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**EVALUATION  
OF  
NON-CLINICAL TRAINING COMPONENT  
OF  
POPULATION WELFARE PROGRAMME**



**NATIONAL INSTITUTE OF POPULATION STUDIES  
ISLAMABAD  
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By

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**NATIONAL INSTITUTE OF POPULATION STUDIES**

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## FOREWORD

Evaluation of various components of Population Welfare Programme of Pakistan is one of the major objective and activity of the National Institute of Population Studies (NIPS). The present study "Evaluation of Non-Clinical Training Institutes of Population Welfare Program" was undertaken by NIPS and represents a pioneering work as no evaluation of the non-clinical training component of Population Welfare Training Institutes (PWTIs) has been conducted before.

The study provides a useful evaluation of the non-clinical training component of the Population Welfare Programme. It presents in-depth and detailed analysis of data collected from the field and highlights bottlenecks and problems hindering planned activities. It also provides lessons for future planning. The results produced through the survey provide policy-makers, planners and academicians with a clear picture about the current level of training provided to the program and Non-program personnel on population and development issues.

Several individuals assisted NIPS for undertaking this survey. Those who worked on the survey from its inception to its completion deserve appreciation. The project team particularly, Dr. Abdul Hakim, Project Director and Ms. Aysha Sheraz, Principal Investigator, deserve special commendation for successfully conducting the survey and producing this report.

I hope the findings of this study will be useful for planners and managers in health and population sectors, and those directly and indirectly involved with the Non-Clinical Training of the Population Welfare Program.

**Ahmad Shamsul Huda**  
**Executive Director**



## ACKNOWLEDGEMENT

National Institute of Population Studies (NIPS) undertook evaluation of Non-Clinical Training Component of the Population Welfare Programme of Pakistan

The Evaluation was carried out in many stages: i.e. planning for the project and procurement of funds, questionnaire design, sample selection, pre-testing, field work, data editing, data entry and data processing. I acknowledge assistance of several individuals, organizations and technical committee of the project for their assistance at different stages of the project.

Data collection was done by survey teams, each comprising of one male supervisor and two male interviewers. Efforts of several individuals who worked in the field for the collection of data are commendable. I am thankful to the advisory committee for providing all possible support at the study development stage.

Dr. Abdul Hakim, being Project Director provided support and guidance at all stages of the executions of the project. He also reviewed the draft report and provided valuable comments. I am highly obliged for his support in completion of the report. I am also grateful to Mr. Ahmad Shamsul Huda, Executive Director, NIPS for his support in finalization of this report.

Special thanks are to the Principals, and faculty of Population Welfare Training Institutes, DPWOs and all officials of Population Welfare Department, officials of the other nation building departments and individuals from community based groups, who spared their precious time and provided us their valuable, honest and frank opinions. Mr. Badur-ud-din Tanweer, Research Associate, NIPS also deserves appreciation for handling the entire data processing work.

Aysha Sheraz  
Principal Investigator/  
Associate Fellow

## EXECUTIVE SUMMARY

Non-Clinical Training activity is an integral component of the Population Welfare Programme. Training contributes to develop and enhance knowledge and shape skill of the programme functionaries, in order to enable them to carry-out their functions with confidence, conviction and better understanding of the responsibilities and to improve the managerial capabilities to meet the changing and expanding requirements of the programme.

Three Population Welfare Training Institutes (PWTIs) established in Lahore, Karachi and Multan cater to the training needs of a diverse clientele comprising staff of the Population Welfare Department (PWD) and officials of other nation building departments. At the district level, the offices of the District Population Welfare Officers provide training to staff of PWD and volunteers of non-government organizations and community leaders, etc.

Since no evaluation of the non-clinical training component of PWTIs was conducted earlier, the National Institute of Population Studies (NIPS) undertook the task of evaluating this component. A brief summary findings of the evaluation is given here.

### SITUATION ANALYSIS OF PWTIs

At the PWTIs, the number of employees at the base is large, moderate at the middle and lowest at the pinnacle. The organization is heavily dependent upon the performance of its staff at the middle of the pyramid.

The total staff of the three PWTIs, at the time of this study, comprised 59 males and 7 females: a pointer to the gender disparity within the organization.

At the time of the survey, 19 posts were lying vacant at PWTIs.

During the year 1994-95, 237 Programme personnel and 734 officials of nation building departments were trained at the three PWTI's.

The PWTIs are established in rented buildings, with architecture that does not adequately fulfils the requirement of a training institute.

The inventories of durable goods indicate that each PWTI is equipped with furniture, teaching aids and audio-visual equipment. However, in practical terms around 43 percent of the furniture, projectors and duplicating machines were reported to be out of order.

An in-depth scrutiny of the record revealed that record-keeping practices at PWTIs lacked comprehensiveness and professionalism.

The study found that PWTIs had not made any serious effort to carry out follow up of the training with the trainees.



## **TEACHING FACULTY AT PWTIS**

There were 3 Principals and 12 Senior Instructors/ Instructors who became respondents to this study.

Overall, 80 percent of respondents in the cadre of Principals, Senior Instructors and Instructors, at the three PWTIs had postgraduate and 20 percent had graduate level education. The review of their qualification suggests that none of the teaching staff had a degree in human resource development or demography.

None of the respondents, in the cadre of Principals, Senior Instructors and Instructors, had attended an advanced training course in demography, statistics, communication, etc. in Pakistan and abroad. Majority of the respondents never attended a training programme of more than 10 days.

The mean number of living children of respondents in the cadre of Principals, Senior Instructors and Instructors comes to 3.4 percent. Overall 60 percent respondents had 4 children and 13.3 percent had more than 5 children.

At the time of this study, 53.3 percent respondents in the cadre of Principals, Senior Instructors and Instructors reported use of contraceptives.

The study noted that only 20 percent of the respondents in the cadre of Principals, Senior Instructors and Instructors were familiar to at least three basic concepts of demography.

The various cadres in teaching faculty differed in their idea of understanding of the lectures by trainees. The lowest opinion about the understanding levels of trainees came from Instructors. Senior Instructors were moderate in their assessment of trainees,

The respondents from teaching faculty taken as a whole believed that at least 53.3 percent trainee demonstrated complete understanding of the lectures.

## **PROGRAMME PERSONNEL**

Out of the total number of 277, only 240 (86.6 per cent) Programme Personnel could be identified, contacted and successfully interviewed.

34 percent of Programme Personnel had a Master level qualification, 33 per cent were graduates including 2.9 per cent Medical graduates, while 1.7 per cent Programme Personnel had other qualifications.

By their gender status, 81 percent respondents were males and around 19 percent were females. This reflected that three fourth of the respondent who ever received a training at a PWTI were male.

By marital status eighty five percent of the respondents were married. 16.7 percent had at least 5 children and another 16.3 had 4 children.



The percentage distribution of respondents as current users, by designation, shows that 66.5 percent respondents had ever used contraceptives but, at the time of this study, the current use percentage shrunk to 57.1 percent.

Around 71 percent of the respondents had ever attended a training event, relevant to their job, in addition to non-clinical training. Among them, however only 28.3 percent have supplemented that training with a refresher course.

The study found more than 90 percent of the Programme Personnel were satisfied about the relevance of the training to their job description. The majority of respondents had positive perception about the training that they ever received in a PWTI. About 88.3 percent reported to have received training material during their training at a PWTI.

A majority among respondents (74.2 percent) expressed their satisfaction about the existing curriculum of non-clinical training, however, 25% felt a need for improvement in the curriculum.

The study noted that a little more than half of the respondents had knowledge of all basic concepts of demography like Crude Birth Rate (CBR), Crude Death Rate (CDR) and Total Fertility Rate (TFR). About 44 percent respondents could not explain a single demographic concept.

Majority of the respondents viewed that depletion of resources as the worst manifestation of population growth. Around 89% respondents in the cadre of Directors/Dy/Assistant Directors could cite only one negative effect of the baby boom. 93.3 percent of the respondents held that women should be given the right to decide about conception.

#### **OFFICIALS OF NATION BUILDING DEPARTMENTS (NBDS)**

The study had sample of 169. However interviews were materialised with only 140 respondents among the 140 respondents, 47 were in teaching jobs, 18 in secretarial jobs, 6 were associated with medical profession, 6 were serving at middle management positions, 17 were dealing in administrative/accounting responsibilities and 46 were in other categories of Government employment.

The respondents serving at various levels of responsibilities in a variety of departments had varying levels of education. Majority (32.1 percent) of them was graduate.

62.1 percent of them had ever been users of contraceptives. At the time of this study, 60 percent respondents reported use of contraceptives, which means that current use percentage has shrunk by 2 percent.

Around 60 percent of the respondents had living children ranging from a minimum of 3 to 7 or more numbers.

The data gathered for this assessment shows that above 71 percent of respondents were convinced that the training helped them in performance of their duties. Nearly one third (28.6 percent) of respondents did not perceive it as helpful in performance of their duties.

The study found that majority (96.4 percent) of the respondents regularly attended all sessions during the three days training program.

On the availability and distribution of resource material during the training, one fifth (19 percent) of the respondents complained not to have received training material.

The study observed that the majority of respondents were satisfied with what the teaching faculty delivered during the training course. Reported understanding of all lectures among respondents was reasonably on the higher (65.7 percent) side.

At least 46 percent respondents did not express satisfaction with the present buildings of training institutions of PWD.

About the curriculum of the training program for officials of NBDs, 67 percent respondents stressed upon the need for revising the contents of the course.

Around 65.7 of respondents termed the lectures and contents of training as completely understandable, and 27.1 percent reported to have understood most of the lecture.

When requested to define concepts such as crude birth, death and total fertility rates, only 5 percent were able to describe each of these concepts satisfactorily.

About 58.6 percent of respondents claimed to have successfully persuaded and motivated people to adopt F.P methods.

Eighty six percent of the respondents supported the idea of recognizing women's right to reproduction.

In response, respondents indicated three objectives; mother and child health (33.6 percent), small family norm (29.3 percent) and use of family planning methods (16.4 percent) which, in their view, best reflected the objectives for which the PWP existed.

## **COMMUNITY BASED GROUPS**

The respondents came from a mix of professions with varying levels of education. Majority of the respondents had a degree in Medicine (35%). 20 percent of the respondents were Matriculate.

The emergence of medical professionals, as the preponderant category in the randomly selected sample from CBGs, indicates serious flaws in the methodology for determining the target group of the training course.



The findings reveal that majority of respondents in CBG had large number of children. Among trainees in CBGs, 20.8 percent had more than 6 children, 11.8 percent had 5 children, 17.5 percent had 4 children, and 19.7 percent had three children.

Majority of the respondents seemed to have a low opinion about the lectures (Table 6.5). Only 12 percent of the respondents reported thorough understanding of lectures delivered during the course of training session. About 17.6 percent of the respondents described the lectures as completely incomprehensible.

The reported incidence of understanding of lectures was high (90+ percent) among respondents in the categories of Principal, teachers, Medical Officers and researchers, while the complaint about no understanding of the lectures came from Hakeems, homeopaths, councilors and social workers.

The respondents in Balochistan expressed lower level of satisfaction as compared to the respondents in NWFP and Punjab.

About 32.2 percent of the respondents reported that PWP meant use of F.P methods, 15 percent considered it advocacy for small family norm, other regarded it as aiming at MCH, decline in T.F.R, happy family etc.

A predominant majority of respondents (62.3 percent) viewed development of the country as the immediate advantage of FP, while 9.3 percent of respondents could not cite any advantage of F.P. Balochistan represents the majority of respondents (16.2 percent) with no knowledge about the advantages of F.P.

With a view to assess the nature and kind of criticism and opposition, the respondents faced during their persuasion and motivation of the community for family planning, the respondents were given multiple choices to describe their experience about the main objections against the PWP. About 73.2 percent respondents cited religion, 9.8 percent quoted fear of side effects, and 1.1 percent referred to **health reasons** as the main deterrence to the idea of small family.



## CHAPTER -1

### INTRODUCTION

Since last many years, the Population Welfare Program (PWP) has sought to slow down the growth of burgeoning population caused by a high fertility rate in the country. This national effort to slow down the rate of baby boom involves clinical and non-clinical components. While clinical aspects are restricted to contraceptive surgery and facilitation in contraceptive practices, the scope of non-clinical aspects ranges from education and persuasion to motivation and advocacy. The clinical services offered under PWP are mostly facility based, whereas non-clinical services are not specific to facility.

Realizing the significance of non-clinical aspects of PWP, the Population Welfare Department (PWD) invests a considerable portion of its total budget in this domain. PWD has a separate cadre of officials that offers (along side its other responsibilities) the non-clinical services to the clientele. Conceived to fulfil explicit aims, a number of human resource development institutions prepare core teams of specialists in non-clinical methods, and serve to build capacities of the Programme Personnel of PWD. These institutions also provide orientation in population issues to community leaders and officials of nation building departments (NBDs).

With a view to assess the impact of the Non-Clinical Training Component of the PWP for improvements in decision making, planning and resource allocation processes on a substantial scale, the Ministry of the Population Welfare Programme requested the National Institute of Population Studies (NIPS) to carry out an evaluation study of the Non-Clinical Training Component of the PWP.

Non-clinical training has remained an integral component of the PWP. Initially up to 1970, West Pakistan Research and Evaluation Centre (WEPREC) governed training activities of the programme. Subsequently the Training Research and Evaluation Centre took over this responsibility. In 1976-77 the PWD created a full-fledged Population Training Centre (PTC) at Lahore. With the graph of population growth taking an upward route in 1980s, the imperative of population control occupied immense significance. For coping with that alarming scenario, the PWP underwent major structural and policy changes. The Population Welfare Plan (1983-88) spelt a new program strategy for the program. The new strategy required greater emphasis on capacity building of programme personnel. It stressed the need for co-ordination with public and nation building departments. The strategy recognized that the programme needed to garner support from influential and recognised local leaders, social workers and opinion leaders. The new strategy necessitated the need for establishing institutes of non-clinical training with a broad mandate.

In pursuance of the new policy, three Population Welfare Training Institutes (PWTIs) were established in Lahore, Karachi and Multan. PWTIs cater to the training needs of a diverse clientele comprising staff of the PWD and officials of nation building departments. At the



district level, the offices of the District Population Welfare Officers provide training to staff of PWD and volunteers of non-government organizations and community leaders, etc.

The Sixth Five-Year Plan (1983-1988) incorporated the non-clinical training project. The 7th Plan envisaged redesigning component strategy of this project for enhancing quality and scope of the entire training system. The new strategy focused to introduce training programmes that could create an environment supportive of population welfare activities and support operational activities at district and field level through design, planning and implementation of task oriented job. Under the strategy, specific training courses at the existing institutions (PWTIs) are designed to apply these activities within the organisational structure at federal, provincial and district levels. The duration of the training varies from one week to four weeks for the programme personnel, two to four days for the employees of other Nation Building Departments (NBD). While the offices of the District Population Welfare Officers provide orientation sessions of 1-2 days in non-clinical training for volunteers of non-government organizations and community leaders grouped together as Community Based Groups (CBG).

The training covers topics such as orientation on policies and strategy of the Population Welfare Programme; planning and management of family planning services in the community, population dynamics and demographic factors, motivational approaches and techniques to contact the target group population and stimulate interest for the adoption of 'small-family norm', regular orientations on individual components of the operational programme, and other related themes.

The onus for overall planning, implementation, monitoring and co-ordination of the training activities is with the Directorate of Non-Clinical Training in the Federal Ministry of Population Welfare. The Programme Wing of the Ministry monitors the progress of the project, while the Federal and Provincial Training Co-ordination Committees periodically review its progress.

## **JUSTIFICATION OF THE STUDY**

Earlier, no evaluation studies were undertaken in Pakistan for the non-clinical training components of the programme at national level. Of the very few studies conducted with limited sample size at the district level, 'An Evaluation of Training Programme at Field Level in Selected Districts of Punjab' by Mohammed Feroz Hayat Khan, conducted in 1986, is of relevance to this evaluation. The study pointed out that the amount of knowledge retained by Advisory Management Committee (AMCs) and Community Volunteers (CV) was satisfactory but staff at Family Welfare Centres (FWC's) required more training. The study reported that 67 percent of FWC staff did not have a sound knowledge of basic demographic concepts such as TFR, CBR in Pakistan etc. The study observed that the staff at FWCs lacked knowledge on methods of motivation and communication and about the side effects of contraceptives.

In 1990, PWTI Karachi arranged a Seminar on Management, Needs Assessment and Evaluation of Training for Implementations of Training Programme. The report on



proceedings of the seminar contains papers on the history, activities, problems and achievements of PWTIs. The report also embodies evaluation procedures for training. According to the report, the seminar was critical of the paucity of funds for quality training and expressed dissatisfaction with the length of training.

Since 1990 to date, no evaluation of the Non-Clinical Component of PWP at any level has been conducted, while a considerable portion of the total budget of PWP is being spent on it. For continuous improvement and strengthening, any program requires a thorough appraisal of its operations and activities. This backdrop provides sufficient justification for evaluating the Non-Clinical Component of PWP.

## **OBJECTIVES**

The main objectives of the study are:

- ❑ To assess the strength of PWTI's and determine the infrastructure and manpower needed at each level.
- ❑ To scrutinize the level of the knowledge and training received by the staff of the PWD and officials of nation building departments at PWTI.
- ❑ To scrutinize the level of the knowledge and training received by the staff of the PWD and volunteers of non-government organizations and community leaders-Community Based Groups- (CBG) in orientation sessions at DPWOs
- ❑ To assess the impact of the training provided at the PWTIs / DPWOs.
- ❑ To assess the extent to which the trained staff utilise the acquired knowledge and skills in their job.
- ❑ To identify the major problems faced by trainees.
- ❑ To suggest appropriate recommendations for improvement in the training.

## **RESEARCH METHODOLOGY:**

The study was designed to undertake comprehensive evaluation of the Non-Clinical Training Component of PWP. On the basis of the information, that PWTIs/DPWOs provide non-clinical training to staff of the PWD and officials of nation building departments, while DPWOs provide training to the staff of the PWD and volunteers of non-government organisations, opinion leaders and community leaders-Community Based Groups, the study focused on:



- ◆ Collection of information for situation analysis of each of the three PWTIs to sketch a profile of the existing situation at the institutes with regard to staff position, record, condition of equipment, and state of other facilities.
- ◆ Interviews with Principals/Instructors
- ◆ Interviews with programme personnel (non-clinical staff of PWD)
- ◆ Interviews with community based groups

The situation analysis of three PWTI's was accomplished with the help of a module of questionnaire served to the principals of PWTIs, which collected information on the progress, co-ordination, condition, situation, deficiencies and bottlenecks.

The structured interviews collected information on the effectiveness of training in terms of quality, comprehension and utility of knowledge acquired. The interviews with Principals/Instructors covered queries relating to staff strength, qualifications and experience of training staff, expert knowledge of the teaching faculty, library provisions, audio-visual facilities, field training, annual enrolment, and output per annum etc. Interviews with programme personnel and community based groups focused to learn perceptions of trained individuals about their understanding of the objectives of PWP. For meaningful analysis of the data, individuals trained at PWTIs/ DPWOs were also asked to provide information about their educational background, marital status, and number of living children, use of contraceptives etc.

The evaluation of the Non-Clinical Training of the PWP was executed through carrying out a survey of the three institutes and sample survey of the trainees and trained staff.

## **SAMPLE DESIGN**

Keeping in view, the multiple focus of the study, it was decided to draw a variety of samples from the following domains:

- Teaching faculty of PWTIs
- Districts under the jurisdiction of each PWTI
- Programme personnel in sample districts
- Employees of Nation-Building Departments in sample districts
- Community Based Groups (trained at PWTIs/ DPWOs and serving across the country) in sample districts

There are three PWTI's, situated at Karachi, Lahore and Multan. The sanctioned strength of teaching faculty at each PWTI, at the time of this study, included one Principal, two Senior Instructors and 5 Instructors. Reckoning the pivotal role of the PWTIs in non-clinical

training component of PWP and the numerically small size of their teaching faculty, cent percent sample of teaching faculty was drawn from PWTIs.

Sr. No	Designation	Sample size	No
1	Principal, PWTIs	100%	3
2	Sr. Instructors	100% present staff	6
3	Instructors	100% present staff	6
4	Present trainees at PWTIs	10 from each PWTI	30

Three Population Welfare Training Institutes (PWTIs) established in Lahore, Karachi and Multan serve 75 district offices of Population Welfare Department in the entire Pakistan. For the study of programme personnel, employees of Nation Building Departments and Community Based Groups in these districts, a two-stage random sampling strategy was adopted. At the first sampling stage, sixty percent (45 districts) of the total districts were randomly selected by equal proportionate representation from districts under each PWTI. The PWTI, Lahore has in its jurisdiction 24 districts out of which 15 were selected. Out of 31 districts under PWTI Karachi 18 districts were selected and 12 districts were selected from 20 districts falling under PWTI, Multan. The number of sample districts from each PWTI are shown below:

PWTIs	Total Districts	Number of Selected Districts
Karachi	31	18
Lahore	24	15
Multan	20	12
<b>Total</b>	<b>75</b>	<b>45</b>

At the second sampling stage, sample size of programme personnel, employees of nation building departments and community based groups was to be determined from the sample districts. The study designers decided to consider the achieved targets of non-clinical training component of PWP, quoted in the 7<sup>th</sup> Five Year Plan, as baseline figure and then draw sample from the achieved figures.

**Achievements of non-clinical training component of PWP  
given in 7<sup>th</sup> Five Year Plan.**

Sr. No	Category of Trainees	Targets	Achievements
1	Programme Personnel	4585	2739
2	Employees of NBD	19418	17343
3	CBG	25658	24960
	<b>Total</b>	<b>49688</b>	<b>45042</b>



The sample from PP, employees of NBD, and CBGs.

Sr. No	Category of Trainees	Sample size	Sample in Nos.
1	Programme Personnel	10% of 2739	274
2	Employees of NBD	1% of 17343	175
3	CBG	1% of 24960	250
	<b>Total</b>		699

Having achieved the above stages in determining sample size, the only task left was to decide as how to evenly pick 274 PP, 175 employees of NBD, and 250 CBG from the many in the same categories in the 45 sample districts. At this stage, vital information about staff of PWD, and officials of NBD trained at PWTIs was collected from the three PWTIs. While data about the staff of the PWD and Community Based Groups trained at DPWOs was secured from DPWOs in sample districts. Out of the acquired data from 45 districts 274 PP, 175 employees of NBD, and 250 CBG were randomly selected.

## QUESTIONNAIRES

For the collection of data, the technique of structured questionnaire was applied that requires each respondent in the same category to be asked the same set of questions. The work started with the construction of three modules of questionnaires:

1. Module for preparing profile of the institutes (situation analysis).
2. Module for principals and instructors of PWTIs.
3. Module for individuals trained at PWTIs / DPWOs (Three different questionnaires were developed for respondents in three different categories i.e. programme personnel, officials of nation building departments, and community based groups).

A brief description of the three types of modules is as follows: -

### I. Module for the profile of PWTIs

The first module collects data for situation analysis of the PWTI's. It included basic statistics and the overall performance of the Institutes. Main topics were:

- Date of establishment of the institute
- Staff strength
- Number of persons attended training annually
- Number of supervisory visits received by the understudy unit in the last one year
- Facilities and equipment available
- Problems regarding staff, resources, etc
- Suggestions



## **II. Module for the Principal and Instructors**

Second module purported to collect data pertaining to the personal profile of the Principal and instructors. This module endeavoured to gather data in the following progression:

- Academic and experience profile of the Principal/Instructor
- His/her publications
- Place of his/her residence
- Duration of job at the understudy unit
- Service structure
- Number of lecturers he/she delivers
- Understanding of lectures
- Problems regarding staff, resources, etc
- Suggestions

## **III. Module for Trainees and Trained Staff**

Third module was designed to confirm the validity of trained staff and quality of training received by trainees. This module inquired about personal and educational data of following kinds:

- Personal profile including information on marital status, education, place of residence etc
- Academic record
- Qualification at the time of entry to the PWTIs
- Domicile
- Command on subjects
- Understanding of lectures
- Knowledge of demographic concepts
- Knowledge about Population Welfare Programme
- View about training given at the PWTIs and DPWO
- Impact of training on job performance.
- Problems and suggestions

A technical committee of NIPS reviewed the research methodology and data collection instruments. The suggestions and recommendations of the committee were duly incorporated in the design of the research and questionnaires.

## **SELECTION OF FIELD STAFF**

After selection of sample size and finalisation of questionnaires, seven teams of field staff were constituted for data collection. Each team comprised one supervisor and two Interviewers. Majority of the staff, recruited for data collection, had post graduate level education. The high educational level of the field staff helped ensure the quality of the survey and reliability of results. Two teams collected data from districts under PWTI,

Karachi, two teams collected data from districts under PWTI, Multan, and three teams collected data from districts under PWTI, Lahore.

## **TRAINING OF FIELD STAFF**

Supervisors and interviewers received fifteen days training at NIPS. During the training, the staff learnt about the purpose and objectives of the survey, outline of survey plan, sampling technique, basic terms used in demography, contents of the questionnaires, coding plan and other related points. The training was supplemented through demonstration interviews and discussions on possible problem areas.

## **FIELD WORK**

With the despatch of teams of supervisors and interviewers to the field, the survey started. It took the teams 80 days including off days to collect data. Every team initially performed situation analysis of a PWTI and later conducted interviews of the Principal, Senior Instructors and Instructors at the PWTI. Finally, the programme personnel, officials of Nation Building Departments and Community Based Workers trained at PWTI's/DPWOs were followed up for interview. It was difficult to locate officials of Nation Building Departments and Community Based Workers, so their interviews took more time.

During the field work, situation analysis of three PWTI's and 44 districts was conducted, while three principals, 15 instructors, 240 trained programme personnel, 169 Nation Building Department's personnel and 183 Community Based Workers were followed up and successfully interviewed.

## **DATA ANALYSIS**

After the completion of fieldwork, the completed questionnaires were cleaned/checked and edited. Finally, data processing took place. The computer generated tabular charts were analysed and this report was completed.



## CHAPTER 2

### SITUATION ANALYSIS

#### SITUATION ANALYSIS OF PWTIS

The situation analysis of the three PWTIs presents an examination of prevailing staff position, condition of official record, building, furniture, equipment and other available facilities.

At the time of study, three PWTI's situated in Lahore, Multan and Karachi catered to the non-clinical training needs of programme personnel of the PWD and officials of the nation building departments.

Viewed in their totality the PWTIs appear to have a pyramid like structure. The number of employees at the base is large, moderate at the middle and lowest at the pinnacle. The positions at the base of the pyramid constitute the auxiliary and support staff. The critical staff is at the middle, while the management occupies the apex. With this structure, the organization is heavily dependent upon the performance of its staff at the middle of the pyramid.

#### STAFF STRENGTH

Against the total sanctioned strength of 85 personnel, there were incumbents against 66 positions in three PWTIs, at the time of the survey, while 19 post were lying vacant. The highest number of positions exist in the teaching staff cadres, where 7 out of 21 positions were lying vacant. Among other vacant positions, two were of Audio-Visual Officers and Artists at two PWTIs. The total staff of the three PWTIs, at the time of this study, comprised 59 males and 7 females: a pointer to the gender disparity within the organization.

The following table presents the cumulative strength of the three PWTIs.

Table 2.1

**CUMULATIVE EXISTING STAFF POSITION OF PWTI's**

Category	BPS	Sanctioned Posts	No. of Filled Posts			Vacant posts
			Males	Females	Total	
Principal	19	3	3	-	3	-
Senior Instructor	18	6	2	3	5	1
Instructor	17	15	5	4	9	6
Admin officer	16	3	1	-	1	2
Library Assistant	11	3	1	-	1	2
Artist	16	1	1	-	1	-
Audio-Visual Officer	16	1	-	-	-	1
Stenographer	15	1	1	-	1	-
Steno typist	12	12	8	-	8	4
Assistant	11	3	3	-	3	-
Accounts Assistant	11	3	3	-	3	-
Projectionist	8	3	3	-	3	-



Category	BPS	Sanctioned Posts	No. of Filled Posts			Vacant posts
			Males	Females	Total	
LDC	5	3	2	-	2	1
Driver	4	6	6	-	6	-
Naib Qasid	1	13	11	-	11	2
Chowkidar/Sweeper/Mali	1	9	9	-	9	-
<b>Total</b>		<b>85</b>	<b>59</b>	<b>7</b>	<b>66</b>	<b>19</b>

## FACILITIES AVAILABLE AT THE PWTIS

The inventories of durable goods indicate that each PWTI is equipped with furniture, teaching aids and audio-visual equipment. However, in practical terms around 43 percent of the furniture, projectors and duplicating machines were reported to be out of order. A comparative analysis of the distribution of the equipment revealed that PWTIs at Multan was less equipped than the two training institutes at Karachi and Lahore. (Table 2.2)

**Table 2.2**

### PERCENTAGE DISTRIBUTION OF EQUIPMENT AVAILABLE AND ITS WORKING CONDITION AT PWTI'S

Equipment	Working condition	Available at each PWTI		
		Multan	Lahore	Karachi
Projector	66.7	100	100	100
Flip Charts Board	100	100	100	100
Tape Recorder	100	100	100	100
Mike	100	0	100	100
Television	100	0	100	100
V.C.R	100	0	100	100
Video Camera	100	-	100	-
Tables	66.7	100	100	100
Chairs	66.7	100	100	100
Air Conditioner	100	-	-	100
Duplicating machine	66.7	100	-	100
Photocopier	100	100	-	-

## BUILDING

The PWTIs are established in rented buildings, with architecture that does not adequately fulfil the requirement of a training institute. However, with makeshift arrangements these buildings have been made to house facilities like lecture room and library. The congested environment does not make one feel to be in an academic institution. Lack of accommodation has deprived trainees to have plenary sessions in spacious halls or group sessions in separate discussion rooms. None of the PWTIs offers boarding and lodging facilities to the trainees.

Table 2.3 presents a detailed view of facilities at PWTIs.

Table 2.3

## PERCENTAGE DISTRIBUTION OF THE FACILITIES AT PWTI'S

Facility	Lahore	Multan	Karachi	Total
Sign Board Display	100%	100%	100%	100.0
Building on Rent	100%	100%	100%	100.0
Library	100%	100%	100%	100.0
Lecture Room	100%	100%	100%	100.0
Discussion Room	100%	-	-	33.3
Vehicles	100%	100%	100%	100
Hostel	-	-	-	-

## DOCUMENTATION

Two out of the three PWTIs had maintained documents of every business they dealt in, however an in-depth scrutiny of the record revealed that their record-keeping practices lacked comprehensiveness and professionalism (Table 2.4). For instance, database of trainees, crucial for monitoring and follow up purposes, did not include proper contact addresses of trainees. Similarly data on trainee's respective departments was not well kept.

## FOLLOW-UP WITH TRAINEES

During review of the record, the study found that PWTIs had not made any serious effort to carry out follow up of the training with the trainees. Only one institute actually arranged monitoring visits of its staff for follow up with the trainees. In comparison, the record keeping performance of PWTI, Lahore was found better than the two other sister institutions. (Table 2.4.).

Table 2.4

## PERCENTAGE DISTRIBUTION OF THE RECORD CONDITION OF SAMPLED PWTI'S

Condition	Lahore	Multan	Karachi	Total
Maintenance of necessary registers	100%	-	100%	66.7
Registration of trainees	100%	-	100%	66.7
Complete names of trainees	100%	100%	100%	100.0
Complete addresses of trainees	100%	-	100%	66.7
Complete addresses of trainees' departments	100%	100%	100%	100.0
Notes on monitoring visits	100%	-	-	33.3



## ENROLMENT

During the year 1994-95, 237 Programme personnel and 734 officials of nation building departments were trained at the three PWTI's. The PWTI, Lahore and Karachi received greater intake of trainees from among programme personnel of the PWD, whereas in Multan the majority of trainees came from Nation Building Departments. The PWTI Karachi had maximum training activity followed by Lahore and Karachi respectively. During the year 1994-95, PWTIs engagement in training activities ranged from one month to six months training courses. .

Table 2.5

### NUMBER OF TRAINEES WHO ATTENDED TRAININGS AT PWTI DURING THE YEAR 1994-95

Months	Programme Personnel				Nation Building Department			
	Multan	Lahore	Karachi	Total	Multan	Lahore	Karachi	Total
January	-	39	-	39	56	-	-	128
February	22	38	-	22	-	-	67	67
March	-	-	-	38	78	118	71	267
April	-	-	-	-	-	39	50	89
May	-	-	-	-	152	-	-	152
June	-	26	-	26	-	-	-	-
July	-	-	-	-	-	-	-	-
August	-	-	-	-	-	-	-	-
September	-	-	-	-	-	-	-	-
October	-	-	38	38	-	-	-	-
November	-	-	42	42	-	-	31	31
December	-	-	30	30	-	-	-	-
<b>Total</b>	-	-	-	<b>237</b>	-	-	-	<b>734</b>

## CHAPTER 3

### PRINCIPALS/INSTRUCTORS

The teaching staff at the PWTI includes a Principal/Chief Instructor, Senior Instructors, and Instructors. The Principal administers PWTI, looks after its day to day operations, formulates training plans, design training activities, frame annual training calendar, prepares working papers and carries out research activities. The Principal also serves as the Chief Instructor and share teaching assignments with Instructors. The Principal/Chief Instructor along with Senior Instructors and Instructors constitute the core faculty at a PWTI.

During the study, Principals of the three PWTIs, Senior Instructors and Instructors were interviewed. Out of 21 Senior Instructors and Instructors posted at these institutions, 12 were available to respond to our queries. The remaining teaching staff was either on tour or on leave from their duty. Thus, the 3 Principals and 12 Senior Instructors/ Instructors became respondents to this study.

#### BACKGROUND CHARACTERISTICS

##### Gender and Marital Status

The respondents in the cadre of Principals were male, married and had a minimum of graduate level education. Sixty percent of Senior Instructors and 43 percent of the Instructors were females. Among Senior Instructors and Instructors 93.3 percent were currently married and 6.7 percent were widowed. All respondent in Senior Instructor and Instructor positions were married.

##### Education

Overall, 80 percent of respondents had postgraduate and 20 percent graduate level education. The review of their qualification suggests that none of the teaching staff had a degree in human resource development or demography.

Table 3.1

PERCENT DISTRIBUTION OF PRINCIPAL/INSTRUCTORS BY  
THEIR BACKGROUND CHARACTERISTICS

Designation	Sex		Marital Status		Education		Numbers
	Male	Female	Married	Widowed	B.A	M.A.	
Principal	100	-	100	-	33.3	66.7	3
Senior Instructor	40.0	60.0	80.0	20.0	-	100	5
Instructor	57.1	42.9	100	-	28.7	71.4	7
Total	60.0	40	93.3	6.7	20	80.0	



## Resource Development

The review of the training courses attended by the respondents showed that they had attended courses that focused on providing them basic orientation in the discipline of demography and teaching methods. None of them attended advanced training courses on demography, statistics, communication etc. in Pakistan and abroad. However, the respondents were satisfied with their training and perceived it beneficial in the performance of their professional responsibilities.

Table 3.2

**PERCENTAGE DISTRIBUTION OF PRINCIPALS/INSTRUCTORS  
BY THEIR STATUS OF TRAININGS RECEIVED**

Designation	Received Training		Perception of Training as helpful in teaching	Numbers
	Basic	Refresher		
Principal	100.0	33.3	100	3
Senior Instructor	80.0	20.0	100	5
Instructor	100.0	28.6	85.7	7
<b>Total</b>	<b>93.3</b>	<b>26.7</b>	<b>93.3</b>	<b>15</b>

Majority of the respondents never attended a training programme of more than 10 days. The maximum duration of training courses attended by some among the teaching faculty is 149 days. A very small number of respondents supplemented their basic training with a refresher course.

Table 3.3

**PERCENTAGE DISTRIBUTION OF PRINCIPAL/INSTRUCTOR BY THE  
DURATION OF TRAININGS RECEIVED**

Designation	Duration (Number of Days)				Numbers
	01-10	11-20	21-31	32-149	
Principal	33.3	-	33.3	33.3	3
Senior Instructor	60.0	80.0	20.0	20.0	5
Instructor	100	85.7	-	14.3	7
<b>Total Percentage</b>	<b>73.3</b>	<b>66.7</b>	<b>13.3</b>	<b>20.0</b>	<b>-</b>

## Fertility

The total mean number of living children by respondents comes to 3.4 percent. For Principals the mean number of living children was 3.2, whereas for Senior Instructors and Instructors it was 3.5 and 3.6 respectively. In comparison, the number of living children was high among the Senior Instructors/Instructors. Overall 60 percent respondents had 4 children and 13.3 percent had more than 5 children.

**Table 3.4**

### PERCENT DISTRIBUTION OF PRINCIPAL/INSTRUCTORS BY THEIR NUMBER OF LIVING CHILDREN

Designation	Number of Living Children						N
	1	2	3	4	5+	Mean	
Principal	0	0	33.3	33.3	33.3	3.2	3
Senior Instructor	20.0	20.0	0	40.0	20.0	3.5	5
Instructor	14.3	0	0	85.7	0	3.6	7
Total	13.3	6.7	6.7	60.0	13.3	3.4	15

## Contraceptive Practice

Although not formally required, the respondents trained in non-clinical training are expected to be practicing contraceptive methods, at least, as a reflection of the impact of the training on their own personal attitudes. In the context of this expectation, the study sought to observe their contraceptive use status.

The percentage distribution of respondents as contraceptive users shows that 86.7 percent of them had ever been users of contraceptives. At the time of this study, 53.3 percent respondents reported use of contraceptives, which means that current use percentage has shrunk by 33.4 percent. A cadre wise analysis of respondents by their current use suggests that 66.7 percent of Principals were current users at the time of this study. Second highest current use of contraceptives prevailed among Instructors. The reported current use of contraceptive was lowest in the case of Senior Instructors.

**Table 3.5**

### DISTRIBUTION OF PRINCIPAL/INSTRUCTORS BY THEIR CONTRACEPTIVE USE

Designation	Ever User	Current Users	Numbers
Principal	100.0	66.7	3
Senior Instructor	100.0	40.0	5
Instructor	71.4	57.1	7
Total percent	86.7	53.3	15



## Knowledge of Demography

For evaluating the professional competence of respondents in demography, they were asked to explain three basic demographic concepts like CBR, CDR and TFR, which they taught as part of the curriculum at PWTIs. The answers provided by respondents helped in assessing the quality of training that they impart to Programme Personnel, employees of NBDs and community leaders etc. for building and/or improving the professional knowledge and skills of the latter.

The study noted that only 20 percent of the respondents were familiar to all of the three basic concepts. 6.7 respondents could not explain a single concept. Among Instructors, only 57 percent could tell the figure for population of Pakistan. 14.3 percent respondents among Instructors failed to explain any of the three demographic concepts.

**Table 3.6**

**PERCENTAGE DISTRIBUTION OF PRINCIPAL/INSTRUCTOR ABOUT THEIR KNOWLEDGE OF BASIC DEMOGRAPHIC CONCEPTS BY DESIGNATION**

Designation	HAVING KNOWLEDGE:									Numbers
	CBR	CDR	TFR	Population of Pakistan	One Concept	Two Concepts	Three Concepts	Four Concepts	No Knowledge	
Principal	66.7	66.7	66.7	100	33.3	0	0	66.7	0	3
Senior Instructor	80.0	100	100	80.0	0	0	40.0	60.0	0	5
Instructor	57.1	71.4	71.4	57.1	14.3	14.3	14.3	42.9	14.3	7
Total Percentage	66.7	80.0	80.0	73.3	13.3	6.7	20.0	53.3	6.7	15

## Understanding of Responsibilities

The respondents expressed complete understanding of their role in PWP. They regarded their main responsibility, as faculty, to provide orientation to trainees in the objectives of PWP and impart them non-clinical training, laying down nature and consequences of the population issues. The study found that Principals of the three PWTIs also undertook teaching assignments besides their engagement in administrative responsibilities. On the question of accompanying trainees to field visits arranged as part of training event, 27 percent of the respondents reported not to have ever accompanied trainees during the field study trips.

Table 3.7

**PERCENTAGE DISTRIBUTION OF THE PRINCIPALS/INSTRUCTORS  
BY THEIR CONTRIBUTION IN TRAINING AT PWTI'S**

Designation	Personally take Classes	Accompanied Trainees in Field Trip	Numbers
Principal	100	100	3
Senior Instructor	100	80.0	5
Instructor	100	57.1	7
<b>Total</b>	<b>100.0</b>	<b>73.3</b>	<b>15</b>

### Assessment of Facilities at PWTIs

Since an insight in to perceptions of staff, at a given institution, about the work facilities within the organization provides evidence on their satisfaction levels, the study attempted to look in to the perceptions of staff at PWTIs'. The respondents were asked to comment on suitability of existing buildings of PWTIs', availability of equipment, adequacy of staff, post-training contact with trainees and field visits. Respondents from different cadres sharply differed in their views about these questions. While 66.6 percent of the Principals complained about the unavailability of equipment, only 20 percent of Senior Instructors agreed to this fact. About arranging field training, 100 percent respondents, in the cadre of Principals, replied in affirmative. Answering the same question, on the contrary, 60 percent Senior Instructors and 57 percent Instructors responded in negative.

Table 3.8

**PERCENTAGE DISTRIBUTION OF THE PRINCIPAL/INSTRUCTOR BY THEIR  
PERCEPTION ABOUT FACILITIES AND TRAINING PROVIDED AT PWTI'S**

Designation	Is Building Suitable	Is Proper Equipment Available	Is teaching Staff adequate	Whether trainees are contacted after training	Is field training arranged	Numbers
Principal	33.3	33.3	66.7	33.3	100	3
Senior Instructor	40.0	80.0	61.0	60.0	40.0	5
Instructor	0	57.1	100	42.9	42.9	7
<b>Total</b>	<b>20.0</b>	<b>60.0</b>	<b>80.0</b>	<b>46.7</b>	<b>53.3</b>	<b>15</b>

### Assessment of Trainees

The various cadres in teaching faculty differed in their idea of understanding of the lectures by trainees. The lowest opinion about the understanding levels of trainees came from Instructors. Senior Instructors were moderate in their assessment of trainees, while the Principals held a very optimistic view of the understanding of lecture by trainees. The respondents taken as a whole believed that complete understanding of the lectures by



trainees was 53.3 percent. While in their opinion 6.7 percent of the trainees did not understand the lecture at all.

Table 3.9

**PERCENT DISTRIBUTION OF IDEA OF PRINCIPAL/INSTRUCTOR'S BY IDEA  
OF THE UNDERSTANDING OF LECTURES BY THEIR TRAINEES**

Designation of the Respondent	UNDERSTANDING OF LECTURE			Numbers
	Completely	Mostly	Do not Understand	
Principal	100	0	0	3
Senior Instructor	20.0	80.0	0	5
Instructor	57.1	28.6	14.3	7
<b>Total</b>	<b>53.3</b>	<b>40.0</b>	<b>6.7</b>	<b>15</b>

## CHAPTER 4

### PROGRAMME PERSONNEL

The chapter presents some background characteristics of Programme Personnel in sampled districts, their perception and evaluation of training that they received at PWTIs and their orientation in the demographic knowledge.

Pakistan is the seventh most populous country of the world with 2.6 percent inter sensual rate of growth. Reducing rapid population growth is the priority area for the government. However, the reduction in fertility requires increase in contraceptive prevalence. The government has been allocating substantial amount of efforts and resources for mobilizing the masses for adherence to contraceptive practices. The Programme Personnel of the PWD constitutes the core team assigned to motivate masses in favor of contraceptive practices. For enhancing their professional knowledge and skills, the PWTIs provide them one week to four weeks training.

The term Programme Personnel covers variety of cadres like Directors, Deputy Directors and Assistant Directors of the Ministry of Population Welfare; Faculty members of PWTIs, and social scientists of RTIs; Divisional Directors, Deputy Directors, Assistant Directors, District Population Welfare Officers, Deputy District Population Welfare Officers (DPWOs), Assistant District Population Welfare Officers (ADPWOs), Tehsil Population Welfare Officers (TPWOs), Accounts Officers, Superintendents, Administrative Officers, Statistical Assistants and Family Welfare Assistants (Male & Female) of the Provincial Population Welfare department.

The present study focused on Programme Personnel in sampled districts, which have ever received a non-clinical training at Population Welfare Training Institutes.

The basic data concerning all Programme Personnel trained in non-clinical methods and practices, in the districts taken as sample, was collected from the three PWTIs. Having obtained the data, the Programme Personnel were contacted at their offices across the districts in the four provinces. The total number of Programme Personnel in sample came out to be 277. For this study they all constituted the sample. Twenty of the 277 declined to have ever attended training at a PWTI and were thus not interviewed. Such respondents were not limited to a single province rather found in all of the four provinces. Two respondents refused to be interviewed. While two respondents with definite names, designations and addresses were reported to be never served/posted at the addresses given by PWTIs. There is a strong likelihood of their being fake. This implies that data about at least 8 per cent Programme Personnel, reported as trained at PWTIs was inaccurate. The underlying reason of this inaccuracy may be a deliberate effort to give a false impression of the performance of the PWTIs by exaggerating the number of trainees. Thus, out of the total number of 277, only 240 (86.6 per cent) Programme Personnel could be identified, contacted and successfully interviewed.



Table 4.1 presents percentage distribution of total coverage of the selected sample of the Programme Personnel by province.

**Table 4.1**

**PERCENTAGE DISTRIBUTION OF PROGRAMME  
PERSONNEL WHO RECEIVED TRAINING AT PWTI BY REGION**

Result	Punjab	Sindh	NWFP	Balochistan	Pakistan	Number
Responded	87.4	86.3	78.1	93.3	86.6	240
Refused	2.2	0	0	0	1.1	3
Person with no Training	6.7	3.8	21.9	3.3	7.2	20
Person absent	3.0	8.8	0	3.3	4.3	12
Person do not exist	0.7	1.3	0	0	0.7	2
Number	135	80	32	30	100	277

Table 4.2 shows the province wise and cadre wise distribution of those who actually responded, hereafter referred to as respondents in this chapter.

**Table 4.2**

**PERCENTAGE DISTRIBUTION OF  
PROGRAMME PERSONNEL BY DESIGNATION AND PROVINCE**

Designation	Punjab	Sindh	NWFP	Balochistan	Pakistan
Director/Deputy/Assistant Director	-	.8	1.7	1.3	9
Instructor	0	.4	-	.4	2
DPWO/DDPWO	14.2	8.3	4.2	3.3	72
C&T	3.8	.8	.4	.8	14
Admn. Accounts Officer	5.8	1.3	1.4	-	20
S. Assistant	1.3	5.4	1.3	.8	21
FWA	18.8	0	.8	.4	50
Steno/UDC	.8	3.8	.4	17	17
Medical Officer	1.3	0	0	3	3
Other	2.5	8.3	1.7	.8	32

## BACKGROUND CHARACTERISTICS

The Programme Personnel of the PWD constitute the core team assigned to motivate masses in favor of contraceptive practices. Certainly, the job efficiency of Programme Personnel depends upon the skills they learnt during their non-clinical training the principal professional training. Looking at the personal inventories of Programme Personnel to find an a relationship between role of nonclinical training on their resource development and personal motivation and assessing the cumulative impact of the two factors on their professional efficiency has the potential of providing one explanation on the overall productivity of the Population Welfare Program in Pakistan. In this backdrop, the following paragraphs seek to portray the fertility situation of Programme Personnel by observing their educational status, gender status, marital status, number of their living children, and their preference for contraceptive practices.

### Education

Among the Programme Personnel, the level of education ranged from Matriculation to Graduation and Masters to Ph.D. A significant number of Programme

Personnel had other qualifications. Table 4.3 exhibits that 34 percent of Programme Personnel had a Master level qualification, 33 per cent were graduates including 2.9 per cent Medical graduates, While 1.7 per cent Programme Personnel had other qualifications.

**Table 4.3**

**PERCENTAGE DISTRIBUTION OF  
PROGRAMME PERSONNEL BY EDUCATION/DESIGNATION**

Designation	Mat ric	Inte rme diat e	Gra duat e	Master s	Medic al Gradu ate	Oth er	Numbers
Director/Deputy/Assistant Director	-	-	44.4	55.6	-	-	9
Instructor	5.0	-	-	-	50.0	-	2
DPWO/DDPWO	-	-	51.4	44.4	-	4.2	72
C&T	-	-	35.7	64.3	-	-	14
Admn/Accounts Officer	5.0	20.0	50.0	20.0	5.0	-	20
S/Assistant	-	14.3	38.1	47.0	-	-	21
FWA	70.0	16.0	10.0	2.0	-	2.0	50
Steno/UDC	47.1	11.8	.4	9.4	5.9	-	50
Medical Officer	-	-	-	-	100.0	-	3
Other	15.6	15.6	6.0	50.0	3.1	-	32
Total							

## Gender and Marital Status

By their gender status (Table 4.4), out of the 240 respondents, eighty-one percent were males and around nineteen per cent were females. This reflected that three fourth of the respondents, as per sample, who ever received a training at a PWTI were male. This shows that male Programme Personnel were the principle beneficiaries of non-clinical training. Because of its limitations the study could not find if it was the overall gender imbalance within the PWD that reflected in the gender composition of beneficiaries of non-clinical training or the inconvenience of leaving the station of duty and traveling to another city for a considerably good number of days has discouraged the participation of women Programme Personnel in non-clinical training.

By marital status (Table 4.5), eighty five percent of the respondents were married, two percent were widowed and/or divorced and the remaining 12.9 percent were unmarried



Personnel had other qualifications. Table 4.3 exhibits that 34 percent of Programme Personnel had a Master level qualification, 33 per cent were graduates including 2.9 per cent Medical graduates, While 1.7 per cent Programme Personnel had other qualifications.

**Table 4.3**

**PERCENTAGE DISTRIBUTION OF  
PROGRAMME PERSONNEL BY EDUCATION/DESIGNATION**

Designation	Matric	Intermediate	Graduate	Masters	Medical Graduate	Other	Numbers
Director/Deputy/Assistant Director	-	-	44.4	55.6	-	-	9
Instructor	5.0	-	-	-	50.0	-	2
DPWO/DDPWO	-	-	51.4	44.4	-	4.2	72
C&T	-	-	35.7	64.3	-	-	14
Admn/Accounts Officer	5.0	20.0	50.0	20.0	5.0	-	20
S/Assistant	-	14.3	38.1	47.0	-	-	21
FWA	70.0	16.0	10.0	2.0	-	2.0	50
Steno/UDC	47.1	11.8	4	9.4	5.9	-	50
Medical Officer	-	-	-	-	100.0	-	3
Other	15.6	15.6	6.0	50.0	3.1	-	32
Total							

## Gender and Marital Status

By their gender status (Table 4.4), out of the 240 respondents, eighty-one percent were males and around nineteen per cent were females. This reflected that three fourth of the respondents, as per sample, who ever received a training at a PWTI were male. This shows that male Programme Personnel were the principle beneficiaries of non-clinical training. Because of its limitations the study could not find if it was the overall gender imbalance within the PWD that reflected in the gender composition of beneficiaries of non-clinical training or the inconvenience of leaving the station of duty and traveling to another city for a considerably good number of days has discouraged the participation of women Programme Personnel in non-clinical training.

By marital status (Table 4.5), eighty five percent of the respondents were married, two percent were widowed and/or divorced and the remaining 12.9 percent were unmarried

Table - 4.4

### PERCENTAGE DISTRIBUTION OF PROGRAMME PERSONNEL BY GENDER

Designation	Male	Female	Numbers
Director/Deputy/Assistant Director	88.9	11.1	9
Instructor	-	100	2
DPWO/DDPWO	95.8	4.2	72
C&T	78.6	21.4	14
Admn/Accounts Officer	100	-	20
S/Assistant	90.5	9.5	21
FWA	44.0	56.0	50
Steno/UDC	100	-	17
Medical Officer	66.7	33.3	3
Other	84.4	15.6	32

Table - 4.5

### PERCENTAGE DISTRIBUTION OF PROGRAMME PERSONNEL BY THEIR MARITAL STATUS

Designation	Never Married	Married	Divorced/Widowed	Numbers
Director/Deputy/Assistant Director	-	100	-	9
Instructor	-	100	-	2
DPWO/DDPWO	9.7	90.3	-	72
C&T	14.3	71.4	14.3	14
Admn/Accounts Officer	10.0	90.0	-	20
S/Assistant	14.3	85.7	2.0	21
FWA	24.0	72.0	7.9	50
Steno/UDC	50.9	88.2	-	7
Medical Officer	9.4	66.7	-	3
Other	12.9	90.6	-	32

### Fertility

A cadre wise analysis of Programme Personnel by number of their living children (Table 4.6) reveals that respondents in the category of Directors/Deputy/Assistant Directors had largest mean number of children, followed by DPWO/DDPWO. Weighed in the same scale, Admin. /Accounts Officers stood third and Assistant/S. Assistant fourth in this ranking of Programme Personnel by their mean number of living children. This phenomenon implies that the mean number of living children is quite high among Programme Personnel at more responsible positions.

Respondents, taken as a homogenous group, when seen in terms of simple number of their living children, paint a similar picture. 16.7 percent had at least 5 children and another 16.3 had 4 children. About 5.4 percent respondents had more than 7 children and 7.1 percent had six children. However, it was encouraging to find 17.5 percent



respondents with only 3 living children. Around 20 percent of the respondents had no children including 13 percent who were unmarried.

**Table - 4.6**

**PERCENTAGE DISTRIBUTION OF PROGRAMME PERSONNEL  
BY THEIR NUMBER OF LIVING CHILDREN**

Designation	0	1	2	3	4	5	6	7+	Mean Number of Living Children	Numbers
Director/Deputy/Assistant Director	-	4.0	11.1	11.1	33.3	22.2	-	11.1	3.7	9
Instructor	-	50	-	50.0	-	-	-	-	2.0	2
DPWO/DDPWO	13.9	4.2	8.3	13.9	15.3	29.2	12.5	2.8	3.6	72
C&T	21.4	7.1	7.1	35.7	21.4	-	7.1	2.8	2.6	14
Admn/Accounts Officer	15.0	10.0	-	15.0	30.0	15.0	10.0	5.0	3.4	20
S/Assistant	23.8	0	14.3	14.3	19.0	9.5	9.5	9.5	3.0	21
FWA	30.0	14.0	16.0	16.0	8.0	4.0	4.0	8.0	2.1	17
Steno/UDC	29.4	5.9	11.8	17.6	5.9	23.5	5.9	-	2.5	17
Medical Officer	33.3	-	33.3	33.3	-	-	-	-	1.6	3
Other	18.8	-	9.4	21.9	21.9	18.8	-	9.4	3.2	32

### Contraceptive Practices

Since the promotion of contraceptive prevalence is the centerpiece in the job description of Programme Personnel, they are expected to be practitioners of contraceptive methods, at least for reflecting their own level of motivation. In the context of this expectation, the study sought to observe their contraceptive use status. The percentage distribution of respondents as current users, by designation, shows that 66.5 percent respondents had ever used contraceptives but, at the time of this study, the current use percentage shrunk to 57.1 percent (Table 4.7). The cadre wise analysis of Programme Personnel by current use of contraceptives shows that highest current use of contraceptives prevailed among DPWO/DDPWOs.

**Table - 4.7**

**PERCENTAGE DISTRIBUTION OF PROGRAMME PERSONNEL  
BY EVER USE AND CURRENT USE OF CONTRACEPTIVES**

Designation	Ever user	Current user	Numbers
Director/Deputy/Assistant Director	88.9	44.4	9
Instructor	100.0	50.0	2
DPWO/DDPWO	73.6	66.7	72
C&T	71.4	57.1	14
Admn/Accounts Officer	75.0	55.0	20
S/Assistant	42.9	52.4	21
FWA	58.0	48.0	50
Steno/UDC	58.8	47.1	17
Medical Officer	33.3	33.3	3
Other	68.8	65.6	32

## Resource Development

Non-clinical training seems to be the major resource development event in the professional lives of majority of Programme Personnel. Around 71 percent of the respondents had ever attended a training event, relevant to their job, in addition to non-clinical training. Among them, however only 28.3 percent have supplemented that training with a refresher course. In this age of accelerated development, knowledge becomes obsolete over time. Refresher courses update professionals' knowledge about latest advancements in the relevant area. Therefore refreshers are necessary to keep professionals in pace with the rhythm of time. Analysis of the data by cadre reveals that very few officers in important middle management cadres of the Directors/Dy. Directors had attended any refresher courses. Table 4.8 shows data relating to training received by Programme Personnel.

In terms of time invested in training (Table - 4.9), around 100 percent of the respondents had spent at least ten days in a job-related training. Around 98% have spent 365 or above days in job-related training.

Table - 4.8

### PERCENTAGE DISTRIBUTION OF PROGRAMME PERSONNEL BY THEIR STATUS OF TRAINING RECEIVED

Designation	Training	Refresher	Numbers
Director/Deputy/Assistant Director	100.0	22.2	9
Instructor	580.0	50.0	2
DPWO/DDPWO	61.1	26.4	72
C&T	85.7	14.3	14
Admn/Accounts Officer	70.0	5.0	20
S/Assistant	61.9	33.3	21
FWA	20.0	38.0	50
Steno/UDC	88.2	11.8	17
Medical Officer	66.7	33.3	3
Other	62.5	43.5	32

Table - 4.9

### PERCENTAGE DISTRIBUTION OF PROGRAMME PERSONNEL BY DURATION OF TRAINING RECEIVED

Designation	0-10	10-20	20-31	32-149	150-170	365 and above	Numbers
Director/Deputy/Assistant Director	100	22.2	-	-	-	3.8	9
Instructor	100	-	-	-	0.4	0.4	2
DPWO/DDPWO	100	19.4	4.2	95.8	-	29.6	72
C&T	100	21.4	-	-	-	5.8	14
Admn/Accounts Officer	100	15.0	-	-	-	8.3	20
S/Assistant	95.2	4.8	-	-	-	8.3	21
FWA	100	36.0	6.0	10.0	1.7	20.4	50
Steno/UDC	100	5.9	5.9	-	-	7.1	17
Medical Officer	100	-	-	-	-	1.3	3
Other	100	18.8	3.1	6.3	-	12.9	32



## Evaluation of Training

Generally, the term training evaluation purports to describe both processes and outcomes in the context of objectives of a training event. For the purpose of this study, the Programme Personnel was interviewed for providing information about their level of satisfaction with the training at a PWTI, training contents, curriculum, training material, relevance of training to job description. Evaluation enables to assess the levels of achievement of the targets.

The study found more than 90 percent of the Programme Personnel were satisfied about the relevance of the training to their job description. Almost 99% of the graduates (respondents) of PWTI Multan, 92.4 percent of Karachi and 100 percent of Lahore described the training as helpful in the performance of their professional responsibilities (Table 4.10). About 82.6 percent of the graduates (respondents) of PWTI Multan, 73.2 percent of Lahore and 90.2 percent of Karachi approved the quality of the training that they received at PWTI. (Table 4.11)

Table - 4.10

### VIEWS OF RESPONDENTS ABOUT HELPFULNESS OF PWTI'S TRAINING IN PERFORMANCE of THEIR DUTIES

Designation	Multan %	Lahore %	Karachi %	Total
Director/Deputy/Assistant Director	-	100.0	80.0	88.9
Instructor	-	-	100.0	100.0
DPWO/DDPWO	100.0	100.0	100.0	100.0
C&T	100.0	100.0	75.0	92.9
Admn/Accounts Officer	88.9	100.0	100.0	95.0
S/Assistant	100.0	100.0	80.0	85.7
FWA	100.0	100.0	100.0	100.0
Steno/UDC	100.0	100.0	100.0	100.0
Medical Officer	100.0	100.0	-	100.0
Other	100.0	100.0	90.9	93.8
Total	98.9	100.0	92.4	96.7

Table - 4.11

### PERCENTAGE DISTRIBUTION OF RESPONDENTS SATISFIED WITH QUALITY OF TRAINING AT PWTIS

Designation	Multan %	Lahore %	Karachi %	Total
Director/Deputy/Assistant Director	-	50.0	60.0	55.6
Instructor	-	-	100.0	100.0
DPWO/DDPWO	70.6	67.9	96.3	79.2
C&T	85.7	6.7	100.0	85.7
Admn/Accounts Officer	55.6	77.8	100.0	70.0
S/Assistant	66.7	100.0	93.3	90.5
FWA	93.5	100.0	100.0	94.0
Steno/UDC	100.0	100.0	78.6	82.4
Medical Officer	66.7	-	-	66.7
Other	80.0	80.0	90.9	37.5
Total	82.6	73.2	90.2	83.3

The majority of respondents had positive perception about the training that they ever received in a PWTI (Table 4.12). Comparing the level of satisfaction of the respondents (graduates) with their training at the respective PWTI, 91.31% respondents (graduates) of the PWTI Multan, 91.3 percent respondents (graduates) of the PWTI, 98.2 percent respondents (graduates) of the PWTI Lahore and 90.2 percent of PWTI Karachi reported satisfaction with their training (Table 4.13).

Table - 4.12

**PERCENTAGE DISTRIBUTION OF PROGRAMME PERSONNEL BY THEIR PERCEPTION OF TRAINING RECEIVED AT PWTI**

Designation	Satisfied with training	Received any training material	Sufficiency of present curriculum	Training beneficial	Training should be imparted to others	Numbers
Director/Deputy/Assistant Director	77.8	88.9	33.3	100.0	88.9	9
Instructor	100.0	100.0	100.0	100.0	100.0	2
DPWO/DDPWO	95.8	97.2	70.8	98.6	100.0	72
C&T	100.0	100.0	71.4	100.0	100.0	14
Admn/Accounts Officer	85.0	85.0	60.0	95.0	100.0	20
S/Assistant	81.0	76.2	61.9	85.7	100.0	21
FWA	100.0	88.0	90.0	96.0	98.0	50
Steno/UDC	100.0	70.6	76.5	100.0	94.1	70
Medical Officer	66.7	100.0	100.0	100.0	100.0	3
Other	84.4	81.3	81.3	93.8	96.9	32
Total	92.5	88.3	74.2	96.3	98.3	240

Table - 4.13

**VIEWS OF RESPONDENTS ABOUT THEIR SATISFACTION WITH TRAINING THEY RECEIVED**

Designation	Multan %	Lahore %	Karachi %	Total
Director/Deputy/Assistant Director	-	100.0	60.0	77.8
Instructor	-	94.4	100.0	100.0
DPWO/DDPWO	88.2	100.0	100.0	95.8
C&T	100.0	100.0	100.0	100.0
Admn/Accounts Officer	66.7	100.0	100.0	85.0
S/Assistant	66.7	100.0	80	81.0
FWA	100.0	100.0	100.0	100.0
Steno/UDC	100.0	100.0	100.0	100.0
Medical Officer	66.7	100.0	-	66.7
Other	80.0	100.0	81.8	84.4
Total	91.3	98.2	90.2	92.5

About 88.3 percent reported to have received training material during their training at a PWTI, however, 11.7% claimed to have never received any material (Table 4.12). A majority among respondents (74.2 percent) expressed their satisfaction about the existing curriculum of non-clinical training, however, 25% felt a need for improvement in the curriculum. Comparing the level of satisfaction with the present curriculum among graduates of various PWTIs, it was observed that fifty percent of the graduates



(respondents) of the PWTI Lahore were not satisfied with the existing curriculum (Table 4.14).

**Table - 4.14**

**PERCENTAGE DISTRIBUTION OF RESPONDENTS ABOUT THE SUFFICIENCY OF PRESENT CURRICULUM OF PWTI**

Designation	Multan %	Lahore %	Karachi %	Total
Director/Deputy/Assistant Director	-	25.0	40.0	33.3
Instructor	-	-	100.0	100.0
DPWO/DDPWO	76.5	64.3	74.1	70.8
C&T	85.7	-	100.0	71.4
Admn/Accounts Officer	55.6	66.7	50.0	60.0
S/Assistant	66.7	33.3	66.7	61.9
FWA	91.3	66.7	100.0	90.0
Steno/UDC	100.0	100.0	71.4	76.5
Medical Officer	100.0	-	-	100.0
Other	100.0	60.0	81.8	81.3
Total	84.8	67.1	73.9	74.2

Complete understanding of lectures by respondents was highest for PWTI Multan and lowest for Lahore. Some of the respondents even reported very little understanding of lectures at PWTI Lahore (Table 4.15)

**Table - 4.15**

**PERCENT DISTRIBUTION OF RESPONDENTS BY UNDERSTANDING OF LECTURES AND PWTI'S**

	PWTI Multan	PWTI Lahore	PWTI Karachi	Percent	Number
Completely	70.7	50.0	66.3	64.2	154
Mostly	22.8	41.1	28.3	29.2	70
Partially	6.5	7.1	5.4	6.3	15
Very little	-	1.8	-	0.4	1
Total	100.0	100.0	100.0	100.0	240

### **Meanings of Population Welfare Programme**

With a view to learn as what did the Population Welfare Programme (PWP) meant for the respondents, interesting data was collected (Table 4.16). Twenty eight percent of respondents stated that PWP means adoption of small family norms, while 22% considered the use of family planning method as the objective of the PWP. Other explanations were decline in TFR, MCH and happy family life.

Table - 4.16

**PERCENT DISTRIBUTION OF PROGRAMME PERSONNEL  
BY THEIR UNDERSTANDING OF POPULATION WELFARE  
PROGRAMME**

Designation	Use of FP methods	MCH	Small Family Norm	Decline in TFR	Happy Family Life	Others	Numbers
Director/Deputy/Assistant Director	11.1		44.4	-	33.3	11.1	9
Instructor	-	50.0	-	50.0	-	-	2
DPWO/DDPWO	6.7	5.6	37.5	9.7	18.1	12.5	72
C&T	14.3	14.3	42.9	21.4	-	7.1	14
Admn/Accounts Officer	20.0	5.0	45.0	-	10.0	20.1	20
S/Assistant	23.8	14.3	9.5	23.8	19.0	9.5	21
FWA	34.0	25.0	14.0	6.0	4.0	18.0	50
Steno/UDC	29.4	23.5	17.6	5.9	11.8	11.8	17
Medical Officer	-	33.3	-	-	33.3	33.3	3
Other	25.0	15.6	31.3	6.3	15.6	6.3	32
Total	22.5	13.8	28.3	9.2	13.3	12.9	240

### Orientation in demographics

For evaluating the orientation of Programme Personnel in demography, they were asked a question pertaining to basic demographic concepts that are included in the curriculum of the training at PWTIs (Table 4.17). The study noted that a little more than half of the respondents had knowledge of all basic concepts of demography like CBR, CDR and TFR. About 44 percent respondents could not explain a single demographic concept. The lowest response rate came from the graduates of PWTI, Karachi, while the highest response rate came from the graduates of PWTI, Lahore. Only 50% of the respondents in the cadre of Instructor could explain all of the three given concepts (Table 4.18).

Table - 4.17

**PERCENTAGE DISTRIBUTION OF PROGRAMME PERSONNEL  
BY THEIR KNOWLEDGE OF BASIC DEMOGRAPHIC CONCEPTS**

Designation	CBR	CDR	TFR	ALL CONCEPTS	CBR and CDR	CBR and TFR	CDR and TFR	NUMBERS
Director/Deputy/Assistant Director	66.7	55.6	66.7	77.8	88.9	100.0	55.6	9
Instructor	50.0	50.0	50.0	50.0	100.0	100.0	50.0	2
DPWO/DDPWO	69.4	68.12	73.6	83.3	91.7	98.6	40.3	72
C&T	35.7	50.0	71.4	71.4	85.7	100.0	71.4	14
Admn/Accounts Officer	35.0	25.0	40.0	45.0	90.0	100.0	75.0	20
S/Assistant	47.6	66.7	42.9	66.7	100.0	85.7	61.9	21
FWA	18.0	10.0	8.0	22.0	98.0	100.0	98.0	50
Steno/UDC	17.6	17.6	11.8	23.5	100.0	100.0	94.1	17
Medical Officer	-	-	33.3	33.3	66.7	100.0	100.0	3
Other	43.8	43.8	50.0	56.3	96.9	96.9	68.8	33
Total	43.8	42.9	45.8	56.3	94.2	97.9	67.9	240



Table-4.18

**PERCENT DISTRIBUTION OF RESPONDENTS BY THEIR KNOWLEDGE OF  
DEMOGRAPHIC CONCEPT BY PWTI'S**

Knowledge of Population Dynamics	PWTI Multan	PWTI Lahore	PWTI Karachi	Total	Number
All concepts	12.0	64.3	32.6	32.1	77
Two concepts	14.1	5.4	14.1	12.1	29
One concept	16.3	7.1	10.9	12.1	29
No knowledge	57.6	23.2	42.4	43.8	105
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>240</b>

Nearly 18.5 percent of the did not even know what did the term population dynamics imply. About 19.6 percent viewed population dynamics as something related to births, deaths, and migration (Table 4.19). About 29.3 percent could mention only one component of population dynamics. . The lowest response rate came from graduates of PWTI Karachi, Where 40.2 could not name a single constituent of population dynamics. It is interesting to note that population dynamics is a scarcely known concept.

Table - 4.19

**PERCENTAGE DISTRIBUTION OF PROGRAMME PERSONNEL  
THEIR KNOWLEDGE OF POPULATION DYNAMICS**

Knowledge of Population Dynamics	PWTI Multan	PWTI Lahore	PWTI Karachi	Total	Number
All concepts	19.6	25.0	2.2	14.2	34
Two concepts	32.6	62.5	50.0	46.3	111
One concept	29.3	5.4	7.6	15.4	37
No knowledge	18.5	7.1	40.2	24.2	58
<b>Total</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>100.0</b>	<b>240</b>

The thrust of most of the arguments for promoting small family norm in Pakistan is on the consequences of rapid population growth. In view of this fact, the survey requested Programme Personnel for explaining some of the known consequences of rapid population growth (Table 4.20). Majority of the respondents viewed that depletion of resources as the worst manifestation of population growth. Around 89% respondents in the cadre of Directors/Dy/Assistant Directors could cite only one negative effect of the baby boom.

Table - 4.20

**PERCENT DISTRIBUTION OF PROGRAMME PERSONNEL  
BY THEIR AWARENESS OF CONSEQUENCES OF  
RAPID POPULATION GROWTH**

Designation	Lack of resources	Increase independent population	Increase in uneducated population	Any other	Numbers
Director/Deputy/Assistant Director	88.9	-	-	11.1	9
Instructor	50.0	50.0	-	-	2
DPWO/DDPWO	61.1	11.1	18.1	9.7	72
C&T	71.4	14.3	-	14.3	14
Admn/Accounts Officer	50.0	15.0	2.0	15.0	20
S/Assistant	66.7	4.8	23.8	4.8	21
FWA	68.0	6.0	24.0	2.0	50
Steno/UDC	82.4	5.9	5.9	5.9	17
Medical Officer	33.3	-	66.7	-	3
Other	90.6	3.1	6.3	-	32
Total	68.8	8.3	16.3	6.7	240

While the answers provided by Programme Personnel reflected the understanding of what they learnt in the non-clinical training, it equally sheds light on the quality of training they received.

### Understanding the Advantages of FP

By the very nature of their job, Programme Personnel are quite essential to the success of PWP in Pakistan. They are the ones who are assigned to bring about a change in the attitudes and behaviours of the masses towards small family norms. The study sought to observe as what Programme Personnel perceived about the advantages of the objectives they stand for (Table 21). The gathered data reveals that 60 percent respondents considered family planning as beneficial for the development of the country, while 40% of the respondents reckoned other benefits like limiting of family size, birth spacing, good prospects for education of children, economic stability of the individuals, and better MCH as the advantages of family planning.

For observing the extent of gender bias, if any, among respondents, particularly their views on the reproductive rights of the women, respondents were asked whether women should have reproductive rights (Table 22). It was quite assuring to see that 93.3 percent of the respondents held that women should be given the right to decide about conception. Cent percent of the respondents in the cadre of Instructor, C & T, Medical Officers and Steno/UDC favored the idea, however 11% among Directors/Dy./Assistant Directors, 15% among Admin. /Accounts. Officers and 28% among DPWO/DDPWO opposed this idea.



Table - 4.21

**PERCENTAGE DISTRIBUTION OF PROGRAMME PERSONNEL  
BY THEIR PERCEPTION OF ADVANTAGES OF  
FAMILY PLANNING BY DESIGNATION**

Designation	Developm ent of country	Limiting	Spacing	Education easily available to lesser number of children	Economic stability	MCH	Any other	Numbers
Director/Deputy/Assistant Director	55.6	11.1	-	22.2	-	11.1	-	9
Instructor	50.0	50.0	-	-	-	-	-	2
DPWO/DDPWO	68.1	9.7	5.6	5.6	4.2	4.2	2.8	72
C&T	42.9	21.4	14.3	7.1	7.1	-	0.4	14
Admn/Accounts Officer	42.9	21.4	14.3	7.1	7.1	-	-	20
S/Assistant	42.9	19.0	4.8	14.3	9.5	4.8	4.8	21
FWA	60.0	8.0	4.0	18.0	6.0	4.0	-	50
Steno/UDC	64.7	11.8	5.9	11.8	5.9	-	-	17
Medical Officer	73.3	32.3	33.3	-	-	-	-	3
Other	56.3	12.5	12.5	9.4	6.3	3.1	-	32
Total	59.6	12.5	6.7	10.4	5.8	33.3	1.3	240

Table - 4.22

**PERCENTAGE DISTRIBUTION OF PROGRAMME PERSONNEL  
VIEW ON THE IDEA THAT RIGHT OF REPRODUCTION  
TO BE GIVEN TO WOMEN**

Designation	Right should be given	Numbers
Director/Deputy/As sistant Director	88.9	9
Instructor	100.0	2
DPWO/DDPWO	71.7	72
C&T	100.0	14
Admn/Accounts Officer	85.0	20
S/Assistant	90.5	21
FWA	96.0	50
Steno/UDC	100.0	17
Medical Officer	100.0	3
Other	93.8	32
Total	93.3	240

The study looked for the strategies adopted by Programme Personnel for motivating target population about adopting small family norm. It transpired that Programme Personnel exercised multiple strategies to mobilize their target population (Table 4.23). These strategies included provision of information about family planning methods; side effects of contraceptives; benefits of female education, through interpersonal communication, door-to-door visits, and contacting local influentials. Sixty percent of respondents regarded that interpersonal communication as effective tool for motivation,

while 19.9 percent mentioned home visits as the best strategy for motivation. Other ways of motivation described by respondents were provision of information about side effects and family planning methods. About 4.6 percent respondents favored using liaison and rapport of local influentials as a way to motivate masses.

**Table - 4.23**

**PERCENT DISTRIBUTION OF PROGRAMME PERSONNEL BY THEIR IDEA TO MOTIVATE TARGET POPULATION**

Designation	No response	Interpersonal communication	Home Visits	Provision of information about FP	Provision of information on side effects	Contacting influential people	Educating females	IEC	Numbers
Director/Deputy/Assistant Director	-	55.6	-	22.2	-	11.1	-	11.1	9
Instructor	-	-	50.0	-	-	-	-	50.0	2
DPWO/DDPWO	-	70.8	9.7	1.4	14	2.8	5.6	8.3	72
C&T	-	71.4	14.3	-	-	-	14.3	-	14
Admn/Accounts Officer	-	75.0	15.0	-	-	-	-	10.0	20
S/Assistant	4.8	57.1	9.5	9.5	-	4.8	9.5	4.8	21
FWA	4.0	64.0	16.0	14.0	-	2.0	-	-	50
Steno/UDC	5.9	58.8	11.8	17.6	-	-	5.9	-	17
Medical Officer	-	-	33.3	33.3	33.3	-	-	-	3
Other	-	46.9	15.6	15.6	3.1	3.1	6.3	9.4	32
Total	1.7	62.5	12.9	8.8		2.5	4.6	-	240

During the interviews, the respondents mentioned various problems and issues concerning the non-clinical training for the employees of NBDS. Simultaneously, they provided suggestions for solving these problems and/or for improving the quality of training. These problems/issues and suggestions are as under:

**PROBLEMS**

Lack of information about I.E.C.  
 No promotion prospect  
 Inadequate number of staff  
 Difficult to convince people  
 Lack of regular jobs  
 Absence of job-related training  
 Delay in disbursement of staff salary  
 Absence of residential facilities for DPWO  
 Lack of financial and administrative power  
 Lack of medical facilities.  
 Lack of funds

**Suggestion made by the respondents**

Introduction of new and modern methods of family planning  
 Target cases to be fixed for DPWOs, FWW, FWA  
 Regular monitoring of field staff



Increased coordination and cooperation between administration and staff  
Increased field trips for better results  
PWP to involve incentive  
Increased involvement of NGOs and journalist in PWP  
Improvements in the quality of contraceptives.  
Country wise performance review of Programme Personnel  
Regular supply of contraceptives.to field offices  
Provision of conveyance for field duty  
Seek co-operation of religious people  
Increase the number of village based workers  
Increase in the number of FWC  
Department to have its own buildings  
Appointment of local people in every district  
Provision of facilities to field staff

## CHAPTER 5

### NATION BUILDING DEPARTMENT

It is a fact that the solution to high fertility rate can only be found through a comprehensive understanding of cross cutting themes across the socio-economic matrix of society, but it was not recognised for decades in Pakistan. Similarly, it also remained unacknowledged that changes in demographic composition offset long-term policy and planning objectives in vital public sector institutions of the country. The 7th Five-Year Plan envisaged to redesign strategy of PWP to create an environment supportive of population welfare activities in the country. The new strategy for the programme recognised that the rise in population growth did not merely depend on an unfelt need for contraception and there are other factors too, responsible for high population growth.

Acceptance of the idea of inter-disciplinary nature of population problem has created a need to involve nation building departments (NBDs)-health, social welfare, education, local government, labour-in a national effort to reduce the rate of baby boom. As a first step to translate this vision in to action, it was decided to orient officials of NBD in the nature and direction of the population issue.

In furtherance of this policy, the three PWTIs impart two to four days training to officials of NBDs. The trainees include planners, administrators, mid-level managers and front-line workers. One of the objectives of this study aimed at soliciting the views about training of the officials of NBDs, who had attended the non-clinical training. Thus, the study focused on what they had learnt, what was their perception on the usefulness of the training etc. For this purpose, data about officials of NBDs trained in non-clinical training was acquired from the three PWTIs. On the basis of detailed information acquired, all officials of NBDs trained in non-clinical training were categorised in terms of their home provinces. Then a proportionate sample of these officials was drawn from the four provinces. Table 6.1 presents the coverage of the officials of NBDs taken as sample, who attended a training program at a PWTI.

The study originally had a sample of 169. However interviews were materialised with only 140 respondents (82.8 percent). A province wise comparison reveals that 81.6 percent respondents in Punjab, 83.3 in Sindh and 90.0 percent in NWFP were available for interviews. 1.2 percent respondents did not agree to be interviewed, while 8.9 percent were absent from their place of duty, and 1.8 percent denied to have ever received training at PWTI's. About 5.3 percent of the NBD were not available on the given addresses. The respondents, who refused to be interviewed or declined to accept that they had ever attended a training program and those who were not traceable collectively constituted 8.3 percent of the original sample. This percentage indicates the possibility about the inclusion of fake names in the database of trainees from NBDs. The percentage of completed interviews suggests that coverage across the domains was uniform (more than 82 percent).

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\* The term respondent in this chapter hereafter refers to those who actually responded to the survey.



Table 5.1. presents total coverage of sample.

Table 5.1

**PERCENTAGE DISTRIBUTION OF SAMPLED SIZE OF  
NATION BUILDING DEPARTMENT (NBD) RESPONDENTS WHO  
RECEIVED TRAINING AT PWTI**

Result	Punjab	Sindh	NWFP	Total	N
Completed	81.6	83.3	90.0	82.8	140
Refused	-	4.2	5.0	1.2	2
Person with No Training	0.8	4.2	5.0	1.8	3
Person Absent	11.2	4.2	-	8.9	15
Person Don't Exist	6.4	4.2	-	5.3	9
Numbers	125	24	20	100	169

Table 5.2

**Background Characteristics: - percentage distribution of NBD by their Designations**

Designation	Percentage	Numbers
Divisional/Assistant Director	4.3	6
Principal, Instructor	6.4	9
Teacher	1.4	2
Account, Admin. Officer	1.4	2
Assistant, S/Assistant	10.7	15
Stenographer	12.9	18
Medical Technologist	1.4	2
Demonstrator	.7	1
Medical Officer	2.1	3
Professor, Lecturer	25.7	36
Any Other	32.9	46
<b>Total</b>	<b>100.00</b>	<b>140.00</b>

## BACKGROUND CHARACTERISTICS

### Profession

Among the 140 respondents, 47 were in teaching jobs, 18 in secretarial jobs, 6 were associated with medical profession, 6 were serving at middle management positions, 17

were dealing in administrative/accounting responsibilities and 46 were in other categories of Government employment.

## Education

The respondents serving at various levels of responsibilities in a variety of departments had varying levels of education. Majority (32.1 percent) of them was graduate. Those with postgraduate level education constituted 25.7 percent of the total respondents. 3.6 percent had professional degrees. 13.6 percent had completed intermediate education and 1.4 percent had diploma/certificates. Others were matriculate or under-matriculation.

Table 6.3 presents education level of the respondents.

Table 5.2

**PERCENTAGE DISTRIBUTION OF NBD/BY BACKGROUND CHARACTERISTICS**

Designation	Education							Total
	Primary	Matric	FA/F.Sc	BA/B.Sc.	MA/M.Sc.	MBBS	Others	
Div. Dir., Dir., Assist. Director	-	-	-	-	83.3	16.7	-	6
Principal, Instructor	11.1		11.1	33.3	44.4	-	-	9
Teacher	-	-	50.0	50.0	-	-	-	2
Accounts/Admin. Officer	-	-	-	50.0	50.0	-	-	2
Assistant, S/Assistant	-	20.0	20.0	46.7	-	13.3	-	15
Stenographer	-	27.8	27.8	33.3	11.1	-	-	18
Medical Technologist	50.0	-	-	-	-	-	50.0	2
Demonstrator	-	-	-	-	100.0	-	-	1
Medical Officer	-	-	-	-	33.3	66.7	-	3
Professor, Lecturer	2.8	33.3	13.9	33.3	16.7	-	-	36
Any Other	8.7	13.0	8.7	32.6	34.8	-	2.2	46
<b>Total</b>	<b>5.0</b>	<b>18.6</b>	<b>13.6</b>	<b>32.1</b>	<b>25.7</b>	<b>3.6</b>	<b>1.4</b>	<b>140</b>

## Contraceptive Practice

Exclusively designed for NBDs, the non-clinical training has the purport to orient officials for understanding the population problem and help participate in the effort to reduce the population growth rate, by providing a support environment to PWP, while serving in their own departments. Although not formally required, the officials trained in non-clinical training are expected to be practicing contraceptive methods, at least, as a reflection of the impact of training on their own personal attitudes. In the context of this expectation, the study sought to observe the contraceptive use status among respondents.



The percentage distribution of respondents, as contraceptive users, shows that 62.1 percent of them had ever been users of contraceptives. At the time of this study, 60 percent respondents reported use of contraceptives, which means that current use percentage has shrunk by 2 percent. The analysis of current use of contraceptive, by respondents in terms of their education, suggests that 100 percent of those with graduation in medicine, were current users at the time of this study. Second highest current use of contraceptives prevailed among Principals/Instructors. The reported current use of contraceptive was lowest in the case of officials serving at secretarial positions.

Table 5.3 describes the contraceptive prevalence among the respondents.

Table 5.3

**PERCENTAGE DISTRIBUTION OF NBD BY THEIR CONTRACEPTIVE USE**

Designation	Ever use	Current Use	Numbers
Div. Dir., Dir., Assist. Director	83.3	83.3	6
Principal, Instructor	77.8	77.8	9
Teacher	100.0	50.0	2
Account, Admn. Officer	-	-	2
Assistant, S/Assistant	53.3	60.0	15
Stenographer	38.9	38.9	18
Medical Technologist	50.0	-	2
Demonstrator	100.0	100.0	1
Medical Officer	100.0	100.0	3
Professor, Lecturer	63.9	58.3	36
Any Other	65.2	65.2	46
<b>Total</b>	<b>62.1</b>	<b>60.0</b>	<b>140.00</b>

### Fertility

The cadre wise analysis of respondents by number of their living children reveals that more than 50 percent respondents in the category of Accounts/Admn. Officer had six or more children, followed by Officer Directors/Deputy/Assistant Directors and Principal/Instructors. The number of living children is quite high among respondents at middle management positions. It was encouraging to find that majority (23 percent) had three living children. Around 60 percent of the respondents had living children ranging from a minimum of 3 to 7 or more numbers. All respondents in categories like teachers, accounts/admin officers and medical officers had four or more children. 22.9 percent of the respondents had no child, while 16.4 percent had 4 and 13.6 percent had five children.

Table 5.4 provides percentage Distribution of the NBDs by their number of living children.

Table 5.4

**PERCENTAGE DISTRIBUTION OF NBD'S BY THEIR NUMBER  
OF LIVING CHILDREN**

Designation	Number of Living Children							Percent	Numbers
	0	1	2	3	4	5	6+		
Div. Dir., Dir., Assist. Director	-	-	16.7	16.7	16.7	33.3	16.7	2.7	6
Principal. Instructor	11.1	11.1		22.2	33.3	11.1	11.1	4.2	9
Teacher	-	-	-	-	50.0	50.0	-	3.3	2
Account. Admn. Officer	-	-	-	-	50.0	-	50.0	4.5	2
Assistant. S. Assistant	26.7	-	20.0	20.0	6.7	20.0	6.7	5	15
Stenographer	44.4	5.6	16.7	11.1	11.1	5.6	5.6	2.6	18
Medical Technologist	50.0	-	-	50.0	-	-	-	1.7	2
Demonstrator	-	-	-	100.0	-	-	-	1.5	1
Medical Officer	-	-	-	-	66.7	33.3	-	3	3
Professor. Lecturer	25.0	8.3	11.1	19.4	16.7	16.7	2.8	4.3	36
Any Other	19.6	4.3	13.0	32.6	13.0	8.7	8.7	2.5	46
<b>Total</b>	<b>22.9</b>	<b>5.0</b>	<b>12.1</b>	<b>22.9</b>	<b>16.4</b>	<b>13.6</b>	<b>7.1</b>	<b>2.7</b>	<b>140.0</b>

### Evaluation of Non-Clinical Training: -

What lends justification to the very idea of imparting non-clinical training to the officials of NBDs is the need to create an environment supportive of population welfare activities in the country. The training seeks to sensitize the officials of NBDs about the cross cutting factors, across the socio-economic matrix of society, responsible for high fertility rate. Therefore, multi-sectoral interventions and approaches are required to solve this problem. The intervention of NBDs becomes increasingly necessary in a scenario where high fertility rate negatively affects long-term policy and planning objectives of their respective departments too.

For the purpose of evaluating the quality and impact of the training that the respondents attended at PWTIs, we asked them questions about their understanding of PWP, about their interest, level of satisfaction and perception of the training, and its contents, curriculum, training material, relevance of the training to job description etc. How do the respondents take advantage of the knowledge and skills that they learn during the course of training sessions? Is the training of any help in facilitating the actual performance of their work. The answers to such questions incisively help assess the rationale of training for officials of NBDs as a way to make these officials understand the multi-disciplinary impact of population growth while planning, teaching, or implementing the Government policies.

The data gathered for this assessment tells that above 71 percent of respondents were convinced that the training helped them in performance of their duties. Nearly one third (28.6 percent) of respondents did not perceive it as helpful in performance of their duties.



Class attendance usually serves as a barometer of trainees' interest in training. Simultaneously, it reflects upon the quality of training. The study used this test for measuring the interest of respondents in training and for securing their indirect feedback on the quality of training as well. The study found that majority (96.4 percent) of the respondents regularly attended all sessions during the three days training program. Only 6.7 percent were not able to attend all sessions.

On the availability and distribution of resource material during the training, one fifth (19 percent) of the respondents complained not to have received training material.

Table 5.5 reveals the distribution of NBD respondent's training

**Table 5.5**

**PERCENT DISTRIBUTION OF NBD/BY DESIGNATION BY THEIR  
OPINIONS ABOUT TRAINING**

<b>Designations</b>	<b>Attend All Classes</b>	<b>Received Any Training Material</b>	<b>Training Helpful</b>
Div.Dir., Director, Assist. Director	100.0	100.0	66.7
Principal, Instructor	100.0	77.8	88.9
Teacher	100.0	100.0	50.0
Account, Admin. Officer	100.0	100.0	50.0
Assistant, S/Assistant	93.9	100.0	80.0
Stenographer	100.0	83.3	88.9
Medical Technologist	100.0	50.0	100.0
Demonstrator	100.0	100.0	100.0
Medical Officer	100.0	33.3	100.0
Professor, Lecturer	100.0	69.4	61.1
Any Other	91.3	82.6	65.2
<b>Total</b>	<b>96.4</b>	<b>80.7</b>	<b>71.4</b>

The study observed that the majority of respondents was satisfied with what the teaching faculty delivered during the training course. Reported understanding of all lectures among respondents was reasonably on the higher (65.7 percent) side. About 27.1 percent respondents reported the understanding of most of lectures. However, only 7 percent reported partial or no understanding of lectures. It is perplexing to find professors and lecturers among the 0.7 percent complaining no understanding of any of the lectures.

Table 5.6 compares the understanding of lectures by respondents.

Table 5.6

**PERCENT DISTRIBUTION OF NBDS HAVING UNDERSTANDING  
OF THE LECTURE**

Designation	Understand the Lecture			
	Completely	Mostly	Partially	Don't understand
Div. Dir., Director, Assist. Director	83.3	16.7	0	0
Principal, Instructor	77.8	22.2	0	0
Teacher	100.0	0	0	0
Account, Admin. Officer	100.0	0	0	0
Assistant, S/Assistant	46.7	33.3	20.0	0
Stenographer	88.9	5.6	5.6	0
Medical Technologist	50.0	50.0	0	0
Demonstrator	0	100.0	0	0
Medical Officer	100.0	0	0	0
Professor, Lecturer	58.3	33.3	5.6	2.8
Any Other	60.9	32.6	6.5	0
<b>Total Percentage</b>	65.7	27.1	6.4	0.7

On the question of suitability of buildings of PWTIs for training purposes, there was a sharp divide among the respondents. At least 46 percent respondents did not express satisfaction with the present buildings, however 54.3 percent held the opposite view.

About the curriculum of the training program for officials of NBDs, 67 percent respondents stressed upon the need for revising the contents of the course. Among those suggesting revision of training course, majority of the respondents was from higher education groups.

The respondents were unequivocal about the relevance and advantages of training for the officials of NBDs. An overwhelming majority (around 96 percent) of respondents voted in favour of the continuation of this training program and extension in its coverage to train more officials of NBDs.

Percentage distribution of respondents' perception of training is presented in table 5.7.



Table 5.7

**PERCENTAGE DISTRIBUTION OF NBD BY THEIR PERCEPTION  
OF TRAINING GIVEN AT PWTI**

Designation	Building suitable	Course to be revised	Training beneficial	Training to be imparted	Numbers
Div. Dir., Dir., Assist. Director	33.3	66.7	66.7	100.0	6
Principal, Instructor	44.4	88.9	100.0	100.0	9
Teacher	50.0	50.0	100.0	100.0	2
Account, Admn. Officer	50.0	0	50.0	50.0	2
Assistant, S/Assistant	60.0	66.7	100.0	93.3	15
Stenographer	83.3	27.8	94.4	94.4	18
Medical Technologist	50.0	50.0	100.0	100.0	2
Demonstrator	100.0	0	100.0	100.0	1
Medical Officer	66.7	33.3	100.0	100.0	3
Professor, Lecturer	44.4	47.2	94.4	97.2	36
Any Other	52.2	67.4	95.7	95.7	46
<b>Total</b>	<b>54.3</b>	<b>55.7</b>	<b>94.3</b>	<b>95.7</b>	<b>140.00</b>

Although 65.7 of respondents termed the lectures and contents of training as completely understandable, and 27.1 percent reported to have understood most of the lecture, but when requested to define concepts such as crude birth, death and total fertility rates, only 5 percent were able to describe each of these concepts satisfactorily. The highest understanding for any concept was among not more than 10 percent of the respondents. Respondents in the categories like accounts/admin officer, stenographer, and medical technician turned out to be without any knowledge of the concepts.

Table 5.8

**PERCENTAGE DISTRIBUTION OF NBD RESPONDENTS BY THEIR  
UNDERSTANDING OF THE BASIC DEMOGRAPHIC CONCEPTS**

Designation	Understanding of:				N
	All Concept	CBR & CDR	CBR & TFR	CDR & TFR	
Div. Dir., Dir., Assist. Dir.	16.7	16.7	33.3	-	6
Principal, Instructor	-	11.1	11.1	11.1	9
Accounts/Admin. Officer	-	-	-	-	2
Teacher	1.2	10.0	3.5	2.3	2
Assistant	6.7	6.7	-	-	15
Steno.	-	-	-	-	18
Medical Technician	-	-	-	-	2
Demonstrator	-	-	100	-	1
Medical Officer	33.3	33.3	-	-	3
Professor, Lecturer	8.3	8.3	11.1	-	36
Any Other	1.0	5.2	3.0	2.0	46
<b>Total</b>	<b>5.0</b>	<b>10.0</b>	<b>8.6</b>	<b>2.1</b>	<b>140</b>

Certainly, it does not form part of their job description, but the officials of NBDs trained at PWTIs are expected to motivate others for small family norm. The study tried to assess what respondents perceived as the level of their success in motivating and persuading other individuals. About 58.6 percent of respondents claimed to have successfully persuaded and motivated people to adopt F.P methods.

Among medical professionals, principal/instructors, and others the reported incidence of successful motivation ranged from 33 to 49 percent. Among other categories of respondents, it ranged from 50 to 100 percent (Table 5.9).

Table 5.9

**PERCENTAGE DISTRIBUTION OF NBDS BY THEIR  
MOTIVATION OF PEOPLE**

Designation	Motivated any body to adopt FP.
Div. Dir., Dir., Assist. Director	50.0
Principal, Instructor	44.4
Teacher	100.0
Account, Admn. Officer	50.0
Assistant, S/Assistant	80.0



Designation	Motivated any body to adopt FP.
Stenographer	77.8
Medical Technologist	50.0
Demonstrator	100.0
Medical Officer	33.3
Professor, Lecturer	58.3
Any Other	47.8
Total	58.6

A patriarchal social structure and abysmally low social status of women in Pakistan remains the principal obstacle to the adoption of family planning practices. This has led to non-recognition of women's right to reproduction by the society. This study pursued the respondents to reflect on whether women should be given right to reproduction. Eighty six percent of the respondents supported the idea of recognizing women's right to reproduction. Although, it is difficult to treat this incidence of higher percentage of respondents expressing support for reproductive rights of women as a direct impact of the training imparted at PWTI, however it will be equally unjust to outright discredit PWTIs for this positive thinking among the respondents.

Table 5.10

**PERCENTAGE DISTRIBUTION OF NBDS BY THEIR VIEW THAT  
THE RIGHT OF REPRODUCTION TO BE GIVEN TO WOMEN**

Designation	Women should be given the right to use FP method
Div. Dir., Dir., Assist. Director	83.3
Principal, Instructor	100.0
Teacher	50.0
Account, Admn. Officer	50.0
Assistant, S/Assistant	86.7
Stenographer	72.2
Medical Technologist	50.0
Demonstrator	100.0
Medical Officer	100.0
Professor, Lecturer	88.9
Any Other	89.1
<b>Total Percentage</b>	<b>85.7</b>

A training program designed to involve NBDs in the national effort to help control population growth, expects its target audience to understand at least, the primary objective of the PWP. With this fact in view, the respondents were given six choices,

with the request to indicate at least three, which, in their view, best reflected their understanding of the PWP (as shown in table 5.11). In response, respondents indicated three objectives; mother and child health (33.6 percent), small family norm (29.3 percent) and use of family planning methods (16.4 percent) which, in their view, best reflected the objectives for which the PWP existed

Table 5.11

**PERCENTAGE DISTRIBUTION OF NBD RESPONDENTS BY THEIR UNDERSTANDING OF POPULATION WELFARE PROGRAMME**

Designation	Understanding of P.W.P.						Numbers
	Use of FP methods	MCH	Small Family Norm	Decline in TFR	Happy Family Life	Other	
Div. Dir., Dir., Assist. Dir.	50.0	16.7	16.7	-	16.7	-	6
Principal, Instructor	11.1	44.4	33.3	11.1	-	-	9
DPWO,DDPWO	-	50.0	50.0	-	-	-	2
Account. Admin. Officer	-	50.0	-	50.0	-	-	2
Assistant, S/Assistant	33.3	33.3	6.7	13.3	-	13.3	15
Stenographer	27.8	55.6	-	-	-	16.7	18
Medical Technologist	-	50.0	-	-	-	50.0	2
Demonstrator	-	-	100.0	-	-	-	1
Medical Officer	-	33.3	66.7	-	-	-	3
Professor, Lecturer	2.8	19.4	41.7	13.9	11.1	11.1	36
Any Other	17.4	34.8	37.0	4.3	6.5	-	46
<b>Total</b>	<b>16.4</b>	<b>33.6</b>	<b>29.3</b>	<b>7.9</b>	<b>5.7</b>	<b>7.1</b>	<b>140.00</b>

During the interviews, the respondents mentioned various problems and issues concerning the non-clinical training for the employees of NBDS. Simultaneously, they provided suggestions for solving these problems and/or for improving the quality of training.. These problems/issues and suggestions are as under:

### Problems

- No female instructors for female trainees.
- Conveyance problems/transport problems.
- Lack of facilities (hostel/water shortage).
- Lack of training material.
- Insufficient seating capacity in the institute.
- Financial problems.
- Difficult lectures.

### Suggestions

- More centres should be opened in rural areas for Family Planning training purpose.
- More staff to be provided.
- Training should be frequent.



- Follow up training after training.
- Education through media.
- Contraception should be of good quality and easily provided.
- Training duration should be long.
- Provision of contraceptives should be free of cost.
- Motivation of lower income people.
- More training should be given to Government Employees.
- A lady doctor in P.W.P. and D.P.W.O. etc should be appointed.
- The availability of medicines should be confirmed.
- Trained staff may be appointment in related departments.
- Only married persons should be trained.
- Introduce new methods of family planning.
- Give training through videos.
- Involve the subject of Islam and Family Planning in training.
- Strengthen the Village Based workers Scheme.
- Start mobile training programme.
- Budget for PWP to be increased.
- Training Centre should be easily accessible.
- Uses of F.P. should be given some benefits.
- Family Planning should be regarded compulsory for married personnel.
- Training of Hakeems and homeopaths is useless therefore it should be disallowed.
- Family Planning topic to be correlated with other subjects.
- Involvement of people and leaders in P.W.P.
- T.P.W.O. office F.W.C. should be separate.

## CHAPTER 6

### COMMUNITY BASED GROUPS

Population Welfare Department has structural features of centralized target setting, hierarchy and standardization that are directly antithetical to community participation. The major reason being the inability of organization to accommodate the local variations in goals and procedures that are an inevitable consequence of community participation. However, this handicap does not imply total exclusion of communities from the programme. The community does participate in the PWP, though not at policy formulation level, but in advocacy of the Programme. The most common form of active community participation in the population welfare program is the training of community-based groups (CBGs) who represent the opinion-forming segment of the society, living within community and frequently interacting with people at grass root levels.

The term Community Based Groups encapsulates opinion leaders, elected representatives, members of Parliament and provincial legislatures, volunteers of non government organisations (NGOs), councillors of local governments, registered medical practitioners, Hakeems (practitioners of traditional medicine) homeopaths, etc. The imperative of educating local opinion leaders about population problem and using their influence for convincing people in the neighbourhood lends rationale to the training of community based groups.

The offices of the District Population Welfare Officers provide orientation sessions of 1-2 days in non-clinical training to the Community Based Groups (CBG).

#### **Coverage.**

For studying the perceptions of the CBGs about the non-clinical training, data about trainees of CBGs was acquired from the District Population Welfare Offices in districts taken as sample. On the basis of detailed information acquired, a proportionate sample of these trainees was drawn from the four provinces. Table 6.1 presents the coverage of the sampled community based groups. The percentage of completed interviews suggests that coverage across the domains is uniform i.e. more than 85 percent with for all provinces except Sindh, where percentage for completed interviews is 61. The lower coverage in Sindh is mainly due to the absence of CBG from their work places. Across the sample universe, 0.9 percent respondents refused to be interviewed, 7.2 percent denied to have ever received a training, while 3.6 percent were not available on the given addresses.

The respondents who refused to be interviewed and/or declined to have ever attended a training program and those who were not traceable collectively constitute 11.7 percent of the total sample, This percentage indicates the possibility of inclusion of fake names in the database of trainees from CBGs.



Table 6.1 presents the coverage of the officials of NBDs taken as sample, who attended a training at a PWTL.

**Table 6.1**

**PERCENTAGE DISTRIBUTION OF TOTAL COVERAGE OF SAMPLED  
COMMUNITY BASED GROUPS (CBGs) WHO RECEIVED TRAINING AT PWTL**

Result	Punjab	Sindh	Balochistan	NWFP	Pakistan	Numbers
Completed	89.6	61.2	88.1	88.2	82.8	*183
Refused	1.0	2.0	-	-	0.9	2
Person with No Training	3.1	12.2	7.1	11.8	7.2	16
Person Absent	3.1	16.3	2.4	-	5.4	12
Person Don't Exist	3.1	8.2	2.4	-	3.6	8
Sample size in numbers	<b>96</b>	<b>49</b>	<b>42</b>	<b>34</b>	<b>100</b>	<b>221</b>

## **Back Ground Characteristics**

### **Education**

The respondents came from a mix of professions with varying levels of education. Majority of the respondents had a degree in Medicine (35%). 20 percent of the respondents were Matriculate. While the proportion of respondents with post graduation and graduation was 4.4 percent and 6.0 percent respectively. Others were under Matriculation. Table 6.2 presents education level of the respondents taken as sample from CBGs.

The emergence of medical professionals, as the preponderant category in the randomly selected sample from CBGs, indicates serious flaws in the methodology for determining the target group of the training course. This is a typical case of awakening the already awakened syndrome. There is no denying the fact that medical practitioners ought to be periodically updated on nature and direction of population issue in the country, however, involving them in a one day training course basically designed for uninitiated ones is a mere wastage of scarce resources.

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The term respondents throughout this chapter would refer to the actual number of respondents whose interviews were completed.

## Profession

Table 6.2

### PERCENTAGE DISTRIBUTION OF TOTAL COVERAGE OF SAMPLED COMMUNITY BASED GROUPS (CBGs) BY PROFESSION

Designation	Percentage	Number
Principal	0.5	1
Research Assistant	0.5	1
Medical Officer	6.6	12
Teacher	0.5	1
Professor	0.5	1
R.M.P.	27.3	50
Hakeem	30.1	55
Homeopath	15.8	29
Councillor	4.4	8
Social Worker	3.3	6
Doctor	0.5	1
L.H.V.	0.5	1
Any Other	9.3	17
<b>Total</b>	<b>100.00</b>	<b>183</b>

Table 6.3

### PERCENTAGE DISTRIBUTION OF CBGs BY THEIR EDUCATION AND PROVINCE

	Punjab	Sindh	NWFP	Balochistan	Total
Under Matric	9.3	-	23.3	24.3	13.1
Matriculation	27.9	13.3	16.7	10.8	20.2
Intermediate	24.4	10.0	23.3	13.5	19.7
Graduation	3.5	6.7	20.0	-	6.0
Post graduation	5.8	3.3	3.3	2.7	4.4
MBBS	27.9	63.3	13.3	45.9	35.0
Any Other	1.2	3.3	-	2.7	1.6
<b>Numbers</b>	<b>86</b>	<b>30</b>	<b>30</b>	<b>37</b>	<b>183</b>

## Fertility

The training for CBGs is based on the assumption that opinion leaders and community workers influence the communities they live in and serve as role models for their fellow community members. The study considered it significant to know whether the



respondents as opinion leaders really were able to be role models for motivation of others. The findings reveal that majority of respondents in CBG had large number of children as evident from Table 6.4. Among trainees in CBGs, 20.8 percent had more than 6 children, 11.8 percent had 5 children, 17.5 percent had 4 children, and 19.7 percent had three children. Only 9.3 percent had one or two children, while 12.0 percent had no children.

**Table 6.4**

**PERCENTAGE DISTRIBUTION OF CBGs PERSONNELS  
BY NUMBER OF LIVING CHILDREN**

Designation	Number of Living Children							Mean	Numbers
	0	1	2	3	4	5	6+		
Principal	100	-	-	-	-	-	-	-	1
Research Assistant	100	-	-	-	-	-	-	-	1
Medical Officer	-	25.0	8.3	41.7	8.3	8.3	8.3	2.7	12
Teacher	-	100	0	0	0	0	0	1	1
Professor	-	-	-	-	100	-	-	4	1
R.M.P.	10	6.0	10.0	28.0	26.0	12.0	8.0	3.2	50
Hakeem	10.9	7.31	1.8	14.5	21.8	7.3	36.4	3.9	55
Homeopath	27.6	3.4	17.2	6.9	10.3	13.8	20.7	2.9	29
Councillor	12.5	12.5	0	62.5	0	0	0	2.7	8
Social Worker	16.7	16.7	0	33.3	0	16.7	16.7	4	6
Doctor	-	-	-	-	-	-	100	3	1
L.H.V.	-	100	-	-	-	-	-	6	1
Any Other	-	5.9	29.4	-	11.8	29.4	23.5	1	17
<b>Total</b>	<b>12.0</b>	<b>9.3</b>	<b>9.3</b>	<b>19.7</b>	<b>17.5</b>	<b>11.5</b>	<b>20.8</b>	<b>3.4</b>	<b>183</b>

### Evaluation of Non-Clinical Training

The issue of communication is of paramount importance in 1-to-2 day non-clinical, orientation training for CBGs, as its focuses on participants with varying levels of education and diverse background. This study tried to investigate as what was the level of understanding of the individuals who had attended such training event.

Majority of the respondents seemed to have a low opinion about the lectures (Table 6.5). Only 12 percent of the respondents reported thorough understanding of lectures delivered during the course of training session. About 17.6 percent of the respondents described the lectures as completely incomprehensible. The reported incidence of understanding of lectures was high (90+ percent) among respondents in the categories of Principal, teachers, Medical Officers and researchers, while the complaint about no understanding of the lectures came from Hakeems, homeopaths, councillors and social workers. Apparently, the sharp division among respondents about their ability to

understand or not to understand the lectures is based on the differential of education level. This observation provides reason to believe that the training course for CBGs has an inherent bias towards those who are comparatively well educated. This observation necessitates the imperative of rethinking the course contents.

Table 6.5

**CBG-PERCENTAGE DISTRIBUTION OF CBG BY THEIR  
UNDERSTANDING OF LECTURE**

DESIGNATION	COMPLETELY	MOSTLY	PARTIALLY	DO NOT UNDERSTAND	NUMBERS
Principal	0	100.0	0	0	1
Research Assistant	100	-	-	-	1
Medical Officer	91.7	8.3	0	-	12
Teacher	-	100	0	-	1
Professor	100	-	-	-	1
R.M.P.	66.0	32.0	2.0	-	50
Hakeem	43.6	34.5	12.8	9.1	55
Homeopath	55.2	24.1	17.2	3.4	29
Councilor	50.0	25.0	12.5	12.5	8
Social Worker	33.3	50.0	-	16.7	6
Doctor	100	-	-	0	1
L.H.V.	100	-	-	-	1
Any Other	23.5	29.4	29.4	17.6	17
<b>Total</b>	<b>12.0</b>	<b>9.3</b>	<b>29.0</b>	<b>17.5</b>	<b>183</b>

Overall, 53.6 percent respondents reported complete understanding of lectures, while 6.0 percent expressed no understanding of lectures.

It is interesting to analyse the feedback of the respondents about their understanding of the training by their provinces. The respondents in Balochistan expressed lower level of satisfaction as compared to the respondents in NWFP and Punjab. Respondents in Sindh represent highest percentage of understanding of lectures.



Table 6.6

**PERCENT DISTRIBUTION OF CBGS BY THEIR UNDERSTANDING  
OF LECTURES BY PROVINCE**

Perception of Training	Punjab	Sindh	NWFP	Balochistan	Pakistan
<b>Understanding of Lecture</b>					
Completely	60.5	76.7	56.7	16.2	53.6
Mostly	24.4	16.7	30.0	54.1	30.1
Partially	7.0	6.7	10.0	2.7	6.6
Very Little	3.5	-	-	10.8	3.8
Don't Understand	4.7	-	3.3	16.2	6.0
<b>Numbers</b>	<b>86</b>	<b>30</b>	<b>30</b>	<b>37</b>	<b>183</b>

With a view to understand worldview of the Population Welfare Program for the respondents, they were asked to explain what did it mean to them. About 32.2 percent of the respondents reported that PWP meant use of F.P methods, 15 percent considered it advocacy for small family norm, other regarded it as aiming at MCH, decline in T.F.R, happy family etc. (see Table 6.7)

Table 6.7

**PERCENT DISTRIBUTION OF CBGs BY  
UNDERSTANDING OF PWP BY REGION OF RESIDENCE**

Options	Punjab	Sindh	NWFP	Balochistan	Total
Use FP Method	23.3	60.0	30.0	32.4	32.2
M.C.H.	37.2	3.3	46.7	27.0	3.1
Small Family Norm	23.3	3.3	13.3	5.4	14.8
Decline in TFR	3.5	10.0	-	5.4	4.4
Happy Family Life	4.7	6.7	10.0	8.1	6.6
Other	8.1	16.7	-	21.6	10.9
<b>Numbers</b>	<b>86</b>	<b>30</b>	<b>30</b>	<b>37</b>	<b>183</b>

The study sought to observe the perceptions of the respondents about the overall advantage of the F.P. (Table 6.8). A predominant majority of respondents (62.3 percent) viewed development of the country as the immediate advantage of FP, while 9.3 percent of respondents could not cite any advantage of F.P. Balochistan represents the majority of respondents (16.2 percent) with no knowledge about the advantages of F.P. Where it was satisfying to find large majority of the respondents understanding the rationale of PWP, it was very unexpected to come across respondents with no understanding of the

issue inspite of their training. This state of affairs indicates serious insufficiencies and efficiencies in the process of identifying individuals for CBGs training.

Table 6.8

**PERCENT DISTRIBUTION OF CBG BY THEIR PERCEPTION OF  
THE ADVANTAGES OF FAMILY PLANNING**

Advantages of F.P	Punjab	Sindh	N.W.F.P.	Balochistan	Total
Development of Country	66.3	60.0	66.7	51.4	62.3
Limit Family Size	7.0	-	23.3	18.9	10.9
Spacing Between Birth	5.8	-	-	2.7	3.3
Education about Small Family	4.7	16.7	3.3	8.1	7.1
Economic Stability	5.8	16.7	0	2.7	6.0
MCH	1.2	-	3.3	-	1.1
Do not Know	9.3	6.6	3.3	16.2	9.3
<b>Total</b>	<b>86</b>	<b>30</b>	<b>30</b>	<b>37</b>	<b>183</b>

How do the CBG utilise the knowledge and skills they learn during the course of orientation sessions? What is the perceived level of their success in motivating and persuading their respective communities? Answers to such questions are crucial in measuring the success of investing in the CBGs. For gathering data about this particular aspect, the study did raise these questions during interviews with respondents in CBGs. About 76.5 percent of respondents claimed to have successfully persuaded and motivated people to adopt F.P methods. More then 80 percent respondents in Punjab and Sindh reported success in motivation. Comparatively, respondents from NWFP and Balochistan reported a little less motivation (60+ percent) of clients (Table 6.9). Around 23. 5 percent of respondents reported utter failure in motivating their respective community. Without the support of qualitative data, the reason for variance in the degree of successful motivation of communities in Punjab, Sindh. and NWFP, Balochistan cannot be concretely ascertained.

Table 6.9

**PERCENTAGE DISTRIBUTION OF SAMPLED CBG WHO HAVE  
MOTIVATED PEOPLE FOR FAMILY PLANNING**

CBG Motivated People	Punjab	Sindh	N.W.F.P.	Balochistan	Total	N
Yes	83.7	83.3	66.7	62.2	76.5	140
No	16.3	16.7	33.3	37.8	23.5	43



With a view to assess the nature and kind of criticism and opposition, the respondents faced during their persuasion and motivation of the community for family planning, the respondents were given multiple choices to describe their experience about the main objections against the PWP. (Table 6.10) About 73.2 percent respondents cited religion, 9.8 percent quoted fear of side effects, and 1.1 percent referred to **health reasons** as the main deterrence to the idea of small family.

Table 6.10

**PERCENT DISTRIBUTION OF SAMPLED CBG, BY MAIN OBJECTIONS  
AGAINST F.P. IN THEIR AREA**

Objections	Punjab	Sindh	N.W.F.P	Balochistan	Total
Religion	70.9	53.3	86.7	83.8	73.2
Fear of Side Effects	12.8	10.0	3.3	8.1	9.8
Health Reasons	100	-	-	-	1.1
Any Other	13.9	36.7	10.0	8.1	5.9
<b>Total</b>	<b>86</b>	<b>30</b>	<b>30</b>	<b>37</b>	<b>183</b>

During the interviews, the respondents mentioned various problems and issues concerning the non-clinical training for the employees of NBDS. Simultaneously, they provided suggestions for solving these problems and/or for improving the quality of training.. These problems/issues and suggestions are as under:

**Problems**

- No financial assistance from PWD.
- Transport problem in accessing target.
- Lack of housing facilities.
- Opposition from mother-in-laws of the targeted women, opposition from narrow minded people and complaints/reported fear of side effects.

**Suggestions**

- Training should be focused only on young persons.
- New and modern methods of family planning should be introduced
- There should be co-ordination with homeopaths on regular basis.
- Masses should also be educated through media.
- Educated women should be appointed in the centres (PP+NB+CBG).
- Contraceptives should be regularly supplied.
- Fund should be utilised properly (massage should be avoided).
- Training period should be extended.
- FWW should be more educated.
- Only married women should be placed in F.P. departments.
- Meetings with PWD and CBGs should be arranged after every two months.
- LHVs should be provided residence.
- Transport facilities should be provided to CBGs.
- Training for CBGs should be conducted in local languages.
- Training should be supplemented with frequent refreshers with the support of videos.

- More training centres should be opened for training purposes.
- More staff should be provided.
- F.P. should be made a compulsory subject at the college level.
- Train the young person alone.
- The site of training centres should be easily accessible.
- Devoted persons should be employed.
- More emphasis/concentration is needed on the people with low income level.
- Hakeems in rural area should be educated in F.P methods more comprehensively because in rural areas, people frequently visit Hakeems .
- Trainers should be more qualified.
- Health facilities concerning F.P should be provided in rural areas
- Female staff should be appointed in rural areas.
- Homeopathic medicines should be introduced in health centres.
- There should be a follow up of trainees after training.
- Trainees must be provided with F.P literature before training.
- Private sector should be involved in family planning.
- Start mobile training programme.
- Family planning education should be introduced with the help of religious leaders (in the mosques).
- PWP should be stopped and efforts should be focused on making the country economically stable.
- The budget for PWD should be increased.
- Incentives for patient and doctors should be introduced.
- The F.P policies should be strictly implemented.



## KEY FINDINGS OF THE STUDY

### TEACHING FACULTY

One of the significant determinants in the evaluation of the PWTI's is the professional qualification of the Principals, Senior Instructors and Instructors, who constitute the core faculty of the training institutes. Given the strategic significance of these institutes in the backdrop of the population policy of the government, one expects that professionally competent individuals would man these institutions. If the faculty is well qualified in demography and trained in human resource development, it will be able to train the trainees properly and efficiently. However, on-ground reality somewhat belies this ideal. An inquiry in to the status of the education and professional training received by the teaching faculty reveals that these institutions are manned by modestly trained individual.

In certain respects, the teaching staff lacks professional competence. Their knowledge about the demographic profile of the country is outdated and their understanding of the basic demographic concepts is poor. It is quite perplexing to note that the core faculty lacks grasp over the subject, it teaches to programme personnel, staff of nation building departments and community leaders. The inability of majority of teaching staff to explain common demographic terms, that are used like domestic idioms in population studies, brings credence to the fact that the majority of respondents do not have a serious attitude toward the subject they teach and they fail to understand the kind of change their employer organization is striving to achieve in the society.

Due to their insufficient training, the faculty at PWTIs is not likely to entertain the holistic objectives they aim to serve. They do not appear to believe that expectations of their clientele are setting new benchmark for quality in dissemination of specialised knowledge and skills. Therefore, it becomes imperative that they should be trained in programs that primarily serve capacity building, widening of professional cross-sectoral knowledge, and the changing of behavioural patterns and attitudes.

### INSTITUTIONAL CAPACITY OF PWTIS

In the present times, an HRD organization boasts of its existence in terms of its resourcefulness, access to data and office automation. Evaluated on this criteria, the PWTIs lag far behind similar institutions in non-government and corporate sectors. What to say of office automation, none of the PWTIs has a single personnel computer. The exclusion of PWTIs from the information technology culture is something that could not ensure total quality management.

### IMPACT OF TRAINING ON INDIVIDUAL ATTITUDES

The officials trained in non-clinical training are expected to be practicing contraceptive methods, at least, as a reflection of the impact of training on their own personal attitudes.



The study found that reported use of contraceptives among faculty at PWTIs has shrunk by 33.4 percent. Among the respondents from NBDs, the reported use of contraceptives, at the time of this study, has shrunk by 2 percent.

The training for CBGs is based on the assumption that opinion leaders and community workers influence the communities they live in and serve as role models for their fellow community members. It was ironical to find that majority of those supposed to be role models for motivation of others had large number of children (20.8 percent had more than 6 children, 11.8 percent had 5 children, 17.5 percent had 4 children, and 19.7 percent had at least three children). Around 60 percent of the respondents from NBDs had living children ranging from a minimum of 3 to 7 or more numbers.

## **UNDERSTANDING OF TRAINING CONTENTS**

The various cadres in teaching faculty differed in their idea of understanding of the lectures by trainees. When it came to assessment of trainees, Instructors expressed a lowest opinion about the understanding levels of trainees, while the principals held a very optimistic view of the understanding of lecture by trainees. The teaching faculty taken as a whole believed that complete understanding of the lectures by trainees was 53.3 percent.

Reported understanding of all lectures among respondents from NBDs was reasonably on the higher (65.7 percent) side. However, only 7 percent reported partial or no understanding of the lectures. It is perplexing to find professors and lecturers among the 0.7 percent complaining no understanding of any of the lectures.

Amongst respondent from CBGs, only 12 percent reported thorough understanding of lectures delivered during the course of training session. 17.6 percent of the respondents described the lectures as completely incomprehensible. The reported incidence of understanding lectures was high (90+ percent) among respondents in the categories of Principal, teachers, Medical Officer and researchers, while the complaint about no understanding of the lectures came from Hakeems, homeopaths, councillors and social workers.

## **LINKAGE BETWEEN TRAINING AND PERFORMANCE**

The prime objective of involving employees of NBDs in non-clinical training component of PWP is to help create an environment supportive of population welfare activities in the country. Broadening the focus of non-clinical training to employees of NBDs, amounts to recognition of the fact that there are factors other than an unfelt need for contraception that causes high population growth. However, a considerable percentage (28.6%) of respondents among the employees of NBDs, who attended such training, did not seem to have been able to link their performance at their workplace with the non-clinical training and did not perceive the training as helpful in performance of their duties.



## **TRAINING BIAS**

The differential of education is, apparently, the major reason for variations in expressed levels of understanding of training contents/lectures among respondents. Particularly, the training course for CBGs seems to have an inherent bias towards those who are comparatively well educated. This observation necessitates the imperative of rethinking the course contents.

## **SUCCESSFUL MOTIVATION**

### *By employees of NBDs*

Certainly, it does not form part of their job description, but the officials of NBDs trained at PWTIs are expected to motivate others for small family norm. A little more than half of the respondents from NBDs claimed to have successfully persuaded and motivated people to adopt F.P methods. It is the reported incidence of successful motivation by respondents in categories other than medical professionals, principal/instructors of schools and colleges, was quite high

### *By employees of CBGs*

The investment in CBGs, whose members attain knowledge and learn skills during their attendance in non-clinical training, is based on the expectation that, in reciprocation, the trained individuals would motivate and persuade their respective communities. The perceived levels of successful motivation among respondents from this group are quite encouraging. About 77 percent respondents claimed to have successfully persuaded and motivated people to adopt F.P methods. When the reported successes are compared on provincial basis, respondents in Punjab and Sindh seemed to have an edge over those in NWFP and Balochistan.

Complete failure in motivating their respective community around 23. 5 percent of respondents reported.

## **SELECTION OF CBGS**

The emergence of medical professionals, as the preponderant category in the randomly selected sample from CBGs, indicates serious flaws in the process for selection of individuals for making a group of trainees. This is typical of awakening the already awakened syndrome. There is no denying the fact that medical practitioners ought to be periodically updated on nature and direction of population issue in the country, however involving them in a one day training course basically designed for uninitiated ones is a mere wastage of scarce resources available for social sector campaigns.

## **FOLLOW-UP**

As a tradition, growing out of long time practice, the training institutions created under PWP have become introvert, inward-looking institutions. Like academic institutions, periodically they receive cohorts of 'students', train them and finally see them off. They do not make any serious and consistent effort to carry out follow up of the training with their graduates. The slackness can be well imagined by the fact that even the database of trainees, maintained at PWTIs, crucial for monitoring and follow up purposes, does not include proper contact addresses of graduates.

In the absence of a regular follow up, frequent contact between the graduates and training institution, it is difficult to measure the impact of training on individual performance. Particularly, in case of CBGs, without a mechanism for monitoring their performance, it is difficult to evaluate their performance and assess the cost-effectiveness of training (for CBGs) in terms of fertility regulation alone. Consequently, there is a greater likelihood that such ventures would not appear to be a sound investment in a situation of already tightening resources for family planning.

### ***CBGs as Stakeholders***

The CBGs-a conglomerate of opinion leaders, elected representatives, members of parliament and provincial legislatures, volunteers of non government organisations (NGOs), councillors of local governments, registered medical practitioners, Hakeems (practitioners of traditional medicine) homeopaths, etc- are vital stakeholders for any scheme aiming at social development. The influence they wield in their neighborhoods can be positively channeled for mobilizing people to the small family norm. However, the role of this significant stratum of society in population welfare program of the country is restricted to attendance in orientation training. Feedback from and regular follow up of CBGs is something conspicuous for its absence within the Population Welfare Program. The CBGs critically lacks a framework to effectively channeling the wishes or priorities of their clientele, to policy makers, which can impinge upon decision-making and resource allocation. Consequently, training is not likely to create an ownership of the Population Welfare Program among CBGs, which is vital to the success of the Programme.

### ***Incentives for CBGs***

The level of personal commitment and interest among the CBGs is a significant prerequisite for successful motivation. Whatsoever be the level of their commitment, individuals from CBGs are not expected to formalize their performance of voluntary duties, like counseling, referral, and supplies of non-clinical contraceptives, in the absence of resources,. Schemes of this nature eventually require financial or other incentives to retain the interest and commitment of volunteers. Otherwise it is difficult to sustain a large scale, volunteer effort without incentives.



The most promising prospects for community participation concern pre-existing social organisations, such as women's and youth groups, co-operatives and religious organisations. Because such groupings often already possess element of self-reliance and internal structure, they are potentially powerful vehicles for participation in family planning activities, in equal partnership with PWD

The human resource experts believe that the experience of living together in hostel enhances the prospects of exchange and sharing of knowledge among trainees. Isolating trainees over the length of training from their active domestic life and giving them room assignments to be completed overnight reinforces the impact of learning.

