do you give to In-charge and other staff of FWC during your visit? آپ اپنے دورے کے دوران فلاحی مرکز کے انچارج اور دوسرے عملے کو کیا ہدایات دیتے / دیتی ہیں؟</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>4. _____</p>	<table border="1" style="width: 100%; height: 100%; border-collapse: collapse;"> <tr><td style="width: 30px;"></td><td style="width: 30px;"></td><td style="width: 30px;"></td><td style="width: 30px;"></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td></tr> </table>																																																																																																																																
114	<p>How many times in a month FWWs/FWCs are officially called upon at DPWO/TPWO offices for meeting? ایک مہینے میں FWWs/FWCs کو سرکاری طور پر کتنی مرتبہ DPWO/TPWO بلایا جاتا ہے؟</p>	<p style="text-align: center;">Number of Times</p> <table border="1" style="margin-left: auto; margin-right: auto; border-collapse: collapse;"> <tr><td style="width: 30px; height: 20px;"></td><td style="width: 30px; height: 20px;"></td></tr> </table>																																																																																																																																

115	<p>Do you hold training sessions to the In-charges whenever they are called at DPWO/TPWO's Offices? کیا آپ DPWO/TPWO میں فلاحی مرکز کی انچارج کیلئے تربیتی سیشن منعقد کرتے کرتی ہیں؟</p> <p>1. Yes 2. No → [Skip to Q 118]</p>	<input type="checkbox"/>
116	<p>How often these sessions are arranged? یہ سیشن کتنی دفعہ منعقد کیئے جاتے ہیں؟</p> <p>1. Monthly 2. Quarterly 3. Yearly 4. Others (specify)</p>	<input type="checkbox"/>
117	<p>Which topics are being discussed in these training sessions? ان تربیتی سیشن میں کون سے موضوعات زیر بحث آتے ہیں؟</p> <p>_____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
118	<p>Have you ever attended any health talks/group meetings organized by FWCs? کیا آپ نے کبھی فلاحی مرکزی منعقدہ صحت سے متعلق میٹنگز میں شرکت کی؟</p> <p>1. Yes 2. No → [Skip to 120]</p>	<input type="checkbox"/>
119	<p>Total health talks/meetings attended during July 2009-June 2010? جولائی 2009 سے جون 2010 کے دوران آپ نے صحت کے متعلق منعقد کی گئی کتنی میٹنگز میں شرکت کی؟</p>	<input type="checkbox"/> <input type="checkbox"/>
120	<p>Do you supply contraceptives to your FWCs according to their demand or it's a fixed period for distribution? کیا آپ فلاحی مراکز کو مانع حمل ادویات اُن کی طلب کے مطابق بھیجتے ہیں یا متعین شدہ مدت کے بعد بھیجتے ہیں؟</p> <p>1. Per/month distribution on centre's demand 2. Fixed distribution in a month 3. 3- months distribution on centre's demand 4. Fixed distribution in 3- months 5. Others _____ (Specify)</p>	<input type="checkbox"/>
121	<p>How often do you supply medicines of general ailment to FWW/C آپ کتنی مدت کے بعد عام بیماریوں کی ادویات مرکز کو بھیجتے ہیں؟</p> <p>1. Monthly 2. After Two Months 3. After Three Months 4. Need-based supply 5. Others _____ (Specify)</p>	<input type="checkbox"/>

122	<p>Do you receive monthly work plan of FWWs/FWAs? کیا آپ کو FWWs/FWAs کا ماہانہ ورک پلان موصول ہوتا ہے؟</p> <p>1. Yes 2. No → [Skip to 127]</p>	<input type="checkbox"/>
123	<p>Check previous month's work plan گزشتہ ماہ کا ورک پلان چیک کریں</p> <p>Work plan available <input type="checkbox"/> ↓</p> <p>Not available <input type="checkbox"/> → 127</p>	
124	<p>Do you maintain record of this work plan sent by FWC? کیا آپ اس ورک پلان کا ریکارڈ رکھتے ہیں؟</p> <p>1. Yes 2. No</p>	<input type="checkbox"/>
125	<p>Do they work according to it? کیا پلان کے مطابق کام کیا جاتا ہے؟</p> <p>1. Yes 2. No 3. Depends upon _____ (Specify)</p>	<input type="checkbox"/>
126	<p>If there is change in it, do they inform? کیا تبدیلی کی صورت میں آپ کو اطلاع دیتے ہیں؟</p> <p>1. Yes 2. No</p>	<input type="checkbox"/>
127	<p>If they don't act according to plan, then what action you usually will take against them? اگر وہ نہیں بھیجتے یا اس کے مطابق کام نہیں کرتے تو آپ ان کے خلاف کیا کارروائی کرتے ہیں؟</p> <p>Explain:-</p> <p>_____</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/> <input type="checkbox"/>
128	<p>Do you write the Performance Report of FWW/Cs? کیا آپ FWWs/FWCs کی کارکردگی کی رپورٹ لکھتے ہیں؟</p> <p>1. Yes 2. No → [Skip to 130]</p>	<input type="checkbox"/>

129	<p>How often do you write the performance report of FWWs/FWCs? آپ کتنی مرتبہ FWWs/FWCs کی کارکردگی کی رپورٹ لکھتے ہیں؟</p> <ol style="list-style-type: none"> 1. Monthly 2. Quarterly 3. Yearly 4. None 5. Others (specify)..... 	<input type="checkbox"/>				
130	<p>Are you satisfied with the performance of In-charge of FWC? کیا آپ فلاحی مرکز کی انچارج کی کارکردگی سے مطمئن ہیں؟</p> <ol style="list-style-type: none"> 1. Yes [Skip to Section-IV] 2. No 	<input type="checkbox"/>				
131	<p>What are the reasons? مطمئن نہ ہونے کی وجوہات بیان کریں؟</p> <hr/> <hr/>	<table border="1" style="width: 100%; height: 100%;"> <tr> <td style="width: 50%; height: 30px;"></td> <td style="width: 50%; height: 30px;"></td> </tr> <tr> <td style="width: 50%; height: 30px;"></td> <td style="width: 50%; height: 30px;"></td> </tr> </table>				

SECTION-II

TRAININGS RECEIVED BY DPWO/TPWO

201	<p>Did you receive any on-job-training? کیا آپ کو دوران ملازمت کوئی ٹریننگ دی گئی؟</p> <p>1. Yes 2. No</p> <p align="right">→ [Skip to Q 211]</p>	<input type="checkbox"/>																																				
202	<p>How many on-job trainings you have received ? اب تک آپ نے دوران ملازمت کتنی ٹریننگ حاصل کیں؟</p>	<input type="text"/>																																				
203	<p>When did you attend last in-country training? آپ نے آخری مرتبہ اندرون ملک ٹریننگ کب حاصل کی؟</p>	<p>Day <input type="text"/></p> <p>Month <input type="text"/></p> <p>Year <input type="text"/></p> <p>DK Day/Month = 98 DK Year = 9998</p>																																				
204	<p>From where did you get it? آپ نے ٹریننگ کہاں سے حاصل کی؟</p> <p>1. PWTI 2. Other institution _____ (name of institution)</p>	<input type="checkbox"/>																																				
205	<p>What was the duration of that training? اُس ٹریننگ کا دورانیہ کیا تھا؟</p> <p align="center">[IF LESS THAN ONE WEEK RECORD "00"]</p>	<p>(Weeks)</p> <input type="text"/>																																				
206	<p>What were the contents of the training? [MULTIPLE] ٹریننگ کے موضوعات کیا تھے؟</p> <table border="1"> <tr><td>1</td><td>Training for Supervision & Monitoring</td></tr> <tr><td>2</td><td>Family Planning</td></tr> <tr><td>3</td><td>Maternal and Child Health</td></tr> <tr><td>4</td><td>Health Education</td></tr> <tr><td>5</td><td>Preparation of IEC</td></tr> <tr><td>6</td><td>Management and Finance</td></tr> <tr><td>7</td><td>Project formulation</td></tr> <tr><td>8</td><td>Other _____ (Specify)</td></tr> </table>	1	Training for Supervision & Monitoring	2	Family Planning	3	Maternal and Child Health	4	Health Education	5	Preparation of IEC	6	Management and Finance	7	Project formulation	8	Other _____ (Specify)	<table border="1"> <thead> <tr><th>Yes</th><th>No</th></tr> </thead> <tbody> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> <tr><td>1</td><td>2</td></tr> </tbody> </table>	Yes	No	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2
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207	<p>Did you ever receive any foreign training (s)? کیا آپ نے کبھی بیرون ملک کوئی ٹریننگ حاصل کی؟</p> <p>1. Yes 2. No</p> <p align="right">[Skip to Q 211]</p>	<input type="checkbox"/>																																				

Interviewer's Observation:

مشاهدات

END TIME

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Hours

Minutes

Name of Interviewer: _____

Interviewer's Sign

Supervisor's Sign



National Institute of Population Studies
House No. 485, Street No. 9, F-10/2, Islamabad
Ph: 051-9267149 : Fax: 051-9267148