بِسْمِ اللَّهِ الرَّحْمَٰنِ الرَّحِيمِ
Government of Pakistan
Ministry of Health
PHC Wing

National Programme for
Family Planning and
Primary Health Care

“The Lady Health Workers’ Programme”

2008
Background and Objectives
The Lady Health Workers’ Program:

Promoting Health and Reducing Poverty

......by bridging the gap between the Health Services and Communities.
• **163 million population**
  - 34% Urban 56 Million
  - 66% Rural 107 Million

• **1 LHW: 1000 Population**

• **Target Population**
  - 30% Urban 16 Million
  - 70% Rural 84 Million

• **Medium Term (2008-11) 110,000**
  - 30% Urban 16000 LHWs
  - 90% Rural 95000 LHWs

Long Term (2011) **122,000**
  - 30% Urban 16,000 LHWs (16 M)
  - 100% Rural 106 LHWs (106 M)
The National Program for FP & PHC
(The Lady Health Workers’ Program)

*The largest CBI in SE Asia, launched in 1993-94;*

- Linking the community with Health Facilities through deployment of 100,000 countrywide LHWs (optimal utilization of health facilities).

- Address the PHC issues at the community level: provision of promotive, preventive, curative, rehabilitative services that are appropriate and accessible to the target population.

- Cultivate community participation through enhanced awareness, attitude change, and mobilization of support.
– Emphasis on Maternal and Child Health by assisting in reduction of NMR, IMR and MMR

– Expansion of FP services in urban slums and rural areas of Pakistan (Policy of informed choices).
  – Improvement of nutritional status of mothers & children.

– Integrate Vertical Health Programs
The Organizational Structure of Lady Health Worker’s Program

- **LHW** (Lady Health Worker)
- **LHS/Trainers**
- **DHO/EDO** (District Health Officer/Extension District Officer)
- **DPIU** (District Project Implementation Unit)
- **PPIU** (Provincial Project Implementation Unit)
- **FPIU** (Field Project Implementation Unit)
- **MoH** (Ministry of Health)

**Community**
<table>
<thead>
<tr>
<th>Level</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ministry of Health</td>
<td>Policy development, National level planning, M&amp;E, Coordination, Resource</td>
</tr>
<tr>
<td>Federal PIU)</td>
<td>generation &amp; allocation</td>
</tr>
<tr>
<td>Provincial Health</td>
<td>Distribution of finances/ logistics, Training, Monitoring, Coordination,</td>
</tr>
<tr>
<td>Department (Provincial</td>
<td>Hiring/firing of LHWs, supervisors, FPOs, Distribution of stipends and</td>
</tr>
<tr>
<td>PIU)/District</td>
<td>supplies to LHWs, Training of trainers, female supervisors, Coordination</td>
</tr>
<tr>
<td>Implementation Unit</td>
<td>with other departments, Supervision</td>
</tr>
<tr>
<td>FLCF/Training Centers</td>
<td>Selection of LHWs, Training and supervision of LHWs, Management of referrals,</td>
</tr>
<tr>
<td></td>
<td>Distribution of logistics, Collection and compilation of data</td>
</tr>
<tr>
<td>Community/Village</td>
<td>Provision of PHC services by (Health House) LHWs</td>
</tr>
</tbody>
</table>
The Lady Health Worker

- **Selection criteria:**
  - Local Resident of the catchment area i.e. 1000 population/150 HH
  - 8th Grade Pass
  - Preferably Married
  - Age: 18-45 years
  - Recommended by/acceptable to the Community

- **Selection Process:**
  - Identification of areas/Health facilities
  - Assessment/interview at Health facility
  - Selection committee chaired by Medical Officer Incharge, community representative as member
  - Appointment letter by EDO (H)

- **Stipend for LHWs:** Rs 3500/month
- **HIRING/FIRING authority with the District**
## Training of LHWs

<table>
<thead>
<tr>
<th>Training Component</th>
<th>Duration</th>
<th>Modules used</th>
</tr>
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<tbody>
<tr>
<td>Class Room+Practical Health Education Charts, Video</td>
<td>03 Months</td>
<td>LHW Module</td>
</tr>
<tr>
<td>Field Practice+ Class Room (one week per month)</td>
<td>12 Months</td>
<td>+Practical Training Module</td>
</tr>
<tr>
<td>Field Practice+Class Room (one day per month)</td>
<td>Monthly</td>
<td>LHW Module &amp; Problem based</td>
</tr>
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</table>
• Refresher Training of LHWs

All the working LHWs have received 15 days refresher trainings on Maternal, neonatal and Child health.

Refresher Trainings divided into 03 – Phases

• **Phase -1-** 05 days Training on Maternal and Neonatal Health.

• **Phase-II –** 06 Days training on Child Health.

• **Phase III-** 04 Days training on Nutrition.
Activities
Maternal Health

- Awareness and community mobilization
- Antenatal Care check-up
- Develop Linkages with SBA/ CMW & Health Facility
- T&T Vaccination
- Provide Iron and Folic Acid
- Identification of Danger sign and referral
- Post natal Care
- Provide OCP, Condom and Inj Contraception
Neonatal Services

• Early Initiation of Breast feeding
• Delayed Bathing
• Weighing of New Born
• Assessment and Identification of Danger Sign.
• Promote Vaccination
• Visit with 48 hours of delivery
Child Health

- Exclusive Breast Feeding
- Growth Monitoring
- Community IMNCI
- Community Infant and Young Child feeding
- Promote Vaccination
Linkages with Other Health Care Provider and Associations
Training material and Curriculum

- Periodic review by the team of experts and core team comprises of Senior Pediatricians, Gynecologist, Public Health Specialist, Pakistan Nursing Council, Pakistan Medical and Dental council, Senior Nurses and Midwives
Training Activities

Training Cascade

- National Level Workshop
- Provincial Level Workshop
- District Level Workshop
- FLCF Level Workshop
- Provincial Master Trainers
- District Master Trainers & FPOs
- FLCF Master Trainers & LHSs
- Training of LHWs
Training Site and Trainers

- Nearby Health Facility is the training site. Trainers are usually from the same health facility:
  - 1. Doctor
  - 2. Lady Health Visitor/ Female Health Technician
  - 3. Male Health Technician/ Dispenser
<table>
<thead>
<tr>
<th>Province</th>
<th>Total FLCF involved in NP</th>
<th>No. of Trainers</th>
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</thead>
<tbody>
<tr>
<td>Punjab</td>
<td>2515</td>
<td>186</td>
</tr>
<tr>
<td>Sindh</td>
<td>827</td>
<td>143</td>
</tr>
<tr>
<td>Balochistan</td>
<td>259</td>
<td>92</td>
</tr>
<tr>
<td>NWFP</td>
<td>725</td>
<td>120</td>
</tr>
<tr>
<td>FATA</td>
<td>66</td>
<td>42</td>
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<tr>
<td>FANA</td>
<td>34</td>
<td>18</td>
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<tr>
<td>ICT</td>
<td>20</td>
<td>4</td>
</tr>
<tr>
<td>AJK</td>
<td>118</td>
<td>20</td>
</tr>
<tr>
<td>Total</td>
<td><strong>4464</strong></td>
<td><strong>625</strong></td>
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</table>

<table>
<thead>
<tr>
<th></th>
<th>District</th>
<th>FLCF</th>
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<tr>
<td>Punjab</td>
<td>5752</td>
<td></td>
</tr>
<tr>
<td>Sindh</td>
<td>1724</td>
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<tr>
<td>Balochistan</td>
<td>552</td>
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<tr>
<td>NWFP</td>
<td>1986</td>
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<tr>
<td>FATA</td>
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<tr>
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<tr>
<td>ICT</td>
<td>50</td>
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</tr>
<tr>
<td>AJK</td>
<td>240</td>
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</tr>
<tr>
<td>Total</td>
<td><strong>10456</strong></td>
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Innovation and Interventions

- All innovation and interventions are reviewed by technical committee for Innovation
- Comprise of Member of Pakistan Pediatric Association, Society of Gynecologist and Obstetricians of Pakistan, Public Health Specialist, Research Institutes/Universities, academicians,
## Program Indicator's

<table>
<thead>
<tr>
<th>INDICATORS</th>
<th>NATIONAL</th>
<th>LHWS</th>
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<tbody>
<tr>
<td>Maternal Mortality Ratio (MMR)</td>
<td>276</td>
<td>180</td>
</tr>
<tr>
<td>Infant Mortality Rate (IMR)</td>
<td>77</td>
<td>50</td>
</tr>
<tr>
<td>Contraceptive Prevalence Rate (CPR)</td>
<td>30%</td>
<td>38%</td>
</tr>
<tr>
<td>Tetanus Toxoid Vaccination (TT2)</td>
<td>51%</td>
<td>57%</td>
</tr>
<tr>
<td>Ante Natal Care (ANC)</td>
<td>43%</td>
<td>49%</td>
</tr>
<tr>
<td>Skilled Birth Attendance (SBA)</td>
<td>31%</td>
<td>55%</td>
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</table>
Thanks