

Rights-driven Institutionalization of Sexual and Reproductive Health in Pakistan



World Population Foundation (WPF) Pakistan
 House No. 261, Street No. 17,
 Sector F-10/2, Islamabad, Pakistan
 Tel: +92 (51) 211 0539; Fax: +92 (51) 211 0536
 www.wfpak.org



This project is funded by the European Union



A project implemented by World Population Foundation (WPF) Pakistan



Rights-driven Institutionalization of Sexual and Reproductive Health in Pakistan

Rights-driven Institutionalization of Sexual and Reproductive Health in Pakistan

Why SRHR?

Pakistan is one of the most populous countries in the world with an estimated population of about 163 million people as of 2008. Young people who are considered to be the future builders of any nation today comprise 63% of the population of the country. This in itself is an opportunity for Pakistan at the moment provided we get to harness the potential of this group by investing in them. However, despite their overwhelming numbers, due attention is not being paid to the young population of Pakistan; Sexual and Reproductive Health (SRH) figures prominently among the areas of concern, which require immediate consideration.

In Pakistan, like many other developing countries, poverty is intrinsically linked with poor Sexual and Reproductive Health. An analysis of the ground realities further manifests the missing link between interventions and rights bringing home the realization as to why SRH initiatives in the past have failed to become socially sustainable. Moreover, the assumption that boys and girls under 18 are "too young" to have Sexual and Reproductive Health information and services violates young people's right to acquire practical knowledge and skills they need to protect themselves and their partners from STIs/HIV, unwanted pregnancies, unsafe abortions or childbirth related complications, and sexual abuse or violence. Young people who seek Reproductive Health services often face judgmental health providers who offer neither confidentiality nor privacy.

Such indifference to a basic human right has then left most of the population exposed to perils that it cannot protect itself against, not merely due to lack of resources but more so, ironically, because of dearth of knowledge to identify the danger when it approaches!



Target Group and Beneficiaries

The main target group of the project will be young people, particularly girls with focus on building the capacity of 3 partner NGOs, 100 CSOs, 450 schools, 1000 teachers, over 150 health service providers, and more than 150 policy makers and parliamentarians. The project will directly reach up to 150,000 young people in 3 districts and over 1 million young people indirectly throughout Pakistan.

Selected Districts

Target District	Karachi, Sindh	Multan, Punjab	Matiari, Sindh
Social Setting	Metropolitan and Urban	Municipal and Peri-urban	Rural
Demo- and Socio-Graphic Characteristics	Over 90% literacy; highest number of unmarried educated youth, open and liberal mindset	Educated population; high rate of violence against women, conservative mindset	Uneducated population, multi-religion, disadvantaged beneficiaries

Intervention Strategies

WPF will be implementing several strategies to achieve the overall objective of the project through a three pronged approach named A.J.M:

A: Assessing Prevalence of SRHR; to assess the current status of Sexual and Reproductive Health Rights in Pakistan through Rights based Framework- SeHRAF. The pioneering national status report will also be used for improving SRHR status and to create an enabling environment.

I: Institutionalizing SRHR In Demand and Supply Mechanisms; to institutionalize the Sexual and Reproductive Health education in education system as well as client centered SRHR services in health management system to cater for the needs of young people.

M: Monitoring of SRHR Situation resulting due to Institutionalization; to sustain the project as well as monitor its progress and effectiveness during implementation. Several M&E mechanisms will be strengthened within the existing systems of health and education from an SRHR perspective.

What we Aim to Achieve?

1. SRH rights' situation in Pakistan mapped and assessed as a first country in the region.
2. LSBE curriculum converted into a rights-framework and integrated in national and provincial curricula.
3. A model for institutionalization of SRH rights created, tested and made available.
4. Health Management Systems in 3 districts become responsive to SRH needs of youth (and women).
5. Government, CSOs, NGOs and coalition of partners fully trained and capacitated.

