

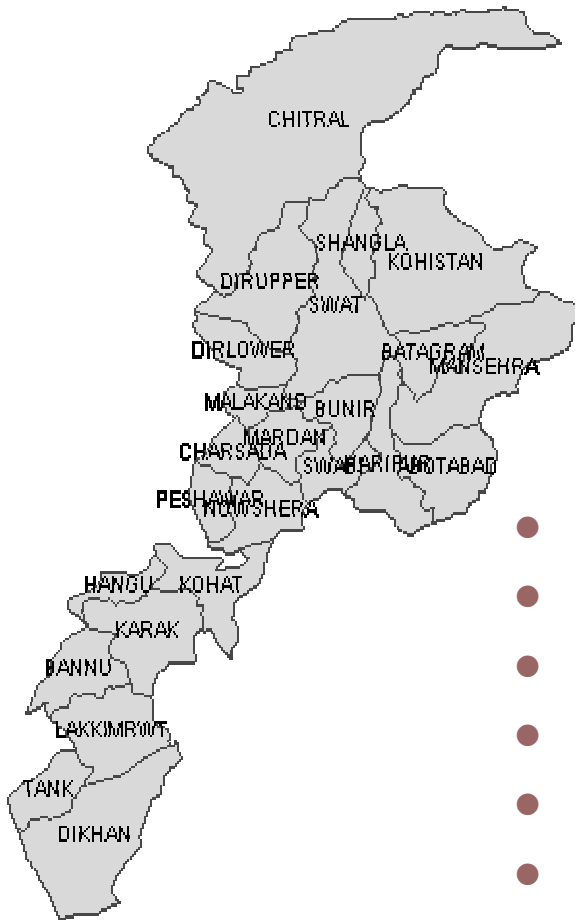
NWFP Progress on Health MDGs

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NWFP Pakistan

NWFP Geographical Map



- Districts =24
- Population =20,050,319
- Male : Female =48:52
- Children < 5 years (16%) =3,208,051
- CBA (16.5%) =3,308,303
- Pregnant Ladies (4%) =788,579
- Complicated Deliveries (15%) =118287

Health Related MDGs (1990 - 2015)

- **Child Mortality**

- Reduce by 2/3rd the mortality rate among children <5,

- **Maternal Mortality**

- Reduce by 3/4th the maternal mortality ratio

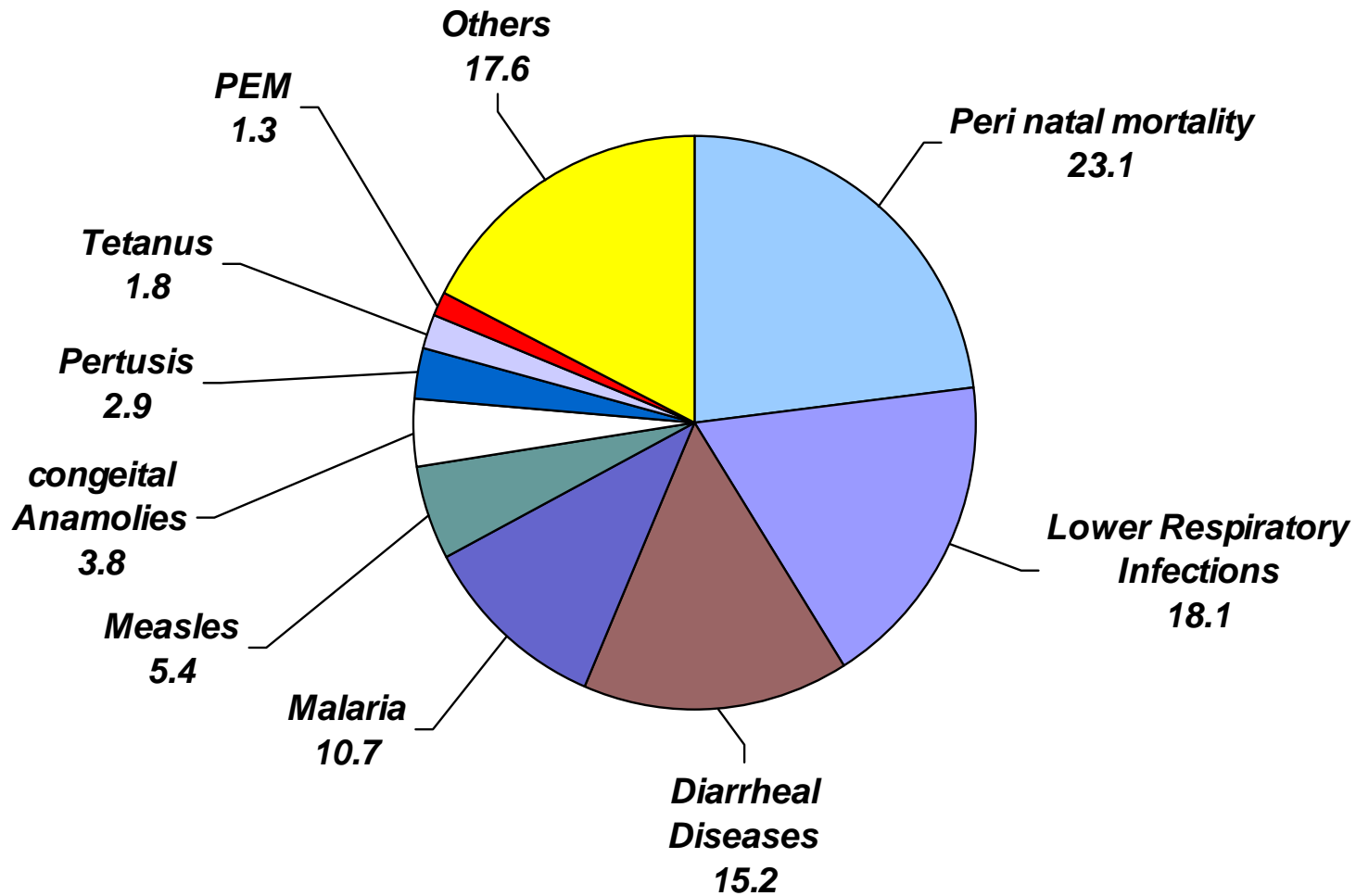
- **HIV/AIDS and Malaria and other diseases**

- Halt and begin to reverse the spread of HIV/AIDS,
- Reverse the incidence of Malaria and other major diseases

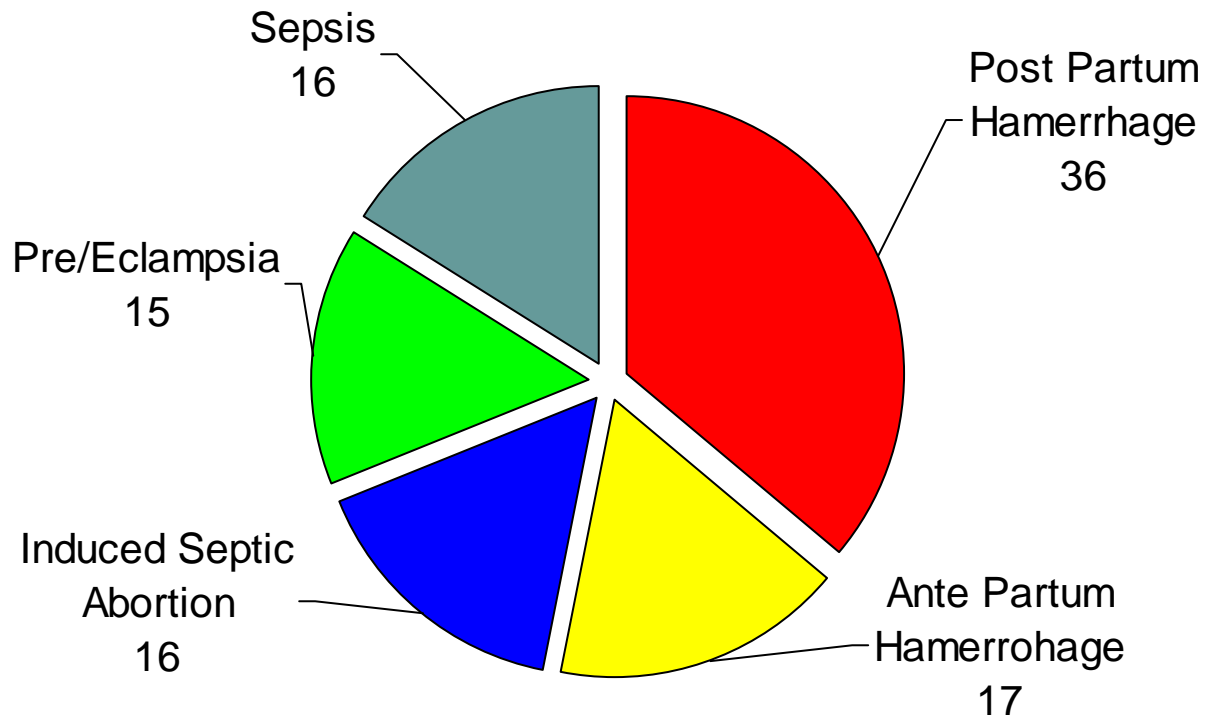
Situation of NWFP and MDGs Targets

Goals	1990	Present	Target 2015
<5 Mortality Rate	140/1000	116/1000	44/1000
Maternal Mortality Ratio	550/100000	350/100000	140/100000
HIV/AIDS		449 (Total No. of Cases)	Halt & begin to reverse spread
Malaria		30,224	Reverse the incidence
Tuberculosis		18,000	Reverse the incidence

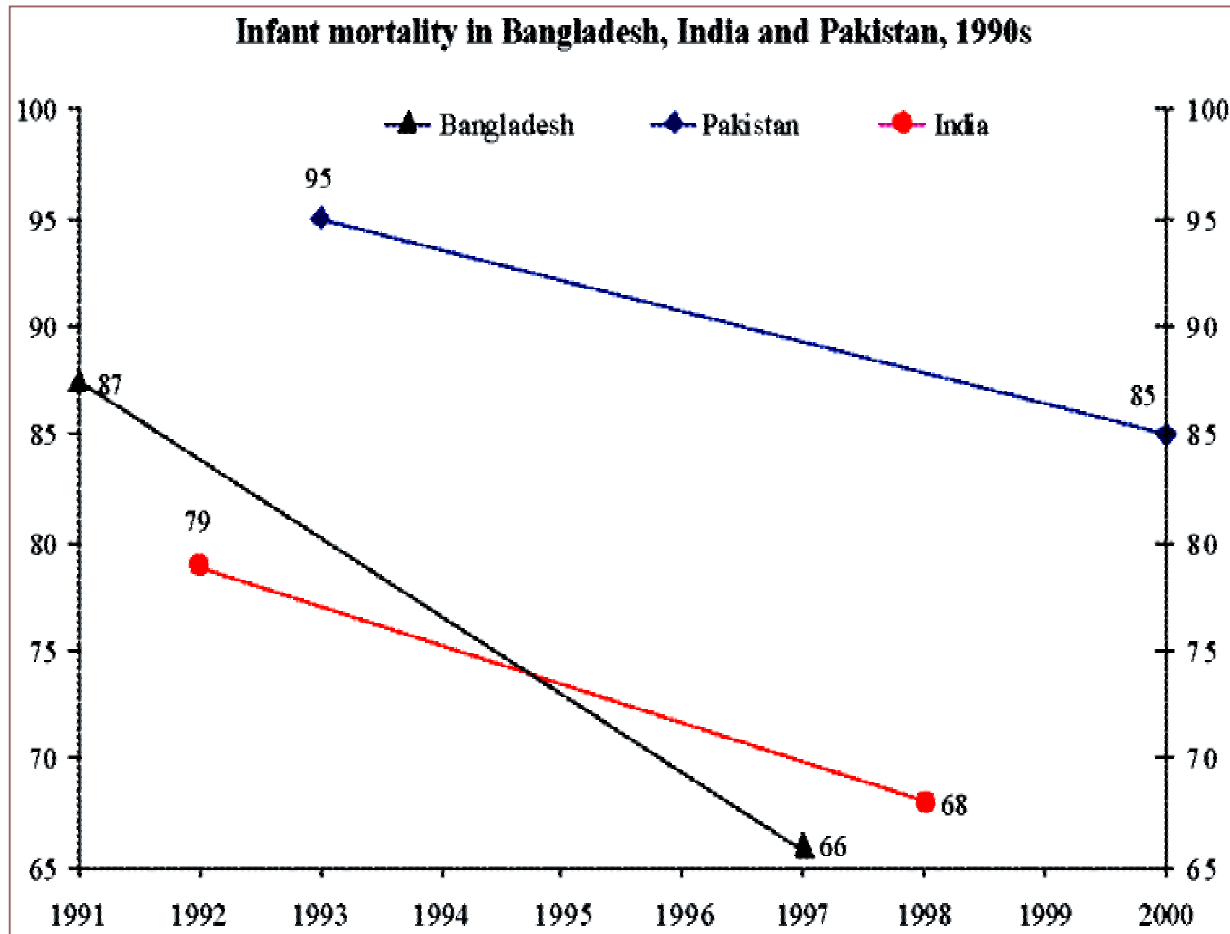
Causes of Child Mortality



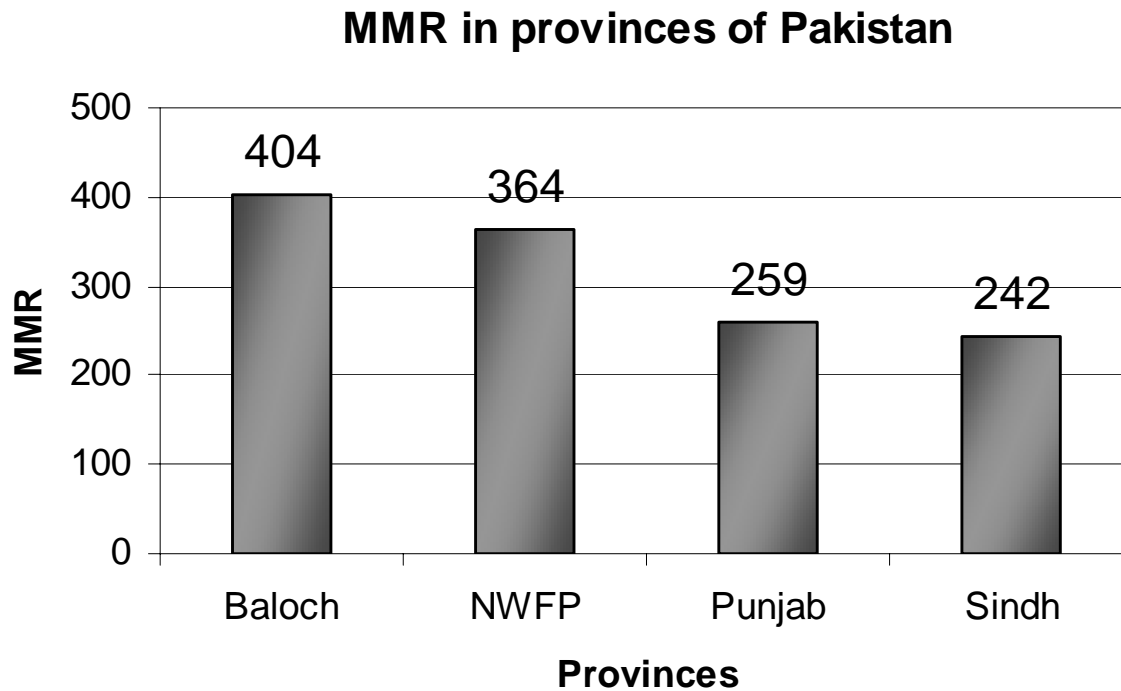
Causes of Maternal Deaths



Comparison of Regional Infant Mortality Rates



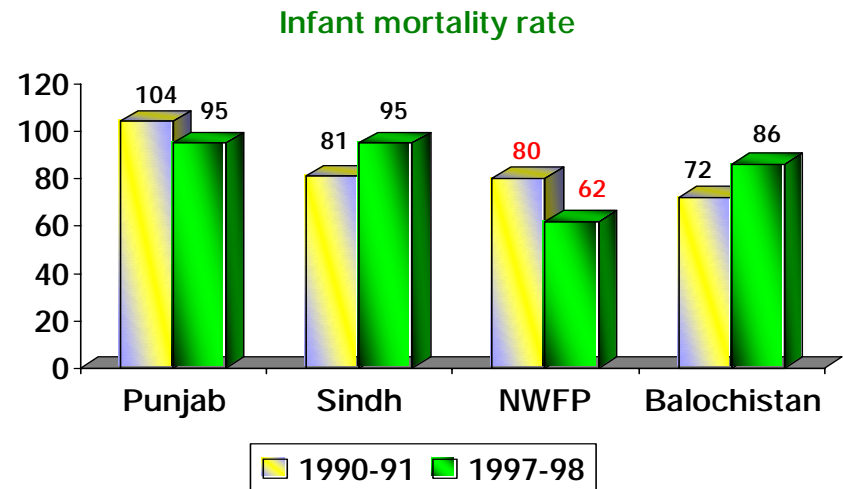
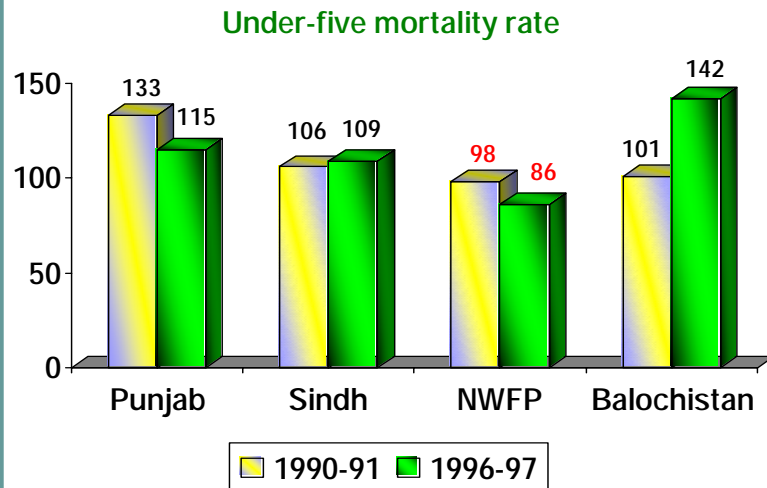
MMR in Provinces of Pakistan



National Health Plan

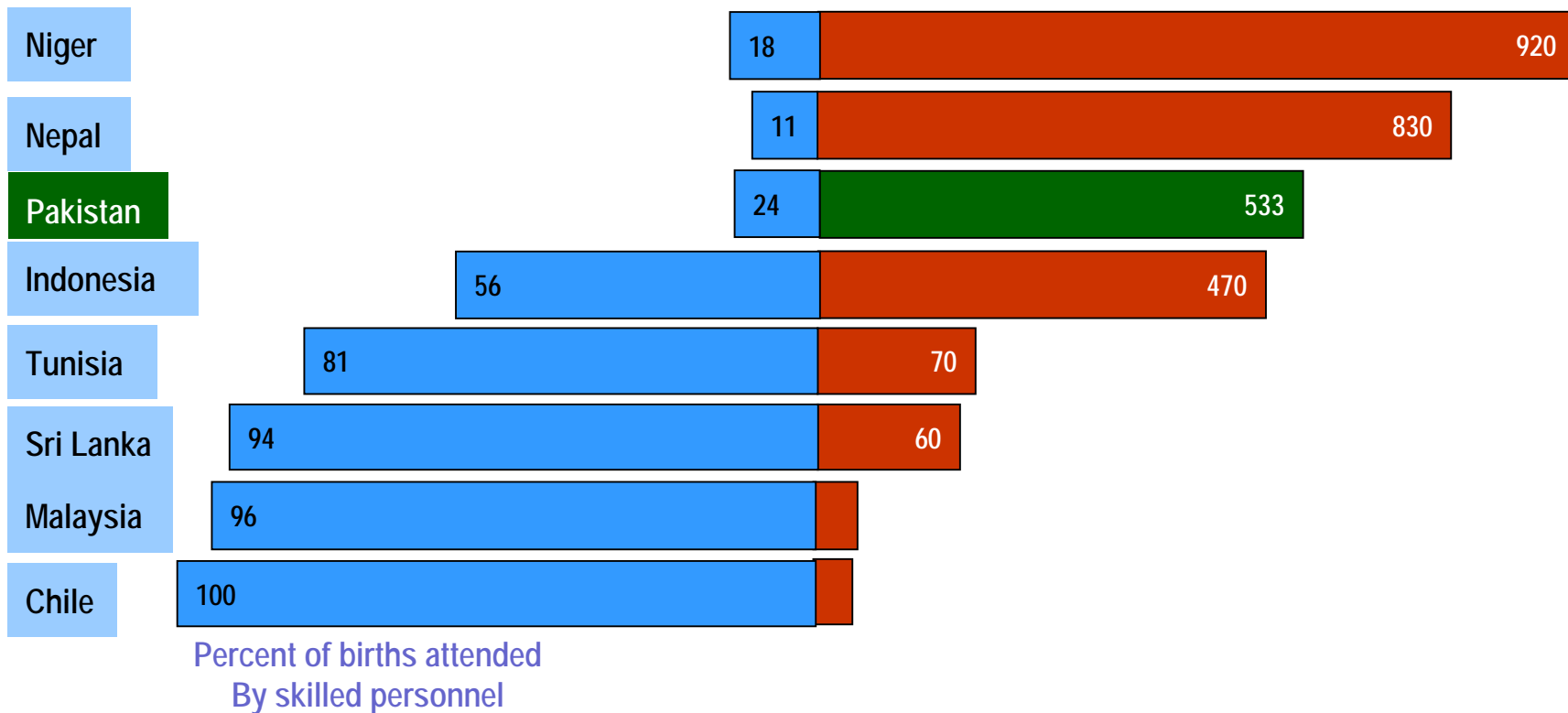
1. Reducing widespread prevalence of communicable diseases
2. Addressing inadequacy in primary/secondary health care services
3. Correcting urban bias in health sector
4. Removing professional/managerial deficiencies in the district health system
5. Capacity building for Health Policy Monitoring
6. Effecting improvements in the drug sector
7. Promoting gender equity
8. Introducing required regulations in the health sector
9. Creating mass awareness in public health matters
10. Bridging basic nutrition gaps in target population

Child Mortality



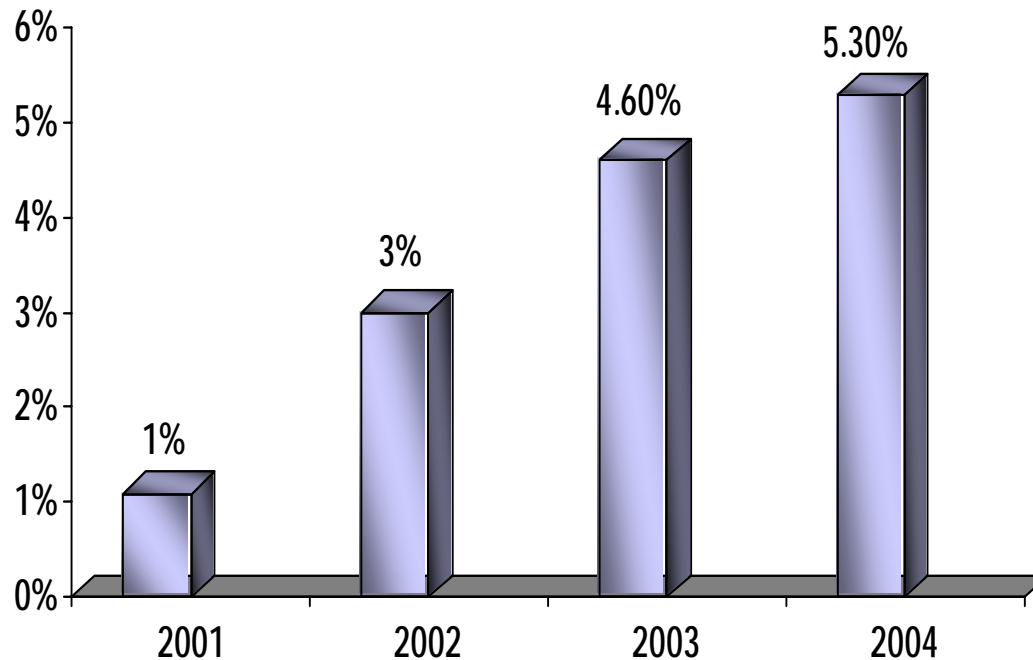
Source: PDHS 1990-91, Pakistan Fertility and Family Planning Survey 1996-97 and PIHS 1998-98

Skilled Care at the Delivery and Maternal Death Ratios, Selected Countries

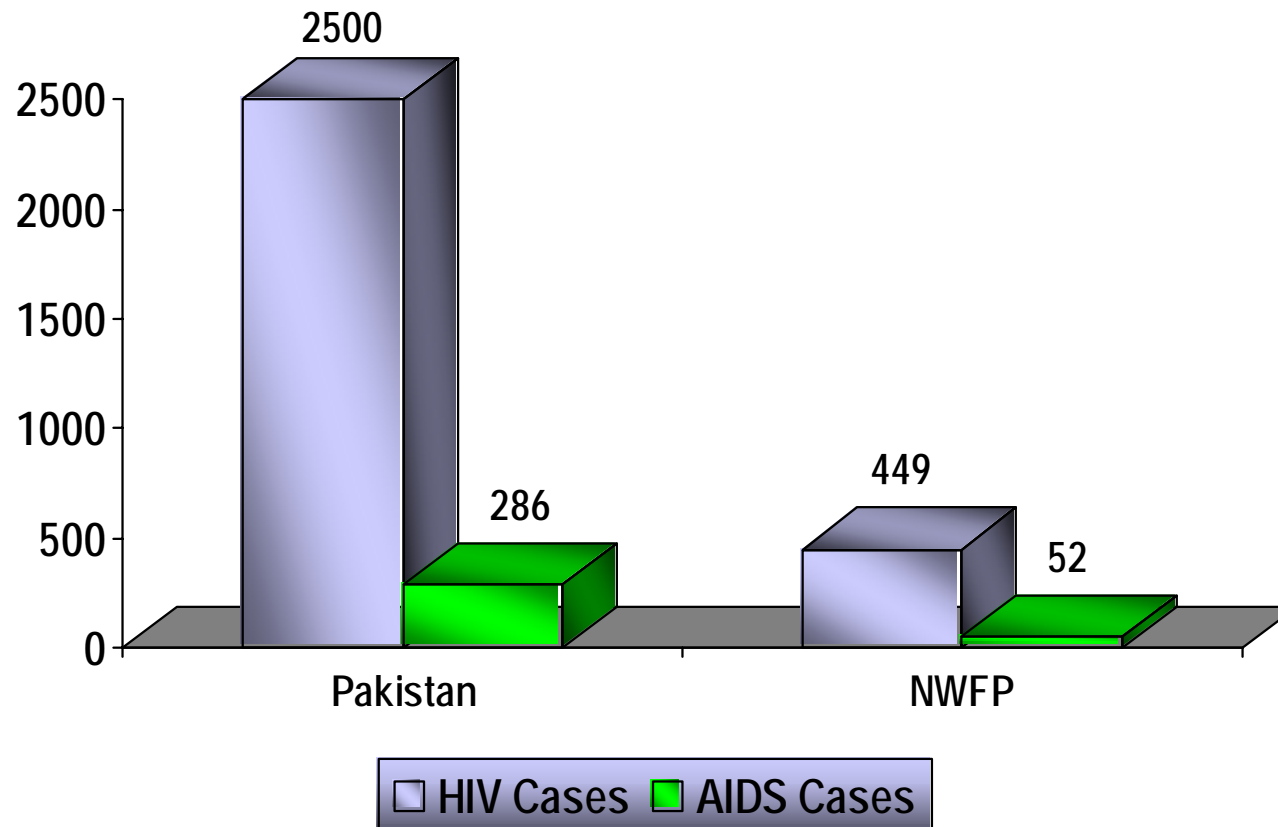


Source: UNICEF, End-of-Decade Database, and Demographic and Health Surveys, 1995 - 2000

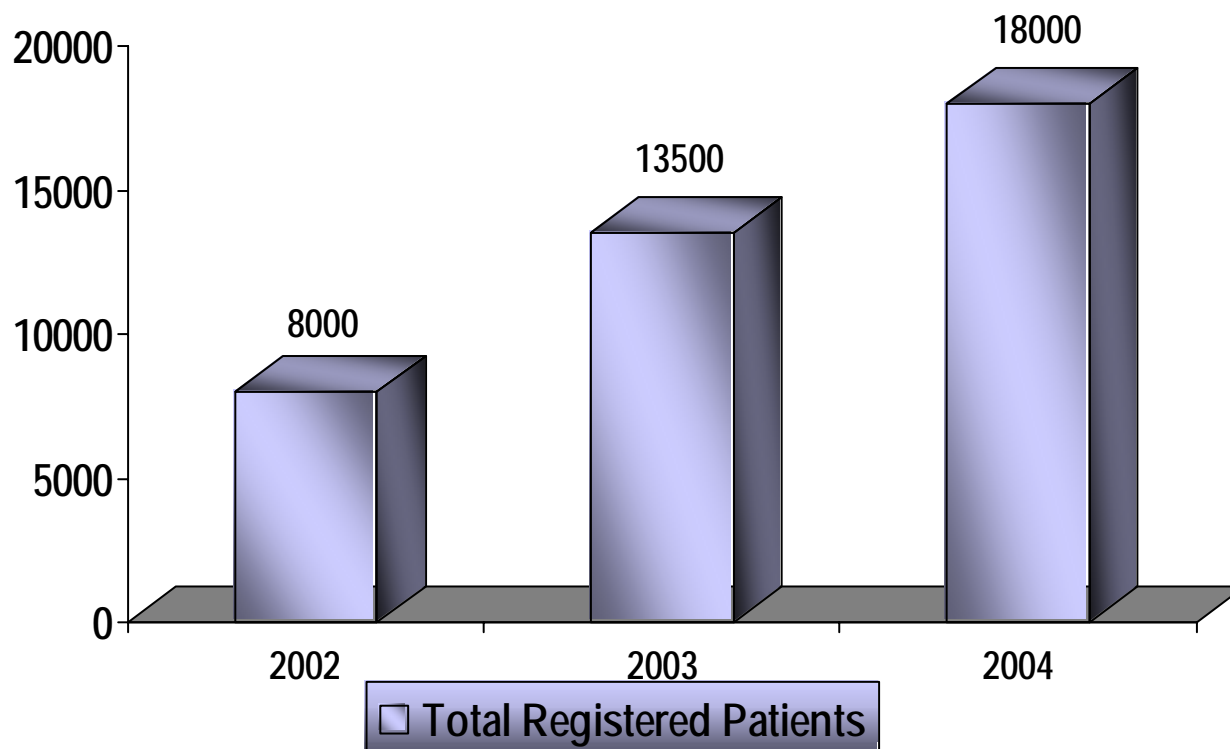
Reported Malarial Parasite Annual Incidence in NWFP



HIV/AIDS Cases



Tuberculosis Cases in NWFP



NWFP Govt. Initiatives towards reduction in Child Mortality

- Peri-natal mortality, Respiratory tract infections, and Diarrheal diseases are the major causes of child mortality (56.4%)
- Health Education, Recruitment of Lady Health Workers (LHWs), and Establishment of ORT centers are some of the steps taken to control these major killers
- Expanded Programme on Immunization is strengthened and the coverage in 14 districts is above 71%
- Special emphasis has been given to reduce peri-natal and infant mortality rate.
- ARI control project with the federal support will soon be started

Initiative to Improve Maternal Health

- Training of Community Midwives, and Dais under Women Health Project, MRDP.
- Mobilization of LHWs and other Health professionals to ensure ante-natal, and post-natal care
- To increase Contraceptive Prevalence Rate (CPR), concept of Optimum Birth Spacing (OBSI) has been introduced.
- Availability of Contraceptives and increase in demand has been encouraged
- Three projects are in the pipeline to be implemented soon. These are DFID funded MNH Project, USAID funded PAIMAN Project, and Govt. of NWFP initiated Reproductive Health Project

Govt. of NWFP Steps Towards Combating HIV/AIDS

- Five Voluntary Counseling and Testing (VCT) Centers have been established
- Testing Kits for Hepatitis B, C and HIV provided to 17 Public Sector Blood Banks. These kits will be provided to all Blood Banks in Public and Private sectors till the end of this year
- Service delivery packages to high risk groups will soon be started through NGOs.
- Anti retroviral (ARV) therapy center will soon be established in Hayatabad Medical Complex

NWFP Govt; Endeavor in Roll Back Malaria (RBM) Programme

- Cases reported in 2004 are 30224,
 - Caused by Plasmodium Falciparum 3043
- Last three years PkR 14.343m released.
- Phase I
 - four high risk districts were identified as a pilot project.
 - Vehicles, Laboratory equipments, microscopes and Anti malarial drugs provided.
 - 250 MOs trained in National treatment guidelines.
- Phase II
 - Four high risk districts identified/implemented RBM strategy.
- Phase III
 - approval under process, five districts will be identified for execution of RBM strategy.

Tuberculosis Control Programme

- TB DOTS has been started in all 24 districts.
- TB DOTS training has been imparted to 400 MOs, 425 para-medics, 120 Lab Tech, and 450 LHWs
- Diagnostic centers increased from 25 to 150.
- 18,000 patients are provided TB medicines free of cost.
- TB medicines worth PKR 30 million were provided to patients in 2003-04
- Two million rupees allocated for resistant TB cases.
- 86% cure rate has been achieved this year

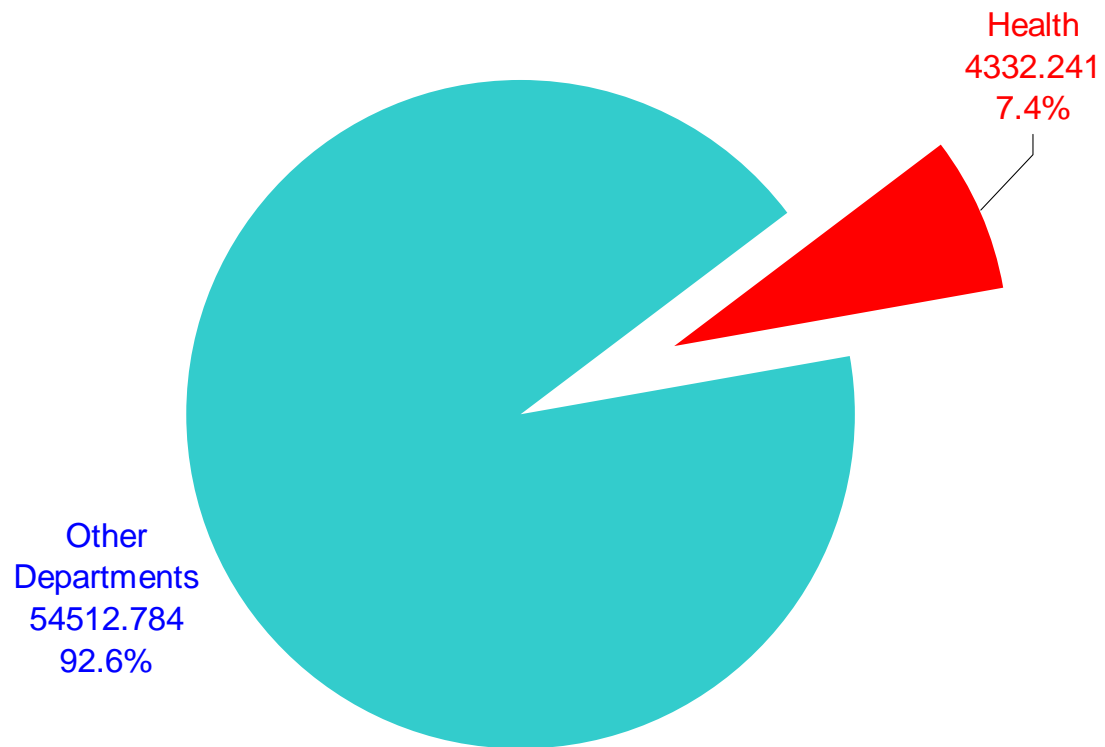
NWFP Health Reforms Initiative

Programmatic Reforms	Organizational Reforms
<ol style="list-style-type: none"><li data-bbox="91 501 923 629">1. Extension of TB DOTS to all 24 Districts<li data-bbox="91 668 923 729">2. Increase coverage of EPI<li data-bbox="91 761 948 1051">3. 1900 LHWs recruited, and more than 500 nurses recruited at the District Hospitals<li data-bbox="91 1082 957 1293">4. behavioral and mapping studies of HIV/AIDS cases and vulnerable population .	<ol style="list-style-type: none"><li data-bbox="1024 501 1614 629">1. Strengthening of DHQs<li data-bbox="1024 668 1534 801">2. Public Private Partnership<li data-bbox="1024 832 1681 893">3. Hospital Autonomy<li data-bbox="1024 925 1626 986">4. Health Insurance<li data-bbox="1024 1018 1709 1079">5. Management Cadre

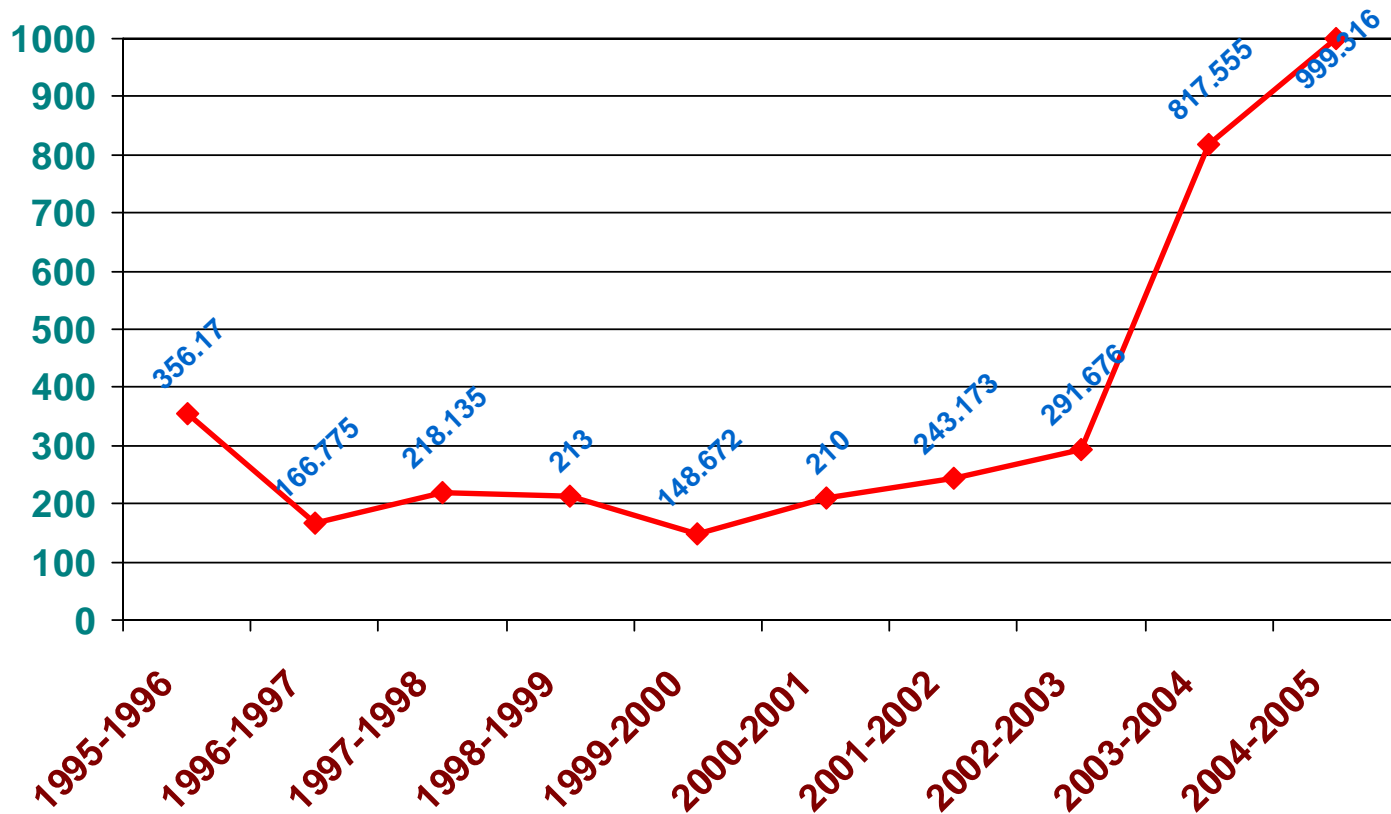
MDGs and Foreign Donors

Initiative	Donors
Reproductive Health (Mother and Child Health)	DFID, AKF, ADB, CIDA, SCF, UNFPA, UNICEF, WFP, WHO, USAID, GTZ
HIV/AIDS	CIDA, WB, GFATM
Tuberculosis	CIDA, GTZ, KFW, GFATM, WHO
Malaria	GFATM

NWFP Budgetary Allocation (2004-05)



ADP Allocations from 1995 - 2004



Health Human Resources

Cadre	Number
Teaching	482
Specialists	291
Medical Officers	3475
Dental Surgeons	200
Nurses	1932
Lady Health Visitors	918
Technicians	1827
EPI Workers	1385
Dispensers	1381
Lady Health Workers	12000
Others	2797
TOTAL	26688

Health Outlets

Type	No
Teaching Hospital	7
DHQ Hosp	15
THQ Hosp	10
RHC	87
BHU	848
Dispensary	415
MCH	94
Other	123
Total	1599

Future Investment Priorities

Sector	Est. Cost (PKR in Million)
Standardization of Hospitals	3500.000
Research and Public Health Institutes	1000.000
Human Resource Development	1000.000
Health Promotion and Health Education	48.000
Information Technology	550.000
Preventive Heart Diseases	36.000
Community Diabetes	24.000
Hepatitis B& C	72.000
Mental Health Services	72.000
Environmental Health	24.000

Way Forward

We are determined to achieve Millennium Development Goals but this should not overshadow our other priorities and problems like Hepatitis B and C, Diabetes Mellitus, Road Traffic Accidents, Heart diseases, smoking etc.

THANK YOU