







Khud Ko Pehchaano

Punjab Population Innovation Fund















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Presentation Outline

- Introduction to PPIF and GSM
- Introduction of team
- Project Orientation
- Pakistan Population Profile
- o Sexual & Reproductive Health & Rights
- o Preparation and pre-screening before marriage
- Healthy Timing & Spacing- HTSP
- Orientation of Family Planning Methods
- o Gender & Sex
- Gender Based Violence and its Mitigation Strategies
- Mentorship Program and Seed Funding















Punjab Population Innovation Fund

PPIF is a non-profit, public-sector company, established to render financial and technical assistance to innovative projects for population planning, improving access, and generating demand for family welfare services in Punjab.















GREENSTAR SOCIAL MARKETING PAKISTAN



















Mission



Contributing to the development of Pakistan through Family Planning & Family Health Solutions













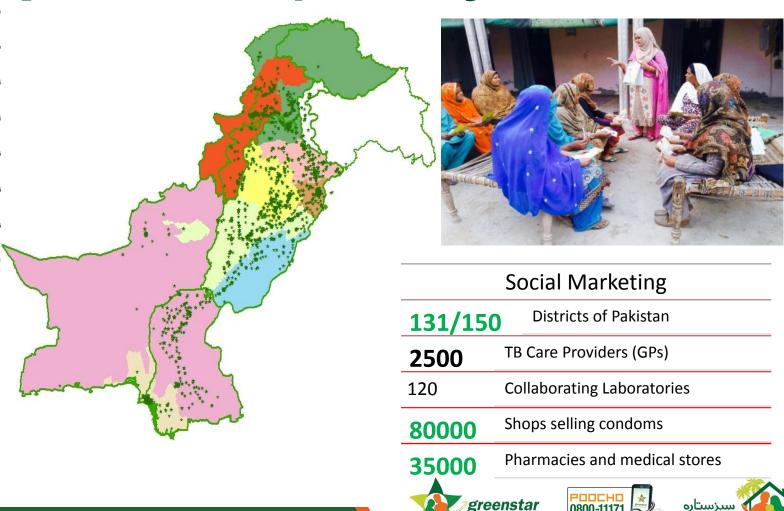
National Capacity and Competency

	Social Franchising
96/150	Districts of Pakistan
7000	Service Providers
23	GSM Trained (Doctors)
46	GSM Medical reps
250	GSM Outreach Workers
20	Products (Subsidized)

Impact of GSM work

National CYP contribution: 13%

Share of Private sector: 33%



in **"36"** districts across Punjab for **family** planning, sexual and reproductive health, post-abortion care, self-care, nutrition, **TB/HIV** services





ch & Impact in Punjab in the last 10 years

2,792
MATERNAL DEATHS AVERTED





- 39,600 retail outlets
- 38,000 pharmacies
- Marketing and Sales support team
- National Distributor





- 2,792 Women Healthcare providers at Sabz Sitara Family Health Clinics,
- 963 general practitioners (GPs) providing TB Care
- 2,000 Service providers combatting diarrhea-related













Project Orientation

- 600 master trainers trained in Pre-marital Counselling in 30 Universities/colleges.
- 12000 young people provided with Pre-marital Counselling
- 30% increase in the number of young men and women
 - Basic knowledge about Sexual Reproductive Health and Rights (SRHR).
 - Knowledge of at least three modern methods of contraception.
 - knowledge of Healthy Timing and Spacing of Pregnancy (HTSP)
 - Myths and misconceptions about Family Planning
 - Gender-based violence GBV
 - GBV preventive strategies















Problem Statement

Social Aspect

of Population Size Implications













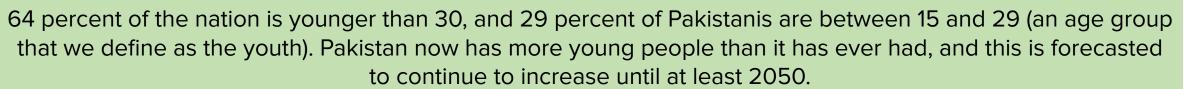






Pakistan Population Profile

- 5th most populous country in the world
- ► >220 million population
- ► Around 64% 130 million population < 30 years
- Around 50% of population are women
- ► Growth rate 2.4
- ► CPR 34% Modern 25% Traditional 9%
- Fertility rate 3.8

















Contraceptive Prevalence Rate (CPR)



Pakistan CPR 34%



India CPR **54%**



Bangladesh CPR 62%



Iran CPR 77%









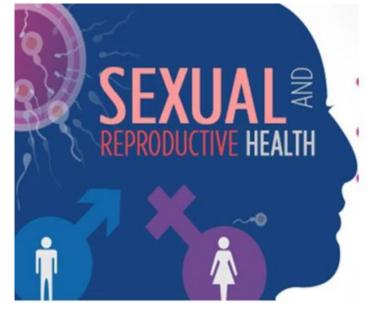






Part I

Sexual and Reproductive Health and Rights (SRHR) 101

















Objectives

- By the end of this session, you will be able to know
 - The importance of health and well being
 - Definitions of reproductive and sexual health
 - Sexual and reproductive health and rights and what comprises SRHR
 - SRHR needs of Youth
 - Barriers to SRHR
 - Puberty
 - Must haves to obtain Sexual Health















Health & Wellbeing

What is Health?

- Health is a state of complete physical, mental and social well-being and not merely the absence of disease.
- Identifying physical, emotional, and social aspects of health, including SRH

Physical: body parts, nocturnal emission, vaginal discharge, urethral discharge, menstruation, hair growth, breast development, voice changes, infertility, pregnancy, abortion, infections

Mental: feelings such as love, pain, depression, hope, and happiness. Irritability, curiosity, anxiety, stress, aggression, confusion, excitement.

Social: marriage, divorce, separation, job, education, peer pressure, poverty, rape, relationships, family planning











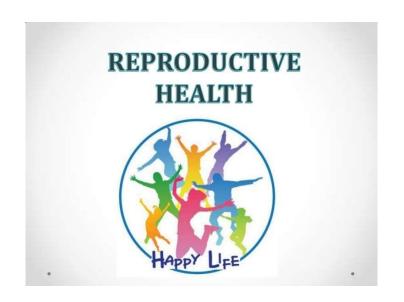




Reproductive health

•A state of complete physical, mental and social well-being and not merely the absence of disease or disability...

.....in all matters related to the **reproductive system** and to its **functions and processes**.















What is sexual health?

 A state of complete physical, mental and social well-being in relation to sexuality, and not merely the absence of disease or disability.

Sexual health requires a **positive and respectful approach to sexuality** and sexual relationships as well as the possibility of having pleasurable and safe sexual experiences **free from violence**.















SRHR Includes:

- 1- Access to sexual and reproductive health care
- 2- Information on sexual and reproductive health
- 3- Autonomy in sexual and reproductive decision making

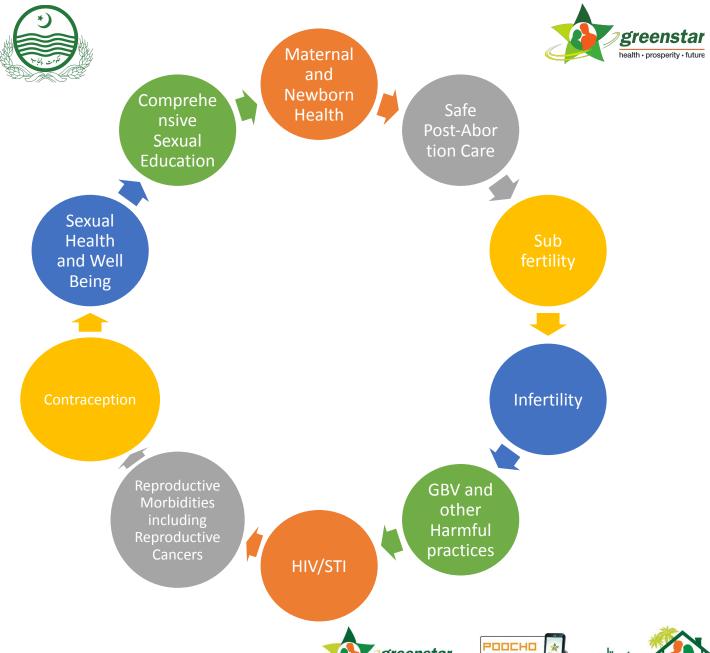








Essential Package of **SRHR**















Barriers

- Gender inequality
- Lack of access to education
- Lack of financial independence
- Lack of basic healthcare
- Socio-cultural and religious norms.









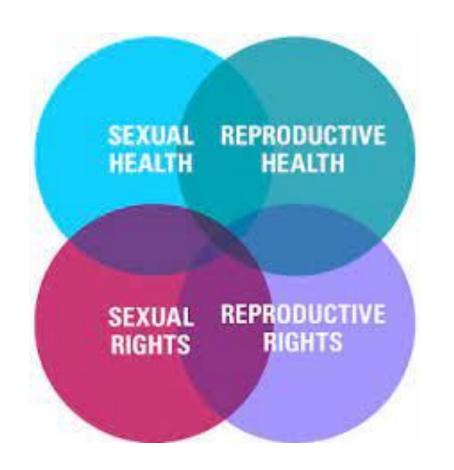




SRH Needs of Youth

Very young adolescents need accurate, unbiased information about sexuality and reproductive health from their peers and parents.

Overall, young people have **limited** access about their sexual and reproductive health.















Conti...SRH Needs of Youth

- What changes to expect during puberty, including information about menstruation and nocturnal emissions.
- Gender roles, gender norms, and expressions of gender.
- Relationships.
- Violence, consent, and bodily autonomy.
- Sexuality, personal values, tolerance, respect, and inclusion.
- For girls who are married, contraception, healthy timing and spacing of pregnancy, and healthy pregnancies.















Physical Changes in Boys & Girls

BOY



GIRL

II to 1,1 years old & approximately until 15 or 16.

testosterone and other hormones cause physical changes.

- The sexual organs start growing and preparing for reproduction.
 - increase in height and weight.
- Hair grows in the pubic area, the underarms, the face, and the legs.
- The vocal chords change, so the voice grows deeper.
 - · Some develop acne.
- The reproductive system starts working & they can procreate.

9-13 Years Old

- Hair growth in underarms
 & the pubis
 - Breast development
- Ovaries grow larger and start producing hormones.
 - · Menstrual cycles start
 - · Hips widen
- Height and weight increase due to changes in the body's structure
 - Sweat glands become more active.
- · Problems with acne may arise.
- Mood swings become more frequent due to hormone production.













To obtain sexual health, a person must

1

Be able to/ empowered to adopt safe and informed choices 2

Have accurate and evidence-based information about sex

3

Be physically well and free from sexually transmitted diseases

4

Be emotionally healthy to sexual health

5

Be able to communicate effectively and maintain social relationships with safe experiences













Part II

Preparation for Marriage















Objectives

- By the end of this session, you will be able to know
 - The importance of Pre-marital counseling
 - Medical counseling
 - Genetic counseling
 - Must have Pre-screening tests
 - Pre-marital screening program













Why prepare before Marriage?

- It is essential to understand the family medical history
- Go through pre-screening tests to avoid any unforeseen medical ailments in the coming generations
- Allows the beneficiaries to discuss clear expectations about goals, individual needs, expectations, and planning for the family
- Enables the couples to go through any gynecological or medical examination before the marriage













Premarital Counselling

• Premarital counseling is a type of family therapy that helps couples prepare for marriage, and help to ensure that you and your partner have a strong, healthy relationship.















Medical Counselling

The aim is to diagnose diseases

 Transmitted to the other partner: STI, TB, HIV, HBV

Represent a risk factor during pregnancy

- cardiac disease
- chronic renal disease
- renal transplantation
- Affect reproductive function

Female

 fibroid, genital hypoplasia, anovulation, menstrual disorders, hirsutism

Male

 Undescended testes, varicocele, azoospermia, physical disability.





































Genetic Counselling

Aim

- Identify individuals at risk of having a child with the genetic disorder
- Indications or those at a higher risk
- adolescence pregnancy
- unnecessary resort to induction of abortion
- birth of unwanted child

Age > 35: Down syndrome:

- 1/2000 at 20 y
- 1/500 at 40 y
- 1/32 at 45 y
- uncontrolled fertility
- high risk pregnancy (too early, too many & too close together)

First cousin marriages

- share large groups of identical genes (1/16): increasing the risk of recessive diseases, particularly if there is a family history
- Muscular dystrophy
- Sickle Cell Anemia
- Thalessemia













Family Planning Counselling

Aim of Contraception are reduction of the hazards of

- adolescence pregnancy
- unnecessary resort to induction of abortion
- birth of unwanted child

Explain the hazards of

- uncontrolled fertility
- high risk pregnancy (too early, too many & too close together)

Methods:

- Natural barrier & chemical
- IUCD, injectables & implants
- Oral Contraceptive Pills
- Emergency contraception, if required













Medical Tests before Marriage

- medical tests
- Blood group compatibility test
- Genetically transmitted test
- STD test















Pre-marital Screening Program

A beneficiary must get these tests done before marriage

- Blood group
- Complete Blood Count
- Haemoglobin electrophoresis
- HBs Ag
- Anti-HCV
- Anti-HIV
- HIV-Confirmation by Western blot Method













Part III

Healthy Timing & Spacing-HTSP















Objectives

- By the end of this session, you will be able to know
 - The importance and benefits of Health Timing and Spacing of Pregnancy
 - Statistics of silent deaths due to unwarranted pregnancies
 - Consequences of high fertility rate and unwanted pregnancies
 - Age-appropriate spacing













Health Benefits of Family Planning

To reduce the risk of adverse Maternal, Perinatal and Infant outcomes













There is no headline with these maternal deaths due to pregnancy related complications













Consequences of High fertility Rate and Unwanted Pregnancies

- 10 million pregnancies annually
- 4 million unwanted pregnancies
- 2.6-2.8 million abortions
- 12,000 women die every year due to complications of unsafe abortions and unwanted pregnancies
- 1200 women are dying every month because of unsafe abortions and unwanted pregnancy

Around 7 A320 Airbus planes crash... No Headlines!















Healthy Timing

Delay first pregnancy until at least

18 years of age











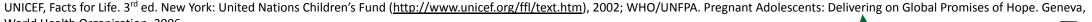


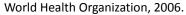


Healthy Timing

Avoid Pregnancy after 34 years of age









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Healthy Spacing

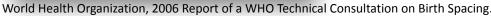


Recommendation for spacing after a live birth:

Interval before attempting the next pregnancy of at least 24 months

or

Birth-to-birth interval of at least 33 months









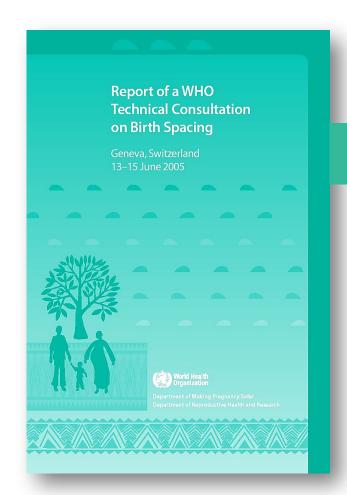




Healthy Spacing

Recommendation for spacing after miscarriage

Minimum interval to next pregnancy should be at least six months



World Health Organization, 2006 Report of a WHO Technical Consultation on Birth Spacing.







NOT TOO EARLY



NOT TOO LATE



NOT TOO CLOSE









Part IV Family Planning Methods















Objectives

- By the end of this session, you will be able to know
 - The definition of Family Planning
 - Various methods of Family Planning
 - Short term
 - Long term
 - Permanent
 - Debunk the myths and misconceptions of Family Planning methods













Family Planning is the ability of individuals and couples to anticipate and attain their desired number of children and the spacing and timing of their births. It is achieved through the use of contraceptive methods.













Contraceptive Methods

Short-acting

Barrier Methods (condom)

Fertility awareness-based methods(FAB)

> Hormonal Methods

Long-Acting -LARC

Intra Uterine contraceptive device

Implants

Permanent Methods

Female Sterilization (Tubal Ligation)

Male Sterilization (Vasectomy)













Group Activity

- Divide participants into 4 groups
- •Give each group a method of contraceptive
- Every group will present its findings on the benefits and disadvantages
- Trainer will then debrief













- 1- Barrier Methods
 - Condom
- 2- Fertility awareness-based methods(FAB)
- 3- Hormonal Methods
 - Pill OCP
 - Pill POP
 - Emergency contraception
 - Injection
 - Patch















1- Barrier Methods

- Male condoms
- Female condoms
- Diaphragm
- Spermicidal foam











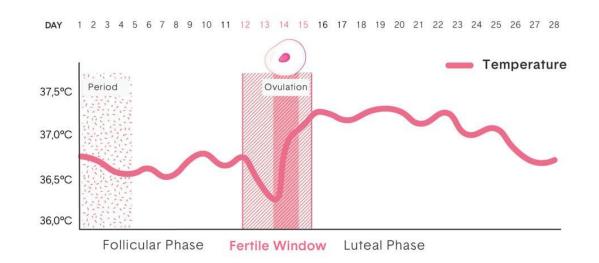


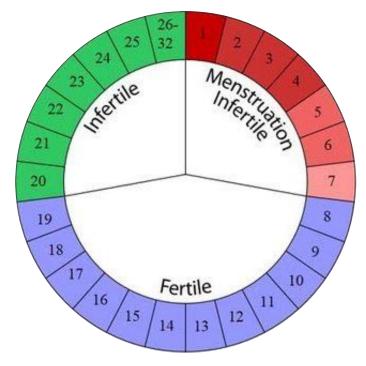




2- Fertility awareness-based methods (FAB)

- Basal body temperature
- Safe days











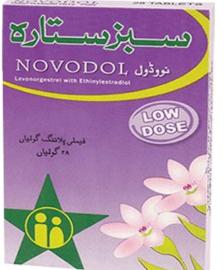






3- Hormonal Methods

- Pills OCPPOP
- Emergency contraception
- Injections

















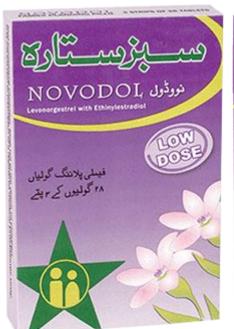






Oral Contraceptive Pill -Novodol

- Regulation of Menstrual cycle
- Treatment of Endometriosis
- Reduction in risk of endometrial cancer and ovarian cancer
- Decrease functional ovarian cyst
 - 21 white colored tablets -Levonorgestrel 0.15mg
 Ethinylestradiol 0.03mg
 - 7 brown tablets containing Ferrous Fumarate 75mg















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Emergency Contraception70 beautiful 70 b

- Best within 72 hours

Levonorgestrel – 2 tab



















Women Who May Need Emergency Contraception

- Have unplanned, unprotected intercourse
- Used a condom that may have leaked or broken
- Missed multiple COCs
- Late for injectable
- Failed in using withdrawal method of contraception









Injectable Contraceptives

- Inj Femi-Ject monthly
 - 50mg/ml Norethisterone and 5mg/ml Estradiol Valerate.
- Nova Ject 2 months
- DepoQueen three months
 - 150 mg/ml Medroxy progesterone acetate,





















Timing of Injection

- Days 1 to 7 of the menstrual cycle
- Anytime during the menstrual cycle when you can be reasonably sure the client is not pregnant
- Postpartum:
 - Immediately if not breastfeeding
 - After 6 months if using LAM
- Postabortion: immediately or within first 7 days









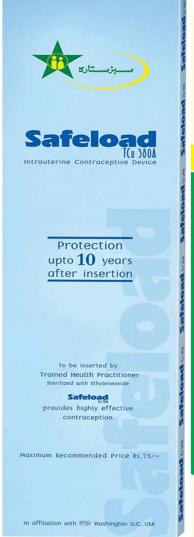


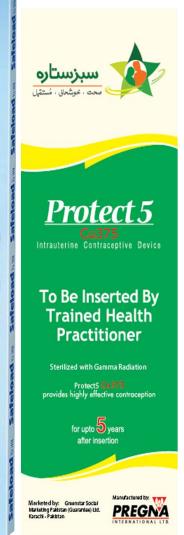
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Long Acting - LARC

- Intra Uterine contraceptive device
 - Cu-T(safeload/protect 5)
 - Mirena
- Implants
 - Implanon
 - Jadelle



















Permanent Methods

Female sterilization (Tubal ligation)

Male sterilization (Vasectomy)













Rumors, Myths and Misconceptions





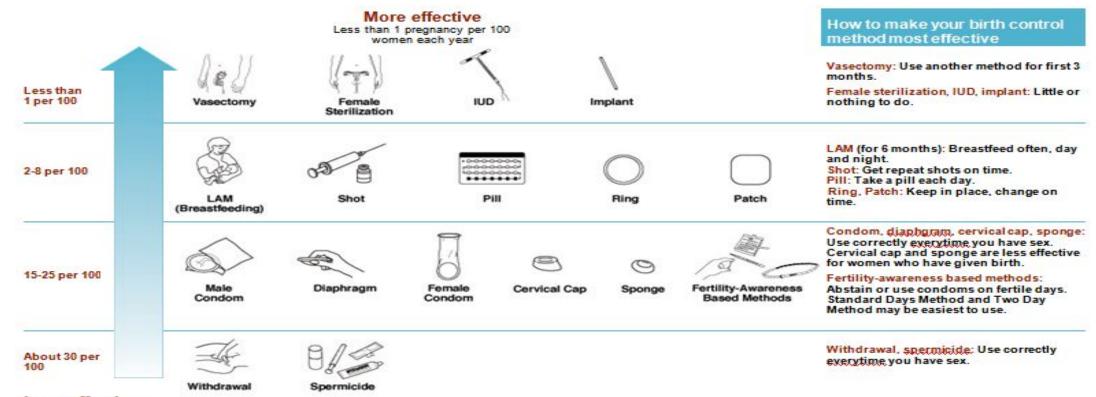








Comparing effectiveness of birth control methods



Less effective

About 30 pregnancies per 100 women each year

Bource: Adapted from WHO, 2007







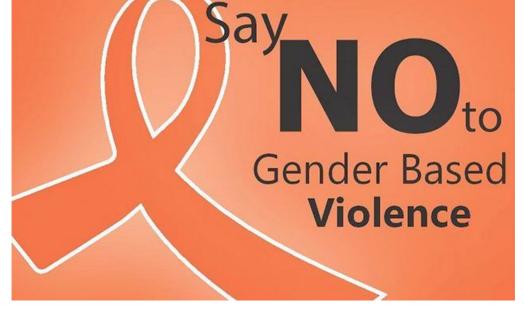






Part V

Gender Based Violence & Mitigation Strategies















Objectives

- By the end of this session, you will be able to know
 - Differentiate sex and gender
 - Identify gender roles/norms and society's factors that come into play
 - what is gender-based violence
 - Statistics about gender-based violence in Pakistan
 - Mitigation strategies to address Gender-based Violence













Gender and Sex















Gender & Sex

- •Is there a difference? Yes, on one level
 - Sex is biological male, female, also intersex (reproductive differences based on genitalia, chromosomes, hormones)
 - Also refers to sexual acts, as in 'having sex'
 - -Gender is 'the structure of social relations that centers on the reproductive arena, and the set of practices that bring reproductive distinctions into social processes' (Connell 2002: 10)
 - •Gender underlies assumptions regarding 'masculine' or 'feminine' behavior

Sex

- Humans, nonhuman animals, and cells
- ► Typically binary
- ▶ Male, female
- ▶ Intersex
- ▶ Biology
- Anatomy
- ► Physiology
- ▶ Chromosomes
- ► Hormones
- ▶ Gene expression
- ▶ Behavior

Gender

- Unique to humans
- Multifaceted and complex
- ▶ Exists on a continuum
- ► Can change over time
- ► Can differ from sex
- ▶ Feminine, masculine
- ► Her, him, they
- ▶ Social
- ▶ Cultural
- Psychological
- ▶ Political
- ▶ Behavior and roles

- ► Society
- ▶ Environment
- ▶ Experience
- ► Culture
- ▶ Politics
- ► History
- ► Ethnicity
- ▶ Race
- And more















Definition

Gender-based violence (GBV): Violence against someone on the basis of their gender. GBV is an abuse of power against the oppressed.

- Physical
- Sexual
- **Emotional**
- Financial
- Violence against children,
- Intimate partner violence,
- Femicide













Gender Based Violence

- Pakistan is placed on 145th spot in a survey of 146 countries, Gender gap report by WEF
- 135th Educational indicator
- 143rd Health and survival indicator
- 95th Political empowerment
- Sustainable Social Development Organization (SSDO) surveyed in Punjab,
 Sindh and Islamabad and reported 26134 cases
 - 19271 cases of kidnapping of women
 - 4460 rape cases
 - 823 cases of domestic violence















Gender Based Violence

Domestic Violence
(Physical, sexual,
emotional, economic and
physiological), Human
Trafficking

- Domestic Violence Helpline in Punjab: 1043
- Skills to prevent Sexual Violence
- Provide Opportunities to Empower and Support Girls and Women
- Report when an incident is seen

Workplace harassment

- Whistleblowing in the HR department
- Zero tolerance policies must be implemented against any sexual and physical













Part VI

Seed Funding













Social Action Projects:

- The training must be completed by February 2023
- After the successful completion of ToT and trickledown training, Greenstar will invite the beneficiaries of your university to send their ideas for working in communities
- Each university will submit only one proposal
- Only the top 5 proposals will win the seed grant
- The winning team will win a seed grant of Rs. 50,000 (each) to impart the learnings in the community as social action projects













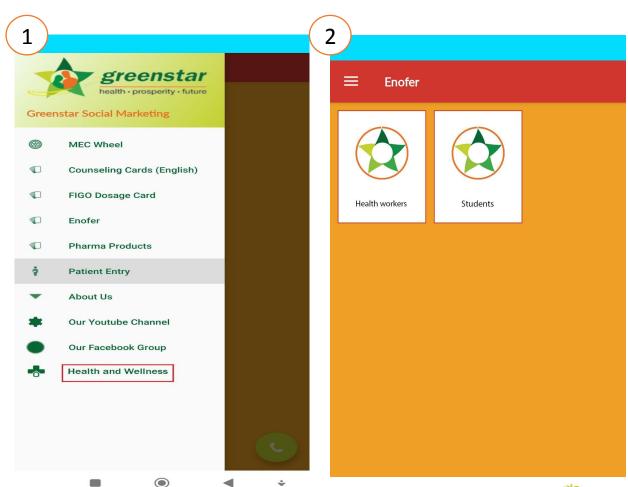
GSM Customer Segments

The customer would open the GSM app, click on the hamburger icon and will see a button "Health and Wellness," as shown in the picture below. After selecting "students"















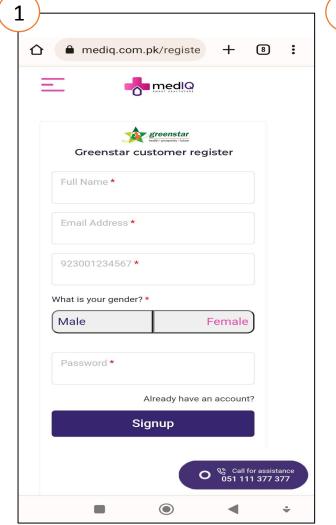


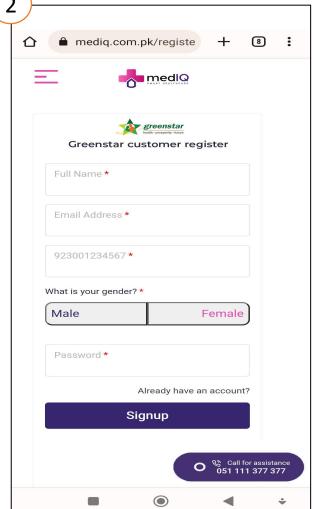




Signup & Login Screens

- After selecting the **student** tab, it would take them to the media sign-up page of the **web** app.
- Students would have to sign up by filling up the form.











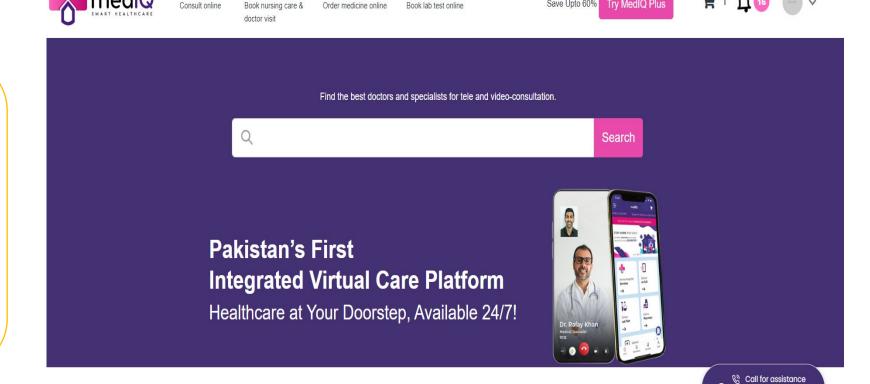






After login – Home Screen

- Both students and Sitara Bajis would signup on the GSM app.
- After Clicking the respective buttons, they would land on to homepage of the web app.











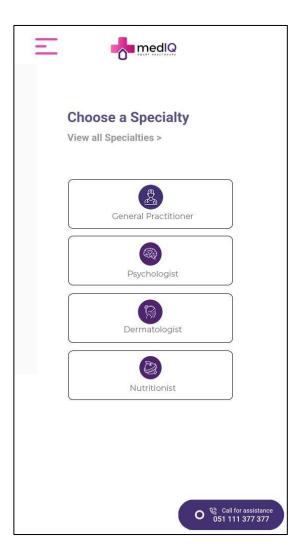




Selecting Online Doctors for Teleconsultation

After signing up, they would see the doctor specialist list

By selecting the doctor, they can book a consultation from the web app















Pricing - Students

GP Doctors		
GP Price	PKR 400	
Discounted Price for GSM		
Customers (shown on app) 50%	PKR 200	

Other Discounted Services		
All other Specialists	25%	
Medicine	8%	
Labs	15%	

Other Discounted Services		
All other Specialists	25%	
Medicine	8%	
Labs	15%	

*Psychologists will be available for Students at a fixed price









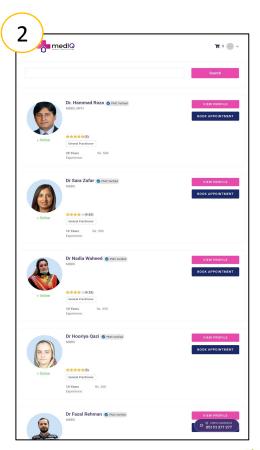




Checkout for GP

- GP doctors would be available 24/7 at 50% off the price
- Customer must select the doctor from the list and click on checkout
- GP will reach out to the customer within
 2-15 mins

Checkout Form Transaction Type sale	
Reference Number c106ee1724e90e1a45db	
Amount 500.00	
Currency PKR	
Country PK	
Email example@example.com	
First Name First Name	
Last Name Last Name	
Address 101 SW Street	
City Islamabad	
Postal Code 44000	
State Punjab	
Phone 923331022234	
Submit	











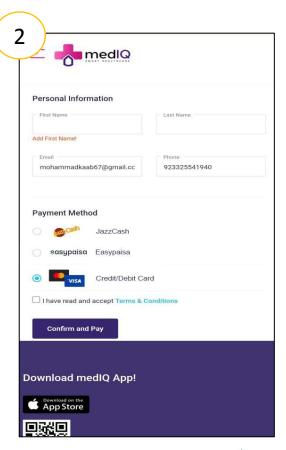


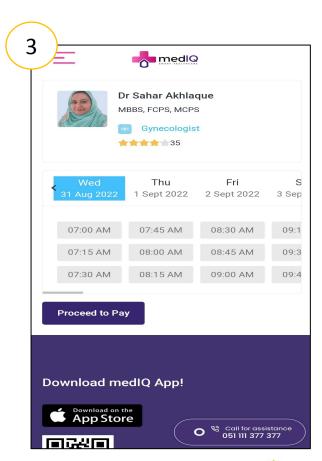


Checkout for Specialist doctor

- Doctors from 31
 specialties will be available on an appointment basis at 50% off the price
- Customer has to select from the available date and time and click on checkout
- Several payment options are available at checkout

Personal Information		
First Name	Last Name	
Add First Name!		
Email	Phone	
mohammadkaab67@gmail.cc	923325541940	
Credit/Debit Car		
Confirm and Pay		
Download medIQ App!		
Download on the App Store		









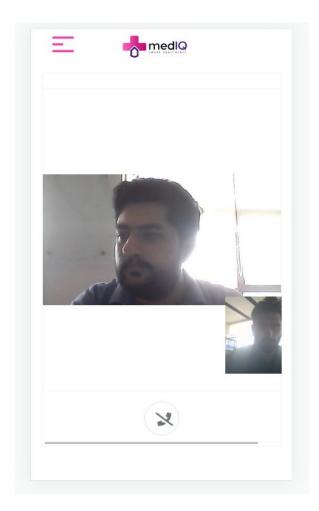


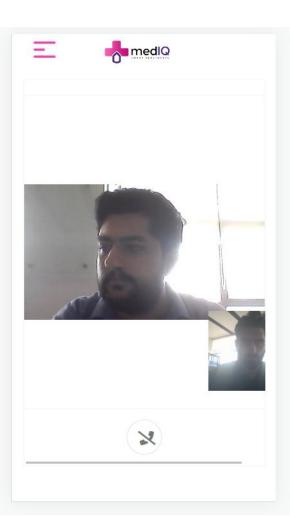




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Video Call - Teleconsultation





- After a booking is confirmed in the appointments section there will be a button of "Join Doctor" which will lead to
 - doctor video call.
- *it is important to reload the page to see "join doctor" at the time consultation was booked













Summary/Key Take Away Messages

- All human beings have SRHR rights and are allowed to practice them
- Pre-marital counseling is essential to prepare for the individual as well as the family's well-being after marriage
- 1 pre-screening blood test can save many lives from genetic anomalies
- A couple must discuss their family planning needs before they get married to address any unforeseen changes
- Family planning can keep a mother healthy, which will lead to a happy family and household
- Gender-based violence is an abuse of power, and it must be mitigated through behavior change, helpline, and empowerment
- Complete the trickle trainings by February 2023













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