

**AN ANALYSIS OF
GOVERNMENTAL AND NON GOVERNMENTAL
RURAL DEVELOPMENT PROGRAMMES
WITH PARTICULAR FOCUS ON RURAL WOMEN
IN NWFP**

(A Case Study of Three Union Councils in District Peshawar)



BY

SHAHEEN NIGAR

**DEPARTMENT OF ECONOMICS
UNIVERSITY OF PESHAWAR
PAKISTAN
July, 2006**

**AN ANALYSIS OF
GOVERNMENTAL AND NON GOVERNMENTAL
RURAL DEVELOPMENT PROGRAMMES
WITH PARTICULAR FOCUS ON RURAL WOMEN
IN NWFP**

(A Case Study of Three Union Councils in District Peshawar)

BY

SHAHEEN NIGAR

*A thesis submitted to the University of Peshawar
in Partial fulfillment of the requirements for the award of
PhD Degree in Economics*

**DEPARTMENT OF ECONOMICS
UNIVERSITY OF PESHAWAR
PAKISTAN**

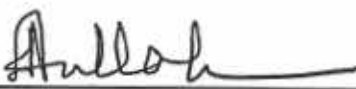
July, 2006

APPROVAL SHEET

A thesis entitled; "An analysis of Governmental and Non-Governmental Rural Development Programmes with particular focus on Rural Women in NWFP" be accepted as partial fulfilling this part of the requirements for the degree of doctor of Philosophy in economics.

Approved by

Prof. Dr. Arbab Ikramullah Khan
Supervisor



Prof. Dr. Muhammad Bashir
Examiner for conduction of
Public Defence



Prof. Dr. Naeem-ur-Rehman Khattak
Chairman



DEPARTMENT OF ECONOMICS
UNIVERSITY OF PESHAWAR
PAKISTAN

ACKNOWLEDGEMENTS

I have no words to express my deepest sense of gratitude to almighty Allah who enabled me to complete this thesis. My special praises to the Holy Prophet Muhammad (PBUH) who is forever a source of guidance for humanity as a whole.

I express my deepest sense of gratitude and profound regards to my supervisor Professor Dr. Arbab Ikram Ullah, Director IBMS/CS, NWFP Agricultural University Peshawar (AUP) whose constant guidance valuable criticism and encouragement made this thesis a success. He helped me a lot in various stages of this thesis. I am greatly indebted to my co-supervisors Prof. Dr. Mir Kalan Shah, Institute of Development Studies (IDS), AUP and Dr. Sheheryar Khan, Associate Professor, Department of Economics, University of Peshawar for their continuous help, encouragement and guidance.

I am extremely thankful to Prof. Dr. Humayun Khan, Director, IDS, AUP for his devoted guidance, valuable criticism and expert comments, which made this thesis a success. I am extremely grateful to Prof. Dr. Muhammad Bashir, Ex Dean, Faculty of Rural Social Sciences; Prof. Dr. Anwar Fazal Chishti, Chairman, Agriculture Economics Department (AUP), Dr. Mohammad Aurangzeb and Mrs. Shahnaz Arifullah, IDS, for their continuous support and inspiration. I would also like to thank my external examiners for their valuable comments and suggestions for improvement.

I extend my heartfelt thanks to Prof. Dr. Naeem-ur-Rehman Khattak, Chairman, Department of Economics, Prof. Dr. Ejaz Majid, Department of Economics, University of Peshawar for providing me all possible help and encouragement. My thanks are also due to all staff members, particularly Mr. Arbab Samiullah and Mr. Sir Biland Khan, Research Investigator, Department of Economics, University of Peshawar for their friendly and cordial treatment. I am also thankful to all my respondents for providing me the required information.

I also offer my sincere thanks to all my colleagues at the IDS especially Mr. Mushtaq Ahmad Jadoon, Miss. Raheela Begum, Mr. Intikhab Alam, Mr. Farid Ullah, Mr. Asad, Mr. Amjad Ali, Mr. Ghayur Danish and Miss Zeenat Jehan for their help and moral support.

This study owes a great deal to many other individuals and organizations. I would like to express my profound gratitude to the staff of Sarhad Rural Support Programme for extending all possible help in the provision of information, material and technical expertise in data collection. I owe a lot to my students for their help in the collection of data. Their names are so numerous that I cannot mention them all for paucity of space but my indebtedness to them is great. I am solely responsible for the errors and omissions in my work.

My love full thanks to my children Shahid, Shandana, Saad Khan and Shehla Khan who are signs of life and happiness for me.

Shaheen Nigar

AN ANALYSIS OF GOVERNMENTAL AND NON GOVERNMENTAL RURAL DEVELOPMENT PROGRAMMES WITH PARTICULAR FOCUS ON RURAL WOMEN IN NWFP

ABSTRACT

The aim of the present study was to examine the services of both government and Non-governmental organizations in North West Frontier Province (NWFP) Pakistan. For this purpose Peshawar of the NWFP was taken as a sample district. Govt. organizations are working throughout the province but NGOs existence is erratic. Their sizes and functions also differ widely. For the purpose of comparison a leading NGO namely Sarhad Rural Support Program (SRSP) was selected. The SRSP has launched its activities in different sectors and is actively involved in developmental works in the area. In addition to the secondary data, primary data were also collected. A total of 210 females' respondents were purposively selected.

The findings of the study show that the people of the area are availing/utilizing the services of both the organizations i.e. government and of the NGO. The government organizations are investing more in the social sector while the NGO stress is on skill development. The government, social sector facilities are for the general public irrespective of the economic status while the NGO's focus is on the poor community. However, both are benefiting the rural masses of the area.

In so far as the social services are concerned the study finds that various social services provided by the government, are sparsely utilized by the women due to various socio-economic reasons. These include family responsibilities, ignorance and cultural taboos. In the health sector a number of factors were found to be responsible for its underutilization. On the one hand, the health services were not easily accessible, poorly equipped and the medicine provided were of sub-standard and on the other hand majority of rural women were poor and they could not afford expenses.

In so far as the family planning services are concerned the poor popularity of family planning services was due to ignorance, non availability of required contraceptives and the influence of local religious leaders who consider that family planning was against norms of Islam. Results of study show that NGO (SRSP) programme are more popular and effective among rural women.

Women community organizations (WCOs) were established by SRSP and had been successfully working in the sample area. The sample women reported that they had been guided and motivated by SRSP staff while establishing WCOs. The WCOs introduce those developmental activities that directly address the needs of the people. To enhance the income of local women, trainings were imparted in tailoring, embroidery, dyeing, poultry farming, fruit processing, bee keeping and Mushroom cultivation. All these activities insignificantly increase the income of the concerned women. However, the income of the dyeing was higher than that of the rest of the stated trainings. These entrepreneurship training encouraged women to start small business. Two levels (Rs. 5000 to 10000 –herein after called level 1- and Rs. 18000 to 20000 herein after called level 2) of credit were provided to communities for this purpose. The credits were mostly utilized for the purchase of livestock and enterprise development. The income effect of level 2 credit was insignificantly higher than that of level 1. Similarly the income effect of enterprises was insignificantly higher than that of livestock. The major effect of the SRSP on gender related economic activities were the contribution of women in total household income. The study showed encouraging results regarding increase in monthly income of the sample respondents, after the intervention of SRSP. The increase in monthly income of the sample respondents resulted in an increase in spending mainly on education and, health. Financial stability made them more confident in decision-making. The study also identified the problem of inadequate amount of credit and lack of marketing facilities, the provision of such facilities will ensure rural women's empowerment and poverty alleviation at grass root level.

Some complaints were also registered by the member of the WCO's regarding the duration of trainings because it was so short especially for the illiterate respondents that they could not take full advantage of these courses.

It was also observed that at present there is little co-ordination between Government and NGO's. It needs to be established and strengthened through mutual consultation, regular meetings and collaboration activities.

The study recommends increased coverage, representation of ethnic groups, need oriented approach, relaxed credit packages, strengthening of co-ordination between the line departments, proper monitoring, improvement in community

infrastructure etc. Beside this special attention should be given to social sector by providing them adequate funds for building and other physical facilities, qualified and well trained teaching and health personnel and also these services be made easily accessible to the rural communities. Marginal success of NGOs working may be taken cautiously because NGO programmes depend on financing of donor agencies. When donor agencies withdraw hands NGOs programmes are in doldrums. -

CONTENTS

Acknowledgments	i
Abstract	iii
List of Tables	xii
List of Figures and Graphs	xviii
Acronyms	xix
CHAPTER 1	1
INTRODUCTION	1
1.1 Village-AID	3
1.2 Basic Democracies	4
1.3 Rural Works Programme	5
1.4 Integrated Rural Development Programme (IRDP)	6
1.5 Rural Development through Local Councils	6
1.6 Social Action Programme (SAP)	8
1.7 Conclusion	10
1.8 Non-Governmental Organizations and Rural Development	11
1.9 Justification of the Study	12
1.10 Objectives	14
1.11 Hypotheses	14
1.12 Organization of the Study	14
CHAPTER 2	17
REVIEW OF LITERATURE	17
2.1 NGOs and Women Development	17
2.2 Women and Gender Development	23
2.3 Social Sector and Women Development	31
2.4 Education and Women Development	40
2.5 Conclusion	43

CHAPTER 3	45
METHODOLOGY.....	45
3.1 Initial Preparation.....	45
3.2 Universe of the Study.....	45
3.3 Selection of Sample Union Councils	46
3.4 Selection of Sample Size.....	46
3.5 Data Collection	46
3.6 Limitation of the Data	47
3.7 Description of the Variables.....	47
3.8 Methods for Data Analysis.....	48
3.8.1 Averages and Percentages	48
3.8.2 Diagrams and graphs	49
3.8.3 T-tést	49
3.8.4 Specification of the model	50
CHAPTER 4	51
SOCIO-ECONOMIC PROFILE OF SAMPLE UNION COUNCILS	51
4.1 Jhagra	51
4.2 Mamu Khatki	52
4.3 Wadpaga.....	53
CHAPTER 5	57
WOMEN AND DEVELOPMENT	57
5.1 Introduction	57
5.2 Women Development, Global View.....	61
5.3 Women Development, Pakistan's Perspective.....	68
5.4 Public Policies and Women's Development in Pakistan	70
5.5 Conclusion	77

CHAPTER 6	79
THE ROLE OF NON-GOVERNMENTAL ORGANIZATIONS IN RURAL DEVELOPMENT	79
6.1 Introduction	79
6.2 NGO'S Working in Pakistan	80
6.2.1 Welfare Oriented NGOs	82
6.2.2 Social Sector Service Delivery NGOs	82
6.2.3 NGO's Engaged in Rural Development in Pakistan.....	83
6.3 National Rural Support Programme	83
6.3.1 Vision and Purpose.....	84
6.3.2 Objectives	85
6.3.3 Strategy and Approach	86
6.3.4 Programme Philosophy	86
6.3.5 Community Participation.....	87
6.3.6 Mainstreaming Gender and Development.....	87
6.3.7 Gender and Development	87
6.4 Balochistan Rural Support Programme (BRSP).....	88
6.5 Punjab Rural Support Program (PRSP)	89
6.6 Sindh Rural Support Organization (SRSO)	89
6.7 NGOs working in NWFP	90
6.7.1 The Agha Khan Rural Support Programme (AKRSP)	91
6.7.1.1. Main Objectives.....	92
6.7.1.2 Programme Components of AKRSP	92
i) Social Organizations	92
ii) Women's Development.....	92
iii) Mountain Infrastructure and Engineering Services	94
iv) Natural Resource Management	94

	v)	Human Resource Development (HRD).....	94
	vi)	Enterprise Development.....	95
	viii)	Information and Reporting.....	95
6.7.4		Sarhad Rural Support Programme (SRSP).....	95
6.7.5		Objectives.....	96
6.7.6		Strategy and Approach.....	96
6.7.7		The Programme Area.....	97
6.7.8		Major Programme Components of SRSP	97
	6.7.8.1	Social Mobilization	97
	6.7.8.2	Physical Infrastructure, water and environmental sanitation	98
	6.7.8.3	Credit and Enterprise Development.....	99
	6.7.8.4	Natural Resource Management.....	100
	6.7.8.6	Human Resource Development	100
	6.7.8.7	Planning Monitoring Evaluation and Research	101
	6.7.8.8	SRSP's Gender Programme	101
	6.7.8.9	Social Sector Development	103
		6.7.8.9.1 Education	103
		6.7.8.9.2 Training Programmes by SRSP	104
		6.7.8.9.3 Skill Development.....	105
		6.7.8.9.4 Health.....	105
		6.7.8.9.5 Community Health Awareness	105
		6.7.8.9.6 Training of Health Workers.....	105
		6.7.8.9.7 Linkages with Health Agencies	107
6.8		Sungi Foundation.....	110
	6.8.1	Sungi Programme Area Profile.....	110

6.8.2	Core Programmes	110
6.8.3	Support Programmes	111
6.8.4	Organizational Development	111
6.8.5	Gender and Development	111
6.8.6	Health and sanitation	112
6.9	NGO's Engaged in Women Development.....	113
6.10	Aurat Foundation	113
6.10.1	Mechanisms to achieve its objectives	114
6.10.2	Women Development Activities	114
6.10.3	All Women Advancement and Resource Development	115
6.10.4	Aims and Objectives.....	115
6.10.5	Activities and Achievements	116
6.10.6	Activities for Poverty Alleviation	117
6.10.7	Activities in the Health Sector	117
	6.10.7.1 Reproductive Health: HIV/AIDS Awareness Programme.....	117
	6.10.7.2 Assistance / Technical Support to the EPI Department NWFP.....	117
	6.10.7.2 Community Forum	118
6.11	Activities in the Education Sector	118
6.11.1	Special Project.....	118
6.11.2	Community Awareness Campaign for the National Census	119
6.11.3	Training Programmes	119
6.11.4	Audio- Visual Communication and Training Material Development	119
6.12	De Las Gul Welfare Program (DLG).....	120

6.12.1	Aims and Objectives.....	120
6.12.2	Micro-Enterprises Unit.....	120
6.12.3	Activities in the Health Sector.....	121
6.12.4	Activities in the Education and Training Sector.....	121
6.12.5	Community Based Girls Schools.....	121
6.12.6	Human Resource Development.....	121
6.12.7	Current Activities of DLG Towards Poverty Alleviation.....	121
6.12.8	Self-Financed Literacy Project.....	121
6.12.9	Primary Education Program (PEP).....	122
6.12.10	ILO Sponsored Project.....	122
6.12.11	Khwendo-Kor.....	122
6.12.12	Aims and Objectives.....	123
6.12.13	Activities and Achievements.....	123
	6.12.13.1 Saving Credit and Income Generation Activities.....	123
	6.12.13.2 Credit Programs.....	123
6.12.14	Family Planning.....	124
6.12.15	Primary Health Care.....	124
6.12.16	Current Activities.....	124
6.13	Conclusion.....	124
CHAPTER 7.....		126
SOCIAL SECTOR DEVELOPMENT IN PAKISTAN.....		126
7.1	Introduction.....	126
7.2	Health Sector Development.....	126
	7.2.1 Health Indicators.....	127
	7.2.2 Health facilities provided by public sector.....	129

7.2.3	Population Welfare Programme.....	131
7.2.4	Public Expenditure for Health Sector Development.....	134
7.3	Education Sector Development	135
7.3.1	Public Expenditure for Education Sector Development	139
7.4	NGOs/Private Sector Health Service Delivery	140
7.5	Conclusion.....	143
CHAPTER 8	146
	RESULTS AND DISCUSSIONS	146
8.1	Socio Economic Characteristics of the Sample Respondents.....	146
8.1.1	Age Groups	146
8.1.2	Literacy status/ level of sample respondents	147
8.1.3	Marital and employment status	148
8.1.4	Occupational Distribution of Sample Households.....	149
8.1.5	Family Composition and Average Household Size	151
8.1.6	Literacy Status of Households' Members	152
8.1.7	Housing Characteristics	153
8.2	Empirical Evidence About SRSP Interventions	154
8.2.1	Formation of Women Organizations.....	155
8.2.2	Representation of Ethnic Groups in WCO	156
8.2.3	Reasons for Joining Women Organization.....	157
8.2.4	Knowledge about SRSP's Interventions	158
8.3	Human Resource Development	159
8.3.1	Duration of Training Courses	161
8.3.2	Benefits gained from Skill Enhancement.....	162
8.3.3	Increase in Monthly Income after Skill Enhancement....	163
8.3.3.1	Increase in Income after Training.....	164

8.3.4	Contact of Social Organizer with Women Organizations	165
8.4	Micro Credit and Enterprise Development	166
8.4.1	The SRSP'S Credit Programme Aims at.....	167
8.4.2	Sources of information about SRSP's Credit	167
8.4.3	Purpose of Obtaining and Utilization of Credit.....	168
8.4.4	Amount of Credit Obtained	170
8.4.5	Sufficiency of Credit Obtained from SRSP.....	170
8.4.6	Recommended Amount of Credit by Respondents.....	171
8.4.7	Repayment of Loan	172
8.4.8	Problems in Obtaining Credit	173
8.4.9	Reasons for Obtaining Credit from SRSP	174
8.4.10	Impact of Credit on Household Economy	175
	8.4.10.1 Impact on Income	175
	8.4.10.2 Impact on Expenditure.....	176
	8.4.10.3 Increase in Income after getting Credit facility.....	177
8.4.11	Problem in Running Enterprise.....	178
8.5	Empirical Evidence about Social Sector Development	180
8.5.1	Health and Family Planning	180
8.5.1.1	Women and Health:.....	180
8.5.2	Utilization of Health Services by Sample Respondents in the Project Area	182
8.5.3	Visit of Lady Health Worker to Sample Villages.....	184
8.5.4	Services Provided by Lady Health Worker to Sample Respondents.....	185

8.5.5	Satisfaction of Respondents with Regard to Existing Health Facilities in the Project Area	187
8.5.6	Family planning.....	188
8.5.6.1	Visit of sample respondents to health care to avail family planning services	188
8.5.6.2	Satisfaction of Respondents with Available Family planning Services:	191
8.5.6.3	Suggestions for improvement of family planning services.....	192
8.6.	Education of Women	194
8.6.1	Utilization of Educational Facilities by Sample Respondents in the Project Area	194
8.6.2	Suggestions of Sample Respondents for the Improvement of Educational Facilities in the Project Area.....	200
8.7	Perception of Respondents about Governmental and Non Governmental Organizations Developmental Programme in the Project Area	201
8.8	Coordination Between Government and Non Governmental Organizations	204
CHAPTER 9		213
SUMMARY CONCLUSIONS AND RECOMMENDATIONS.....		213
9.1	Summary	213
9.2	Conclusion.....	217
9.3	Recommendations.....	218
9.3.1	Non Governmental Organizations.....	218
9.3.2	Government.....	219

9.3.2.1	Education.....	219
9.3.2.2	HEALTH.....	219
9.3.2.2.1	Family Planning.....	223
REFERENCES.....		224
ANNEXURE 1.....		239
	QUESTIONNAIRE.....	239
ANNEXURE 2.....		245

LIST OF TABLES

Table No.	Title.....	Page No.
3.1:	Total WCOs their membership and Sample respondents	67
4.1:	Household's Profile of Jhagra.....	73
4.2:	Economy of Jhagra	73
4.3:	Household's Profile of Mamu Khatki.....	74
4.4:	Economy of Mamu Khatki.....	74
4.5:	Household's profile of Wadpaga	75
4.6:	Economy of Wad Paga.....	75
4.7:	Key Statistics of Sample Union Councils.....	76
7.1:	Health Indicators Of Pakistan	149
7.2:	Health Facilities Provided by Public Sector	151
7.3:	Manpower engaged in Health Sector.....	152
7.4:	Province -wise break up of RHS-B centers.....	154
7.5:	Health And Nutritional Expenditure.....	156
7.6:	Education Indicators of Pakistan	157
7.7:	Education Indicators of South/East Asian countries.....	159
7.8:	Allocation for Education as of GDP Comparison with other Countries.....	161
7.9:	Private Sector AND NGO Health Facilities	164
8.1:	Distribution of the Respondents According to there age Groups	167
8.2:	Distribution of Sample Respondents by Literacy Status and Literacy Level.....	169
8.3:	Distribution of Respondents According to Marital and Employment Status	170
8.4:	Distribution of Sample Households by Occupational Groups.....	171
8.5:	Distribution of the Sample Respondents by Family Composition and Average Size of the Household	173
8.6:	Distribution of Respondents Households Members According to Literacy Status and Literacy Levels.....	174
8.7:	Percentage Distribution of the Sample Respondents According to the type of House and Available Facilities	175
8.8:	Distribution of Respondents According To Joining Year of Women Organization.....	178

8.9:	Distribution of Respondents According to Representation of ethnic Groups.....	179
8.10:	Distribution of Respondents by Reasons for Joining of Women Organization.....	180
8.11:	Distribution of Respondents by Knowledge about SRSP's Interventions.....	181
8.11-B:	Distribution of the Respondent According to Interventions Based on Women Needs.....	181
8.12:	Distribution of Respondents According to Trainings Received.....	183
8.13:	Distribution of respondents According to Satisfaction and Dissatisfaction about Duration of Trainings.....	184
8.14:	Distribution of Respondents According to Benefits Received from Trainings Imparted by SRSP.....	185
8.15:	Distribution of Respondents According to Increase in Monthly Income after Training.....	186
8.16:	Distribution of Respondents According to SRSP Contact with Women Organizations.....	188
8.17:	Distribution of the Respondents According to the Sources of Information about SRSP Credit Programme.....	190
8.18:	Distribution of the Sample Respondents According to the Purpose of Loan.....	191
8.19:	Distribution of the Respondents According to the Amount of Credit Obtained.....	192
8.20:	Distribution of Respondents Reporting About the Amount of Credit Sufficient for Running Enterprise.....	193
8.21:	Distribution of the Respondents, According to the Recommended Amount of Credit.....	194
8.22:	Distribution of the Sample Respondents According to Satisfaction from the Repayment System.....	195
8.23:	Distribution of the Sample Respondents According to the Difficulty in Getting Credit.....	196
8.24:	Distribution of the Sample Respondents, According to their Preferences for Obtaining Micro Credit.....	197
8.25:	Average Monthly Income of the Sample Households Before and After Utilization of Credit.....	198

8.26:	Distribution of the Respondents According to the Problem Faced While Running Business	201
8.27:	Distribution of Respondents According to Distance from Health Care Facilities	204
8.28:	Distribution of Respondents According to Utilization of Health Facilities	205
8.29:	Distribution of Respondents According to the Visit of Family Health Worker to Sample Villages	207
8.30:	Distribution of Respondents According to Health Service Provided by Lady Health Worker	208
8.31:	Satisfaction and Dissatisfaction of Respondents with Regard to Existing Health Facilities in the Project Area.....	209
8.32:	Distribution of Respondents According to Visit to Family Planning Center.....	211
8.33:	Distribution of Respondents by Family Planning Services Availed.....	212
8.34:	Distribution of Respondents According to Satisfaction with Existing Family Planning Facilities.....	214
8.35:	Distribution of Respondents According to Suggestions for Improvement of Family Planning Services.....	215
8.36:	Distribution of Respondents by Sending their Female Children to School	217
8.37:	Distribution of Respondents According to Distance of School from Home.....	219
8.38:	Distribution of Respondents by Types of Problems Faced while Sending their Female Children to School	219
8.39:	Distribution of Respondents According to Satisfaction with the Existing Educational Facilities.....	220
8.40:	Additional Facilities Suggested by the Respondents for the Improvement of Educational Facilities.....	221
8.41:	Perception of Respondents About Government and NGOs Developmental Programmes.....	224
8.42:	Agreement between District Government and SRSP	231
8.43:	Key Features of Government and NGOS Programmes	233

LIST OF FIGURES/GRAPHS

Fig No.	Title.....	Page No.
1:	Literacy level of the sample respondents.....	169
2:	Main occupation of sample respondents of Wadpaga	171
3:	Main occupation of sample respondents of Mamu Khatki	172
4:	Main occupation of sample respondents of Jhagra	172
5:	Type of houses and available facilities in the sample household	175
6:	Problems faced by the respondents while running business in the sample project area.....	201
7:	Health services provided by the health workers to the sample respondents	208
8:	Satisfaction and dissatisfaction of sample respondents with regard to existing health facilities	210
9:	Family planning services availed by the sample respondents	212
10:	Satisfaction and dissatisfaction of sample respondents with regard to existing health facilities	214
11:	Distribution of respondents by sending their female children to school.....	218

ACRONYMS

ACIS	All Children in School
ADB	Asian Development Bank
ADP	Annual Development Plan
AKF	Agha Khan Foundation
AKRSP	Agha Khan Rural Support Programme
AUP	Agricultural University Peshawar
AWARD	All Women Advancement and Resource Development
BDS	Basic Democracies
BHUs	Basic Health Units
BRSP	Baluchistan Rural Support Programme
CBD	Community Based Distribution
CBO	Community Based Organization
CBR	Crude Birth Rate
CDR	Crude Death Rate
CHWs	Community Health Workers
CO	Community Organization
CPIS	Community Physical Infrastructure
CPR	Contraceptive Prevalence Rate
CS	Contraceptive Surgery
DEPs	District Education Plans
DFID	Department for International Development
DHQ	District Head Quarter
DHS	Data of Household Survey
DIG	De Las Gul
EC	Emergency Contraceptive
ECP	Emergency Contraceptive Pills
EEA	Education for all
EPA	Environmental Protection Agency
EPI	Expanded Programme of Immunization
FHWs	Female Health Workers
FPAP	Family Planning Association of Pakistan
FWC	Family Welfare Centre
GAD	Gender and Development
GDP	Gross Domestic Product
GR	Growth Rate

H and S	Health and Sanitation
ILO	International Labor Organization
IMF	International Monetary Fund
IMR	Infant Mortality Rate
IRDP	Integrated Rural Development Programme
IRR	Internal Rate of Return
IUCN	International Union for Conservation of Nature
KAP	Knowledge Attitude and Procedure
KK	Khwendo Kor
KRHP	Karachi Reproductive Health Project
LFL	Learning for Life
LGI	Local Government Institution
MCH	Mother and Child Health
MCOs	Man Community Organization
MHWs	Male Health Workers
MMR	Maternal Mortality Rate
MOHFW	Ministry of Health and Family Welfare
MSUs	Mobile Service Units
NATPOW	National Trust for Population welfare
NEFs	National Formal Education
NGOCC	Non Government Organization Co-ordination Council
NGORC	Non Governmental Organization Resource Center
NGOs	Non Governmental Organization
NHWs	National Health Worker
NOVIB	Netherlands Organization for International Development Corporation
NPV	Net Present Value
NRSP	National Rural Support Programme
NWFP	North West Frontier Province
OPP	Orangi Pilot Project
PDP	Participatory Development Programme
PIC	Project Implementation Committee
PLD	Provincial Line Department
PPAF	Pakistan Poverty Alleviation Fund
PRSP	Punjab Rural Support Organization
PTAs	Pakistan Teachers Association
PWP	Population Welfare Programme

RHCs	Rural Health Centre
RHS	Reproductive Health Service
RSPs	Rural Support Programmes
RWP	Rural Works Programme
RWSS	Rural Water Supply and Sanitation
SAP	Social Action Programme
SDPs	School Development Project
SES	Socio Economic Stratum
SOs	Social Organizors
SPO	Strengthening Participatory Organization
SPDC	Social Policy and Development Centre
SRSO	Sind Rural Support Organization
SRSP	Sarhad Rural Support Progamme
SWETA	Sarhad Women Exporter and Trader Association
TBAs	Traditional Birth Attendants
TFR	Total Fertility Rate
THQ	Tehsil Head Quarter
TVO	Trust for Voluntary Organization
UCs	Union Councils
UNCIF	United Nation's Children Education Fund
UOP	University of Peshawar
V/WOS	Village and Women Organizations
Village AID	Village Agricultural and Industrial Development
WCOs	Women Community Organization
WHO	World Health Organization
WID	Women in Development
WO	Women Organization
WWF	World Wild Life

CHAPTER 1

INTRODUCTION

The term 'development' means different things to different people. According to Todaro (1997) it may be conceived of as the process of improving the quality of all human lives. It encompasses better education, higher standard of health and nutrition, less poverty, a cleaner environment, more equality of opportunity, greater individual freedom, and a richer cultural life. Thus, development must, therefore, be perceived as a multidimensional process involving major changes in social structures, popular attitudes, and national institutions, as well as the acceleration of economic growth, the reduction of inequality and the eradication of poverty. Whatever may be the definition or meaning of development, it should have at least three core values or components that is sustenance, self-esteem and freedom from servitude.

The first aspect of development implies to raise the people's standard of living, their incomes and consumption levels of food, medical services and education, etc. through relevant economic growth processes. The second core value of the development is self-esteem. This aspect of development stresses upon creating conditions conducive to the growth of self-esteem, through the establishment of social, political and economic systems and institutions that promotes human dignity and respect. The third universal component of the development is human freedom. Freedom here means emancipation from alienating material conditions of life and from social servitude to nature, ignorance, other people, misery, institutions and dogmatic beliefs. It involves an expanded range of choices for societies and their members together with a minimization of external constraints in the pursuit of some social goal.

Matrayee Mukhopadyay (1984) states, development is no longer being measured in terms of a country's economic growth as this is not necessarily an indicator of a decreases in the exploitation of one section of a society by another thus, it is not "development" if the wealthiest section of a society gets richer while the poorest becomes more impoverished, whatever happens to GNP. Nor is it "development" if all power, authority and decision making continue to be invested in the hands of one group to the total exclusion of other whether the all powerful group is an economic class (rich landlords for example), or a sex (men). To mean say thing

“development” must imply a process where poverty, discrimination and exploitation and all being eradicated. As Maitrayee states: “The most Crucial aim of development should be the creation of non exploitative society based on egalitarian values where each individual have access to those resources which will enable them to realize their full potential”.

Uday Kumar (2005), defined that development should ensure life with dignity to one and all on the globe. It should respond to the needs of all before it thinks of the greed of the people from south. There can never be real development unless we listen to the inner voice within one self. Man is as irrational as (s)he is rational. Therefore, the wisdom lies in uncovering the rationality of irrationality and irrationality of rationalism.

Development in general and rural development in particular is very important, especially for the developing countries. According to World Bank, (1975) rural development is “... a strategy designed to improve the economic and social life of a specific group of peoples the rural people”. The term rural development is broader and more specific than agricultural development. It is broader because it entails much more than the development of agricultural production – for it is in fact a distinct approach to the development of the economy as a whole. It is more specific in the sense that it focuses particularly on poverty and inequality.

Basic needs of rural people cannot be met without adequate participation of rural people in planning and development according to their own priorities. Rural development, therefore presents a colossal challenge. It requires changes in age old attitudes and requires creative enthusiasm along with a strong sense of responsibility, In the rural development drama, all actors i.e. government departments, international agencies and non-governmental organizations (NGOs) are playing their respective roles to create the desired impact on the quality of life of the rural poor specially rural women.

The development of human resources is an indispensable component of social and economic development. The full development potential of a nation can never be achieved if its human resource is not effectively harnessed. It is now a widely accepted reality that effective utilization of a country's, human resource requires that all social groups share equally in the development efforts and in the distribution of

benefits. The exclusion of any one group from equal participation – especially the women who comprises half of the population – represents a drastic loss of human potential – while the important role that women play in development process is gradually being recognized by the Government.

Since its inception in 1947 Pakistan has tried many socio-economic development programmes. Initially the developmental programmes were general in nature with no special emphasis on women. Over the last two decades, with the popularity of participatory approach, several programmes have special component for women in development. Moreover, since the early 1980s many NGOs have mushroomed up with a mandate for socio-economic development and poverty alleviation. NGOs generally follow the participatory approach for development and believe in the participation of women in the socio-economic activities. For exploiting the country's resource potential, and the numerous problems confronting it, the Government of Pakistan launches rural development programmes from time to time. The NGOs are equally sharing this responsibility with the Government and are working side by side with the Government for the last two and half decades. Different rural development programmes tried in the past by public sector are as under:

1.1 Village-AID

First regular socio-economic development program launched in the country was Village-Aid Program. This program was launched in 1953. This program was general in nature with no special focus on women. Its basic concept was to provide means by which technical and financial assistance from the government could be reinforced through tapping available skills, manpower and money in the villages. Main objectives of the program were:

- To raise rapidly the output and income of the villagers through better methods of farming and the expansion of cottage industries;
- To create a spirit of self-help, initiative and cooperation among the villagers – a spirit that can be the basis for continuing economic, social and political progress;
- To expand the community services available in the rural areas, such as schools, health centers, and potable water supply; and

- To create conditions for a richer and higher life through social activities, including recreation for women.

Village AID was the first comprehensive, multi-sectoral and multipurpose programme of rural development aimed to bring about a synthesis of all rural development efforts at the local level. It was also the first programme, which extended organizational rugs to the heart of rural areas, particularly the activities for rural women. The programme also aroused enthusiastic participation by the villagers during its operations.

The programme suffered from serious limitations and weaknesses associated within the village AID itself. Firstly, the ad-hoc nature of Village AID organizations adversely affected the morale of personnel within the organization. Secondly, it was based on assumed "overestimated" managerial capabilities of multipurpose village level workers. Thirdly, the latter were not properly trained. Fourthly, the village AID organization, in the course of time, had claimed all credit for the work done, which would not have been possible without the active support of other developmental agencies. Fifthly, it lacked a proper scheme of monitoring and evaluation. Finally and in general, village councils were not broad based in terms of community participation. Owing to these limitations, the programme failed to develop a socio-political environment, which could lend support for its continuation. It was ultimately wound up in 1961. (Karl 1986)

1.2 Basic Democracies

The Basic Democracy System (BDS) was introduced in 1959. It established a four-tier hierarchical system of local councils throughout the countryside, namely: Union Council (rural) or Town Committee (urban), Tehsil Council, District Council, and Divisional Council. The BDS presented an institutional framework for involving the people in social, economic and political development. The system provided a network of local institutions throughout the country. It was well integrated and comprehensive as compared to the previous system. These councils were entrusted with wide ranging civic, developmental, social, judicial, administrative and even political functions. Large amounts of funds were made available for rural development for the first time in the history of Pakistan.

The BDS faced some crucial problems. In the first instance, it lacked sympathy of the political parties at the national level because of its Electoral College role. The political parties and educated sections of the society did not accept the system in its totality because the scheme of local government was assigned the role of kingmakers. Secondly, the scheme suffered from some built-in structural contradictions. It was based on a rigid hierarchical structure. The element of official chairmanship and of nominations at all-important level resulted in the failure of real decentralization of the development process. Moreover, corruption and allocation of funds in the shape of political bribery weakened the confidence of the rural masses, and the system gradually lost the support of the society.

1.3 Rural Works Programme

The Rural Works Programme (RWP) was launched in 1962/63 with the objective to fulfill small rural physical infra-structure needs, to provide gainful employment on labour intensive and productive projects, and to make full use of local resources and leadership. The programme, in its first instance, was linked with the BDS. The formulation, execution and supervision of the projects were entrusted to the local councils. The Union Councilors identified the needs of the people, presented the findings to the Union Council, which, after approval, included it in the annual development programme and sent it for approval and allocation of funds to higher levels. After dissolution of the BDS, the programme was named People's Works Programme in 1972 and extended to urban areas as well, with more or less similar objectives. Since the late 1970's it has been re-named Rural Works Programme.

The RWP suffered from a number of limitations and weaknesses. The RWP programme could not meaningfully involve the villagers in planning and implementation of rural projects. This was partly because of low technical and administrative capacities of local councils and, still more so, owing to the official domination inherent in the structure of the BDS. An important factor working behind the scene was the government directive to weigh the performance of the Deputy Commissioners in terms of the amounts spent under the RWP in their respective districts. Thus, the "By - Pass Reverse Process" of Channeling investment through the government agencies discouraged the development of local capacities in project planning and implementation at the grass roots level.

1.4 Integrated Rural Development Programme (IRDP)

The integrated rural development program began in Pakistan on August 2, 1971 with the creation of the Shadab experimental pilot project in Chung, a village about 13 miles southwest of Lahore in Punjab province. More than 50 villages were selected, mostly with small and medium size farms, to improve their socio-economic status by intensive rural development efforts. In less than six months, the Shadab Project was declared a great success, which significantly influences the implementation of the IRDP in the whole of Pakistan.

The IRDP experienced a number of problems during the implementation process as well. Firstly, the programme suffered from delays in financial commitments, which disturbed the phase wise implementation of the programme. Secondly, most of the departments did not depute their representatives to the IRDP markaz, which undermined the process of administrative decentralization at the local level. The programme could not establish an effective mechanism for horizontal coordination among the various line departments for lack of firm support at the upper echelons. Thirdly, the local government institutions were not established during the programme period, which could have brought a firm political support for the programme in the long run. Finally, IRDP presented a philosophy of rural development, which was mainly based on local capabilities and mass motivation for massive productive efforts. Generally speaking, the IRDP could not succeed in establishing the required inventory of project personnel, which distorted the faithful implementation of the programme.

1.5 Rural Development through Local Councils

During the period 1978-83 the task of rural development was mainly entrusted to the local councils. IRDP and RWP were merged under the name of "Rural Development" with the following objectives:

- To meaningfully integrate rural development with the national social-economic development effort:
- To reduce the burden of underemployment:
- To increase the density and intensity of services provided to agricultural and other rural activities:
- To improve rural infrastructure:

- To make a beginning towards providing social amenities to target groups; and
- To create an institutional framework for ensuring community participation in the implementation of the rural development programme.

The experience of rural development through local councils was quite encouraging, in terms of popular participation in planning and implementation of projects at the local level. This process has encouraged the emergence of rural leadership, which has facilitated the process of two-way communication between the bureaucracy and the rural people. It has aroused a sense of participation by involving the villagers in government-sponsored programmes. Great enthusiasm was witnessed among villagers during local bodies elections held in 1983, depicting activation of the democratic process at the grassroots level.

As a whole, the programme has achieved a fair degree of success. However, the programme lacked the following. Firstly, there is a strong need for the decentralization of services and facilities offered by the government agencies, as the local structure has to expand to close proximity of the rural population. Secondly, the activities of the Union Councils and District Councils have to be properly coordinated among themselves as well as with the nation building departments. Under present arrangements, no formal coordination arrangements exist between the two tiers. Thirdly, there is a strong need for strengthening the developmental role of local councils by delegating to them powers for effective functioning of the government organizations at the local level. Finally, there is a need to build the capacity of local councils, particularly Union council, in terms of finances, projects planning and implementation so as to develop it as a viable institution of rural development at the grassroots level. The experience of the past few years has indicated that Union Councils have been mostly depending either on the District Councils or on government department for most of their financial and technical requirements. This process undermines the creation of an independent institution for local level planning and implementation. Hence, the institution of Union Council needs attention so as to improve and expand their financial, technical and planning capabilities to effectively undertake rural development work.

1.6 Social Action Programme (SAP)

The Social action programme (SAP) was initially launched in 1992-93 for a period of three years and latter on extended up to 1998. SAP is an integrated multicultural programme involving primary education, primary health, nutrition, family planning and rural water supply and sanitation. The strategy of the programme focuses coverage level and on improving the quality of services delivery through sustained increases in sectoral expenditures accompanied by specific policy measures in each area of its coverage. Strategies adopted in each core area of SAP include Basic Education, Primary Health, Rural Water Supply and Sanitation (RWSS), and Population Welfare.

During SAP-I, the government launched a pilot community development program namely Participatory Development program (PDP) to deliver social sector services through partnerships that included the government, the private sector (represented by NGOs) and the beneficiary communities. The objective was to involve communities in identifying their needs, sharing decisions and managing service delivery under the PDP. Twenty-eight NGOs (and 30 projects) from across the country have been selected and funded under the program. The PDP funds projects in all three main sectors. Projects were distributed as follows: education – 60%, water – 30%; and health – 40%. (Percentages add to more 100% because some projects cover more than one sector (SPDC 1998).

The PDP has wisely responded to monitoring requirements by setting up a monitoring capability through a private sector firm. Which is introducing a self-monitoring capability into the NGOs. However, this falls far short of the required capacity building in the NGOs and CBOs.

Having succeeded at small-scale projects, many NGOs have trouble dealing with larger projects and become diverted from their principal mission. Most international donors are sensitive and able to tailor their funding to the needs and capacities of NGOs. PDP also needs to develop this sensitivity and in-house capacity. PDP funds are usually provided for two years with no guarantee of funding for the two subsequent years. NGOs tend to become heavily dependent on large funding (relative to their capacity). When the funding stops, so do their programs.

The main difficulty facing an expanded PDP is the limited capacity of most NGOs to managed large projects. This is not to say that the proposed funding should be reduced. Rather, greater attention and resources should be focused on building capacity within NGOs. It will require a large investment in funding, human resources, and time to boost the ability of NGOs to make a substantial contribution to the social sector. Unfortunately, the government lacks the experience and expertise needed to build this NGO capacity.

Despite the introduction of important policies, such as decentralization and community participation, SAP largely failed to change institutional structures and administrative procedures. It also lacked essential sector information and a rational basis for prioritizing and executing projects. Indeed, the only sector specific information available was maintained by line departments in a fragmented, incomplete and unreliable form. Efforts were made to create databases such as the Education Management Information system (EMIS) and the Health Management Information System (HMIS) etc but these were not used appropriately.

However, SAP did succeed in having a direct and positive impact on federal and provincial resources. Foreign aid was used to finance 50% of the earmarked allocations for social development. These funds were transferred to the provincial governments as loans, augmenting provincial resources. The earmarking of funds resulted in higher social sector expenditures, as well as higher inputs and outputs. At the same time, though, SAP also increased the short-run and long run budget deficits of the federal and provincial governments. It now appears that SAP is not financially sustainable and will significantly worsen the fiscal position of both the federal and provincial governments in the future.

All the above mentioned rural development programmes had some component for women development. But their main focus was on general development of the rural masses. However, during the last two decades the importance of gender development has been realized by the government and more funds had been allocated for this segment of the society. In addition to the social sector services for women development the Government also stresses on the empowerment of women. The successive Governments gave high importance to the improvement in status and living standards of women. Committed to an agenda of social change, human

resources development and empowerment of women, the government urgently set about to address issues influencing women's status. As a first step in this direction, the national Consultative Committee was formed in December 1993. The most prominent aspects of the committee's agenda include the restoration of reserved women seats in the parliament and the prevention of violence against women.

Another major initiative undertaken by the government was the formation of the commission of enquiry for women in October 1994 comprising senior Judges and eminent lawyers and scholars to review all the existing laws, which are discriminatory to women or affect their rights as equal citizens.

1.7 Conclusion

Rural development programmes in Pakistan have, for all intents and purposes, so far been evolutionary and reformist in nature, improving productivity particularly in agriculture, and maintaining solidarity. The few specific programmes have also been unique in one or another aspect. For example, Village AID was the first programme which extended its organizational rungs to the heart of the rural area through the Village AID workers, and more particularly, by incorporating the component of women development activities performed by female workers, perhaps only second to the female primary school teachers. Similarly, Basic Democracy directly engaged the rural people, for the first time, in the process of development and in decision-making at the local level within their own setting, thereby knitting the village into the national political system. The RWP has continued as an input component of rural development programmes since its inception in 1962/63. It has also stayed with three consecutive regimes. Likewise, IRDP placed greater emphasis on broad-based participation of the people in developmental activities, along with administrative decentralization. Rural development through local councils since 1997 has focused on the integration of all efforts at the district and lower levels for bottom-up planning and management of development.

Time and again, the sequence of rural development efforts in Pakistan has taken different form and shapes. The programmes have varied in their philosophy, scope, coverage, organizational structure, approach and operational methods. The degrees of their success and failure have also varied. These programmes did make some headway but with marginal impact on the target population.

1.8 Non-Governmental Organizations and Rural Development

The role of NGOs has grown and evolved in the years since independence. Mainly charitable and philanthropic organizations in the 1950s NGOs became more involved in community-based initiatives. Over the last decade or so, organizations have emerged that strive to mobilize targeted communities for social and economic development. Most NGOs are supported by community contributions, local donors, and governmental funds. In recent years, support from international donors has also become available.

In 1991 the United Nations development programme compiled a list of 4,833 NGOs (56% of which were in Punjab and 36% in Sindh and the rest in NWFP and Baluchistan). In 1994 a TVO Study updated this information base to include all NGOs registered under the Companies Ordinance of 1984, the societies Registration Act of 1860, and the Voluntary Social Welfare Ordinance of 1961. The study identified 8,547 NGOs. After religious organizations, professional and commercial associations, employee unions, housing societies, clubs, clinics and hospitals were excluded, 4,545 organizations remained (Social Policy and Development in Pakistan 1998).

The details of major NGOs including AKRSP, NRSP, SRSP, BRSP, etc; working for rural development is given in a separate chapter. However we classify these here on the basis of their functions. There are three main types of NGOs working in the area of agriculture and rural development. The first are the national level capacity building and/or funding organizations. These include the trust for Voluntary Organizations (TVO), Strengthening Participatory Organizations (SPO) and the NGO Resource Center (NGORC). The second are the implementing support organizations such as Sungi Foundation and Patton. These work directly with community-based organizations in specific regions, helping them to shift from welfare orientation to participatory development, and supporting their development project.

The third type are the Rural Support Programs (RSPs) that have followed the model of the Agha Khan rural Support Project in forming village or community organizations, prominent examples are the National Rural Support Program, the Sarhad Rural support corporation, the Baluchistan Rural Support Program, the Pak

German integrated Rural Development program in Mardan, the Pak Swiss Kalam Integrated Development Project and the social Forestry Project in Swat.

The RSP Network has 16 members working with more than 4,500 village organizations across the country. These RSP's do not follow a specific model and are open to working with existing community organizations. In urban areas, the Orangi Pilot Project and Basti in Karachi, Anjuman Barai Taleem and the Society for the Advancement of Education in Lahore, and the Adult Basic Education Society in Gujranwala are among the main NGOs working in the Education, health and sanitation sectors.

The rural support programs are general in nature in which women have not received proper attention and no significant step has been taken to involve them in developmental programs even though they could have been the most suitable candidates. There is a lack of gender experience and expertise among government policy makers and staff, and gender awareness and skill is vital for rural development policy makers, professionals and practitioner. In the professional field women are deprived of decision-making power even in the formal sector, where most women are employed at the lower levels as women hardly make it to the management and administrative levels. Despite the increase in female participation rates in agriculture and related sectors, they are neither accommodated, nor are there any programmes in training, technology transfer, credit and other HRD planned for them which are based on their articulated needs.

1.9 Justification of the Study

Women are half of Pakistan's valuable human resource. We cannot aspire to achieve development unless we take steps to develop this half of the resources. A disproportionate number of women live below poverty line. They are confronted with multitude of problems including lack of education, malnutrition, ill health and lack of income generating opportunities. They work very hard but due to the invisible nature of their work, it goes unnoticed, unrecognized and unrewarded. They are considered as passive recipients rather than contributors and strong social norms exclude them from being capable of taking part in economic activities.

There is a gender bias, which arises from the irrational assumption that women cannot do as men at the administrative and policy-making levels. The situation of women in Pakistan leaves much to be desired. Inequalities of gender continue to be high in terms of access to education, health, employment, credit etc. women's participation in the modern high productivity sector also continues, to be very limited. Similarly their representation in the Federal Civil Service, various professions and large-scale industry is highly inadequate.

The NWFP is a comparatively less developed province has a population of 18.00 million out of which 8.6 million were women. Of the total population of the province 83% are rural women, which are the highest percentage among the Provinces. In the province the female literacy rate was only 18.8% as against 51.4% for males. The female labour force participation rate was reported as 1.1% as against 36.8% for males, while unemployment rate for females was 2.6% as against 27.5% for males. (NWFP District Census Report, 1998).

Till the mid 1990s, most of the government launched socio-economic development programs were general in nature. There was seldom any focus or special reference for women. Many NGOs since the early 1980s have initiated special attention for women in development. Special sections and cells have been established within several NGOs for women involvement and empowerment over the past two decades due to conditionalities of donor agencies. Several government projects have been designed on participatory approaches with special component for women. Since then government and NGOs programs are running side-by-side. There is need to analyze and evaluate these programs to compare the effectiveness of government programs vis-à-vis NGOs programs. This study is directed towards analysis of governmental and non-governmental rural development programs with particular focus on rural women in NWFP. This will not only help the policy maker who design policies for gender development but also guide other NGOs and private sector organizations who are spending handsome amount for raising the living standard of rural people particularly the rural women. The study under reference is an attempt to this and with the following objectives.

1.10 Objectives

The major objectives of the study are given as under:

1. To assess the role of governmental and non-governmental rural development programmes for the welfare of rural women.
2. To examine participation of rural women's in various rural development programmes.
3. To study coordination between governmental and non-governmental organizations regarding rural development programmes in general and rural women in particular.
4. To identify areas/needs of urgent attention for the development of rural women.
5. To recommend measures for the welfare of rural women for their inclusion in rural development programmes.

1.11 Hypotheses

1. Women tend to be considered as passive objects rather than as participants in the development process.
2. There is lack of co-ordination between governmental and non-governmental organization's rural development programmes related to women.

1.12 Organization of the Study

The present study is divided into 9 chapters. Chapter 1 covers the introduction, different rural development programmes launched by the Government and NGOs, justification, objectives and hypotheses of the study. The review of relevant literature is presented in chapter 2. The main concern of the studies thus reviewed is closely related to the main theme of the study. The research methodology adopted for the present study has been presented in chapter 3. This chapter includes, universe of the study, sample size, method of data collection and finally analytical techniques used for the study. The profile of the sample villages is given in chapter 4. The back

ground information with respect to the sample villages including geographical, climatically, social and economic have been presented in this chapter. The issue of women and development has critically been examined in chapter 5. The discussion starts with the presentation of global view, followed by a critical examination of the public policies adopted since independence till to date for the betterment of women in general and rural women in particular. Conclusion is given in the end of the chapter. The role of major NGO's especially the SRSP working in the NWFP for the development of women, especially rural women has been analyzed in chapter 6. Historical background of all major NGOs, especially the SRSP (a case study) has also been presented in this chapter. The conclusion has been given at the end of the discussion. The focus of chapter 7 is on social sector development in Pakistan. It examines the availability of social services at the national level. The results and discussion based on primary level data have extensively been presented in chapter 8. This chapter is divided into eight sections. The first is concerned with the discussion of social economic and demographic characteristics of the sample respondents in the project area. The second section is concerned with the discussion of formation of women organizations. It looks in to the community motivation behind the WO formation and women's perception of benefits, from the WO forum. This section further focuses household's coverage, and other aspects of institutional development such as pattern of WO meetings membership, WO leadership and the role of the social organizer (SO) in social mobilization of communities. The discussion with respect to HRD is given in section 3. The different trainings imparted, to target population and the impact of the all the programme packages, undertaken by the target population has been analyzed. The primary concern of section 4 is the provision of micro credit for agricultural, livestock and enterprise development. The analysis includes. Easy access to credit, procedure of repayment of credit, the productive utilization of credit and the impact of the micro credit on the socio-economic uplifting of the rural women. The focus of section 5 is on health and family planning issues of the target population i.e. availability of health care, the existing facilities in health care (BHU/RHC/Dispensary) its utilization and underutilization by the rural women in the project area. The availability, accessibility of educational facilities its utilization and underutilization by the target population and suggestions for the improvement of the existing educational facilities in the target area have been discussed in section 6.

The perception of the respondents about the Government and NGOs developmental activities is presented in section 7. The coordination between Government and NGOs is discussed in section 8. Key features of the NGOs and Government are also given at the end of this section. The summary, conclusions and recommendations, are presented in chapter 9.

CHAPTER 2

REVIEW OF LITERATURE

It is very important to get an insight about the knowledge relevant to the research topic. Review of literature provides this insight and helps in conceptualization of the problem. Accordingly this chapter reviews some of the important articles, research studies and students' master theses with respect to rural development with particular focus on women and development. Most of these studies are on general aspects of governmental and non-governmental organizations' rural development programmes. These studies have been divided into three main groups. First group consists of studies conducted on NGOs and women development. Second group is related to studies on Gender and Development. Third group include social sector development studies.

2.1 NGOs and Women Development

Jilani (1982) has discussed the role of non governmental organizations in the provision of legal assistance to women. According to her, Pakistan, like some other Muslim countries, has in recent years, experienced a resurgence of Islamic values and traditions. Laws are being re-examined and re-formulated to bring them in conformity with the injunctions of Quran. Commendable efforts are also being made, in true Islamic spirit, towards the enhancement of the status of women. Moreover, determined efforts are being made to establish institutions to safeguard women's rights. Government and non-governmental organizations are concentrating on evolving better and more effective social welfare schemes for the benefit of women. Non-government organizations are playing an important and meaningful role in alleviating the suffering of the underprivileged women and in their return to a settled and established life. A brief survey of the NGO's had revealed that although programme schemes to provide relief and help to women are being successfully carried out; little has so far been done with regard to providing legal assistance to women in need of it. The reason behind it could be lack of publicity in this respect and absence of any specific provisions, in order to launch such programmes for providing legal assistance to women at organizational level it is imperative that separate funds should be allocated in order to meet the expenses involved. Further a panel of lawyers nominated by all the organizations should be used to provide professional services. Making legal services available through organizations would

prevent the exploitation of women by unscrupulous elements. It would also be more inspiring and reliable. Women would therefore be more willing to assert and pursue their claims.

World Bank (1996) studied the role of the AKRSP. The study shows that the AKRSP has a great role in improving the social contact and family welfare in Pakistan's Northern Areas and Chitral. These improvements are mainly due to the different institutions at the village level. The different VO's and WO's for the betterment of village people and encouraged them for the utilization of their resources in a more productive way. The study is conducted on different aspects which include the impact of the programme, human resource development and women's role within the AKRSP.

Usman et al. (1999) discussed the role of non-governmental organizations in developing women mobilization process at community level. They also discussed community participation models in Pakistan including the community participation approaches, tested in government projects/programs lessons learned and recommended strategies for an effective linkage between grass roots and non-government organizations. Approaches discussed are Agha Khan Rural support programs Model, Sarhad Rural Support Model, National Rural Support Model, Area Development Program of UNDP and other foreign assisted projects like orange Pilot Project Karachi Model and government participatory development programme.

Khan (1999) evaluated the impact of the development programmes undertaken by three rural support NGOs, the Agha Khan Rural Support Programme, Sarhad Rural Support programme, and Balochistan Rural Support Programme in the mountain areas of Pakistan. Special focus is given to the nature and thrust of these programmes in the context of enterprise development. All three NGOs have a common approach and Programme structure. They all emphasize formation of community-based organizations and establishment of a participatory approach. The package offered includes construction of local infrastructure, improved natural resource management leading to better agricultural practices, use of inputs and livestock management, training in various fields for human resource development, provision of credit and promotion of savings, and support for income generating micro-enterprises.

Nadeem (1999) evaluated the effects made by AKRSP to foster the development of rural people through Human Resource Development programme in Tehsil Mastuj of District Chitral. The study was confined to three major training sectors, i.e. agriculture, livestock and poultry. The information was collected through interviews of AKRSP beneficiaries. It was observed that agriculture sector situation has changed considerably, i.e. crop yield has increased due to improved use of improved agricultural techniques. Fruit plantation and production has also shown an upward trend. Disease and mortality rates of livestock have also decreased. In forestry sector tree plantation was quite impressive, i.e. majority of the people were involved in social forestry activities. Moreover, respondents were also raising forest nurseries and getting enough return from their nurseries.

Phazhendhi and Jayaraman (1999) evaluated the performance of informal groups promoted by non-governmental organizations (NGOs) both in terms of empowerment of rural women through participation and employment generation. They revealed that as a result of group formation, women were able to diversify their activities through uptake of non-farm and animal husbandry activities. The findings indicate that the group approach could play an important role in empowering women in rural areas. The informal groups of rural women with active intervention of NGOs, adequately supported by training and financial assistance, ensured and also significantly improved women's participation both from economic and social aspects.

Qaddafi (2001) evaluated the effect of NRM strategies adopted by NRSP for managing natural resource. Study revealed that the NRSP has a far-reaching effect and motivation in the management of available natural resource particularly livestock and crop husbandry. Different vaccination campaigns, against many fatal diseases and awareness regarding use of balance diet given to livestock and poultry by NRSP, increased milk production. Similarly provision of various inputs and technological skill about farming on modern scientific lines not only resulted in increased productivity but also motivated the rural community towards the goal of sustainable agriculture.

Ahmed (2001) conducted a study to know the impact of the SRSP human resource development on local community. The study was confined to three major sectors i.e. agriculture, livestock and enterprise development. Good developments

were observed in the study area. Due to the training imparted by SRSP the people have started farming on scientific lines. As a result crop yield has increased vegetables and fruit production has also shown an upward trend. The diseases and mortality rate of the livestock has also decreased. Based on the findings of the investigation the study recommended that SRSP should extend HRD component to other backward regions of the province so that the pace of development be increased.

Ayaz (2002) conducted a study to explore the management of natural resources through community mobilization and participation. The study was confined to the working area of SUNGI Development Foundation. The Study highlighted the role of rural women and village committees in the completion of productive village infrastructure schemes etc. The study found that true sustainable participation is possible only when the people especially the women of the area are involved in identification, planning, implementation and evaluation of all developmental programmes.

Amjad (2002) conducted a study to investigate the role of SRSP's HRD based training programme and its effects on agriculture and livestock production He found that majority of the respondents were young and energetic. All were literate, having an average of 40 kanals (5 acres) of land per household. A large majority was owners and started farming as their main source of income. Training programme increased yield of almost all the crops including cereals, fruits and vegetables. It also motivated people towards cash instead of cereal crops. Similarly the livestock training programme resulted in increased size of livestock, milk production and modern treatment practices. Increased vaccination and medication had decreased annual mortality and caused 80% decline in disease. As a result there was improvement in animal health and livestock productivity. The study found that an increase in crop yield, livestock productivity and the income of the respondents had also increased considerably.

Hamid (2003) evaluated the role of AKRSP in agriculture and livestock management. Specifically the study was initiated to compare the crop yields and milk production of beneficiaries with that of non-beneficiaries of AKRSP's intervention. The data were collected from 75 respondents, 40 beneficiaries and 35 were non-beneficiaries. AKRSP has introduced and supplied new seed varieties and high milk

producing cows on subsidized rates for the beneficiaries of AKRSP. The supply of these hybrid seeds and livestock has put positive effects in the crops of maize and potato and also in milk production. Thus the production of beneficiaries in the crops of maize and potato has been increased significantly from that of non-beneficiaries. Milk production of the beneficiaries has also increased significantly from that of non-beneficiaries. The study concluded that SRSP has far reaching effect in the field of agriculture and livestock.

Hasnain (2003) assessed the socio-economic impact of HRD activities of SRSP, on the people of Tehsil Haripur. Most of the respondents (46.33%) fall in age group of 20-40 years. The maximum respondents (83.58%) were engaged with farming profession. The study revealed that 91.88% of the respondents implemented the training. A reasonable increase was noticed in the land utilization under crops (34.97%) vegetable (19.95%) and orchards (31%). A significant increase in the yield of wheat and maize is noted. There was also an increase of 23.13% in the use of agriculture inputs like chemical fertilizer, insecticide, weedicides, improved seed varieties and modern farming system. About 62% decrease was observed in the common treatment of livestock through local experts. A positive (83.77%) impact of HRD on the income was reported by the majority (91.88%) of the respondents.

Khan (2003) studied the role of AKRSP in Natural resource Management strategies adopted for managing natural resources and to formulate appropriate recommendation for simulating efficient NRM in Northern Areas. The study showed that 78.5% respondents were facilitated by AKRSP in seed provision, 63.7% were trained in crop management while 87.5% respondents were benefited from the trainings. In animal husbandry sector, 39.2% respondents were helped in animal improvement, while 15% were provided exotic breed of livestock. The study indicated that 70% of the respondents had received the training and they had fully utilized it. The study further revealed that 96% of the respondents were having forests and AKRSP helped them to plant the trees. Similarly the provision of various inputs and technological skill not only increased productivity but also motivated the rural community towards the goal of sustainable agriculture.

Gul (2004) has found that AKRSP is playing a key role in the development of women in the area and had initiated development programmes in water supply, health

and credit facilities. It had imparted trainings for the local women in different disciplines through the WO established in the area. Practical adoption of these trainings had made positive effect in the lives of the local women in terms of improved agriculture products and increase in income of the respondents. Another major effect of the AKRSP was the reduction in work load of women e.g. by supplying water channels which saved the women's time which was spent on water collection. The study concluded that although gender awareness has been promoted to some extent after the AKRSP's intervention in the area, however female education in the area is still low. On the basis of the findings it is recommended that more training with regular follow ups are needed in the area and more emphasis should be given to health and education.

Bibi (2004) has examined the role of SRSP in gender development in rural villages of district Peshawar. The results showed that the SRSP had introduced a number of interventions to mobilize women. At first WCOs were established, which were reported as the most primary source of motivation. Because of patriarchal nature of society, males, social workers, religious leaders and teachers were contacted to paved way for WCOs formation. This had both enabled SRSP to form WCOs and contact the females. These were further boosted by participation and representation of females in WCOs and development of women related activities. To further mobilize the women community was sensitized through social organizers and those interventions were designed and implemented that were based on needs of the society. All these efforts mobilized the women to an extent where they started making decisions independently, attended the WCOs meetings and were confident enough that they can work without the help from SRSP, but a lot of work is still needed to make WCOs independent and function properly.

Khatoon (2004) carried out a study to analyze the benefit received from the role of SRSP's participation in women related natural resource management and other related skills training in district Peshawar. The study showed that the respondents were regular members of the WCO's. and reported that they were motivated to form WCO through community participation. SRSP's involvement in different types of natural resource management and skills enhancement trainings in the fields of tailoring, mushroom cultivation and food processing etc. greatly benefited beneficiaries and raising their level of skills and earning capacities. The level of

expertise and work experience raised the quality of produce as well as better living. Those who received training were getting increased monthly income. Most of the respondents were satisfied with the overall SRSP's programme. But recommended that the durations of training and the credit ceiling should be increased and the service charges to be lowered to get maximum benefits and participation.

2.2 Women and Gender Development

Khawar and Farida (1987) have described that woman as history reveals have been playing a significant role in the family as well as in the society even since the creation of mankind. No doubt God has bestowed upon this fair sex certain qualities, and abilities with which she has been successful in practical life. Women whether literate or illiterate, have got an outstanding quality of imparting warmth, love and affection. Basically she is a born educator who educates the children a formal and informal way from the cradle up to his manhood or womanhood. A woman has also been given the title of "Queen of the house". Due to these qualities and talents, which she possesses, there is a great need to encourage her to participate in various development programmes by educating her in different fields of national interest.

Himayatullah and Parveen (1990) have reported that female labor force participation rates are substantially lower than the male rates, and several factors are responsible for relatively low female participation rates, which include the following. The first factor is that like most countries in Pakistan labor force data also tends to underestimate the number of economically active women especially in the category of unpaid helpers on farms and other family operated enterprises. Secondly, in Pakistan the Muslim custom of purdah also inhibits the employment of women. Third reason is that women are still largely responsible for domestic work and child rearing; they are not as free as man to enter the labor market. The vast majority of women in Pakistan prefer to stay at home and look after their children. The cultural trails may not only affect the extent to which women actually engage in income generating activities, but also the exporting of activities in the census or labor force surveys.

Jalaly (1992) has reviewed gender issues and their implication for development. According to the writer so far women have not received proper attention and no single step has been taken to involve them in the development programmes even though they could have been the most suitable candidates. It is due

to this reason that most of the projects have failed or little progress has been achieved in the women development field. Women should be encouraged to participate in such programmes, so that they can actively contribute in improving the economic and social, health and educational conditions and environment of the society.

Mohammad (1992) has discussed planning for women's integration and development, situation analysis concerns, strategies and mechanisms. He has highlighted the low status of women in Pakistan and declares that the Pakistani women are marginalized by the planners. There is an urgent need to integrate women into the development process through high profile, well conceived and properly implemented programmes that will affect them directly in the short to medium term and be sustainable in the long term.

Siddiqi (1992) revealed that access to resources is important and the power base of women as stakeholder in the action has to be strengthened. The women's resource need is more than the male. It has remained in the back seat long enough.

Desai and Jain (1994) stated that women's work on the farm not only contributes to the family income, but also releases male workers to participate in the cash economy, and hence to benefit the whole family.

Haider (1995) has examined the effect of the development process on the lives of women, exploring the relationship between the processes of social and economic changes on women and gender division. Although structural adjustment programmes have had some impact on women, a number of social indicators continue to show that women remain disadvantaged in the society. These indicators are discussed, taking into consideration gender bias at the macro level of development and at the micro level of household units. Consideration is given to the allocation of resources such as food, cash, educational opportunities, credit systems, land titles and health care, citing examples of gender biases from Nepal, Srilanka, and other parts of Africa, Latin America and South East Asia.

Haq (1995) argued that women are generally the worst victims of poverty yet most poverty elimination strategies forget them. In trying to be neutral on gender they often end up indifferent to it. Instead the empowerment of women, treating them as vanguard for eliminating deprivation from society as a whole, must increasingly be the most important strategy. This will require new insights and new strategies clearly

targeted at poor women and their children. The only permanent solution for female poverty is to create the environment in which women can stand on their own feet, where they can emerge from such dependency, and where they can get equitable access to economic and social opportunities.

Razavi and Miller (1995) conducted a study on women and development by tracing the main trends in the way women's issues have been conceptualized in the development context. The study explained that the emergence of the concept of women in development (WID) in the early 1970s, highlighting in particular a dominant strand of thinking within WID that sought to make women's issues relevant to development by showing the benefits, in terms of economic growth, of investing in women. This approach tended to emphasize how women could contribute to development, rather than how development could improve the lives of women. Further it looks at the analytical and intellectual underpinnings of the shift from WID to GAD (gender and development). Gender is being used by researchers and practitioners in a number of different ways. The paper highlights two main issues that emerge from the different conceptualizations of gender. First, at the analytical level, there are critical differences in the extent to which the togetherness of social connectedness of husband and wife is given analytical weight. Economic models of gender tend to miss some important dimensions of togetherness characteristic of husband/wife relations. Second, at the political level, the extent to which the goal of gender awareness development is to be linked to top down or bottom up strategies remains controversial. While women's, NGOs and grassroots organizations have an important role to play in creating space for women to politicize, their demands, there are serious limits to what institutions of civil society can achieve. The state still remains responsible for regulating macro-level forces in a more gender equitable manner.

Haider (1995) examined the effect of the development process on the lives of women exploring the relationship between the processes of social and economic changes on women and gender division. Although structural adjustment programmes have had some impact on women, a number of social indicators continue to show that women remain disadvantaged in society. These indicators are discussed, taking into consideration gender bias at the macro level of development and at the micro level of household units. Consideration is given to the allocation of resources such as food,

cash, educational opportunities, credit systems, land titles and health care, citing examples of gender biases from Nepal, Sri Lanka, and other parts of Africa, Latin America and South East Asia.

Acharya (1995) stated that empowerment is a process, which enables women to meet both their practical and strategic needs. The process of empowerment must increase women's political power; raise women's consciousness about the symptoms and causes of oppression; and strengthen women's self confidence. The economic empowerment of women considers aspects such as: their labour contribution, which in the case of farming is at least equal to that of men. Although not acknowledged as such; access to inherited property; and their role in household decision-making. Social empowerment such as access to health care and education were also considered.

Awori et al. (1995) concluded that women's micro and small-scale enterprise assistance needs to adopt approaches and structures that favour sound economic enterprises that also foster women's empowerment.

Goetz (1995) argued that women are generally the worst victims of poverty yet most poverty elimination strategies forget them. In trying to be neutral on gender they often end up indifferent to it. Instead, the empowerment of women, treating them as the vanguard for eliminating deprivation from society as a whole, must be the most important strategy. This will require new insights, new development paradigms and new strategies clearly targeted at poor women and their children. The only permanent solution for female poverty is to create the environment in which women can stand on their own feet, where they can emerge from such dependency, and where they can get equitable access to economic and social opportunities.

Mizan (1995) examined the effects of women's economic participation and earnings on their marital decision-making power. The major policy implications arising from the study is to ensure the basic foundation for changing the status of rural women. Supporting income-generating programmes and the enhancement of general employment for women should be the task of the government.

Reddy (1995) presented a case study based on an action research project. The objective of the study was to change the status of women through a process of empowerment, to implement rural development interventions. The study thus concluded that economic empowerment could be encouraged through establishing

saving and credit societies, training and skill societies, training and skill development and income generating activities.

Al-Tayed (1995) concluded that empowerment process of rural women include the enlargement of the revolving fund to allow women to obtain loans for economic activities and increasing integration in health, education and agricultural sector.

Tambuna (1995) stated that human capital development is an integral part of economic development and improving access to and consumptions of education, health, nutrition and other sources has become an important policy instruments in the government overall strategy not only to sustain and accelerate overall development but also to alleviate poverty and improve welfare.

Creevey and Edgerton (1997) suggested that training has economic impacts that can be distinguished from those achieved by having access to loan. Training also appears to increase village women's political participation in their communities, and to be a valuable tool for poverty reduction among the poorest women.

Mariam and Khan (1998) pointed out that girls are less encouraged than boys to participate in and learn about the social, economic and political functioning of the society, within the result that they are not offered the same opportunities as boys to take part in decision making process.

Quisumbing et al. (1998) have argued that policy makers need to take gender issues into account when formulating food, agricultural and natural resource management policies. Based on a review of empirical evidence revealed that reducing inequalities between men and women in human and physical capital can lead to major efficiency and productivity increases in agriculture, increases in income, when controlled by women, have a greater impact on household food security and on investments in child health and schooling. It is concluded that paying attention to gender issues in the design of policies and projects is crucial to designing projects that are both successful and sustainable. The purpose of the study was to gain insight into why women are not advancing to upper administrative positions, and to compare the results to those of studies conducted over a decade ago. The equity theory and two explanations of attitudinal commitment guided the study's research questions. The findings indicate that women reported greater feelings of discrimination and perceived

inequity, more gender-related obstacles toward promotion and had lower career aspirations than did their male counterparts. However, the frequency and strength of women's attitudes towards some of these issues were less intense than expected.

Roy (1998) discussed the changes in development thinking and policies relating to the socio economic development of women. The emphasis on development of rural women had undergone change from bureaucratic delivery of services to people's participation, from economic development, and from asset endowment to empowerment. In the process rural women have been acknowledged as central to development programme. The thrust of these programmes is to convert women to enable them to promote, protect and preserve their visible and invisible roles as productive individuals in society.

Momin (1998) showed that in the northern mountains of Pakistan, women were actively participating in agricultural development. The role of women in agricultural development is vital; for example women are involved in vegetable cultivation, poultry breeding, sowing, seeding and threshing etc. Such types of practices may help in the rural development and can be further accelerated through various trainings in these fields.

Bardhan and Klasen (1999) have reviewed the two gender related indices proposed by the United Nations Development Programme (UNDP) in the 1995 Human development Report. The gender related Development Index (GDI) and the gender empowerment measure (GEM) While supporting the need to develop indicators that reliability track women's empowerment as well as the impact of gender inequality' on overall human development (GDI), the paper argues that the particular in which these indices were constructed and the assumptions made to overcome data gaps severely limit their usefulness and result in very misleading International comparisons. Remedies are suggested for some of the identified shortcomings.

Khan (1999) assessed the economic position of women in Baluchistan (Pakistan). A small-scale sample survey was carried out in two districts of Baluchistan namely Pishin and Mustang. The major findings that emerged included.

- a) Poor involvement in the economic activities due to less mobilization and Socio-cultural barriers.
- b) Preference to home-based income generating activities.

- i. Earner income is at their disposal.
- ii. The greatest spending is on education and health.

Oedl and Hans (1999) stated that women are a disadvantaged population group in rural areas, because of no or less mobilization. The study was conducted on the activities of women in two peripheral rural regions of Austria. They found that there is patriarchal nature of society and limited participation of women in political and communal activities.

Latitna and Siddaramaiah (1999) analyzed mobilization of rural women. The study was conducted in Bangalore district of Karnataka, India. A scale was developed to measure the level of achievement for mobilization of the rural women. The elected women representative obtained the highest overall achievement score (80:53) followed by farm women (60-42) and women labors (41:30)

Longwe (2000) has explained that the current NGO and development agency strategies to support women's political empowerment are based on two assumptions: Firstly, that women increased access to resources, especially education, will lead to their increased representation in political positions; and secondly, that government's are genuinely committed to leading national programmes of action for women's advancement. Both of these assumptions are seriously mistaken. All development organizations supporting women's empowerment must recognize the true obstacles women face in gaining political power, and develop program strategies to overcome them. NGO's could also usefully support women's organizations that are engaging in direct action a key strategy which enables women's to push for policy changes from outside government.

Ashish and Bose (2000) studied the programmes for the empowerment of women awareness generation and advocacy of women's rights and duties in India. They argued that these programmes are still inadequate in combing the exploitation of women and that this situation continues to worsen. Educating women to empower them selves individually and collectively was proposed as an effective method of addressing gender issues.

Lucase (2000) claimed that participation of rural women is one of the most essential principles in development programme. According to him the improvement in

rural women's lives, the success of the non government organizations out weighted the government sponsored one because of its basic belief in popular participation.

Sweetman (2000) noted that despite the advances towards recognition of women's political, economic, and social equality with men during the 20th century; there is a continuing lack of women leaders to determine the political, economic, and social progress of humanity. Women are largely absent from senior positions in the national and international institutions. In contrast, women have set up thousands of vibrant, visionary organizations of their own, which have had considerable success in influencing the policy of governments, international financial institutions, and development agencies over the past 30 years. However while this success is to be saluted, women's continuing absence from the key political and economic institutions that shape women's and men's access to and control over resources is a scandal. The papers consider why women leaders are still marginalized from real power, and what will it take to change this. The papers examine these questions and offer insights for development policy makers and practitioners, who aim to promote gender equality and support women would-be leaders, within wider society and their organizations. The papers make a clear distinction between women's and feminist leadership, but discuss the complex relationship that exists between these concepts.

World Bank Country Study (2000) examined gender issues, such as, demographics, health, violence, education, labour markets and social protection. It also briefly discussed, gender issues and rural development. The study found that Ecuador has witnessed important advances in reducing gender disparities and addressing gender related development issues. The report identified three priority action areas. First both female and male gender issues need to be considered when designing and implementing social safety nets and emergency assistance programmes, second, indigenous peoples initiatives should be strengthened so that they address gender differences and disparities. Third, issues such as maternal mortality, AIDS and STDs, teenage pregnancy, and family planning need to be addressed in an integrated fashion. The institutional framework on gender at the national level needs to be defined and strengthened and, an evaluation of ongoing work on gender should be carried out to examine lessons from past gender interventions.

Beales (2000) indicated that the role of older women and men in the developing world, and the barriers they encounter in the course of contributing to their families and communities. Older women face multiple disadvantages arising from gender-based prejudice, the heavy burden of manual and reproductive labour. Many men, too, face marginalization, as the ageing process undermines them to provide for their families.

Kapunda et al. (2000) examined the effects of less mobilization of rural people, especially women. It also draws policy implications and recommendations relevant to poverty alleviation, food security promotion and socio-economic development in Tanzania and in Africa. It concludes that, despite the early recognition of the need for equality between men and women, the low socio economic status of women still outweighs the positive achievement of women.

Hartwig (2000) noted that the growing number of self-help groups and women's organization over the past 25 years is a sign that women want to improve their social and economic status.

Brits (2000) conducted a cohort study to develop a community-based project for rural women with the objective of generating income and contributing towards household and local food security. A bakery was identified as being an excellent opportunity to generate income in a sustainable number. The women were given intensive training. The study elaborated the reasons behind low productivity and advantages such as opportunity for unemployed women to be productive, community involvement and cooperation with state and private enterprise.

2.3 Social Sector and Women Development

Thapa and Pandey (1994) claimed that awareness and practice of family planning in Nepal have increased considerably over fifteen-year period, (1976-91) The overwhelming majority of Nepalese women reported being aware of at least one modern contraceptive method, although they are less aware of spacing methods than of permanent methods. The availability of family planning service has also increased over time. Each method has attracted a new pool of users, and most women do not switch between contraceptive methods. In recent years, the role of spacing methods in the overall contraceptive method mix has been slowly increasing. Overall contraceptive use increased by an average of 1.6% per year during the decade 1981-

91. The current level of contraceptive use is associated with an average reduction of 1.5 potential births per women. The desired family size among currently married women of reproductive age has been consistently declining, and the demand for family planning, particularly for limiting pregnancy, remains high. After several years of effort, fertility transition appears to have begun in Nepal. For the majority of women, however, service outlets are still at least one hour or more away from their place of residence. The challenge to the family planning programme seems to be to expand the availability and accessibility of good quality services on a regular basis to meet the increasing current and likely future demand.

Herrin (1995) examined health care usage by women in the Philippines in relation to population control and gender bias in society and the health service. Analysis of national data reveals that although women have lower mortality than men, there are health risks specific to women that require special attention and additional resources. These include health risks associated with reproduction, nutritional risks associated with pregnancy and lactation and problems related to the usage of certain contraceptive methods. It is concluded that there does not appear to be any evidence of gender bias in the utilization of health care resources in the Philippines. However gender bias indirectly affects women's health by the continuance of traditional values and roles for women regarding: the reproductive role, being pressured by society to produce more children than is desirable health wise; women's responsibility for contraceptive use' and the limited choices women can make relating to education and household expenditure which affect their and the nations, health.

Jensen (1995) reported that recent fertility decline in Kenya has taken place at an uneven pace. According to demographic and health survey (DHS) in 1989, one of the highest level has occurred in coast province, with almost no decline in western province. It is a puzzling aspect that use of modern contraceptives in both these provinces is lower than the national average. The aim of the article is to broaden the understanding of the uneven pace of fertility decline. Attention is given to the social value of children and the role of women. It is argued that the impact of child mortality and sterility is underplayed in analyses based upon the DHS. The data are based upon two case studies, from Kwale in coast province and Bungoma in western province.

Thomas and Maluccio (1995) examined contraceptive use in Zimbabwe using individual-level survey data in conjunction with two special community surveys. They focused on the role of the availability and quality of community health and family planning services. The impact of the household resources and individual characteristics, in particular education and measures of income, are also taken into consideration. In order to evaluate the distributional impact of investments in health programmes, special attention is paid to difference in the effects of the programmes across educational groups. The study then investigates the determinants of fertility outcomes and the impact of contraceptive use on fertility, taking account of the fact that both reflect, at least in part, the outcome of choices by couples. The results indicated that the availability and quality of family planning and health services in the community are associated with higher rates of adoption of modern contraceptives. Public health policy has sought to bring community based distributors to all community in Zimbabwe, this is likely to be associated with an increased adoption of modern methods. Mobile family planning clinics seem to have an even more powerful impact on adoption, as does the presence of a general hospital in the area, the impact of these two investments in infrastructure is larger among women with little education.

Miller et al. (1995) conducted a survey to test the knowledge and practices of the participants and of mothers whose babies had been delivered by them, using untrained birth attendants as the basis for comparison. Marked improvements in knowledge and skills were demonstrated, and recommendations made by the trained birth attendants about breast-feeding, maternal nutrition, immunization and hygiene were generally followed by the mother before and after delivery. Furthermore, few complications and deaths were associated with deliveries performed by trained birth attendants than with those conducted by their untrained colleagues. The training of traditional birth attendants was an effective way to educate women about hygiene and health.

Malik and Aslam (1995) argued that there is an increase in the number of family doctors in Pakistan, the family doctor who is committed to social development can play a primary role in increasing awareness, acceptance and practice of family planning. A discussion is presented on the role the doctor can play in disseminating information, education and communication, motivating and counseling women,

provide family planning services, and providing a safe link between the various services involved in family planning. The community-oriented level of family doctor ensures that all these roles are more effectively accomplished.

Khandker and Latif (1996) argued that government family planning programmes as well as other health care interventions have contributed toward the recent reduction in fertility by increasing contraceptive use and reducing infant mortality. At the same time, targeted credit programme placement such as the Grameen Bank and the BRAC increased contraceptive use and reduced the fertility rate in addition to family planning programme and other health care interventions. However, increasing employment and income earning opportunities, especially for women and supplying family planning and health services are short run measures for curtailing both infant mortality and fertility. The long run policy option should be to promote the education levels of both men and women to raise productivity, which, in turn, will increase contraceptive use and reduce infant mortality.

Winkvist and Akhtar (1997) studied the women's beliefs and experiences of health and health care among 42 women in an urban slum area in Lahore Pakistan through repeated, in-depth interviews. Women from the village and women from the lowest socio economic stratum (SES) spoke of health in terms of physical strength; women from the city and women from low SES spoke of health in terms of mental strength; and women from medium SES discussed it in terms of cultural competence. Overall, health had a very low priority in these women's lives. These health problems were seen as part of womanhood; if treatment was sought, it was often from traditional healers. Village women had a flexible, pragmatic attitude toward health care resources and used all types until treated. In contrast, city women chose health care providers depending on type of illness, and being met with respect for them was of equal concern. Childbearing experiences influenced the perceptions of health and health care.

Tinker (1998) examined the health problems of Pakistani women and found that their health and general welfare are among the lowest in the world, and identifies steps to address these problems. There has been improvement in some areas, for example contraceptive usage is up from 9% in 1985 to 24% in 1997, but many other

aspects are still very poor, for example 40% of Pakistani women are anemic, and one in 38 women dies in childbirth.

Kantner and Westley (1998) conducted a survey to evaluate how family planning services in the Philippines are meeting the needs of women who have recently given birth. A key concern of the survey was to determine whether family planning providers are prescribing the correct contraceptive methods at the appropriate intervals after childbirth, with particular attention to women who are breastfeeding. From November 1997 to February 1998 interviewers visited 86 clinics in 28 provinces across the country. They obtained information from clinic records and interviewed 338 family planning providers and 3,452 clients. The clients were women who gave birth between January 1994 December 1997 and who had begun using family planning within six months of delivery. Of the health facilities surveyed, 75% were rural health units or municipal health offices managed by the department of health. The main issues examined include; that few women are reached, that some providers use inappropriate methods, that others misunderstand the protective role of breastfeeding, and that some drop it out or switch to less effective methods.

Thapa and Friedman (1998) stated that during the last 30 years, outreach camps have played an increasingly important role in Nepal's family planning programme, by bringing sterilization services to mostly rural areas where they otherwise would not have been available. However, some concerns have been raised about differences in the social and demographic characteristics and quality of care between permanent and seasonal or mobile service delivery sites. From a nationally representative sample of 8,429 ever married women aged 15-49 who participated in the 1996 Nepal family health survey, samples of 445 women who had been contraceptive sterilized in hospitals and 372 in camps were compared for their social and demographic characteristics, awareness of alternative contraceptive methods, first contraceptive method used and regret over having undergone the procedure. Women who were sterilized in camp settings and those sterilized in hospitals differed in their place and region of residence, although both groups were similar in age and parity at the time of sterilization. Roughly 92% of hospital clients and 95% of hospital clients knew about at least one temporary contraceptive method. Four out of five hospital and camp clients reported that female sterilization was the first method they had ever used (80% and 82%, respectively). Nearly 12% of women who were sterilized in hospitals

and 10% of women who underwent the procedure in camps expressed regret. Camps do not imply less careful screening of sterilization clients or the provision of inferior quality services, and they represent an important means of meeting couples demand for sterilization services in areas where hospital or clinic based services are not available throughout the year.

Farzana and Panhwar (1998) found how women in Islamic and largely rural Pakistan suffer from a number of disadvantages, which are reflected in their obvious educational deficiency in comparison with the male population. Since the domesticity, which is imposed on them, is a major obstacle in overcoming this deficit, they consider whether distance education, in a form that is appropriate to local needs and possibilities, may be a suitable alternative. Similarly they pointed out that the existing medical services fall short of fulfilling this purposes especially for rural poor and a fairly low percentage have access to health care. According to them, 84% of the total population is within 5-miles radius of any health facilities and 50.3% of population within 2-miles radius of any health facilities but still maternal mortality is 105/1000 live births. This indicates that the existing health facilities are under staffed, poorly equipped and ineffective. Medical care and health facilities available are far from being reasonable and satisfactory. These factors contribute to their low utilization by the target group. The factors, which prohibit rural women to avail these facilities, are socio-cultural factors, poverty, ignorance and illiteracy, tradition belief and taboos, lack of health education etc.

Karki (1998) examined how various village and family/individual level factors have triggered measurable changes in reproductive attitudes and behaviour in Chisang, a mainly migrant village in the Eastern Teri of Nepal. According to him fertility change is occurring as result of changing socio-cultural, economic and developmental factors, including increased education opportunities, the changing role of women and local availability of family planning methods in addition to infrastructure development. More specifically, the village has been linked for 30 years by the East-West Highway and has a relatively well-developed educational infrastructure and high school enrolment. Improved transport links allow mobile family planning and maternal child health programmes to be set up in the area and the weekly market provides not only a source of new urban ideas for women, but also a clinic for a doctor and street vendors selling contraceptive pills and condoms. The

study makes clear that the analysis of fertility change in the village should not be viewed in isolation from the regional or national socioeconomic changes, which form the context of the fertility transitions. These include land reform, and mixing of ethnic groups.

Levin et al. (1999) reported that the family planning program in Bangladesh has been very successful. The contraceptive prevalence rate (CPR) has increased from 13% in 1979 to 49% in 1996. Now that the programme has matured and demand for family planning has been created, the Ministry of Health and Family Welfare (MOHFW) of the government of Bangladesh is concerned with increasing its financial sustainability. Options to increase financial sustainability include cost sharing and a gradual transition from doorstep to static clinic delivery of contraceptives. Many of these alternatives would involve additional travel time or charges for consumers, and it is important to estimate the effect that these additional prices would have on the use of contraception. The effect of economic constraints, such as cash price and access to services on contraceptive method use, the choice of contraceptive method and provider choice, are analyzed, taking into account the socioeconomic factors that influence decision been used for this analysis:

Ayesha (1999) reported that women's access to health and family planning services is limited in Pakistan, despite a growing contraceptive prevalence rate. In 1997, a small, qualitative study in three villages in rural Punjab explored restrictions on female mobility and other social barriers to accessing these services, in relation to women's concepts to honor and the practice of segregation of the sexes. Focus groups with married men and women, and unmarried girls, and key informant interviews were conducted in each site. Unmarried girls were most restricted in all types of mobility, even within their own villages. Attitudes towards health and family planning services were positive among both men and women, and women's access to these services within their own villages was least restricted. However, the unmarried girls experienced restrictions on accessing health care even within their own villages. Access to services outside the village was more restricted for all women, as they rarely left their villages alone. Mobility for education or jobs outside the village was more severely controlled because it poses more of a threat to the honor code. These findings have implications for health planning programmes in Pakistan.

Luck et al. (2000) examined the mobilizing demand for contraceptives in rural Gambia. A community trial was conducted in 1994 and 1995 in three primary health care circuits in the rural North Bank Division of Gambia in order to determine whether a community based intervention designed to mobilize demand for contraceptives would increase use of modern contraceptives, even in the absence of improved availability of family planning services. The analysis of trial data indicates that the demand mobilization intervention had a statistically significant positive effect on non-user's adoption of modern contraceptives. The study found that the "Kabilo approach" had the greatest impact in which village women provide basic health and family planning counseling to other women in their extended families. The results suggested that the principal barriers to increased contraceptive use in rural Gambia were psychosocial.

Miller et al. (2001) studied the continuation and failures rate of family planning methods in Pakistan by the international standards. The overall continuation rate for Pakistan is higher than for any country except Indonesia. By methods, it is noteworthy that continuation rates for Pakistan are lower than in any other country. Pakistan's failure rates are similarly benign by international standards. Compared to other countries, Pakistan's failure rate for condoms is fairly low. They find that the use of couple methods have many advantages, they also were associated with 84 percent of the contraceptive failures in Pakistan in 1997. By no means, all-Pakistani husbands are as supportive as the husbands who use the couple methods. Women's autonomy may be poorly served by inviting male control is yet another domain. The users of these injections, condoms, IUDs are often anxious and dissatisfied.

Panezai et al. (2001) examined that the using data from community based distribution (CBD) project in district Quetta, trend in over use of contraceptive from 1991-99. Every use is measured by the most frequently used method after every two years of the program since 1991. They find that almost every fourth currently married women of reproductive age in Quetta was ever user of a method in 1991, before the start of CBD program. During the first two years 1991-93 of counseling and service delivery, the percentage of ever used jumped to slightly less than double the proportion in 1991. From 1991-93 to 1993-95, the increase in ever used is moderate. From 1993-1995 to 1995-97 a substantial decline and from 1995-97 to 1997-99 a substantial increase in ever users was observed. The reason for increase and decline in

ever users due to the delay in the funding of the project during 1995. The effect of ever intensive counseling, motivation and service delivery at the doorstep showed major impact on the ever use of contraceptive.

Razzaque (2001) argued that the initial decline in fertility is due to increase in age at marriage and gradual social and economic changes, coupled with urbanization and modernization. Population growth rates have remained high and stable, although among some groups, such as educated women, working women and those who marry late, fertility has shown a decline. The population programme has been subject to frequent shifts in emphasis and strategy, without earlier activities being allowed to mature. The program's current strategy come closes to a comprehensive population policy, as it is based on multi sectoral involvement. There is the danger, however that family planning activities will take on yet more duties by other ministries that are being required to offer family planning services. Utilization of population welfare program service outlets has increased gradually. He also examined that specific outreach to improve maternal and child health, engage community in development efforts and create demand for family planning services. . This program still suffers from too much central control. The private sector, including private medical practitioners, should be accorded more resources, as they could contribute substantially to the family planning program.

Chaudhury (2002) stated that a high level of unmet demand among currently married women in the SAARC countries, particularly in Pakistan and Nepal. Over one-third of currently married women of these two countries level of satisfaction vary by country. The unmet need, in general, is higher among women with little or no education who live in rural areas, and who are adolescent and young adult. Younger women are more interested in contraception for spacing purpose and women with little or no education and rural women are more interested in contraception for limiting births. The unmet need is fairly common among amenorrhoeic women. Nearly 7 million women would like to postpone their next birth for two or more years or to stop childbearing, but they are not using the contraceptives. In Pakistan the unmet need for contraceptive has increased by 17% between early and late nineties. This increase was noticed for both spacer and limiters of births. The increase in unmet need for contraception in Pakistan due to the changes in reproductive preference for smaller family size and increased availability of family planning services, among

other factors. The unmet need for contraception is higher in rural areas, than in urban areas. Unmet need for family planning is lowest among women with secondary and higher education than women with little or no education. The relationship between education and unmet need is divided into spacing and limiting components.

Douthwaite et. al. (2002) stated that the retraining of community based distribution (CBD) workers appears to have improved women's specific knowledge of the pills. Women in the intervention area are better informed about the pills compared to women in the control area. They are satisfied with the services provided by the CBD workers. Difference in, knowledge do not appear to have translated into more positive attitudes towards the pills. Contraceptive prevalence rate has risen in the period of trainings. Women are likely to use family planning methods if they were satisfied with title standard of care that they receive, and if they are provided with full and accurate, information about different methods so that they can make decisions about the family planning use. Adoption of the revised training curriculum by PAVHNA and more widely by the ministry of population welfare will be positive step towards improving the quality of family planning in Pakistan.

Saleem et. al. (2002) stated that where the emergency contraceptives pills were made easily accessible to the clients, the rate of unwanted pregnancies dropped as compared to a group where prescription for its use was required. Women seek induced abortion for the purpose of spacing birth and limiting birth and limiting family size. 3.9% for all pregnancies experienced by these women. Women who are determined to regulate their fertility are more likely to opt for termination of unintended pregnancies. 72.4% reported failure as a reason for emergency contraceptive (EC) and had emergence contraceptive pills (ECPs), available as back up support. They reported that many of family planning (FP) method users who could face a similar situation, but do not have the knowledge and opportunity to use emergency contraception to avert an unintended pregnancy and hence an unsafe abortion. The acceptability levels of Ecps of our clients related to availability and high cost of drug. Ecp as emergency contraception is acceptable by the community.

2.4 Education and Women Development

Masuda (1980) has examined education and training of women in fields related to science and technology. According to her the progress of a country depends

on its educated population and women form 50% of the population in Pakistan. Even though they play a vital role in the formulation of the society, they are generally eliminated from social life and its decision making bodies. In Pakistan, the number of educated women is only one tenth of the educated men. Of these a very small number has obtained scientific education. However, it is encouraging to find that the status of women is now changing politically, legally, economically and educationally. In the past education was a privilege of a limited proportion of the population, to which women usually did not belong. Now, advancing industrialism has begun to make literacy an economic necessity and women can seek educational qualifications on equal terms with men. The writer is of the view that we need to reshape our educational system and make it goal oriented so that it can cope with the changing social and economic requirements of the country. The technical educational and training programmes should be so formulated that we utilize the available human resources, increase the productivity and are able to use material resources. For this purpose, a long term man-power training programme should be launched and the government should determine the number of persons required for each skilled category and arrange the relevant training facilities.

The study by K. Nuzhat (1972) pointed out that in the past, education in general and female education in particular has not been geared towards the needs, but even then inquiry into the role of women's education proves that education has been useful and beneficial for women. It was also noted that lower and middle-income groups of women have economically benefited more as compared to educated women of high-income families.

Aftab (1994) reported that since 1947, the major obstacle to Pakistan's transformation into a dynamic middle-income economy is considered to have been under-investment in its people, particularly women. The paper studies the complex ways in which norms and traditions deprive women of autonomy. The central point of the analysis is that illiteracy is not an issue limited to women and girls it is a much wider and complex issue, closely linked with social structure, and is both the cause and effect of socio-economic retardation. The paper discusses illiteracy rates at present, the adult education policy, and some reasons for the slow growth of female literacy in Pakistan. In conclusion it notes that out of 500 illiterate girls surveyed,

72.8% expressed their willingness to study if the facilities were made available to them.

Salma Sami (1996) revealed in her study conducted in district Peshawar that Pakistan in general and in the study area in particular has been conservatism and ignorance of the importance of education, the generally low social status assigned to women and their secondary position in daily life.

Osunde (1999) examined the factors militating against the active participation of rural women in development oriented educational programmes in Midwestern Nigeria. It was noted that while women are essential to the success of development oriented programmes there are actually very few women to be found in such programmes. The paper examined some of the reasons why women find it difficult or even impossible to participate in education programmes in particular, focusing on the situation in Nigeria. The reasons for their non participation in projects were given as excess workload, fatigue, cultural problems, lack of time, organizational problems, family commitments and lack of interest.

Saceda and Majeed (1999) reported that NWFP and Balochistan provinces are considered to be less developed provinces as compared to other two provinces of Pakistan. Due to the socio-cultural situation, women in NWFP have less access to education, jobs and other facilities compared with women in Punjab and Sindh Province. 400 women were contacted in a study to compare the reproductive health status of women in different communities and with different educational standards. 200 women were of a high social class and were educated and working (doctors and nurses). The other women had a lower education standard and were not working. Results indicated that the reproductive health status of women in the uneducated group was unsatisfactory due to illiteracy, poverty, early marriage and a large joint family system. Contraceptive practice in this group was unsatisfactory, despite a high rate of awareness. Reproductive health status of women in the educated working group was good due to education, high income and high social class, with a satisfactory understanding of family planning.

Sedlacek et al. (2000) focused on the qualitative research conducted in Pakistan to evaluate the impacts of decentralization and community Participation specially of women in the rural areas and on the quality of schools for girls. It also

identified factors that influence the educational participation of girls, because the illiteracy ratio among women is considered a blockage in the way of community mobilization particularly of women.

2.5 Conclusion

The literature review cited above brings to light important views of various authors on different aspects of women and development. The public as well NGOs have initiated a number of programmes for women development. The NGOs have adopted holistic approach and had taken many initiatives based on self-help aimed women empowerment. In this regard they have established vocational centers where free of cost trainings were imparted along with the financial assistance for the adoption of acquired skills on sustainable basis. The aim of the NGO is empowerment of rural women by enhancing their potentials and to enable them to contribute to their household economy.

Some studies on women and development had recommended an increase of the female participation in economic activities is to make women economically productive. While other are in favour of improving mother and child health care, which in turn has impact on her status within the family. Similarly, family planning can be used not only to reduce fertility rate but also as preventive health measure for women.

Besides these some studies realized the fact that women are the first line health providers and that the health of the entire family depends on their knowledge. There information and education campaign need to be used not only for information on family planning nutrition and curative health but also increase the level of awareness in all fields. Some studies find that socio cultural practices result in unsafe mother hold both in the child delivery condition as well as the reproductive pattern. In the latter situations, there is lack of spacing and high birth rates, which results in high female mortality and morbidity rates.

Studies on education and women development concluded that the reasons for the low literacy and enrolment rates for female have their roots in demand and supply side factors. On the demand side there is absence of schools where even if there was demand for education, the schools were not available where there schools were available the motivation to continue with schooling was missing. In most of the

educational institutions complaints were reported of trained teachers, inadequate and lack of transport and accommodation facilities especially when they are posted to remote areas. On the demand side, parental prejudice, the girls for household chores, early marriage social taboos and ignorance regarding the importance of female education have all contributed dampening for female education and higher drop out rates of female students.

The literature reviewed reveals that the international gender discourse broadens to acknowledge the importance of the multiple identities of women and men in the causes of vulnerability and discrimination, link to rights-based approaches to development. In Pakistan peoples still lack proper awareness on these issues, thus significant challenges remain. Although women still have less equal development opportunities, inequitable access to services and less mobility; these factors in turn translate into higher levels of female poverty, vulnerability and insecurity. Much work needs to be done to support and improve female livelihoods. This requires higher level of efforts and commitment at a wider national level combined with more micro-level development initiatives of grass root institutions and community organizations to mainstream gender concerns in all facets of human activity.

The literature reviewed mentioned above have made considerable contribution on the topic under discussion. However, no study has been conducted on women and development that has compared both the public sector and NGOs performance on this issue in the NWFP. This study is an attempt to examine the government and NGOs rural development programmes for the women empowerment. This research will be a useful contribution towards this end.

CHAPTER 3

METHODOLOGY

This chapter deals with the research methodology used for the present study. It describes the study universe, sample area, sample size, and selection of respondents, tools for data collection, data collection procedure and analytical techniques used for data analysis. For getting insight into the subject matter, initial preparations were made which are presented as below.

3.1 Initial Preparation

Before finalizing the methodology of the study a number of visits were made to the SRSP's headquarter at Peshawar and other regional offices located in other districts of the province. During these visits discussion were made with the SRSP's staff including the Chief Executive and other administrative/management staff. Discussion with these officials, were important to get in-depth knowledge about this organization. They organized a number of meetings with the field staff mainly males and females social organizers. Related literature regarding SRSP was collected during these visits. Besides this a number of regional offices located in various parts of the province also helped a lot. During these visits discussion were also held with the activists working in different areas. They shared their experience. All these meetings with the SRSP's staff, mainly social organizers and activist enriched my theoretical knowledge. Next step was finalizing of the universe of the study in the light of discussion and meeting with SRSP's officials.

3.2 Universe of the Study

As the focus of the study was comparison of governmental and non governmental organizations, such an area had to select where these two organizations were working side by side. Keeping this in view the geographical scope of the study was restricted to the District Peshawar because in addition to public department the SRSP had initiated its programmes from this district and still working in different locations of this district. Though a number of NGO's are engaged in different developmental activities through out the province but the present study is restricted to the SRSP because firstly, it is the oldest NGO and is heavily engaged in developmental activities in the district under reference. Secondly its focus on rural women is higher when compared to other NGOs in the province.

3.3 Selection of Sample Union Councils

List of all union councils, where the SRSP is operational, was obtained from the SRSP's regional office at Peshawar. The list consisted of eight union councils. The SRSP is carrying out its activities in all the eight union councils in district Peshawar. Out of these only three union councils namely Jhagra, Wadpaga and Mamu Khatki were, purposively selected. Another consideration in the selection of sample union councils was that SRSP started its activities in these union councils since long as compared to other union councils.

3.4 Selection of Sample Size

As the focus of this research is on gender development, so a list of women community organization was prepared with the help of the female social organizers of the SRSP. There were 50 Women Community Organizations (WCO's) in the selected union councils. The total memberships in these WCO's Was 750. Only those members of WCO were selected who had availed trainings in skill development as well as credit facility for enterprise development from the SRSP. As the number of such respondents was not very large so it was decided to take all the members as respondent to get the maximum possible accuracy. The details are given in Table.3.1 below:

Table 3.1: Total WCOs their membership and Sample respondents

Name of Union councils	Total WCOs	Total Members of WCOs	Members who have availed both training and credit
Jhagra	14	210	67
M. Khatki	21	315	90
Wad Paga	15	225	53
All	50	750	210

3.5 Data Collection

The study is based both on primary as well as secondary level data. Secondary data were obtained from different offices of the SRSP at Peshawar district and other relevant public and private organizations. For the collection of primary data a questionnaire (Annexure-I) was designed. The questionnaire was pretested before

launching the actual survey. In the light of the feed back from the respondents, necessary changes were incorporated in the questionnaire. Data were collected through face-to-face interview. The respondents were apprised of the purpose of the study before they were interviewed. In addition to these, personal observations at the field level were also of great help in supporting the primary data.

3.6 Limitation of the Data

Information was obtained from 210 respondents and recorded in the questionnaire. Actual information was reported by the female respondents. However, when it was not possible to get actual information (in a very few cases) estimated information was accepted with the condition that these estimates were first suggested by the female respondents in the presence of social organizers and when they agreed upon. Editing of each questionnaire was carried out on the same day. In so far as possible, verification of the data was done on the next day. Some of the respondents did not maintain any record of income and expenditure at households level. A large majority was highly cooperative in supplying the information. In spite of the bottlenecks we were able to collect reasonably reliable data.

3.7 Description of the Variables

The data regarding sample respondents included, age classification, literacy status, marital and employment status, occupational status, housing conditions, and so on. In the following paragraphs we briefly describe the variables included in the questionnaire.

Data on family composition included information on the total family size (sex-wise), dependents and working members. Information was collected with respect to the social services of Government (health and population welfare, and education) and intervention of SRSP - formation of women community organization, social mobilization, skill development, micro credit and enterprise development.

Social mobilization is the important component of the SRSP programme, which aims at organizing the communities at grass root level. Data with regard to social mobilization included formation of women organization, representation of ethnic group in WCOs, reasons for joining women organization in knowledge about the SRSP. Similarly human resource development is considered to be the most significant of all available resources utilization of other resources can only be

effectively manage if human resources are developed according to prevailing needs. The data of human resource development included different type of trainings received by the respondents, duration of training courses, perception of the respondents about benefits from skill enhancement activities and the monthly increase in income after getting training. The trainings are stitching, tailoring, poultry farming, dyeing, bee keeping and silkworm. The credit and enterprise development component aims at the creation of local pool of capital, easy access to credit and increase in income generation capacity through micro enterprise development. Regarding credit and enterprise development component the information was gathered about credit program of the SRSP, sources of information about SRSP credit, amount of credit availed, sufficiency of credit obtained from the SRSP, recommended amount of credit by respondents, repayment of loan, problems in getting credit, reasons for obtaining credit and the impact of credit on household economy. Information regarding income and expenditure was also collected.

In social assets creation social sector has been given due importance by the government. Education and health sectors play a key role in human capital formation and are ensuring in important quality of life, information in this regard included utilization of the health services by sample respondents in the project area, visit of lady health worker to sample villages, services provided by lady health worker to sample respondents, satisfaction of respondents with regard to existing health facilities in the project area, visit of sample respondents to health care to avail family planning services, satisfaction of respondents with available family services. The information with regard to education included utilization of educational facilities by sample respondents, suggestions of sample respondents for the improvement of educational facilities and perception of respondents about government and NGOs developmental activities in the project area.

3.8 Methods for Data Analysis

3.8.1 Averages and Percentages

Average is an expression in which the net result of a complex group or large number is concentrated. Averaging is thus the process condensation (Ghosh and Chaudhri 1971:74). Percentages are used in the analysis of statistical data and for

comparison. Government departments and different semi-government organizations often use these techniques in their studies and annual reports (Qayyum-1984; and Bilal-1995).

3.8.2 Diagrams and graphs

Diagrams and graphs are used for the presentation of statistical information into geometrical figures. They make the statistical information easy, attractive and intelligible. Diagrams and graphs are simple devices, which help in making comparison, remove complexities and reveal the main features of the statistical information.

Many researchers like Shah (1978), Butt (1980), and Hussain (1980) have also used these methods as a tool of evaluation in their research studies. Different financial institutions have often used graphs and diagrams in their annual reports to present their performance. In this study graphs and diagrams are used to present tabulated data.

3.8.3 T-test

In social research the researcher generally used t.test to study the significance differences of two means J. Johnston (1987), Jehanzeb (1999) and Aurangzeb (2004). For such a comparison the test is used in the following shape.

$$(t - test) : t = \frac{\bar{X}_1 - \bar{X}_2}{\hat{\delta} \sqrt{1/n_1 + 1/n_2}}$$

distributed as $t(n_1 + n_2 - 2)$ under H_0 where as δ is unknown and

$$\delta = \frac{\sqrt{n_1 S_1^2 + n_2 S_2^2}}{n_1 + n_2 - 2}$$

\bar{X}_1 and \bar{X}_2 are the sample means of the respondents before and after the intervention of the NGO respectively and S_1^2 and S_2^2 are the respective sample variances. The null hypothesis to be tested is that the two population means are identical i.e. $H_0: \mu_1 = \mu_2$. The detail of the test can be seen in the Walpole (1982).

3.8.4 Specification of the model

In addition, we applied Dummy-Variable Econometrics technique to further analyze a number of aspects of the effects of micro credit advanced to and training of various kinds imparted on women by the NGOs. The general form of the Dummy-Variable technique is (Gujarati 2003, pp.297-333):

$$Y = \beta_0 + \beta_1 D + e \dots\dots\dots(3.1)$$

Where as Y stands for variable of interest and D = 0 if the aspect we want to study is missing and D = 1 if that aspect is present/available. Parameters β_0 and β_1 are, respectively, referred to as intercept and differential intercept. The estimated β_0 represents the mean value of the variable for which we put D = 0 and estimated β_1 represents the magnitude by which the mean value of other variable (for which we put D = 1) differs from the former one. Sign and significance level of the estimated β_1 are important; these, respectively, show the direction of the difference and whether the difference between the two variables/aspects is statistically significant.

We applied the above stated general form of the Dummy-Variable approach in the following 4 specific situations in Chapter 8.

$$IIT = \beta_0 + \beta_1 DTD_y + \beta_2 DTP + \beta_3 DTM + \beta_4 DTO \dots\dots\dots (3.2)$$

$$IIC = \beta_0 + \beta_1 DE \dots\dots\dots (3.3)$$

$$IIC = \beta_0 + \beta_1 DC2 \dots\dots\dots (3.4)$$

$$IIC = \beta_0 + \beta_1 DE + \beta_2 DC2 \dots\dots\dots (3.5)$$

Equation 3.2 would determine whether increase in income after training (IIT) differs for various trainings provided. Variables DTD_y, DTP, DTM and DTO, respectively, represent dummies (D=1) for trainings in Dyeing, Poultry, Mushroom cultivation and Other trainings, while training in tailoring would be represented by β_0 .

Equation 3.3 to 3.5 presents the credit cases: (a) the first equation would explain whether credit advanced for enterprise (DE) differs in creating increases in income (IIC) from that of credit advanced for livestock (β_0); (b) the second equation (3.4) would indicate the differences between incomes from Category 1 and Category 2 credits; and (c) the third/ last equation would try both cases of enterprise (DE) and Category 2 credit (DC2) against that of Category 1 credit advanced for livestock (β_0).

CHAPTER 4

SOCIO-ECONOMIC PROFILE OF SAMPLE UNION COUNCILS

This chapter provides background information with respect to the sample union councils. It further describes the socio, economic, demographic characteristics and other related information about the sample union councils. A brief description of each union council is presented below.

4.1 Jhagra

A village with 12321 inhabitants is located in Peshawar District about 12 kms east of the city of Peshawar. Despite its closeness to this urban center, the village Jhagra shares the general cultural traits of a Pathan village. Most of the people in this village speak pushto but they are also familiar with Hindko, which is spoken in the District Peshawar. Jhagra lies very close to grand trunk road. The landowners in the village are Awans and the tenants are Afghans and of other castes. The village has very fertile land, which is well known for the production fruits, vegetables and orchards. Majority of the roads and streets in the villages are generally kacha (Mud), some are semi pacca (made of Mud, breaks and cement) and small portion is pacca (made of breaks and cement). The village is connected by road with other surrounding villages.

The houses of tenants are clustered around the houses of landowners. These houses are mostly one or two rooms Kacha (mud build) houses. The houses of landowner are pacca houses and they are very spacious having all the modern facilities, such as refrigerator, sofa sets, electric fans, Automobiles etc.

The tenants are living in small houses provided by the landowners. It is only landowners who can afford to send their children to private schools at Peshawar city daily. Female education is generally confined to these families. Where as few tenants or poor people can hardly afford to make arrangement for the education of their female children. The economic profile of village Jhagra is as follows:

Table 4.1: Household's Profile of Jhagra

Name of Union Council	Total No of Households	Well off	Better off	Poor	Very poor	Destitute
Jhagra	1361	150	400	490	311	10
Percentage	100	11	30	36	22	1

Source: Monitoring and Evaluation Research (MER) Section SRSP.

Table 4.2: Economy of Jhagra

Name of U.C	Total No of Households	Households involved in different sectors					
		Agri	Live stock	Enterprise	Off farm	Services	Rtd Jobless
Jhagra	1361	550	7	70	84	480	170
Percentage	100	40	1	5	6	35	13

In the union council 58% of the people were poor while only 41% were resources rich (Table 4.1). About 40% were engaged in agribusiness while 35% had Government jobs. Sources of income also include off farm income 6% and enterprise 5% (Table 4.2).

4.2 Mamu Khatki

The village Mamu khatki is located at a distance of 25 Kilometer north of Peshawar. The total population of the village comprises of 8619 males and 7867 females distributed among 1911 households. The village is connected by metalled road to the nearby villages, towns and main Peshawar Charsadda road. It is typical of villages that have many small livestock's mostly goat, milk cows and milk buffalos. All the houses in M. Khatki village included mud-built structures, however, several houses had some brick built portions like the main gate, lower portion of the outer walls as protection from water logging. In the village the center of power and authority was a family of khans who enjoy much respect from the village population.

The Union Council of M. Khatki has a homogenous terrain in terms of soil fertility. The average land holding is about 1.7 acres. The farmer community relies on crops including wheat, maize, sugarcane, rice, vegetables and orchards. The domestic

requirement of the growers generally met from these products. However, the surpluses are supplied to the main city center. The orchard is generally sold out at premature period.

The economy of the area is essentially agrarian, based directly or indirectly on agriculture. Majority of the people are traditionally bound. Women are constrained to work outdoor due to cultural impediments. The economic profile of M. Khatki is as follows.

Table 4.3: Household's Profile of Mamu Khatki

Name of U.C	Total No of House holds	Well Off	Better off	Poor	Very Poor	Destitute
M. Khatki	1911	96	466	507	828	14
Percentage	100	5	24	27	47	1

Source: Monitoring and Evaluation Research (MER) Section SRSP.

Table 4.4: Economy of Mamu Khatki

Name of U.C	Total No. of Households	Households Involved in different sectors					
		Agri	Live stock	Enterprise	Off-farm	Services	Rtd. Jobless
M. Khatki	1911	853	01	89	763	143	62
Percentage	100	45		5	40	7	3

Source: Monitoring and Evaluation Research (MER) Section SRSP.

Seventy four percent of people in the union council were poor and only 29 percent were resource rich (Table 4.3). About forty five percent of the populations in the union council were engaged in agro business while 40% had off farm income. The income sources also include enterprise 5% and Govt. services 7% (Table 4.4).

4.3 Wadpaga

Wadpaga is located at the distance of 28 Kilometers in the east of Peshawar city, on the main G.T. road from Peshawar to Islamabad. The Wadpaga union council comprises of twelve small villages. The total population according 1998 census is 14128, comprises of 7480 females and 6648 males. The rural community of Wadpaga

by occupation is farmers however; due to high literacy ratio most of the farmers have rented out their agricultural land, to tenants on sharecropping. Also most of the farmers are rich and having large land holdings. The area is also famous for livestock and dairy production and most of the population depends on it. The owners consume the output of the livestock's however; a big surplus is supplied to the Peshawar city center. There is a tendency for cultivation of high valued crops and in the area farmers are growing vegetables and fruit orchard on commercial basis. The community is mainly enterprise oriented due to comparative advantage of being close to Peshawar. The area is waterlogged and the water table lies at 3-4 feet. This was found to be the main problem of farming community especially after the construction of Warsak dam. The majority of the houses are electrified. A few have piped water facility. Majority of the people are Pathans and their major language is Pushto.

Table 4.5: Household's profile of Wadpaga

Name of U.C	Total No of Households	Well off	Better off	Poor	Very poor	Destitute
Wadpaga	2050	32	436	1130	401	53
Percentage	100	2	21	55	20	2

Source: Monitoring and Evaluation Research (MER) Section SRSP.

Table 4.6: Economy of Wad Paga

Name of U.C	Total No of Households	Households involved in different sectors					
		Agri	Live stock	Enterprise	Off farm	Services	Rtd Jobless
Wadpaga	2050	587	126	85	737	453	64
Percentage	100%	29	6	4	36	22	3

Source: Monitoring and Evaluation Research (MER) Section SRSP.

Seventy five percent of the people in the union council were resource poor while 23% were resource rich (Table 4.5). About 36% population was engaged in off-farm activities followed by 29% in agriculture (Table 4.6). Whereas 22% had Govt. services and 4% had Enterprises as a source of income. Some key statistics of the sample union councils are given in the table 4.7 as under.

Table 4.7: Key Statistics of Sample Union Councils

S.No	Particulars	Jhagra	M.Khatki	Wadpaga
1	Total area (in acres)	10043	3418	2236
	Total cultivated area (in acres)	7531	2565	1679
2	Population	12321	16586	14128
	• Male	6510	8619	6648
	• Female	5811	7867	7480
3	Total Number of House Holds	1361	1723	1798
	• Average House hold Size	9.6	9.6	7.86
4	Literacy Rate	16.65	7.50	12.05
5	Educational Facilities			
i.	No of Government <u>High Schools</u>			
	• Boys	-	1	-
	• Girls	-	-	-
ii.	No of Government <u>Middle Schools</u>			
	• Boys	1	-	-
	• Girls	-	-	-
iii.	No of Government <u>Primary Schools</u>			
	• Boys	1	7	4
	• Girls	1	1	2
6	Health Facilities			
	• RHC	-	-	-
	• BHU	1	-	1
	• Dispensary*	-	2	-
	• No of Male Doctor in BHU	1	-	1
	• No of Female Doctor	1	-	-

S.No	Particulars	Jhagra	M.Khatki	Wadpaga
7	Type of Houses**			
	• Kacha Houses	886	1625	1010
	• Semi Pucca	359	53	443
	• Pucca	116	45	345
	• % of Pucca to total Houses	8.52	2.61	19.19
8	• % semi Pucca to total Houses	26.38	3.08	24.64
	• % of Kacha to total Houses	65.10	94.31	56.17
	Housing Facilities			
	• Total Settlements	10	16	14
	• Electrified	10	15	12
	• Non-electrified	10	-	-
9	No of settlement with Pucca Drainage System	4	9	10
10	Post Office	1	1	3
	• Women Organizations	15	21	14
	• Distance from City Center	12	25	8

Source: Govt. of Pakistan 1998..

* The dispensary is run by semi-qualified person called dispenser.

** Kacha House: Mud built
Semi Pucca: Mud, Bricks/Cement
Pucca: Bricks/Cement

CHAPTER 5

WOMEN AND DEVELOPMENT

5.1 Introduction

The issue of women and development has been discussed in detail in this chapter. Public policies, adopted since independence till to date, for the betterment of women in general and rural women in particular, have critically been examined. The discussion has been concluded at the end of the chapter.

Women play a very crucial role in the ordinary business of life. They do not only perform physically heavier work than men but also work longer hours because of their triple roles, women as reproducers, producers and community managers. Their responsibilities are very diverse. They are solely responsible for child bearing, looking after elderly family members, collecting firewood, fetching water, producing and preparing food. Their roles as community manager are important due to their presence in the community. Because of this diversity in women's role their needs are also diverse, and divided into two categories, strategic and practical gender needs.

As women's roles are diverse and relatively different from men, therefore, women's gender need arise from the different roles women play as their subordinate position to men in society. Practical gender needs are the needs women identify in their socially accepted role in society (Moser 1993). For example, adequate food supply, convenient access to safe water, a steady source of income, availability of reliable and safe contraception, access to education, training and credit and so on (Saeed 1994). Strategic gender needs are the needs women identify because of their subordinate position to men in society. For example gender division of labour, power and control and many include such issues as legal rights, domestic violence, equal wages and women's control over their bodies (Moser 1993). Women's position in society is built into the existing social structure. Women's strategic gender needs arise from this social structure and imbalance power relations between men and women.

The concern about rural women started in the early 1970s at the time when widespread disenchantment with the effects of development policies on the agrarian sectors of the Third world countries was being felt. In some countries many of these policies had, by and large, resulted in stagnation levels of food production, nutritional decline and a de-structuring of rural communities, fuelling massive rural to urban

migration. The problems of absolute poverty and of rural and urban unemployment and under-employment started to occupy a very central place in the policy concerns. As the emphasis shifted from modernization to the provision of the poorest people's basic needs for food, shelter, health distributional issues increasingly appeared on the agenda but failed to recognize the effects of gender inequality above and beyond those of class membership. Meanwhile, a growing body of research documented the counter productive efforts of ignoring rural women's contribution and their specific needs both from the point of view of agricultural productivity and of the overall welfare of rural families, as policy proposals related to rural women became intimately linked to an ongoing assessment of strategies of agricultural development (Saeed 1994).

Since the fifties, a diversity of interventions has been formulated reflecting changes in macro level economic and social policy approaches to development. There has been a shift in policy approach toward women from welfare to equity to anti poverty and recently, efficiency and empowerment. This description of the evolution of different approaches is an over simplification of reality as different policy approaches have particular appeal to different institutions and may be used by a particular agency to meet the needs of different constituencies at the same time.

The welfare approach is the oldest and still the most popular social development approach, in many countries, to rural women. The programmes generated were specifically targeted for "vulnerable groups" and would come into play when the normal structure of supply, the family and the market break down. During the decade, women's groups and the agencies, which they influenced, developed a number of alternative approaches to women, namely, equity, antipoverty, efficiency and empowerment.

Several studies (Qazi 1992, Huma 1997, Al-Jalaly 1997) in the mid-seventies showed that although women were often producers of development, particularly in agriculture, their economic contribution was ignored in national statistics and in planning and implementation of development projects. At the same time, new modernization projects, with innovative agricultural methods and sophisticated technologies, were negatively affecting women displacing them from their traditional productive functions and diminishing their income, status and power. The equity

approach grew out of these studies and sought to integrate women into the development processes of their country through equal access to employment and the market place. This approach recognizes that women are active participants in the development process, and focuses on reducing the lost grounds of women compared to men in the development process. It places considerable emphasis on economic independence of women as synonymous with equity. It argues that women should be given their fair share of the benefits of development. The equity approach encountered problems from the outset as many saw the equity approach as interference with countries, traditions of male-female relations. Nevertheless, its official endorsement in 1975 ensured that it continues to provide an important framework for those working in government to improve the status of women through official legislation, particularly in areas like rights of divorce, custody of children, property, credit.

A more acceptable approach was the efficiency approach that shifted the emphases away from women toward development with the argument that women's economic participation in development links efficiency and equity together.

The approach has been formulated by several rural development programmes as simply how best to tap the economic resources represented by third world rural women and rural women themselves have been defined as resources in the rural sector. The assumption here is that there are vast human resources lying idle and untapped.

An equally prominent but somewhat contradictory view is that women are already over-burdened with work and that the most pressing need is to alleviate the drudgery involved in providing the basic necessities of life such as fetching water from long distances, time-consuming food processing, firewood collection.

Policy interventions aimed at rural women have gained relatively widespread acceptance areas in which such interventions are expected to produce beneficial results. These are fertility, control, health, food production and the alleviation of absolute rural poverty. The promising point of intervention in the circle of rural poverty and high fertility through women, specifically through up-grading women's productive activities from the household and subsistence sectors to income-generating employment outside the home. The argument here is that non-agricultural

employment for women may, at one and the same time, promote rural development, raise women's status and their reproductive behaviour. Many writers also see the solution to world's hunger as placing appropriate technology for subsistence agriculture where it properly belongs – in the hand of women (Saeed 1994, Al-Jalely 1997).

Within this context, the anti-poverty approach developed with the particular concern that many rural women are "the poorest of the poor". Low-income women were identified as one particular target group to be assisted in escaping absolute deprivation. Underlying this approach is the assumption that the origins of women's poverty and inequality with men are attributed to their lack of access to ownership of land and capital, and to sexual discrimination in the labour market. Consequently, it aims to increase the employment and income generating option of low-income women through better access to productive resources such as credit, markets, raw material and new opportunities and skills.

The three main strategies for meeting the world's food crisis are increased production, greater income producing activities and a reduction in post-harvest food losses. And these coincide with strategies for helping poor rural women. The serious bias so far in the introduction of new technologies, many writers have argued, have been geared to cash crop production, drawing off land and labour from food crops. Hence the level of food intake tended to fall even while cash incomes may have increased. In order for food crisis strategies to accomplish their goal of feeding the world, women must not only be included in planning they must be central to it. In the introduction of new technologies, women must be consulted in the selection of these new technologies, training in their use and given means to control those technologies mostly related to their spheres of economic activities. These writers argue that assisting poor rural women is a crucial element in guaranteeing both development equity and food in the third world (Moser 1993, Saeed 1994).

In short the evidence of increasing levels of female poverty and its implications for the community welfare has undoubtedly been instrumental in promoting wide-ranging re-assessment of rural women's access to resources, access to land and water, to agricultural input, credits and services, to education, training and extension and to institutions and organizations.

The fifth policy approach to women is the empowerment approach. This approach questions the fundamental assumptions concerning the interrelationship between power and development that underlie previous approaches. It argued in terms of the capacity of women to increase their internal strength and right to determine choices in life and to influence the direction of change through the ability to gain control over crucial material and non-material resources. Long-term strategies are needed to break down the structures of inequality between genders, classes and nations. Empowerment is seen as a slow process and involves the development of diverse women's organizations, movements, networks and alliances. It deals with cultural issues as much as economic and social issues and sees their interaction resulting in the specific forms women's subordination. Hence, besides focusing on issues of access and productivity, it also emphasizes legal changes, mobilization, consciousness-raising and popular education.

The conclusion that emerges from the foregoing is that given their subordinate position within the household women have little control over labour other than their own, and the only area of latitude they have might be in relation to their daughters, daughters-in-law, mothers and other living in female relatives. Policies geared to the abstract category of women without considering their current responsibilities within the household and how these are going to be substitute for, run the risk of merely sharing certain burdens differently among each group. When new demands are made on women's time something has to give and that something is, more often than not, another women's time.

5.2 Women Development, Global View

The statistical profile showing the ranking of countries in the UNDP/Human Development Report (2005), clearly reflects the gloomy global trends. In the developing countries the, salient features of rural poverty, debt crises, structural adjustments and the high rates of male migration to urban areas, have contributed to the dramatic increase of women's work-day and has widened the gap between male and female incomes. Thus, it has also caused an increased proportion of rural households headed by women, and has led to the growing gender imbalance, and feminization of poverty.

Three decades ago, the needs of integrating women's concerns were a result of

strong attempts and constant advocacy efforts of women's organizations, whereas now the development goals of a country cannot be attained without fully integrating and mainstreaming women issues into the overall national development process.

Important lessons have been learned during the 1975-1985 Women's Decade. Good intentions were pursued to "Integrate women into development" in the creation of separate bureau, tiny W.I.D. cells, and nominating women 'as heads of social sectors of "software" components in big institutions. In terms of resource allocations, it reinforced to treat women as "marginal" as "social actors", and has perpetuated inequality.

The economic recession in the developing countries has resulted in major budget cuts, and such policy decisions have adversely affected rural women who have changed their survival strategies. Though women's participation in the agricultural production has increased rapidly, the gender imbalance and problems of gender inequity in access to resources still prevails and has been intensified. A closer analysis and review of the National Development Plans has revealed the failure of inclusion of women has limited the development efforts and process. Although there has been much activity in the past, development planning efforts still fail to fully recognize women's actual potential contributions to the development process and need to analyze the effect of development process on them.

It goes without saying that women play a key role in the economic system, yet the development planners have overlooked the large potential economic contributors. Women represent majority of the population and too often planners' fail to recognize women's role as producers, but a closer look at the specific productive roles carried by both men and women could give us a clear picture of their economic participation.

The need to categorize activities conceptually is very important since it provides us with information regarding the:

- (1) Production of goods and services, and
- (2) The reproduction and maintenance of Human Resources (preservation of the human capital for the family and the nation).

There is a belief that what is not counted is usually not noticed and in most cases this can account for lack of accurate data. If we analyze efforts made in the past as to how the planning for women took place, it is evident that the planning comprised

of an inbuilt gender-differentiated focus, and identified a few sectors i.e. health, education and later population welfare. However, most other sectors with specific relevance to women in development adopted an integrated approach on the assumption of uniformity of need among all societal groups and equitable impact in all sections of society.

Planning for women was, until recently considered a social development issue, focusing to a much lesser degree on concrete physical and practical considerations which shape the economic and social norms. The critical area in which women need to participate more effectively were, therefore, overlooked and neglected, which led to the assumption that women were recipients rather than contributors to the national economy.

Since projects are the primary vehicles used by government and donor agencies to channel resources, the tasks of project design, implementation and monitoring, are critical for determining the effects of the particular project. By now we do have sufficient empirical evidences to conclude that weaknesses in project design and implementation have caused adverse effects on rural women, by reducing the benefits, and by failing to fully grasp their contributions to projects and to the development process.

As a result the failure of projects became a reflection of inadequacies of the awareness and skills of the staff involved in the preparation and implementation of projects. Their attitudes and assumptions about women in the projects and the belief of policy formulators are reflected in the primary design of the projects. The project staff would require a new, set of conceptual and analytical prospective and skills in order to deal explicitly, effectively, and efficiently with women related issues. Economic growth and social justice call for increased attention to the integration of women into the development process. Equity and economic growth are compatible objectives and must be pursued.

A number of successful approaches from the Asia Pacific Region have proved and revealed workable approaches of empowering women in the true sense of the term. The grass-root level organizations such as SEWA in India, AKRSP and Orangi in Pakistan, Grameen Bank in Bangladesh and PCRW in Nepal have shown that when women are organized into groups, they tend to have their voices heard at all levels. If

we analyze the objectives and methodologies of each organization, it is accurate to say that they vary in their goals. Some started with just WID specific objectives, one common salient feature that we can observe is that once the women became involved in managing their own as well as their community's needs, they gradually started making individual and group decisions in the household, farm and community level.

The Chipko movement in India, the wasteland development programme in Udaipur, and the PCRW in Nepal, are good examples where women have convinced the local administration and the financial institutions to reverse their decisions. Unfortunately, access to economic and non-economic resources are not the only factors pertaining to women, the traditional and cultural social norms have also contributed to the conceptual, attitudinal and structural constraints.

The conceptual constraints could be analyzed as the middle-class role model of women who can afford and have the leisure to participate in knitting and sewing activities. The policy planners regrettably tend to believe that the majority of the women fit within this stereotype. The attitudinal constraints over emphasizes on only the reproductive role of women which in turn neglects her productive role. Whereas, the structural constraints focus on the myths and stereotypes which make her major productive role invisible due to lack of gender-desegregated data and statistics, clear-cut policy guidelines, access to resource and information and formal organizations voicing women's "dos" and "don'ts." To list a few examples, women get viewed as being "unable" "not available" "cannot be found" "are not interested" "are not literate" when it comes to women's participation in development projects.

There should be an understanding that if women are given access to resources and services, in turn they will be able to make sound decisions at all levels. Cultural values can be redefined as deep-rooted gender biases and lack of gender sensitivity of women's reproductive role and emphasizes on her ineffectiveness. In order to positively change the "do not" roles to "do" roles without an open threat to cultural values and household harmony, it would be helpful to redefine the roles by asking the following question: "who does what" (the male/female; the male child/female child the male elder/female elder), "Who has access to what" and "who controls what". The answers will reveal and help in understanding the double burden of household and farm work of women. Once one realizes these trends the development projects

referred earlier, would create an environment to lessen women's time and drudgery, by providing and introducing appropriate technology which saves women's time wage earners, and the economic independence would further enhance her decision making roles in the household, farm, community and national development.

The above process could only be possible if it reflects and addresses women's needs, and observes the sensitivity more practically. There is a Chinese saying: "Well begun is half done". Which strengthens the point that the "preparation phase" of "Tuning the set-up" is a very crucial element of how organizations make the community aware of women's needs, roles and access to resource. The aggregated data and feasibility surveys are vital and will help us to identify the needs of both men and women in that community, followed by gender responsive rapid-rural appraisals.

The above mentioned successful development models have demonstrated the importance of involving women directly in the identification of their resource requirements, and in the design and implementation of policies and projects. These modes have shown what the social activities, i.e. drinking water projects, functional literacy programmes, act as socio-economic pay-offs to the community and promote economic empowerment to rural women. The organizational set up of SEWA in India, Grameen bank in Bangladesh, PCRW in Nepal and AKRSP and Orangi in Pakistan have all geared towards sustainability and have tapped the existing national resources. Furthermore they have provided the link between women's specific needs and institutions, projects and government --- like credit, and agriculture extension services who have responded to the critical needs of the women's groups.

In the dawn of the 21st century, National Governments, NGO's and the donor agencies, have now reached to a consensus that sustainable development is possible through actual people's (women's and men's) participation and that the planning should be a participatory bottom-up approach. These broad general phrases become achievable only if the agencies encourage and support rural women to mobilize themselves into local organizations. These may be co-operatives, trade unions, credit groups, community development groups or even informal village development committees. The group should primarily be very effective and goal oriented. The effectiveness, efficiency, and sustainability, of a project should only be judged by

integrating gender issues in all project components. The linkages between macro-policy to micro experience through gender variable should be strongly emphasized, and the link between non-formal and formal economies; practice and programme; people and experiences should be properly analyzed. Furthermore the sectoral chapters on rural development and rural transformation which reflect gender disaggregated planning approach 'should be strongly recommended. -

The primary vehicles through which donor agencies can be very effective are in projects, therefore, the tasks of project design, implementation and monitoring, are critical to determine the effects. Rationally targeting the allocation of project services to the appropriate women farmers will help maximize the use of services and resources. Experience shows that through socio economic surveys and analytical, research one can identify gaps and constraints and only then can one devise appropriate large projects, which benefit women and men too.

The two decades of the women's movement in South Asia have provided concrete evidences of successful women specific projects, which have been good examples to quote as development models. However, these examples should not be seen as an end in itself, since they have only reached a small segment of the majority of women of that country. The efforts undertaken in these projects have been efficient but on a national front it has also marginalized women's concerns, and has proved to have small impact in identifying the extent of women's participation in major areas. i.e. agriculture and industry which has direct bearing on a woman's daily life. These projects have reached their goals and have proved their success in empowering women. Now the need is to use these development models by national governments and larger international organizations to use them to benefit majority of women in the areas. The challenge now lies in making the WID focus on micro projects, which improve the condition of women into a gender responsive macro programme to improve the position of women. The WID project often are short term, urgent and important, are traditional in design and benefit only the women you reach whereas, the gender and development approach in long term requires strategic thinking and structural analysis.

Gender inequalities are reflected in development thinking, and the terms and languages used for women's project are often "income generating activities", which

has an implication of small and supplementary income. This has led to the assumption that the male is the head of household and is the income earner, neglecting that 15% of all households are headed by women and the figure is more that arduous among the landless (up to 25%), whereas a project of similar nature project would be termed as "self employment" project for men. These are just a few examples of social inequalities, which impoverish women and perpetuate distortions that keep women out of the mainstream of economic life (Joshi 1990).

Hence, the primary need should be to construct a sustainable project with specific needs and sound policy guidelines. As discussed earlier the tendency of almost all the National Development Plans is to "kill with kindness" by having the welfare mentality of the "poor", and "helpless" women. The segregation takes place almost automatically. For example, the National Development Plan of one of the South Asian countries has identified Tourism, Fishing and Textile industry as the principal sources of foreign exchange earnings. Simultaneously in their WID chapter of the Plan they identified income generation activities as sewing, knitting and a bit of kitchen gardening. The disintegration is almost automatic, which, one is tempted to term it as a flower-vase concept for decoration and hanging an extra piece of decoration on the Xmas Tree.

The salient features of the National Development Plans are generally observed as: a) not gender-responsive; (b) often undermine and forget women in development which is intimately related to the goal of comprehensive socio-economic and political development of the country. The lack of Women's participation is not looked upon by the Plan as a constraint and a bottleneck therefore "SHE" is forgotten in the whole process, of being mentioned in key strategies, policies, programmes and projects. The reproductive role of women is so much emphasized that her productive role is missing. (c) The recommendation for the National Policy is to mainstream women's concerns. The objectives to mainstream women in National Development Plans must be stated specifically, sector by sector, and, inter-sectorally, with a holistic approach that relates how women live their lives, not what men think they ought to do. Unless women are recognized as a powerful, equal national force, the exercise of mainstreaming will be yet another empty gesture. To this end, it is not sufficient to note as a final point that "Women's development must be integrated in the Plan" and to have just one separate (disintegrated) chapter on Women. While reviewing the

National Development Plans one is aware that it is an outline of the macroeconomic approach and illustrates the basic points of recognition targeting and opportunities for strategic delivery.

5.3 Women Development, Pakistan's Perspective

With the beginning of new millennium, the government of Pakistan is emphasizing to involve women in national development. Participation of women in local government and federal government shows the great concern of the government for women development. Government has started many programmes for women development. Efforts are being made in close coordination with NGOs to increase the participation of women in all fields. Female education is one of the major fields where efforts are taking place and showed good results. Participation of women in health, hygiene, and sanitation has played a vital role in the improvement of basic health status. Micro credit schemes have been started to involve womenfolk in the economic uplift of their families. Government has established a number of vocational centers to enhance income of womenfolk providing job opportunities at their doorstep. Women are being given equal opportunities in employment attainment. In some department around half of the jobs have been reserved for women. Seminars/workshops and training programmes are being arranged to give awareness to the women about their rights. A little has been done and lot has to do in the field.

The issue of women and development has assumed increasingly important dimensions in the field of economic planning and development. In the developed countries, participation of women in economic activities is already an established practice, it is increasingly becoming an important policy in nearly all the developing countries, especially in Pakistan. As women constitute a big portion of poor and disadvantages groups, any policy of poverty reduction necessarily involve the uplift and participation of women.

A disproportionate number of women live below poverty line. They are confronted with multifarious of problems including lack of education, malnutrition, ill health and lack of income generating opportunities etc. Also in Pakistan, women have an inferior social status; socially they are considered as passive recipients rather than contributors and strong social norms exclude them from being capable of taking part in economic activities. They are denied access to opportunities to improve their status

or economic position and are relegated to a secondary position of dependency. The urban industrial bias has further widened the gap between men and women as expansion in employment opportunities is usually reserved for men. Thus the policies of industrial growth have also often led to a widening of the gender reflect and worsening gender profile. For instance, in the education sector, against a national aggregates literacy rate of 53% (2005), the female literacy rate was 39%. In NWFP, the female literacy rate further depicts deterioration at 25.2%. The situation in rural areas is even more alarming. Against the overall country female literacy rate of 39% in rural areas, NWFP had 21.7% female literacy rate in rural areas. Clearly, we cannot accept such statistics with a sense of composure if we aspire to achieve our development objectives. We cannot continue to neglect the importance of the role women can play in our economic development. Therefore, more and better avenues for education and training for women, creating an enabling atmosphere outside the homes for women to work, removing barriers to their participation, alleviation of social taboos, and their integration into the mainstream of economic life, must be our supreme priorities while planning for development.

The women of Pakistan are responsible for a number of activities pertaining to production and marketing of goods; they also carry the main responsibility for food preparation and home making, for water and fuel, for nutrition and health care, for hygiene and for the education of the young. Not the least, they are almost entirely responsible for the physical and mental development of the next generation. Benefits of investment in women in the form of equitable access to education, health facilities, employment and improved production and marketing extend beyond the target group and have important implications for the human resource potential of the future generations.

Notwithstanding restrictions and limitations on mobility generally faced by women in Pakistan and the segregation of sexes, women contribute substantially in the rural sector. In fact they are the major contributors to the rural economy in crop production, livestock production and cottage industries. Their involvement in farm work is lowest in the earlier stages of crop production while field preparation, including sowing and tilling, is mainly undertaken by men, but in the later stages of production, in the harvesting and post harvesting phases their involvement is very high.

Realizing the important role played by women the Government of Pakistan give due attention to the welfare of women. A number of steps have been taken from time to time for this purpose. Whatever the result of these steps that is another issue but what has been done by the government reflects from the Five Year Plans prepared by the planners of Pakistan. Plan wise details are given as under.

5.4 Public Policies and Women's Development in Pakistan

Ever since the inauguration of the First Five Year Plan in 1955, policy formulation with reference to women has essentially been one of continuity and progression. From the initial five Year Plan to-dates, the successive government of Pakistan has shown concern for women's specific issues. However, the earlier plans reflected the low priority accorded to women's issues. This resulted in ad-hoc policy, which in turn is limited and isolated plans that did not throw up integrated solutions or help lay the foundational base to planning for women, as part of the overall national development objectives or planning. However, despite shortfalls, women related issues perforce had to figure in all the five years plans of Pakistan (First Five Year, 1955-60).

In village programmes, envisaged under the First Five Year Plan (1955-60) a beginning was made for the integration of women as agents of change in development at village levels. The First Five Year Plan provided maternity benefits for working women and staffing of primary schools with appropriately trained and educated female teachers.

The Second (1960-65) and Third (1965-70) Five Year Plans were broadened to cover wider areas of women's lives and activities. At the govt. levels, there was a greater awareness of women's creative potential and increasing acceptance and recognition of women's demands and aspirations. Hither to women in civil service were required to resign. In the Third Five-year Plan such discriminatory practices were withdrawn. However, with the exception of few civil services, the rest were out of bounds till 1973, when all services were opened to women (Second and third Five Year Plan).

The Fourth (1970-75) and Fifth (1978-83) Five Year Plans reiterated the need to expand female employment, however, there was no mention of specific policy measures aimed at enhancing work opportunities for women. However the plans did

provide for some income generation schemes exclusively for women, which were implemented by the social welfare department. The majority of these schemes taught women 'feminine' skills such as sewing and embroidery, which were primarily aimed at enhancing women's domestic roles and had little relation to market demand and employment prospects (Khan and Shaheed 1984).

Development planning from the fifties to mid seventies maintained a welfare approach to women. Though women were covered in these social welfare schemes they were not viewed as productive worker. Even within the narrow focus of providing social services to women the plan failed to achieve any significant success. Not only were initial allocations low but when it becomes necessary to cuts, were usually saved for the social sector.

The Sixth Plan of Pakistan for the first time included a separate chapter on women's development. The plan document declared, "In all societies, women's development is perquisite for overall national development indeed, no society can ever develop half-liberated and half-shackled".

The plan claimed to have adopted an integrated approach towards amelioration the deprived state of women, rejecting the notion of separate but equal development. Most of the programmes for women were to be integrated into the concerned sectors, not segregated. Specific government interventions were to aim at the elimination of three crippling handicaps of women viz, illiteracy, constant motherhood and primitive organization of work. The areas identified for this selective concentration were literacy, health and nutrition, employment, equity in jobs and rural uplift. These statements of the sixth plan were like a breath of fresh air, the approach to women's development was significantly different from the welfare approaches of the earlier plans.

The Sixth Plan (1983-89) proposed strategies in the areas of education, employment and health. In the field of education measures were adopted to motivate children's enrollment into primary schools and coverage 10 million women for literacy programmes. It also provided for designing of special programme to cover the widely scattered population of rural areas such as mosque schools or mobile schools. It also proposed measures for increasing employment opportunities for women in a limited sense. Related to women's health the Sixth Five Year Plan contemplated. One

birth attendant to be made available per village, within a period of 2-3 years.

Notwithstanding the brave statements of the sixth plan document the progress was not commensurate with the targets of the plan. In fact, except the training of female Para-medical staff, none of the other targets could be achieved. For example, instead of the target of 33% the plan aimed at a target of 10-15% reservation of seats for the recruitment of women, mainly by setting up of quotas, but nothing was heard about it during the entire plan period. So far as the supposed role of the women's division as a catalyst is concerned it was all but non-existent. In fact, examining the spectral programmes from the perspective of their impact on women, even the projects financed by the women's division itself could not be monitored and evaluated.

The Seventh plan (1989-93) continued with the integrated approach to women's development adopted in the Sixth plan. It reiterated the need for integration of women in development through the provision of equality of opportunity in education, health and employment and all other spheres of national life.

The Seventh Five-Year Plan carries a useful review of policy formulation pertaining to women related issues. It noted that planning for the development and welfare of women evolved gradually in Pakistan and initially was not even considered as requiring special attention, however, over a period of time, the government of Pakistan recognized that in spite of the religious, constitutional and legal rights of women, their position remained weak due to an ineffective framework for enforcing these provisions. It became clear that women's needs were not reflected in development planning. As a result, the planning process remained unresponsive to the development aspirations and needs of women. Though advances were registered in some selected social sectors like health, education, social welfare and planning, this Seventh Plan also identified the constraints on comprehensive planning.

The thrust of eight five year plan (1993-98) were (1) improving educational status (ii) expanding health facilities, and (iii) provide more openings for income generation. In addition removal of discrimination in education and employment and better information and communication of women issues, on their rights and responsibilities would be ensured.

The programmes were executed by the line departments and NGOs and the

Ministry of Women development will concentrate more on advisory role in policy making, planning and coordination. The Ministry will execute projects of national level like training of persons belonging to public private sector involved in women development and awakening campaign for women.

The Ten Years Perspective Plan (2001-11) while addressing the concern of all women with special focus on the need of rural women and low income urban women, the Plan reaffirms the principles of an integrated approach adopted in earlier plans through incorporating women's concerns in the policies and programmes of each sector. However, in a departure from past practice specific interventions are included in various sectors i.e. Economic Empowerment of Women, Women Access to social services, Raising campaign, awareness, strengthen Institutional modernism for women development.

Following the pattern set in the preceding plan the larger part of the development program for women was integrated into the various sectoral programs, however no estimate was provided of the expenditure to be incurred under the integrated program while total financial allocation for the special development program for women was Rs.900 million.

The renewed emphasis on women's development, which was initiated with the sixth plan, has fallen considerably short of its objective of strengthening women's participation in productive activity. Although some new initiatives have been taken in the field of training, and some tentative moves have been made toward evolving a more community based approach to women's development, closer examination of the plans does not indicate any substantive change over the earlier approach to the problem of women. The sixth and seventh plan continue to view women as recipients of programs related to health, education and social welfare and not as active participants in the development process. Whereas both the plans emphasized a multi-sectoral approach to women's development, the integrated program was mainly incorporated into areas of literacy, health and nutrition and education and education while the sectoral plans for agriculture, industry, employment do not address women's roles in these areas. The plans continue to treat women as consumers rather than producers more in need of social services such as health, education and nutrition rather than deserving special attention in productivity oriented program.

Despite the fact that the overwhelming majority of women are employed into agricultural sector and likely to be there for the next decade the plans gives scant attention to this area of female employment. At a time when the seventh five-year plan strategy in agriculture stresses the need for diversification to vegetable production and from transformation of the livestock sector no mention is made of women's roles as producers and processors in these sectors. Women's participation in these areas of agricultural production is well documented and the need is to raise their productivity in these existing roles.

The policies outlined in the plan documents are too limited in scope to serve as the basic of a program aimed at integration of women in development but are more in keeping with the traditional approach of viewing women as a backward disadvantaged group in need of a few remedial measures in the area of skill training, working women's hostels etc. even among these measures the more important policies such as the 10-15 percent reserved seats for women in government service, provision of credit to poor women, special incentives for hiring of women in the public and private sector etc. have not been adequately addressed as yet.

It was the celebration of the international Women's Year 1975, which provided the main impetus to the examination of women's issues from an equity or development perspective. The UN declaration placed a special emphasis on the integration of women in development with a special mandate to increase women's economic participation in development. Its call for integration of women in development process as equal partners with men was accepted by many countries. Pakistan was a signatory to the objectives of the Mexico declaration and was committed to promoting conscious public policies towards attaining this objective. This concern eventually led to the setting up of a Women's Division in 1979. Women division was created as a special organ of the federal government directly under the president and later the prime minister which reflected its importance in the organizational structure. In 1989, it was upgraded to the level of a ministry, called the ministry of women development.

The main objectives of the Ministry of Women Development (MWD) are to formulate public policies and make laws to meet specific needs of women; to ensure that women's interests and needs are adequately represented in formulation of policies

any various organs of government; to ensure equality of opportunity in education and employment and fuller participation of women in all spheres of national life; to undertake and promote research on the conditions and problems of women.

The primary role envisaged for the organization was that of a catalyst which was to initiate action by other government agencies. It was to ensure that in the formulation of policies the relevant ministries were responsive to the needs of women and thereby to ensure that women's concerns were integrated into the overall development program and not confined to some special programs for women. It also had a watchdog role of scrutinizing the plans and programs of policy formulation bodies from the perspective of their impact on women.

The ministry has not made any headway in initiating reforms in various important areas where the need for action had been stressed in its own documents (Hafeez 1983). These include the issues of enforcement of protective laws for female labour in the formal industrial sector; of the need to regulate working conditions of piece rate workers; of pressurizing the ministry of statistics to improve data collection methods to provide more accurate information on women's contribution to the economy.

However, the influence of the ministry of women development on policy making or on programs in department and ministries where the MWD is not financing or sponsoring projects has been minimal and in effect the ministry has not addressed this role with any degree of seriousness. This is not surprising since any institutional mechanisms or other means of leverage were specified through which a junior ministry like MWD was expected to exercise this power and influence over the policies and programs of the whole range of relevant ministries and departments.

The ineffectiveness of the MWD in influencing policies is clearly demonstrated in its failure to take action on specific measures, which are included in the sixth and seventh plan documents. For instance the sixth plan had set a target of 10-15 percent of jobs in the federal government to be reserved for women. Given this guideline of the plan, initiatives were needed to put the case forward and ensure that official directives from the relevant authority were circulated to all the departments/ministries of the federal government. The MWD, however, failed to take any steps towards translation of this policy into action.

In practice the ministry of women development has mainly concentrated on sponsoring special projects for women while its original mandate of influencing policies and programs across all relevant ministries has been pushed to the background. The role of the ministry has been that of a financier while the projects have been implemented by various provincial line departments and by NGOs and in most cases have also been designed by them. In this capacity the ministry has sponsored a number of projects comprising predominantly of small, low cost schemes. The financial outlay in most cases was in the range of Rs.50000 and Rs.3 million.

There has been very limited assessment of the performance of the MWD development program. Till recently the ministry had no adequate system of monitoring and evaluation of its various schemes. Some impact studies have however been conducted on various aspects of the program. The findings and the problems indicated by various evaluations of the MWD program (Khan and Shaheed 1984; Al-Jalaly 1987)

The majority of schemes sponsored could be categorized as 'typical women's projects, which are commonly associated with development efforts directed at women not only in Pakistan, but also across a number of countries (Buvinic 1986). The underlying objective of these schemes is to combine the provision of social services with some income earning activity. The projects usually deliver information on hygiene, nutrition, child health, education and some sort of skill training to a group of women. They have a strong welfare orientation and the type of training offered is usually geared to women's domestic roles and has little earning potential.

Nowhere was the ineffectiveness of the MWD more visible than in its role of safeguarding legal right. While an important stated objective of the women's division was to formulate laws to meet the specific legal needs of women in actual fact the most discriminatory legislation against women was passed during its tenure without any resistance or officially registered dissent from the organization. The only exception was during 1981 when the women's division protested against an unsuccessful attempt to annual the Family laws ordinance. Given its location in the bureaucratic structure the department's ability to have lobbied against legislation sponsored by the state was doubtful and unlikely. This was possibly also the reason

whereby it did not maintain any linkages with women's organization, which were actively involved in a campaign against the enactment of discriminatory laws and as such were considered anti-establishment group by some sections of the government.

5.5 Conclusion

The preceding discussion has underlined the large gap between stated intentions and actual implementation of programs and policies for women. Assessment of special efforts to integrate women into development through conscious public policies particularly the establishment of a special ministry for women indicates that the achievements in this regard fell far short of the stated objectives. Thus whereas initially the Ministry was expected to oversee the overall government programs and policies and ensure that women's interest were represented at every level, in actual fact it confined itself to funding a large number of small scattered projects which were peripheral to the main planning process. Even in terms of this limited objective its performance was poor as a result of an ad hoc approach without any clearly defined priorities or target groups, inadequate planning and poor implementation. The choice of projects did not reflect priority areas in women's development and there were major procedural shortcomings in the form of inadequate or no planning and poor implementation.

The limited financial allocation was in keeping with the promotional nature of the ministry's functions, which were primarily meant to initiate projects and policies in the various other government departments. However the ministry never had the administrative clout to address the role of a catalyst effectively. As mentioned earlier no institutional mechanism was specified which would enable it to influence the policies and programs of relevant ministries/departments given the lack of resources and power of the MWD significant arena.

Hence, if the ministry is to effect a significant change in the situation of women in Pakistan it will have to move beyond funding projects and strengthen its original role of watchdog and lobbyist to ensure that women's interests are represented in the overall development program of the country. The MWD can only bring women from out of the periphery of development if it can exercise influence on the program and policies of the other ministries. It is only through liaison with the entire government structure that the ministry can make any impact on the situation of

women.

To effectively fulfill these objectives various suggestions can be made for strengthening the institutional framework for women's development. These include interventions such as incorporating women's concerns in the assessment procedures for all relevant projects not just those financed by the MWD, ministerial level coordination committees, greater allocation of technical expertise, induction of influential and competent persons in top administrative positions etc. however, ultimately major changes in the institutional structure and a reorientation of the priorities of the bureaucracy will depend on the political will of the government. Whereas pressure from international agencies may lead to the inclusion of women's issues on the development agenda, in the absence of political pressure at home it will not lead to changes such as greater allocation of resources and a position of power in the bureaucratic set up necessary to ensure action.

In conclusion, policies and programmes for rural women have come from international development agencies as well as governments and there have been successes and failures as well as ambiguities and contradictions. This is partly due to the fact that many of the programmes proposed to assist rural women are, at the same time, stop-gap measures to tackle some of the more visible outcomes of underdevelopment such as rural poverty and marginalization, the need to persuade economic planners of the certainty of pay-offs involved in assisting rural women on their own terms and within their own frame of reference reinforces the image of women as instruments of development rather than social and political subjects in their own rights. While the package or target group approach to rural women might produce effects in the short term it can be no substitute for development strategies with a serious commitment to tackle the mechanisms reproducing inequality and poverty. These strategies need to be informed by an acute awareness of the culturally and historically specific forms that women's subordination takes and animated by the will to struggle of the women themselves.

CHAPTER 6

THE ROLE OF NON-GOVERNMENTAL ORGANIZATIONS IN RURAL DEVELOPMENT

6.1 Introduction

As already mentioned that in addition to the public sector organizations, a number of NGOs are working for the development of different sectors of the economy. Some of them are involved in the development process nationally while some are working at regional level. This chapter describes the conceptual framework of the NGOs and the role of major NGOs working in the country in general and in NWFP in particular. Special focus will be given on those NGOs who are mainly engaged for the welfare of rural women in province.

The term Non-Governmental Organization (NGO) encompasses all organizations that are neither governmental nor for-profit making but are working in an organized manner to help fellow human beings. The idea of personal or organized private efforts is as old as the hills and has found expression everywhere and in all religions and ideologies. Traditionally such efforts in our society took the shape of charitable activities pursued by individual philanthropists such as societies or trusts set up by like-minded public spiritual persons like Gulab Devi Hospital, Anjuman-e-Himayat-e-Islam etc. Until the middle of the 19th century, self-help and mutual cooperation were the tribal norms. There are many reasons for this phenomenal growth. A major factor is the realization that with meager funds at its disposal the government cannot provide all the welfare facilities as well as effectively do developmental work. Citizens have stepped in to fill the gap and supplement government efforts. It is also recognized that private voluntary efforts can achieve better results at a lesser cost by improving the quality of life of the marginalized sectors of society and help increase human dignity through addressing people's need for a sense of identity (Social Development in Pakistan 1998).

This significant shift has particularly noticeable since 1970. First in the developed countries and later on in the developing nations. The economic crises triggered by escalation of oil prices weakened the prospects of welfare states in the west to a considerable extent, giving rise to a new kind of private voluntary efforts.

The result was the emergence of new movements espousing causes such as women's development, human rights and pollution-free environment.

Over the past three decades, NGOs have emerged to assume a broader and increasingly important role in development. NGOs have expanded significantly in number, size and degree of influence, and their scope of work has widened to the extent that its involvement and concerns address nearly every human need and endeavor. The degree of professionalism that NGOs display continues to increase, and are gaining access to significantly large amounts of resources, both financial and human. Recognized as an important force in development, NGOs have assumed a significant position in the development of community, independently and in partnership with government's development institutions and donors.

NGOs in the developing world are growing rapidly in number and quality. Most NGOs share a common vision to reduce poverty, advance human development; and manage natural resources in a sustainable fashion. They believe that local participation and control is important to the success of sustainable development.

Broad and effective partnership between governments and non-governmental organization is essential for formulation, implementation, monitoring and evaluation of population and development objectives and activities. NGOs are becoming increasingly important players in family planning, environmental and developmental policy making in the developing world. NGOs can be a truly independent voice, either by serving as a focal point for people or by serving as models for new government programs and can place pressure on governments to create and implement new policies.

Currently, more than 30,000 indigenous grass-roots support organization are working in the third world in the fields such as enterprise development, health care, women's rights, population control and environmental protection.

6.2 NGO'S Working in Pakistan

NGOs are working throughout Pakistan in a wide-ranging set of activities, offering a diverse portfolio of opportunities. There are about fourteen thousand registered NGOs in Pakistan and unaccounted larger number of unregistered organizations. Out of these, 7000 are working in Punjab. 4500 in Sindh and the rest

are registered under the societies registration Act. Approximately 70% of NGOs are located at urban areas and the remaining 30% in the rural areas. More than half are working at the community level, about 25% at the district and Tehsil level and about 50% at the national level.

Some of these NGOs are purely welfare oriented, and were formed primarily as charity organization. Many others are involved in poverty reduction which is a loosely defined objective that may include mainly community based strategies to improve income-generation opportunities, skills development, savings and credit type initiatives, social sector development, and other activities falling under the broader objective of reduction in poverty of the target population. NGOs in this category are mainly engaged in direct service delivery as well as facilitating service delivery through linkage with Government line agencies.

Pakistan's NGOs community is still young and relatively small in relation to its counterparts elsewhere in South Asia. It is marked by a paucity of support from international NGOs, and by a much greater reliance on bilateral and multilateral donors than is the case elsewhere. Until recently, Pakistan's NGOs community was dominated by two giants with very different origins and outlooks; i.e. the Agha Khan Rural Support Program (AKRSP) and Edhi Welfare Trust.

First and most important has been the role of NGOs in social organization. AKRSP, National Rural Support Program (NRSP), Sarhad Rural Support Programme SRSP, and Baluchistan Rural Support Programme (BRSP) are leaders in the field. Except AKRSP, others are mostly government sponsored NGOs but this does not limit their utility. Several international NGOs such as International Union for the Conservation of Nature (IUCN), World Wild-life Fund (WWF), Agha Khan Foundation (AKF), and others have brought out sustainable partnership with local NGOs. This form of social organization has been an enabling process for the communities to put together their act and pool their resources for self-development in the villages.

There are three main types of NGOs working in the area rural development in Pakistan. The first are the national level capacity building and/or funding organizations. These include the Trust for Voluntary Organizations (TVO), Strengthening Participatory Organizations (SPO) and the NGO Resource Center

(NGORC). The second are the implementing support organizations such as Sungi Foundation and Pattan. These work directly with community-based organizations in specific regions, helping them to shift from welfare orientation to participatory development, and supporting their development project. The third type are the NGOs that are involved in Rural Support Programs (RSPs) and follow the model of the Agha Khan Rural Support Programme in forming village or community organizations. Prominent examples are the National Rural Support Program, the Sarhad Rural support corporation, the Balochistan Rural Support Program, the Pak German Integrated Rural Development program in Mardan, Kalam Integrated Development Project and the Social Forestry Project in Swat. The NGOs working in Pakistan can be classified as follows.

6.2.1 Welfare Oriented NGOs

Welfare oriented NGOs are primarily philanthropic institutions working with vulnerable groups. Examples of leading welfare organizations in Pakistan are the Edhi Welfare Trust and the Ansar Burney Welfare Trust. The Edhi Welfare Trust runs a network of relief services all over the country and has also been recognized internationally, while the Ansar Burney Welfare Trust started as a human rights advocacy group working for legal reform, particularly jail reforms, but has since branched out into a range of welfare activities targeted at prisoners and their families in particular.

6.2.2 Social Sector Service Delivery NGOs

NGOs and other civil society organizations focusing on social sector development, or those limited to a sectoral focus on health or education, are numerous. These include such prominent organizations as the Family Planning Association of Pakistan, Social Marketing Pakistan, the Agha Khan University Community Health Programs, Agha Khan Health Services, Agha Khan Education Services, the Society for Advancement of Health and Education, Bunyad Literacy Council, the Hamdard Foundation and many others. Most NGOs are engaged in direct service delivery as well as facilitating service delivery through linkages with Government line agencies. Besides these NGO efforts, there are other private initiatives such as the Shaukat Khanum Hospital, the Kidney Center, and the Layton Rehmatullah Benevolent Trust, which are very active.

6.2.3 NGO's Engaged in Rural Development in Pakistan

A number of NGOs are implementing integrated rural and urban development programs in different parts of the country and provide a range of developmental services. Most of these have adopted a participatory approach and work closely with local communities. Amongst the more prominent development NGOs are the Agha Khan Rural Support Programme (AKRSP), National Rural Support Programme (NRSP), Punjab Rural Support Programme (PRSP), Sindh Rural Support organization (SRSO), Sarhad Rural Support Programme (SRSP), Baluchistan Rural Support Programme (BRSP), and the Thardeep Rural Development (TRDP), Sungi Development Foundation, and the Orangi Pilot Project (OPP).

The organizational model upon which the RSPs in Pakistan are based, consists of three key elements: a program, willing participants, and a support organization. The RSP approach is to bring these three components together by developing a participatory program that serves the needs of the beneficiaries or participants through fostering community organizations at the grassroots. The RSP itself serves as a support organization that provides interventions through community organizations. Interventions or "packages" are tailored to meet the needs of the rural communities through a process of participatory identification, planning, implementation and management that is undertaken through the community organization platform. Broadly, the RSPs use a threefold approach that emphasizes social mobilization or organization, building up of capital through regular savings, and human resource development to increase the capacities of the rural communities to undertake their own development. In recent years, this approach has broadened in scope to include a fourth component that is to promote and strengthen linkages between community organizations and other development partners including Government.

A brief description of the major rural support programmes working in Pakistan (except NWFP which will be discussed in a separate section) is given as under.

6.3 National Rural Support Programme

Established in 1991, NRSP is the largest Rural Support Programme in the country in terms of outreach, staff and development activities. It is a non profit organization registered under Section 42 of Companies Ordinance 1984. Its mandate is to alleviate poverty by harnessing people's potential and undertake development

activities in Pakistan. It has a presence in 32 Districts in all the four Provinces including Azad Jammu and Kashmir through Regional Offices and Field Offices. Currently it is working with more than half a million poor households organized into a network of more than 29,000 Community Organizations. With sustained incremental growth, it is emerging as Pakistan's leading engine for poverty reduction and rural development (NRSP Annual Report 2005).

6.3.1 Vision and Purpose

NRSP works to release the potential abilities, skills and knowledge of rural men and women, to enable them to articulate their aspirations and to effectively marshal the resources they need to meet their identified needs. The purpose is poverty alleviation - enabling people to break the circle of poverty, which begins with lack of opportunity, extends to the well-known miseries of economic and nutritional poverty and leads new generations to endure the same conditions. The process is social mobilization - bringing people together on new terms for a common purpose. The conceptual tools are 'social guidance' (recruiting local men and women who will take on a leadership role), advocacy, capacity building and awareness rising. The programmatic tools are training, support to institutions, micro-credit, infrastructure development, natural resource management and 'productive linkages'.

NRSP purpose as an advocate for the poor is to bring the concerns of economically marginal men and women to public consciousness and to affect policy so that the poor are brought into the mainstream of the economy.

NRSP's vision is manifested in expanded opportunities for income-generation; community schools which provide quality primary education, community owned and managed infrastructure schemes, improved agricultural productivity, and higher returns for labour and so on. From the widest perspective the vision is manifested as the first stages of transformation of civil society.

Till July 2005 a total of 522,836 rural men and women decided that it would be to their advantage to take part in NRSP's social mobilization process, believing it to be the best way to address the problems of poverty and under-development in their

villages. For both new and long-term community organization (CO) members, participation brings about new levels of awareness concerning service provision and infrastructure development in their villages. CO membership also helps people to improve their asset base, by increasing both their income and their 'social capital'. This might be brought about by adding land to their holdings, increasing the number of animals they own, pooling economic resources to buy new and-improved inputs and equipment for farms or businesses, or diversifying the stock for their small shops. CO participation enables people to accumulate savings. It gives the rural poor access to an affordable financial service (micro credit) that is designed specifically for them. It provides an outlet through which to invest their savings for household needs and community development schemes. For some of the very poorest and most vulnerable people, such as the former bonded labourers in the NRSP-ILO Project in Hyderabad, NRSP membership provides the possibility of achieving a foothold on a more certain and improved economic future.

CO membership enables rural men and women to greatly expand the purchasing power of their savings and other assets. The best example is NRSP's partnership with the Pakistan Poverty Alleviation Fund, in which the CO's contribution of 20% of the cost of a community physical infrastructure scheme is multiplied fourfold by the PPAF grant. As of July 2005 a total of 281,101 rural households benefited from these CPIs: in all, CO contributions of Rs. 340,711,213 were parlayed into schemes worth Rs. 1055,192,435. NRSP works in 32 Districts that encompass diverse socio-economic, geographical and cultural conditions is evidence that the paradigm of social development, which NRSP embraces can be, applied successfully anywhere. (NRSP 2005)

6.3.2 Objectives

The main objective of NRSP is to foster a countrywide network of grassroots level organizations to enable rural communities to plan, implement and manage developmental activities and programmes for the purpose of ensuring productive employment, alleviation of poverty and improvement in the quality of life. NRSP is designed in such a way that it specializes as a support organization, which provides social guidance to the communities. The guiding tenets of NRSP's philosophy are to organize rural communities develop their capital base at the local level through savings and credit schemes, support human development endeavors and link the

communities with the government service delivery departments, donors, NGOs and the private sector.

6.3.3 Strategy and Approach

To harness people's potential and to mobilize people's willingness through the provision of social guidance, NRSP takes the following steps: Relying on local perceptions, a poverty profile is prepared to assess the intensity of poverty prevailing in the community that seeks social guidance.

The willing community is introduced to the philosophy of NRSP, based on which the community organizes itself into a socially viable group called the community organization (CO). In view of the information provided by the poverty profile, an attempt is made to encourage the poor to join the CO.

During initial interactions with the community, genuine activists, who have an ambition to support their communities in their quest to overcome poverty, are identified. Following the identification of an activist, a micro plan for each member is developed to see what he or she is willing to do on his/her own. Along with catering to the individual needs, group level and village level needs are also identified. A thorough analysis of each is conducted in view of available resources and constraints to assign priorities to the identified needs.

The next step after the cost-benefit analysis is the arrangement of the desired resources to address the priority needs. These resources are pooled by the community, provided by the support organization or managed through other stakeholders like private and public sector service delivery departments, NGOs and donors.

6.3.4 Programme Philosophy

The core assumption of NRSP's philosophy is that there is a tremendous willingness amongst the people to help themselves. Social guidance initiates a process wherein the communities learn to organize into socially viable groups, enhance their skills, expand their collective and individual resource base and optimally utilize their available resources. The idea behind the process of social guidance is to find out what people really want to do themselves and to assess whether whatever they want to do is possible while keeping in view the resource constraints. If it seems that the identified activity is practical, then NRSP assists the community in arranging the desired

resources, which may be credit, technical assistance, or specialized skill training for overcoming those constraints.

6.3.5 Community Participation

The NRSP was set up as a Rural Support Programme, which has taken the lead in the creation, promotion and support of effective and disciplined community organizations to manage rural development in Pakistan on a nationwide level. Wherever possible, existing or proposed organizations of the communities have also been used or incorporated into this effort provided that they were willing to operate in accordance with the principles and terms of partnership offered by NRSP.

6.3.6 Mainstreaming Gender and Development

The low social and economic status of rural women and their significant contribution to the household and village economies in most areas of Pakistan are well known facts though not as well documented. It is generally agreed that their concerns and problems should be integrated into all rural development plans and programmes since their equal partnership with men alone can ensure a balanced development of society. Field visits have shown that the oft-cited constraints on women's involvement in the development process can be overcome. There has been significant progress in terms of changes in the attitudes of men to gender segregation, as is evident from the growing demand for education for girls. Education can and will make a big difference in the lives of women as well as in their relationships with men as equal partners. Similarly, with the rapid expansion of male education in the villages, there are clear signs of change in attitudes to the protection of female health and family size. It is fair to say that in many rural communities the constraints on female education and health care are on the supply and not demand side (Mahmood Hassan Khan 2003).

6.3.7 Gender and Development

At NRSP gender is a crosscutting theme. This requires gender integration into policy planning, programming, implementation and evaluation. We believe that our efforts to reduce poverty cannot achieve their full potential unless we address the constraints that limit the capabilities of men and women to improve their standard of living and quality of life. The key aspects of this are:

Recognizing and harnessing the full potential of rural men and women, increasing men's and women's productive capacities, reducing the barriers which limit men's and women's participation in the economy and in society. The following principles guide NRSP's policy on gender mainstreaming:

NRSP realizes that addressing gender inequality as a crosscutting theme requires that women's views, perceptions, needs and aspirations shape the development agenda as much as those of men.

Gender equality requires recognition that every policy, program and project affects women and men differently.

Partnership between men and women is necessary if a wider variety of choices are to be provided. Partnership involves working with men and women to bring about changes in attitudes, behavior, roles and responsibilities at home, in the workplaces, communities and in society at large.

Empowerment enables women and men to identify unequal power relations and unequal access to and control over resources and the implications of unequal power relations for a prosperous society. Empowerment begins with consciousness-raising and leads to self-realization.

An effort to promote sustainable human development, achieving gender equality does not mean that women become the same as men. Rather, it is a conscious effort to ensure that one's rights or opportunities do not depend on being male or female. NRSP is aware that its efforts and contributions to poverty reduction must be coupled with actions to eliminate gender inequalities in order to promote sustainable human development.

6.4 Balochistan Rural Support Programme (BRSP)

Commenced operations in 1991, were reorganized in 2001, and have presence in Balochistan. The BRSP is a non-profit organization, working in the geographically largest, and population wise smallest province of Pakistan. BRSP has funding support from the Pakistan Poverty Alleviation Fund (PPAF). BRSP is focusing predominantly in the northern districts of Balochistan and one district in the south. The intense demand in various parts of the province for expansion of BRSP's programmes is an encouraging indicator of its widespread acceptance by the rural poor, as well as of the

enormous development potential that remains untapped. Major programme components of BRSP include social mobilization, human resource development, credit and savings programme, enterprise development, community infrastructure schemes, basic health and girl's community based schools. The BRSP's development programmes are based on the principle of diminishing external financial support in conjunction with strengthening village organizations as the indigenous long-term vehicles for improving the quality of life of the disadvantaged rural population, especially women (BRSP Annual Review 2005).

6.5 Punjab Rural Support Program (PRSP)

Operations commenced in mid-1998 and areas of operation are confined to the Punjab. Punjab Rural Support Program was the latest of the RSPs until SRSO was established in 2003. PRSP's activities are confined to 8 regions of the Punjab, namely: Lahore, Sahiwal, Sargodha, Faisalabad, Gujranwala, Multan, Muzaffargarh, and Sialkot, covering a total of 20 districts. The PRSP has developed strong links with the Punjab Government and is currently implementing a number of projects including community primary schools, small village infrastructure, natural resource management and innovative initiatives such as village electrification and provision of primary healthcare. PRSP has developed a strong partnership with the Pakistan Poverty Alleviation Fund to expand its outreach. Core funding for PRSP is provided by an endowment setup by the Punjab Government. For its micro-credit programme PRSP secured a credit line for Rs. 500 million from the Habib Bank Limited, which was later swapped with a credit line from the United Bank Limited. PRSP also initiated a major partnership with the World Bank/Pakistan Government financed Pakistan Poverty Alleviation Fund (PRSP Annual Report 2005).

6.6 Sindh Rural Support Organization (SRSO)

Launched in July 2003 --- Works in the province of Sindh. The Sindh Rural Support Organization is the newest RSP that has been established. It was incorporated as a non profit joint stock company under Section 42 of the Companies Ordinance 1984 at the behest of the Government of Sindh. SRSO is an apex organization at the provincial level for poverty alleviation and participatory development. SRSO has launched its operations initially in five districts namely, Sukkur, Khairpur, Jacobabad, Ghotki and Shikarpur. Its objective is to foster a framework of broad based grass roots

institutions in the form of viable Community Organizations (COs) so that these COs are able to undertake various development activities for improving their quality of life. Communities would become involved with need assessment, prioritization of micro projects and creation of community based action plans. SRSO would operate on the basis of a decentralized union council based social mobilization model. The essence of this model is that social mobilization and credit operations are carried out separately. The Government of Sindh provided an allocation of Rs. 500 million as an endowment to set up SRSO with active lobbying support of RSPN (SRSO Annual Report 2005).

6.7 NGOs working in NWFP

The populace Histories communities of NWFP have a history of communal participation at the village level as part of their survival strategy. The rugged illiteracy, poverty, social problems and other factors resulted in evolution of social systems whereby communal participation became the norms of the day as part of the survival strategies. There is an ancient NGO tradition in Pukhtoon villages that includes the mosque and the Jirga among other institutions. Certainly traditional villages' governance in the NWFP has strong elements of dialogue and consensus that are hallmarks of the participatory process. In the villages these institutions still exist and perform their role as they used to perform in the past. Regarding the self-help element in social welfare and development, the advent of British occupation transformed this as the state assumed a paternalistic role resulting in increased dependence on the state and decreased self help initiative (Khawar, 1997).

The government of NWFP has been the most progressive of all Provinces in Pakistan in giving a significant role to communities and NGOs in development works. Recognizing the virtue of spontaneousness and flexibility of NGOs, the government is providing and enabling environment for NGOs to operate freely and responsibly. To this end government of NWFP has adopted and implemented an NGO policy whose main elements are described here.

First the NGOs are not subject to government regulations that who depress their initiative or take away from them the freedom or flexibility to operate to prevent recourse to regulation, NGOs are encouraged to be more transparent and accountable in their operations. Financial sustainability of the NGOs will be encouraged.

Government funds, where available are provided preferentially to those NGOs who put up counter part resources. The government; involves NGOs at all levels of decision-making. At the policy level, NGOs are given meaningful representation. At the district level, NGOs are associated with District Development Advisory Committees.

Both the government and NGOs in the NWFP have recognized the need to coordinate their work in providing the benefit to local and target people. At provincial and district level, NGO, government coordination councils need to be setup. The members of the coordinating bodies will aim to be aware of and coordinate each others work plan; to receive input from line departments for NGO work, to allow the government to be responsive to concerns express by NGOs; and to get NGO support for greater community participating in development work carried out by the departments. The major NGO's working in NWFP engaged in rural development particularly, women development are AKRSP, SRSP, Sungi Foundation, Aurat Foundation, All Women Advancement And Resource Development (AWARD), De Las Gul (DLG) and Khwendo Kor.

Some of these NGOs are working for general rural development with a component for women development. For example AKRSP, SRSP, and SUNGI Foundation, while some are mainly meant for women development such as Aurat Foundation, AWARD, the Las Gul, and KHENDO KOR. A brief description of these NGO's is given as under.

6.7.1 The Agha Khan Rural Support Programme (AKRSP)

The Agha Khan Rural Support Programme is a private, non-communal and non-profit company, established by the Agha Khan foundation, and presently funded by a consortium of international bilateral and multilateral donors, to help improve the quality of life of the people of the northern areas and Chitral. It was established in 1982 with the mandate to focus on economic and institutional development of local communities in collaboration with Government department, elected bodies and national and international development agencies. AKRSP has, over the years, acted as a catalyst for integrated rural developments, organizing local, human, physical and financial resources in order to enable communities to bring about their own development in an equitable and sustainable manner. Major programme components include social organization, women's development, natural resource management,

development of productive physical infrastructure, human resource development, enterprise promotion and credit and saving services. (AKRSP Annual Review 2005).

The programme began its activities from Gilgit in 1982 and expanded to Chitral in 1983, Baltistan 1986, and Astore in 1993. At present, AKRSP is working in all districts of Northern Areas covering more than one thousand villages.

6.7.1.1. Main Objectives

- Organization and collective management.
- Up gradating of essential skills, through human resource development.
- Generation of capital through savings.
- Raising the income and quality of life.
- Developing institutional and technical models for equitable development.
- Involving sustainable and long-term strategies for productive management of natural resources in dry and fragile environment.

6.7.1.2 Programme Components of AKRSP

i) Social Organizations

Under Social organization the villagers accept the terms and conditions offered by AKRSP and form broadly based participatory village organizations. On behalf of AKRSP the task of helping the Village and Women Organizations (V/WOs) is undertaken by field based social organizers (SOs). The social organizers (SOs) interact on regular bases with V/WOs to promote cooperative to endeavor encourage the accumulation of capital, upgrade management skills and identify activities for development work.

ii) Women's Development

AKRSP's participatory approach to development is based on social organization, capital formation and skill development of local communities. These fundamental principles further lead to institutional development in the form of broad based, multi-purpose Village Organization (VO) and Women's organization (WO) productive physical infrastructure.

AKRSP has followed a two-tier strategy for women's development. The first tier encompasses strategic designed for broad-based economic and social development of villages and valleys in the area through empowering household units

in an integrated and holistic fashion. In recognition of the fact however, that while household level development strategies may sometimes still result in a less than equal conferment of benefits to individual members.

The second-tier of AKRSP's development strategy has focused exclusively on women as a target audience. Still in doing so AKRSP has sought to look at women's development issues from a structuralize gender perspective taking into account institutional factors and the social and natural canvas while developing women-specific activities and programmes.

At the same time, there has been heightened awareness in the organizations that meaningful development of the community requires the active participation and ownership of both male and female member of society. In other words, as the saying goes, it is not so much that women need development but that development itself needs women for it to be viable and sustainable.

In 1983, when AKRSP started working with the village women, the documentation of that time used the phrase "Stumbling over Stereotype". This was because AKRSP built upon the existing culture. For instance, the farming system in the area is family oriented and women share a major responsibility in farming. Women are responsible for livestock management, vegetable growing, poultry rearing, weeding, wood gathering and carrying potable water. Whenever the men go outside the village in search of wage labour, women's role extended to sowing and harvesting. The concept of women's wage labour does not exist in the area because of gender segregation as well as their intensive reproductive role in the joint family system. The unavailability of a single literate woman was a normal phenomenon when the management team of AKRSP visited the villages. The women of the villages demanded a school for girl as their primary need. However, the question of who would teach the girls remained a problem as male teacher's teaching their daughters was not acceptable to the parents (AKRSP, 1982). The World Bank Evaluation team has also mentioned this challenging role of AKRSP by saying that "AKRSP is clearly an NGO leader in Pakistan stressing the active involvement of rural Muslim women, and fostering positive changes in their role and status in both household and community". In this conservative social environment, however, this is a difficult task" (AKRSPs 1995: 79).

iii) Mountain Infrastructure and Engineering Services

Primarily, the prime focus of the programme was to organize the communities so that they could identify and manage their development priorities. Keeping in view the barren landscape of the areas, most of the communities identified the need for productive infrastructure development. The AKRSP responded by offering to work in partnership with communities to help to design and construct what is called the productive physical infrastructure (PPIs) projects. The schemes include Hydel-power projects, micro-Hydels, irrigation channels, link roads, bridges and protective bunds.

iv) Natural Resource Management

In order to implement a sustainable and integrated approach for the conservation and management of the programme area's natural resources. The AKRSP initiated its Natural Resource Management (NRM) programme. Such an integrated approach has integrated and strengthened the technical activities of the agriculture, livestock and forestry section, which in the past designed and implemented packages in isolation.

The organization's early work concentrated on provision of input supplies such as seeds, saplings, new breeds of livestock and fertilizers in addition to developing technical skills in related fields. Later on, the organization's role shifted from an input supplier to that of supporting privatizations of input supply and services by providing technical support and creating marketing channels. At the same time, communities and AKRSP became active in broad range natural resource conservation activities. Achievements are; nonetheless evident increased production of high value crops, reduced farm losses, improved livestock management skills, greater forest covers, and village conservation plans across the programme area.

v) Human Resource Development (HRD)

Human resource development is one of the key principles of rural development, which AKRSP has taken care properly. The basic objective of AKRSP's, HRD effort is to develop human resources that will provide improved skills and competence for personal and community development, for self-fulfillment, and for enabling village organizations to take increasing responsibility for their affairs.

vi) Enterprise Development

The transition from subsistence to a semi-commercial economy has created a potential market for farming products within the programme area. The Enterprise Development Section (EDS) is exerting its effort to develop a capacity and an enabling environment in the region for the growth in existing businesses and stimulate the creation of new enterprises. EDS efforts have led to increase in incomes, increase in new sources of income, creation of jobs, creation of new and growth of existing enterprises, increase in exports and promotion of enterprise culture in the region. Focusing on the storage of fresh fruits, promotion of dried fruits, development of local handicrafts, opening marketing channels through wholesale markets, and providing training in enterprise development are the major activities of this section.

vii) Credit and Saving

AKRSP's credit and savings programme demonstrates the ability of small farmers to accumulate capital through disciplined and regular savings. The ultimate goal of AKRSP's credit and saving programme is to develop a sustainable system of credit and saving for small farmers at the grass root levels. The credit programme aims at equitable access to credit to meet the needs of the WWOs members through appropriate credit management system. The saving programme further aims to create a large capital base in the area.

viii) Information and Reporting

For maintaining a continuous raise of its development activities AKRSP has its own monitoring, evaluation and research cell, which pinpoints loophole and gives recommendations for its improvements.

6.7.4 Sarhad Rural Support Programme (SRSP)

Sarhad Rural Support Programme was established in 1989 as private (guarantee) Limited Company. It has Six Programme Regions located in South and North of NWFP. These six regions are Charsadda, Kohat, Mansehra, Abbottabad, Peshawar and Chitral. It has a Board of Directors (BOD), which have enriched experience in and an un-relinquishing commitment to people centered development. The experiences are as farmers, entrepreneurs, past experience with the highest echelons of the government, environmentalists, sociologists and technocrats. The Board sets the policy, monitors its implementation and provides timely feed-back on

programme implementation. The next tier is the management, which is at the Head Office as well as heading the regional teams. The regions are completely decentralized in terms of operation, staff matters. The budget is allocated to the regional programme managers (RPMs), which they manage for effective implementation of the programme. The core management at the Head Office provides backstopping support to the regions, streamline systems of finance, HRD, PMER, engineering, social sector and gender, monitor programme progress and give feedback to the BOD. It has a total of 398 staff members, out of which 63 are women. From the total, 237 are professionals and out of these 25% are professional women.

The physical landscape of Sarhad Rural Support Programme ranges from the lowest planes of Karak District in the South-NWFP with an elevation of only 600 meters to as high as 3,658 meters of Chitral District in the North-NWFP. SRSP is operative in eleven out of the twenty-two districts of NWFP. These eleven districts are spread over an area of 35,437 Square Kilometers. The eleven districts have a combined population of 8.6 million. There are 446 union councils in the eleven districts. (SRSP Annual Review 2005).

6.7.5 Objectives

- Develop institutional and technical models for poverty reduction, sustainable, equitable and engendered development
- Raise the income and quality of life of people, especially the poorest of the poor men and women, living in its programme, area
- Provide an effective and, cost efficient service delivery mechanism for the government and the donor agencies in order to reach the rural poor.

6.7.6 Strategy and Approach

Following are the areas where these communities need Social Guidance:

- Organizing themselves into communities for pooling of resources, cutting of overheads, achieving economies of scale.
- Helping in identifying true and genuine activists from amongst the community. It is only they who can harness the potential of the people not the outsiders.

- Identifying and prioritizing what people are willing to undertake in terms of opportunities and needs but not demands which have to be provided by outside agencies.
- Undertaking feasibility studies of identified opportunities and needs in terms of people's capacity, willingness, equity, sustainability and requirement of resources with availability within and from outside of such resources.
- Arranging, securing and facilitating flow of required resources to the community; and
- Monitoring, lobbying and establishing linkages between communities and other development agencies, such as government development departments, district councils, union councils, NGOs and donors.

6.7.7 The Programme Area

The selection of SRSP's initial programme areas was based on a region's level of poverty and willingness of rural communities to become partners of SRSP. The districts of Charsadda and Kohat of NWFP were selected as initial potential programme areas of SRSP in November 1989. Later on SRSP extended its activities to nine other districts of NWFP, Battagram, Hangu, Karak, Abbottabad, Haripur, Peshawar, Nowshera and Chitral. District 'Chitral has been included under Community Infrastructure Initiative Project (CIIP) funded by DFID. The eleven districts, excluding district Chitral, in which SRSP is working, have a combined rural population of about 6.6 million.

6.7.8 Major Programme Components of SRSP

6.7.8.1 Social Mobilization

Social exclusion of people in the process of development is marginalizing a fair majority in vital decision-making. When people are willing to participate, they are presented with avenues of income elastic opportunities. The governing principle of willingness of the people is the driving force behind mobilizing them. This principle is the basis of social guidance approach synonymous with the rural support programmes. Experience has shown that people are willing to help themselves, but there is need to harness their potential. They need support, in terms of providing a direction in which to proceed and technical expertise for achieving their desired goals. Once a community is willing to help themselves, the community institutionalizes the

process of collective thinking by forming organizations for men and separately for women in the village.

Collective thinking is much better than individual. Together people meet, plan, implement, maintain and reap equitable share of benefits from joint planning. Such planning also takes between the community organization and women organization belonging to the same village. The vision of the village as a whole broadens and creates for itself income-generating opportunities. These opportunities, and means to harness people's potential towards realizing those opportunities, provide an excellent conduit for bringing appreciable change in their otherwise stagnant social and economic life.

In the whole process of social guidance, emphasis by the community is to focus first on poorest of the poor amongst them. The events leading up to the introduction of the social guidance approach and a typical example as a consequence of it. It is their endeavor to address their needs on priority basis. All the resolution that is communicated to the FSO/SOs for requiring external resources is initially that of the poorest of the poor. The 'Portfolio of Opportunities' is a mechanism to ensure that the needs of the poorest of the poor are identified by the community and are documented.

6.7.8.2 Physical Infrastructure, water and environmental sanitation

PI and WES schemes are crucial to SRSP interventions in the field. Community participation in designing and implementing a PI and WES Infrastructure, water and environmental sanitation project plays a vital role in the consolidation of the village level organization. The objectives of the PI and WES are:

- To increase the income of the poor
- To empower the poor, especially women
- To increase the access of the poor communities to infrastructure for improving the livelihood
- To involve the local stakeholders in identification, Planning, execution and monitoring of physical infrastructure projects.

- To demonstrate the acquired capacity of the communities to other agencies.
- To enhance capacity of local communities.
- To create sense of ownership and responsibility.
- To strengthen the institutional capacity of the community organization in relation to the preceding objectives

The PI and WES is an investment in the C/WO based on the principles of equity, productivity and sustainability, that the benefits of the PI and WES should flow equitably to the community members and that the project should enhance local productivity and by eliciting community participation.

6.7.8.3 Credit and Enterprise Development

The credit and enterprise (C&D) programme is designed to increase rural community's access to credit for productive purposes. In this context, the credit programme helps the members of C/WO's to meeting their credit needs by arranging access to credit through its own and institutional credit sources. Furthermore, the CED programme encourages micro-enterprise development to achieve higher productivity and increased incomes for the rural communities. Additionally, the CED helps institutionalize marketing systems within and with C/WOs for a sustainable and self-generating demand for community products and services.

The credit and enterprise development section of SRSP, aims to address the traditional neglect of the rural poor by institutional credit sources, by providing rural communities with easy access to credit. SRSP provides loan to individuals against group guarantee. Small loans required by the community /women organizations are given through a process of identification of deserving member (with a primary focus on poorest of the poor) by these groups. A group generally has a president, secretary, an activist and around 30-35 members from the village. To apply for a loan, the group comes up with a resolution in its general body meeting, which is also attended by a social organizer /credit officer of SRSP. In the meeting, a group recommends number of borrower for loan disbursal by SPSP. B borrower' social as well as technical appraisal is carried out accordingly. Normally 25-35% of the group members avail the credit facility. Till December 31, 2005 over 245 million rupees have been disbursed to

effectively; secondly, equipping SRSP staff with a sound conceptual understanding of issues relating to participatory development; and lastly, to provide training facilities to other governmental and non-governmental organization in community organization and development. The specific aims of HRD are.

- To identify individuals at the village level and develop their managerial and technical skills for effective management of local resources through their community based organizations.
- To provide training facilities to other governmental and non-governmental organizations in the field of participatory development and managing COs and WOs.
- To build capacity and enhance the skills of community, members for eradicating poverty at the grassroots through linkages development.
- To conduct training need assessment of the communities and staff of SRSP along with the professionals working in the field of participatory development.
- To enable SRSP staffs in developing sound understanding on the conceptual issues of participatory development.

6.7.8.7 Planning Monitoring Evaluation and Research

The PMER section continues to lend support to the overall programmes. The section has been active not only in carrying out its regular monitoring functions but also in putting greater emphasis on staff training in monitoring and evaluation and involving all the sections of the SRSP in undertaking monitoring and evaluation. The programme interventions are monitored both at input level on sample basis, At the input not only the programme progress is assessed but most importantly the process is monitored for identification of gaps and internalizing course correction. This section in consultation with the HRD section explores ways and means for building capacity of the section for improved performance and effectiveness.

6.7.8.8 SRSP's Gender Programme

Gender is the mainstream in SRSP. The basic thrust of this Programme, currently, has been at the organizational level. However effort has been made to implement the programme level too. The objective of the gender Programme has

been” “To create a gender sensitive environment in SRSP and facilitate the process of *gender mainstreaming*”. The Programme started in 1996 after Novib invited SRSP to join its Gender focus Programme and also provided funds for the same. This project finished in June 2000. However gender has been integrated in the SRSP strategy. In this connection a gender policy has also been drawn up this year. At the regional level the gender focal points are known as Gender Monitoring officers. They are present in all five regions of SRSP. Their basic role is to ensure the incorporation of gender concerns in the Programme components. In order to create gender awareness among the staff members SSandGI section has carried out so far gender sensitization workshops. In the beginning there was quite a strong resistance to the gender Programme. It was considered a western concept, which has no relevance to the society in which we are living. There were misconceptions, which needed intensive process of awareness. After three years of gender work SRSP though has made a considerable progress in term of staff realization however, staff perception still varies.

Women’s programme of SRSP became operational when eleven women of Mandakhel village of Kohat District decided to form the first women’s organization in 1990. Now SRSP governs the largest women’s development programme in the frontier province through organizing women into women’s organization, rural women of NWFP have for the first time, become part of a forum dealing with village development issues. This has given women a chance to discuss issues and to find solution to these. Women have successfully taken part in the income generating packages; they have improved upon their managerial, financial and technical skills.

The women’s programme of SRSP seeks to bring women into the mainstream of village development through improving upon their social and economic condition and status the programme principles of SRSP for social mobilization, capital generation, skills enhancement and linkages equally apply to the women’s programme, Greater stress is laid on awareness of women’s issues within SRSP by adopting a pro-active gender policy.

Building up capacity and confidence in women through training programmes is a crucial component of social organization for women. Women activists are trained in managing their WOs, in improving other women to be more active in voicing their needs and solving their problems. SRSP believes that for women’s development and

empowerment it is indispensable to give them control over financial resources. Through its credit programmes, SRSP aims to correct the traditional neglect of the women by institutional credit sources.

6.7.8.9 Social Sector Development

The SS and GI section of SRSP started its operations in 1996 under the social development programme, and learning from past experiences that development can only be broad based if equal opportunities are provided to the community to actively participate in the process. SS and GI works on a three tier - Education, Health and Gender - and has specialized programs in each sector.

6.7.8.9.1 Education

SRSP initiated its education programme in December 1995 through establishing adult literacy centers on a pilot basis in Charssada district. The communities realizing the benefit of education asked for support from SRSP in planning a programme to directly address their need for education of their children. Consequently in 1996 a survey was carried out to assess the need for education services. Out of 200 community organizations from two of SRSP regions there was a need for 129 schools. Keeping in view the availability of funds 30 schools were established with the financial assistance of SAP I in District Mansehra and Kohat.

Keeping in view the increasing demand of education from the rural communities and scope and nature of work, SRSP formulated an education strategy in March 2002, which promises the maximum participation of girl child and strengthening the existing structure of the government education system. SRSP has a multi-prong strategy for qualitative and quantitative expansion of its education program.

In July 2002, SRSP and the United Nation's Children Education fund (UNICEF) also signed an Agreement for the Implementation of the Project titled as "All Children in School (ACIS)". The objective was to increase enrollment of children at primary level with a prime focus on girl child through the involvement of both the government and communities.

Based on the experience gained through community-based schools and in the light of education strategy, SRSP has engaged devolved structure of district

government in developing district education plan. SRSP so far has assisted district government of Mansehra, Kohat and Abbottabad in developing DEPs.

With the assistance of Education Sector Reform Assistance-USAID SRSP has been able to implement DEP in district Upper Dir with the project title as "District Education Plan". The project period is two years commencing September 2003. The project goal and objectives are designed in the light of targets set by the Government of Pakistan in Dakar convention 2002 for Education for All EFA. Under the project interventions 200 PTAs have been mobilized and trained. As per the advocacy and communication strategy developed by SRSP, EFA forums at District, tehsil and Union Council level have been notified and established to address education related issues in an effective manner. Adult literacy centers (3 women and 2 men) have been established. SRSP has published six monthly newsletter titled "Ranra" (pushto word means light) depicting education related issues and problems of the district.

Till date SRSP has established 111 community based schools in district Kohat, Mansehra, Chitral, Abbottabad, Peshawar and Upper Dir with the assistance of UNICEF and Learning For Life (UK based Organization) benefiting 6647, where gender comparison stands at 70%. SRSP has developed a cadre of trained teachers; more than 400 teachers have been trained in teaching methodologies and subject-specific training. About 127 teachers have been recruited in community-based schools of SRSP. (SRSP update is given in annexure 2)

In future SRSP is looking forward to be more focused on the performance issue of the schools. In this regard linkages with other organization working in education sector have been established. Training manuals will be developed keeping in view the need of the teachers. Implementation of school development plans will be carried out with the assistance of PTAs, local government and the communities.

6.7.8.9.2 Training Programmes by SRSP

SRSPs initiated Multicultural programmes, because a single sector can't solve the problems. SRSP gives Training to rural females in the following categories.

6.7.8.9.3 Skill Development

It includes such trainings which develop the skill of rural females i.e Vaseline, shampoo, soap and candle making, stitching, tailoring, embroidery, poultry farm management, silk worm rearing and mushroom cultivation and food technology.

6.7.8.9.4 Health

The general objective of health programme of SRSP is "to decrease the preventive health problems of the communities". SRSP's health strategy is essentially a three-pronged one i.e. creating health awareness among the rural community; Training of women and men health workers; establishing linkages with existing health services, mainly government.

The Health Focus Programme works within the social organization framework of the SRSP, i.e. MCOs and WCOs are actively involved in selection of community health workers and these work through the village forums in disseminating health messages, delivering health services and linking up communities to health service agencies (government and non-government).

6.7.8.9.5 Community Health Awareness

The health awareness component largely concentrates on educating women about basic health and hygiene practices. This is done by the SRSP health assistants in the regions as well as through trained health motivators and community health workers i.e. both women and men (F/MHWs).

Community health awareness includes discussions and observations regarding community health issues in order to enhance the capacity of MCOs/WCOs to respond to their problems. Health messages are disseminated in MCOs/WCOs meetings by the health workers, as well as by SRSP staff in the Managers' Conference, Health Workers' Conferences and Health field days.

6.7.8.9.6 Training of Health Workers

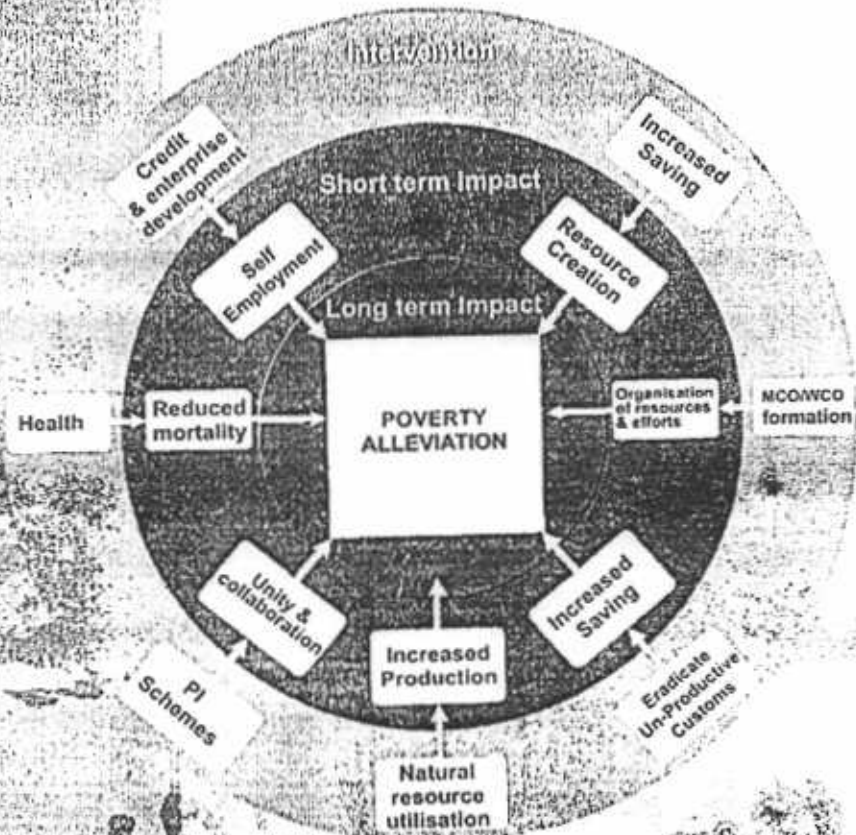
The training component of the health programme concentrates on developing community health workers and health motivators in MCOs and WCOs. This component is largely executed through the staff of government Health Department as resource persons. The SRSP health staff are instrumental in curriculum design for the training, they are also responsible for contacting government and other resource

persons who take training sessions, e.g. the Dost Welfare Foundation delivering lectures on problems of drug addiction, a serious issue in the NWFP and Family Planning Association of Pakistan (FPAP) supporting SRSP health component in bringing about awareness on reproductive health issues. The health workers also establish linkages with government health infrastructure and other NGOs.

The role of the female health workers includes clean and safe deliveries, general health education, and facilitation of linkages with health and family planning outlets. MCO/WCO members according to specified criteria, ensuring the confidence of the community and their willingness to serve the community at large, nominate trainees. After receiving training, the health workers are paid for their services by the community, either in cash or kind.

The Fig 6.1, given below, shows the different interventions (Social Mobilization, Credit Enterprise Development, PI Scheme, Health, Natural Resource Management etc) of the NGOs for poverty alleviation in the rural areas particularly for rural women.

How community perceives poverty alleviation.



Source: SRSP Annual Review (1998-99)

6.7.8.9.7 Linkages with Health Agencies

An important objective of SRSP's Health programme is to establish and strengthen linkages between the MCOs/WCOs and government health/ NGO health facilities. In this regard, the government is extremely co-operative and has highlighted the need to work through these grassroots forums.

In the family planning sectors, the SRSP links up WCOs to the Government Population Welfare Department (PWD) and Family Planning Association of Pakistan by undertaking joint visits to WCOs with their staff.

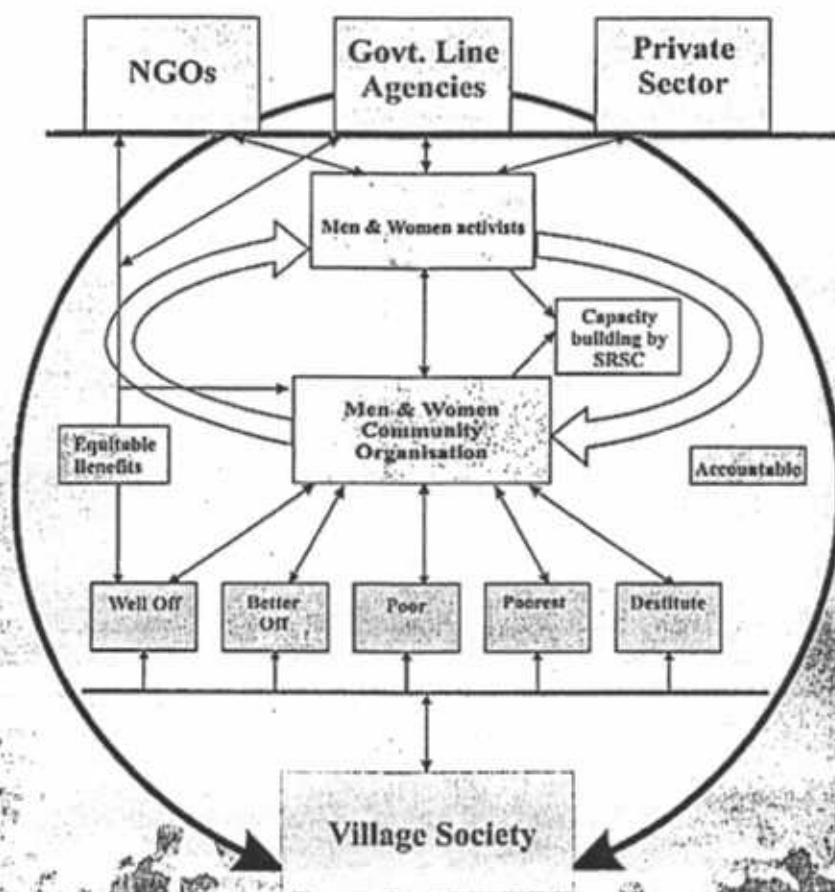
The linkage component of the programme also includes facilitating the work of government EPI teams at the village level as well as holding field days during which various resource persons deliver lectures on health issues to MCOs and WCOs.

Up till January 2005 more than 900 Traditional Birth Attendants TBAs have been trained in the communities through a 15 days UNICEF training module for TBAs training. Additionally, over 97 Male Health Workers (MHWs) have also been trained.

Similarly Health Field days have been carried out in all the Five Regions i.e Peshawar, Mansehra, Abbottabad, Kohat and Charssada. WCOs have been linked with the Family Planning Association of Pakistan FPAP and PWD. Expanded Immunization Campaigns have been carried out in the selected programme areas. Medical Camps have also been arranged for the benefit of rural poor. The fig 6.2 (below) depicts the mechanism of SRSP to create institutional linkages between community organizations and with government and non-government agencies. These linkages largely depend upon the availability of women technical staff in the concerned agencies. The practice of utilizing this forum for engaging community women in dialogue with relevant agencies is essential as otherwise women cannot directly contact the line agencies due to cultural constraints and lack of women staff in the line departments. The matter discussed with the line agencies in one conference needs to be followed in the next to ensure progress or action on the matter.

Activists and linking Mechanism

Activists leading the way to change



Source: SRSP Annual Review (1998-99)

6.8 Sungi Foundation

SUNGI focuses on deprived communities of rural areas while targeting efforts at gender inequality and environmental degradation. It attempts to select an area on the basis of community willingness combined with general poverty criteria for intervention in the area, village or sub-village. SUNGI-focused communities include the landless and subsistence farmers, families without permanent sources of income and deprived classes especially women.

SUNGI focused communities reside mostly in the mountainous Hazara division of NWFP. The local is marked by extreme deprivation, ecological degradation and isolation from nation decision, making. At the same tem, local systems of oppression place hurdles in the path of women development and challenging the status quo. SUNGI primary criterion for working with community is their willingness to transform this situation, and work as a full partner with the organization (SUNGI Annual Review 2000).

6.8.1 Sungi Programme Area Profile

SUNGI programme areas evidences social disparities due to religious orators, feudal structure and political patterns. Special interests often invoke religious sentiments of people and manipulate social factors to retain and strengthen their particular influence. This is particularly evident in the attempt by powerful elite to control Hazara's native forest wealth. Religious groups and individuals in these areas have often been incited to take a vocal position against SUNGI, which fights such exclusive control. As a result, organization has to deal with fatuous allegations regarding gender agendas and so on, subsequently involving SUNGI and its community partners in lengthy conflicts.

Hazara is also under great threat of environmental due to massive and illicit cutting of forests, and the timber trade controlled by social elations politicians of the region. These groups have influenced governments to formulate no policy or institution curbing their trade, despite its downstream effects on the people. SUNGI and its partner communities, which challenge their collusion, are routinely targeted by these groups. Sungi programmes are grouped in the following manner.

6.8.2 Core Programmes

- ✓ Social Mobilization and Development

- ✓ Advocacy Support Unit

- ✓ Sustainable Livelihood

6.8.3 Support Programmes

- ✓ Research Monitoring and Evaluation

- ✓ Human Resource Development

6.8.4 Organizational Development

- ✓ Executive Director Support Unit

- ✓ Resource Development Cell

- ✓ Finance and Administration

6.8.5 Gender and Development

SUNGI's reflections on gender issues: SUNGI's initial experience of addressing social inequalities highlighted women as a disadvantaged group, nearly due to lack of opportunities to participate in the decision making processes and access to and control over resources. Prevailing socio-cultural norms and practices continue to reinforce this inequality between men and women within Hazara. SUNGI, therefore, designed gender sensitive policies and practices at the institutional and community levels to enable women to have equal opportunity to participate in the development processes and make policy influences. Programme policies in SUNGI's early times focused more on representation and participation of women in the development and advocacy processes. However, measures like women's capacity building, provision of credit, consenting in development activities etc did not prove very effective in sensitizing men towards gender inequalities, many of whom remained opposed to women's involvement in the decision making forums.

In late nineties, SUNGI systematically started village development planning exercises at the VC level involving stakeholders in the participatory development. The analysis, observations and experience displayed unequal power relations between men and women. For example, despite the prevailing high rate of men labour migration to urban centers (60 to 80 percent), men still retain control over household decision-making. SUNGI also found that patriarchal structure of society has kept women disempowered. Social norms, values and culture have misused religion to support these inequalities within Hazara. Men have become a sign of power and dominance. These feelings blocked the true sense of development of the households and communities in the programme area.

SUNGI firmly believes that, people are their own agents of change and an external support organization can only be a catalyst to accelerate the pace of change. And to bring about any meaningful change, the external organization with the popular support of the communities will have to take the risk of changing local power structures for sensitization towards weaker segments of the society and to question the existing inequalities, which perpetuate poverty and deprivation. Sungi believes that social, political and cultural changes together can ensure gender equity and justice for all. Such thinking drives Sungi field staff to awaken women's potential by organizing them into women village committees for their social and political empowerment.

SUNGI's efforts to address gender issues focus more on mobilization, legislative and policy reforms, and affirmative resistance to preconceived gender biased norms and practices. Complementing programme interventions such as civic rights training encourages and mobilize women to realize power within them to achieve self awareness, confidence, enabling them to raise their voice effectively for rights and entitlements

6.8.6 Health and sanitation

Sungi aims to work with the communities to address root causes of poverty and deprivation in Pakistan through presenting alternative approaches to development to influence policy makers, and at the same time by mobilizing people towards integration into larger social and regional movements. Although community mobilization is a fundamental step of this process, impair living conditions of the target communities often hinder their participation in the time and labour intensive development processes. The harsh realities of the programme area: hunger, low per capita income, malnutrition, high rates of maternal and infant mortality rates are all result of lack of access to social services and economic opportunities. Based on this realization Sungi initiated its health and sanitation programme from the Haripur in 1994, which now extended all over Hazara. The programme aims to organize communities around social service facilities while also improving upon their ever deteriorating living conditions.

Sungi addresses community health needs by establishing local mechanisms of health and hygiene services facilitators. This is complemented by local and policy level health advocacy efforts of Sungi by engaging the health department for the

recognition of access to health facilities as a basic human right. The programme promotes an enabling environment for the communities to critically think and act upon broader social development issues. SUNGI's health and sanitation programme is positioned on the key realization that physical health and mental welling of men, women children and family contribute to sound behaviors and attitudes which is very vital for a vibrant and tolerant society.

HandS programme strategy of responding to community health needs is based on fostering a network of community health workers at the village level, advocating community rights through critical engagement with the health department and providing basic social service facilities. Men and women CHWs serve basic health needs and develop sustainable linkages with the public and private health institutions. The programme builds CHWs capacities in health related issues to secure community health through continued self-awareness raising, and ensuring of hygienic and clean environment through concerted efforts in the sanitation sector.

6.9 NGO's Engaged in Women Development

In addition to those NGOs who are engaged in general rural development in the NWFP there are NGOs whose focus is mainly on women development. The prominent among these are AWARD, Aurat Foundation, Da Las Gul, and KHENDO KOR. A brief description of these NGOs is as follow.

6.10 Aurat Foundation

Aurat foundation is a non-profit, non- governmental organization with its presence in the major cities of Pakistan. Its NWFP chapter, with an office at Peshawar was established in 1993, which is involved in all Divisions and districts of NWFP.

Aurat Foundation basically collects, generates, repackages and disseminates information for women. And it was, initially set up as information and advisory service for women as well as a clearing- house of information on women. However, it is involved in a multitude of women development activities, including training workshops for women and men working at the grass root level consisting of health workers, adult literacy workers, community workers and voluntary organizations.(National plan of Action 2000) Its main focus is on women from low- income groups who have the least access to organized information which would allow them to make decisions about their own lives. It provides information in the fields of health

and health facilities, legal rights and legal aid, education, finance, credit and investment, employment and self-employment, training and skill development and political education.

6.10.1 Mechanisms to achieve its objectives

To achieve its objectives, Aurat Foundation creates awareness by providing information/education through the following mechanisms;

- ✓ Directly to women who visit the office.
- ✓ By written response to those who write to it.
- ✓ Through other NGOs.
- ✓ Through teachers, community workers, health workers and other grass root workers. .
- ✓ Through talks and interviews on radio and television.
- ✓ Through professionals working with the print media.
- ✓ Through publications, pamphlets, newsletters, research abstracts, posters, audio' and videocassettes.
- ✓ Through information dissemination workshops, meetings and seminars.
- ✓ Through participation in workshops, meetings and conferences of other organizations.
- ✓ Through interaction with government agencies.
- ✓ Through information networking centers established through out the country.

6.10.2 Women Development Activities

- Aurat Foundation is creating an information network of organizations working for women. This network is improving both the quality of information available to women and their access to it.
 - Money talks are another program through which the documentation of loan giving by the Govt agencies are being translated in an easy and understandable language for women of different communities of NWFP.
 - Political education at National and Provincial level with the help of CBO's and NGO's through workshops and trainings.

- Aurat Foundation provides information's in health and health facilities, legal rights and legal aids, education, finance, credit and investment, employment and self-employment and political education.
- It conducts training workshops for women working at the grass root level. Group of such women have included health workers, adult literacy workers, community workers and voluntary organizations.
- Aurat Foundation has its own documentation and resource center, which comprises of four full-fledged sectors for women including, library, audio visual unit, a publication unit, a policy analysis unit.
 - ❖ A library, where books, reports, films and other materials on issues concerning women are kept for reference.
 - ❖ An audio-visual unit, which films, photographs and documents events of interest to women. It also dubs films into Urdu and provides visual material for publications. The unit has also made films on issues, which concern women.
 - ❖ A publication unit, which produces books, leaflets, newsletters, posters, postcards, calendars, etc.

6.10.3 All Women Advancement and Resource Development

All Women Advancement and Resource Development (AWARD), formerly known as AVICEN Pak. WID Programme, grew roots in AVICEN France is working in different parts of NWFP.

AVICEN decided to divert some of its development support for the uplift of NWFP. For this purpose the Avicen Pak. WID Programme was established in June 1994 as an autonomous project of AVICEN France with the intention that it would evolve to be a locally registered independent NGO. Two years after its inception the organization was registered with the competent authority under the name of AWARD. The NGO is managed by women for women.(Nationa plan of Action)

6.10.4 Aims and Objectives

AWARD aims to provide sustainable self-help to women and children especially those from rural and low-income communities. It offers a broad based integrated approach covering Health, Education, and Income Generation. It achieves this by following mechanism:

- ✓ Direct help to women is given by carrying out projects, wherever possible at grass roots level.
- ✓ Indirect support for women is provided through training courses, which award develops and delivers for the personnel's from other organizations, who also work towards the uplift of women. This two-pronged approach means that they can reach a greater number of women's needs than is possible by implementation alone.

6.10.5 Activities and Achievements

AWARD provides support for women's health issues both through its own project implementation, or through training of others. These include Reproductive health (Safe motherhood, pre and post-natal care, HIV/AIDS and STDs awareness) Skill for traditional birth attendants, and vaccinators. EPI and on going child care to promote their healthy physical and mental development.

AWARD also support literacy for women, and community based primary education for children, especially girls and provide information on broader social welfare concerns such as drug abuse and its implication on children and women, reproductive health rights of women, sanitation, environmental awareness, and legal rights of women etc.

AWARD has NWFP's first non-commercial street theater, and it believes that street theater is an effective and positive medium for bringing change in society. Due to Award's experience and expertise in street theater, the NGO is selected by UNDP for Media Watch NWFP Chapter; it's a National level project of UNDP on Portrayal of Women in Media.

It has developed an Archive of material on Health, Education, WID and GAD, and complete documentation of special bulletins on the Beijing conference for utilization. This was the only NGO from NWFP, Which was accredited to attend Fourth World Conference on Women at Beijing as an observer. And Award has made considerable contribution as provincial task force and sub committee member in developing implementation mechanism based on National Report of Pakistan for Beijing Conference.

6.10.6 Activities for Poverty Alleviation

AWARD supports women's enhancement of their social and economic status. It achieves this in cooperation with its sister organizations and organize training workshops for women in micro-enterprise skills within their home communities and follow up of participant trainees and of graduate trainers, ensuring a support network for women, as well as expanding linkages between female entrepreneurs. Award markets women entrepreneur's products and has an outlet in the organization.

6.10.7 Activities in the Health Sector

6.10.7.1 Reproductive Health: HIV/AIDS Awareness Programme

AWARD's health education and awareness programme, works on the improvement of the Reproductive and Sexual health of low income communities. Award is the only women NGO working on HIV/AIDS awareness in NWFP and have targeted 20,000 women and girls. Due to active participation in reproductive health sectors, by providing health education and running a HIV/AIDS awareness raising campaigns in the slum areas and girls colleges of Peshawar, UNICEF Pakistan decided to fund the endeavors of the organization and is currently supporting Teachers Training in different areas of NWFP (i.e. Swabi, Mardan, Jalala and Peshawar) the project commenced on 28th May 1998 and under this project 100 school teachers will be trained and Award will also contribute if the material development, Aids awareness on the national level.

This NGO conducted needs assessment for the Karachi Reproductive Health Project (KRHP) in four low-income communities of Peshawar slum areas, on "Reproductive and Sexual Health Needs."

6.10.7.2 Assistance / Technical Support to the EPI Department NWFP

AWARD provided assistance / technical support to the EPI department (NWFP) for the "polio campaigns" in the form of providing male and female vaccinators, ambulances, ice boxes and cold chain facilities for the storage of vaccines. Special coverage of the Afghan Refugees was carried out in the camps on the request of the provincial government (EPI department NWFP) to facilitate and assist them in the polio campaign.

The EPI/ Polio campaign was also carried in Khyber Agency and the remote South Waziristan at Wanna. Besides the above activities Award Avicen Pak.

contributed in the national immunization days against polio by developing promotional and educational material.

6.10.7.2 Community Forum

- ✓ Conducted a workshop "Community Forum" in collaboration with ORA international, so as to formulate recommendations for the national conference on reproductive health and HIV/AIDS. In which people from different walks of life participated.
- ✓ Held a seminar on "Role of NGOs in Drug Awareness with special reference to women and children". This seminar was conducted and organized in connection with Anti-Narcotics Day.
- ✓ Organize environment day in collaboration with WID Network
- ✓ Arranging inter-school competitions on health and environment issues.
- ✓ Conducted session on HIV/AIDS for WID Network, its members and NGOs.
- ✓ Conducted workshop on Reproductive Health in collaboration with WID Network. Developed a Play for the raising awareness on HIV/AIDS called "Nasoor".

6.11 Activities in the Education Sector

AWARD initiated community based primary education programme in Swabi village Turlandi in June 1998. With the involvement of the community, so far there are 20 children and day-by-day the number of students is increasing. Executing a non-formal education project at Adukoo Sarai, in the slum area of Peshawar, where education is imparted to girls through community teacher on the request of community elders.

6.11.1 Special Project

- Carrying on a special project for the education of domestic workers by helping and to motivate their employers to educate their employees in their free time. Award is providing the study material free of cost.
 - As part of political education campaign for awareness of women a special assessment was undertaken in Khyber Agency, which was also video, documented for reference and future education of community workers.

- Developed plays: "Loor Bibi " on women rights and education and was shown at different communities." Pa Tunddi Kay Insaf "and" Drawing Room ki Siyasad "developed for political education of the communities.

6.11.2 Community Awareness Campaign for the National Census

Awareness campaign for the national census, through mass awareness campaign AWARD tried to facilitate the Govt. to collect accurate data to formulate policies. Initially the emphasis was on the importance's of National Census, raising the awareness level among the' masses and convey the significance of having gender balanced census. Sensitize the public about the factors that made women invisible. The campaign covered seven districts of NWFP. And the various activities were conducted e.g. public meetings, press conferences, and various programmes were broadcasted through Radio Pakistan, and religious leaders and volunteers were mobilized for the education of general public. In this project various NGOs and CBOs were also mobilized to conduct public meetings at grass root communities level, under the umbrella of Award.

6.11.3 Training Programmes

AWARD provides different packages on Health, Micro-enterprises (small scale business), Management and financial Management, Book Keeping, Computers, and Gender policy and Planning. These services are provided for different organizations, Govt. institutions e.g. Govt. polytechnic Institute for Women, IMS Peshawar University, PEandDD, Provincial Census Department. Award also gives intern-ship trainings to students, so far Award has trained 30 students in last four years.

6.11.4 Audio- Visual Communication and Training Material Development

AWARD has an in-house unit, which can design and produce material resources to meet the personal needs of the organizations. These include flashcards, teaching aids, posters etc to offer the services of Artist, designers and computer graphics experts. The communication section can prepare promotional or training videos and can train women candidates in video operation and production so that they can record and publicize, on behalf of the organization i.e. contribution to and achievements for the women in development.

6.12 De Las Gul Welfare Program (DLG)

De Las Gul Welfare Program is an NGO. It was founded in 1976 and registered in October 1988 under the Voluntary Social Welfare Agencies Ordinance 1961. DLG constitutes a complete staff and an organizational structure with a hierarchy of designations, duties and responsibilities. The same method of organizational structure is applicable in different projects that DLG is working on at present. (National plan of Action 2000)

6.12.1 Aims and Objectives

The main objectives of DLG are:

- The proliferation of education - with special emphasis on girls and women.
- The development of income generation activities for women.
- Improvement of health conditions through health education and to provide health facilities to uplift and the health conditions of the people.
- Increasing awareness amongst women about their social and civil rights, so as to allow them to become more active participants in the development of Pakistan.
- Elimination of child labor and beggary.
- Protection of the environment against pollution.

Apart from its projects in Peshawar, the NGO is also working in the rural areas of Swabi,, Nowshera and Khyber Agency. The NGO's successful handling of these projects in the rural setups bears testimony to DLG's capacity for working in such areas.

6.12.2 Micro-Enterprises Unit

The Micro-Enterprises unit was established in 1986 and is still in operation. It has now mushroomed into a full-fledged training and boutique center. It has multiple outlets. Products are displayed and marketed through National Exhibitions, Seasonal fairs and annual sales. DLG is an active member of Sarhad Women Exporters and Traders Association. (SWETA).

Young girls are offered a 3 months-training course in cutting and sewing. At least 25 girls receive training each year. Vocational training is also provided in

- a) Household and kitchen linen.
- b) Children and Ladies dresses.
- c) Quilts, Floor cushions, Laundress' laundry bag.

6.12.3 Activities in the Health Sector

In the Year 1995-96 the women of the community were helped in having an access to female gynecologist and purchase of free medicine from Cantonment hospital.

6.12.4 Activities in the Education and Training Sector

To this end a UNICEF sponsored girls school in Dag Ismail Khel/District Nowshera was set up in 1990. The school has presently 300 girl students with 6 teachers. It was handed over to the community in 1995-96 for continued operation.

6.12.5 Community Based Girls Schools

With this viable model, The Trust for Voluntary Organizations established a total of 40, Community based girls schools, 30 in Swabi and 10 in the Khyber Agency. A total of 1200 girl's students were enrolled. Of the teachers 36 were female.

6.12.6 Human Resource Development

This section was added in 1997 to meet the growing demand of trainee's entrepreneurs from the Peshawar University, and fresh graduates seeking employment. A community development-training program has been designed with on the job instruction, information and demonstration sessions, and fieldwork, in rural and urban communities. Training is also imparted in writing reports and funding proposals as well as computer skills.

6.12.7 Current Activities of DLG Towards Poverty Alleviation

Sewing Center. Sewing center is the foundation of DLG. Its aim is the well being of women. This sewing center is not only serving as a training institute but also an income generating activity for the poor and needy women. For the sale of the products big ready-made shops of clothes have been contacted, exhibitions at the NGO own place and in the meena bazaars etc.

6.12.8 Self-Financed Literacy Project

Adult literacy classes for women in the schools:

- Beneficiaries - 300 students and 6 teachers.

6.12.9 Primary Education Program (PEP)

A total of 41 parents Teachers Associations have been formed in Govt. Girls primary schools in Peshawar and Swabi to reduce gender imbalances and disparity.

Parents, especially mothers, participate in meetings and activity-days. Parents have opened Bank Account with their savings for school repairs and maintenance.

6.12.10 ILO Sponsored Project

- This project is the only one of its kind in the province. It involves children who are through generations from families of beggars, scavengers and laborers i.e. the lower income bracket.
- At the Rehabilitation center they participate in a formal primary education program in an informal and carefree environment Counseling, basic healthcare, income-generation, recreational and creative activities.
- Special interest is in the mainstreaming of children into regular schools and permanent jobs. To date forty-five children have benefited.
- Setting up of a social, mental rehabilitation center for beggars and street children in Peshawar Sadder.
- Primary education for children attending the rehabilitation center.
- Income Generation and skills development in the community.
- Providing health education to women.
- Providing alternate means of income to begging.
- Recreational and co-curricular activities are emphasized to boost self-confidence and their identity as human being.

6.12.11 Khwendo-Kor

To contribute to and overcoming the seriously disadvantaged status of women in all the spheres of 'life, the NGO Khwendo-Kor (KK), was formed in 1993 and registered under the Societies' Act, Government of Pakistan, in Feb. 1993.

Khwendo Kor means 'Sisters' Home' in Pushto language and this speaks of its goals and strategies, which are to initiate and enhance the socio-economic status of women through community participation and mobilization, rural and semi-urban areas in NWFP.

Reinforcing the Sustainable Development Process for improving the quality of life of women and children in the family and society.(National plan of Action 2000).

6.12.12 Aims and Objectives

Khwendo-Kor has the following main objectives:

- i. To increase child literacy rate in KK's target areas with active involvement of communities.
- ii. To facilitate women to improve their quality of life through functional literacy.
- iii. To improve capacities of communication to fulfill their basic health needs on continuous basis.
- iv. To promote women micro-enterprises in the target communities.
- v. To facilitate linkages for increasing effective coverage of development process.
- vi. To build institutional capacity within K.K and target communities for effective and efficient service delivery on sustainable basis.

6.12.13 Activities and Achievements

6.12.13.1 Saving Credit and Income Generation Activities

The objectives of saving credit and income generation of KK is to enhance socio-economic status of women of the target areas through support in credit and viable income generation schemes. Income generation consists of saving, credit program. Groups were formed in the villages of Peshawar and Nowshera and which comprised of potential women of the village. The loans are then given from Rs. 1000-10,000/- to start any micro business. These loans are recovered through monthly installments from their saving.

6.12.13.2 Credit Programs

Gives credit to women as means to women empowerment. Giving them some economic independence and thereby reducing their dependency on men, to a small degree addressing the imbalance of power that exists within the traditional family structure.

KK started three-income generation projects in Peshawar and Karak. The women are, usually organized in groups and given the credits. Twelve Groups had received credit of RS.3, 61,000/

6.12.14 Family Planning

Encouraging spacing according to a mother health is another important activity. For this purpose counseling is provided to women focusing on:

- Information/options about family planning methods
- Acquire her and her family's informed consent for the method chosen
- Linking to family planning association of Pakistan (PAP) for service provision

Family planning activities were undertaken in Peshawar and Nowshera Districts.

6.12.15 Primary Health Care

KK's integrated approach encompasses the sector of Primary Health Care, in which the focus is on improving the practice of existing TBAs and the promotion of improved health and hygiene practices. In order to meet needs beyond KK's capacity the focus is on collaboration with other sector specific organizations, both Govt. and NGOs. Particularly with regard to water supply and sanitation as there is clearly a need for both of these in the rain-fed areas.

6.12.16 Current Activities

KK intends to develop its education program in Dir with DFID/UNICEF, by establishing NFPE schools for girls. While in Karak, KK will continue with its integrated development approach, consisting of non-formal education for women and girls, women micro-enterprise, and primary health care.

These activities will be supported by financial assistance from NOVIS and The Asia Foundation. . Out of a total of 55 schools, 6 NFEs will be handed over to the CBOs and 22 NFEs to be handed over to the Government formal system. Out of the remaining 27 NFEs, 5 will need continuing support of KK beyond 1997.

6.13 Conclusion

Both the NGOs and public sector organizations are working side by side. Though there is desire on both sides to benefit from each other's strengths, apprehensions and mutual suspicion constrained the working relationship but a section of government feels that some of the NGOs are corrupt and want to become a surrogate. At the same time, some NGOs seek government as lethargic and corrupt, run by people who want to reduce NGO autonomy; a recent example of mistrust occurred around the proposed new legislation entitled social welfare agencies

registration act, 1995. The bill has further weakened between NGOs and the government. Through this bill the government is seen as attempting to acquire additional authority to regulate NGOs.

NGOs should build up relationship with government for number of reasons, 1st government has tremendous resources, which would probably not reach their intended target group if NGOs did not influence these resources. 2nd more and more NGOs see that they can actually extend some measure of influence on government through such partnership. NGOs need to identify the departments or section within the department of government that can be influenced.

Without the clear government policy on NGOs, there has been little communication between these groups and the government at either national or provincial level except in the NWFP, where the government is committed to helping NGOs with community involvement in overall development. Both the government and NGOs are interested in working together for the betterment of people.

To date, the social welfare department, Social Action Program, UNDP, World Bank, UNICEF, UNHCR, Zakat Fund, Action Aid has been the government organization providing support to NGOs, mostly in the form of small grants. The limited funds, bureaucratic procedures and lack of institutional capacity at the field level have rendered the service virtually ineffective. Even if it worked, it would focus on social welfare problems, with little or no attention to environment and development.

It is increasingly clear that government's attitude and policy towards NGOs plays a significant role in creating and enabling environment for their work. In the last five years, changes in government policies in relation to NGOs in Pakistan have had a major impact on the work of NGOs. Even at the provincial level, government policies and attitude will have a major role in the work of NGOs and communities.

The weakness of NGOs sector lies in its relative immaturity. Many groups are still going through growing pains. Some suffer from difficulties in getting donor support like NGOs in the NWFP are also pre dominantly donor dependents. Most lack experienced managers due to the financial insecurity and the lack of experienced personal in the province, NGOs find it difficult to attract and retain high competent staff.

CHAPTER 7

SOCIAL SECTOR DEVELOPMENT IN PAKISTAN

7.1 Introduction

In this chapter an attempt has been made to describe the health, education and other social sector development programmes initiated by the public/private sector and NGOs for the welfare of the people in general and rural women in particular. A brief description and the historical perspective of the stated developmental programmes are presented below.

7.2 Health Sector Development

Pakistan started with a very weak base in the health sector. At the time of independence, the country inherited insufficient medical facilities (one medical college, 78 doctors, wide-spread tuberculosis, unsanitary environmental conditions and communicable diseases). Progress in the expansion of health facilities and health manpower remained very sluggish for many years, because of the low priority given to the health sector, which led to an extremely inadequate and inequitable distribution of health facilities in both urban and rural areas.

In the first twenty five to thirty years after independence, hospitals, medical colleges and curative health care development received priority in the health sector. This resulted in the establishment of 830 hospitals with 86,921 beds, 90,000 doctors and 7,000 primary health care (PHC) units by 1998. The primary healthcare and preventive services remained neglected and under funded. This began to change in the seventies when basic rural health Programme received a greater focus and was substantially expanded after the 1978. Currently, almost all of urban population and 70 per cent of rural population within five-kilometer radius have a health outlet. (Human development report 2002)

Pakistan has established an extensive health delivery system network, which is a mix of government and private facilities, distributed all over the country. However, these facilities are generally ill equipped, understaffed and underutilized. District/Tehsil hospital, emergency care services lack functional referral system. This is a major cause of high Maternal Mortality Rate (MMR) due to poor handling of obstetric and emergency case. The government owned health facilities at all levels is

operated by public funds generated through internal revenues or external assistance. The private sector is largely covered by out of pocket household expenditures with very little assistance from NGOs, trust funds etc.

The public health delivery system has three tiers (i) First Level Care Facilities i.e. Basic Health Units (BHU's) and Rural Health Centers (RHC's) for outpatient and limited in-patient services. Each BHU serves 10,000 people, while each RHC gives primary health coverage to a population of 25,000-50,000 (ii) A Tehsil Head Quarters Hospital (THQ) with 40 to 50 beds and District Head Quarters Hospital (DHQ) with 100 or more beds provide secondary health services to a population of over two million people (.iii.) There are also Mother and Child Health (MCH) Centers, and civil dispensaries, which provide maternal and child health and family planning services. About 70,000 National Health Workers (NHWs) are engaged in promotive and preventive health care through primary health and family planning activities. Each NHW is based in village of her domicile and her own house is designated as a health house, where she is accessible 24 hours. To maintain the expansion of health facilities, the financial allocation for the health sector has also been rising significantly but not to the level to fulfill the minimum needs. Public expenditure, both development and non-development, increased steadily and gradually. Per capita expenditure on health increased from Rs. 3.52 month in 1978 to Rs. 160 in 1997-98. All efforts in the past made through the Five Year Plans have improved the health status of the population. The recurrent expenditures on health during last five years were almost constant, and secured but inadequate. The trend is due to consolidation of the gains already achieved and ban on new construction of health outlets.

In the health sector the focus has been given on provision of basic services to the community, through first level care facilities, rural health centers, MCH centers and some services of the Tehsil Head Quarters Hospital to meet the Social Action Programme objectives.

7.2.1 Health Indicators

Pakistan, in the past five decades has achieved impressive economic growth of 6 percent in GDP, on average and substantial progress in the agriculture sector, through a green revolution, which has exceeded the population growth rate. However, social indicators in general, and health and demographic indicators in particular have

lagged behind the average of not only the countries of comparable economic level but also most of the lower income countries. Table 7.1 presents picture of the health indicators of the country.

Life expectancy, crude death rate (CDR) and crude birth rate (CBR) are key measures of the population health status. Longevity is considered to be a direct reflection of the quality of nutrition and health care services. The data reveals a consistent though gradual increase in life expectancy in Pakistan over time. Life expectancy increased from 54 years in 1978 to 63.5 years in 2003-04. Possible explanation for this could be inconsistency in the data and methodologies used for measuring life expectancy. In the past life expectancy was calculated by using data of 10 years. Nowadays it is calculated on the basis of series of surveys and computed on the basis of longitudinal methodology.

Table 7.1: Health Indicators of Pakistan

Indices	Upto 1978	5 th plan 1978-83	6 th plan 1983-89	7 th plan 1989-93	8 th plan 1993-98	1999	2001-02	2003-04
Infant Mortality Rate per 1000 Live Births	120	11	100	95	90	89.9	85	85
Crude Death Rate Per 10000 Live Births	14	12	10	9.1	8.7	8.5	8.3	7.8
Maternal Mortality Rate Per 100,000 Live Birth	600-800	600-700	500-600	400-500	300-400	350-400	350-400	350-400
Life Expectancy:								
Male (years)	54	55	57	61	62	62.5	63	63.5
Female (years)	53	54	56	60	62	62	63	63.5
Low Birth Weight Babies %	-	-	35	32	30	27	25	25
Child Mortality Rate	140	137	133	128	120	111	103	100
Malnourished Children Under 5 (%)	49	49	47	45	42	40	39	35

Source: I) Pakistan Economic Survey (2001-2004)
II). Pakistan Human Condition Report (2002)

CDR have dropped by nearly half from 14 (1978) to 7.8 (2004). Gender specific data are not reported for this indicator. These two general measures of the quality of health services suggest that the major improvements occurred from 1978 to 1993. Since then, there appears to have no significant improvement in the health status. However the infant mortality rate (IMR) which reflects the quality of maternal and childcare, (MCH) has declined considerably since 1978 from 120 to 85 (2004). MMR decreased from 600-800 to 350-400. This is largely due to the efforts of international aid agencies such as UNICEF, which have advocated interventions mechanisms to improve the maternal and child health. A lowering of crude birth rate (CBR) is a key indicator of success of family planning programs. The statistics on CBR have not improved over the years, which seems to indicate a failure of the family planning Programme and these statistics also cast doubts on the government's claims that their has been a recent break through in reducing the high population growth rate.

However, there are still inter and intra geographical imbalances in the distribution of health facilities in rural and urban settings, availability of health personnel and curative vs. preventive measure

7.2.2 Health facilities provided by public sector

The medical coverage provided by the public sector in the country consist of 916 hospitals, 552 Rural health centers 5301, Basic health unit (The data in this regard is given in table 7.2 and 7.3) At present there is 113206 doctors in the country which means there is one doctor for 1354 persons whereas the number of available dentist in the country is about 6127 which gives a population –dentist ratio at 25107 persons per dentist. The numbers of trained nurses in public sector is 48446, which means one nurse is available for 3175 persons.

Table 7.2: Health Facilities Provided by Public Sector

Type of facility	Up to 1978	5 th Plan 1978-83	6 th Plan 1983-89	7 th Plan 1989-93	8 th Plan 1993 - 98	2000-01	2002-03	2003-04	2004-05
Hospital	536	626	710	799	830	907	906	906	916
MCH	748	794	998	849	864	879	907	907	907
RHC	200	302	417	485	542	542	550	552	552
BHU	554	1,982	3,454	4,663	5,147	5,230	5308	5290	5301
Beds	42,469	52,161	64,471	80,047	86,921	97,945	98264	98684	98684
Population per bed	1,804	1,708	1,610	1,509	1,610	1,490	1517	1536	1359
Population per doctor	-	-	-	1,919	1,466	1,516	1466	1404	1354
Population per dentist	-	-	-	50,341	34,210	31,579	29405	27414	25107
Population per nurse	-	-	-	5,968	5,239	3,639	3347	3296	3175
Population per paramedics	-	-	-	1,711	1,130	-	-	-	-

*Sources: 1) Economic Survey (2001- 05)
2) Human Development Report (2005)

Similar is the case of health manpower engaged in the health sector that although the number of hospitals (urban area) and Basic health units (in rural areas) has been increased since independence this increase has been insufficient both in quantity as well as in quality to meet the health requirements of the people. Again, the number of doctors, nurses, dentists and other paramedical staff has also increased but the per capita availability of these personnel is quiet below of internationally accepted norms. The health system is urban biased as well as being curative oriented.

Table 7.3: Manpower engaged in Health Sector

Health Personnel	Upto 1978	5 th Plan 1978-83	6 th Plan 1983-89	7 th Plan 1989-93	8 th Plan 1993-98	2000-01	2003-04	2004-05
Doctors	8,041	20,865	42,862	63,003	90,000	96,248	108,062	113,206
Dentists	781	1,222	1,772	2,402	3,000	4,622	5,530	6,127
Nurses	3,892	7,348	14,015	20,245	24,810	40,114	46,331	48,446
LIIVs/ FMTs	341	1,144	2,697	3,920	4,250	5,845	-	-
TBAs	-	15,000	30,000	48,000	57,744	No more formal training	-	-
LHWs	-	-	-	-	43,000	69,000	-	86,000

Source: Economic Survey 2001--2005

Although this increase in numbers should have translated into a significant improvement in overall health, this has not happened because of the fast growth of population. The fast growth in population also affects the requirement of health facilities. Since the majority of the doctors and hospitals are located in cities and towns, the rural population has much lower access to health facilities. They get care from private practitioners, hakims, and homoeopaths, while minor ailments are treated by the people themselves. The analysis of health situation in the country reveals three problems which require urgent attention. These include imbalances between rural and urban areas in terms of facilities. Low utilization of medical facilities and a big gap in the national health services.

7.2.3 Population Welfare Programme

Population Welfare Programme (PWP) is also the major component of health sector development of the Government. The Programme provides reproductive health services, mainly family planning, information and services, maternal and child health (MCH) care services. Since the International Conference on Population and Development (ICPD) the Programme has expanded its focus to include more components related to reproductive health such as RTIs/STIs, HIV/AIDS.

The population Welfare Programme works in two ways; creation and meeting demand for family planning. The service delivery components of Population Welfare Programme mainly comprise Family Welfare Centers (FWCs), Reproductive Health Services (RHS) Centers designated as A and B Type and Mobile Service Units (MSUs). The programme outlets of service delivery component include Family Welfare Centers (FWCs), Reproductive Health services centers, Mobile service units (MSUs) and Male Mobilizer cadre. (Govt of Pakistan 2004)

Family Welfare Centre (FWC) constitutes the most extensive institutional network in the country to promote and deliver family planning services to the urban and rural areas. FWC operates in a rented building and serves as a static facility to about 7,000 people, whereas operating through its satellite clinics and outreach facilities it covers a population of around 20-25 thousand. The scope of work of the FWC includes provision of family planning and maternal and child health (MCH) services and treatment of minor ailments. Post ICPD. The scope of the FWC was expanded to include several elements of Reproductive Health, like safe motherhood, infant health care, management of RTIs/STI, HIV/AIDS. Currently there are 1957 functioning FWCs in the country, about 60 percent of which are located in the rural areas. The number of FWCs will be increased to 3003 by the end of current 5-year plan (2007-08).

Reproductive health services (RHS) are another major clinical components of the overall population welfare Programme with its hospital based service outlets (RHS-A Centers) in teaching hospitals. Major hospitals of big cities, all DHQ hospitals and selected THQ hospitals have facilities for contraceptive surgery (CS) along with full range of contraceptives i.e. IUCDs, injectable, condoms, oral pills, Norplant (in selected RHS-A Center) etc. are available to family planning clients.

Mobile Service Units (MSU) were conceived as an innovative activity during 7th five-year plan period (1988-93) to provide family planning services to far-flung, underserved rural population. MSUs are located at Tehsil level, provide services to a population of thirty thousands (30,000) peoples or 5000 couples scattered in 15-20 villages by holding 10-12 camps regularly in a month.

At present 146 mobile service units are operational in the country ((Punjab 70, Sindh 34, NWFP 19, Balochistan 22 and Islamabad 1). A training manual on specified/identified modules (such as planning, supervision and monitoring, community participation/ownership, skill development of contraceptive technology, follow up system, financial procedure, quality of care, logistic management) coupled with training guide/plan has been developed. Moreover Male Village based Family Planning Workers Project has been introduced on a Pilot basis in 25 districts of the country. (Govt of Pakistan 2004)

In addition to the service delivery components of PWP there are 132 RHS-B centers i.e. Hospitals of Provincial Line Departments (PLDs) including health, NGOs and private sector with operation theatre facilities interested in performing contraceptive surgery are registered as RHS-B Centers and provided CS services on fee per case basis along with complete range of family planning methods. RHS-B Centers are also provided training facilities in contraceptive surgery for their doctors and paramedics at the RHS Training Centers. Quality of services is ensured through periodic supervisory visits by senior doctors from RHS Training Centers. Province-wise total number of registered hospitals/clinics as RHS-B and the number of functional Centers is as follows:

Table 7.4: Province –wise break up of RHS-B centers

Province/sector	Registered	Functional
Punjab	64	22
Sindh	29	16
NWFP	28	13
Balochistan	03	01
Islamabad	08	06
AJK	-	-
FATA	-	-
NA	-	-
Total	132	58

Source: Economic Survey (2003-04)

7.2.4 Public Expenditure for Health Sector Development

Expenditure in the health sector came to be seen as investment in human capital. Although expenditure on key indicators has increased but it still remains inadequate and lower than many other countries with similar economic status as the table 7.5 reveals that public expenditure began to be diverted to health in the early 1993. The implementation of SAP has provided impetus to shift priorities. One of the SAP condition is that social sector spending be raised in real terms each year and no cut back even if economy cuts are needed to meet other fiscal binding constraints imposed by IMF / World Bank. Currently the government is spending 0.6% (2005) of GDP on health. In Pakistan the expenditure in health sector has been low as compared to other countries of the region due to macroeconomic difficulties, which as proportion on GNP works out at 0.7% over the years. The world health organization (WHO) in its recent report on health and macro economic has recommended US\$ 34 per capita as a required package for essential health services in Pakistan. However, recently the Government has committed to doubling of public expenditure on health by increasing it from 0.5% to 0.8% of the GDP in medium term and 1% of the GDP in the long run.

During the year 2004-05, the total expenditure on health is estimated at Rs. 38.0 billion, of which Rs. 11.0 billion for development and Rs. 27.0 billion for current expenditure which has increased by 16% over last year and works out to be 0.6% of GNP. It may be pointed out that as a result of improvement in fiscal front the government has been allocating relatively more resources to health sector. During the last three years, public sector expenditure on health has increased on average, 14 percent per annum as against 6.7 percent per annum during the previous five years. In other words growth in public expenditure on health has been doubled in recent years.

Table 7.5: Health and Nutritional Expenditure**(Rs. In Millions)**

Fiscal Year	Public Sector Expenditure (Federal Plus Provincial)			Change (%)	As % of GDP
	Development expenditure	Current Expenditure	Total Expenditure		
1995-96	5741	10614	16355	35.3	08
1996-97	6485	11857	18342	12.2	0.8
1997-98	6077	13587	19664	7.2	0.7
1998-99	5492	15316	20808	5.8	0.7
1999-00	5887	16190	22077	6.1	0.7
2000-01	5944	18337	24281	9.9	0.7
2001-02	6688	18717	25405	4.7	0.7
2002-03	6609	22205	28814	13.4	0.6
2003-04	8500	24305	32805	13.8	0.6
2004-05	11,000	27,000	38,000	15.8	0.6

Source: Economic Surveys, (2004-05)

7.3 Education Sector Development

Another important and major component of social sector is education. Policies to promote literacy and education have been promulgated from time to time. The education policy announced in 1978 as part of the Government's socio-economic reform package was confined to nationalization of private education institutions in order to have a uniform and standardized education.

The 1978 Education Policy aimed at eliminating disparities between the two-tiered systems of education in Government English medium schools by adopting Urdu as a medium of instruction. Furthermore, it gave for the first time recognition to mosque schools or Madrassas as educational institutions. This led to the expansion of mosque schools and lowered the standard of education, as it was done by the 1972 Education Policy of nationalization. (Human Development Report 2002)

Other initiatives were taken during various socio-economic development plans included; universalization of primary education, revision of school or especially primary school curriculum in accordance with urban/rural requirements, introduction of Iqra and Nai Roshni School Projects as part of the Prime Minister's Five Point

Programme in 1980-87. In 1990 Social Action Programme (SAP) was launched to expand and consolidate social services specially education and health. In addition 1992/1998 education policies were announced and now the education policy and education sector reforms of 1998-2010 lays great stress on primary education, adult literacy, technical and vocational education.

The country was faced with overwhelming problems in education since independence. However, schools, colleges and Universities are maintained and new once established. Since then there has been a considerable increase in the number of educational institutions and in enrolment. Literacy rate increased from 16.4 per cent (1951) to 49.0 per cent (2001) enrolment at primary and secondary level also increased insignificantly. Enrolment at professional and higher levels also increased. Numbers of institutions and teachers have increased proportionately. About 1/3rd of students who have passed the Matric (high school) examination now go for technical and vocational education.

Despite these achievements, the performance of the education sector has remained disappointing and more remains to be accomplished. Severe gender and rural-urban imbalances, both in the availability and quality of education still exist which reflects from the data given in Table-7.6.

Table 7.6: Education Indicators of Pakistan

Year	Literacy Rate			Gross Primary Enrollment		
	Total	Male	Female	Total	Male	Female
1950	16.4	19.7	12.5	920.00	800	120
1960	16.3	23.9	7.4	2,060.00	1630	430
1970	21.7	30.2	11.6	3,963.00	2920	1043
1980	26.2	35.1	16.0	2,144.00	362	1782
2000	45	56.50	32.60	20,399.00	11720	8679
2001-2	49.51	51.45	36.96	19921232	9962751	6968109
2003-04	54.0	66.25	41.75	17415240	10250631	7164609

Sources: Economic Survey, (1984-04)
Govt. of Pakistan. (1951-81)

Education services remain inequitably distributed among income groups, rural and urban regions in the country. Literacy and participation rates are below those in other South Asian countries with similar, even lower level of economic development. Access of education to children of relevant age group is still inadequate. Educational institutions lack physical facilities. The target of minimum essential requirement for quality education has not yet been achieved. Educational institutions are facing shortages of trained and qualified teachers, especially female teachers. Many teachers lack dedication, motivation and interest in their profession.

Due to financial constraints and poor managerial capacity the education targets remained unaccomplished during the period 1992-2000 which was the Social Action Programme period. During this period, projects approved were not completed because of inadequate resource allocation and poor implementation machinery. The slow implementation of programmes/projects undermined the efficiency of the system in terms of qualitative improvement at all levels.

Overall results in the education sector remain disappointing, with some pockets of progress with school enrollments and an overall reduction in the gender gap. Primary enrolment, as measured by the Gross Enrolment Rate (GER) showed some improvement between 1991/6 (from 65 per cent to 75 per cent) but none thereafter (falling to 71 per cent in 1998-99)¹. The school going population (five to nine years) is about 19.94 million. Out of this school going population more than six million are out of school. The gender gap in enrolment declined in both rural and urban areas, but the rural gap fell more due to falling male enrollments rather than growing female enrollments. The National Education Policy 1998-2010, also recommends inculcation of Islamic values among the youth, enhanced funding, raising literacy level, removing urban-rural and gender imbalances, improving quality of education at all levels, strengthening higher education facilities, providing for demand driven education rather than supply driven education and encouraging private sector participation. Keeping in view the large number of illiterates, there needs to implement table programme to meet the requirements of adult illiteracy with focus on skill training. For acquiring vocational skills, literacy is a pre-requisite. Therefore a

¹. PIHS data, Education Ministry's own estimates using administrative data suggest a higher GER of 89%

plan is being devised to make unskilled adults skilled workers, in a period stretched over 18 months; with literacy training stretched over 12 months and skill training over six months. This period may be divided in three terms. This entire approach will be a non-formal mode of education of Adult Functional Literacy. The existing infrastructure may be utilized for the literacy and skill development programme. Literacy enhancing programmes and projects are being developed expeditiously.

Despite the fact the Pakistan has exhibited an impressive record of economic growth over the decades; it has lagged for behind other developing countries with respect to its level of human development. An average growth in GDP of 6 per cent per annum has failed to translate into better living conditions for the majority for Pakistan's (estimated) 152.53 million populations. Pakistan's performance in the social sectors has also lagged behind other countries in the region, as is illustrated in Table-7.7

Table 7.7: Education Indicators of South/East Asian countries

Country	Adult Literacy rate (%) 2005			Gross Primary Enrolment (%) 2005			Pupil Teacher Primary 2005	Gross Secondary Enrollment Rate (%) 2005		
	Male	Female	Total	Male	Female	Total		Male	Female	Total
Bangladesh	50.3	31.4	41.1	84	73	79	63	25	13	19
Bhutan	63.0	31.0	47.0	31	19	25	31	7	2	5
India	73.0	47.8	61.0	113	81	102	48	59	38	49
Nepal	62.7	34.0	48.0	130	87	109	39	46	23	35
Pakistan	61.7	35.2	48.7	85	59	73	41	28	13	24
Sri Lanka	92.2	88.6	90.4	106	105	106	29	71	78	75
East Asian Countries										
China	91.0	86.5	90.9	-	-	99.9	-	-	-	70
Indonesia	92.5	83.4	87.9	-	-	97.3	-	-	-	56
Philippine	92.5	92.7	92.6	-	-	98.4	-	-	-	77.5
Thailand	94.9	90.5	92.6	-	-	88.0	-	-	-	47.6

Source; UNDP, Human Development Report (2005)

The countries chosen for comparison are in the same income group as Pakistan. We see that on virtually all indicators pertaining to health, education, rural water supply and population growth, Pakistan equaled or lagged behind all other

similarly placed countries. In some areas the differences are quite stark. In primary school enrolment for girls, provision of drinking water in rural areas, total fertility rate, population growth and contraceptive prevalence rates, Pakistan lagged behind other countries quite substantially. In adult literacy only Nepal was behind Pakistan while in gross primary and secondary education it was Bhutan. Rests of the countries are doing better in South Asian Region and there is a new comparison with East Asian Region.

While the national picture of social sector development provides the aggregate, a look at the provincial profile indicates the lopsidedness in social sector development that existed at the time of the onset of SAP. There were significant differences in social indicators across the province.

In the female primary school enrollment ratio, Punjab had performed better than all other provinces whereas in adult literacy, both Punjab and Sindh were ahead of the other provinces. NWFP showed better attainment in terms of immunization, infant mortality and rural water supply whereas Balochistan had better rural health facilities (again, at least in physical buildings).

7.3.1 Public Expenditure for Education Sector Development

Not only that the allocated funds for education per-sector are very low compared to other countries of the region, the actual expenditures in Pakistan are also significantly less compared even to the already small allocation. This is more so in the case of non-salary expenditures, which are very low. In Pakistan, the major problem is related to the financing in education. The percentage of allocation for education in Pakistan reflects a picture of priority for education. For instance, in 1993-94 allocation for education was 2.22 per cent of GDP. In 2000-01 instead of showing an increase, it has fallen to 2.06 per cent. The percentage allocation for education as percentage of GDP in Pakistan is less than other countries (Table-7.8)

Table 7.8: Allocation for Education as of GDP Comparison with other Countries

Country	% age of GDP
Thailand	3.5
India	4.1
Sri Lanka	2.7
Nepal	2.9
Bangladesh	1.5
Pakistan	2.6
Bhutan	5.2
Iran	5.3
Philippine	2.9

Source: i) UNDP Human Development Report (2005)
ii) Govt. of Pakistan (2004-05)

The relatively poor performance with respect to growth of elementary education expenditures over the SAP-II period is at least partially accounted for by the extent to which elementary education budgets have been adhered.

The above discussion was on the public social sector development programmes. As already mentioned, that NGOs and Private sector are equally sharing the responsibility of social sector development with the government. The contribution of these organizations for social sector development is discussed below

7.4 NGOs/Private Sector Health Service Delivery

In recent years, as the quality and coverage of public sector services has fallen, the NGOs and private sector has emerged in a striking manner, especially in education and health. For much of Pakistan's 50-year history, NGOs/private sector efforts have complemented those of government, especially by catering to the demands of the people. While this has tended to be truer for health than in the past, it has recently become more the case in education as well. Here, the state has had neither the resources nor the vision to keep pace with the demand created by increased population growth and incomes.

Clearly NGOs and the private sector have played a major role in social sector development in Pakistan and have had a significant impact. Given the trend towards sliding revenues, rising deficit and lower cost recovery by government, we predict

that social services will increasingly into the domain of non-governmental institutions. This should help make the delivery of these services more efficient, cost effective and sustainable and free up the government to concentrate its resources on the poor, who are unlikely to benefit from private sector services in the foreseeable future.

NGOs provide sustainable self-help to women and children especially those from rural and low-income communities. It offers a broad based integrated approach covering Health, Education, and Income Generation. Direct help to women is given by carrying out projects, wherever possible at grass roots level. Indirect support for women is provided through training courses, which develops and delivers for the personnel's from other organizations, who also work towards the uplift of women.

NGOs conduct workshops/seminars and conferences on reproductive health and HIV/AIDS and arranging of inter-school competitions on health and environment issues. NGOs developed an Archive of material on Health, Education, WID and GAD, and complete documentation and special bulletins on the Beijing conference for utilization. Similarly support for women literacy, and community based primary education for children, especially girls and provides information on broader social welfare concerns such as drug abuse and its implication on children and women, reproductive health rights of women, sanitation, environmental awareness, and legal rights of women etc.

NGOs health education and awareness programme, works on the improvement of the Reproductive and Sexual health of low income communities. Some of Women NGOs working on HIV/AIDS awareness in NWFP and have targeted 20,000 women and girls. It also provide assistance / technical support to the EPI department for the "polio campaigns" in the form of providing male and female vaccinators, ambulances, ice boxes and cold chain facilities for the storage of vaccines. Special coverage of the Afghan Refugees was carried out in the camps on the request of the provincial government (EPI department NWFP) to facilitate and assist them in the polio campaign.

NGOs have initiated community based primary education programme in different parts of the country with the involvement of the community. And the enrolment of children and the number of students is increasing day by day.

NGOs are recognized partners in the effort for community uplift and socio-economic development with advantages like autonomy, flexibility, voluntary contributions and standing in the community. They advocate and lobby for a cause and persuade the society to move into unexplored and sensitive areas. Community Based Organizations also have a better understanding and enjoy the trust/confidence of the community, which is critical when dealing with difficult and sensitive subjects. The first attempt by the Ministry of Population Welfare (MoPW) to institutionalize the involvement of NGOs in supplementing the population Programme was made through the creation of a Non- Governmental Organization Coordination Council (NGOCC) in 1985. It however, encouraged some administrative and operational snags, which led to its replacement by the National Trust for population Welfare (NATPOW) in 1994.

Though the awareness about Family Planning is about 97 percent, the rate of contraceptive use is only 37 percent. There is still a wide gap between knowledge and practice with an unmet need for family planning of 33 percent. The major challenge is to address this unmet need. A comprehensive campaign is being maintained with the prevailing cultural values and using multiple media channels with special attention to advocacy. The focus is on regional and local programmes to present news in a local context.

For effective implementation and dispensation of quality services, the capacity building of managers and service providers is being focused through clinical and non-clinical training at various levels. The monitoring of the Programme activities is undertaken through field monitoring and holding review session. This has further been intensified through visits by officers from the Ministry and by teams of provincial monitoring and evaluation cells to various areas of the service delivery outlets. An elaborate Programme management information system has been designed at the federal level to support monitoring of activities. The Federal monitoring teams focused mainly on the availability of contraceptives and medicines, the maintenance of recording and reporting systems, environments conditions of the outlets and furniture's and fixtures and sales proceeds.

Table 7.9: Private Sector AND NGO Health Facilities

Private Sector		NGOs	
Private General Practitioner Practices	20,000	Hospitals	106
		Health Care NGOs (almost all in Punjab and Sindh)	254
Maternal Homes (Small MCH Centers with 2 to 3 rooms)	300	Patient Welfare Societies	331
Dispensaries (Out-patient for PHC)	340	NGOs for the disabled	331
Laboratories	450	Specialized hospitals (such a Al-Shifa Eye Trust and Shaukat Khanum Cancer Memorial)	na
Small to medium hospitals that have a total of more than 25,000 beds	520	Multi-sectoral organizations (such as Balochistan Rural Support Programme, Sarhad Rural Support Programme)	na
		Trusts offering funding to other NGOs (TVO and NATPOW)	na

1. Government of Pakistan, (2002)

2. Government of Pakistan, (1990)

7.5 Conclusion

In spite of steady improvements, the present health system has not provided services to adequately meet the requirements of the population, as Pakistan's health indicators depict a very dismal picture as compared to countries at the same economic level. The health status of the nation after 58 years of independence is characterized by a population growth rate of around 2.1 per cent, infant mortality of 90 per 1000 live births and maternal mortality rate of 400 per 100,000 live births that is one of the highest in the world. The major killers of children are diarrhea and pneumonia, in women of childbearing age complications of pregnancy; cardiovascular diseases and cancer in the elderly and accidents in adults. Communicable, infectious and parasitic diseases remain a severe burden, while dental carries and gum diseases are increasing. Drug abuse has emerged as a public health problem, while malaria and tuberculosis continue to be potential threats. Poor maternal nutrition status results in the high incidence, i.e. about 25 per cent, of low birth weight babies.

Some gains have been achieved in health sector. Small pox was eradicated in 1975 and Guinea worm in 1996. Diseases like plague, pellagra or scurvy are now only confined to the textbooks. Cretinism, mental and physical dwarfism and the pendulous goiter have diminished due to salt iodization programme and along with other manifestations will be eradicated in the coming years. Three pronged approach to combat iron deficiency anemia i.e. supplementation through iron tablets by Lady Health Worker (LHW), food diversification through public awareness and fortification of wheat flour with iron and vitamin is on the anvil, Vitamin-A deficiency blindness and morbidity is dealt effectively with supplementation and fortification of edible oil/fat.

There have been some successes in the population control programme i.e. Contraceptive Prevalence Rate (CRR), Total Fertility Rate (TFR) and Growth Rate (GR) have improved in the past years and this momentum is likely to continue till we achieve ultimate goals. However, it is understood that the existing health care system at all levels in Pakistan is in efficient and in effective. The poor organizational framework, ill defined job descriptions and procedures, lack of accountability, urban-rural disparity, weak referral system, gender imbalances, poor human resource development, weak health management information systems, insufficient funds and a highly centralized administrative and financial set up clearly depict the inefficiency of the health sector.

Pakistan's continuing poor performance in the social sectors over the last six years, despite a massive infusion of funds, points to serious flaws in the country's overall approach to social sector development. Sectoral priorities and policies also need to be rethought in light of Pakistan's rapid population growth. In general, the focus of social sector development must shift from constructing infrastructure and facilities to improving the quality and effectiveness of services. The growing number of facilities that go unutilized or underutilized for the want of appropriate staff and supplies threatens to drain the country of its meager financial resources and make the entire social sector unsustainable.

The priority for policy makers should be to consolidate social sector investments by enhancing the quality of services rather than expanding buildings and staff. In education, emphasis must be placed on developing uniform curriculum and improving teaching methods rather than building more schools. In health, greater

stress should be placed on preventive rather than curative care, a strategy that will result in higher value for money spent in the long run. All the above mentioned policies failed to achieve the desired results due to inadequate fund allocations, slow and untimely releases, low utilization rate of funds, inefficient implementing machinery, lack of commitment and incentives, highly centralized system and the absence of monitoring, evaluation and accountability process.

CHAPTER 8

RESULTS AND DISCUSSIONS

This chapter deals with the results of the study carried out and discusses the interpretations of the research findings on all aspects of the study. It probes into different developmental activities launched by the government and SRSP for gender development in sampled area and its impact on the socio-economic conditions of rural women. Most importantly the T-test and econometric model have been applied on the field data. The t-test have been used for comparison purposes where as the econometric model elaborates the effect of independent variables on dependent variable. In addition to these socio-economic characteristics of the sample respondents are also discussed in detail in this chapter.

8.1 Socio Economic Characteristics of the Sample Respondents

8.1.1 Age Groups

All the respondents have been classified into four age groups i.e 15 to20 years. 21-30, 31-40 and 41-50 years. According to SRSP criteria all the adults' females can become a member of the WCO. The findings show that nearly 50% of the respondents fall in the age group of 31-40 years of age. The remaining 50% were distributed in the other age groups mentioned above. Our findings are similar to other studies (Humayun 2006, Samina 2004, Hamid 2002) where they have reported that majority of the people in this group had joined the WCOs. The reason could be that the respondents in this group are more energetic and take active part in the developmental activities in their respective areas. It is important to mention here that more than 90% of the activists belong to this age group

Table 8.1: Distribution of the Respondents According to their age Groups

Age groups	Union councils				
	Jhagra	M. Khatki	Wad Paga	Total	
	<i>No</i>	<i>No</i>	<i>No</i>	<i>No</i>	%
15-20	10	12	7	29	13.18
21-30	17	25	15	57	27.14
31.40	33	45	23	101	48.45
41-50	7	8	8	23	11.23
Project Area	67	90	53	210	100

Source: - Field Survey

8.1.2 Literacy status/ level of sample respondents

Both the literacy status and literacy level of the sample respondents do not reflect the real situation of the province as well as of the country. Table 8.2 depicts the sample respondents' literacy rate was found higher compared to the official figures. Though the sample respondents were female but the literacy status was almost the same as that of male in the province. One possible reason could be that these were those female who had joined the WCO. Or may be the SRSP preferred to encourage the educated female to join the WCO. They consider that the educated people are more receptive to developmental activities of the household as well as that of the village.

In the sample union councils the situation regarding the literacy rate was found almost the same. Taking the project area as a whole the literacy rate was 44%. Among other factors one factor could be the less distance of these villages to the provincial capital. The people in these villages are more exposed to educational facilities in these areas. Moreover majority of the people in the villages are engaged in a number of economic activities. That is why they encourage their females to take part in enhancing the income of these households. The education made them confident to join the WCOs and work as an active member of the society.

As far as the literacy level is concerned it was not satisfactory. It was observed that 59% of the sample respondents had got only primary level education. But it is important to mention here that some of the graduate level educated females were also found in the WCOs. In terms of percentage they were the least. However, one can expect that in future if the females were encouraged and facilities were provided, they can get higher-level education.

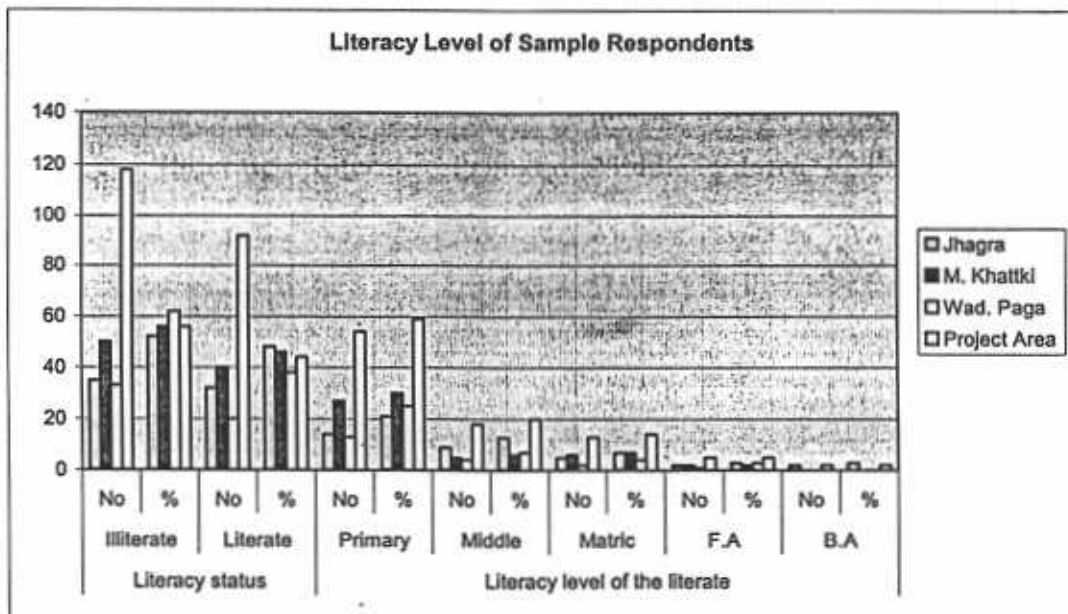
This reflects the fact that despite the social barriers in the rural areas, the females had the enthusiasm to educate themselves. With the passage of time this number will further increase.

Table 8.2: Distribution of Sample Respondents by Literacy Status and Literacy Level

Name of Union Councils	Literacy status				Literacy level of the literate									
	Illiterate		Literate		Primary		Middle		Matric		F.A		B.A	
	No	%	No	%	No	%	No	%	No	%	No	%	No	%
Jhagra	35	52	32	48	14	21	9	13	5	7	2	3	2	2.9
M. Khatki	50	56	40	46	27	30	5	6	6	7	2	2	0	0
Wad. Paga	33	62	20	38	13	25	4	7	2	4	1	3	0	0
Project Area	118	56	92	44	54	59	18	20	13	14	5	5	2	2

Source: Field Survey

Fig-1



8.1.3 Marital and employment status

Social customs and taboos are major obstacle in the way of female participation in economic activities. These taboos are further strengthened by illiteracy. In a way marital status also affect female participation e.g. local feelings against the participation of unmarried women are stronger than that of the married

women as the data in table 8.3 reveal that project area taken as a whole 70.47% respondent is married and the rest are unmarried.

Table 8.3: Distribution of Respondents According to Marital and Employment Status

Name of Union Councils	Marital status				Employment status				Total
	Married		Unmarried		House wife		Employed		
	No	%	No	%	No	%	No	%	
Jhagra	36	67.9	17	32.1	45	84.9	8	15	67
M.Khataki	66	73.33	24	26.66	76	84.44	14	15.6	90
Wad paga	46	68.6	21	31.4	56	83.5	11	16.4	53
Project Area	148	70.47	62	29.6	177	84.3	33	15.7	210

Source: Field Survey

The distribution of the unmarried respondents is almost the same for all the three union councils. It is note worthy that besides managing their daily household chores women are actively involved in income generating activities. Housewives are more interested to develop as well as to utilize their potential to stabilize their households' economy.

The findings show that the married women are more interested to share the household burden with their spouses. Similarly the male partner also allowed them to join the WCO. In contrast to this the unmarried women are free to take active part in such activities this is mainly the social barrier, which restrict the virgin women from free mobility in the society. In the Pakistani society in general and in rural society in particular the unmarried women are very rarely allowed to go out side the house unaccompanied for any kind of business.

8.1.4 Occupational Distribution of Sample Households

The people of the project area perform a variety of jobs. These are lumped together in certain broad categories as may be seen in table 8. 4. The major occupations in which the sample households were employed are agriculture, enterprises and business. Agriculture and business were found to be the main occupation adopted by the sample respondents. In terms of percentage these were 37% and 33% respectively, followed by the public sector employment where about 24% households were engaged. An insignificant number of respondents (6%) were

also involved in the daily wage laborers earnings. The order of occupations, which has its roots in the socio-economic conditions, has major implications for the total income of the households. The universe showed some of the sub urban characteristics.

Table 8.4: Distribution of Sample Households by Occupational Groups

Main Occupations	Union Councils							
	Wadpaga		M.Khatki		Jhagra		Total	
	No	%	No	%	No	%	No	%
Govt. Jobs.	14	26.4	18	20.0	18	26.8	50	23.8
Agriculture	18	33.96	39	43.33	21	31.34	18	37.1
Enterprise/Business	19	35.8	27	30.0	23	34.3	69	32.8
Labour	2	3.77	6	6.66	5	7.46	13	6.1
Project Area	53	100	90	100	67	100	210	100
Subsidiary Occupation								
Govt. Jobs	5	11.6	4	5.33	1	1.88	10	5.84
Agriculture	12	27.9	27	36.00	18	33.96	57	33.33
Enterprise/Business	22	51.1	33	44.0	27	50.94	82	47.95
Labour	4	9.3	11	14.66	7	13.20	22	12.86
Project Area	43	100	75	100	53	100	171	100

Source: Field survey

Fig-2

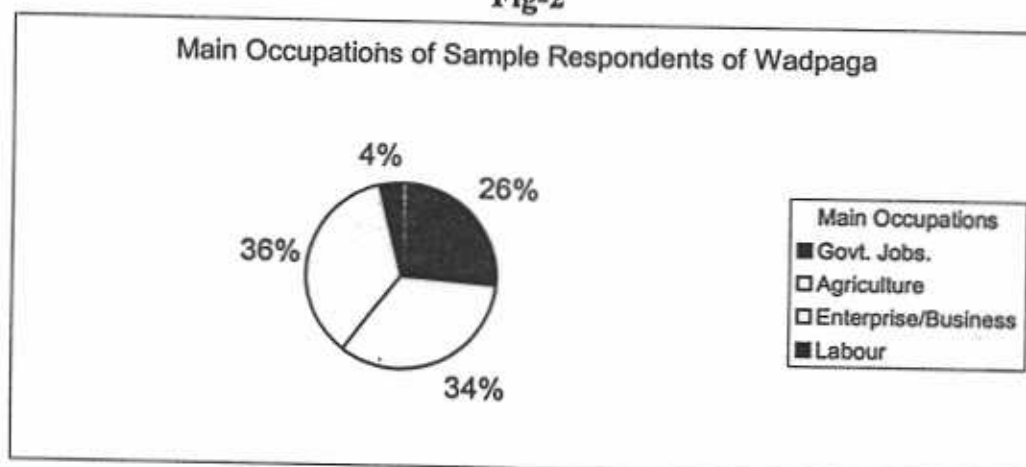


Fig-3

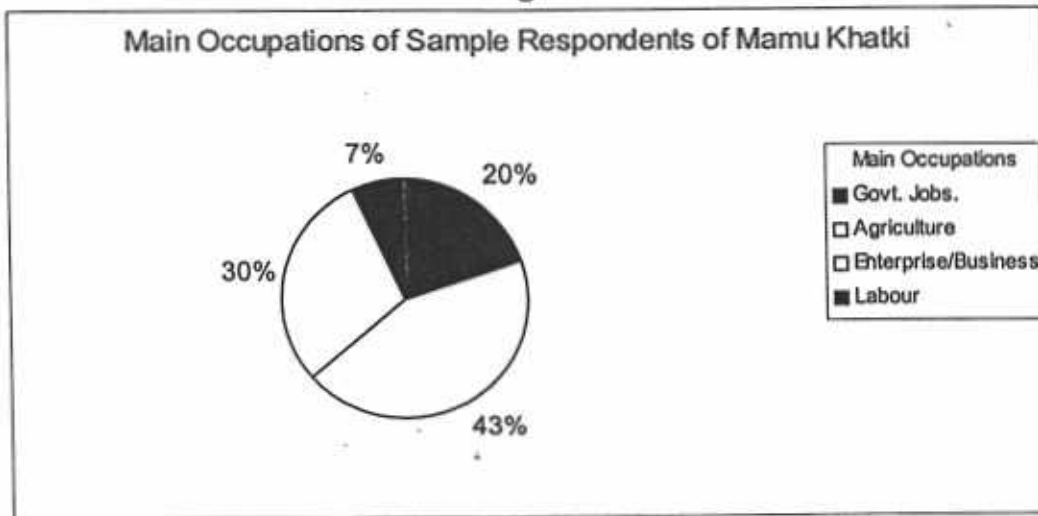
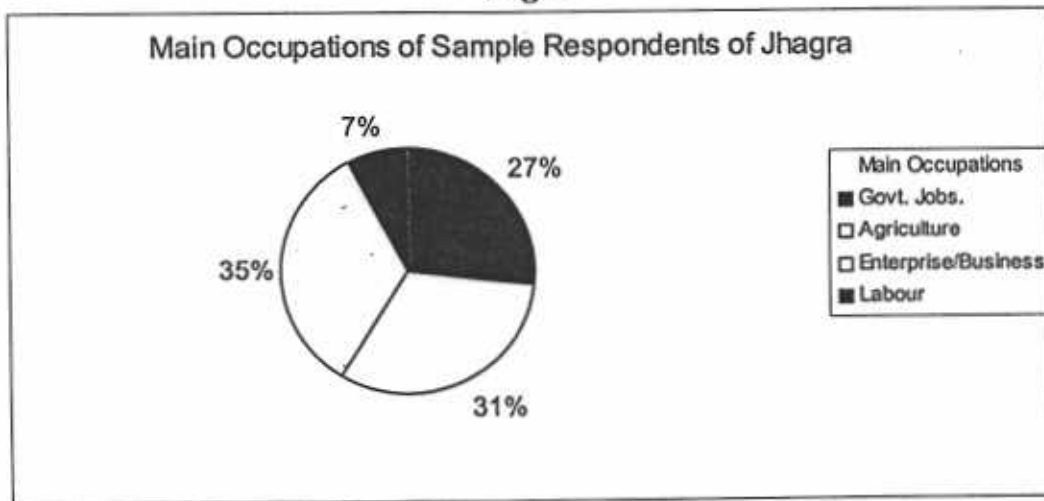


Fig-4



8.1.5 Family Composition and Average Household Size

The data regarding the demography of the sample are presented in table 8.5. As far as the sex ratio is concerned this is closest to the same as that of national figure. In all the three union councils the situation was found to be the same. In the project area the percentage distribution of males and females were 49% and 51% respectively.

The average house-hold for the project area as a whole is 7.7 persons while for Pakistan is 6.8 persons. This trend in population could be mainly the literacy rate prevailing in rural villages of the province. Another factor could be the desire for a male child, which is considered as a source of earning for the household and can provide shelter for his parents, in their old age. This population trend conscious the

authorities about the provision of social sector development. It seems that the available facilities will fall short of the demand in future. There is a need to make planning for facilities like schools hospitals, water supply etc. so that the people may not suffer from the shortage of these basic facilities. Moreover this also indicates that the number of the people entering the prime reproductive span will be increasing proportionally in the coming years and this trend implies an increased need for reproductive health and family planning services and it not only dilutes the results of the development efforts but also creates unsustainable level of demand on already scarce resources to cater for the needs of population.

Table 8.5: Distribution of the Sample Respondents by Family Composition and Average Size of the Household

Name of Union Council	Sex		Total	Average H.H. Size
	Male	Female		
Jhagra	259	269	528	7.9
M.Khattki	331	345	676	7.5
Wad Paga	199	210	409	7.7
Project Area	789	824	1613	7.7
% age	49	51	100	-

Source: Field Survey

8.1.6 Literacy Status of Households' Members

Education is a stepping-stone towards the good things of life and also is an essential tool for human resource development and necessary ingredient for sustainable socio-economic growth. The investment in education contributes to the accumulation of human capital, which is essential for higher incomes and sustained economic growth. Education help, to reduce and by equipping people with the skills they need to participate fully in the society.

The data in table 8.6 shows sex wise literacy status of the members of the sample household's understudy. It may be seen that whereas 47%of the people understudy were illiterate with 53% being literate. Illiteracy is much higher in the case of female population as that of male. Thus 55% of the female population is illiterate as against 41% of male. The table further shows that the largest group by the level of

education was to be found in primary level, followed by middle and secondary school certification level. The number of the graduate was not found encouraging.

Table 8.6: Distribution of Respondents Households Members According to Literacy Status and Literacy Levels

Literacy Status				Literacy level of the literate family members						Literacy Level						
Sex	Illiterate		Literate		Primary		Middle		Matric		F.A		B.A		M.A	
	No	%	No	%	No	%	No	%	No	%	No	%	No	%	No	%
Female	307	41.3	445	53.54	174	30.10	131	29.43	80	17.97	38	853	13	2.92	9	2.2
Male	435	58.62	386	46.4	182	47.15	93	24.09	60	15.54	51	13.21	-	-	-	-
Project Area	742	47.17	831	52.82	456	61.4	224	30.1	140	19.0	89	12.0	13	1.7	9	1.2

8.1.7 Housing Characteristics

The living condition of a family household is one of the major indicators, which reflect the economic status of a family/household. One of the common characteristics of the village is unplanned housing structure and sewerage system. The houses in the sample area were not in good condition structure wise. They were constructed out in an unplanned manner and clustered haphazardly. Streets were narrow and the sewerage system was also very poor as Table 8.7 show that in the project area (51%) households had kacha houses. Only a small number of households 17.14% had pacca houses. As for as other facilities are concerned in all the three villages 44.28% reported that they had proper drainage system, while in the rest of the household, the drainage system, was very poor. Water could be seen flowing in the streets, spreading bad odor and resulting in many diseases. One of the basic problems reported by sample respondents was the disposal of garbage. In the sample villages only 10% of the households had piped water facilities and almost 90% of the households use deep well, and had to depend on neighbors and community wells.

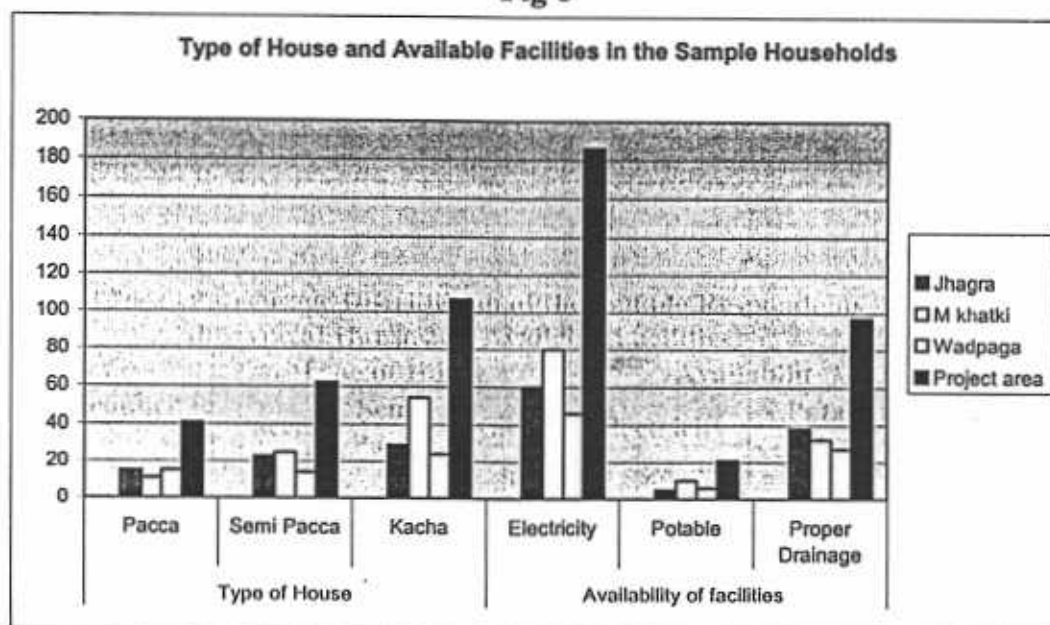
Power supply was available in sample area, 88.4% households had been reportedly been connected to the network for varying number of years. Indeed there were 11.6% percent of respondents did not have the electricity in their home.

Table 8.7: Percentage Distribution of the Sample Respondents According to the type of House and Available Facilities

Name of Union council	Type of House			Availability of facilities		
	Pacca	Semi Pacca	Kacha	Electricity	Potable Water	Proper Drainage
Jhagra	15	23	29	60	5	38
M khatki	11	25	54	80	10	32
Wadpaga	15	14	24	46	6	27
Project area	41	62	107	186	21	97

Source: Field Survey

Fig-5



8.2 Empirical Evidence About SRSP Interventions

In the previous section general characteristics of the sample respondents was discussed. In this section discussion will be made on the other relevant aspects of the sample respondents regarding the research under reference. This section deal, with the formation of WCO's, the factors that led to their formation, representation of different ethnic groups in the WCO's, Interventions of SRSP, Human Resource development by SRSP, training received by the sample respondents from the SRSP package, and benefits accrued from these trainings.

8.2.1 Formation of Women Organizations

In spite of the fact that women of poor households play a vital role in the economic and social life of the society, yet they continue to be perceived as marginal to our society. In the NWFP the overall social and economic status of women is low. Women participation in the development process is inhibited due to the prevalence of culture specific biases, low literacy level, poor health status, lack of awareness and access to information due to less exposure and immobility, limited level of skills and gender division of labour. Keeping in view these facts many NGO's started such developmental activities to improve the socio-economics status of the rural poor. With the help of social organizer, these NGO's organized the rural people (male/female) and motivated them to form both male (MCOs) and women community organization (WCO's). Main theme of all these organizations is that "together we become a force" the objective of all these is to enhance the social capital for effective utilization of available resources on equity basis to broadens and creates income generating activities. This improves their stagnant social and economic life. Similarly the women programme of SRSP primarily aims at the empowerment of the rural women by enhancing their socio-economic status and the main purpose is to make women aware of their potential and enhance their capacity by encouraging their participation in the development process of their family and community. The fundamental step is to organize the communities in to man and women village organizations.

For this purpose SRSP had formed fifty women organizations in the sample area. The respondents who joined the women organization can be seen from the table No.8.8 that among the total respondents 85% joined the woman organization after 2000 and almost 15% before the year 2000. It has been found that is almost in all the cases, the presence of men's organization has motivated the community women to organize themselves. Women were initially contacted through already existing village community organizer for the purpose of WO formation. It seems the consent of men was determining factor in this regard. The major reason for WO formation is to avail benefits in terms of programme package; provision of physical investment and micro-credit. The initial number of membership was low which gradually increased after year 2000. As the idea of forming organization was new for women, thus in the beginning women were hesitant to join the WO. But with the passage of time when

they become familiar with the idea of belonging to an organization and that it was going to benefit them, they joined it.

Table 8.8: Distribution of Respondents According To Joining Year of Women Organization.

<i>Name of Union Councils</i>	<i>Joining year of respondents</i>			
	<i>Before the year 2000</i>		<i>After the year 2000</i>	
	<i>No</i>	<i>%</i>	<i>No</i>	<i>%</i>
Jhagra	10	14.92	57	85.08
M.Khatki	13	14.00	77	86.0
Wad Paga	8	15.10	15	85.00
Project Area	31	15	179	85.00

Source: Field Survey

8.2.2 Representation of Ethnic Groups in WCO

The data show that 92% of the respondents stated that SRSP give representation to all groups while 8% reported dissatisfaction over membership of WO. Men did not allow their women to attend meeting because of certain conflicts among the members of the village social organizer, which split in to two groups and also influenced their woman to withdraw their membership. In some cases membership decreased due to lack of activities as the members have availed most of the packages including credit. But the women who are still members of WOs, (48%) of the respondents, stated that the social organizer motivated them to join the WO while 33% reported that every one could join WO. And they further stated that women understand that benefits were given to each household and not to any specific individual.

Table 8.9: Distribution of Respondents According to Representation of ethnic Groups.

Name of Union councils	Total	WCO represent all the Ethnic group				If yes, how					
		Yes		No		By joint Discussion		Every one can become Member		Don't know	
		No	%	No	%	No	%	No	%	No	%
Jhagra	67	61	91	6	9	32	48	23	45	12	17.9
M.Khatki	90	85	95	5	6	45	50	30	34	15	16.67
WadPaga	53	48	91	5	9	25	47	18	34	10	18.86
Project Area	210	194	92	16	8	102	49	71	34	37	17.63

Source: Field Survey

8.2.3 Reasons for Joining Women Organization

SRSP aims at building the capacity of local community through participatory rural based organization for sustainable social and economic development with primary focus on the rural poor and disadvantaged. All rural women are considered disadvantaged being confronted with specific socio-economic constraints of mobility, restricted decision making capacity, illiteracy and poor health status. Prior to SRSP woman in the project area had no experience or opportunity to meet at larger forum to collectively discuss issues concerning their socio-economic needs. In the sample area as the data show 89% respondents reported lack of capital and to get credit and 11.1% expressed to learn new skills the reason for joining WO. The formation of WO has created a sense of awareness among rural women that they can play a significant role as an agent of change along with men for the community development.

Table 8.10: Distribution of Respondents by Reasons for Joining of Women Organization.

Name of Union Councils	Number of Respondents	Reasons for joining WO					
		Financial problems		To get credit		To learn new skill	
		No	%	No	%	No	%
Jhagra	67	40	59.7	17	25.37	10	14.93
M.Khatki	90	60	66.66	22	24.54	8	8.8
Wadpaga	53	28	52.83	18	33.96	7	13.20
Project Area	210	128	60.95	57	27.1	25	11.90

Source: Field Survey .

8.2.4 Knowledge about SRSP's Interventions

The women organization provided women a forum to have frequent interaction for exchange of views and information and due to this forum more than half 51% of the respondents had knowledge about the SRSP's credit package, 27% about stitching and embroidery and 6% had knowledge about food processing programme (pickle and jams). As is evident from table 8.11 almost all of the respondents (91%) further stated that these interventions (tailoring, stitching, Embroidery) credit etc are based on women needs because these entrepreneurial training will make them earning hands and these training help women in transforming their traditional roles into more productive one. Training which could be termed as cutting the edges for refining to provide the opportunity to gleam the hidden strength. It also strives to enable the WO to augment their capacity for improved management of their communities in their struggle towards empowerment and sustainable development.

Table 8.11: Distribution of Respondents by Knowledge about SRSP's Interventions

Name of Union councils	Total	Interventions							
		Credit		Stitching/ Embroidery		Pickle and Jam Making		Don't know	
		No	%	No	%	No	%	No	%
Jhagra	67	34	50.74	16	23.88	5	7.46	12	17.92
M. Khatki	90	51	56.68	23	25.57	6	6.6	10	11.15
Wad Paga	53	23	43.39	18	33.96	-	-	12	22.65
Project Area	210	108	51.42	57	27.15	11	5.24	34	16.19

Source: Field Survey

Table 8.11-B: Distribution of the Respondent According to Interventions Based on Women Needs

Name of Union Councils	Total	Interventions Based on Women Needs			
		Yes		No	
		No	%	No	%
Jhagra	67	60	89.55	7	10.45
M.Khatki	90	84	93.34	6	6.66
Wad Paga	53	46	86.79	7	13.21
Project area	210	190	90.47	20	9.53

Source: - Field Survey

8.3 Human Resource Development

Investment in human resources is an indispensable component of social and economic development. The full development potential of a nation can never be achieved if its human resource is not effectively harnessed. It is now a widely accepted reality that effective utilization of a country's human resource requires, that both sexes share equally in the developmental effort and in the distribution of benefits.

In developing country women are the disadvantaged portions of the population. If they are economically well off, socially they are impediment among the illiterate adults. Even, at the household level, very often, they do not have a voice in decision-making. There is a need for gender equality and it's mainstreaming not only for empowering the women but also for alleviating their poverty. For this very reason investment in human capital should be the primary focus to any developing country.

Till sixties emphasis was laid on economic activities but in eighties importance of human resource development was realized. Since then it is considered vital for the overall development of a country. Human resource development could be the first step towards alleviation of poverty. Skilled cadre are required at every level especially at community level to develop their local leaders activist, the human resource development section at SRSP strives to upgrade technical and managerial skills of both the staff and communities so that together they can improve management and leadership of the rural communities for the purpose of poverty alleviation at the grass root level. For this purpose different skill development training are imparted by SRSP. The data in table 8.12 depicts that 34% women were trained in tailoring embroidery followed by 25% dyeing glass painting and 19% in poultry farming. Since tailoring and embroidery is considered one of the vital skills, which is traditionally prevalent among rural women, thus fruit full efforts were made during the period to transfer this skill to rural women. Attempts were made to interact with urban market and during the process the need for bringing innovation in the designs and pattern according to the market demand was also recognized. Nineteen percent of the respondents were trained in poultry farming and 14% in mushroom cultivations As Poultry farming needed relatively small capital and quick return on the investment and no restriction on the scale of the business. Poultry farming could also be a part time activity and offers best opportunity of self-employment in the rural areas. Mushroom an edible novelty is sold at very high price in the market. Its cultivation was the most popular entrepreneurial training amongst communities but as stated by the respondents that there was lack of management skills. Because of these skill enhancement development activities these beneficiaries have become self-employed and have launched their own business in the sample area.

Table 8.12: Distribution of Respondents According to Trainings Received.

Type of trainings Received	Jhagra		M.Khatki		Wadpaga		Total		Duration of Training
	No	%	No	%	No	%	No	%	No
Stitching, tailoring embroidery making	24	35.8	35	38.9	14	26.4	73	34.8	Seven days
Poultry farming	12	17.9	20	22.3	8	15.8	40	19	Five days
Mushroom cultivation	8	11.9	3	3.3	18	33.9	29	13.8	Four days
Dyeing /glass painting	17	25.4	27	30	10	18.9	54	25.7	Seven days
Other (silk worm, bee keeping)	6	9	5	5.5	3	5.7	14	6.6	Four days
Project Area	67	100	90	100	53	100	210	100	-

Source: Field Survey

8.3.1 Duration of Training Courses

About 70% of the respondents complained about the duration of the training courses. They considered these duration too short for them to take full advantage from these trainings. However the remaining 30% were found satisfied from these trainings. The respondents who were satisfied from the duration of the training reported that due to heavy involvement in household chores and children socialization and other sphere of life they have no spare time. Similarly the respondents, who were in favour of long duration training stated that due to their efficient management they conduct all these activities in smooth manner and attributed this phenomenon to the co-operation of family members, the presence of enough manpower in their homes, the household duties are fulfilled without any disturbance.

Table 8.13: Distribution of respondents According to Satisfaction and Dissatisfaction about Duration of Trainings

Name of Union Councils	Total	Too short		Normal	
		No	%	No	%
Jhagra	67	46	68.65	21	31.35
M. Khatki	90	65	72.23	25	27.77
Wadpaga	53	34	64.15	19	35.85
Project Area	210	145	70	65	30

Source: Field Survey

8.3.2 Benefits gained from Skill Enhancement

The sample women gained benefits from the skills they received. It is evident from table 8.14, that 89.52% respondents were satisfied from these income generating activities and consider it beneficial in terms of saving and income generation. The respondents, had showed interest in these packages and want to carryout these activities on commercial basis however 22% of the respondents replied that they suffered loss in their business of poultry farming and silk worms, etc they also reported that non-availability of raw-material and equipments in the sample area stands in the way of adoption of these activities on commercial basis. The data further depicts that 38.29% of the respondent were involved in tailoring stitching/embroidery, followed by 23.4% dyeing and 21.27% poultry farming respectively. These respondents reported that these economic activities enabled them to earn a handsome amount of money and besides these it reduces their dependence and give economic security and self reliance to them.

Table 8.14: Distribution of Respondents According to Benefits Received from Trainings Imparted by SRSP

Name of Union Councils	Total	Benefits received				Tailoring /Embroidery		Dyeing		Poultry Farming		Others	
		Yes		No		No	%	No	%	No	%	No	%
		No	%	No	%								
Jhagra	67	63	94.02	4	5.97	24	38.09	14	22.22	12	19.04	13	20.63
M.Khatki	90	78	86.66	12	13.33	34	43.58	20	25.6	20	25.64	4	5.12
Wad.Paga	53	47	88.67	6	11.32	14	29.78	10	21.2	8	17.02	5	13.91
Project Area	210	188	89.52	22	10.47	72	38.29	44	23.4	40	21.27	32	17.02

Source: Field Survey

8.3.3 Increase in Monthly Income after Skill Enhancement

Women in the project area had taken part in different trainings regarding the income generating activities. They have improved their management and technical skills. They had applied these skills and through these skills their income had increased. The income of the sample women refers only to such earnings as they themselves generate through these skill enhancement activities and in no way includes or show the over all income of the family they belong to. For the same reason, it is no way determines the living standard of these sample women as it may not be their only or even major income and simply be a supplement to what their husbands/parents earn. Alternatively, it may be the only income of the family as a whole and is enjoyed not exclusively by the earner but shared with the rest of the family/dependents.

As the table 8.15 indicates that the sample women were classified in four income brackets. In the project area 33 % of the sample respondent's women earned Rs.1201-1500 per month. Women falling in the income brackets of 800-1200 and 500-800 form 29% and 20% respectively. However women earning Rs.1501- 2000 were 19%. Some of the respondents also stated that on special occasions i.e. wedding and festivals, then they earned more than the usual income due to an increased demand. The income earned from these activities was utilized for WO savings, informal saving committees, children and their own cloths and daughters dowries.

These enterprise development trainings had received good response from the community women and had given them exposure to non-traditional activities. But the

introduction of innovative activities just for the sake of imparting technical knowledge of various skills to rural women without analyzing the financial, economic and social viability is not an effective strategy. Recognizing the potentials of the entrepreneurial ventures as an income generating activity, the need is to carryout feasibility studies to determine the relevance and prospects of specific entrepreneurial skills in the area.

Table 8.15: Distribution of Respondents According to Increase in Monthly Income after Training

Villages	500-800		800-1200		1201-1500		1501 -2000		Total
	No	%	No	%	No	%	No	%	
Jhagra	14	21	18	26	20	30	15	23	67
M.Khatki	14	15.55	28	31.11	34	37.77	14	15.57	90
Wadpaga	13	24.52	14	26.41	15	28.30	11	20.77	53
Project area	41	19.52	60	28.57	69	32.85	40	19.06	210

Source: Field Survey

8.3.3.1 Increase in Income after Training

Respondents got training of various kinds, including tailoring (34.8%), dyeing (25.7%), poultry farming (19.00%), mushroom cultivation (13.80%) and others (6.60%)

We used dummy variable technique to analyze whether increase in income after training. IIT differed with type of training received.

$$\begin{aligned}
 \text{IIT} = & 1233.528 + 56.571 \text{ DTD}_y - 53.864 \text{ DTP} - 298.188 \text{ DTM} - 102.792 \text{ DTO} \\
 & (40.119) \quad (0.984) \quad (0.839) \quad (3.992) \quad (1.022) \\
 & (0.006) \quad (0.326) \quad (0.402) \quad (0.005) \quad (0.308) \dots (8.1)
 \end{aligned}$$

The value of intercepts represents the tailoring training case while other trainings are represented by differential intercepts namely DTD_y (dummy for training in Dyeing), DTP (Poultry), DTM (Mushroom) and DTO (Other Trainings). The results in equation (8.1) indicate that average increase in income of respondents with training in tailoring is estimated at Rs. 1233.53. Compared to this increase in income, the increase in income with training in dyeing is higher by Rs. 56.57, however this increase is statistically insignificant as reflects from values of t-ratio and significance level.

As far as increases of income of respondents with training in poultry, mushroom and other skills are concerned, that have been lower by Rs. 53.86, Rs. 298.19 and Rs. 102.79, respectively, than that of the increase in income with training in tailoring. Since the differential intercept DTM (which stands for mushroom training) carries statistically significant coefficient, we therefore assume that training in all stated skills seem to contribute no statistically significant differences in increase in income with except of mushroom whereas increase in income seems to be significantly lower than the tailoring base case.

8.3.4 Contact of Social Organizer with Women Organizations

In NGO's social organizers are considered frontline soldiers responsible to mobilize the communities to get them organized, inculcate the discipline of collective savings, helps in identification of needs deliver programme specific messages and inputs, follow up programme activities and create awareness by engaging them in to meaningful dialogue. The success or impact of programme activities largely depends on social organizer, who are in direct contact with the community and responsible to sustain members enthusiasm through different programme packages. A considerable proportion of the social organizer time is spent on contacting and organizing communities usually the social organizer visits the WO once in a month and average time spent in the WO is between 1-2 hours. Similarly almost all of the respondents (96%) in sample villages also reported that the social organizer visits the WO. The social organizer keeps contact with such WO who has the potential to regain active status. The data in table further reveals that 61.19% respondents indicated that social organizer is visiting WO twice a month while 38.8% reported once a month. Regular meeting and maximum attendance though is one of the indicators for gauging the effectiveness of a particular WO. Social organizer needs teamwork. Thus the social organizer needs input and assistance from the technical staff, management of organization and specially WO activists to facilitate her in the performance of her duties. The training of WO management and more specifically of activists will gradually reduce WO dependence on the social organizer and allow her to assume the role of facilitator.

Table 8.16: Distribution of Respondents According to SRSP Contact with Women Organizations.

Name of union councils		Contact of SRSP				If yes after how much time			
		Yes		No		Twice a month		Once a month	
		No	%	No	%	No	%	No	%
Jhagra	67	63	94.03	4	5.97	40	63.49	23	36.51
M. Khatki	90	88	97.78	2	2.22	46	52.27	42	47.73
Wad Paga	53	50	95.33	3	4.66	37	74.0	13	26.0
Project area	210	201	95.72	9	4.28	123	61.19	78	38.81

Source: Field Survey.

8.4 Micro Credit and Enterprise Development

There has been traditionally a neglect of a larger rural majority, especially the poorest of the poor, for access to institutional credit sources. The two available sources of credit are formal credit and informal credit institutions. The formal sources comprise of financial institutions, co-operative and commercial banks, while the informal sources include friends, relatives, shopkeepers and moneylenders professional. Experience with formal sources of finance is lethargy on the part of such institutions, cumbersome procedures, limited outreach and sometime use of unfair means to exploit the people in need, especially the poor. Moreover, in countries like Pakistan, the already marginalized women, shy away from the requirements like personal appearance and provision of photography, resulting into complete marginalization of 50 percent of the population to contribute in the process of development.

Like other NGOs and public sector organizations, SRSP also consider it important to strengthen its development Programme with the provision of credit. As already mentioned elsewhere, the SRSP offers a number of trainings for the development of different sectors of the society in rural as well as in small towns. But unless these training are not supported by financial assistance the required results cannot be achieved. For this purpose the SRSP has included micro credit in its

package. Micro credit is the major component of the SRSPs package. This credit is offered for agriculture development, livestock development, enterprise development and other related activities depending upon the nature of economic activities available at village level.

8.4.1 The SRSP'S Credit Programme Aims at

- Increasing the access of the rural poor to credit for productive purposes;
- Ensuring that a local pool of capital is generated for long term community access to credit;
- Encouraging and supporting micro-enterprise development initiatives for increasing productivity and income; and
- Helping strengthen the institution building at the village level.

To respond the credit needs of rural communities of NWFP, especially the poorest of the poor, SRSP has made a special provision in its credit policy for all community members in the form of collateral free loans of upto Rs. 25,000/- at 16% service charges per annum. Loans exceeding Rs. 25,000/- are being given at a service charge of 18 percent per annum. However, loans required for improved breed of buffaloes for including purpose, the upper credit ceiling per member is Rs. 30,000/-. The service charge for this type of loan remains 16 percent per annum. Two percent of the recovered service charges of all loans are being paid to the community activists for their services in loan processing and recoveries. Generally, loans for enterprise are paid back to SRSP in installments (monthly/ quarterly), whereas those for agriculture are repaid in lump sum.

This section briefly discuss the amount, purpose, problems in obtaining credit, whether the amount offered is meeting the credit requirements of the sample respondents and if not, how much would be sufficient for their requirements. First enquiry made in this regard was how the sample respondents became aware of the SRSP Credit program in the sample villages.

8.4.2 Sources of information about SRSP's Credit

Advance of credit to its COs members is one of the major function of SRSP. Information in this regard is gathered from the field, which are presented in table 8.16 the data show that the SRSP's staff is not efficiently performing their duties regarding the dissemination of information about credit program. Only 36% of the respondents reported that they came to know about this Programme in the meeting with the

SRSP's staff. In contrast to this about 64% become aware from other people, mostly friends, about credit programme of SRSP. It is important to mention here that in addition to SRSP; credit the respondents were having information about other sources of credit. These include both formal and informal sources available to the people of the area. As already mentioned that the sample villages are located at a distance of about 15 km from the provincial capital, they were having knowledge of all these sources. This was due to social ceremonies arranged at different occasions at village level where people get together and discuss and shares different information with each other. In addition to this electronic media is playing pivotal role in disseminating information about the availability of credit.

Table 8.17: Distribution of the Respondents According to the Sources of Information about SRSP Credit Programme

Name of union Councils	Source of information				Total
	SRSP Staff		Friends		
	No	%	No	%	
Jhagra	23	34.32	44	65.68	67
M. Khatki	32	35.55	58	64.45	90
Wad Paga	21	39.62	32	60.38	53
Project Area	76	36.19	134	63.81	210

Source : - Field Survey

8.4.3 Purpose of Obtaining and Utilization of Credit

It is very clear that village societies consist of different occupational / ethnic groups. The NGOs try to include all occupational and ethnic groups while forming V.O's or WOs. Similarly when people become aware of the benefit, which the NGOs offer to the village community, they join the V.O's. In the survey villages both farmers and entrepreneurs were existed. They benefited from the credit Programme of the SRSP. They obtained credit for a number of purposes. They are grouped as those who took credit for the purchase of livestock and those who obtained credit for enterprise development. As the sample villages are closer to the urban center, people are switching towards trade and business. Majority of the respondent obtained credit for enterprise development. On the other hand 42% of the sample respondents secured

loan for the purchase of livestock. Our results support the findings of other studies conducted on the subject in other areas of the province.

Most of the females involved in agricultural activities are mainly engaged in the livestock activities. The males are usually engaged in agricultural activities at the farm while all those activities, which are inside the boundary walls of the house, are performed by females of the farm household. That is why a significant percentage of the sample respondents obtained loan for livestock development. In contrast to this those households who are not involved in farming activities obtained credit for enterprise development. It is to mention here that enterprise promotion is one of the main components of the SRSP package. It was found encouraging that all the respondents who obtained the credit, the analysis revealed that majority of the loans is being utilized successfully by WO members. The loans were mainly utilized for enterprise promotion and livestock. The respondents who secured credit for enterprise includes Readymade Garments, shop keeping, clothes/blanket selling, crockery selling, poultry farming. A few women have also established embroidery shops in the sample village. The community has hired the services of the middleman who takes their products to the cities for a certain commission. The respondents who obtained credit for livestock majority of them bought buffalos and were selling milk and milk products at village level. In most of the cases, woman have availed the loans after consulting their husbands and keep income earned from selling of milk. From this amount initially they utilize this money for payment of credit installments, household expenditures and livestock feed.

Table 8.18: Distribution of the Sample Respondents According to the Purpose of Loan

Name of Union Councils	Purpose of Loan				Total
	Livestock		Enterprise Development		
	No	%	No	%	
Jhagra	29	43.28	38	56.72	67
M. Khtaki	39	43.33	51	56.67	90
Wad Paga	21	39.62	32	60.38	53
Project Area	89	42.38	121	57.62	210

Source: Field survey

8.4.4 Amount of Credit Obtained

Credit is the major source of finance for those who do not have sufficient resources to mobilize these for different household requirements. Pakistani society is male dominated society, in majority of the cases females are not allowed to take initiative to start their own enterprises. In the SRSP credit packages the minimum and maximum amount offered to the member of WOs is Rs. 5,000/- and 30,000/- respectively. For the purpose of analysis we have grouped the sample respondents into two groups. One group consists of those who availed credit in the range of Rs. 5,000/- to Rs. 10,000/-. A very vast majority (87%) of the respondents fall in this group. The other group consists of those who obtained credit in the range of Rs. 18,000 to Rs. 20,000/-. In this group only 13% of the respondents were found. Now there are two possibilities for such a response in the survey villages. The respondents may have some of the sources of their own and they need only a small amount to supplement their own sources with credit. The second reason could be they have little skills for initiating their trade / business, or they were not willing to take risk. Another possibility could be that they were not encouraged by the male members of the household.

Table 8.19: Distribution of the Respondents According to the Amount of Credit Obtained.

Name of Union Councils	Amount of credit (Rs)				Total No
	5000-10000		18,000-20,000		
	No	%	No	%	
Jhagra	60	89.55	7	10.45	67
M. Khtaki	79	87.77	11	12.23	90
Wad Paga	44	83.01	9	16.99	53
Project Area	183	87.14	27	12.86	210

Source: Field Survey

8.4.5 Sufficiency of Credit Obtained from SRSP

In the previous section we have noticed that 87% of the sample respondents have reported that they had obtained credit in the range of Rs. 5,000/- to Rs. 10,000/-. Generally it is very small amount for running or starting an economic activity. This question was investigated in the field. The response in this regard is presented in table

8.20. The figures show that 75% of the sample respondents reported that this amount was not sufficient for them. Now the question arises if this amount is not sufficient then from where did they fulfill their capital requirements. One logical answer to this question is that other sources both formal and informal are available to the sample respondents at village level. In some cases they are interest free especially the credit from the informal sources. According to our general observation first they resort to the interest free credit. If the interest free credit is not sufficient for their requirements then they resort to interest bearing credit. It seems that in the sample area the respondent behaved quite rationally in this regard.

Table 8.20: Distribution of Respondents Reporting About the Amount of Credit Sufficient for Running Enterprise

Amount of loan sufficient					
Name of Union Council	Yes		No		Total
	No	%	No	%	
Jhagra	16	23.88	51	76.12	67
M. Khtaki	21	23.33	69	76.67	90
Wad Paga	16	30.18	37	69.82	53
Project Area	53	25.23	157	74.77	210

Source: Field Survey

8.4.6 Recommended Amount of Credit by Respondents

Keeping in view their small enterprises those who had reported that the available credit is not sufficient were asked to mention their capital needs. In this regard 73% of them recommended that maximum credit advanced by SRSP should be in the range of Rs. 30,000/- to Rs. 40,000/-. However some of them (27%) recommended that this amount should be above Rs. 40,000/-.

It can be inferred from the data that in advancing the credit, SRSP do not consider the capital requirements of the debtor. This practice could adversely affect the interest of the debtor, which can negatively affect the benefits that can be acquired from obtaining the credit. Moreover, this could also expose the poorest of the poor to be exploited by other informal credit institutions.

Table 8.21: Distribution of the Respondents, According to the Recommended Amount of Credit.

Name of Union Council	Recommended amount of credit				Total No
	30,000-40,000		Above 40,000		
	No	%	No	%	
Jhagra	10	27.02	27	72.98	37
M. Khtaki	64	92.75	5	7.25	69
Wad Paga	41	80.39	10	19.61	51
Project Area	115	73.24	42	26.76	157

Source: Field Survey

8.4.7 Repayment of Loan

Repayment of loan plays important role in the utilization of credit. If the repayment installments are easy then the debtor willingly obtains credit and vice versa. In this case it is more important that the repayment system should be more flexible, because the sample respondents were females. In order to encourage them and to involve them in the development process more flexible system of repayment be introduced by the NGOs and the public sector organizations.

The data in table 8.22 show that 60% of the respondents complained about the repayment procedure. It seems that they were discouraged from obtaining this credit. Majority of them were complaining about the interest rate charged on these loans, followed by those who mentioned about the grace period of this credit. There was another group who raised objection on the amount of repayment installment. In order to encourage the females and involve them to contribute in the household income all the concerns need to be addressed.

Table 8.22: Distribution of the Sample Respondents According to Satisfaction from the Repayment System

Name of Union Council	Satisfied from the existing repayment system										
	Yes		No		Reasons for dissatisfaction						Total
	No	%	No	%	Grace period		Low interest rate		Reduce amount of installment		
					No	%	No	%	No	%	No
Jhagra	22	32.83	45	67.17	11	24.44	20	44.44	14	31.12	45
M.Khatki	44	48.88	46	51.12	10	21.73	19	41.30	17	36.97	46
Wad Paga	18	33.91	35	66.09	8	22.85	14	40.0	13	37.15	35
Project Area	84	40.0	126	60.00	29	23.01	53	42.06	44	34.93	126

Source: Field Survey

8.4.8 Problems in Obtaining Credit

In order to make a success of the programme it is important to remove the hurdles/obstacles in its way. In the sample villages the respondents registered a number of complaints in this regard. These include the lengthy procedure, non-refundable amount of securities and compulsory saving on the part of the debtor. Those who reported some problems in obtaining loan were 72%. However, there were some others (32%) who did not mention any complaint. Among those who reported some problems were mainly about the non-refundable fee involved in obtaining loan. Followed by those who mentioned the procedure that they consider was lengthy for them. Some also mentioned (20%) the compulsory saving, which is used as revolving fund by the WOs.

Apparently it seems that these are minor problems. But for a society where the literacy rate is below 40% and where the literacy level is also very low, these are considered hurdles in the way of success of a programme. Those who had reported no problem at all seem to be literate respondents, who know how to fill a loan form. How to apply? And how to get rid of these hurdles etc.

Table 8.23: Distribution of the Sample Respondents According to the Difficulty in Getting Credit

Name of Union Councils	Nature of Difficulty Reported								
	Lengthy procedure		Non-Refundable fee		Compulsory Saving		No Difficulty at all		Total
	No	%	No	%	No	%	No	%	
Jhagra	12	19.91	29	43.28	16	22.88	10	13.93	67
M.Khatki	28	31.11	26	28.88	16	17.77	20	22.24	90
Wad Paga	9	16.98	17	32.07	11	20.77	16	30.18	53
Project Area	49	23.33	72	34.28	43	20.49	46	21.9	210

Source: Field Survey

8.4.9 Reasons for Obtaining Credit from SRSP

As the main responsibility of running a household business lies on men's shoulders women are playing minor role in the household economy. Though a number of options are available for financing the economic activity; but the females give preference to avail the SRSP's credit. This reflects the SRSP's strategy in mobilizing the village community. The SRSP female social organizers make frequent visits while forming WCOs. It is mandatory for the social organizer to call fortnightly and monthly meetings and discuss the community needs and priorities.. In the light of this list they motivate the community to take initiative. When the financial constrain came in their way while taking any initiative the social organizer guides them for obtaining credit from the SRSP. In addition to this activists also help them in this process. It seems that this factor leads them to resort to SRSP's credit.

The data in table 8.24 reflects this picture. About 90%of the respondents reported that they were motivated by the activists and social organizers of the SRSP. The remaining respondents mentioned that their male family members motivated them to get credit from the SRSP. It is important to mention here that who reported the male family member; their male members were members of male community organizations (MCO's). It seems that these households were more involved in the village developmental activities.

Table 8.24: Distribution of the Sample Respondents, According to their Preferences for Obtaining Micro Credit.

Name of Union Councils	Motivation by SRSP staff	Motivation by male members of the family	Total
Jhagra	61	6	67
M. Khatki	80	10	90
Wad Paga	45	8	53
Project Area	186	24	210
% age	89	11	100

Source: Field Survey

8.4.10 Impact of Credit on Household Economy

8.4.10.1 Impact on Income

One aspect of SRSP's credit is that besides advancing credit the SRSP social organizers keep check on its utilization. As discussed earlier that all the respondents who availed credit utilized it for the purpose obtained for. This practice helps the sample respondents to get maximum benefit from the credit programme. Increase in income and expenditure were the main indicators in this regard.

Though it was difficult to quantify the difference between the household income and expenditure before and after obtaining credit. This question was left on the sample respondents. They were best judges. They reported changes that occurred in their income and hence, in expenditure.

The credit utilized by the sample respondents enhanced their economic activities. Most of the women purchased different household items from the city market and sold these in their respective villages or to other women. The important point here is that the women got confidence by taking part in the entrepreneurial activities.

The data presented in table 8.25 elaborate the monthly income of the sample respondents. The results show that the average monthly income of the sample household was Rs. 2,586/- before obtaining the credit. After the utilization of the credit their income increased to Rs. 3,253. In addition to the change in income they

also repay the monthly installment of the credit in the stipulated time, which enhanced their credibility.

Table 8.25: Average Monthly Income of the Sample Households Before and After Utilization of Credit

Name of union councils	Average Income of household before credit (Rs.)	Average Income of the household after credit (Rs.)	Standard Error	T-Value
Jhagra	2700	3416	22.94	31.205*
M Khatki	2485	3089	26.55	22.70*
Wad Paga	2614	3327	28.15	25.29*
Project Area	2586	3253	15.67	42.52*

Source: Field Survey

*Significant at 1 %

A view of the above table shows significant differences in the household income before and after the credit facilities provided by the SRSP. The difference in the income of the entire area after the project is high as 26% when compared to the post project period.

8.4.10.2 Impact on Expenditure

The income figures presented above reflect the economic condition of the sample households. It seems that all the sample households are living in a miserable condition and are below the poverty line. It was observed that the average increase in monthly income of the household was Rs. 667/-. Though in terms of %age it is 26% but in terms of value it is not very significant. However, one can expect that if this increase is continued it can change the fate of the sample households.

The sample respondents reported that they are spending the increased income mostly on food items and on clothes of their children. Some also reported that in case of health problems they prefer to spend money on health. As far as saving is concerned at this stage they were unable to save many because they were already living below poverty line.

8.4.10.3 Increase in Income after getting Credit facility

1. Credit is provided for two major activities, namely:

- a) Livestock
- b) Enterprises

We used a dummy variable econometrics approach to determine whether the increase in income after credit (IIC) provided for the two types of businesses (Livestock and Enterprises) differed. We found the following empirical results:

$$\begin{array}{rcl} \text{IIC} = & 664.079 & + \quad 5.054\text{DE} \\ & (27.51) & (0.159) \\ & (0.007) & (0.874) \dots\dots\dots (8.2) \end{array}$$

(Figures in the 1st and 2nd parenthesis are t-ratios and significance levels).

Empirical results given in equation (8.3) indicate that average increase in income after credit (IIC) from livestock business is Rs. 664.08, while it is higher by Rs. 5.05 in case of enterprise businesses; however, this increase in income in enterprise business (compared to livestock) is not statistically significant (as reflects from sig. Levels given in the 2nd parenthesis).

2. We also applied a dummy variable approach to differentiate between average income from category 1 (5000-10000) and category 2 (18000-20000) credit.

$$\begin{array}{rcl} \text{IIC} = & 663.413 & + \quad 28.895\text{DC2} \\ & (39.551) & (0.606) \\ & (0.008) & (0.545) \dots\dots\dots (8.3) \end{array}$$

Average increase in income form category 1 credit is Rs. 663.413 and is Rs. 28.89 higher in case of category 2 credits; however this increase is statistically insignificant.

3. To see the effect of category 2 credit and the selection of enterprise against category 1 credit provided for livestock, we tried the following model.

$$\begin{array}{rcl} \text{IIC} = & 661.192 + 3.930\text{DE} + 28.546.\text{C2} \\ & (26.818) \quad (0.123) \quad (0.596) \\ & (0.004) \quad (0.902) \quad (0.552) \dots\dots\dots (8.4) \end{array}$$

The average increase in income in case of category 1 credit for livestock estimates at Rs. 661.19 and it increases by Rs. 28.55 if category 2 credit is provided. If only business changes from livestock to enterprise and credit remains the same as category 1, the increase in income enhances by Rs. 3.93. In both cases, increases in income do not turn out to be significant.

8.4.11 Problem in Running Enterprise

For the successful running of a business it is important to remove all the problems, which can affect its smooth running. Though the females in the surveyed villages started their own enterprises but they were facing a number of problems. As the focus of the study is mainly on women development the main problem they mentioned was their mobility for the raw material and the marketing of their products. A significant number of respondents (more than 50%) complained that the raw material required for running of their business were not available at the village level. Similarly they also mentioned that their low mobility is the main hurdle in marketing of their products. This adversely affected their profit.

Another important hurdle they mentioned was the lack of capital for their business. Most of them consider that if sufficient capital is provided to them they can expand their business. In addition to these problems those who obtained credit complained about the rate of interest charged on these loans.

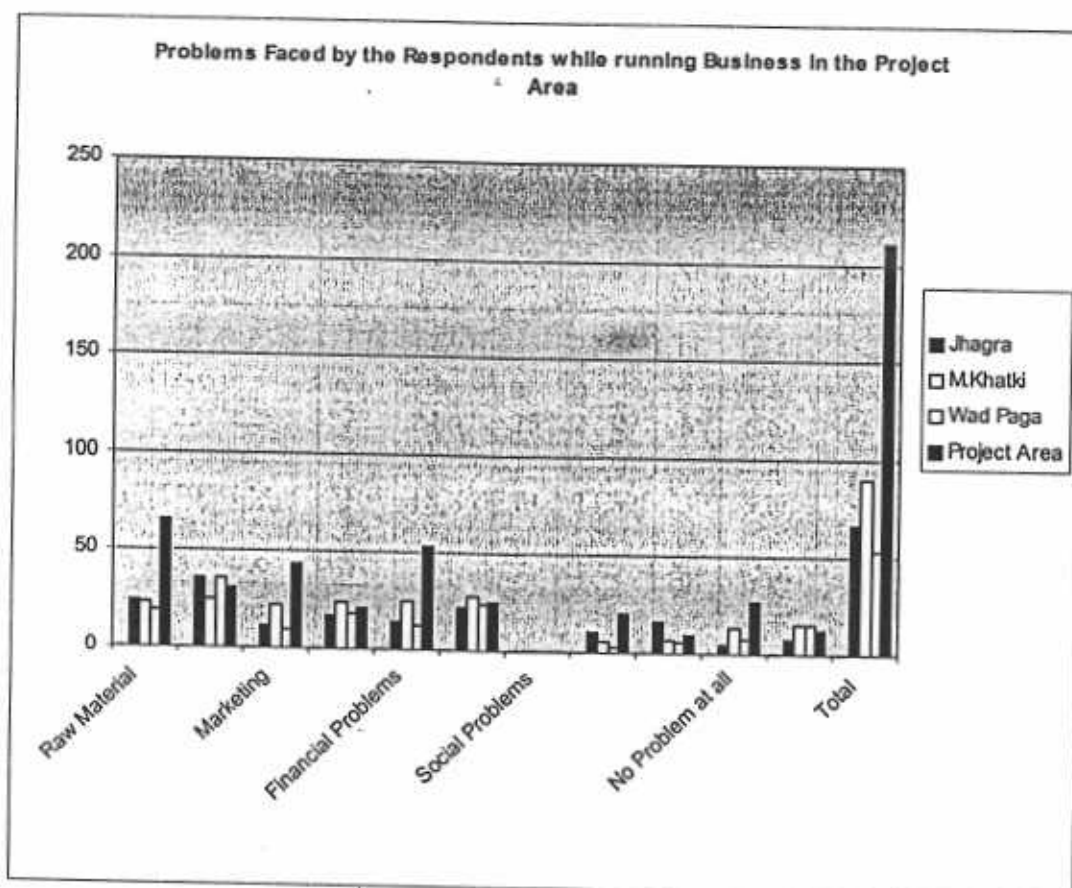
It seems that there are potential of business and interest of the female in taking part in economic activities in the rural areas but there are some factors that discourage the females to come forward. Among others one important factor is that they face social problems. Some people in rural areas do not feel good about the females to go out of home for running their business outside the village. Similarly, unlike males the females cannot move freely in village / city market. That is why most of the females running their business inside the house. Livestock rearing / poultry farming is considered the favorite enterprises by the farm households. They sell milk and milk products at village level and earn income.

Table 8.26: Distribution of the Respondents According to the Problem Faced While Running Business

Name of Union Councils	Nature of Problems Reported										Total
	Raw Material		Marketing		Financial Problems		Social Problems		No Problem at all		
	No	%	No	%	No	%	No	%	No	%	
Jhagra	24	35.8	12	17.91	15	22.38	11	16.41	5	7.5	67
M.Khatki	23	25.5	22	24.44	25	27.77	6	6.66	14	15.63	90
Wad Paga	19	35.8	10	18.86	13	24.52	3	5.66	8	15.16	53
Project Area	66	31.4	44	20.95	53	25.23	20	9.52	27	12.9	210

Source : Field Survey

FIG-6



8.5 Empirical Evidence about Social Sector Development

This section deals with availability and utilization of rural social services (Health, Family Planning and education), satisfaction of respondents with existing social services and suggestions for improvement of the available health and educational facilities, perception of the respondents about the government and NGOs interventions and coordination between government and NGO is also discussed in this section.

8.5.1 Health and Family Planning

8.5.1.1 Women and Health:

In Pakistan, the problems of health care are common to both males as well as females, such as the inadequacy of health policies and programmes in addressing the needs of the vast majority of the population, particularly in the rural areas. However, social conservatism, inadequate outreach of primary and reproductive health care services especially in the rural area and insufficient progress in sector of socio-economic development linked to health, such as family planning, sanitation, potable water supply, nutrition and education, are together responsible for limited improvement in women's health indicators.

Life expectancy, normally longer among men than women in most countries, is only recently estimated to have equalized in Pakistan.

Childhood mortality for girls shows a slight improvement in the last decade, with the narrowing of the sex differential. Women continue to bear 5.7 live births over their reproductive span. The majority of women still lack the help of trained medical personnel for obstetrical care.

Pakistan's maternal mortality rate, estimated between 300/600 per 100,000 live births, is one of the highest in the world. While the immediate causes for this are medical, the underlying ones begin in infancy and continue through malnutrition, general weakness predisposition of infection, and exhaustion from domestic and other work overload. Lack of access to clean water and sanitation, with consequent high incidence of infectious diseases, all influence maternal health.

There were infrequent attempts at developing a health policy in the 19870s, 1980s and 1990s. There has been little shift from vertical programmes to broad based health care, despite Pakistan's being a signatory to the Alma Ata conference. Health for all by the year 2000 the safe motherhood conference held in Lahore in 1990 was a

major landmark for highlighting the problems of maternal health and mortality in this region but there has been limited follow-up to this conference. (National plan for action 1998).

The strong urban/curative focus of health expenditures has a particularly negative backlash on women whose access to health/RH services and knowledge is limited, particularly in rural areas.

Paradoxically, health services are to a large extent unused by women. For them, accessibility to these services is constrained by their inappropriate location, transportation problems, shortage of female medical personnel, and non-availability of medicines. Women's low share in family incomes, low awareness of health measures, seclusion, illiteracy, ignorance and superstition, add to the under utilization of services.

Pakistan's continued rapid population growth rate, estimated at around 2.9 percent, declined only slightly in the last ten years from 3.1 percent per annum. Contraceptive prevalence rate among currently married women rose from 9 percent in 1985 to 12 percent in 1991, to an estimated 18 percent in 1995. The reasons for Pakistan's low contraceptive prevalence rate can be grouped into two main categories; (Govt. of Pakistan, 2004).

- (i) Inadequate access to existing, low quality, family planning services, particularly so for rural women; and
- (ii) The religious, social and traditional constraints to the use of contraceptives.

Past policies, with their shortcomings of inadequate contraceptive provisions, insufficient availability of the full range of contraceptives, virtual absence of counseling and referral, and particularly the lack of involvement of males and their motivation for adopting family planning, are issues still being grappled with, by the programme today.

The mechanisms for responding specifically to women's health needs, particularly reproductive health, remain weak, while Pakistan has regularly been a signatory to instruments such as the Nairobi Forward Looking Strategies (1985), the ICPD Plan of Action (1994) and the Copenhagen WSSD Declaration (1995), which together embody a vast set of initiatives and commitments to ensure the health/RH needs of women's implementation of their wide-ranging and comprehensive policies has been consistently inadequate.

Mental and emotional illnesses remain a seriously neglected area. The stresses that women already face under our feudal, tribal and patriarchal culture have multiplied in present day condition. It is estimated that two-thirds of the psychiatric patients at any hospital or clinic are women. In areas where expert care is unavailable, and/or where beliefs differ, women are frequently taken to faith healers ("Pirs" and "Dargas") for the exorcism of "Jinns" (evil spirits).

While the onslaught of HIV/AIDS is a relatively recent phenomenon, various sexually transmitted diseases have been endemically present. Women are especially vulnerable and at risk of contracting AIDS in the future, although as yet this is not a medical problem affecting them particularly.

8.5.2 Utilization of Health Services by Sample Respondents in the Project Area

The health services which have certainly improved and been given importance by the government to give wider cover and stressing more on the care of mothers and children but still these services are unevenly distributed. There are fewer health care centers and dispensaries in the rural areas. Moreover whatever facilities exist the unfortunate part is that those are deprived of the lady doctors and lady health personnel and also these health centers are situated usually away and are inaccessible to rural women. Similar situation was found in the sample villages as can be seen from table 8.27.

Table 8.27: Distribution of Respondents According to Distance from Health Care Facilities

Name of union councils	Distance From Health Care						
	Less -2(km)		3 - 4 (km)		More than 4 (km)		Total
	No	%	No	%	No	%	
Jhagra	38	56.71	21	31.34	8	11.95	67
M.Khatki	49	54.44	31	34.44	10	11.12	90
Wad Paga	32	60.37	14	26.41	7	13.22	53
Project. Area	120	56.68	66	31.42	25	11.90	210

Source: Field Survey

The analysis of data shows in the project area 57% of the respondents stated that they are within less than two km radius of any health facility, 31% respondents were within the radius of 3-4 km while 12% fall in the range of above 4 km of any health facility. The respondents in the sample villages reported that healthcare services are situated away out of their village and due to non availability of transport facilities the patient can not easily avail this facility and in turns these health care services are under utilized or not properly utilized more evident than Table from 8.28.

Table 8.28: Distribution of Respondents According to Utilization of Health Facilities

Union councils	Yes		No		If yes, Please specify					
					No consultation fee		Free Medicine.		No charges by LHV	
	No	%	No	%	No	%	No	%	No	%
Jhagra	30	44.77	37	55.23	30	100	9	30	5	16
M.Khatki	41	45.55	49	54.45	41	100	11	26.8	6	14.63
Wad Paga	26	49.05	27	50.95	26	100	5	19	3	11.5
Project. Area	96	46.19	113	53.81	96	100	25	26.04	14	14.58

Source: Field Survey

More than half 53.8% respondents revealed that they had not utilized the health services due to various reasons. The factors, which prohibit a medical treatment, are the lack of transport facilities, the setup of the family, the financial implications for the patients and the attendants required with the patient. Some of the respondents further revealed that rural women instead of seeking health facilities always resorts to local herbal medicines and traditional "Taweez Gandaz" and also some of the women in rural areas had visited to different shrines (Ziarat) for different diseases. The respondent also stated that there is no female doctor in the BHU and dispensaries due to which many health problems of women remain unattended and some of them suffer immensely. Simply they would not like to be examined by a male doctor especially for female related diseases. This is a social custom and is more prevalent in rural areas where even the males would not like that their females should

be examined by male doctors. The reactions of the sample respondents in the project area towards the government service can be summarized as follows.

- The government hospital is not for the poor.
- The government hospitals do not have quality medicines.
- At the government hospital time is wasted for getting the medicine one has to wait for long hours. The clinical staff delays the preparation of the slip or is not just available.
- We are required to purchase our own medicines and injections. If we take to spend the money we might will go and visit the private doctors etc.
- The data in table 8.28 also reveals that 46% of the sample respondents reported to have utilized the health services available in the sample villages and they stated that in the BHU/dispensaries there in no consultation fee and they provide us free medicines and also most of the birth cases are handled by the LHV very cheaply (Rs: 300 per delivery). Most of these women were poor, ignorant and burdened by heavy families and cannot afford to utilize private health services due to expensive treatment in these hospitals.

This indicates that existing health facilities are understaffed, poorly equipped and ineffective. Medical care and health facilities are far from being reasonable and satisfactory. These factors contributed to their low utilization by the target group.

8.5.3 Visit of Lady Health Worker to Sample Villages

To overcome the gender imbalances in healthcare personnel and improve services to women and children at the gross root level the government initiated the lady health worker (LHV) programme. Its main objective is to provide health and family planning services and basic health facilities at home. One LHV is supposed to serve approximately 200 households or (1000 population). The visits of health worker to sample villages for instructing women on health education can be seen in table.8.29

Table 8.29: Distribution of Respondents According to the Visit of Family Health Worker to Sample Villages

Visit of Family Health Worker to Sample Villages										
Name of Union Councils	Yes		No		Twice a Month		Once a Month		After one Month	
	No	%	No	%	No	%	No	%	No	%
Jhagra	28	52.83	25	47.17	4	7.54	27	50.96	22	41.50
M.Khatki	50	55.55	40	44.45	3	3.3	47	52.26	40	44.44
Wad Paga	38	56.71	29	43.29	4	5.97	37	55.22	26	38.81
Project Area	116	55.23	94	44.77	11	5.23	111	52.87	88	41.90

Source: Field Survey

In the project area as a whole 55.23% stated that they had received the home healthcare on the other hand 44.76% reported that had not received any health care at home by the lady health workers. Of the total respondents whose response was positive 52.85% received healthcare once a month, 41.90% reported after more than one month and only 5.23% stated that they had received healthcare facility. The reasons reported by the sample respondents are that villages and homestead are scattered far and wide and approach is difficult and arduous due to lack of roads, communication and transport facilities.

8.5.4 Services Provided by Lady Health Worker to Sample Respondents

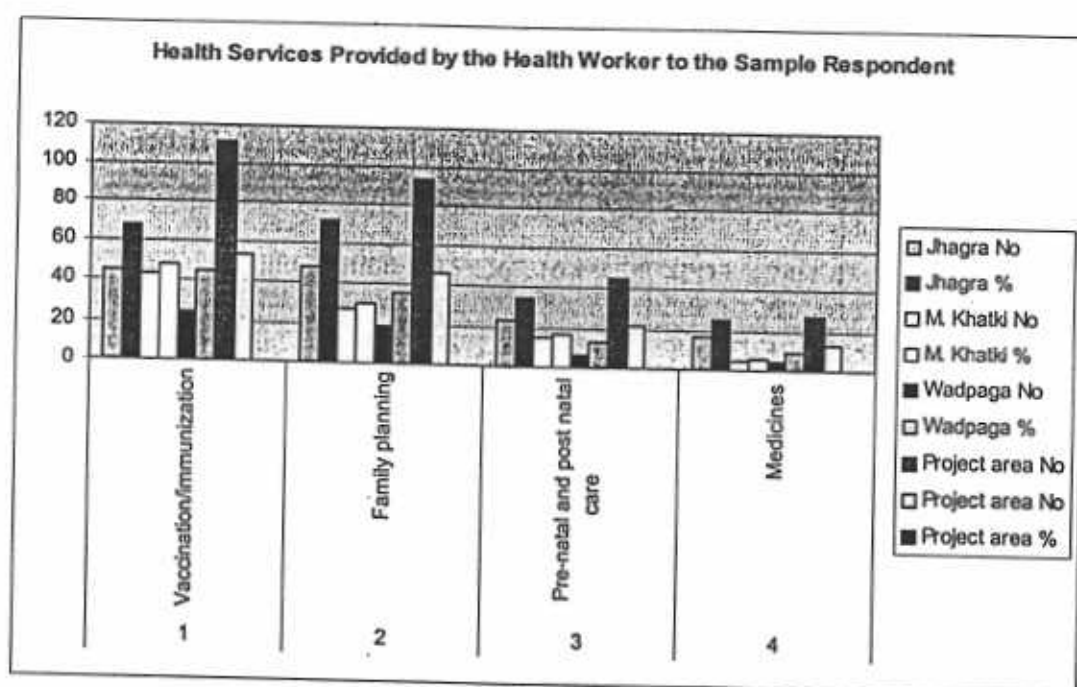
The sample respondents who received the health care services by lady health worker reported the following services provided by lady worker. As can be seen from table 8.30.

Table 8.30: Distribution of Respondents According to Health Service Provided by Lady Health Worker

Health services provided by LHW		Jhagra		M. Khatki		Wadpaga		Project area	
		No	%	No	%	No	%	No	%
1	Vaccination/immunization	45	67.16	43	47.77	24	45.28	112	53.33
2	Family planning	48	71.64	27	30.0	19	35.8	94	45.76
3	Pre-natal and post natal care	23	34.32	15	16.66	7	13.2	45	21.42
4	Medicines	17	25.37	5	5.5	5	9.4	27	12.85

Source: Field Survey

Fig-7



That major services provided by lady health worker include vaccination/immunization (53%) and contraceptives (46%) whereas the services with regard to pre-natal and post-natal were provided only to 21 and 31 percent of the respondents. The provision of the former two were comparatively higher as the vaccination/immunization was provided free of cost while contraceptives are provided free or on

minimum cost. The respondents also reported that most of the time, contraceptives are not available even though family planning is a core purpose of the LHV programme and they have also complained about the poor quality of the medicines provided.

8.5.5 Satisfaction of Respondents with Regard to Existing Health Facilities in the Project Area

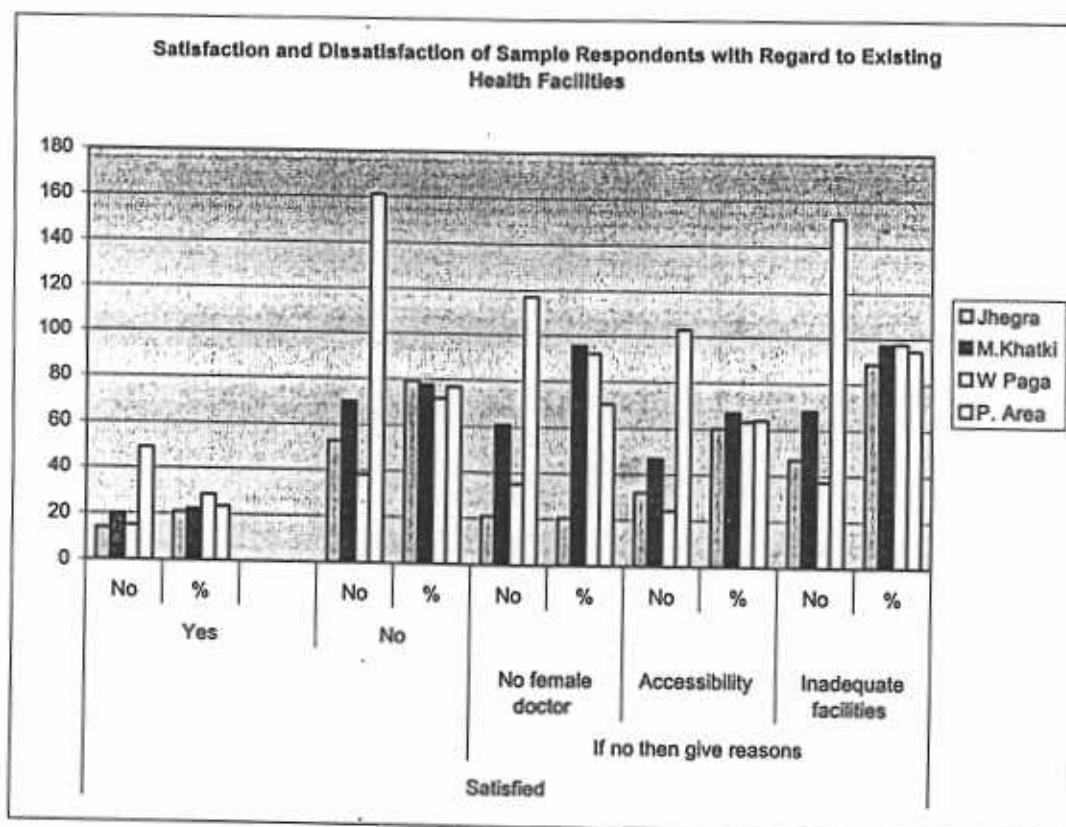
The data in table 8.31 indicates that 77% of the respondents were found unsatisfied with the health services provided by the government in the sampled villages. This is mainly due to either female doctor was not available (70%), not accessible even if available: The data as whole reveals that utilization of health services depends on the availability, accessibility of doctors, medicines and necessary equipments.

Table 8.31: Satisfaction and Dissatisfaction of Respondents with Regard to Existing Health Facilities in the Project Area

Name of union council	Satisfied				If no then give reasons					
	Yes		No		No female doctor		Accessibility		Inadequate facilities	
	No	%	No	%	No	%	No	%	No	%
Jhegra	14	20.89	53	79.11	21	20.7	32	60.3	47	88.6
M.Khatki	20	22.22	70	77.78	61	95.7	47	67.1	68	97.1
W Paga	15	28.31	38	71.69	35	92.1	24	63.1	37	97.3
P. Area	49	23.3	161	76.7	117	70.1	103	63.9	152	94.4

Source: Field Survey

Fig-8



8.5.6 Family planning

8.5.6.1 Visit of sample respondents to health care to avail family planning services

Women health is affected by two main problems namely the lack of adequate and proper health care facilities and the prevailing socio-economic practices pertaining to women. The meager amount of investment in the health sector in terms of provision of safe drinking water, sanitation facilities, increase level of nutrition and disease prevention influence the health of women. There is chronic absence of medical facilities and services because of which these women continue to suffer from lack of facilities and care as the data of table states that only 29 percent of the female visited and availed the family planning services. This was mainly due to non-availability of family planning centers in the sampled villages. In the three sample villages only one had BHU with a female doctor. The other had only a dispensary that lacked family planning services while the third had BHU but no female doctor.

The table further reveals that existence of family planning services affects the visit of the target population as in such centers the services are available on routine basis. However frequency of the visit to BHU is very low as the required services are available only in one village while the females of the other villages visit rarely to nearby family planning centers or get the information and services from the lady health worker. Utilization of the health care services are also determined by the socio-culture, tradition of the area as many as (72%) of non visitors were those whose family members or tradition restricted them to avail/utilize these services. The inability to access proper health care system to convince women further aggravates the health situation of women. Maternal and child health care Suffer greatly as do family planning efforts.

Table 8.32: Distribution of Respondents According to Visit to Family Planning Center

Name of Union Councils	Yes		No		Total
	No	%	No	%	No
Jhagra	22	33.0	45	67	67
M. Khattki	19	21.11	71	78.89	90
Wad. Paga	19	35.84	34	64.16	53
Project Area	60	28.57	150	71.43	210

Source: Field Survey

Those female respondents who visited and availed family planning services received/practiced only two services namely injection (65%) and oral pills (35%) as is evident from table 8.33 these are non-clinical methods. The clinical methods such as I.U.D, tubeligation had not been reported by even single sample respondents due to lack of awareness and, complicated nature of clinical methods. Incase of non-clinical contraceptives.**

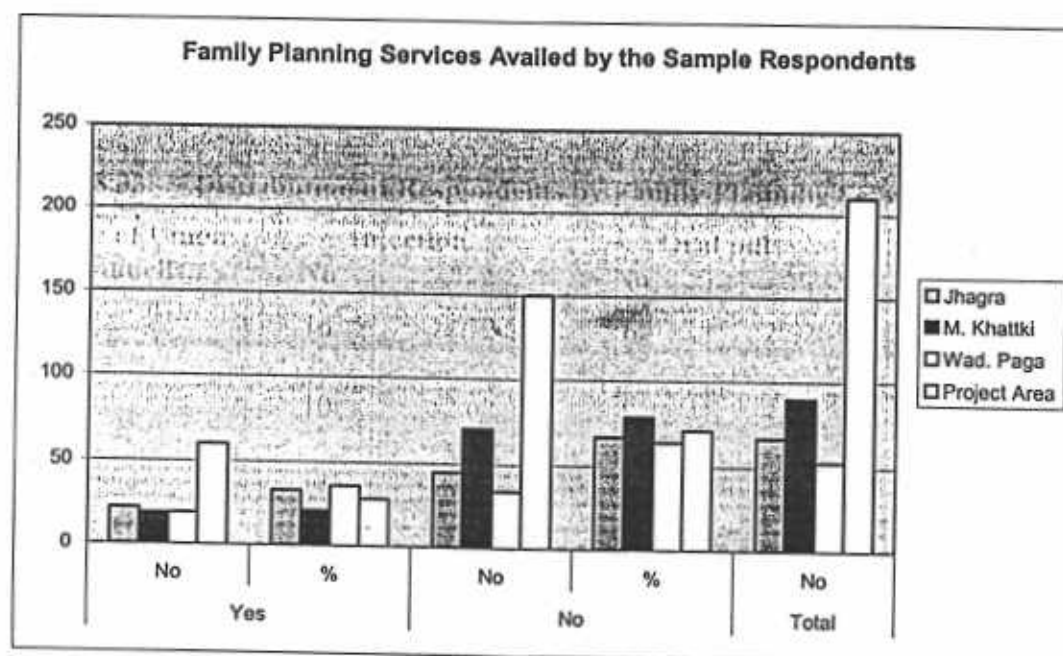
* Clinical methods: I.U.D. tubeligation vasectomy etc.
 ** Non clinical methods. Condom, durafoam oral pills injection etc.

Table 8.33: Distribution of Respondents by Family Planning Services Availed

Name of Union Councils	Injection		Oral pills		Total No
	No	%	No	%	
Jhagra	16	72.72	6	27.28	22
M.Khattki	10	52.62	9	47.38	19
Wad .Paga	13	68.43	6	31.57	19
P. Area	39	65.0	29	35.0	68

Source: Field Survey

Fig-9



The charges made from the acceptors are nominal charges (Rs. 3 per method) However some of the respondents disclosed that high charges were made by the family planning staff for supplying contraceptives to them. The existence of high proportion of non-visitors/non-adopters speaks of the lethargic inactivity, which has creped into the implementation column of the programme and is stealthily shipping its vitality. At the same time this significant percentage presents a very good target for family planning practice. Zealous motivation together with rational explanation for the programme would probably convince this large number of the respondents to

switch over to family planning at present or in near future, there by making the present population policy and programme much more fruitful.

8.5.6.2 Satisfaction of Respondents with Available Family planning Services:

The availability of family planning material/services determine the extent of contraception adoption in terms of area and population when number and widespread sources/agencies are engaged in providing these material/services in sufficient quantities readily and regularly as and when required by the rural communities, naturally both the level of adoption and the level of extended practice of family planning would be relatively higher with fewer or rare agencies and short and irregular supply.

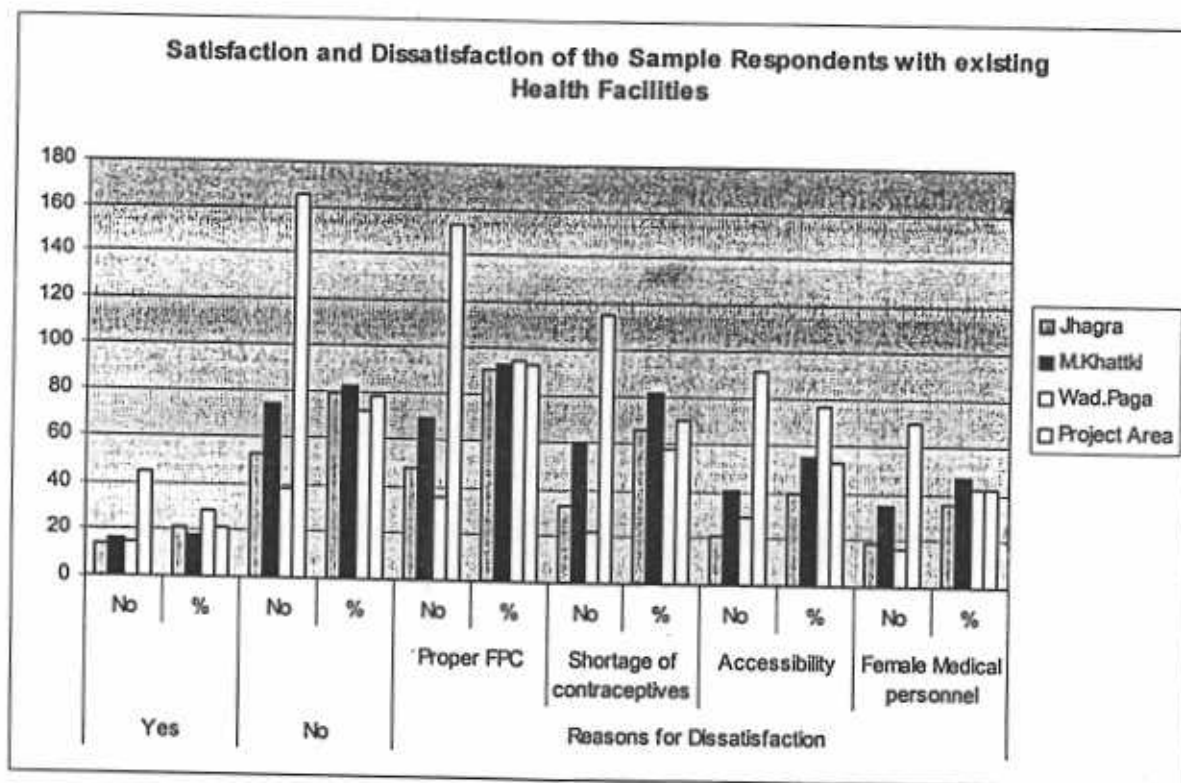
After the enquires from the respondents about the visit to family planning centers the next important queries was, whether the sampled respondents were satisfied from the available services and if, not what are the major courses of non-satisfaction. Table 8.34 reports that only 21 percent of the total respondents reported their satisfaction from the existence service while the remaining 79 percent were found un-satisfied. The first group belonged to those who had access and resources to avail family planning services while second group reported a number of causes and reasons about their non-satisfaction. First a 93 percent of the sampled respondents reported that there is no proper family planning center in their villages. This had created hindrances even for those who have knowledge and also want to utilize the services. A 70 percent further reported that even in case of the family planning center many times contraceptives were not available. Accessibility to family planning center was another major cause of non-satisfaction where services were not accessible to 53 percent of the samples respondents. Finally if all are available, 42 percent still found unsatisfied because of shortage of female staff that provides the required services. The table as a whole reveals that satisfaction of the family planning services do not depends only on existence of family planning center, in the sample area but the centers should be properly equipped, contraceptives should be available and there should be enough staff to deal with target population.

Table 8.34: Distribution of Respondents According to Satisfaction with Existing Family Planning Facilities

Name of Union Councils	Satisfied				Reasons for Dissatisfaction							
	Yes		No		No Proper FPC		Shortage of contraceptives		Problem in Accessibility		Non availability of Female Medical personnel	
	No	%	No	%	No	%	No	%	No	%	No	%
	Jhagra	14	20.89	53	79.11	48	90.56	33	66.26	21	39.6	19
M.Khattki	16	17.77	74	82.23	69	93.24	60	81.08	41	55.4	35	47.29
Wad.Paga	15	28.30	38	71.7	36	94.73	22	57.87	29	76.3	16	42.1
Project Area	45	21.42	165	78.58	153	92.72	115	69.69	91	53.1	70	42.4

Source: Field Survey

Fig-10



8.5.6.3 Suggestions for improvement of family planning services

Those respondents who regarded the current family planning services inadequate and not available were further asked to offer their own suggestions for the improving the efficiency of the existing health programme the suggestion recorded and tabulated are presented as under. As at is evident from table 8.35 of the total respondents 79% respondents who earlier (table 33) expressed dissatisfaction with the

existing family planning service 47% women proposed the availability/accessibility of family planning centre especially in the sample area. The setting up of increasing number of health care services would apparently render services to increasing number of people and would yield high dividend in terms of high utilization and in turn will improve the health status of the target population. The table further states that 50% of respondents suggested that more qualified female attendants be included in the staff and also suggested increased number of family planning personnel especially the field and female staff which constitute the main motive force of the health programme. Another 26% respondents suggested regular and free provision of contraceptives materials and services. This is a very convincing suggestion because the supply of contraceptives regularly and if possible free of cost would not only maintain a high level of adoption and retention of family planning practice of the present but would also have a wide range of impact on future propagation and acceptance of family planning methods. The support of the majority of the respondents for the continuation and extension of health care services amplifies the fact that rural women in the project area are very much conscious of the present health status.

Table 8.35: Distribution of Respondents According to Suggestions for Improvement of Family Planning Services

Name of Union Councils	Recommended Suggestions of the Respondents							
	Contraceptives facility		Availability accessibility of F.P.C		Female medical staff		Trained LHV	
	No	%	No	%	No	%	No	%
Jhagra	19	28.37	24	43.28	21	23.88	3	4.47
M.Khattki	21	23.33	40	47.77	28	27.77	1	1.13
Wad. Paga	15	28.30	26	49.05	9	16.98	3	5.67
Project. Area	55	26.1	90	46.66	58	23.8	7	3.44

Source: Field Survey

8.6. Education of Women

8.6.1 Utilization of Educational Facilities by Sample Respondents in the Project Area

Pakistan is one of the world's nine most populous countries with very low overall literacy rates and even more glaring gender disparities. The attainment of literacy and basic education is a human right, and the linkages between education, decreased fertility and improved health, have made education a necessity for the success of national development programmes. Pakistan is committed to the attainment of education For All (EFA) goals, of the Jomtien Conference (1990) as well as to those of the conference of EFA of the Nine High Population Countries (Delhi, 1990).

The persistence of tribal, feudal and patriarchal structures has perpetuated the culture of stereotyped roles for girls and women. The socialization process creates gender differences from childhood, and together with the early age of marriage, early and frequent pregnancies, large family size, and the perception of the limited reproductive and domestic roles of women place restrictions on their mobility and participation in the productive process and decision-making. More specifically, they inhibit the participation of girls and women in education and training programmes.

The high rate of illiteracy is a severe impediment to the advancement of women. Inequalities exist at different levels of education, with the gender gap increasing with each additional level. Opportunities for female education and training have been far more limited than for males. During the last decade, women have achieved only marginal gains in education, and continue to be disadvantaged at all levels of education and training.

In a total adult population of 76 million, 49 million (almost two-thirds) are illiterate. In rural and low income areas, the opportunity costs of educating girls are very high. High inflationary trends, high population growth rates, environment degradation, and structural adjustment policies are contributing to the increasing feminization of poverty. For poor families the choice of educating the girls has to be balanced against survival strategies and most often the decision who to educate is made in favour of the boy.

Educational institutions suffer from a lack of physical infrastructure and facilities. Combined with the long distance girls and female teachers have to travel to

reach school, these impact negatively on their enrolment at the primary level. This affects the participation of women at other education levels.

Recruitment of female teachers is critical for increasing the access of girls to education and training at all levels. The proportion of female to male teachers is not only low but also the gender gap in the availability of teacher's increases with each level of education.

Programmes for in-service training of professional women for career development are scarce. There are however, several small, private and NGO initiatives providing training to women in entrepreneurship, marketing and management skills. Also, there are few educational and training programmes for disabled girls and women and these are located in the larger cities.

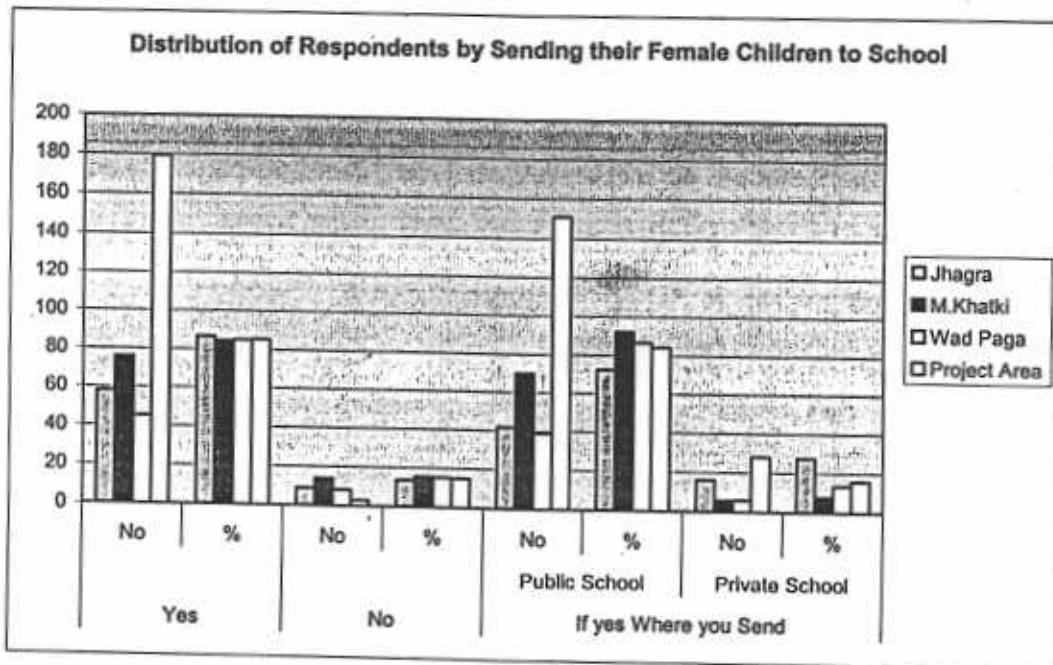
Female education is one of the major concerns of the Pakistani government. A large majority of the people is living in rural areas where either there are no educational facilities/ schools for females or in many cases people do not send their daughters to schools because of Purdah or non-conducive external environment for females. However, the situation is changing with the passage of time and the major recipients of this change are urban and semi-urban areas and also the locations near the urban or semi-urban areas. The sampled villages are located near the major urban or provincial headquarter Peshawar and because of this, females have easy access to education as Table 8.36 describes the access of females to education and the type of schools they are studying.

Table 8.36: Distribution of Respondents by Sending their Female Children to School

Name of Union Councils	Yes		No		If yes Where you Send			
	No	%	No	%	Public School		Private School	
					No	%	No	%
Jhagra	58	86.5	9	13.5	42	72.41	16	27.59
M.Khatki	76	84.4	14	15.6	70	92.1	6	7.9
Wad Paga	45	84.9	8	15.1	39	86.6	6	13.4
Project Area	179	85.2	3	14.8	151	84.3	28	15.7

Source: Field Survey

Fig-11



It states that 85 percent of the people sent their females to school but almost an equal number (84%) of it goes to public funded schools. The remaining 16 percent were going to public schools. The major reasons of this phenomena, was existence of only public schools in the sampled area while some who were bit progressive or economically well-off were sending their female children to private schools in nearby village or Peshawar city. Table as a whole reveals that though a very high percentage of females were getting education, but from the public schools, that had a number of problems including the buildings, qualified staff, over crowdedness of children and no proper system of getting education. Since the female education is also not on high priority so, parents prefer to give them the education, what was available.

Table 8.37: Distribution of Respondents According to Distance of School from Home.

Name of Union Councils	Distance From School						Total
	1-5 km		6-10 km		11-15 km		
	No	%	No	%	No	%	
Jhagra	55	82.08	3	4.47	9	13.45	67
M. Katki	84	93.3	3	3.33	3	3.37	90
Wad Paga	50	94.3	1	1.88	2	3.82	53
Project area	189	90.0	7	3.32	14	6.68	210

Source: Field Survey

Location or distance to school is also a major concern for the parents especially in case of females. They prefer those schools located near to the house. There is sanctity of females and because of it socio-cultural values demand less outside mobility of the females even the children. Also outside environment is not conducive for female education. So, more there is distance to school, less would be chances of female education. Table 8.37 describes the distance between the home and female school. It states that in 90 percent of the cases the distance was 1-5 kilometer while in 9 percent had between 11-5 kilometers. The other 3 percent used to cover between 6-10 kilometers. Table as a whole reveals that most of parents prefer the schools that were nearer to their residences while only a few were going to schools located on a distance from their houses. Again the purdah was the main reason.

Table 8.38: Distribution of Respondents by Types of Problems Faced while Sending their Female Children to School

Name of Union Councils	Types of Problems Faced							
	Transport		Socio-Cultural		Staff Attitude		Financial	
	No	%	No	%	No	%	No	%
JHAGRA	6	8.95	15	22.38	29	43.28	17	25.39
M.khatki	18	20.0	26	28.88	19	21.12	27	30.0
Wad Paga	6	11.32	13	24.52	15	28.3	19	35.86
Project Area	30	14.28	54	25.72	63	30.0	63	30.0

Source: Field Survey

Because of rural setting people usually have also more restricted and traditional values, which create many problems such as infrastructure, social-cultural and economic. In many of the rural areas if the schools are available, there are no roads, if they have roads there is no transport facilities and in most cases if both are available there is poverty. All these are further restricted by the socio-cultural traditions of the area where many of the females could not get education due to the traditions of the area despite having all the required means and resources. Table 8.38 states the problems described by the sampled respondents with regard to female education. It states that poverty and staff attitude (30.1%) was the major problems they face. It further states that socio-cultural values (26%) especially the purdah creates problems for our females, while some (14%) called lack of transport facility to school is a problem they are facing. Table as a whole reveals that female education in the sampled area have a variety of problems that starts from poverty or no means with parents to send their female children to the school staff that is not properly qualified, motivated and interested in education and local traditions that are still creates hindrances to the female education despite living in 21st century. Further, if children are sent to good schools they have transport problems.

Table 8.39: Distribution of Respondents According to Satisfaction with the Existing Educational Facilities.

Name of Union Councils	Satisfied				If No Please Specify the Reasons							
					In Adequate Facilities		Shortage of qualified staff		Accessibility		Low education standard	
	Yes		No		No	%	No	%	No	%	No	%
Jhagra	19	28.35	48	71.65	16	33.33	9	18.75	20	41.66	3	6.25
M.Khatki	23	25.55	67	74.45	19	28.5	19	28.35	14	20.89	15	22.38
W. Paga	18	33.96	35	66.04	13	37.14	9	25.71	6	17.14	7	20.0
P Area	60	28.57	150	71.43	48	32.0	37	24.66	40	26.66	25	16.66

Source: Field Survey

The education standard depends upon the satisfaction of target population about the education they receive. The standard of education vary from place to place and determined by the facilities schools are having, such as the qualification and size

of staff, accessibility of the target population to the schools and type of education given in an institution. All these are generally good and improved in urban areas while the rural areas either lacked school, than teachers especially the qualified do not want to go and teach in rural areas. This results in shortage of teachers as whole and further more lack of qualified staff. The schools usually do not have desks, chairs, mats, bathrooms, laboratory and other equipments. This directly affects the standard of education. Table 8.39 states about the satisfaction of the sampled respondents about existing facilities in the schools and major reasons behinds that. It says that 71 percent of sampled respondents were not satisfied about the education of their female children. They reported that facilities in the existing schools are in-adequate (32%). Schools lack all the required basic facilities such as, spacing, bathrooms and other facilities. Further, there is shortage of staff (25%) which result overcrowd ness of the students. Also, the schools do not have the qualified staff. Schools are located away (27%) from their homes and it is very difficult for them to send their daughters to school because of transportation and other problems. Further the standard of education (17%) is also poor. The table concludes that more then two-third of the sampled respondents were not satisfied from the education of their children. Though the schools are there but they do not have the required facilities and resources to impart a standard education.

Table 8.40: Additional Facilities Suggested by the Respondents for the Improvement of Educational Facilities

Name of Union Councils	Sufficient Qualified Staff		Proper Educational Facilities		Up Graduation of Schools		Improvement of Educational Standard	
	No	%	No	%	No	%	No	%
Jhagra	29	43.28	18	26.86	11	16.41	9	13.45
M.Khatki	35	38.88	31	34.44	14	15.51	10	11.17
Wad Paga	24	45.28	17	32.07	5	9.43	7	13.22
Project Area	88	41.9	66	31.4	30	14.28	26	12.42

Source: Field Survey

8.6.2 Suggestions of Sample Respondents for the Improvement of Educational Facilities in the Project Area

The delivery of good education depends upon number factors, which range from availability of services and facilities to proper and qualified human resources.

Table 8.40 describes the suggestion made by the sampled respondents to improve the female education in the sampled area 42 percent of the respondents were of the view that schools need sufficient and qualified teaching staff. Presently they lacked both the quality and quantity of female teachers. Another 31 percent said that education could be improved through providing proper facilities such as furniture, laboratory, bathrooms and more spacing. Another 14 percent reported that the present school should be up-graded so, the female should not have to go to other areas for education while the remaining 13 percent called for improvement of educational standard. They said that we could improve the education if the present human and other resources should be properly utilized. Table concludes that female's education can improve through the enhancement of quality and quantity of staff, proper facilities, and up-gradation of schools.

The preceding discussion may be summed up as follows:

1. The schools in rural areas are not provided with facilities such as proper school buildings and equipments, teaching aids, etc. still most of the schools are functioning in small rented buildings consisted of one kacha room.
2. Traditionalism of the rural masses is another socio-cultural impediment which causes clash with new and novel ideas. Very often the school utilizes such techniques of restrain (punishment and shaming) that discourage the children and kills the initiative and shakes the child's faith and trust in his own abilities.
3. General poverty, low motivation of rural people to send their children to schools, unattractive rural conditions and socio-cultural inhibition towards education of the female, and malnutrition of children both male and female are also to be held responsible for such a situation.

4. Shortage and absenteeism among teachers, inadequate supervision, poor communication facilities and low morale of primary school teachers are also responsible for such a state of affairs.

8.7 Perception of Respondents about Governmental and Non Governmental Organizations Developmental Programme in the Project Area

Social organization is an important component of NGOs program which aims at organizing communities at grass root level and enable them to take charge of their own development. Prior to SRSP women in the project area had no experience or opportunity to meet a larger forum to discuss collectively issue concerning their economic and social needs as evident from the table 8.41 that community women have different perception about the government and NGOs developmental packages. Generally women (92%) considered the women organization a forum to discuss their problems, learn new skill, received inputs like physical infrastructure, credit and saving regularly. The packages implemented such as human resource development about this(81%) respondent reported that through skill development activities (HRD) SRSP has created the awareness that women are able to augment their income by adopting income generating activities similarly those women organizations who have been benefited from the provision of credit(86%) considered it beneficial aspect of women organization. This according to them is an important achievement of because the credit component of SRSP seeks to correct the traditional neglect of rural poor by institutional credit sources and to provide easy access to credit without have resort to complex procedure. They consider the system democratic and do not charge interest. On the other hand those respondents who were unsatisfied (15%) reported that service charge is the main reason which is considered un Islamic by a woman, they also do not consider their needs as urgent as of man. This is because of the specific thinking prevalent on the society that responsibility for earning income is primarily of men. The income earned by the women is always considered supplementary. Moreover in many cases women's fear is how they would be able to pay back the credit amount in case the credit venture proves unsuccessful. As for as social sector (education and health) is concerned which is the main component of government programme with an objective to address community issue through awareness raising, training, fostering linkages with existing health and educational facilities. Rural communities are confronted with various health issues like hygiene and nutritional practices, safe

childbirth delivery method, vaccination facilities, effective birth control and supplementary feeding practices. Keeping in view these issues the perception of the respondents about the available health services revealed that (69%) respondents were not satisfied from the existing health services because the lack of facilities and absence of the qualified staff was the main complaint. In remote rural areas resources and time constraints prevent people from reaching the health centers. Though women need for health care is substantial, this conflicts with cultural practices that discourages women from moving outside the village too often.

Table 8.41: Perception of Respondents About Government and NGOs Developmental Programmes

Programmes	Government			Non Governmental Organization		
	Level of satisfaction					
	Good %	Satisfied %	Unsatisfied %	Good %	Satisfied %	Unsatisfied %
SRSP						
Social Mobilization	-	10	90	39	53	9
Human resource development	-	25	75	64	17	19
Micro credit Enterprise development	-	30	70	19	67	15
Social sector development				-	-	
Health	4	27	69	10	40	50
Family planning	7	16	77	75	15	10
Child and mother care	-	-	-	70	20	10
Health field days	-	-	-	40	30	30
Education	2	43	55			
Others						

Source: Field Survey

In women organization where family health worker services are being availed this health intervention (child and mother care) is considered beneficial (90%) in these union councils though the family have their own experience women for assisting in births, the availability of LHWs has resulted in proper handling of birth cases and referral of difficult cases to health care. They have developed linkages with near by

health facilities through SRSP and accompany or refer cases to these health centers. Besides attending the birth cases, family health worker deliver health messages to community members, but complaint of women's little interest in listening to prevent health care messages. This reflects the general attitude of health consumer towards preventive health care, as its benefits are intangible as compared to curative, which brings immediate results. However, continues exposure and persuasion can bring positive changes in prevalent health attitudes.

Health field Days are the awareness raising forums which seek to apprise community women of improved health practice in three union council health sessions on different aspects were carried out by health assistant of SRSP and LHV of health department. Women were taught the method of ORS preparation which is now being practiced by few women having children. Messages related to mother and child care and benefits of breast-feeding were delivered to women. The respondents reported that earlier they did not breastfeed their kids soon after birth but now understood the nutritious value of the first few hour milk. The health assistant also vaccinated WO women and children; due to the motivation most of the women have adopted family planning practices.

Family health worker visit women after child delivery for a few days and advise them on proper mother childcare. It has been observed that women rarely consult FHWs during pregnancy while to minimize maternal and infant mortality rate the need is to give importance to both pre natal and anti natal care of women. In some of women organizations studied health field were not held and they complained that health field days need not be demand driven but should be ensured to be held in all the women organizations.

The government is committed to universal primary education and providing primary health care to all especially women and children. The infrastructure facilities for providing access to primary education and health care especially in rural areas exists, however, the quality delivery of these services to the people in precarious condition as revealed by the respondents (55%) that in education institutions lack physical infrastructure and also there is shortage of trained and qualified teachers especially female teachers. Many teachers lack dedication motivation and interest in their profession. Which undermined the efficiency of the system in terms of qualitative improvement at all level?

Despite heavy investment social indicator did not illustrate any improvement a recent cross country comparative analysis done by William Easterly (2001) indicates that Pakistan lagging economic performance is primarily due to the quality of its human beings. In education relatively poor performance disproportionately effect female that educational institutions suffers from lack of physical infrastructure and facilities, combined with long distance girls and female teachers have to travel to reach school. This effects the participation of women at other educational level, in addition to this Lack of access to education in compounded by dogmatic attitude and socio economic factor that inhabit girl's education.

From the above table it can be concluded that access to preventive health care and educational facilities especially in the rural areas is inadequate in terms of provision. As a result these interventions are underutilized and adversely affected the women and children.

8.8 Coordination Between Government and Non Governmental Organizations

NGOs and Government organizations are working side by side in a number of sectors for development. Not only have this even in some places both the organizations launched a number of projects simultaneously. In Pakistan also the situation is the same. The reason behind this is that goals of both of the organizations are different and want to keep their identity. Coordination could be extended if a project is planned jointly by several organizations without losing their identity. In such a venture, the nature and scope of the duties of each organization could be determined according to the services each is capable of offering, be they in the field of literacy, health care, family planning, or income generating skills. Over a period of time each organization would be able to evaluate its expertise and utilize its manpower, time and resources more effectively.

Coordination and joint ventures could be of particular value in the rural areas. Voluntary organizations work is still largely based in towns and cities while the need is obviously greater in the villages, where the bulk of out population dwels. Women in the rural areas who are responsible for raising 75% of the future citizens of this country need to be enlightened in growing better food crops, cooking more nutritious meals and providing a more healthy and hygienic environment for their families. They need literacy and income generating skills for financial independence and the dignity

they deserve as individuals. The social worker who wishes to serve her rural sisters needs transport for frequent visits to the village which is too often not available. In coordination daily visits may be reduced to weekly ones for each organization. Working may thus become smoother, continuity ensured, and chances of government support brighter.

In the cities, several NGOs receive grants in aid from the government social welfare departments but projects on which the government and voluntary welfare agencies work together are rare. There is, of course, greater liaison now, between the government and NGOs, but there is room for more cooperation at local levels. Government could, for instance, specify the needs of a certain area and train workers from NGOs close to the area for meeting the local needs in cooperation with each other. The experience, expertise, and talent of each organization could thus be utilized for opening day care centers, vocational education, and research surveys on various issues, formation of clubs for influencing public opinion on issues vital to women, and taking care of the old and the handicapped. A practical example of cooperation between government and non-governmental organizations and continual dialogue for the full integration of women in the development process in the country exists in Hong Kong. The Hong Kong Council of Social Service with its member organizations has machinery for joint consultation with the government for the formulation of a five-year plan of action, which is implemented with financial assistance from the government. The plan is jointly reviewed annually and amendments made in the light of existing conditions experimental programmes for the advancement of women (Dorothy lee, 1975).

The success of any coordinated programme will, however, depend largely on the manpower potential each organization can offer. Several NGOs are facing a membership crisis and find it somewhat difficult to enroll younger members who must eventually assume leadership in the future. Some of these younger members are tied down by family responsibilities at home; others are disillusioned with conditions of work in voluntary agencies or lack of motivation. Conditions of work will improve if transport facilities and a proper office and office staff are available for the social worker. Government could solve this problem by allotting a room in one of their spacious offices for joint use by several NGOs, and a philanthropic agency could be asked to donate transportation facilities to develop an attitude for selfless service. This

should include lectures on programme planning, evaluating local needs and meeting them, fund raising for projects, budgeting, techniques of organizing work shops, seminars and conferences, and of leading discussion groups, conducting meetings, writing of minutes, committee work and procedure, determining essential roles and functions of members in a group, and methods of communication and publicity, among others. For those who are prevented from active participation due to family responsibilities a bulletin or newsletter could be used at regular intervals to keep them mentally involved. To save costs the newsletter could also be planned jointly by several organizations and high light their programmes activities.

It is evident that no government can tackle all problems alone in a country nor can a single NGO achieve much. It is through a wide-ranging cooperation between government and NGOs and coordination of work between voluntary agencies themselves that developmental activities could be under taken. It is working together and the practical experience of doing so which will pave the way for rural masses especially women to play their full role as citizens of the country. There is a Chinese proverb, which says, "If I hear it, I can forget it, if I see it, I can remember it, if I do it, I know it."

For the expediting the development process, the government has directed its energies towards its realization by giving encouragement and financial assistance and recognition to NGOs in the development of welfare work in Pakistan. Actually both state and voluntary action have been found to have their own specific roles to perform and should be complementary to one another. The state as government generally initiates the formation of departments, directorates and institutions with a view to rendering a particular type of service to the people. The welfare services of the state are part of the social services. Most of these are manned and controlled by government, for example health and education. The work that the state desires to undertake does not have the same appeal to humanitarian sentiments that volunteer organizations are likely to have. It should be incumbent on the department or directorate concerned to enlist the support and views of voluntary organizations with regard to a new project or idea in nation building activities. The NGOs have highly educated and qualified staff with practical experience and knowledge. The state project would become serviceable and relevant to the community through the efforts of such originations. The coordination between state and voluntary organizations

should not be restricted only to the exchange of information at conferences and meetings.

The recent "Consultation with the Poor report" prepared for the World Bank's WDR (2001) found that many poor people in developing countries perceive public institutions as distant and unaccountable. The report stated that state institutions are neither responsive nor accountable to the poor; rather the report details the arrogance and disdain with which poor people are treated. Not surprisingly, poor men and women lack confidence in state institutions even though they still express their willingness to partner with them under fair rules. The state agencies most important to the poor are those delivering services in health, education, policing, justice, and utilities, economic services and transport. However when ranked according to effectiveness, agencies charged with delivering these services scored very poorly.

The devolution process in Pakistan is an attempt to reverse such a process and restore the trust of citizens in the institutions of the state, making those institutions responsive, transparent and accountable to the local public and thus creating ownership for them in the local communities. The state's response is towards privatization, deregulation and reduction of social services. In contrast the response of the RSPs with their vast outreach in the communities is to seek greater participation, responsiveness and more effective forms of democratic intervention as a solution to this problem.

The participation traditionally encouraged by the RSPs can fit the category of what is called social participation. Which social groups may understand this as the process or communities excluded from control over resources take part in decision-making through social mobilization and new forms of inclusion designed to influence larger institutions and policies. From this perspective, participation is located outside the state, in projects, movements and self help groups.

The Sarhad Rural Support Programme (SRSP) coordinates most of the programmes with the government. Before launching any project it has to pass from a number of government bodies so that the allocated funds are properly utilized. For this purpose the government do the following with all the projects submitted by the SRSP.

- Projects short listing and field verification by using tools of IRR, NPV least cost and cost effectiveness factors.

- Approval by the provincial steering committee
- Final approval by chairman PSC/CEO SRSP
- Projects agreement signing and inauguration ceremony in the presence of all the partners
- Project implementation committee (PIC), represented by the LGI, private partner and 3rd partner, is formed before initiation of the project. The PIC is responsible for all sorts of arrangements, site supervision and implementation and documentation. The PIC is accountable to the involved partners and communities.
- Capacity building of the PIC and partners
- Survey designing and estimation by SRSP in coordination with PIC members and preparation of detail project digest.
- Opening of joint project account.
- USAID as well as partners' share is contributed to the project account in four equal installments for utilization. Release of the 25% of the USAID installments is subject to prior deposit of the 25% of the partners' share prior release of USAID installment, PIC submit bank statement of the joint account depicting the bank branch, the signatories the account # and the partners' share.
- Release of the USAID next installment is subject to at least 70% utilization of the previous installments both of the USAID and partners. This is confirmed in view of the technical report of the designated engineer, expenditure receipts submitted by the PIC and bank statement.
- Each expenditure receipt is signed on back side by the PIC members
- Resolution/request for installment by the PIC on the concerned LGI's letterhead along with signatures/thumb impression. It is addressed to the provincial coordinator SRSP head office. Resolution is passed in a joint meeting of the partners and PIC members. Nazim of the concerned LGI, PIC members and contributors signs it.
- Due to fluctuation in the market prices of construction material, the PIC is bound to submit three quotations along with the expenditure receipts for the release of next project installment to avoid misuse and maneuvering by the partners.

Table 8.42: Agreement between District Government and SRSP

Responsibilities of the District Government	Responsibilities of Sarhad Rural Support Programme
<p>i) <i>To identify UCs for launching the project interventions.</i></p> <p>ii) Surveys to identify the schools sites for undertaking development</p> <p>iii) Reorganization/mobilization of PTAs and strengthening them to actively participate in the programme</p> <p>iv) Facilitating communities in designing school development plans, developing proposals and prioritizing them.</p> <p>v) Supervision and monitoring of infrastructure projects and implementation of school development programme (SDPs).</p> <p>vi) Capacity building of education and literacy department</p> <p>b) Equal involvement of all the stakeholders in implementation and monitoring the implementation of programme.</p> <p>c) District Government Upper Dir responsible for all the expenditure related to infrastructure development and capacity building. The financing of the programme would be done through SAP/KAP/ADP funds, whereas the development schemes to be implemented under the president's programme for optimum utilization of existing government primary and middle schools.</p>	<p>SRSP to provide support to district government in the following:</p> <p>a) Social mobilization to organize communities and PTAs</p> <p>b) Field surveys to verify list of prioritized schools for development work</p> <p>c) Facilitation and supervision of development work in prioritized schools</p> <p>d) Capacity building of district education department</p> <p>e) SRSP responsible to submit progress reports or programmes activities to district government.</p>

Source: SRSP Four Years Review 2005

During the research study the following weakness in the coordination between governmental and non-governmental organizations were realized where needed improvements are also suggested.

- There were less frequent contacts between governmental and non-governmental organizations.
- NGOs are rarely invited in high-level meetings of government departments where programmes and policies are formulated and approved.
- Decisions taken by the concerned departments of government are rarely conveyed to the NGOs.
- In their area of jurisdiction NGOs have established women organizations (WO) in all villages. Posting of staff of health department and family planning department in the respective centers. Each functionary of these departments

has to cover so many villages. Often functionaries are not provided to with transportation facilities. Thus government staff cannot come upto the expectations of NGOs as well as WOs.

- Generally lower level functionaries of government and NGOs interact in the rural area. These functionaries are not in a position to take decisions or formulate policies.
- Sometimes decisions taken at lower level are not considered or implemented at higher level.
- Some of activities in the area are being undertaken exclusively either by the government or by NGOs. In such circumstances there is need for coordination in monitoring and evaluation activities with each other.
- In certain cases government departments are confronting budgetary constraints in a frequent traveling for smooth performance of their duties. Under such conditions if NGOs finance the traveling costs the efficiency of work can be enhanced.
- In some areas people are skeptical about the working of NGOs. They think these are working for Jews against Islamic norms. Government workers can play role in removing misunderstanding.
- At the time of formulation of programmes both government and NGOs need to inform and invite each other to avoid duplication and increase understanding.

The summary of key features of governmental and nongovernmental programme is given in table 8.43 below.

Table 8.43: Key Features of Government and NGOS Programmes

Particulars	Government	NGO
1.Start of Programmes	Various socio-economic development programs are in progress since the inception of Pakistan.	Emergence of NGOs started in 1980s in the field of socio-economic development and expanded gradually
2.Main areas Covered	Health, education, population welfare, agriculture, livestock, roads, irrigation, water supplies, pavement of streets, electrification, social welfare etc.	Social mobilization, Natural Resource Management (poultry farming, kitchen gardening, bee keeping, silk worm, nursery raising) Human Resource Development (hand embroidery, stitching, tailoring, knitting, dyeing, designing etc.) enterprise development, credit and enterprise development (livestock, garments, Grossary shops, social sector development)
3.Identification of projects	Projects are identified by federal and provincial government agencies.	Projects are identified by the community + social organizers
4.Formulation of projects	Government departments follow the routine procedure for preparation and appraisal, operation and maintenance of the project	Programs are formulated on need bases in consultation with local communities
5.Implementation of programmes	Top to bottom approach is generally followed	Bottom to top approach is followed
6.involvement of communities	Programmes are generally prepared and implemented by concerned departments and agencies. Rarely, participatory approach is followed, however, recently due to conditionalities of donors agencies in some mega projects participatory approach is being partially followed	Generally communities are involved in preparation and implementations
7.Flexibility	Government program generally lack flexibility	NGOs programmes are generally flexible

Particulars	Government	NGO
8.Efficiency	Relatively low efficient	Relatively higher efficiency system
9.Monitoring and Evaluation	Routine monitoring procedure as prescribed by the government	Generally strict and flexible monitoring procedure
10.Sources of funds	Public Treasury	Donor agencies
11.Accountability and corruption	Generally loose accountability and element of corruption is higher in government programs	Due to strong accountability element of corruption is negligible in NGOs programmes
12.Sense of ownership	Programmes are generally owned by the government there is little feeling of ownership by communities	As the programmes are owned by the communities there is strong feeling of ownership among beneficiaries
13.Scale of activities	Government programs are on large scale generally for entire country or entire province	NGOs programs are on small scale generally at micro level and confined to a cluster of villages
14.Female staff	Proportion of female staff is relatively less in government programmes	Component of female staff is higher in NGOs
15.Motives	Government motives are clear manifest	Sometimes NGOs have hidden motives too.
16. Sustainability	Government programmes are generally sustainable	NGOs programmes are generally funded by donors' agencies. Program continuous as long as it is funded by the donor. Once the fund is withdraws, the continuity of the NGOs programmes is uncertain.

CHAPTER 9

SUMMARY CONCLUSIONS AND RECOMMENDATIONS

9.1 Summary

The primary focus of the present study was to assess the rural development programmes launched by governmental and non-governmental organizations for the development of rural women. For this purpose a comparison was made of governmental and non-governmental organizations in the provision of different services for the development of rural women. The services include education, health, family welfare (mainly child and mother health care), and capacity building. In addition these organizations also provide credit facilities for the promotion of income generation activities. The Sarhad Rural Support Programme (SRSP) has been taken as sample NGO for the present research because SRSP is such an NGO that covers most of the districts of the province and had the largest network compared with other NGO's. In consultation with the SRSP staff and guidance from the relevant literature Peshawar district was purposively selected. Out of eight union councils three were purposively selected. From these selected union councils 210 females respondents were interviewed through a pre-tested questionnaire. The focus of the study was restricted to rural women because of the following reasons.

- It is generally believed that the females are the neglected segment of the society and thus require more attention.
- Women in general and rural women in particular are vulnerable in Pakistani Society.
- Rural women do contribute to the household economy but their contribution is invisible.

The findings of the study show that majority of the sample respondents' fall in the age group of 31-40 years. The literacy status was found comparatively high as that of the provincial figures. But the level of education was not that of required level. Majority of (70%) the sample respondents were found married. It seems that married women had the permission of their male partner to join the Women Community Organization (WCO). More than 84% of WCO members were housewives. Agriculture was the main occupation of 37% of the sample households. Other professions including Government services, trade and business and working as daily

wageworker were equally popular among the sample households. Male and females ratio was found as 49:51. The average household size was 7.7 persons per household.

Our concern was to study both public sector organizations and NGOs (SRSP) who are engaged in the provision of different services to the rural community. In this regard the findings are:

- Main rural development programmes launched by the government with special focus on women are: health, family planning and education.
- Main programmes launched by NGOs are social mobilization, skill development, and credit and enterprise development.
- Government programmes are routine programmes and are carried out through departmental staff.
- NGOs activities are carried out through participation of local communities called as WCOs male community organizations (MCOs) or village organizations (VOs). These are formed with the representations from various ethnic groups.
- In general NGOs' focus is on income generating activities which include stitching, embroidery, tailoring, poultry farming, bee keeping, dyeing, silk worm, etc. where as government' focus is on education and advisory activities.
- The activities of the NGO enhanced the income of the respondents. However, the income from dyeing was insignificantly higher than the rest of the programmes.
- NGOs are generally extending credit facilities to women whereas government is very rarely providing credit facilities to women.
- NGOs are focusing on training and skill development whereas element of training and skill development is not much common in government programmes.
- Regarding government programmes among the respondents, 85.2% availed educational facilities, 46.19% health facilities and 28.57 family planning facilities.
- One prominent feature of the sampled NGO was that it extends credit for income generating activities and imparts necessary training for enterprise development. Due to these activities there was significant increase in the income of beneficiary households. Averages increase in income per household

was Rs. 700. However, there were complaints regarding low amount of credit, high interest rate, poor access to raw material and difficulties in marketing of the newly developed products.

- There was general discontentment among respondents regarding government programmes for health and family planning. Only 46% of respondents visited health centers during a year. About 76% of respondents expressed dissatisfaction regarding health facilities. Performance of family planning was more or less the same only 55% of respondents were contacted by family health workers. Only 21% of respondents expressed satisfaction with existing family planning facilities.
- Educational facilities were being availed by larger proportion of the population about 85% of respondents were sending their female children to school. Of these 84% were attending public schools and 16 % private schools. Only 28% of the respondent expressed satisfaction with existing educational facilities. Of all the respondents 32 % respondents expressed that facilities are inadequate, 24% of respondents pointed out the shortage of qualified staff and 17% of respondents indicated that standard of education is poor.
- The NGO provided two levels (Rs. 5000 to 10000 and 180000 to 20000) of credit to the respondents. All those respondents who were extended credit also received training. The credit of higher level yielded better results in terms of increase in income.
- All respondents reported that there was an increase of 24% to 27% in their income since joining of the WCO. Most of the women joined the WCO after the year 2000.
- As far as satisfaction regarding government programmes is concerned, 76.66% of respondents expressed dissatisfaction regarding health services, 78.75% regarding family planning services and 71.4% regarding education facilities.

In some sectors public organization were more actively involved while in some sector the SRSP. In case of health, family planning services and education, the government organizations were playing major role. While in case of skill enhancement and credit delivery the SRSP was more actively involved. However, in case of government organizations a number of complaints were registered by the sample respondents. Some of the major complaints were; non cooperative staff, low

standard of these institutions, poor facilities, and red tapism. General observations about the research area also confirm these findings. In contrast to this, the interventions launched by the SRSP proved useful for the sample respondents. The main factor for the success of the SRSP programme was the efforts of the female social organizers who motivated rural women to take active part in the economic activities and to financially support their families.

Before the year 2000 the formation of the WCO was slow because it was difficult to mobilize rural women but the field staff of the SRSP worked hectically in the initial years of the programme and to a great extent succeeded in convincing the females for forming the WCOs in the project area. The study found that before the year 2000 only 15% joined the WCO. In contrast to this after the year 2000 people became aware of the importance of the programme and joined the WCO. In percentage terms the membership was 85. The factor, which motivated them to join the WCO, was mainly poverty prevailing in the sample area. They were aware that the SRSP provides technical training along with credit. They joined the WCO to get both training and credit. The findings show that 34% women took training in embroidery, followed by another 25% who were trained in dyeing and painting. Some got skill development training in poultry farming. In addition to this, livestock management training was imparted to the sample respondents.

One of the most encouraging findings of the study is that the respondents who got these trainings applied these in their respective fields. Some of them had started new enterprises mainly embroidery and tailoring. Along with training, the SRSP package included the provision of credit facility for livestock and enterprise development those who require it. Majority (57.61%) utilized it for enterprise development and the rest used it for livestock development. Our results show that the increase in income from enterprise development was insignificantly higher than that of the livestock.

The empirical evidence show that utilization of these trainings and credit had increased the investment capabilities and have positively affected the income of the sample respondents. On the average, about 26% increase occurred in the income of households in the research area. The attitude of males towards their females also changed. Now they allow their females to take part in the income generating activities and contribute to the household economy. As a result, the process is gradually

empowering the rural female. Now the members of the WCO's had some role in decisions making regarding the household matters. Moreover, they had the choice to spend the income earned through the economic activities carried out by them. All these factors motivated them to expand their economic activities so that they could earn more. However some problems were also reported by the sample respondents. The major among these are:

- The present upper ceiling of credit according to them was not sufficient for their enterprises.
- It was mandatory to deposit some money while applying for credit. The respondents considered this a burden over themselves.
- The services charges of 18% on these loans were very high when compared to the prevailing interest rate, charged by other formal institutions.
- The amount of repayment installments was considered high.
- Raw materials were not available at the village level.
- Market for selling of their products was not available at village level. They were not allowed to move freely out side their house to sell their products.
- The sample respondents considered the duration of training courses too short. Similarly, refresher courses were not arranged for those who had already availed the training facility.

9.2 Conclusion

Since the last two decades various socio economic development programme of government and NGOs are going parallel to each other. Government's programmes are on large scale and NGOs programmes are on small scale. Major programmes of government with special focus on rural women are health and family planning facilities and educational facilities. Where major focus of NGOs women programmes is on income generating activities through participatory approach. NGOs programmes are relatively more popular because these help increase income of women folks and as a result attitude of male members of the household is also improving and women role in decision making and empowerment is increasing. Government facilities are generally concentrated in the urban areas as compared to the rural areas these are grossly inadequate. There is general dissatisfaction on quantity and quality of facilities provided by the government, element of inefficiency is also common. Government programmes are relatively more sustainable as compared with those of

NGOs. NGOs are being funded by donor agencies; if the donor agencies stop funding the survival of the NGO will be in danger.

9.3 Recommendations

Keeping in view the main findings of the study, the following recommendations are put forward to bring about improvement in programmes launched by NGOs and Government separately for the betterment of rural women

9.3.1 Non Governmental Organizations

- The credit programme should be extended with relaxation to the convenient and facilitating extent. The terms and conditions should be revised to suit the economic conditions of the rural communities particularly for rural women.
- There is a dire need to maximize the household coverage through motivational Campaign to ensure maximum participation; this will lead to the equality and accumulation of increased capital in the form of saving.
- The repayment period for the loan taken for an enterprise should be increased as demanded by the respondents in the project area.
- More simplified procedures for credit disbursement should be adopted.
- The amount of loan should be increased to the level of Rs. 30,000 to 40,000 so that the requirements of the entrepreneur to be met properly.
- Time constrain while taking loan should overcome that rural woman can get loan at right time for utilization.
- The social organizer should visit the loanee regularly and provide technical training and assistance to beneficiaries in order to get maximum benefits/ results by the utilization of micro credit. Proper monitoring must be ensured by the SRSP so that miss utilization of the credit is minimized.
- The SRSP should guide the rural communities to use combined transportation for marketing of their products to urban market so that they should efficiently and effectively utilize their loans for the purpose they have taken.
- The SRSP should make a sound linkage with big entrepreneur for its enterprise development programme so that they would be able to purchase the raw material at cheap rates and sell it to their client on subsidized rate.
- Training courses should be refreshed and the duration of the training courses should be increased in order to achieve the required results.

- More training and follow-ups are needed to develop these locally based income resources. Necessary inputs, credit and linkage, should be further enhanced both to properly use the new ideas and sell locally made products.
- The micro enterprise training should be extended to other village and handicraft centers should be opened in every village of the project area so that the women folk can participate in the economic activities.
- Mutual visit should be arranged among the WCOs for the purpose to get benefits from each other experiences.
- It is recommended that the new skill like glasswork, woodwork, surf and soap making, candle making flamer making should be introduced.
- Review meetings should be planned and conducted with the CO/WOs where the impact on the programme activities will be assessed and community should be motivated to continue the process of development on their own.

9.3.2 Government

Government programmes focuses on women are in the fields of education, health and family planning. Various recommendations for each of these are as under.

9.3.2.1 Education

- Compulsory legislation accompanied by an adequate provision of necessary education facilities should be enforced in order to meet the needs of the rural schools particularly of females.
- Female teacher's residence with amenities in rural areas be constructed to attract the female teacher to teaching profession.
- Special attention and care should be given to rural schools by providing them with adequate equipments, teaching aids, and properly trained teachers.
- The number of teachers in rural schools should be increased. They should be given maximum facilities. To check the performance of rural schools, inspections by the impartial people outside the directorate must also be made.

9.3.2.2 HEALTH

- The expanding private sector is here to stay and its dominance in the health sector needs to be recognized by policy makers. The tendency of

ignoring its existence in the hope that the trend will reverse, can no longer be continued. Since the provision side of the government is weak, the policy making arm will need to be strengthened to come up with successful public private partnership mechanisms which at the same time do not jeopardize the interests of the disadvantage groups. Private health provision could be financed through government sources to provide subsidized care to low income and other vulnerable groups furthermore, vertical programmes such as EPI, Family Planning, Tuberculosis control etc, often supported by multilateral agencies such as WHO, UNICEF etc, need to be expanded to include the private sector which caters to most of the population.

- With cut back in social sector allocation in real terms, combined with growth in population, government services are fast becoming the option of last choice even for the lowest income strata. Overall health expenditure needs to be increased but must be simultaneously accompanied by institutional reforms in order to have a meaningful output. Within health allocation, the non salary budget not only needs to be substantially increased but at the same time decentralized to district level if quality of service is to be improved. Funds from poorly performing development projects and redundant vertical programmes can be diverted to supplement this critical need.
- The highly subsidized government's health sector cannot provide the quality care on the minimal budget provided, unless it is in a position to generate its own funds. While the urban based population which enjoys a higher per capita income is willing to pay high user charges to private practitioners, this is not necessarily possible for the poor and the rural people who are already overburdened due to the lack of transport and communication facilities, and absence of basic services. It is recommended that some degree of user fee at tertiary care hospitals be introduced on an experimental basis with the principal aim being improvement in quality of services and decreasing over utilization rather than cost recovery. A sliding fee structure can be used particularly for inpatient admission. This exercise first needs to be preceded by

a careful study assessing the income elasticity of demand for hospital services and devising a formula for levying user charges.

- Though improvement in preventive services is underway, the pace of improvement is slow. It is imperative that rapid gains be made, particularly in the rural areas, where government is the sole provider and where other sources are unlikely to bridge the gap.
- Given the diverse nature of rural settlements and the large, but sparsely distributed population, alternative strategies in the shape of mobile clinics could be devised with linkages both with the health facility based system and with TBAs and LHWs at the grass root level. Linkage with NGOs for better community access and mobilization also needs to be actively pursued and where possible successful NGO programmes could be supplemented to achieve the common agenda of health and welfare. An important first step would be to collect sufficient information about NGOs and have a concerted effort on projects.
- A well planned, community strategy for population welfare activities, should be formulated to create a favorable climate in the most cost effective manner through close collaboration with the sectoral provincial departments, political and religious leaders, community level workers, social workers, NGOs and the private sector to achieve the required results. Local workers should be trained in community mobilization and health education techniques and provided knowledge and skills in safe motherhood techniques. Besides supplying of contraceptives to the motivated persons at their door steps, the local workers need to maintain proper records of referral of clinical cases to the health facility and should provide special counseling and follow up to those families having low birth weight babies, malnourished children and mothers and defaulters of immunization.
- In order to motivate the people, sustainable capacity building activities related to population welfare, health education and delivery of family planning services (including monitoring and referral support) should be undertaken through continuous dialogue between the community, representatives of concerned government departments and NGOs. Those who initiate the dialogue should help in articulation of interest and felt needs of the

beneficiaries, and should share their knowledge to match with the experience of the communities in the diagnostic process.

- Providing population planning and safe motherhood services to the deprived segment of the populations should not be left to the government alone. The community should actively participate in the provision of services with active backing from population Welfare and Health departments. The population welfare Department should establish a network of community based workers by providing them training and financial and technical support while their activities could be supervised by the district committees with the help of participating NGOs. Cooperating NGOs could assist the district committee to work out a system to motivate the user and pay the cost of programme related supplies such as contraceptives, essential drugs, ORS packets etc.
- Community participation is of essential importance in any population Welfare programme, for unless the community accepts the programme and sees it as beneficial, the chance of its success is minimal. District Committee could be the best forum for supporting and promoting population welfare activities along with health initiatives in an integrated manner.
- In the absence of proper health education, the provision of health facilities may be of no benefit to the rural people. For this purpose, frequent visits of health visitors to rural areas for instructing women on health education may be arranged.
- Cheap medical care and medicines should be made available so that it should be within the financial means of the rural poor.
- Efficient use of medical care and medicines in government sector by checking and controlling the miss use. Therefore, the attendance and the various treatments given to them by the staff concerned must properly be recorded.
- Shortage of qualified doctors and Para medical should be removed and more incentives should be given to those working in the rural areas.
- Public media and means be used to create social awareness particularly through radio broadcasts on health and hygiene in the regional language should be enforced as the use of radio transistors is quite common in the villages.

9.3.2.2.1 Family Planning

- Majority of women are living in rural areas where exposure to information about family planning in general is restricted due to socio-cultural setting. It is, therefore, necessary for the government to introduce improved ways and means for better access of women to information and quality of service of family planning. At the same time this also requires making available a wide range of contraceptives i.e. pills, condoms, IUD, injection as well as sterilization services for both male and female. This need to be developed, in context of total community development system. Besides providing the services its continuity should also be ensured.
- Supplies of medicines and clinical equipments to family welfare clinics should be increased and regular replenishment of medicines and contraceptives be ensured, and supply streamlined; closer supervision and administrative control of family welfare clinics and their staff is required to ensure their efficiency.

REFERENCES

- Acharya, M. (1995). Twenty years of WID and rural women in Nepal. Asia Pacific Journal of Rural Development. 5(1):59-77.
- ADBP. (1999). Fighting poverty in Asia and pacific. The poverty reduction strategy p-5.
- Aftab, T. (1994). Fighting illiteracy: what works and what doesn't: A case study of female literacy in Pakistan. Convergence-Toronto. 27(4):25-34
- Ahmad, I. (2001). Impact of Human Resource Development Program of Sarhad Rural Support programme on the local community in District Manshra". NWFP Agricultural University, Peshawar, Pakistan.
- Akram, N. (2002). Evaluation of emergency contraception practices of private general Medical practitioners in Pakistan. A paper presented in a 2nd conference on Pakistan's population stabilization prospects by population association of Pakistan, 457-474.
- Amera, S. (1990). Structural Issues in Women's Development in Pakistan UNICEF Islamabad.
- Amjad, M. (2002). Effects of Human Resource Development (HRD) on agriculture and livestock production in District Manshra. NWFP Agricultural University, Peshawar, Pakistan.
- Ashish, B. and A. Bose. (2000). Empowerment of women: how and when. Economic and Political- weekly. 35(34):3005-3007.
- Aurangzeb, M. (2004). The causes and effects of agricultural mechanization and labour displacement in NWFP, Department of economics University of Peshawar.

- Awori, T., L. Dignard. and J. Havet. (1995). Training issues: women in micro and small-scale enterprises development in Africa. Pp 229-248
- Ayesha, K. (1999). Mobility of women and access to health and family planning services in Pakistan. Access to reproductive health: a question of distributive justice. *Reproductive-Health-Matters*. 7(14):39-48.
- Bardhan, K. and Klasen, S. (1999). UNDP's Gender Related indices: a critical review *World-Development-Oxford*. 27(6):985-1010.
- Baxte, G. and Charle, H. Kennedy. (2001) Pakistan 2000. Oxford University Press Karachi, pp 233-243
- Beales, S. (2000). Why we should invest in older women and men: the experiences of help age International. Pp.9-18.
- Bibi, S. (2004). Factors Affecting the Mobilization of Rural Women in District Peshawar through SRSP, IDS NWFP Agricultural University Peshawar Pakistan.
- Brits, J. S. and N.P. Steyn. (2000). "An Income Generating Community Based Nutrition Project for Rural Women" *South African Journal of Clinical Nutrition (SAJCN)*: Lahore, pp 11-4.
- BRSP. (2005). Annual Development Review Quetta.
- Burki, S.J. (2000). Pakistan 50 years of National Hood Vanguard Books Pvt. Lahore p154.
- Butt, A.H. (1980). An Evaluation of Agricultural Loans Scheme of UBL in Tehsil Faisalabad. University of Agriculture Faisalabad.
- Chaudhury, R.H (2002). Unmet Need for Contraception is SAARC Countries Levels, Trends and Determinants. A paper presented in a 2nd conference on Pakistan's population stabilization prospects by population association of Pakistan 477-494.

- Creevey, L. and J. Edgerton. (1997). Evaluation of the Impacts of Grassroots Management Training on Women in India. *Canadian-Journal-of-Development-Studies*. 8:645-672.
- Desai, S. and D. Jain. (1994). Maternal Employment and Changes in Family Dynamics: the social context of women's work in rural South India. *Population and Development Review* 20(1): pp 115-136.
- Director General of ILO's. (1976). Report to the World Employment Conference, International Labour Office.
- Dixon, R.B. (1976). The Roles of Rural Women: Female Seclusion, Economic Production and Reproductive Choice. In R. Ridker (Ed) *population and Development*. Chapter-9. Baltimore, MD: Johns Hopkins University Press.
- Dorothy, L. (1975). UN Consultant Background Paper Hong Kong.
- Douthwaite, M. (2002). The Impact of retraining community based distribution workers on client's knowledge, attitude and use of oral contraceptive use in Pakistan. A paper presented in a 2nd conference on Pakistan's population stabilization prospects by population association of Pakistan, 419-445.
- Easterly, W. (2001). Pakistan's critical constraints: Not The Financing Gap but the Social Gap. February 2001. World Bank.
- El-Tayeb, S.E. (1995). Credit for poor rural women training project in Al Ilaiga, Sudan: *Ahfad Journal*, pp.18-29, Ahfad University.
- Farzana, P. and F. Panhwar. (1998). Women and distance education in Sindh (Pakistan). *Adult education and development*. No. 51 189-196.
- Gguyer, J.I. (1980). "Household budgets and women's incomes", working paper No. 28. Boston, African Studies Centre Boston University.

- Ghosh, M.K. and S.C. Chaudhry (1971). Statistics in theory and practice. Allahabad, the Indian press publication Ltd.
- Goetz, A.M. (1995). Credit for poor rural women in Bangladesh: who controls the loan use? D+C, Development and Cooperation 6:4-15.
- Government of Pakistan. (1990). Survey of NGOs in field of social services, ministry of planning and development division Islamabad.
- Government of Pakistan. (2002). Situation analysis of health sector in Pakistan.
- Govt of Pakistan Year Book. (2003-04). Ministry of Population And Welfare Islamabad.
- Govt. of Pakistan. (1970). The fourth five year plan 1970-75. Ministry of planning and development Islamabad.
- Govt. of Pakistan. (1978). The fifth five year plan 1978-83. Ministry of planning and development Islamabad.
- Govt. of Pakistan. (2000). Economic Survey. 1999-2000 Finance Division Economics Advisor's Wing, Islamabad.
- Govt. of Pakistan. (2001). Economics survey 2000-2001, Islamabad. Finance Division Economic Advisor's Wing, Islamabad.
- Govt. of Pakistan. (2003). Economic Survey 2002-03, Finance Division Economic advisor's wing, Islamabad.
- Govt. of Pakistan. (2004). Economic survey 2003-04, Finance division economic advisor's wing, Islamabad.
- Govt. of Pakistan. (2005). Economic Survey 2004-05, Finance Division Economic advisor's wing, Islamabad.

- Govt. of Pakistan. (1955). The first five year plan, (1955-60) National Planning Board Karachi.
- Govt. of Pakistan. (1960). The second five year plan 1960-65, Ministry of Planning and development Karachi.
- Govt. of Pakistan. (1965). The third five Year Plan, 1965-70. Ministry of Planning and development Karachi.
- Govt. of Pakistan. (1981). Population census report. Population census organization, Islamabad.
- Govt. of Pakistan. (1983). The Sixth five Year plan, 1983-88. Ministry of Planning and Development Islamabad.
- Govt. of Pakistan. (1988). The Seventh five Year plan, 1988-93. Ministry of Planning and Development Islamabad.
- Govt. of Pakistan. (1993). The Eighth five year plan, 1993-98. Ministry of planning and development Islamabad.
- Govt. of Pakistan. (1998). District Census Report. Population census organization, Islamabad.
- Govt. of Pakistan. (2001). Ten-year perspective Plan (2001-11), Ministry of Planning and Development Islamabad.
- Gregory, S. (1994). Women's participation and involvement in sericulture: role differentiation and status implications. 74(1):1-6.
- Gujarati, D. N. (2003). Basic Econometrics. Fourth Edition. McGraw Hill, Boston.
- Gul, R. (2004). Impact of Aga Khan Rural Support Programmes (AKRSP's) gender strategy on rural women in district Chitral. IDS NWFP Agricultural University Peshawar.

- Hafeez, S. (1983). Woman in Industry. Women division Islamabad.
- Haider, R. (1995). Economics and gender issues of environment and evaluation International Journal of Agricultural Resources, Governance and Ecology. 2:155-177.
- Haq, K. (1995). Poverty has a women's face our planet. 7(2): 15-17.
- Hart, W. E. (2000). Women's organizations and self help groups: a step towards independence? Agriculture + Rural Development 7(1) 3-34.
- Hast, M. (1997). Time supply behaviour of women in income generating project: a case study of women in the seed multiplication project,
- Herrin, A. N. (1995). Population, health and women. Essays in social science and development: a tribute to Gelia T. Castillo. 341-382.
- Himayatullah and S. Parveen. (1990). Interrelationships between Population and Status of Women. Journal of Rural Development and Administration Vol, XXII, No.2, Pp.113-119.
- Huma Zakir. (1997). Role of women in Economic Development in district Peshawar. NWFP Agricultural University Peshawar.
- Humayun Khan. (2006) NGO's and gender development: The case of AKRSP in District Chitral, NWFP, Pakistan. The Lahore Journal of Economics Volume-11 No.1 Jan-June.
- Hussain, S. (1976). An appraisal of agricultural development bank of Pakistan as a source of farm credit. A case study of Jhang Tehsil. University of agricultural Faisalabad.
- Imtiaz Ahmad. (2001). Impact of Human Resouces Development programme of SRSP on the local community in Distt. Mansehra. NWFP Agricultural University Peshawar.

- Jain, W.M.H. and Rehman, M.L. (1988). Participation of women and children in Agricultural activities: A micro level study in area of Bangladesh. J. Agric. Econ. 11(1): 1-50.
- Jalaly, Z.A. (1992). Gender Issues and their Implication for Development, Planning for Women in Development A Programme of Action. Paper No. 1. Pp, 120.
- Jehanzeb. (1999). Economic Efficiency of the Agrarian Structure in the North West Frontier Province of Pakistan: A Econometric Analysis. Department of Economics, University of Peshawar, Peshawar.
- Jensen, A.M. (1995). The status of women and the social context of reproduction journal of international development 7(1):61-79.
- Jillani, H. (1982). Provision of legal assistance to women through non-government organizations. Papers on the National Conference of non-government women's Organization. Vol-1.Pp.21-22.
- Johnston, J. (1987). Econometric Methods McGraw Hill Book Company, Singapore.
- Joshi, C. (1990-91). Integrating Rural Women's concerns into the Governmental Policy Making Process, Needs, Problems, Approaches and Potential UNIFEM Islamabad
- Jussawala, M. (1949). "Mechanization of Agriculture" India Journal of Agricultural Economics, 4(1):40-45.
- Kantner, A and Westly. (1998) The contextual web of fertility control: a case study of chisang village contribution to Nepalese studies, 25.
- Kapunda, S.M. and C. Creighton. (2000). Gender inequality, poverty and food insecurity in Tanzania; Ashgate Publishing Ltd. Alder shot; UK 29(220-236).

- Karki, D. (1998). The contextual web of fertility control : a case study of chisang village contribution to Nepalese Studies, 25.
- Karl, E. and G. Weber. (1986). Rural Development Planning in Pakistan HSD Manual No. 4 Division of Human Settlement Development. Asian Institute of Technology Bank of Thailand.
- Kazi, A. (1992). Women Development Planning and Government policies in Pakistan.
- Khan, A.R. (1999). Involvement of rural women in the economic activities of Balochistan: Journal of Rural Development and Administration 31(2):(105-109).
- Khan, A.G. (2001). Impact of community infrastructure project on the socio economic conditions of the local people of Islampur, Swat. Institute of Development Studies, NWFP Agricultural University Peshawar, Pakistan.
- Khan, A.G. (2001). Impact of Community Infrastructure Project on the Socio Economic Conditions of the Local People of Islampur, Swat. Institute of Development Studies. NWFP. Agricultural University Peshawar Pakistan.
- Khan, Z. (2003). The role of Sarhad Rural Support Programme (SRSP) in agricultural productivity in Distract Kohat. IDS. NWFP Agricultural University Peshawar.
- Khandker, S. and M.A. Latif. (1996). The role of family planning and targeted credit programs in demographic change in Bangladesh. World Bank discussion papers: No. 337, vii + 32 pp.
- Khatton, S. (2004). The role of SRSP in the management of women related natural resource, and other skills in district Peshawar. IDS NWFP Agricultural University Peshawar.

- Khawar, M. and S. Farida. (1987). Women of Pakistan, two steps forward and one-step back. Vanguard Book Pvt. L.T.D. 45 The Mall Lahore. Pp. 89-110.
- Kumar, U. (2005). <http://www.yahoo.com>.
- Lalitha, K.S. and B.S. Siddaramiah. (1999). An analysis of achievement motivation of rural woman; University of Agricultural Sciences Bangalore. 28(7-8):98-100.
- Levin. (1999). Effect of Price And Access on contraceptives use of partnership for health reform university research corporation US 1-15 .
- Longwe. (2000). Gender issues in literacy education. Working Paper Institute of Rural Management Anand No. 108, i + 22 Pp; 33.
- Lucas, E.T. (2000). Popular participation as an issue in two Negerian Women's development programme; Africa Development Afrique et Development 25(1-2):75-98.
- Luch, M. E. Jarju, M.D. Nell and M.O George. (2000). Mobilizing demand for contraception in rural Gambia, health system unit, Centro de Malaria e outras oencas Tropicais, Institute of Higiene and Medicine Tropical, university of Lisbon, Portugal. 325-335.
- Maitrayee, M. (1984). Silver Shackles: Women and Development in India. OSFAMUD.
- Maizan, A.N. (1995). In quest of empowerment: The Grameen Bank impact on women's power and status. 174 pp.
- Malik B.A and M. Aslam. (1995). The role of family physician in fertility control in Pakistan, JCPLP. Journal of the college of physicians and surgeons Pakistan 5(4):159-160.

Managing Challenges of social Mobilization. (2000-01). Annual Review SRSP Peshawar.

Mariam, and A.Khan. (1998). Trends among Educated Women. Frontier Post Pp.5.

Masud. N. (1980). Education and training of women in fields related to Science and technology Papers; The National Conference on Women's Participation in Science and Technology Development. Vol-I: Pp.20-21.

Miller, L.C., I. F. Jami., M. Timouri and J. Wijnker. (1995). Trained traditional birth attendants as educators of refugee mothers. World health forum. 16(2):151-156.

Miller, P.C, A. Kayani and A. J. Minhas. (2001). On the dynamic of contraceptive use in Pakistan a paper presented in a conference on Pakistan's population issues in 21st century by population association of Pakistan, 55-63.

Mohammad, I.B. (1992). Planning for Women's Integration in Development Situation Analysis Concerns, Strategies and Mechanisms. Planning for Women in Development. A paper of Action, ILO Paper No.2.Pp.46-52.

Moser, Caroline. (1993). "Gender planning in the Third world: meeting practical and strategic gender needs", World development, vol. 17, No.11 Great Britain.

Muhammad Amjad. (2002). Effects of Human Resource Development on agricultural and livestock production in District Manshera. NWFP Agricultural University Peshawar.

Muhammad Hamid. (2000). Factors Effecting the organization of village based Community in Hazara Division. (A Case Study of Selected VOS established by SRSP, CIP and Sungi). NWFP Agricultural University Peshawar.

- Muhammadd Ayaz. (2000). The Role of Sungi in Development of natural Resources through community participation. (A Case Study of Selected Villages in District Haripur). NWFP Agricultural University Peshawar.
- Muhammad Qaddafi. (2001). Study of Natural Resource Management (NRM) by National Rural Support Programme (NRSP). A Case Study of Tehsil Rawalakot District Poonch AJK. NWFP Agricultural University Peshawar.
- Nadeem. (1999). Evaluation of AKRSP regarding human resource development: A case study of Tehsil Mastuj, District Chitral NWFP Agricultural university Peshawar.
- National Plan Of Action. (1998). Ministry Of Women Development Social Welfare And Special Education Islamabad.
- NRSP. (2005). Annual Development Review. National Rural Support Programme, Islamabad.
- Nuzhat, K.I. (1972). The role of female education in development planning Board of economic Enquiry University of Peshawar.
- Osunde, A.U. and F.E.O. Omoruyi. (1999). An assessment of the factors militating against the active participation of rural women in development oriented educational programme in midwestern Nigeria; Adult Education and Development. No 52.18.87.
- Pakistan Human Development Report. (2002). Center for research and poverty reduction and income distribution Islamabad.
- Pakistan Human Development Report. (2005). Center for research and poverty reduction and income distribution Islamabad.

- Penezai, R, F. Jan and M. Ahmad. (2001). Pattern of contraceptive use in Quetta paper presented in a conference on Pakistan's population issues in 21st century by population association of Pakistan 43-46.
- PRSP. (2005). Annual Development Review. Punjab Rural Support Programme, Lahore.
- Puhazahendhi, V. and B. Jayaraman. (1999). Increasing women's participation and employment generation among rural poor: an approach through informal groups. Proceeding of the fifty ninth Annual Conference of the Indiana Society of Agricultural Economics, Jabalpur, Madhya Pradesh, India, December 1-3-1999. Indian Journals of Agricultural Economics 45 (3): 287-295.
- Qayyum, A. (1989). An evaluation of the agricultural credit programme of agricultural development bank of Pakistan in northwest frontier province (1975-76 to 1985-86). Center of applied economics studies, University of Peshawar.
- Quisumbing, A.R., L.R. Brown, L. Haddad, D.R. Meinzen and E. Lutz. (1998). The importance of gender issues for environmentally and socially sustainable rural development Agriculture and the environment: perspectives on sustainable rural development. Pp.186-202; A World Bank.
- Razzaque, A.R. (2001). Uptake of family planning in Pakistan Trends and emerging issues, a paper presented in a conference on Pakistan's population issues in 21st century by population association of Pakistan 3-13.
- Reddy, G.N., A. Rizwana and C.K. Gariyali. (1995). "Integrated approach towards small family norm, income generation and empowerment of rural women" a case study of Asia Pacific Journal of Rural Development pp. 119-132.

- Roy, R. (1998). Socio Economic Development of Women. The-Oxfam-handbook of development and relief. Volume-I, Pp 161-324
- Sacceda, M. and S. Majeed (1999). Reproductive health statuses of women in NWFP. JCPSP, Journal of college of physicians and surgeons Pakistan 9(5):204-206.
- Salcem, S. and N. Sami. (2002). Emergency contraceptive use: unmet need for prevention of unintended pregnancies. A paper presented in a 2nd conference in Pakistan's population stabilization prospects by population association of Pakistan, 447-455.
- Sami, S. (1960). "Female education in Peshawar District, "Board of Economic Enquiry NWFP University of Peshawar Pub. No. 7.
- Samina Bibi. (2004). Factors affecting the mobilization of Rural Women in District Peshawar through SRSP. NWFP Agricultural University Peshawar.
- Sedlack, G., P. Hunte and M. Bamberger. (2000). Evaluating the impacts of decentralization and community participation on educational quality and the participation of girls in Pakistan. Integrating quantitative and qualitative research in the development projects. 98-103PP.
- Shah, K.H. (1978). An economic evaluation of supervised agricultural credit programme of national bank of Pakistan. A case study in Jhang Tehsil. University of Agriculture, Faisalabad.
- Siddiqi, N. (1983). "Employment opportunities for Rural Females through organization" Pakistan. First Progress Report: Evaluation of Program and Formulation of Guidelines. Islamabad: ILO.
- Social Development in Pakistan. (1998). Annual Review Social Policy and Development Centre Karachi.

- SRSO. (2005). Annual Progress Report Karachi Sindh.
- Sungi. (2000). Annual progress report. Printed by 786 printers, Islamabad.
- Sweetman, C. (2000). Gender and development. Women and leadership. Gender and development, 8(3):1-88.
- Syed Hussain Kazmi. (2003). Socio-Economic Impact of Human Recourses Development activities of SRSP in Tehsil Haripur, NWFP Agricultural University Peshawar.
- Thapa, S. and K.R. Pandey. (1994). Family planning in Nepal an update JNMA journal of the Nepal medical association 32(111):131-143.
- Thapa, S. and M. Friedman. (1998). Female sterilization in Nepal a comparison of two types of service delivery international family planning perspectives 24. (2) , 78-83.
- Thomas, D. and J. Maluccio. (1995). Contraceptive choice, fertility and public policy in Zimbabwe living standards measurement study working paper. No. 109.
- Tinker, A.G. (1998). Improving women's health in Pakistan. 1998, VI + 34 pp. Human Development Network Health, Nutrition, and population Series; 4 pp.
- Todaro, P. Michal. (1999). Economic Development New York University USA.
- Oedl, T. E. Wieser. (1999). Women a disadvantage population group in rural areas; Funkitonsfahigkeit des land lichen Raumes. Pp 87-89.
- UNDP. (2005). Human development Report. New York. USA

- Usman, M. (1999). Sustaining economic development by reforming basic institutions through community participation. Fifteenth annual General meeting Islamabad.
- Winkvist, A. and H.Z. Akhtar. (1997). Images of health and health care options among low-income women in Punjab, Pakistan. Social Science and Medicine. 45: (10), 1483--1491.
- World Bank. (2001). Consultation with poor, report prepared for World Bank.
- World Bank Country Study. (2000). Ecuador gender review: issues and recommendations xv + 81 Pp.
- World Bank. (1975). Rural Development Sector Policy Paper Washington. DC Feb 1975, P.43.
- World Bank. (1996). The Aga Khan Rural Support Programme A third evaluation, xix + Pp. 164.
- World Woman Trends and Statistics report. 1979-1999.

ANNEXURE 1

QUESTIONNAIRE

AN ANALYSIS OF GOVERNMENTAL AND NON-GOVERNMENTAL RURAL DEVELOPMENT PROGRAMMES WITH PARTICULAR FOCUS ON RURAL WOMEN IN NWFP

1. Name of union Council: _____
2. Name of Respondent: _____
3. Age Group: _____
4. Martial Status: Married _____ Unmarried _____
5. Position in Household: _____
6. Literacy status: Literate _____ Illiterate _____
7. If literate level of education: _____
8. Occupation of the Respondent: _____

S.No.	Occupation of H.H. Members	Main	Subsidiary

10. Housing Structure: i. Pucca ii. Semi-pucca iii. Kucha

11. Family Composition:

Sr.No.	Age Group	Male	Female	Total
1.	0 - 14			
2.	14 - 64			
3.	65 and above			

12. Literacy Status of the Household Members

Sr.No.	Literate			Illiterate		
	Male	Female	Total	Male	Female	Total
1						
2						
3						

13. Literacy level of household members

Sr.No.	Level	Male	Female	Total
1.	Primary			
2.	Middle			
3.	Matric			
4.	F.A/F.Sc			
5.	B.A/B.Sc			
6.	M.A/M.Sc			

14. Are the following facilities available in the household:
 i. Pipe water ii. Electricity iii. Drainage System

WOMEN ORGANIZATION

1. When did you join the WO and why? _____
2. What is your position in WO? _____
3. Did SRSP give equal representation to all women groups of your village? (Y/N)
 if yes, how _____ if No, why _____
4. What problems did you face before joining WO.
5. What are the different interventions of the SRSP for WO.
 i.
 ii.
 iii.
6. Do these interventions are based on women needs. (Y/N) if No give reasons.
7. What do you suggest to solve these problems?
 i.
 ii.
 iii.
8. Any other suggestion would you like to improve SRSP's Women Development programme.
 i.
 ii.
 iii.
 iv.

HUMAN RESOURCE DEVELOPMENT

1. Did you receive any training? (Y/N) If "yes" please give the following information.

Sr.No.	Type of training	Duration	Year
1.	Stitching, tailoring and embroidery making		
2.	Poultry farming		
3.	Silk worm rearing		
4.	Bee keeping		
5.	Mushroom cultivation		
6.	Dyeing		
7.	Any other (specify)		

2. Do you think the duration of training is:
- i. Too long
 - ii. Too Short
 - iii. Normal
3. Did you practically-applied the training (Y/N) If yes how
4. What kind of benefit did you get because of these training?
5. Did you posses any skill before the training (Y/N) if yes specify.
6. Was there any training programme for rural women before SRSP? (Y/N) if yes please specify?
7. Are SRSP personcl are in regular contact with you (Y/N) if yes, after how much time:
8. Do you think IIRD activities have enhanced your income? (Y/N) if yes, what was your monthly household income?
Before (Rs) _____ After (Rs) _____
9. What is your monthly household expenditure?
Before (Rs) _____ After (Rs) _____

MICRO-CREDIT

1. Do you know about SRSP credit programme? (Y/N) if yes, how did you come to know about SRSP credit programme?
- i. Staff
 - ii. Friends/Relative
 - iii. Others
2. Did you get credit? (Y/N)
3. Is there any criteria for taking loan (Y/N) If "yes" please specify.
4. For what purpose did you get loan?
- i.
 - ii.
 - iii.
 - iv.
5. What amount of credit did you get? Rs. _____
6. What is the interest rate Rs. _____
7. Do you consider the amount of loan sufficient for running profitable business (Y/N) if No, how much credit do you need? Rs _____
8. Did you properly utilize credit? (Y/N) If "yes" what type of benefits did you received?
If No, what were the reasons for not utilizing the credit properly?
9. What is the method/procedure of repayment of loan?

10. Are you satisfied with the existing repayment system (Y/N) if "yes" then please specify the penalty?
11. If No, what suggestion you want to incorporate in the existing procedure of repayment.
12. Is there any penalty in case of non payment/delay in the installment?
13. Does the organization give you any grace period for the return of loan (Y/N) if "yes" how much grace period:
 - i. One month
 - ii. Two months
 - iii. Three months
 - iv. More than three months
14. How much was your income level before getting credit?
 - i. 1000-2000
 - ii. 2001-3000
 - iii. 3001-4000
 - iv. 4001 and above
15. Has your income level increased after the utilization of loan (Y/N) if "yes" how much:
 - i. 500-800
 - ii. 801-1200
 - iii. 1201-1500
 - iv. 1501 and 2000
16. What difficulty do/did you face in getting credit?
17. What kind of problems do you face while running your business?
18. Would you please mention some suggestions for the improvement in micro-credit programme of SRSP?

HEALTH, FAMILY PLANNING AND EDUCATION

Health

1. Is any one of the following health facility provided by SRSP/Govt.
 - i. Dispensary
 - ii. B.H.U
 - iii. Rural Health Centre
 - iv. Any other
2. How far are the above centers located from your house?
3. What types of health care facilities are available in the health centre?
 - i. Blood test
 - ii. Urine test
 - iii. X-ray
 - iv. Labour room
 - v. Any other
4. Did you utilize the health facilities provided in these centers (Y/N) if "yes" please specify.
5. Do they charge any fee for any one of the above services? (Y/N) if "yes"
6. How much for different services
7. Is there any female qualified doctor in the health centre (Y/N)
8. Are the following health facilities provided free of cost (Y/N) if No, how much do they charge.
 - i. Medicine
 - ii. Ambulance
 - iii. Any other
9. Is there any training programme imparted to the rural women regarding health care. (Y/N) If "yes" please specify:
10. Do the lady health worker visit your village? (Y/N) if yes
11. How frequently does the lady health worker visit your village?
 - i. Weekly
 - ii. Monthly
 - iii. Any other
12. What type of health care services do they provide?
 - i).
 - ii).
 - iii).

13. Are you satisfied with the health care services provided by SRSP/Govt. (Y/N), if No please specify the reasons.
 i).
 ii).
 iii).
14. Do you have any suggestion for the improvement of health facilities provided by SRSP/GOVT.?
 i).
 ii).
 iii).

Family Planning

1. Is there any family planning centre established by SRSP/Govt (Y/N) if yes when the centre was established _____.
2. Do you visit the family planning centre (Y/N)
3. What type of family planning services are provided by the centre?
 i. Injection ii. Oral pills iii. I.U.D
 iv. Condoms v. Any other
4. Do they charge any fee for these services? (Y/N) if "yes" _____
5. How much do they charge for different types of services.

Sr.No.	Type of Service	Charges (Rs)
1.		
2.		
3.		
4.		
5.		

6. Is any training imparted to women by SRSP/GOVT. (Y/N) if yes please mention different training programme.
 i).
 ii).
 iii).
 iv).
7. Are you satisfied with the existing family planning facilities? (Y/N) If No what problems do you face?
 i).
 ii).
 iii).
 iv).
8. Do the female health care staff visit your village? (Y/N) if yes
9. How frequently do they visit your village?
 i. Weekly ii. Monthly iii. Any other
10. What do you suggest for the improvement of existing family planning services?

Education:

1. Is there any educational facility provided by SRSP/Govt. for female at the village level (Y/N) if yes level of educational facilities?
2. Do you send your female children to the schools (Y/N) if No then where you send your female children?

3. How far is the school located from your house _____.
4. Are you satisfied with the existing facilities available in these schools (Y/N) If No please specify.
5. Do you face any one of the following problems while sending your children to school?
 - i. Non-availability of teacher
 - ii. Transport
 - iii. Fee charges
 - iv. Class rooms
 - v. Accessibility
 - vi. Long distance
 - vii. Any other
6. Are you satisfied with the existing facilities available at the school (Y/N) if No what additional facilities are required at the school
7. Do you have any suggestion for the improvement of women education facilities provided by the govt./SRSP.
8. What is your perception about the following Women Development Programmes introduced by SRSP/Govt. for the betterment of Rural Women?

S. No.	Women Development Programme	Govt.			SRSP		
		Good	Satisfactory	Un-satisfactory	Good	Satisfactory	Un-satisfactory
1.	Women Organization						
2.	Micro Credit						
3.	H.R.D						
4.	Health						
5.	Family Planning						
6.	Education						
7.	Any other						

ANNEXURE 2

Table 13: Statistical Update of Sarhad Rural Support Programme

Parameter	Achievement in District Peshawar
Building of the Social Capital	
Men's community organizations	169
Women's community organizations	83
Total community organizations	252
Gender comparison in formation of community organizations	33%
Clusters	1
Associations	0
Households' Coverage	114919
Total Rural Households of the Regions	
Households organized into MCOs	4139
MCO coverage of the willing rural households	4%
Households organized into WCOs	1428
WCO Coverage of the total rural households	1%
Total members	5567
Overall coverage of social mobilization (Men & Women)	5
Average size of a MCO	24
Average size of a WCO	17
Area Coverage	246
Total No of Villages in the Region	
Total villages contacted	52
Total villages organized	52
Total No of UCs in the Region	92
Total UCs where SRSP programmes has been introduced	8
No of Ucs with below 20% coverage	4
No of Ucs with 20%-35% coverage	2
No of Ucs with 35 to 50% coverage	2
No of Ucs with above 50% Coverage	0
Men's community organizations	82
Well-to-do	

Parameter	Achievement in District Peshawar
Bettor Off	621
Poor	2313
Very poor	1092
Destitute	31
Total	4139
Women's community organizations	
Well-to-do	8
Better off	184
Poor	795
Very poor	435
Destitute	6
Total	1428
Local capital generation	
Savings of Men's community organizations (in million rupees)	0.4106
Savings of Women's community organizations (in million rupees)	0.2632
Total savings of the community organizations (in million rupees)	0.6739
Gender comparison in savings	39%
Average savings of an MCO member (in rupees)	100
Average savings of a WCO member (in rupees)	183
No of WCOs with internal lending	3
Total COs with internal lending	3
MCO Manager's conference	12
No of male participants	580
WCO manager's conferences	5
No of female participants	136
Total conferences	17
Total participants	716
Gender comparison in managers conferences organized	29%
Gender comparison in participants	19%

Parameter	Achievement in District Peshawar
Human Resource Development	
MCO members trained as LEWs	22
Total members trained as LEWs	22
Gender comparison in LEW training	0%
MCO members trained as AEWs	31
Total members trained as AEWs	31
MCO members trained in enterprise/technical skills	53
WCO members trained in enterprise/technical skills	153
Total members trained in enterprise/technical skills	206
Gender comparison in individual skills training	74%
MCO members given activist basic training	162
WCO members given activist basic training	114
Total members given activist basic training	276
Gender comparison in activist basic training	41%
MCO members given LMST training	19
WCO members given LMST training	10
Total members given LMST training	29
Gender comparison in LMST training	34%
MCO members given exposure visits	162
WCO members given exposure visits	40
Total members given exposure visits	202
Gender comparison in exposure visits	20%
Total MCO members trained	449
Total WCO members trained	317
Total members trained	766
Gender comparison in training	41%
PI's initiated in MCOs	117
PI's initiated in WCOs	51
Total PI's Initiated	168
Gender comparison in PI's initiated	30%
PI'S completed in MCOs	91

Parameter	Achievement in District Peshawar
PI'S Completed in WCOs	34
Total PIs competed	125
Gender comparison in PIs competed	27%
MCO Beneficiaries (HHs)	6764
WCO Beneficiaries (HHs)	3822
Total CPI beneficiaries	10586
Gender comparison in PIs beneficiaries	36%
MCOs share	7406904
WCOs share	2872453
Project share	44343984
Total cost (Rs. Mln)	50478205
Average MCO share	63307
Average WCO share	56323
Average project share	263952
Total average cost	300466
Completed PI's as Percent of the total PIs Initiated	74%
Credit disbursement to Men clients	7943000
Credit disbursement of women clients	3325000
Total credit disbursement	11268000
Percentage of disbursement to women clients	30%
No. of clients – Men	571
Coverage of the total MCO organized households	14%
No. of clients – women	328
Coverage of the total WCO organized households	23%
Total Clients	899
Average Loan Size - Men	13911
Average Loan Size – Women	10137
Average Loan Size –Overall	12534
Principal amount due – against men clients	9031848
Principal amount due – against women clients	3642513

Parameter	Achievement in District Peshawar
Total due amount (Principal Only)	12674361
Principal amount recovered – men clients	8156373
Principal amount recovered – women clients	3625885
Total amount recovered (Principal Only)	11782258
Cumulative credit recovery rate – men	90.31%
Cumulative credit recovery rate – women	99.54%
Cumulative credit recovery rate – overall	93.0%
Credit recovery rate – women	82.08%
Credit recovery rate – overall	9.75%
In men's community organizations	59
In women's community organizations	117
Total demonstrations	176
Gender comparison demonstrations	66%
Female trained in Health and Hygiene education	110
Male trained in Health and Hygiene education	80
Health Field Days Held	20
No of Beneficiaries	300
Medical comps held	4
No of beneficiaries	60