Expanding Horizons

Case Studies - Strengthening Immunization and Health Systems in Deprived Areas of Gilgit Baltistan, Skardu & Jehlum

December 2013 - 2014
# Table of Contents

- An Overview of CHIP ................................................................. 5
- Preamble .................................................................................. 6
- 1. The Committed Soldier ......................................................... 7
- 2. The Life Saver ....................................................................... 9
- 3. An Unwavering Heart ............................................................. 11
- 4. The Intrinsic Healer ............................................................... 13
- 5. The Change Maker ................................................................. 15
- 6. The Enduring Resolve ............................................................ 17
- 7. The Robust worker ................................................................. 19
- 8. The Pious and Tenacious ....................................................... 21
- 9. The Captive .......................................................................... 23
An Overview of CHIP

Who We Are: Civil Society Human and Institutional Development Programme (CHIP) is a non-profit organization that works for improving and strengthening the functional capacities of individuals, organizations and institutions. CHIP has been designing and implementing development programmes on wide range of development topics in remote rural and urban areas since 1993.

Our Vision: An aware and organized society capable of realizing its own development.

Our Mission: Enabling individuals and organizations to make more effective and efficient development efforts through the provision of value-led Human & Institutional Development (HID) services.

Our Approach & Strategy: CHIP's operations and strategic orientation is based on the experience that Human and Institutional Development intervention have had in shaping current development perspective. Using this approach, CHIP provides professional services to a wide array of organizations that add value to local development interventions. HID as an approach has the following key principles:

- Develop local individuals and local institutions. We believe that the key enhanced efficiency and effectiveness of development efforts lie in strengthening local institutions that are responsible for the implementation of development interventions;
- Promote an element of 'inclusion' in all our efforts so that we do not miss out any person because of their disability;
- Wherever work on development is to be conducted, its contribution towards the bigger picture (national development and global development) has to be kept in mind;
- Positive value when combined with skills and knowledge excel the efficiency and effectiveness of work. Research and advocacy should be used as a tool for bringing positive change at all levels.

What Do We Offer: CHIP offers the following two distinct strategies:

Project Implementation Services:
Under project implementation services, CHIP designs and implements development projects or selected project activities directly through its field offices. The major thematic focuses are health, disability, education, human rights, water, sanitation, natural resource management and livelihood development. CHIP also responds to emergencies in the country for both relief and rehabilitation.

Project Management Services:
Project management services consists of supervision and management of project on behalf of international development agencies or INGOs, in particular those that choose not to establish their own offices locally. This management services includes fund management, operational planning and establishing a partnership with civil society organizations, recruitment and management of personnel and procurement.

Our Values: CHIP, being a value led organization promotes its core values of honesty, dedication and commitment.
Preamble

Pakistan is a signatory of the UN Millennium Development Goals (MDG) but with the country’s poor health indicators, it is imperative, now more than ever, to work towards achieving the 2015 targets. Of particular note is goal 4, which aims to reduce child death by two-thirds, and 5, which aims to reduce maternal deaths by three quarters. With 2015 around the corner, there is a need for all governmental and non-governmental stakeholders to work towards improving access to improved health facilities.

To this end, Civil Society Human and Institutional Development Programme (CHIP) has implemented project “Strengthening the Health System of the Areas Deprived of Immunisation and Mother-Child Health Services” in District Jehlum, Punjab and District Skardu, Gilgit Baltistan from December, 2013 to December, 2014. The project has focused on establishing Village Health Committees (VHC) and tapping into local human resources by training health promoters, skilled birth attendants and lady health workers amongst others to create awareness on the importance of mother and child health and routine immunisation.

This booklet captures the hard work and efforts of all those that have assisted in furthering the project goals. This set of case studies included the stories of health promoters, lady health workers, skilled birth attendants and even beneficiaries. It encapsulates their struggles, both internal and external as they try to provide access to better health facilities for the small, remote communities that they are a part of. While their goals are the same, each story offers something unique. Whether they found their way to the CHIP team by chance or they made a conscious effort to become involved in the project, each individual in this booklet has made an invaluable contribution to this mission.

And perhaps the most difficult part of their journey is one that may not be immediately obvious but will have the most lasting impact. Changing perceptions, beliefs and traditions is much easier said than done and most certainly does not take place overnight. It requires persistent effort and is often accompanied by disappointment but the individuals in this booklet persevered in the face of opposition and came out stronger.
1. The Committed Soldier

Syed Hadi Kazmi had always been fuelled by a desire to serve his people. As a young boy studying in Hilalabad Kharmang, Hadi always dreamt of doing ‘more’ for his village and his country. After matriculating from the local high school in his village, Hadi’s ambitions led him to join the Pakistani Army. His twenty-eight years of service took him from city to another all over Pakistan; from Skardu, Gilgit and Chakwal to Islamabad, Karachi and Quetta. He was amazed by the differences in facilities available in the bigger cities and often saddened by how deprived his own village was. The remote location of Hilalabad had meant that the people living in his village were unable to access the health facilities in Skardu city.

After retiring as a Sobedar-Major in the Army, he decided that he wanted to continue making a difference. His aspirations were confirmed when he met the CHIP team in Skardu and Kharmang. At the time, he was working as a teacher in the local primary school. Having met members of the local VHC there, he was encouraged by the members to try to bring positive change to the health facilities in his own village. To this end, he was assisted by the CHIP team in setting up a VHC in Hilalabad in an attempt to create awareness of health issues amongst the locals and improve health facilities in the village.

Hadi had always been involved in the society and his reputation as a teacher in the village gave him the right standing to spread the word to the general public. Joining CHIP provided him with the forum through which he could make an even more lasting impact on society. CHIP conducted initial training sessions with Hadi on social mobilisation and record-keeping to prepare him for his role as president of the VHC. He started the magnanimous task before him by tapping into his immediate social network: discussing health issues and grievances with his friends and family in order to obtain their views on the current state of health facilities.

He also tried contacting various NGOs and government departments to improve the different health facilities. Hadi faced several difficulties in his job; not only was he discouraged by the people that he was trying to serve, he was also unable to obtain any response from NGOs or government departments due lack of in-depth information and ideas. He also found it difficult to raise awareness regarding mother and child health, the importance of routine vaccination and in general, to change the general societal attitude towards these pressing issues. However, with the continuous assistance provided by CHIP and the support of his family, he was able to overcome these problems.

His zealous efforts bore fruit: the villagers are now more aware of the different health issues. At the same time, Hadi knows how to approach the different NGOs and governmental departments to convince them to develop the health facilities in his village. The work that he has done for his community as part of the VHC is a source of pride not just for himself but also for his family. He wishes to continue striving for the betterment of his home and his next target for the village is to arrange for a Lady Health Visitor and First Aid post with the help of an NGO of the government.
Name: Syed Hadi Kazmi
Age: 56
Village: Hilalabad
Union Council: Kharmang
District: Skardu, Gilgit Baltistan, Pakistan
Position: President of VHC
Rubab looked to the field behind her house as she carried a pile of her husband and child’s dirty clothes to the outside sink. It was as green as it could be for as far as she could see. Despite the merciless heat, she loved the summer months. It was always the most beautiful time of the year with all the crops in full bloom. But she barely had a fleeting moment each day to stand and admire. She quickly realised the long list of chores awaiting her. As she rushed away to finish them before her husband returned for the evening, she thought to herself, “This was the most beautiful place on earth. Wouldn’t it be perfect if her little village had the same standard of facilities available in the cities?”

She had always had an inner desire to be involved in social work alongside her responsibilities at home. That is why she was very excited when the CHIP staff came to Khamango Gons, her village, to conduct a baseline survey of the various health facilities. Rubab met with the CHIP staff and was encouraged to participate in the programme being conducted. She was initially nominated as a Health Promoter for her village and received training on how to raise awareness in the society on pressing issues relating to mother and child health and routine vaccination. Her aspirations for a better future for her village led her to work hard for the VHC, participating in all the various social and promotional events being conducted.

Owing to her dedication, she was selected by the CHIP team to become a birth attendant for her village. She was provided three months training on safe delivery in Karachi and was responsible for delivering health sessions to targeted mothers and the general public on the importance of adequately looking after mother and child health. Her involvement in the project and regular interaction with the CHIP staff has significantly expanded her personal and professional horizons: she now knows how to conduct health sessions, raise awareness regarding health issues and deal with NGOs and government departments on a regular basis. At the same time, she feels that she has made more friends in the village due to her continuous involvement in the different awareness raising social events.

Everyone in the village now knows her as a traditional birth attendant and recognises her skills. She beams with pride every time a mother comes knocking at her door, asking her for advice. Halfway through her daily chores, she would always take time out for those who came seeking her assistance. While it was difficult at first to manage her responsibilities as a wife, a mother and social worker, Rubab has learnt how to manage all the different tasks within the time constraints. Additionally, her family provides her with the support and motivation she needs to fulfill all of her responsibilities. They are equally proud of all the initiatives she has undertaken and cooperate with her in all the different social activities she participates in.

Over the course of the project, Rubab has seen the positive attitudinal developments amongst the people in her village. Not only have they gained insight to the significance of mother and child healthcare, they are also motivated to work alongside her to improve the quality of healthcare in the village, which for Rubab, is one of her greatest successes.
Name: Rubab
Age: 26
Village: Khamango Gons
Union Council: Kharmang
District: Skardu, Gilgit Baltistan, Pakistan
Position: Skilled Birth Attendant
3. An Unwavering Heart

Robina Khanam had always been hardworking and dedicated. She had grown up with a clear aim of helping as many people as she could. After a long day at work, she would often sit in her lounge by the window pondering about how limited she was by her capacity and time. There was so much more to do and only so much she could accomplish on her own. She wanted a better future for her village and it was with this goal in mind that she went to work every day. Robina had completed her undergraduate degree from Gilgit and then further completed 18 months of training as a Lady Health Visitor. She was very proud of her job and lived in the First Level Care Facility, working day and night, assisting women with their health problems and providing treatment. She knew that a lot of the complications that arose were due to lack of awareness and carelessness. She knew that the type of issues that the women battled with everyday could be easily eradicated with a little bit of change in lifestyle. She often thought about how important it was for human survival to look after their health. She had lived by the mantra, prevention is better than the cure.

From the beginning, Robina had faced a lot of problems in terms of the response that she received from the people in the different villages. There was general lack of awareness regarding immunization, ORS, the danger signs of pregnancy, mother and child health and the facilities offered at the Basic Health Unit. Therefore, she felt both relieved and excited when she met with the CHIP staff through VHCs. She felt that if CHIP was actively working in the villages to create awareness, she would be in a better place to provide her services and the treatments and advice that she gave would be more effective. She requested to become part of the programme and was appointed in January, 2014 to serve as a Lady Health Visitor to the Basic Health Unit in Khalajing village in Skardu.

While the village was a completely different terrain for Robina and she was initially faced with the difficult task of becoming accustomed to a new community and learn a new language, Robina persevered. With assistance from CHIP, the First Level Care Facility was upgraded and a rigorous awareness raising campaign in the village meant that women were more motivated to seek treatment. Robina also received training on social mobilisation to help her develop the confidence and skills that would allow her to approach the men and women in the village. Robina has continued to work with the facility and often works there during the mornings and afternoons. She is impressed at the frequency with which women are now visiting the facility for delivery cases.

Robina often enjoys her evening tea on the porch thinking about how far she has come. Over the months, she developed the confidence and communication skills that have complemented her technical skills as a Lady Health Visitors. Her involvement in the local community based organisation has further provided her with a platform to voice her concerns and she actively attends the religious and social events there.
Name: Robina Khanam
Age: 35
Village: Khalanjing
Union Council: Tormik
District: Skardu, Gilgit Baltistan, Pakistan
Position: Lady Health Visitor
4. The Intrinsic Healer

Arshia had travelled far and wide both within Pakistan and abroad several times. As a doctor, she was always keen to observe the quality of medical services available in the cities that she visited. She had undergone training abroad and worked in the hospitals there as well. Impressed with the level of care and medical advancements, she hoped that one day she too would be able to introduce the people in her home country to the kind of services and medical equipment that she had witnessed and used abroad.

Arshia had always lived in Karachi, having been born and brought up, educated and married there. She moved to Tolti Kharmang when her husband, a Commanding Officer in the Pakistani Army was transferred to Skardu for training purposes. While she found it difficult to adapt to her new surroundings, set up her home and look after her four children, Arshia continued to work. She took up teaching 9th and 10th grade students at the local school in the village. She also took up occasional assignments at the Tolti Hospital conducting talks on different health related topics such as the danger signs of pregnancy and the importance of hygiene. Her move from Karachi was made even more difficult due to the fact that she did not have friends or family in the village.

From the beginning, Arshia had been concerned not only by the state of the health facilities but also the general attitude that the villagers had towards health and the facilities on offer. Despite her efforts to encourage women to come to the hospital with their issues and seek medical advice, Arshia was disappointed. Women were not ready to come to the hospital for treatment and were most certainly not ready to cooperate. They were set in their ways and did not understand Arshia’s concerns. At the same time, the health facilities in the village were in poor condition with serious hygiene problems. She wanted to actively assist in tackling the health concerns in the village but she did not know what to do, where to start or how to approach the community at large.

Arshia saw a ray of hope when she was invited by CHIP to attend the District Health Farm and meet with the local VHC. It was here that she found the motivation to get back on track and continue fighting for the causes she supported. She was given social mobilisation training which helped her significantly in approaching her fellow villagers and creating awareness regarding the critical health concerns that she had. After meeting with CHIP, Arshia embarked on a dual career that is, as a doctor and a social worker. With her action-packed daily schedule, she plays an active role in advancing CHIP’s goals. She works in the hospital during the mornings and then continues to teach at school. She also takes out time to conduct training sessions for skilled birth attendants at the hospital and actively takes part in the local community based organisation and CHIP meetings.

On her evening walks with her husband, Arshia often talks about her day and how drastically things have changed. Her husband smiles as he sees her beam with pride. And he knows that nothing makes his beloved wife happier than when she has helped in providing treatment to a patient in need.
Name: Dr. Arshia
Age: 35
Village: Tolti
Union Council: Kharmang
District: Skardu, Gilgit Baltistan, Pakistan
Position: Doctor at Basic Health Unit
5. The Change Maker

Muhammad Bashir enjoyed the sense of satisfaction that came with each volunteering assignment he undertook. He had always been interested in social work and it was this desire to help people that led him to pursue voluntary initiatives in his village actively. Bashir had been involved in a range of different campaigns, ranging from health to safe environment, and he was always on the lookout for more opportunities such as these that he could be involved in.

He had belonged to the village of Tormik Rando but had matriculated from a high school in Skardu. He returned to his village after completing his studies and began to regularly volunteer as a social worker. From the beginning, he had been worried about the current state of the health of the villagers and facilities. He realised that a large proportion of the problems were due to the lack of general knowledge. The people around him did not take care of hygiene in several aspects of their daily lives from the food they ate to the clothes that they wore. Despite his general interest in health related issues and his concerns regarding the societal attitude towards basic health and hygiene, he neither had any training on health issues nor did he know how to approach the villagers with these issues.

After meeting with the CHIP team at the District Health Farm and the local VHC, Bashir found the platform through which he could engage in regular social work pertaining to health issues. He expressed his concerns with the CHIP staff and was encouraged to pursue his interest by working as a Health Promoter for his local VHC. To this end, he was provided training regarding awareness raising in the village and further, workshops on specific health issues. Despite this, he found it difficult to build the trust of the villagers, communicate with the community and access different NGOs to provide support. But with the support of his family and friends, Bashir continued to struggle for the cause that he believed in. With time and the assistance provided by the CHIP staff, he developed the oratory skills that led him to excel in his role as Health Promoter.

As the Health Promoter in his village, Bashir spends his day assisting the health facilities in administering the TT injection. He also gives lectures and information sessions for women on the danger signs of pregnancy, the importance of mother and child health and ORS amongst several others. He has developed both the knowledge and skills to confidently approach his fellow villagers and carry out an in-depth conversation on any of these health issues. His work has increased his socialization with the people in the village and Bashir is happy that he has made several friends along the way that have provided him with the assistance and support needed to continue with his mission.

His concerns for the hygiene conditions of the village has also led him to approach several NGOs and government departments to help improve the irrigation and water system to improve access of the village to clean and safe drinking water and the health facilities in his village. Bashir has continued his search with the support of the CHIP staff and the VHC and his successes to date has only exacerbated his motivation to keep struggling for the betterment of his beloved village.
Name: Muhammad Bashir
Age: 29
Village: Breepa
Union Council: Tolti
District: Skardu, Gilgit Baltistan, Pakistan
Position: Health Promoter
6. The Enduring Resolve

On her way back from work, Asiya smiled to herself. She was grateful for many things in life despite all the difficulties that had been hurled her way. It is true that when one door closes another always opens, and every time, when she had felt that she had nowhere to go, a door had always opened for her.

Life had never been easy for Asiya. Her life had been riddled with financial difficulties: supported by her uncle, she had seen her mother spend her entire life working as a maid in other people’s houses to earn a living for her children. Asiya had thought that her marriage would change things for her but she was wrong.

Her marriage did not last and she divorced her husband a year later. She was back to living with her uncle and mother. Her sense of helplessness only aggravated after her uncle fell ill and her family’s financial position worsened. Her mother was no longer in a position to work as hard as she used to and there were days when there was no food to eat in the house. She wondered if her financial situation would ever improve. Little did she know that she would find her answer in the most unexpected of places.

This was the position she was in when the CHIP team visited her village. After a baseline survey of the village, the CHIP team gathered a few men and women in the village and announced that they wished to create awareness and provide facilities regarding mother and child health. While several other men and women declined to work with CHIP, her motivation to work and improve her financial position led her to express her willingness to work on the project. As a result, Asiya was nominated to work with the VHC as a skilled birth attendant. Consequently, she was provided with social mobilisation training and further given information on the next stage of the process: three month birth attendant training on safe delivery.

Since it was the first job that Asiya had ever undertaken, she was nervous. At the same time she was given the difficult task of changing societal attitudes towards mother and child health. The women that she approached were set in their ways: they did not want to be administered with the TT injection and were also not willing to get the treatment for their children. However, with continued hard work, Asiya was able to slowly bring change in the community. With time, she has learnt how to approach pregnant women in her society and talk to them about taking better care of their health. She also looks after delivery cases and has helped deliver roughly 30 babies in the last six months. She has slowly expanded her practice and with dedication, managed to earn the trust of the community.

Asiya is determined now more than ever, to expand her practice. She has expressed a willingness to work in the local Basic Health Unit in Darapur and wishes to continue mobilising pregnant women in her village. She is extremely proud of the work that she does and is ever grateful for the support and assistance that CHIP provided her during one of the most difficult times of her life.
Name: Asiya Bibi
Age: 31
Village: Shah Kameer
Union Council: Darapur
District: Jehlum, Pakistan
Position: Skilled Birth Attendant
Zarqa made her way back from Nogran; it had been a long busy day for her. The sun was setting behind her. She turned around to admire the landscape around her and instantly thought of how she had never observed the beauty of it all before this. It had been in front of her all along, all this time. But never once, in all this time, had she thought of it the way that she did now. Aged 38, Zarqa had seen many ups and downs in life. She had lived a happy life with her parents and then, for the first few years with her husband. But times always change: her husband lost his job and the family’s financial position deteriorated drastically. With her four daughters and a son to look after in the household, there were a lot of mouths to feed.

During this time, Zarqa heard that a lady health worker was required in Nogran. After talking to her husband and her family, she decided to apply for the position and started working as a lady health worker in the village. However, soon after, her husband started working again and her new job was no longer important for her. She was happy to receive the income that she got from her position but she would often shirk her duties and avoid visiting Nogran which was at a considerable distance from her own village. This was 11 years ago.

In 2013, Zarqa was still working as a lady health worker in Nogran when she met the CHIP team. After becoming oriented with the new project that they were looking to commence on mother and child health, Zarqa was invited to join the VHC that CHIP was looking to establish in the village as a lady health worker. As a result, she was asked to work alongside the lady health visitor for the village and was invited to attend two-day social mobilization training. The training sessions proved to be very helpful for Zarqa; she learned how to mobilize the villagers with regards to health-related issues. Following the training, for the first time in 11 years, Zarqa felt her interest developing in the job that she did. She wanted to make a difference; she wanted to learn more.

She started enjoying the work that she did. She began to regularly visit Nogran. Zarqa would intently listen to the problems that women brought to her and tried her best to provide them with a viable solution. The assistance that she gave to the lady health visitor also proved to be lucrative for her. Zarqa was given part of the money that was generated from the sessions conducted. As she started to take her job seriously, Zarqa earned the respect of the village that she served. She knew and understood the needs of the villagers and was happy to be their representative. She could see the benefits of the information that she provided on behalf of CHIP and vice versa.

Following Zarqa’s request, CHIP staff provided the community with weighing machines. Zarqa thought of how different she was a year ago and now. CHIP had sparked an interest in her job. She was more responsible now and genuinely concerned about the people in Nogran. The beauty of the work that she had done all these years, how she helped people, was almost like the beauty of the sunset that she had never noticed before. And it was this that motivated her, now more than ever, to strive hard and fulfill the responsibilities that she had been entrusted with.
Name: Zarqa Khalid
Age: 38
Village: Jangor Riayala
Union Council: Sanghoi
District: Jehlum, Pakistan
Position: Lady Health Worker (Nogran)
On his way back from the mosque, Tanveer thought about what more he could do to earn a living for his family. His mind was a complete blank. He had tried everything in his power to find a job for himself but to no avail. Creases formed on his forehead as he frowned and then as he smiled. He thought to himself, the God that brought him into this world must have had a plan for him and He alone will bless him with the subsistence he needed.

Tanveer had learnt to live within his means. It had always been tight; he and his wife always had to spend what little money they had with the greatest of care. He had been married for 25 years but they had not been blessed with a child. As a result, they had decided to adopt a baby girl from within their family. Aged 53, Tanveer’s struggle has continued. He decided to start working as an Imam in the village mosque. For the first few months, the villagers decided to support him by giving him money but this stopped soon after. Nevertheless, Tanveer continued to work for the mosque. He believed the work that he did was for God and it strengthened his faith. He believed that he would one day be rewarded for his hard work.

Tanveer found himself very excited when he heard the news of the CHIP team visiting his village. He was at the mosque when he announced that a team of workers have arrived in the village for survey purposes and they want to work on mother and child health in the area. His interest peaked as he thought to himself, maybe these people could answer all his questions; maybe they could offer advice on why he and his wife had not been blessed with a child of their own. With these hopes, he went to meet the CHIP staff but life had a different plan for him. The staff explained to him the purpose of their survey and visit and the nature of the project that they were looking to implement in their village. They expressed their need for a local person who would help support their cause and raise awareness.

Anxiously, Tanveer nominated himself for the position of a health promoter. He did not know much about his responsibilities or what would be expected of him under this new job. Two weeks later, he was contacted by the CHIP team to attend training sessions prior to starting work under the project. He received social mobilisation training that would help him mobilise the villagers with regards to health related issues. As promised, Tanveer is happy with the support he has received from CHIP staff to help him excel in his role as a health promoter. Alongside this, Tanveer has proved to be very enthusiastic about his role. He actively participates in all training sessions and tries his best to encourage the parents in his village to take care of their and their children’s health and hygiene.

Tanveer is proud of what he has achieved in such little time. He has convinced many parents, both mothers and fathers, to get themselves and their children regularly vaccinated and immunized. He enjoys every time someone listens to him with full attention and above all, is grateful for the respect that he has earned amongst his fellow villagers due to his role as a health promoter.
Name: Tanweer Hussain Shah
Age: 63
Village: Khair Shareef
Union Council: Naka Khurd
District: Jehlum, Pakistan
Position: Health Promoter
9. The Captive

Farzana felt trapped as she stood behind the pillar afraid to face her husband and in-laws. This was just one of the countless times she had wished to find a job so that she could contribute to the family income. She knew that it would improve the financial position of the household significantly. But her in-laws were too set in their ways. She stood there looking at their angry faces wondering whether her plea was unreasonable. To her simple mind, she thought that there was no harm as she was only trying to help.

Farzana had only seen financial difficulties since her marital life started. As an almost inevitable side effect, the relationship between her and her in-laws soured. The conservative ideas that they imposed on her stung even more due to their dire financial positions. But she had learned to compromise. She had let go off the struggle for herself but every time she looked at her children, she would shed a tear. This was not the life that she had imagined for them and it was for their sake alone that she tried to speak up and ask her husband for permission to let her find a job even though she knew what his response was going to be. She was not allowed to leave the house, let alone work. She was frustrated by the helplessness of her situation but there was very little that she could do.

Apart from their monetary issues, Farzana had an even more important concern, her children had not been vaccinated or immunized and were at a constant risk of contracting diseases that could easily be avoided. She had tried several times to speak to her husband about this problem but in vain. When the CHIP team identified her and visited her house, they were faced with her aggressive family of in-laws. When the CHIP staff and lady health visitor tried to convince them to get their children vaccinated and immunized, they were told off by her husband and mother-in-law. They were of the opinion that the injections did not help in any way, in fact they did the exact opposite and caused fever and there was no way that they would let the CHIP staff anywhere near their children.

After the first visit, Farzana tried to personally convince her husband to get their children immunized but this too in vain. The CHIP staff and VHC members received the same response when they visited their house for the second time. Farzana’s anxiety only grew with each visit as she learnt of all the benefits of immunisation. As a mother worried about the welfare of her children, once she realised what her children were missing out on, her concerns only increased.

The CHIP staff reassured her that her family would eventually agree to it and they would continue to mobilise her family until they too accepted the benefits of immunization. Eventually, the CHIP staff and VHC health promoters were able to convince her family and her children received all six immunisation injections. Prior to meeting CHIP, Farzana had not known about the advantages of immunization and vaccination. She is grateful to CHIP for mobilising her and her family. She has promised herself in the future to get TT injections for both herself and her children.
Name: Farzana Shah
Age: 29
Village: Darapur
Union Council: Sanghoi
District: Jehlum, Pakistan
Position: Beneficiary
INSTITUTIONAL STRENGTHENING
1. Establishment of VHC offices
2. Improvement and renovation of health facilities
3. Vaccination synergies for conduct of vaccination camps
4. District health forums for improvement of health facilities.
5. Training of VHCs on record keeping, CMST

District Health Department PPHI

HUMAN DEVELOPMENT
1. Training of SBAs on safe delivery
2. Training of LHWS on Social Mobilization
3. Training of vaccinators on vaccinations and Monitoring
4. Training of HPS on conduct of awareness raising
5. Training of VHCs on record keeping

Community Participation

IMPACT / OUTCOME
Healthy Family / Healthy Pakistan

MDG – 4
Reduction in maternal Mortality rates

MDG – 5
Reduction in infant Mortality Rates
Civil Society Human and Institutional Development Programme (CHIP)
Plot No. 01 (Fayyaz Market) Street No. 9,
Opp: National Institute for Handicapped,
G-8/2, Islamabad
UAN: ++92-51-111-111-920
Fax: ++92-51-2280081
E-mail: info@chip-pk.org
Website: www.chip-pk.org