



# STORIES FROM THE FIELD

# STORIES FROM THE FIELD - 2022

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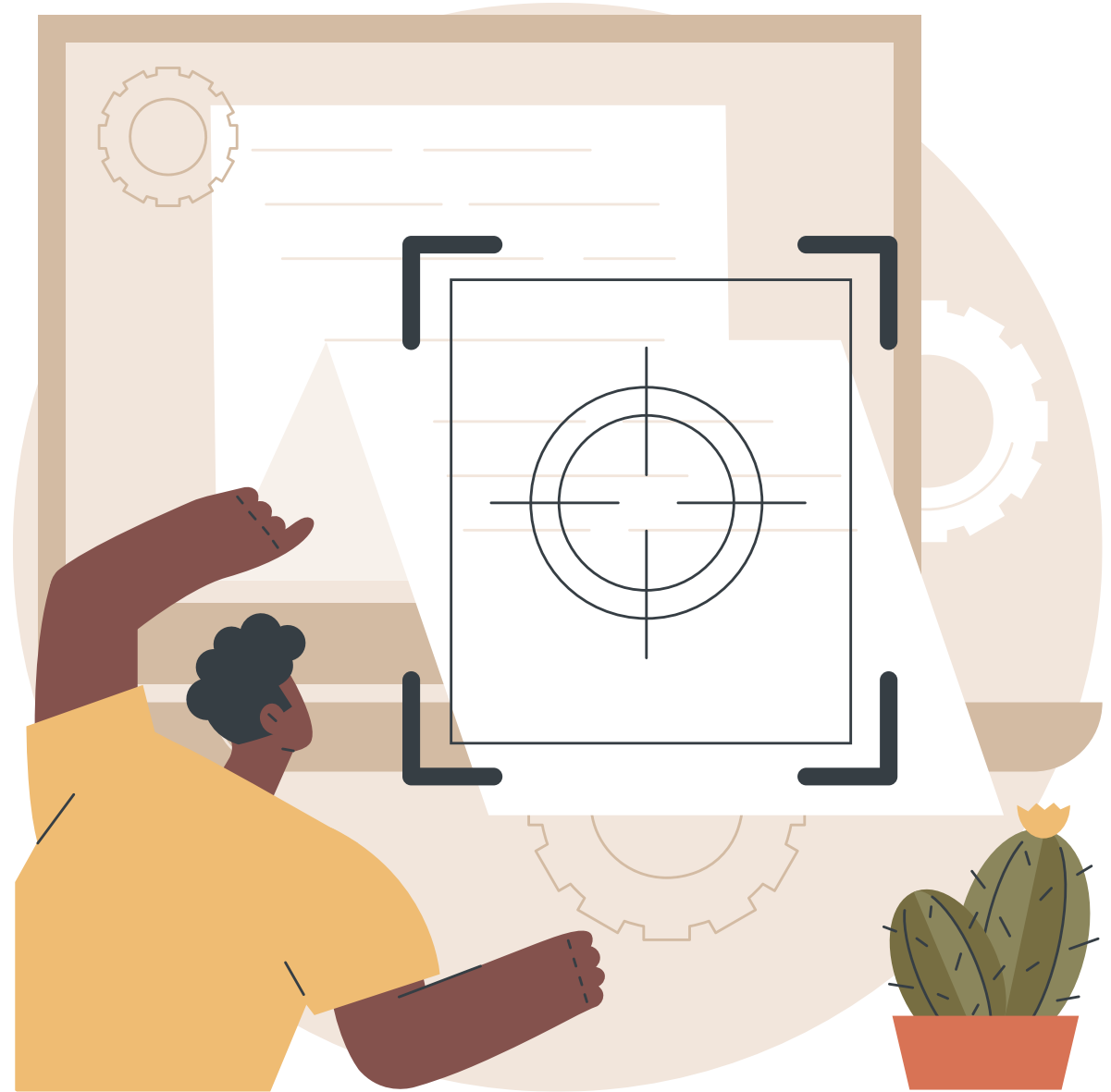
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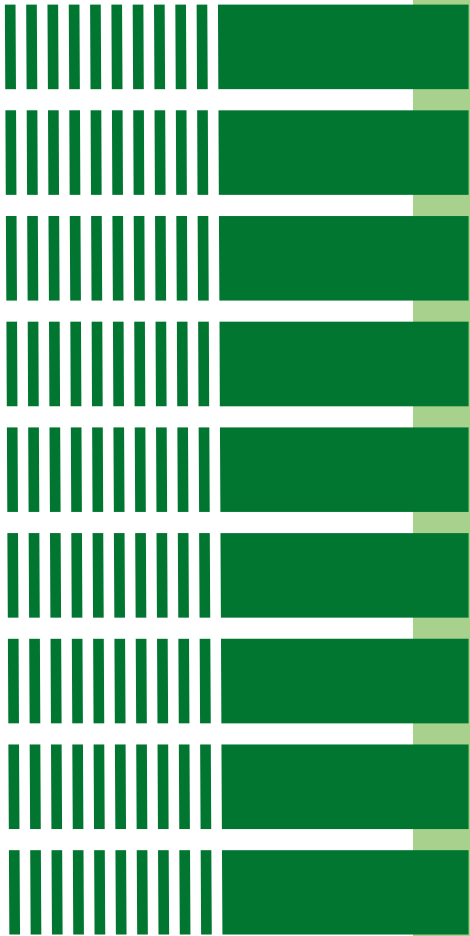
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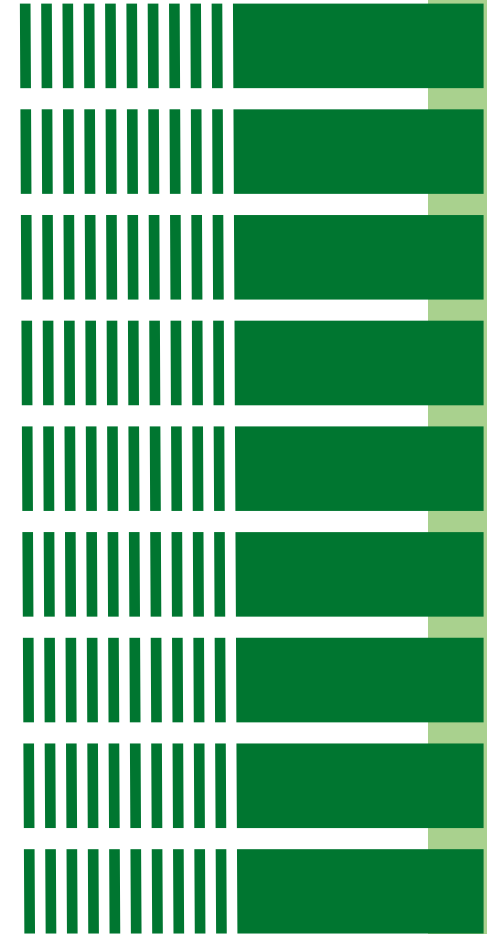


# ABOUT PHF

Pakistan Humanitarian Forum envision a society where all communities have access to effective assistance and services, through strengthened collaboration between the government, national civil society, and the international community. PHF is coordination forum of more than forty International non-governmental INGOs working in Pakistan, serving as a central collection point for relevant emerging information-through connection with broad sector of humanitarian community and standing seat at UN and government coordination fora at the national and provincial level. PHF was established as an independent forum in 2003, to represent, facilitate and support humanitarian assistance and long-term development programme initiatives of its member working in Pakistan.

# MEMBER ORGANIZATIONS

PHF has a membership of 35 International NGOs working to deliver humanitarian assistance and long-term development programming in Pakistan. PHF member work in areas of health, poverty reduction, education, water, sanitation and hygiene, climate change, disaster risk reduction/management, agriculture, food and shelter across Pakistan.





# Education



# EDUCATING A GIRL MEANS EDUCATING A GENERATION

## A story of Sana who is changing her life with her education skills and wisdom



The village Hafiz Muhammad Bux Malik is in Taluka Tangwani, District Saedkot, Sindh whose majority population consists of daily wages and farming. Housing a small population and far from the comparatively developed and larger areas, the village has a distinct shortage for government schools for girls. To respond to this situation, ACTED, together with Foreign Commonwealth and Development Office, is implementing a 4-year integrated education programme called the Leave No Girl Behind (LNGB) Programme. The programme aims to simultaneously address physical, quality-related, socio-cultural, family/community level and system-level barriers for girls in getting access to education.

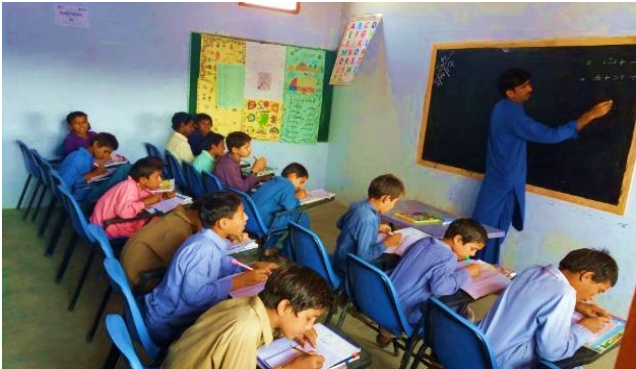
Sana, an eighteen-year-old girl, residing in the remote village Hafiz Muhammad Bux Malik, had never been to school. She lives with her father, mother and two brothers. Her father worked as a teacher at a nearby government boys' school, where both her brothers go to school as well. However, the area does not have a school for girls. Despite her eagerness to study and acquire basic education, Sana's parents did not allow her to travel to another village to attend school citing security risks as the reason for their disapproval.

They were also apprehensive of social backlash on sending their daughter to school at an age that is considered appropriate for marriage in their community



ACTED's community mobilisers visited her home to inform them about a learning center opening soon for girls in their village. However, Sana's parents were still worried: What if she is attacked by dogs? Who will ensure she is safe at the center? Who will marry her if she starts going out for school now? These questions arose from the deep-rooted notions that girls should not be leaving their home, especially not for something as insignificant as education to them. It took multiple discussions with the team and the community mobilisers who reassured the parents about the different security measures to ensure the safety of all girls who attend the center. They were also able to convince them regarding the importance of education for all, both girls and boys, to lead a meaningful and fulfilling life.

They also assured her parents that gaining education will not reduce Sana's chances of finding a suitable marriage match. Through strong community mobilization efforts, Sana was able to enroll in the eight-month Literacy and Numeracy Course at the LNGB center which focuses on providing basic literacy and numeracy skills to girls aged between 14 and 19 years old. Being at the center and being able to learn has changed Sana's view of herself and her world.

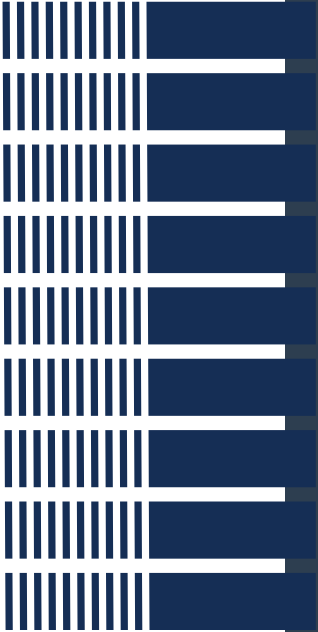


She is now much confident and helping her parents and siblings in many things. When she accompanies her parents or siblings to the market, she can read and check the prices. One day she caught a shopkeeper quoting a higher price while on a shopping trip with her father and brother; this left her family thoroughly impressed with her newly gained skills.

“

***“For the first time, I can now write my name and can tell appropriate time on clock. I never thought that my parents would rely on me and take me along for grocery trips, but it comes as a happy surprise”, exclaimed Sana***

”



## ACCESS TO QUALITY EDUCATION TRANSFORM LIFE

*A story of Bilal whose life was totally transformed after educational support provided by HHRD*



Muhammad Bilal Khan belongs to the town of Thatti in Mianwali. He is only brother of three sisters. His father worked as miner and died in 2001 while digging a mine. It was very difficult time for his family, as his father was the sole breadwinner at home. His mother encouraged her children and started paying attention to their studies, especially on Muhammad Bilal Khan because he is the only support for his family.

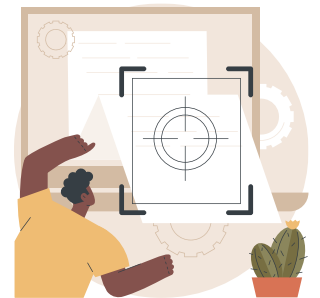
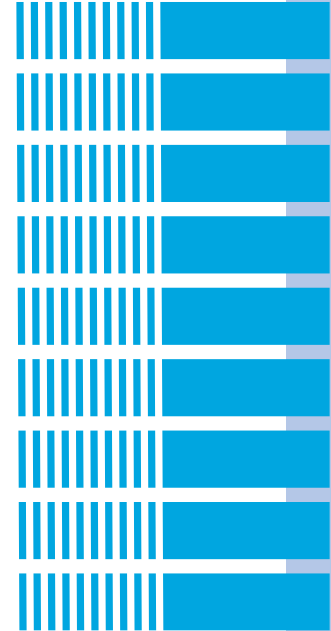
He enrolled in HHRD-OSP sponsor children in 2014 then he received food packages and cash amount which was helpful for Muhammad Bilal. He was very happy when HHRD team ensured they will help him to continue his education. He was very talented student and actively participated in HHRD activities as volunteer. He passed 8th class examination and got the first position with 405 marks. After that he also got the first position in matriculation and continued his education in 2017, he passed FSC with 725 marks.

Muhammad Bilal Khan applied to the Punjab Police and got selected in it. Recently Muhammad Bilal Khan got prominent position in the first training of Punjab Police. He is now serving in his district with full zeal.

“

***I am very thankful to HHRD and donor. My mother and I always pray for donors and helping hands that they support us in difficult times. May God increase their success, Amen***

”



# RESTORING HOPE AND BRIGHTEN UP THE WAYS OF YOUNG AFGHAN REFUGEES BY PROVIDING EDUCATION OPPORTUNITIES

*Opportunity brought happiness and joy in Nahida and Usman life*



Nahida bibi, an Afghan refugee lives in Mohalla Sheikhan in Peshawar. Nahida Bibi lost her hope to educate her 10 years old son Usman. Born a healthy child, Usman suffered Duchenne Muscular Dystrophy (DMD) and lost his ability to walk at the age of three. As Usman grew older it was not possible for Nahida bibi to carry her son to the school more than two kilometers away. She also doesn't have any transport to take her son school early morning and pick him in daytime.

Usman crawls into the street every morning and watched his age mates going to school in the morning. His keen desire was to go to school like other kids and to enjoy normal life. Nahida Bibi remained worried all the time by looking at her son condition.

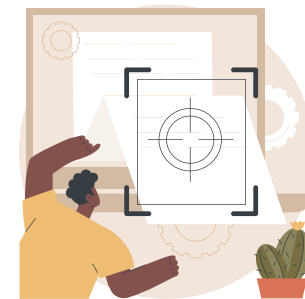
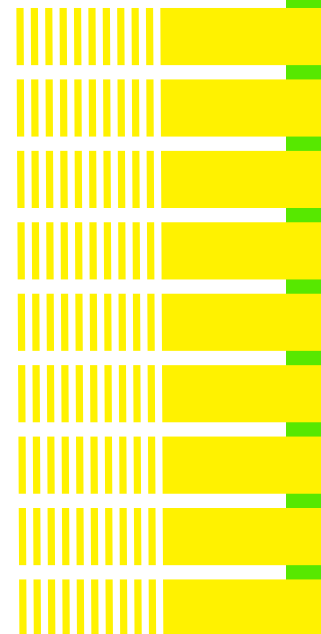
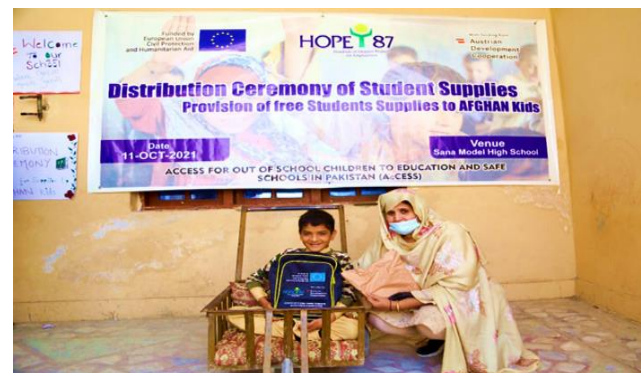
HOPE'87 under its ACCESS project has started to enroll out-of-school children of Afghan origin in low-cost private schools in district Peshawar through an education voucher scheme. Nahida Bibi was excited to hear about the education voucher scheme for out-of-school Afghan children. She borrowed a pushcart used for goods transportation from a neighbor and brought Usman to the HOPE'87 partner school.

Under this initiative, HOPE'87 reached out to 1,200 Afghan children and provided them with school fees vouchers that are redeemable by the families at a partner low-cost private school. In addition, the children also received free books, school bags, and school uniforms. Through this initiative, HOPE'87 became a beacon of hope for Usman and other out-of-school Afghan children, as they have a right to get a quality education and follow their dreams.

HOPE'87 offered to enroll these kids in private schools near their homes through an education voucher scheme so they can pursue their goals for education and a better future. A wheelchair was also arranged for Usman to overcome the mobility problem.

Usman along with 89 other Afghan kids, 45 girls, and 44 boys got admission to SANA Model School in district Peshawar through an education voucher scheme. Usman is going to school regularly and is very happy and excited to have found a new life.

**“I love coming to this school and making new friends”, said Usman. He is very happy and is pursuing his dreams now. Nahida BiBi sums up her gratitude to HOPE'87 and its donors “the future of my son isn't dark anymore!”.**



## PROVIDING ACCESS TO QUALITY EDUCATION AT DOORSTEP

### *A story of Marwa and other children who got access to quality education on their doorstep*

Wali Khan had a sinking feeling every day on his return home after work as daily wage labourer. Wali Khan, an Afghan refugee from the Kochian tribe lives near Nahaqi in Charsadda district with his wife and children. The war in their home country and resulting displacement had robbed them of their chance for education. Now he along with his wife would despair about the lack of education for his children, including his daughters.

The nearest Government school was too far for his children, especially girls to go alone. In addition, Wali and his wife worried about the other expenses of education such as uniforms, school bags, and other supplies etc. The eldest daughter, 10 years old Marwa always ask several questions to her mother for her right to quality education.

By realizing the situation, HOPE' 87 opened temporary learning centers (TLC) in close vicinity of those children who hardly have any access to school. The TLC opened its doors to students on 1st November 2021. The TLC is a ray of hope for Marwa and her parents and other children like her who find themselves in similar circumstances. A total of 96 children (59 girls and 37 boys) receives free education together with schoolbooks, school bags and school supplies at TLC.

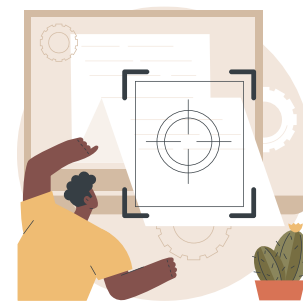
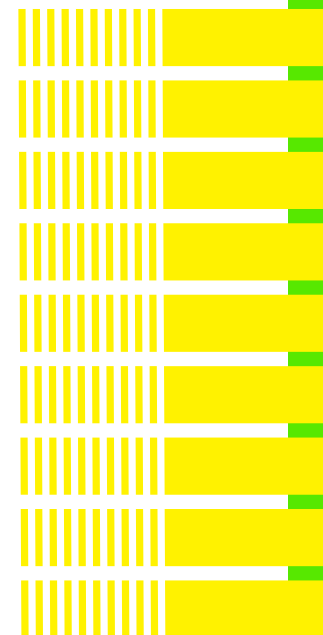
HOPE'87 is helping to ensure thousands of children like Marwa to receive education as part of the ACCESS project in Khyber Pakhtunkhwa province. This has been made possible with the generous support of European Civil Protection and Humanitarian Aid Office (ECHO) and Austrian Development Cooperation (ADC).



“

***“All my friends come here, we study together and learn new things”, said Marwa who is excited to start school and has not missed a single day. With teary eyes, Wali Jan and his wife express their gratitude “We are very grateful to HOPE’87 and the donors for giving out children an opportunity for a future better than our own”.***

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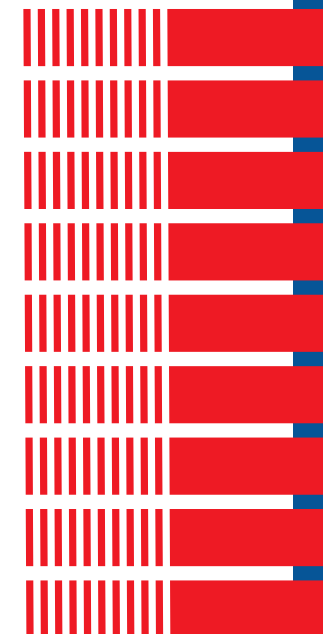
## *Providing education opportunities to young Afghan girls at their doorstep*



Laiba, Nazia, Salma and Sania, Afghan refugees between the ages of 7 and 8, were unable to go to school in Pakistan. Now through an ongoing RI program aimed at creating more equitable access to education, all four are excelling at their local primary school.

There are an estimated 2.5 million Afghan refugees residing in Pakistan including all registered refugees, undocumented refugees, and citizen cardholders. Most of these refugees have fled violence and terror in the hopes of finding safety and a higher standard of living. The reality is often more difficult. Finding work in Pakistan is very hard for Afghan refugees, leaving many adults with menial jobs making small wages and struggling to cover the costs of shelter, food, and support for their families. For approximately 300,000 primary school aged (5-11 years) child refugees in the country it is also hard, with the majority unable to access local schools for education. This was the case for Laiba, Nazia, Salma and Sania; four cousins between the ages of 8 and 9 whose families live and work together in the Peshawar region of the country.

Afghan families often do not have the money or institutional knowledge to navigate the educational system in their new country alone, frequently resulting in their children missing out the chance of going to school. Relief International is changing this norm in Peshawar, Nowshera and Swabi regions of Pakistan through an innovative program that aims to create more equitable access for Afghan children in Pakistani government primary schools.



***“We were having less opportunities... for our children in Pakistani Schools”  
states Najeeba, mother of Salma & Sania.***



## Providing education opportunities to young Afghan girls at their doorstep

The project involves enrollment campaigns where RI staff teach the local Afghan community about the enrollment process for schools; a school readiness program where children can go to “catch-up” educationally to their peers already attending school at no cost to their families; and a mainstreaming process where the Afghan children then join the Pakistani school fully, taking classes with other children their age.

Between 2019 and 2021, 1341 boys and 1690 girls have taken part in the program in 70 schools throughout the regions.

Laiba, Nazia, Salma and Sania all took part in the program, beginning with RI’s staff going to their family homes to discuss educational opportunities for the girls. “[RI Staff] came to our house and had a detailed meeting with us about our daughter’s right to education,” states Najeeba. After numerous conversations with their parents, all four girls were enrolled in the school readiness program.

“A few days after admission in school, I observed a very positive change in my daughter’s behavior,” states Rozeena, Laiba and Nazia’s mother.

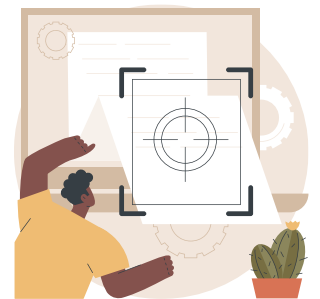
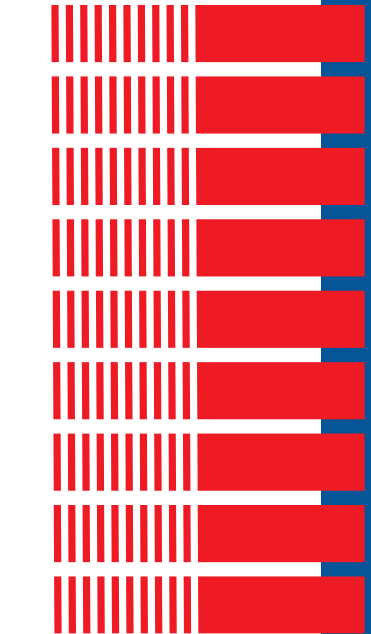
“They exhibited good manners and a polite attitude towards us and their brothers and are helping in domestic work after they return from school,” Rozeena continues. All four girls excelled in the school readiness program and were then mainstreamed into the local school. “When I conducted a proper assessment of the girls [during the mainstreaming process], I found them to be outstanding and .... promoted them [one step ahead] to Grade One instead of Nursery” states Ms. Tamseela, Head teacher at the Government Girls Primary School in Pawaka.

Najeeba and Rozeena are incredibly proud of their daughters’ success.

***“We will [continue to] send our daughters to school because we know that the education will contribute to their futures.”***



***“A few days after admission in school, I observed a very positive change in my daughter’s behavior,” states Rozeena, Laiba and Nazia’s mother.***



# ACCESS TO QUALITY EDUCATION IS A RAY OF HOPE FOR MANY GIRLS

## *A story of Kareema who was determined to continue her education after marriage*



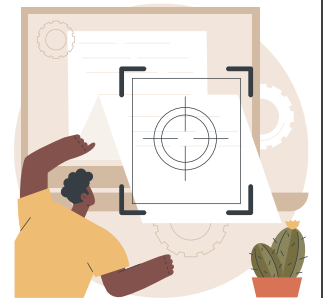
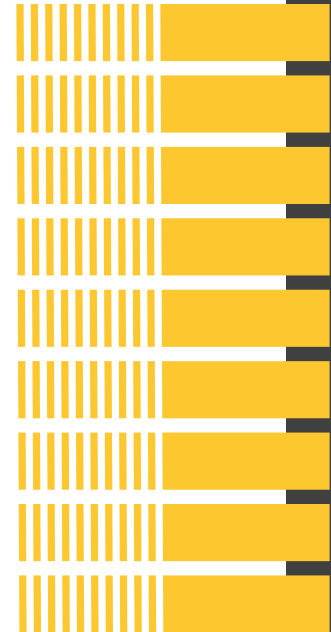
Brick walls plastered with mud make up most structures of District Nushki. In a small village of the district, two men stack bricks vertically, creating a magnified version of Jenga and tie it with rope. Then each lifts the stack and places it on his back. As each stack arches with the person's backbone, they walk with their slouched postures to drop it off at the nearby construction site. With the rein of unemployment and resulting increase in poverty, laborers are a rare sight. Structures are not frequently constructed, and jobs are seldom available. Like most households, Kareema's husband waits at home, without a job, surviving only on his parent's meagre inheritance, barely making ends meet.

Kareema was 14 years old when she was forced to drop out of school and get married off to her husband. She was in the second grade and had a love for learning.

***'No one asked me. If your parents want you to get married, you get married,' shares Kareema.***

She has six other siblings, four sisters and two brothers, all of whom attend government school, which is close to their residence. Being a married woman, she did not have the luxury to opt for the same route for her education and was mostly busy juggling household chores with whatever money she got from her husband.

It was after months of relying on her husband for her expenses and a deplorable financial outlook that Kareema finally decided to take things on her own. She heard of the TEACH home-based learning center through some women in the community and enrolled in the Girls Earn Stream. This time she was not alone, she took her sister-in-law along. Kareema's mother and father-in-law both had passed away earlier, leaving her husband and his siblings to fend for themselves. Kareema's sister-in-law is a tall, frail figure, who battles with health conditions as she took the role of head of the family after her parents' death. Kareema saw her condition and realized that she too needed to step out of the house and learn. The decision to pursue her education did not come without resistance from her husband. Even while being unemployed, men of the household hold the power to make the final voice. Kareema's husband had his own concerns. Who would take care of the household, who would be responsible for cooking and cleaning and who would be there to manage his siblings?



# INTERNATIONAL RESCUE COMMITTEE

## Continuing her Education after marriage

All questions were valid in a patriarchal household and Kareema was not naïve enough to believe that she could forego her responsibilities as a wife. She decided to divide her chores and responsibilities and chalked a schedule that would help her keep a balance between studies and responsibilities. With exceptional multi-tasking abilities and the resolve to continue her learning, Kareema manages her household and attends all her classes. The fact that the center is near her house, was a major reason why her husband agreed..

***'I had to pursue my education because I already had missed an opportunity before due to my marriage but now, I want to complete this course', expressed Kareema.***

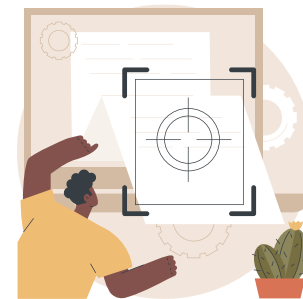
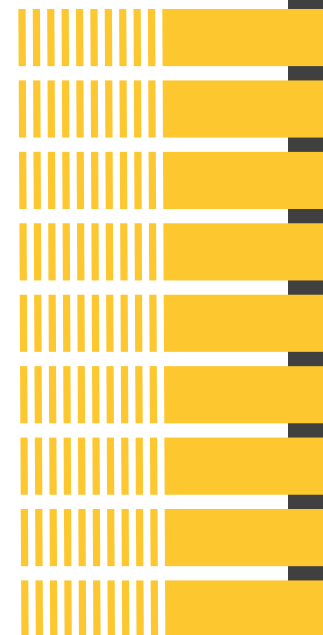
Kareema believes that getting education will help her better manage her household and help her husband with finding a job. More than that, Kareema believes that education has far-reaching benefits, which surpass income generation.

***'Education teaches you the difference between right and wrong. I am so happy in this center, as I have made new friends. I can now manage basic calculations. There's a huge difference in my learning', shares Kareema.***

As Kareema and her sister-in-law visit the TEACH center every day, they are met with the hope that their condition will improve. They sit on mats, leaning in to listen attentively to their teacher, hoping to get a glimpse of a world beyond this village in Nushki.

IRC's Teach and Educate Adolescent girls with Community Help (TEACH) project, funded by FCDO and in partnership with Tameer-e-Khalaq Foundation, Developments in Literacy and Balochistan Education Foundation, aims to support out-of-school girls in Pakistan's Balochistan province. Depending on age, the girls will enroll in one of two pathways; focused on an accelerated learning program (ALP) and transition to formal or non-formal education for younger girls, or a more employment skills-based approach for older girls who would then transition into vocational training, employment, or self-employment. The project also intends to challenge social norms and barriers faced by girls in accessing education with the active engagement of girls in all activities at family, community, school, and system-levels through targeted activities.

Balochistan traditionally ranks low in education indicators in Pakistan, where the Net Enrollment Rates (NER) for boys and girls at all levels are at least 10% lower than the national average. The NER for girls at primary level (age 6-10 years) is 33% in rural Balochistan and drops to 7% at the middle school level. This disparity in education between boys and girls and girls in Balochistan with girls in other provinces is why TEACH based its intervention in Balochistan.



# DISCOURAGING CHILD LABOUR AND PRIORITIZING EDUCATION

*A story of Zara who started her school after the strong efforts of Muslim Hands*



Zara Allah Ditta is the daughter of Mr. Allah Ditta lives in Kot Yousaf village Qila Sangian. She belongs to a very poor family and her father works in the fields as some time ago he borrowed a loan from a landlord, and he was unable to pay it- As a result he works as bonded labor. She had not any younger brother. She always desired to go to school instead of doing some labor work which she has to do to meet the expenses of her family.

One day, a teacher of GGPS Qila Sangian who lived in her village asked her about the reason for working rather than getting education. She told her a brief scenario of my home. She smiled and said, "don't worry Inshallah you will go to school in few days". She never thought that her dream will come true, but she was confident that the day must come in her life when she will go to school. On the very next day, one head teacher (Momina Saleem) along with one teacher went to her home and met with her parents and tried to convince them about my schooling, she was listing their conversation behind the curtain and prayed a lot to Allah. Her parents refused in straight away to the Muslim Hand team. She was crying after the refusal of her parents at the same time. Then MH team promised her that they will convince her parents and her dream to join school will be fulfilled.

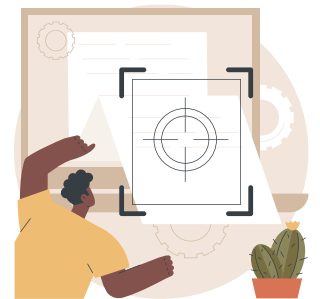
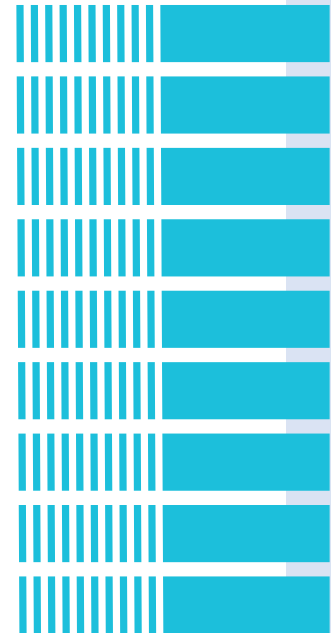
After some days the Muslim Hands team comes again and tried to convince her parents, but they refused their proposal by saying them that they haven't enough money to bear the study expenses. Our daughter works all day in fields and farms and earns some money and fulfills our needs. At that time she was not depressed but she was very confident that the team of Muslim Hand will convince her parents. The day arrived when Muslim Hand 's team convinced her parents.



“

***“Now I am very happy and going to school regularly. I will always pray for the Muslim Hands team especially teacher “Momina Saleem”. I have no word to say anything but just thankful for them from the core of my heart “I like and feel very happy wearing school uniform” said Zara.***

”



## COLLECTIVE EFFORTS AT ALL LEVELS FOR QUALITY EDUCATION

### *A story of Aabia who raised her voice high for any hurdle that hinder her to acquire quality education*

Aabia comes from a rural village Shandawi in tribal district Kurram. She is twelve. She has three brothers and four sisters. She is enrolled in grade seven in the Girls Middle School in her village. Her school is the only one in the area. So, girls from other small hamlets and localities come to attend. Her father runs a small shop in the village. They are a middle-class family. They have a small market in the village where they can purchase grocery. They don't have hospital in the area. So, they come to the tehsil town Sadda or Parachinar to access general health facilities or education beyond elementary level.

Her school is situated down the mountain slope. There are few agriculture fields and a road upward her school. People of her village especially men work in the fields and utilize the road for transportation to the main town of Sadda for routine tasks.

Aabia participated in Jen project titled "Provision of WASH facilities to returnees in Upper and Central Kurram areas of Tribal District Kurram, KP Province". She has got a high intellect. She says "Education is very much important in my life. Because, educated people can help and support others in an effective way." Having this passion in mind, she wishes to get higher education.

But a strange thing stops her from going to school any more. Less height of school's boundary wall. As her school is situated down the mountain slope. So, she is visible inside the school premises from the agricultural fields and road upward the mountainous terrain. Where men normally work or cross the road. This is simply not acceptable to her parents. So, they quit her education.

During the time, JEN was reconstructing toilets and water supply scheme in her school when Aabia's head mistress informed the situation to JEN team. She informed about the dropping number of girls students from seventh grade on-ward due to the problem of shorter boundary wall. The head mistress informed JEN team about the cultural barriers that are stopping girl's student while getting access to quality education. As, their "pardah" is not ensured in the school premises due to its downward location.

JEN team realized the nature of the problem and communicated it to the headquarter. As the project activity was not planned so JEN raised new funding from private donors in Japan. And after two months, JEN started work on the boundary wall and raised its height to an appropriate level.

JEN did not only raise the height of the boundary wall but also installed playing equipment in the play area of the school like sea saw and badminton equipment. JEN also set up a library and equipped it with range of books and furniture. So that Aabia and her class fellows could enhance their intellect. Which is as Aabia says is critical for achieving life goals.

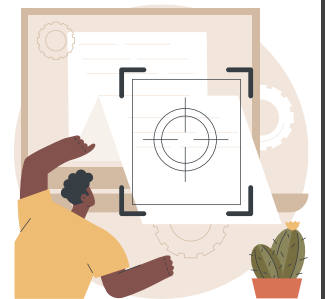
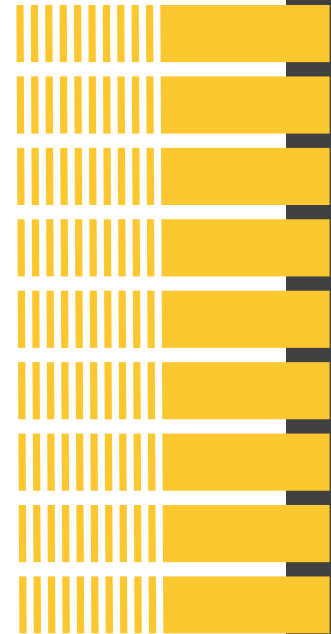
Now, she and her friends are no more visible from the upward fields and road. And they feel safe and comfortable inside the premises of the school. Aabia has rejoined the school as well as her other dropout girls' fellows.

After the project, JEN team interviewed Aabia and she told

***"I was depressed to quit education and lose my friends as we were forced by our families. So, we had to stop attending the school in the past due to non-availability of proper boundary wall. We were visible from outside due to its less height. With the new construction, we can now play sports and walk around freely. We have now a secure environment and our privacy is ensured. Besides, I am very excited to have new books in our newfound library. I am very fond of reading. The books have a diverse range and suddenly I am feeling so rich. I have plan to study so many books of my interest to learn new ideas and skills."***

JEN also interviewed Aabia's headmistress. The headmistress shared "It was like a dream come true. Suddenly our school has transformed into a completely new shape. The school has now a protected environment. JEN has provided playground equipment and sports items. More importantly, JEN provided us books for library. Not only students but teachers can also read those books. I am very keen to read those books.

As a teacher I am relieved to see smile and happiness on the faces of my students. The area was affected by the conflict in the past and these little children saw bad times in their childhood which was very unfortunate. Now seeing them playing their favorite sports and reading nice stories is a blessing. These extracurricular activities will put positive impact on their behavior. And I expect a very good increase in the enrolment next year".





# Economic Empowerment

# DAILY WAGE WORKER TO A SEASONAL ENTREPRENEUR

## *A story of Saad who set an example for the youngster in his area*

Agriculture is the main source of income for most of the rural population in Pakistan. Most of the time, people in villages can't totally rely on agriculture as due to rising inflation and climate impact on crops production. The similar kind of situation was faced by Saad and his family. Saad shared his story of transformation from a little helper of his mother to a seasonal entrepreneur. Saad comes from a poor family of 10 people living in village Natho Rind, Union Council Seerani, District Badin. His father lost his leg to gangrene when Saad was in fourth grade.

The financial crisis and deteriorating health condition of his father forced Saad to leave school and join his mother in the field. From a very tender age, he started working with his mother in fields of a local landlord. The daily minimum wage was not enough to feed the family of 10. As a livelihood transition strategy, he then decided to drive neighbour's Rickshaw to earn more. Following the family tradition, his parents got him wed at a very early age when he used to earn Rs. 100-150 a day.

Now that he got married and has children, the income is not enough to make ends meet. ACTED implemented the Adolescents & Adults Learning & Training Program. It aims to provide accelerated non-formal primary education for vulnerable adolescents and basic functional literacy for adults. The program also provides a certified Skill Development or Vocational Training course for each learner. ACTED is implementing this initiative with Sindh Education Foundation's in Badin and Kashmore. The initiative is specifically for those adolescents and adults who have missed or have never been to school earlier.

Saad also got acquainted of this initiative of ACTED and enrolled himself in evening classes in Serani Centre and completed the basic literacy course. He then opted for mobile repairing training in the TVET programme. Thanks to the mobile repairing skills and kit, he received at the end of his training, he partnered with a local mobile shop in Seerani city. The owner of the shop sells mobile sets and accessories and employed Saad as his assistant. Saad started repairing damaged mobile sets as a value addition to the owner's business. In turn, the business started giving additional profit so does Saad's income.

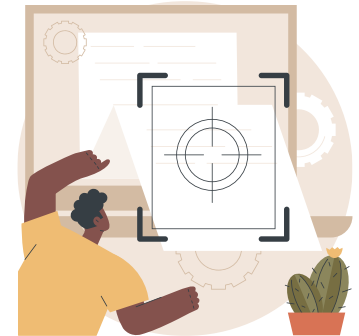
Saad has now opened a small convenience store for his father in his village, where his father does not only spend good social life as well as earns a little for the family. Saad was also able to raise enough money to install a solar panel in his house as well as support his younger brother's education.

He is thankful to ACTED-SEF for AALTP program, through which many young boys and girls got the opportunity to get an education and technical pieces of training which was impossible in the usual circumstances and these learners are earning from the skills they were taught in TVET centres.

“

Saad says, ***“I am now a role model for the youth of my village, I have not only established my enterprise but also engaged my father in a karyana shop (convenient store) who was hopeless for his future life”.***

”



## PROVIDING ACCESS TO CLEAN DRINKING WATER AND ENSURING HEALTHY LIVING

*A story of Fauzia who got relief upon provision of water filter*



Fauzia lives in Sargodha, Punjab. She is the mother of 4 children and her husband works in medical store and earns around PKR 15000 per month. Fauzia faced several issues related to children health as she spends much of her husband income on medical check-ups of her children. She also suffered from tough time when her children were too sick, and she hardly had enough money to bear their health expenses.

"Those were very difficult days for us as we were quite stressed and faced severe financial problems at home" said Fauzia. She further mentioned, my children used to drink bore water which contains sand and soil particles. The doctor often told us that we should change our water or use boiled water for drinking. But it was not possible for me to follow his directions due to severe mental stress and financial issues.

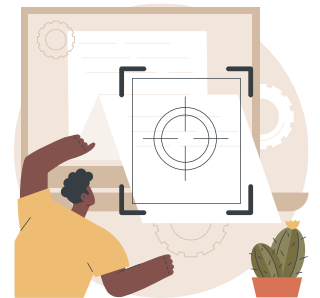
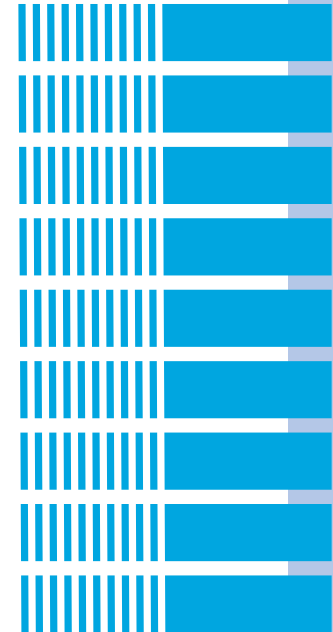
"We were relieved, when Helping Hand for Relief and Development realized the situation and provided us with water filter in December-2020, shared Fauzia". They also guided us in detail on the use of water filter. Now we are regularly using water filter, and this help in reducing the stomach pain of our children.

We are glad as our children are healthy due to safe drinking water and we are now better saving our income and utilizing on some other expenses. We highly appreciate support and striking intervention of HHRD by providing the means for safe drinking water and its over all impact on healthy living.

“

***"We were relieved, when Helping Hand for Relief and Development realized the situation and provided us with water filter in December-2020, shared Fauzia".***

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## EMPOWERING WOMEN BY ENHANCING THEIR SKILLS

### *A story of Irum who made her own way*

Irum Khokar aged 32 is a widow and mother of one boy. She lives in a rented house in Rawalpindi. Wearing a traditional attire shalwar qameez with a gown, Irum lives with her sister and an ailing mother. Her husband passed away after two years of marriage and life has not been easy for Irum since that day.

***“When my husband passed away, I couldn’t get out of the shock of the event for a very long period of time.”***

After becoming a widow, her in-laws refused to let her live with them and asked her to leave. Irum was left out with fewer options, and she started living with her mother and sister. Irum’s son got enrolled with Islamic Relief’s Orphan Sponsorship Programme and this helped her with managing other expenses, but she had plans to go an extra mile and work harder to create a better future for her son.

***“I always thought of giving a better life to my son. For which I was determined and kept looking out for opportunities.”***

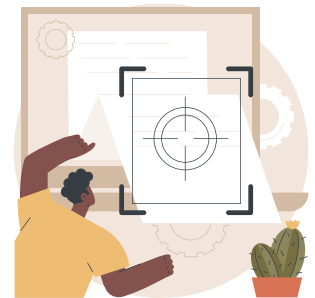
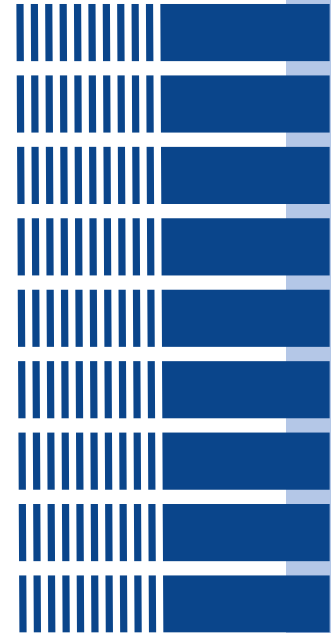
After coming across Islamic Relief’s Empowering Widows in Need project, Irum got a chance to attain a new skill of Cooking and Baking through a training by renowned chefs. This was a turning point for Irum as she was already thinking of starting her own small-scale business. One day sitting at home she saw the abandoned rickshaw of her brother.

***“It was like a bolt from the blue, I immediately decided to convert the rickshaw into a food cart. I had a feeling that I can do it and make this work. At first it was being opposed by my family and others but being weak was not an option.”***

On one of the busiest roads of Rawalpindi, she set up her food cart.

***“The response was amazing. People liked the taste of home cooked food. I am proud of myself.”***

Hundreds of others like Irum are taking control of their lives through Empowering Widows in Need project that is giving them skills for life.



## BREAKING GENDER STEREOTYPES- SETTING AN EXAMPLE BY TAKING BOLD MOVES

*A story of Fakhra who didn't give up and stood up for her family*



Female-headed households are among the vulnerable groups of society, sometimes factors such as divorce, death, husband addiction, husband disability, abandonment by immigrant men or whimsy; it is vulnerable to a whole range of society. This group of women as "female-headed households or" self-headed" must face difficulties and many obstacles in life.

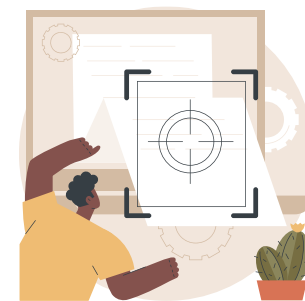
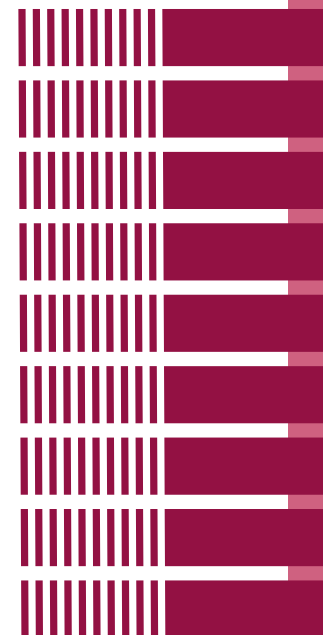
Fakhra Bibi (40 years old) belonging to a small town of Shorkot in Jhang district with a family of 4 members including disabled husband and 2 daughters. Her husband is suffering from disability and chronic heart disease. Couple of years ago she established Kryana (general grocery) Shop which was possible through her saved money. In March 2020, the government imposed a nationwide lockdown by closing shops, markets, shopping centers, and offices in a desperate move to curb surging COVID-19 cases. Lockdown effected laborers, small businessmen, and the public. Due to the lockdown, there has been an enormous economic impact on startups and small businesses in Pakistan. In this situation Qatar Charity initiated income generation activities for the support of ultra-poor families. Qatar Charity identified Fakhra Bibi and supported her through livelihoods income generation project and provided her with necessary grocery items. Fakhira Bibi is a woman responsible to head her family. Along with livelihood support, Qatar Charity imparted her with necessary training and guidance. As a result, now Fakhra Bibi is successfully running Kiryana shop at home. Her average earning is Rs 15000 thousand per month.

She expressed "when women and girls are empowered and have equal access to economic opportunities, poverty decreases, and communities flourish." As she chose to travel a path less travelled by the people in her village "People used to be amazed in start, but now they have become familiar and many women aspire to join different non-traditional professions and men don't object," she said.

“

***I want to educate my children and grateful to the Qatar charity for support. Now I cannot only support my family but to provide education to my children. I am earning enough and can bear the expenses of my children's studies and husband medical treatment. Initially, she used to earn Rs 3,000 per month, but after the support of Qatar Charity, she earns around Rs7,000 per month. "My profits doubled just by Qatar Charity Support," she said with confidence.***

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## ENHANCING SKILLS TO EMPOWER WOMEN ECONOMICALLY

### *A story of Kalsoom who changed her fate by acquiring skills*

As part of the Covid-19 response, Care International in Pakistan implemented the ECHO funded project in three COVID-19 affected tehsils in the district of Swat. The Covid-19 pandemic had left a dire economic situation in marginalized communities in the district and impacted daily wagers, transporters, and shopkeepers. CIP and its partners in Swat district conducted village and community mobilization activities and organized vocational training workshops on sanitizer and soap making.

Due to the mobilization and awareness building efforts of the CIP teams, Kalsoom, a 21-year-old female belonging to the village of Baidara became aware of the vocational training workshops being conducted in her village. Kalsoom's family had been greatly impacted by the adverse economic effects of the pandemic. She lived with her parents and five brothers in a rented house. Her father being the sole breadwinner of the house earned daily wages as a laborer in the village. Because of lack of work and opportunities, the family was forced to cut their expenses to a bare minimum. Kalsoom had to drop out from school as a result but her interest in education remained strong.

Kalsoom showed great interest in the integrated awareness sessions and requested to be included in soap and sanitizer making training. She had a clear goal to start her own business in order to support her families' financial needs as well as to support her community in fighting against the virus.

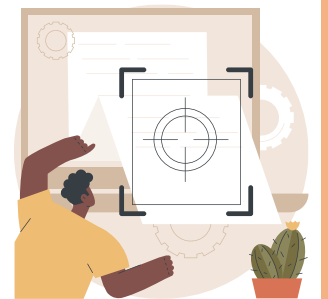
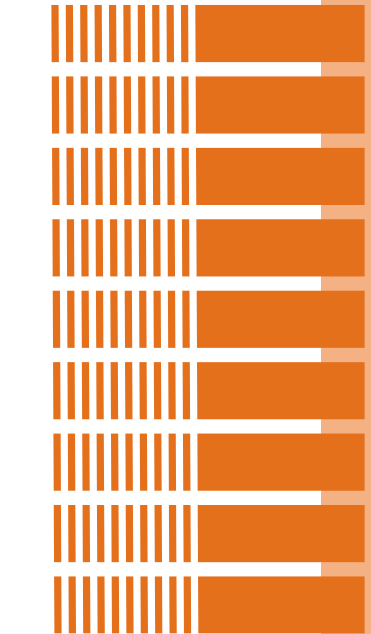
Kalsoom was a quick learner and immediately picked up skills from the vocational training sessions and started experimenting in creating homemade soaps. The trainers provided her with raw material packages of soap and detergent and taught her soap making procedures as well as how to keep herself safe. After acquiring the necessary skills, Kalsoom also expressed her desire to share her learnings with other girls and women in her village in order to uplift her village and community economically.

"It has been a tremendous support to my family, we were unable to buy the raw materials on our own and I am so proud that I have acquired a skill that can help my family financially".

Kalsoom now sells low-cost homemade soaps in her village and can earn up to 300/PKR a day. She mentioned that this earning has allowed her to resume her education as she was able to get enrolled in the 10th grade and start from where she had left off.



***"It has been a tremendous support to my family, we were unable to buy the raw materials on our own and I am so proud that I have acquired a skill that can help my family financially".***





# Disaster Risk Reduction



# ENHANCING COMMUNITY RESILIENCE AGAINST NATURAL DISASTERS

*A story of AKAH which enhanced community resilience against disaster by providing several protective measures*



Aga Khan Agency for Habitat  
(AKAH)



Climate change induced natural disasters are appearing to gain momentum. The evidence of disasters around the far-reaching socio-economic impacts on the lives of people under threat is still evolving, but the dangers to human lives are clear. The mountainous region of Gilgit-Baltistan offers accounts of these damages because of flash floods, snow avalanche, GLOFs, rock falls and debris flows. Darkut village, bordering the Pamir regions in the north-west of Gilgit-Baltistan, is no exception. Its location puts it in a disadvantage for receiving any immediate help in case of a natural disaster leaving the inhabitants on their own to respond such climatic changes.

Zar Khan, 51 years of age, shared the most terrible experience that his family endured during 2019 flash floods, "I lost my cultivatable crops, and my brother's house became completely inhabitable. The damage was so huge as after that we are in huge debt. My brother had to move out of the village to settle in a nearby one as his home was fully destroyed. Zar Khan neighbor also faced the similar situation. The impacts of flash floods were not limited to a single neighbourhood as all the dwellings in the village are in small patches of land between the river and mountains. Therefore, the threat persists and begets a solution to the ever-rising pattern of flash floods.

Aga Khan Agency for Habitat (AKAH) has remained engaged with the community for a long time and strives for a safer habitat and resilient community in the face of natural disasters. It has devised mechanisms for remote communities in bringing cost effective local solutions to emerging threats. It believes community sit at the core of any response and change, and only through their collaboration any threat can be thwarted or mitigated accordingly. Its emergency response program is the manifestation of this belief. This program trains the voluntary members, men and women equally, in emergency and rescue operations under the banner of Community Emergency Response Team (CERT), and builds using local materials physical infrastructure to mitigate the effects of these disasters.

To better respond to the situation in Zar Khan village, AKAH built 160 meters/ 550 feet long mitigation walls which are 2 meters thick at the base with varying heights. The sites for these walls have been selected using Hazard Vulnerability Risk Assessment (HVRA) maps, built by AKAH geologist, to keep maximum number of households safe. Currently, 150 households are direct beneficiaries of these mitigation infrastructures in Darkut. The agency provides financial and technical support in their construction, but the community through a committee must arrange for material and labour. The same committee ensures the walls get mandatory repairs in case of damages due to floods. These mitigation walls act as barriers between debris flow and community, reducing amply the effects of disasters.

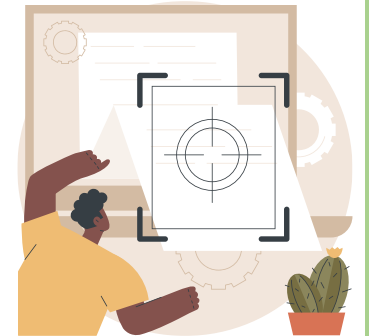
Zar Khan, now feels safe and happily, "In flash floods of 2020, we were monitoring the flood and its path, it reminded us of our previous experiences, however, this time the AKAH built mitigation walls had contained the effects of the floods and almost none of the land or homes have been damaged".

Abbas Ali recounts, "if it were not for these walls, our lives and property would have remained under continuous threat. Over the past years, we have moved to safer places in the flood seasons, but that didn't happen this time, thanks to AKAH for these walls which keep us safe". Building resilience among communities at risk is one of the core objectives of Aga Khan Agency for Habitat. The agency takes an integrated, community-based approach to sustainable development while its development programmes address not only the immediate needs of safe housing, but also have an overall impact on social and environmental sustainability, gender equality, and economic regeneration.

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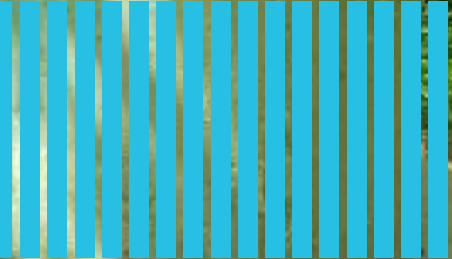
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Water, Sanitation And Hygiene (WASH)



# PROVIDING ACCESS TO CLEAN AND SAFE DRINKING WATER

## An intervention of AKAH to provide relief to communities related to safe drinking water



Aga Khan Agency for Habitat  
(AKAH)



“Every day at 5 am me and my neighbors would start our journey towards the river to fetch water for the daily use of family” says Ashraf Nama, recalling her days of physical labour prior AKAH’s intervention. Ashraf Nama, now 28 years of age, a resident of Omelsaat village in Yasin valley of Gilgit-Baltistan, feels her overall health has significantly improved. She has more time at her disposal to take care of her family particularly her three children. But life has not been this comforting for her and for the women of her village of 156 households. Just four years ago, flocks of women holding containers marching towards river was a common sight in her village, spending up to an hour in each trip and taking four trips daily. This routine in winters was even riskier with temperatures falling below -10 Celsius, and with snowfalls the journeys even harder.

Exhausted Ashraf could hardly take care of her own health. Her husband, the only breadwinner of the house, works in the city of Ghakuch and can only afford to visit twice a month. Alone, she had to stay alert to the needs of family of twelve. She leads from domestic chores to agricultural work for her brothers-in-law and sisters-in-law to follow. Her two sons and a daughter would often accompany her to fields on weekends, but rarely of any help given their ages.

Her worries exacerbated in times of seasonal outbreaks of diseases denting her monthly budget and straining her mental health. She recalls, “my children would get sick every now and then, mostly in summers. They would either catch poxes or suffer with digestion problems. With my husband away, it was difficult for me to seek immediate medical attention for my children.”

The remote villages and towns of Gilgit-Baltistan, like Omelsaat, lacked access to piped water despite home to multiple glaciers. This underlying problem has traversed all domains of daily life of a family yet its identification and addressal could only be materialized by the intervention the Aga Khan Agency for Habitat (AKAH); an NGO focusing on community centric solutions for a safer habitat.

It is flagship programme Water and Sanitation Extension Programme (WASEP) offers a holistic and integrated six-step methodology coalescing hard and soft components to address the drinking water and sanitation needs of people of remote villages. WASEP builds on solid foundations of community mobilization to construct potable water supply infrastructure with mandatory community participation to ensure ownership for sustainability of the project even after handing it over. Its health and hygiene education component educates the children and women of the village on safe hygiene practices. For sustainability of these interventions an Operation and Maintenance fund is established with equal contribution from beneficiary households and run by a representative committee of the villagers.

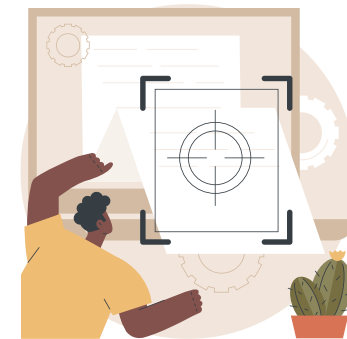
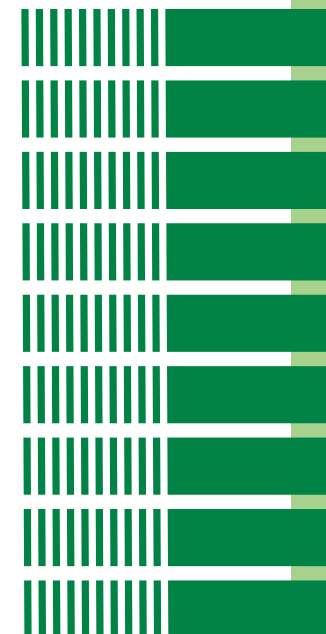
AKAH is continuously engaged with communities having water issues and uses in-house funding to study the modalities for bringing cost-effective solutions. Based on one of these modality studies, Omelsaat was identified for WASEP intervention. The physical work on the project was initiated in 2016, and after almost a year’s work the village was connected through pipes with the glacier fed water source.

After its completion, the project provided clean drinking water to 156 households through a water tap-stand that is designed to weather the freezing temperatures for uninterrupted water supply. One tap-stand although insignificant in its appearance hides the profound impacts on the daily lives of its users. Ashraf, like many others of her village, now balances all that time between helping her children do their homework and on her health. On the other hand, breadwinner like her husband can save more money and continue their jobs with peace of mind. These interventions collectively result in creating a ripple effect for a society to realize considerable economic gains and an improved quality of life.

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*She recalls, “my children would get sick every now and then, mostly in summers. They would either catch poxes or suffer with digestion problems. With my husband away, it was difficult for me to seek immediate medical attention for my children.”*

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# PROVIDING ACCESS TO SAFE AND HYGIENIC SANITATION SERVICES

*An intervention of CESVI which is providing access to safe and hygienic sanitation services*



The complex emergency in the tribal districts of KP caused widespread infrastructural damage due to years of neglect and misuse. Public facilities like health centers and schools also suffered from such damages, with scarce resources preventing the timely reconstruction direly needed.

The Civil Dispensary (CD) in village Pastai, South Waziristan is the primary health center in the area, witnessing a large influx of patients. However, according to the local communities, women and girls would often avoid going to this dispensary due to bad conditions of sanitation facilities. While the health facility originally had two gender-segregated latrines, one was completely non-functional while the other faced issues with a disrupted water supply. Under the BHA-funded project, Cesvi and partner PRDS rehabilitated sanitation facilities in 17 health centers in North and South Waziristan.

The CD Pastai was one of the health centers recommended by the District Health Officer due to its centrality in the area. Thus, the project reconstructed separate toilets for males and females to provide safe sanitation to visitors. In addition, the health center's water supply system was also rehabilitated so that the facilities could be used properly. The new sanitation facilities can now ensure the dignity and privacy of its users, and not be a source of anxiety for vulnerable groups like women and girls.



## Multifaceted Support with Long-term Value

CESVI, with implementing partner Bright Star Development Society Balochistan (BSDSB), was providing essential support to strengthen health facilities in districts Quetta and Pishin of Balochistan under this ECHO-funded project. Eleven major health facilities were equipped with the medical and non-medical supplies and given the infrastructure rehabilitation support they needed to effectively test and treat COVID-19 patients while being able to continue their other health services.

Oxygen supply is a crucial element of COVID-19 treatment, and the rapid spread of the novel disease caused nationwide oxygen shortages, including in major hospitals, disrupting the proper care of critical patients and in some cases, halting or delaying other medical services. Through this project, Cesvi provided 73 oxygen cylinders to health facilities in the two target districts of Balochistan struggling to meet the oxygen needs of patients.

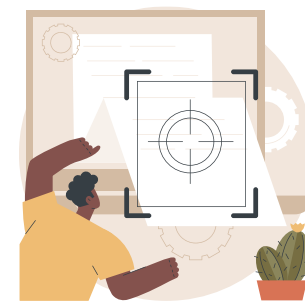
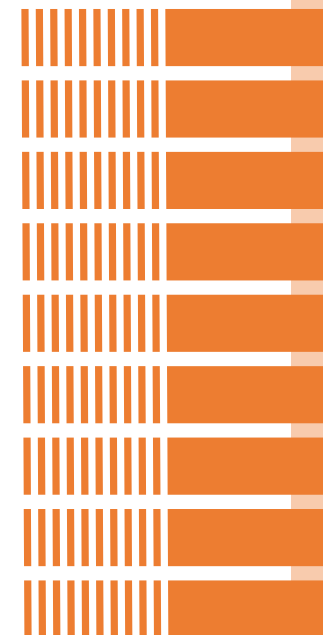
The Shaheed Benazir Bhutto General Hospital in Quetta had an oxygen generation plant which is



connected to the internal supply system, however, due to functionality issues with the plant, the hospital was forced to buy cylinders from the market to fulfil its needs. Cesvi and BSDSB fully rehabilitated this oxygen plant, allowing the health facility to meet all its patients' requirements conveniently and efficiently. Moreover, the rehabilitated plant also allowed two other major facilities, the Shaikh Zayed Hospital and the Fatima Jinnah Chest & General Hospital, to get their oxygen supply, thus benefitting many more patients.

The provision of different medical and non-medical equipment has also helped the health facilities in a multitude of ways. The medical equipment given to Fatima Jinnah Chest & General Hospital, including ABG machines, BiPAP machines, oxygen concentrators, defibrillators, and cardiac monitors, allowed them to set up a new and fully equipped ICU ward. Meanwhile, the fire extinguishers provided to a health facility in Khanozai helped put out a fire in the compound's mosque, saving the structure from severe damage.

This support has provided not only immediate relief to facilities dealing with this global pandemic, but also improved long-term capacity in the form of good quality medical equipment and rehabilitation of crucial infrastructure.



## PROVIDING ACCESS TO SAFE DRINKING WATER AND SANITATION FACILITIES

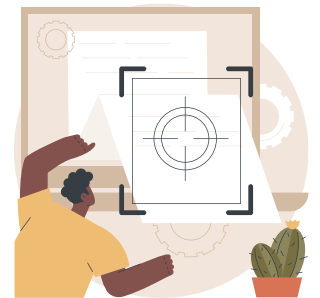
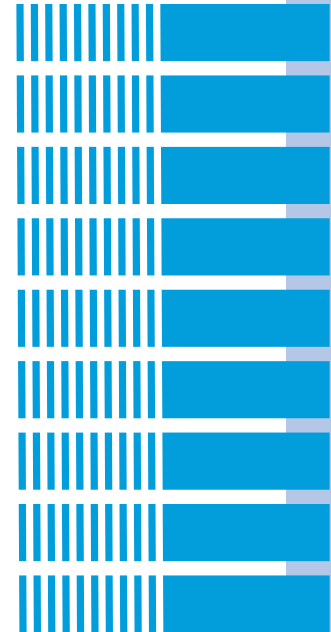
### *A striking intervention of Diakonie which have improved the Water and Sanitation facilities of people of village Bhope Jo Tar*

Bhope Jo Tar is a small village located in Union Council Vejhiar Tehsil Mithi of District Tharparkar with the population of 100 households. Mostly people in that village depends on daily wages and few rely on livestock and agribusiness. Before the Diakonie intervention, there was only one dug well that was used by the local villagers to fetch water.

Normally, water collection is a heavy task in any drought-affected village of Tharparkar as it requires 4 to 5 people to collect water from the collection point. As beside one person who collects water, the other 4 people stretch rope until the water pot touches water level to fetch water. Women and children are mainly responsible to fetch the water for the family. Each day water collection requires more than 2 hours.

The Diakonie's Pakistan Village Development Program (PVDP) selected village Bhope Jo Tar by keeping in view their vulnerabilities and challenges related water fetching. Water fetching is main concern, and it is quite time consuming. It is just because of that exercise villagers can't go to their work on time and missed their daily earning.

By keeping in view, Diakonie through its integrated project **("Emergency Response through WASH, Livelihood & Food security interventions to COVID-19 and 20 drought-affected communities in District Tharparkar, Sindh-Pakistan")** installed 10 solar submersible water pumps, distributed 2500 food packages, 1000 vegetable seeds for kitchen gardening, and provided 800 latrines to ease villagers at maximum level. Through effective social mobilization and training, the village-based committee established a mechanism to collect 150 Pak rupees (monthly) from each family to ensure operations and maintenance of the solar submersible water pump. The villagers have also ensured that each household avoids open defecation by using the latrine provided by the Diakonie.



# PROVIDING ACCESSIBLE SANITATION SERVICES TO PEOPLE WITH DISABILITIES

*An initiative of the Diakonie which is supporting disable people for healthy living*



Bhuro, 25, is physically disabled young man earning a small income from his shop at his home, to contribute to his family to support their ability to meet their basic needs. He requires a wheelchair to move, and his mother is also disabled with one leg immobilized by Polio. There are 9 family members living in a mud house in Village Wingar in Union Council Vejhiar, Tehsil Mithi of District Tharparkar Sindh, Pakistan.

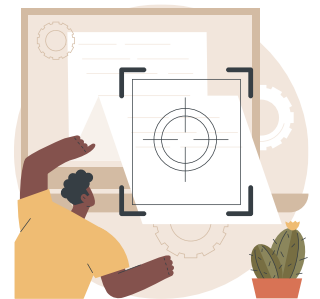
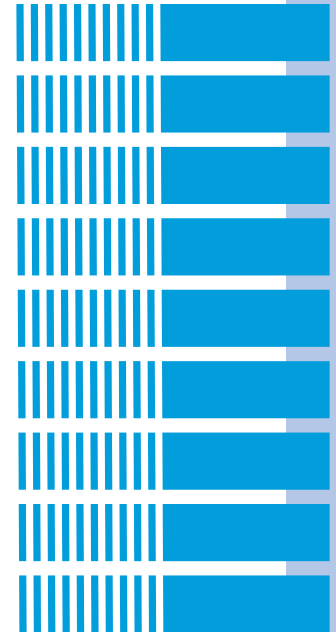
Open defecation was a constant challenge for Bhuro's family, along with 90 other families residing in the village. Diakonie under its Pakistan Village Development Program (PVDP) conducted Community led total Sanitation sessions in different villages including Wingar in October 2020. The villagers participated in the triggering session and highlighted the status of the village by indicating open defecation sites on a village map. At the end of the session, the project team facilitated the community to develop an action plan, in which the villagers indicated a desire to build latrines at their homes and stop open defecation within a month. Previously, the villagers faced difficulties in defecating openly at isolated places near their homes, especially during the daytime.

Based on village needs, PVDP distributed latrine material of three bags of cement, one toilet seat, one drainage pipe, and one p-trap to 800 most vulnerable households identified in the project. Bhuro's father Gango received the latrine material and constructed an additional superstructure of the latrine, along with a door to ensure the privacy of the family members.

“

***Gango and his family members were happy to have a latrine at their home, as it was particularly hard for Bhuro and his mother to have the mobility to find suitable areas for open defecation. Gango hopes that one day his whole village will be cleaned, and all families will use latrine on regular basis.***

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## LEARNING NEW WAYS OF SKILL ENHANCEMENT AND EMPOWERMENT

### *A story of Sabagi who changed her life by acquiring good skills*

Sabagi is a resident of Qamaro Shareef, District Tando Allayar, Sindh Pakistan who lives with her husband and 4 children. Being one of the remote areas of Pakistan with less chances of employment and earning, her family livelihood is a challenge. Her husband is a (Harri) daily wager who works at the land of a landlord and cannot move to any other place for a livelihood because of the agreed terms with the influential landlord. He does not earn in terms of monetary value, but he only receives a certain amount of wheat from the land he serves which is obviously don't meet the family expenses.

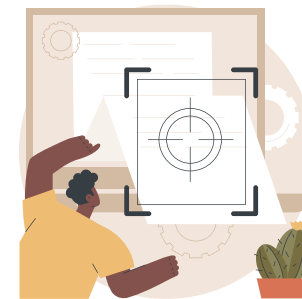
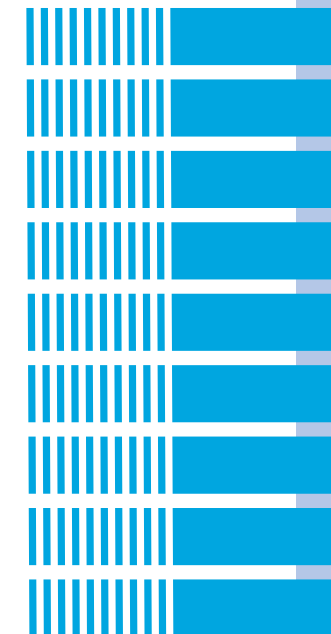
She had to look after the expenses of school fee of her 2 children along with food, health, and other utility expenses of her family. She was very worried for the family wellbeing and livelihood of family since both (wife, husband) did not have any skill to earn a livelihood. When she came to city, she got some work in a house for ironing/pressing of cloths, but the income she used to get was too low to meet the requirements of the family. It was even not possible for her to fulfill the wishes of her children.

One day, on her way back to home, she got an HHRD brochure which had details of some skill enhancement courses that were offered by SDLP under the umbrella of HHRD in her district. She rushed directly to the SDLC Dera Allayar and met with the center incharge and narrated her story and passion to get skilled. The incharge gave her chance to get enrolled in one of the free courses related to "Dress Making". She went to her husband and told him that she has got a chance to get skilled where she would be provided with free training, training material, and mentoring through value-based education. She was very passionate about her future and family, so she has completed 6 months dress making training with full zeal and attention. Now Sabagi is a trained professional who gets a good number of orders for cloth stitching and earns a comparatively good livelihood for herself and family. She is the only person in her village who is this professional and competent. She tends to open a stitching center in her village to get higher values and income. She can now fulfill the wishes and can have good new cloths for her children when in need.

“

Sabagi Says ***“I am thankful to ALLAH and HHRD donors who provided me this opportunity to earn a respectable livelihood. May Allah prosper HHRD donors with good health and wealth. I request you to facilitate me in developing a center my village to so that I ca train more girls.”***

”



# HEALTH AND HYGIENE COMES FIRST

*A story of Zahid who appreciated the role of NCA for the provision of hygiene kits during pandemic*



Regular handwashing with soap and water is one of the most effective ways to avoid COVID-19. It is not as simple when hygiene is not a priority. Unfortunately, this is very relatable for Mohammad Zaid, a resident of District Swat of Khyber Pakhtunkhwa Province – among one of the worst affected 17 district of Khyber Pakhtunkhwa province. Like many in the area, he belongs to a poor family and earns daily wage. He was always struggled to feed ten members of his family including his parents.

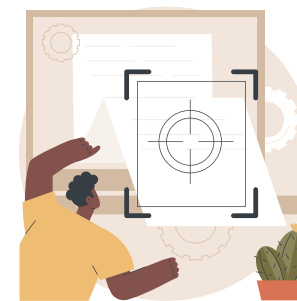
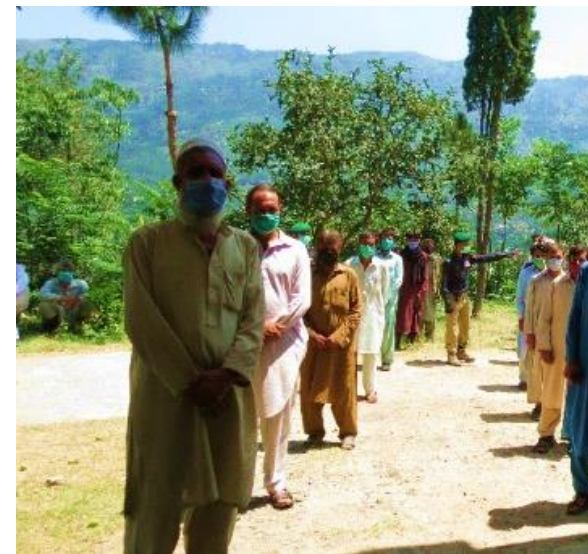
Govt's lock down to contain spread of COVID-19 directly affected Zaid, he lost his source of income. As he struggled to manage basic needs of the family thus buying hygiene material to keep his family safe never crossed his mind.

***"While I was under extreme pressure to meet ends, my family situation worried me the most. I could not afford items for family to keep themselves clean and protect from getting infected,"*** says Zaid.

Things changed for Zaid, his fellow and other fellow community members when NCA-Pakistan's partner LASOONA distributed hygiene kits in Zaid's village. In coordination with Civil Defense Department (CDD) and LASOONA devised a strategy to safely distribute hygiene kits while observing safety measure. Community Based Organization (CBOs) and CDD volunteers assisted in identification of vulnerable households.

In total, 1349 families benefitted from NCA-Pakistan's COVID-19 Response. In times when communities were exposed greater risk of infection transmission NCA-Pakistan's intervention was helpful breaking chain of infection transmission.

***"Hygiene kits were distributed at a perfect time, and I highly appreciate the help, it reduced my burden and protected my family",*** says Zaid



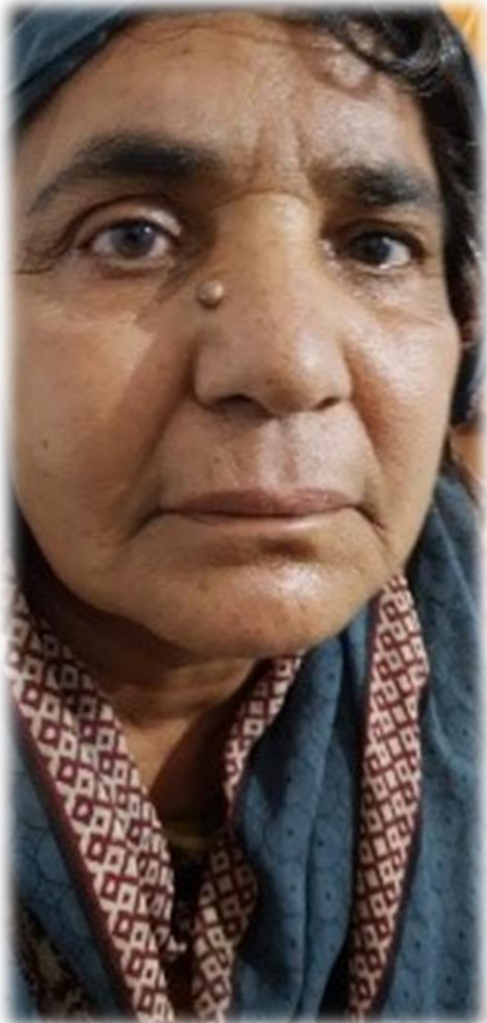


Health



# ASSISTING AND PROVIDING HEALTHCARE SERVICES AT DOORSTEPS

## A story of Sajida who was treated immediately after being diagnosed as a patient of Trachoma



COVID 19 has disrupted the globe, thus leaving it in havoc. It has placed an unprecedented burden on the global healthcare systems. The studies at HARVARD Medical School show that during the outbreak, there is 32% decrease in the eye patients' visits and operations. However, in Pakistan this percentage must have accelerated. Unfortunately, these statistics, in an under advantaged district like Kamber Shahdadt, should have the gravest. But Napoleon puts it rightly that every adversity carries with it a seed of greater benefit. So does happen with the COVID-19 and lockdowns.

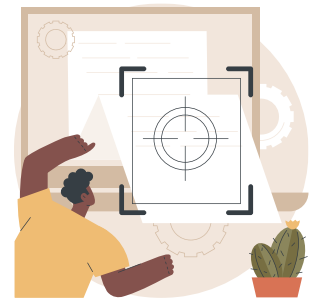
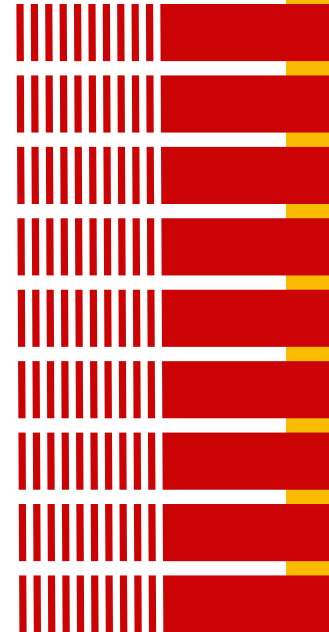
The shape of 2020 and 2021 is greatly defined by the pandemic, therefore Sindh Institute of Ophthalmology and Visual Sciences (SIOVS) Hyderabad and CBM International lead the ship of their project "Pakistan Trachoma Elimination Project" with resilience innovation and inclusive digitalization. To curb the challenges of eye patients' show-ups and treatments, they have initiated a TELE TRACHOMA Service in 2020. Let's discover the journey of one such TT patient who treated from the tele service.

She is Mrs: Sajida, a 60 year's old housewife and field worker. She lives at Union Council Bhago Dero Taluka Shahdadt. She was suffering from TT since last 5 years. She was in practice of removing her eyelashes by pluckier. Then one good day, our social mobilizers while delivering awareness sessions distributed tele-trachoma pamphlets in that village. A relative of Mrs. Sajida shared the tele-trachoma numbers with her. Mr Deedar- husband of Sajida- called at the service and explained her condition. The pictures of her affected eye were collected by the project team and were forwarded to the National Master Trainers.

After getting confirmation and appointment from one of the National Master Trainers, Mrs. Sajida was called at and operated on at Taluka Health Quarter Shahdadt. She was also provided with free medicines and commute by the trachoma project. Now, she is living a healthy life.

The Tele trachoma service is fueled by digital technologies, which needs to be modified with the passage of evolving market-driven necessity. It allows the implementing organizations not only to re-imagine the trachoma treatments, but also lessens patients' no-shows, improves eye healthcare quality, and cuts patients' costs. Given that, IPs have gone an extra mile to ensure digitalization, resilience, accessibility, and inclusiveness in the district.

"I AM VERY HAPPY NOW. I CAN EASILY WORK NOW AT FIELDS. OTHERWISE, IT FELT LIKE SANDS IN THE EYES SCRUBBING INSIDE ALL THE TIME. WE COULD NOT THINK THAT TTREATMENT WOULD BE POSSIBLE THROUGH CELL PHONES. I AM THANKFUL TO SIOVS, CBM INTERNATIONAL AND TELETRACHOMA SERVICE."



# PROVISION OF QUALITY HEALTH SERVICES CHANGE HIS LIFE

*A story of Ghulam Muhammad who also got access to quality health services at his doorstep from CBM*



Three months ago, Ghulam started experiencing vision related issues while working in his factory that included doubling of vision, shadows around the objects, blurring or distorting of vision while using machines and electricity wires. Gradually, he started losing his sight and would try to look everything very closely. Being the key supporting person for his whole family, he had a fear that, soon he would lose his job due to his sight loss.

Due to limited financial resources, Ghulam cannot afford to pay for his medical examination and treatment. Fortunately, Ghulam's son was aware about the availability of free of cost eye care services at LRBT Eye Hospital, Rashidabad, so he took Ghulam to the hospital for examination, where he went through whole check-up procedure and was diagnosed with cataract. The doctor advised him surgery and counseled him that cataract is curable, and his vision can be restored.

After a week, Ghulam being a little scared of the surgery, visits the hospital and undergoes his surgery. After surgery, his vision continues to improve over the next few weeks. He comments on the comparison between the two eyes remembering how bad things were before surgery, and he is all excited to get back to the life he'd almost lost.

He can see clearly now and can earn a living for his family. His confidence at work has been restored. He can see boards and can read newspaper easily. He is genuinely like a different person and his whole family is lighter and happier due to his recovery.

Ghulam Muhammad is 55 and lives in a village at Rashidabad. He works in a sugar mill factory and hardly earns around PKR 7,000 per month. His job nature is seasonal therefore it becomes very difficult for his family to survive when the season is off. He has four daughters and two sons, and he is the main person who earns in the family. His two sons also work in a factory and hardly earn PKR 5,000 per month which becomes a big support for his family at hard times.

*Ghulam can clearly read boards after the surgery.*

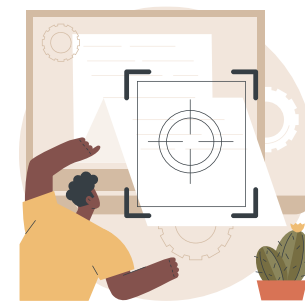
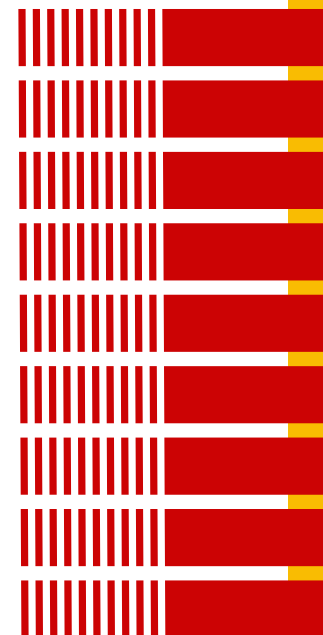
*Ghulam is happy to see clearly while reading newspaper after the surgery*



“

**“Every surgery, regardless of who receives it, is a little wonder. Not just because it's so quick that patients barely realize they've been operated on, but because of the incredible change in people that it brings”.**

”



## QUALITY HEALTH SERVICES BRINGING JOY IN THEIR LIFE

### *The story of husband and wife who got quality health services for eyesight*

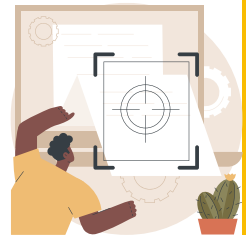
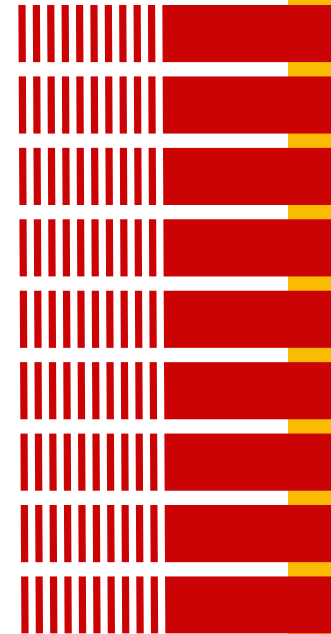


Chuttu Khan and Phaphu are husband and wife. Chuttu Khan is 65 and Phaphu is 55 years old. They both live in a village near to Rashidabad. Their village is surrounded by beautiful fields and greenery. They have one son and two daughters. They all are married and busy in their lives. Chuttu Khan works as a farmer and his wife, Phaphu assists him in his work to earn their living.

Chuttu Khan and Phaphu both started losing their sight several months ago but couldn't get the timely treatment. Chuttu is already sightless from one eye due to some trauma to the eye several years ago.

Now when they can see very little, relying on her children to help them around and run the home, and are also losing money in the farming because they can't identify the objects, they decided to visit LRBT Eye Hospital for examination, where they both were diagnosed with cataract and advised for surgery.

Chuttu was a little scared about the surgery and anxious about sight restoration because he has only one eye to see. The doctor counseled him properly about the procedure and restoration of sight which made him quite satisfied and relaxed to go for the surgery. After surgery, Chuttu and Phaphu, their vision remarkably restored, and they can see things clearly now. They can now work in field together and can play with their grandchildren. They are much happier and satisfied after the surgery that they can see the world now.



# NEWLY RENABILITATED HEALTH CARE FACILITY SAVING MOTHERS AND NEWBORNS LIVES

## *A story of Naila who got quality health service on time*

38 years old, Shaheena lives in Jaga Taka village, which is 20 kilometers from the health facility and 51 kilometers from Tehsil Head Quarter (THQ) hospital Mirali. A village deprived of even the most necessities, with only a few shops selling basic food products and no medical facility. There is also no proper road connecting Sheratala and Jaga taka. Shaheena and her family relocated to Bannu because of the military operation Zarb-e-Azb, where they spent three years in the Bakakhel IDPs camp and various rented houses. That was the most difficult time of their lives because Shaheena is her husband's second wife, and he is the only one who can feed the entire family, including both wives and their children. They were homeless at the time and had to live in a basic shelter. They returned to native area after things turned normal. Even after they return, Syed Wali Shah's financial condition is fragile, as he works as a driver and relies on leased vehicles to meet the needs of his large family.

Military operations, combined with a lack of infrastructure maintenance, have had a major impact on health facilities and services in KP's newly merged districts. Due to a lack of physicians, qualified paramedical personnel, and utilities, basic health facilities in the districts, such as hospitals, BHUs, and rural health centers (RHCs), are either damaged or non-functional (laboratory, equipment etc.). Women's access to regular check-ups, emergency visits, and maternal and child health facilities is hampered by the lack of female doctors. Most of the centers are severely lacking in basic lab facilities, and primary healthcare facilities lack the required basic health equipment and instruments. The overall state of mother care services is alarming, with most primary health care facilities lacking the required equipment and qualified personnel to provide antenatal and postnatal care.

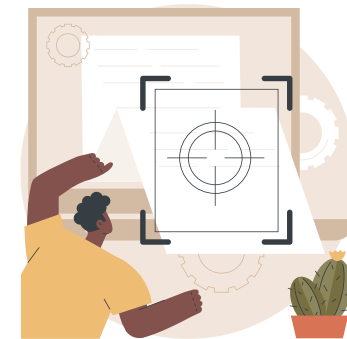
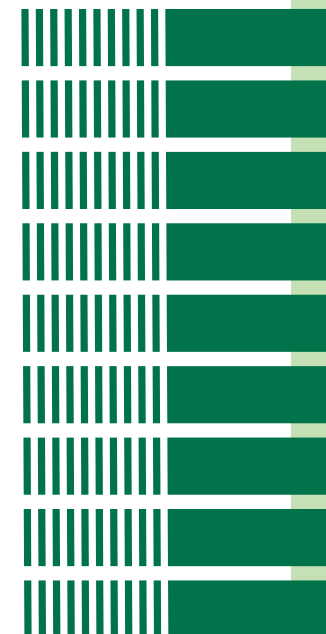
Concern worldwide with support of USAID / BHA, and with partner Prime Foundation implemented the MARSP program for crises affected populations of North and South Waziristan tribal districts of Khyber Pakhtunkhwa Pakistan. The major stakeholders are health department, district administration, and other key stakeholders. The program has provided human resource support to the health facilities including doctors, lady health visitors, dispensers, lab technicians and medical technicians for each health facility. These health facilities include BHU Sheratala Madi Khel and BHU Marmandi Azeem in North Waziristan of Tribal District and Civil Hospital Ladha and BHU Kot Yaghistan in South Waziristan of Tribal District. Target beneficiaries of the program include girls, boys, female, male, elderly & disabled people residing in the catchment area of the four health facilities.

Prior to the program interventions, communities in the targeted areas were unable to access health services at their respective catchment health facilities due to a shortage of material and human resources for the provision of quality primary health care services focusing on MNCH. Concern filled the gaps in material and human resources to improve both health facilities to provide quality primary health care services focusing on MNCH. During program intervention, Concern treated 57,038 OPD consultations in tandem with free laboratory tests and free medicines, 746 women received comprehensive MNCH services including antenatal services, natal services and postnatal services. 24,275 beneficiaries were reached through CHWs and LHVs who disseminated key health messages at the health facilities as well as in the communities via door-to-door household visits.

The health education sessions have influenced community's; especially women's health and hygiene practices. Following participation, women community continued to concentrate on 'exclusive breastfeeding, they learned the importance of early initiation, and the importance of 'colostrum milk'.

Shaheena, 38 years old, went to the health facility for a check-up on October 12, 2020. Her preliminary examination was conducted by Concern partner Medical Officer Dr. Zia Ullah. She was weak, pale, anemic, nervous, and had a low blood pressure. Dr. Zia referred her to Naila, PF LHV for a thorough examination and evaluation, which included diagnostic tests (HB, Blood Group, HBS, and HCV). Shaheena was 41 weeks pregnant (posted) and her cervix was only opening two fingers. She was diagnosed with a post term pregnancy after a string of related pregnancies in which the fetus did not live. Shaheena was recommended to return home after the team agreed to wait a day for the onset of natural labor pain rather than opting for induced labor right away. Shaheena was transported to the facility by Primary Foundation emergency services on October 13, 2020.

Naila assessed her situation, but there was no change in the opening of her cervix, and no labor pain. Because all of the required diagnostic tests had already been completed the day before, Shaheena was transferred to the labor room and given the necessary drugs (vaginal tablets, injections, and infusions) to induce labor and open the cervix. The labor pains began gradually, and Shaheena was able to deliver the baby within a few hours.



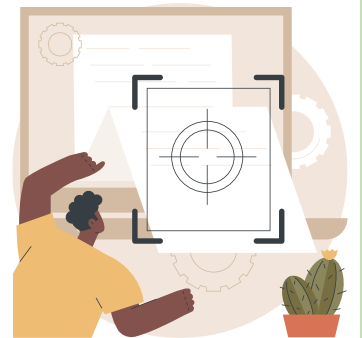
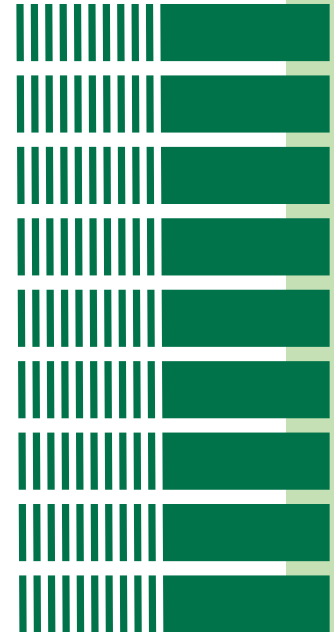
# NEWLY RENABILITATED HEALTH CARE FACILITY SAVING MOTHERS AND NEWBORNS LIVES

## *A story of Naila who got quality health service on time*

Naila noticed the umbilical cord was wrapped around the baby's neck during the birth, so she took extra precautions and treated the situation professionally. The baby was successfully delivered, followed by the removal of the placenta and the administration of the required drugs to the mother (injections and infusion). Since the baby was stable but not crying, Naila rubbed the baby's back, which caused the baby to cry. The umbilical cord was tied off securely with sterile tape about 4 inches from the baby after it stopped pulsing, then tied off again 2 to 4 inches from the first string. Between the two bonds, the cord was cut. The baby was put on the mother's stomach, wrapped in a warm blanket.

Following the delivery, Shaheena was held under observation for further monitoring. She developed extreme postpartum chill an hour later, for which she was given an extra blanket and given the necessary medications. She was completely healthy in half an hour and was able to breastfeed her child. She was given advice on the benefits of colostrum and exclusive breastfeeding. The Medical Officer recommended her free medications for home treatment and urged her to return to the facility within three days for postpartum care until the team was fully pleased with the patient's condition. Syed Wali Shah took his wife and newborn to the hospital for a postnatal checkup on October 15, 2020. Dr. Zia and Naila examined the mother and the newborn to ensure that they were all well and that there were no post-delivery complications.

***"I decided to have a proper medical checkup after learning about my pregnancy because I had a previous poor obstetric history and had lost my kids. I had no normal labor pains and went to a doctor, which was very expensive for us. So, because of our financial difficulties, my husband declined to take me there this time. Our ten-year-old son died recently of a brain tumor, which cost us a lot of money to treat. As a result, I was well aware that my husband would be unable to drive me to the hospital and cover all of my expenses. But, thanks to USAID/BHA and Concern for giving free access to primary healthcare services enabling me to deliver an health baby."*** – Shaheena



# RELIGIOUS LEADERS BECOME ADVOCATES TO CONTAIN THE SPREAD OF COVID-19 AND TO BUST MYTHS AND FALSE BELIEFS RELATED TO VACCINATION

## A success story of Mercy Corps for engaging religious leaders for myth busting and false belief related to vaccination

During the uprising of COVID-19 pandemic, much like any other country, the challenges of limited healthcare supplies, facilities, and expertise, were faced by Pakistan. Amidst the upward trend of COVID-19 cases, Mercy Corps Pakistan, with support from Bureau of Population, Refugees, and Migration (BPRM), started implementation of RECOVER project in Quetta. The project focused on Water, Sanitation, and Hygiene (WASH) interventions, upgradation of health care facilities, cash disbursement to COVID-19 affected population, and awareness creation on COVID-19 preventive measures, myths, and importance of vaccination.

Along with utilization of Information, Education, and Communication (IEC) materials in several locations of the city and key messages being forwarded through voice messages, Mercy Corps came up with an innovative model of spreading awareness on the pandemic through Religious Leaders. These religious leaders hold a key influential position in cultural dynamics of Balochistan – be it Afghan refugee or the Pakistani host community.

Clerics-based awareness campaigns have always remained a sensitive intervention. COVID-19 preventive measures and vaccination were termed as western agenda against Muslims, especially when the National Command and Operation Centre (NCOC) issued strict measures of social distancing in mosques. Realizing the severity of the negative information or misleading information, spreading at par with the pandemic, the project team reached out to Inter-Religious Council for Harmony (IRCH) for structuring the awareness model.

After several consultative meetings and an indefinite process of reviewing, filtering, and screening, a set of messages were developed for the awareness campaign. Once the content of the campaign was developed, the messages were forwarded to the office of Director General Health Services, Balochistan, for approval.

To ensure the timely dissemination of WHO approved messages in the spreading array of myths, the identification process of clerics was simultaneously initiated with the approval process of messages. It was a challenging process to track, identify, and sensitize clerics who would agree to join hands against the pandemic and the rising rumors. To timely act on the challenge, Dr. Atta Ur Rehman, from IRCH, was taken on board as a resource person who, being a doctor himself, recognized the positive contribution that religious leaders could play in community sensitization.

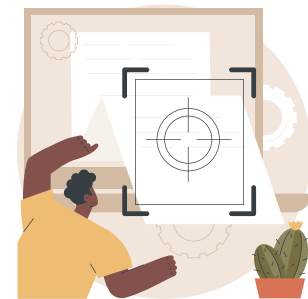
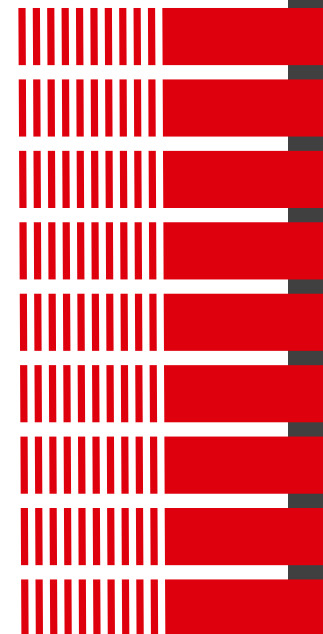
A total of 26 clerics of 26 mosques, from 13 peri-urban locations of Quetta, became part of Baluchistan's first Religious Leader based COVID-19 Awareness Campaign.

***"I have been the Imam (Mosque Leader) for more than 14 years in this [Pashtoonabad] mosque; these worshippers are like my family. I have been part of their happiest moments – such as marriage – and their saddest – such as death. This close bond helped me convey the COVID-19 messages with less resistance and more acceptance."*** Molvi Muhammad Ayub – Religious Leader.

With inclusion of religious references in the messages of the campaign, these clerics were trained on literature review-based arguments on "permitted actions in pandemic". With an aim of containing the COVID-19 information and preventing the spread of COVID-19 pandemic, the religious leaders began disseminating the Government of Balochistan and WHO approved messages after every prayer. Similarly, during the Friday prayers, IEC material was distributed to all the worshippers.

Moreover, the IEC materials of COVID-19, in Urdu, Pashtu, and Persian, were pasted on the walls of the mosques and all the 26 mosques were provided with soaps, masks, and tissue rolls to maintain SOPs. In the six months of the campaign, all the religious leaders were called every two months to share their progress and challenges, if any, that they may have faced during the campaign. This resulted in leading an impact-driven awareness campaign which was found unprecedented in these COVID-19 times within the province. To countercheck the progress of the campaign, the project team randomly conducted monitoring visits to the localities and reported an increased sense of protection during their community assessments.

Worshippers from mosques were observed at entrance and at exit and a gradual increase was observed in the number of people who maintained COVID-19 SOPs. The impact of this innovative and underutilized approach was so effective that to structure a province-wide campaign on COVID-19, Balochistan Government's "Provincial Communication Taskforce" requested the project team for a consultative meeting with RECOVER's religious leaders.



# PROVIDING ACCESSIBLE AND FREE QUALITY HEALTH SERVICES TO MOST DESERVING PEOPLE

*An intervention of Mercy Corps which provided free and quality health services to a lady who was unable to afford medical expenses*



Being a young mother of seven children, Pavan’s story might very well be like the other women and girls in her village. The difference, however, lies in Pavan’s eventual access to Health Care. Pavan has always been the prime care giver of her family. In a one room mud hut, she tends to her children and husband, while collecting fodder for the cattle and occasionally weaving intricately patterned floor rugs. Her family is heavily dependent on her, and perhaps now value her more than ever.

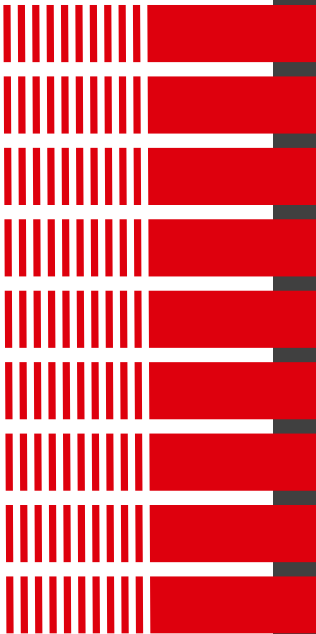
Pavan’s health was never really her priority until about eight months ago, when she fell deeply ill with persistent coughs, strong headaches, and high fever. Unable to take up any chores at all, the usually active Pavan became entirely hopeless with her sickness. Fortunately, one of the villagers informed Pavan and her husband to visit Dr. Doongar at a nearby clinic for a consultation.

The Marvi Family Clinic, where Dr. Doongar sits for his medical practice is one of the many clinics supported by Mercy Corps under its Public Private Model (PPM) backed by the Global Fund. Dr. Doongar himself is part of the PPM intervention as a trained General Practitioner. After thoroughly examining Pavan and taking her symptoms into account, Dr. Doongar clinically diagnosed her with Tuberculosis. Following her consultation, Dr. Doongar filled a Sputum Referral Form and directed her to the nearby PPM Laboratory for AFB and Gene Xpert testing.

For many people in the village, Tuberculosis is thought to be an incurable disease resulting in pain and death. The treatment is deemed unaffordable, preventing many villagers from getting tested or seeking treatment. Pavan and her husband, however, were relieved to find the PPM Lab accessible and free of cost, which eased them to pursue Pavan’s diagnosis and treatment.

When Pavan’s results came in, she was AFB positive, with high MTB Detection through Xpert testing. Dr. Doongar prescribed Pavan a six-months TB course to set her free from TB, while also advising her to minimize contact with her family members and the villagers. In villages such as Ranjho Bheel Deh, where poverty dominates, and the one room mud huts shelter approximately ten to twelve individuals, social distancing or isolation is hardly a possibility. Pavan’s diagnosis was therefore a signal for the District Field Officer (DFS), Mr. Nihal, to go around the village for contact screening to direct those who had unknowingly contracted TB through Pavan. When Nihal went to the village, the people refused to recognize Pavan’s name and told him clearly that there was no such woman in their village.

***Nilhal recognized this sentiment as obvious fear of the disease and hesitance to undergo treatment within the community. While on this visit, Nihar could not meet or even locate Pavan, it was on his following visit that she was able to find her.***



# REHABILITATION OF HEALTH FACILITIES TO PROVIDE QUALITY HEALTH SERVICES

## Rehabilitation of health facilities to provide quality health services



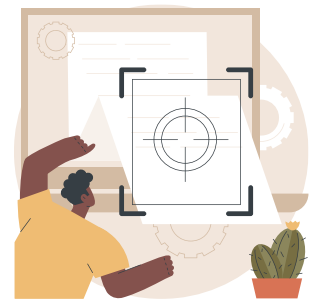
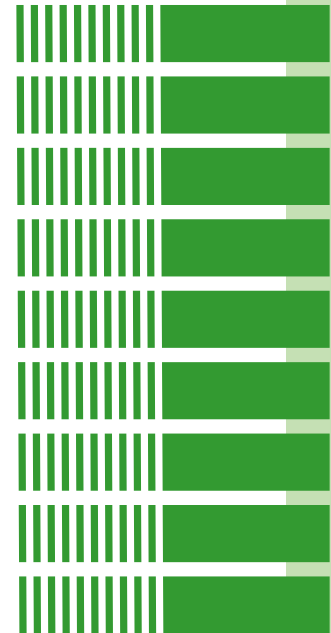
Rural Health Centre (RHC) Fazilpur is 30km away from the District Head Quarter Hospital, Rajanpur. It is surrounded by a population of at least one lac people. Normal patient turnover of this health center is not less than 500 on daily basis.

During the COVID-19 health emergency, District Head Quarter Hospital, Rajanpur as well as Rural Health Centers including the one in Fazilpur were overly burdened because of unavailability of necessary medical equipment crucial to perform initial diagnosis, which was bothering both the medical staff and patients.

Though RHC in Fazilpur was fully staffed, the center was unable to take desired actions because of absence or non-functionality of equipment like pulse oximeter, BP operates, stethoscopes, etc. Purchasing equipment such as ECG machines, cardiac monitor, oxygen concentrator was beyond reach due to shortage of funds. While implementing the Cap-COVID project Welthungerhilfe (WHH) and Farmers Development Organization (FDO) assessed and addressed the need for medical and non-medical equipment, Personal Protection Equipment, disinfectants. The RHC in Fazilpur was provided with respective needed supplies to support patient care. FDO also installed Paddle Operated Hand Washing Station and rehabilitated not only toilet blocks but also sewerage lines.

Dr. Ghulam Mastoi (Senior Medical Officer-Rural Health Centre, Fazilpur) appreciated the support provided by FDO and WHH and shared that due to non-functional ECG machine it was hard to identifying any type of structural heart disease or assess heart performance to provide medical aid to the patient. Therefore, to avoid casualties they were normally referring such patients to DHQ while now they are treating several patients at their own health care facility. He also told that thermal guns are now being used for scanning temperature of patient at entrance and patient with high fever and other COVID-19 other symptoms are treated separately after diagnosing so that other patients may not get infected.

***“For us, best deal is the upgraded and fully functional health care facility where we can give our best to serve society.”*** said Dr. Mudassar Hussain (Medical Officer- Rural Health Centre, Fazilpur)





# Nutrition



# CONSISTENT EFFORT HELPS TO IMPROVE THE NUTRITIONAL DEFICIENCY OF MOTHER AND CHILD

## *A story of malnourished child who recovered after consistent efforts*

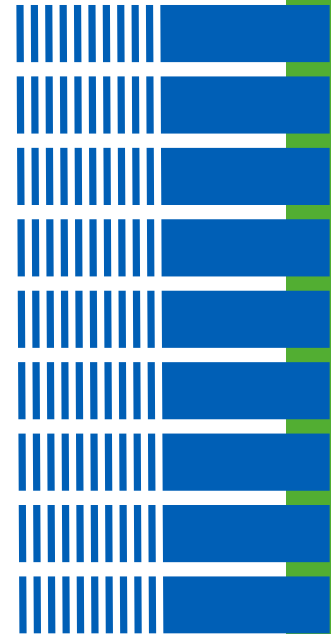


Ms. Rabail belongs to a poor family comprising of ten members. Her father is a daily wage worker and earns on an average PKR 350 per day, which hardly meets the expenses of the entire household. Her mother also works as a tailor at home to support the needs of family. On 13th February 2021, under 'Programme for Improved Nutrition in Sindh', the Community Health Worker (CHW) during her door-to-door visit identified Rabail as a Moderate Acute Malnourished (MAM) child through MUAC screening. The CHW provided Micronutrient Powder (MNP) Sachets to Rabail's mother advising her to feed her baby by mixing in any light food. The CHW also advised her to take care of Rabail's diet as she was very vulnerable to becoming Severely Acutely Malnourished (SAM).

During the next visit after one month, the community health worker identified Rabail, as severely acute malnourished because of the mid-upper arm circumference (MUAC) of 10.8 cm, which is below the threshold of 11.5 for acute malnutrition. She also had a high fever, vomiting, and diarrhea. The CHW immediately referred her to the nearest OTP site set-up of ACF under the European Union-funded "Programme for Improved Nutrition in Sindh". Unfortunately, Rabail was not taken to the OTP site when referred in March 2021 but later in July 2021. Her delayed admission to the OTP sites was primarily due to lack of finances with her father to cover the transportation costs.

At the OTP site, Rabail was provided with ready to use therapeutic food ration to improve her weight and MUAC measurements while her mother was counselled on breastfeeding, hygiene, and diet. During each follow-up visits, CHW continuously counselled Rabail's mother on dietary diversification and helped her mother on the proper use of all given medication and stressed on breastfeeding.

Rabail's mother was provided with Iron and Folic Acid (IFA) tablets by the same CHW when she was pregnant. After assessing Rabail's condition, CHW realized that Rabail's mother did not use IFA tablets which also caused Rabail's premature birth. Rabail's mother is pregnant again, hence CHW has provided her with IFA tablets with clear counseling for a healthy diet and ANC visits. Now Rabail and her mother's health has improved significantly. Rabail's treatment at the OTP site continues and her mother is also taking IFA regularly.

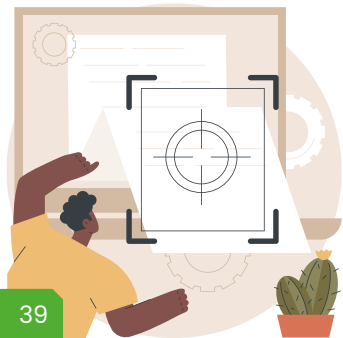


# CONSISTENT EFFORT HELPS TO IMPROVE THE NUTRITIONAL DEFICIENCY OF MOTHER AND CHILD

*A story of malnourished child who recovered after consistent efforts*

Both child and mother have recovered, and she is hopeful for the delivery of a healthy child.

*“I am happy that Rabail has become healthy and completely nourished. I am thankful to the PINS and the community Health Worker for the extra care, guidance, and offering me pragmatic advice on maintaining a healthy diet, which I am following. I have learned from my past mistakes and now I am fully committed to following to using folic acid tablets daily. ”, says Rabail’s mother*



## SETTING TREND OF GUAVA CULTIVATION IN WATER SCARCE AREAS

### *Innovative ways improve the crop production and management*



Mr. Punhal Khoso, a 50 years old man of village Ali Muhammad Khoso district Badin, has first time grown Guava on his land to curtail impacts of water shortages. Water scarcity has become phenomenon in the area, the district is itself disaster prone, though. His village is located in tail end area in Taluka Talhar, where 'Sultani Wah' canal irrigates the fields. Earlier this irrigation distributary was famous with the name of 'Moolchand Wah' around 4 decades ago.

Before the project intervention, he used to cultivate some fodder grasses, legumes and rice crops on his land, but due to water scarcity since couple of years, he left his land uncultivated. Punhal has only a land of 2.5 acres, two buffalos and three goats. It is the only asset he has. According to Punhal, climate change has further aggravated the farming in the area.

***"We are left with a few options to grow fodder and some vegetables", says Punhal."***

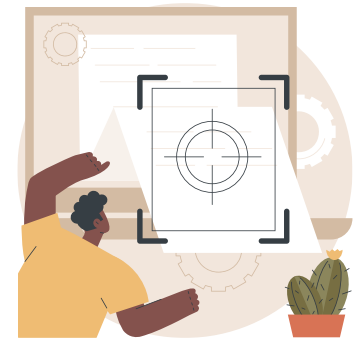
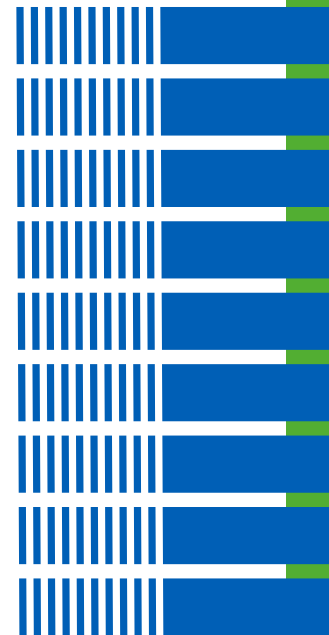
***"For last three years, there have been acute water shortages in our area, and we are uncertain of getting required water in future too", he added.***

Amid this uncertainty of water and heat stresses, they have found efficient irrigation, and improved soil and crop management techniques and practices.

***"Thanks to ACF and LHDP, who educated us of practicing agriculture innovatively. Previously, we never knew about growing guava in this area", said Punhal***

while thanking ACF and LHDP, Punhal and one of his neighbors were found happiest to have lush green trees of guava in their fields, which they have grown with the technical assistance of SKALA project of ACF and LHDP.

The SKALA project directly supports around 10,000 poverty and drought-stricken households in three Tehsils of district Badin. Promoting resilient agriculture practices in the area is one of the project strategies to enable farmers withstand water scarcity and earn the dignified livelihoods. The project is in progress since 2019. Punhal was provided with healthy tree saplings of 'China Golo' variety of guava by the SKALA project together with training in crop management. The soil samples collected from his land were analysed in a soil laboratory in Government and as per soil quality, he was educated to apply required quantity of water and fertilizer on the Guava crops.



# SETTING TREND OF GUAVA CULTIVATION IN WATER SCARCE AREAS

## Innovative ways improve the crop production and management

Guava is a subtropical fruit, common in Pakistan. In Sindh, Larkana, Dadu, Shikarpur and Hyderabad districts are famous for good quality guava production, where excellent pear-shaped guava with smaller seed core is grown on large scale. Though Badin is not the belt for guava production, but SKALA project has chosen some agri-pockets of district for guava production based on the technical surveys and soil analysis. This has so far proven successful.

Guava is a nutritious local fruit. In addition to its high Vitamin C content, one whole guava contains 37 calories, 1 gram fat, 1 milligram sodium, 8 grams carbohydrates, 3 grams fiber, 5 grams sugar and 1 gram protein.

The SKALA Project planted total 1000 tree saplings in one acre, out of that, more than 900 survived. It is highly successful rate of survival in the area where trees fail to survive after the planting season generally due to lack or poor post-planting care and proper watering. Farmer led farm management approach was quite evident.

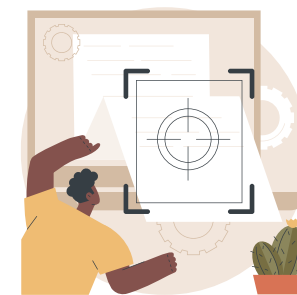
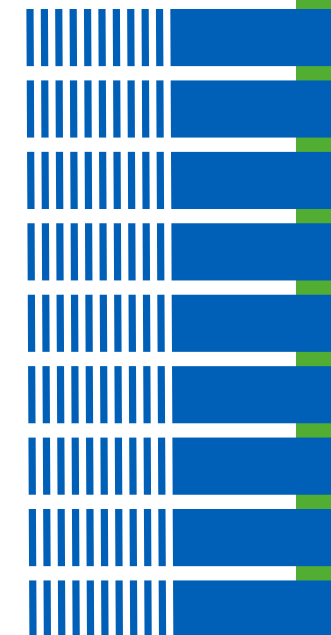
***“We applied the high-density plantation method (HDP) and maintained the row-to-row distance of 6 feet and tree to tree distance of 4 feet as per standards”, says Mr. Zahoor Paliyo, Project Manager of SKALA project, who himself is an agriculturist.”***

All together, ACF and LHDP has demonstrated guava on 15 acres in various water scarce areas of Badin”, he added. High-density plantation would result in maximizing unit area yield.

Guava (*Psidium guajava* L.) belongs to the Myrtaceae family; it has more than 80 genera and 3000 species dispersed throughout the tropics and subtropics, mostly in the America, Asia and Australia (Nakasone and Paull, 1998). Guava tolerates a wide range of climates, provided they are frost-free (Menzel, 1995).

Among the major fruits of Pakistan, guava occupies the third position after Citrus and Mango in terms of area. 1,94,700 hectares are under Citrus, 90,900 hectares under Mango and 56,800 hectares under guava. Area-wise it is more than the combined area under Apples, and Peaches (49,000 ha). The reason for covering huge area throughout the country lays in the fact that guava is the hardiest, drought tolerant and stands with the pH ranging from 4.5 to 8.5 (Singh, 1990). Production-wise, it ranks fourth after Citrus, Mango and Bananas in Pakistan. A mature tree gives production of 20-24 kg of fruit in the season. So Punhal and his other fellow farmer are confident to get maximum production of around 20,000 kg in a season from one acre land.

This strategy of growing drought resilient orchards in water scarce areas is widely appreciated by the Agriculture Department officials and farmers of Badin, because guavas can survive dry summers with no water, although they do best with regular deep watering.



# UNDERPINNING PREVENTION AND CONTROL OF ANIMAL DISEASES

## Underpinning prevention and control of Animal Diseases



Situated in arid part of district Badin, the village Chakar Khan Panhwer is some 50 kilometers away from the district headquarter, and home to about 300 households with around 1600 animals. Almost every family holds 5-7 domestic animals, mostly cows, goats and sheep for food and income. It is one of the 30 villages where ACF through its SKALA project carried out blanket coverage of livestock vaccination and deworming.

Though livestock rearing is a vital component of the rural household economy in most parts of Sindh province, farmers hardly get adequate veterinary services, impacting the health and productivity of their animals. To underpin prevention and control of major livestock disease outbreaks, ACF executed livestock vaccination and deworming campaigns together with the community institutions, and trained youth and the Government livestock department.

The SKALA Project, implemented by LHDP, has vaccinated 58,016 animals, including 40,401 small ruminants, predominantly goats and sheep and 17,615 cows and buffalos through engaging 'Community Livestock Extension Workers', who were trained by the project to ensure blanket coverage and to make the extension services readily available in the area.

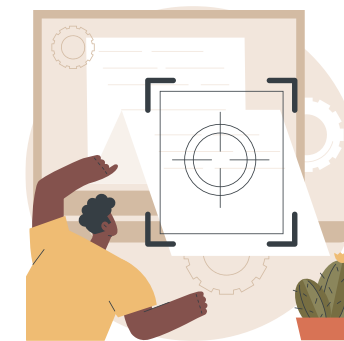
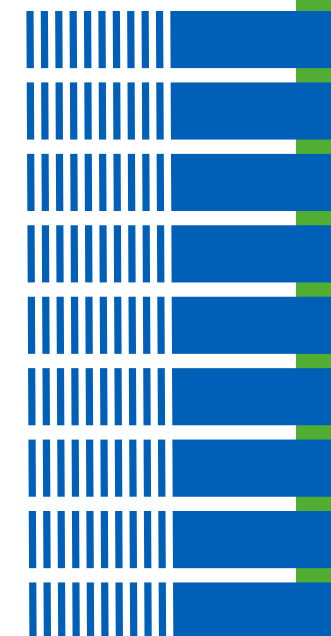
Anthrax, Peste des petits ruminant (PPR), Contagious pleuropneumonia and Hemorrhagic septicemia (HS) are common animal diseases in the area. Enterotoxaemia is very common among small animals. Only the PPR is a common contagious disease in small ruminants (sheep and goats), which has the capability of destroying whole of the immunologically naive host population by provoking epidemics and pandemics

subsequently damaging economy, undermining food security and livelihood of the poor farmers. Pakistan Agricultural Research Council estimates that PPR accounts for economic losses of PKRs. 20.5 billion annually in Pakistan.

***"The market rate of our animals has increased by around 20-22 percent after vaccination and deworming",*** says Aashiq Panhwer of village Chakar Panhwer, who owns seven animals.

Farmers hardly used to vaccinate their animals and only bring veterinary doctors for the cure when they observed symptoms, but now most of the farmers have opted for it as a regular practice. "ACF and LHDP have made us realize that the meager amount spent on vaccinating animals could secure our animals, which are the only productive asset we have.", says another beneficiary Ms. Sahiba, wife of Ali Muhammad from village Chutto Qambrani, whose four goats were vaccinated by the project.

The project has contributed to vaccinating 4 percent of the district's total livestock population, which currently is 1573,510 heads as per the statistics shared by the livestock department Govt of Sindh, in the shortest period of six months. It signifies the efficacy and efficiency of the community led campaign for protecting rural people's assets.



# NOURISHING THE FAMILY AND NEIGHBORS THROUGH FRESH VEGETABLES AND PROMOTING HEALTHY LIVING

## A story of Nanju who adopted healthy ways for living



### Kitchen Gardening Helps Fight Malnutrition

“Vegetables helped me fight malnutrition. I am collecting the vegetables four to five times a week which is sufficient to fulfill the required vegetable needs for my family,” says Nanju, one of the beneficiaries of the PVDP (Pakistan Village Development Program) kitchen gardening intervention in Soore Jo Tar Village in Union Council Vejhiar, Tharparkar District of Sindh Province. “I even gave vegetables as gifts to my neighbors and relatives,” she added.

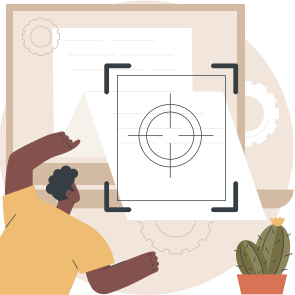
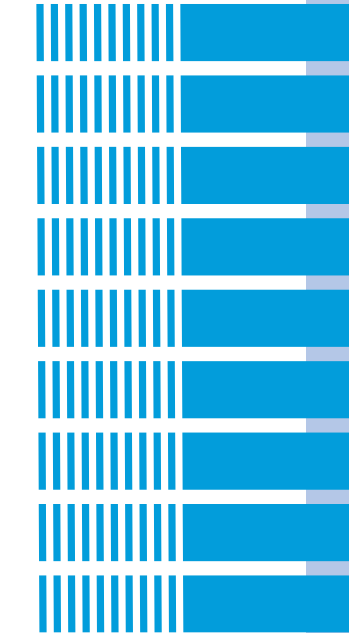
Nanju practiced kitchen gardening together with 29 other women in the village after receiving kitchen gardening seeds and guidance in sessions delivered by PVDP (Pakistan Village Development Program) in November 2020. Nanju and her husband Dongro have six family members including two daughters, one son and one daughter in law. Dongro is elderly and was nurturing goats. Their only son, Haresh Kumar, is married and earns about 6,000 to 7,000 PKR per month through his job at a petrol pump outside of the district and must manage all his expenses with this small amount.

Their two daughters, Soort (18) and Papoo (20), and daughter-in-law Koshila (27) do handicraft work and embroidery in their free time, they use it for their home, they don't work it commercially as they can't earn something. District Tharparkar is an often drought affected area, and the recent COVID-19 lockdown also impacted the well-being of communities there. During the lockdown, transport was unavailable, there were no job for daily laborers in the markets, and the prices of livestock fell, making it difficult for people to sell their animals to meet their food needs.

In her 20 ft by 15 ft kitchen garden, Nanju was able to produce enough vegetables for her family to use as to diversify their food supply. Due to this, her family saved approximately 3,000 PKR per month by preparing fresh and self-grown vegetables. In addition, she added that the produced vegetables are healthier for the family as they are clean, fresh, and organic.

Dongro supported the productivity of the kitchen garden to protect the vegetables from the goats and other domestic and wild animals. “The kitchen garden provides a food safety net for the family, and it's fun to cultivate and store the vegetables which I grew with my own two hands,” says Nanju. Together with her husband, Nanju plans to increase the area of land use for growing vegetables next year. She hopes that one day her vegetable garden will help the family have the better future she has always dreamed of.

“**The kitchen garden provides a food safety net for the family, and it's fun to cultivate and store the vegetables which I grew with my own two hands,**” says Nanju.





# Protection



## PROTECTING PEOPLE FROM ANY KIND OF VIOLENCE BY PROVIDING QUALITY SERVICES

### *A story of Laila who transformed her life after seeking support from Handicap International*

Laila is a 33-year-old woman, married, with 5 children and resident at Refugee village Kababyan. She is a GBV survivor. Her husband was a drug addict who would subject her to domestic violence. Day by day, the intensity of abuse increased as did his addiction. Laila reached out to our psychologist at Kababyan Camp. At the time of her first visit, she was bleeding, stressed and hopeless to the point that she was contemplating suicide to escape the abuse.

HI's psychologist provided psychological first aid and other mental health services to help Laila overcome stress and develop coping skills. She was also guided about rehabilitation center for IDU through Social Welfare Department Government of Khyber Pakhtunkhwa – a drug center to consult for her husband.

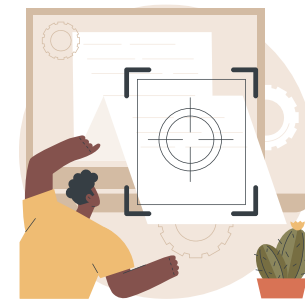
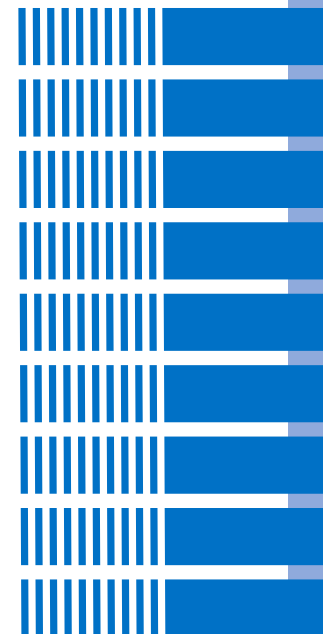
Besides, she requested the psychologist to refer her husband to the male psychologist for counselling. Her husband was sent to HI's male psychologist for psychoeducation and awareness about mental health through group awareness session. He was called for an individual session – with his consent and the surety of confidentiality – to assess his level of insight and willingness to receive services from anti-drug addiction and detoxification center.

Laila was referred to HI's LHV for her reproductive health requirements where she was educated about birth spacing as her health and financial condition did not allow her to have more children especially when there were limited sources of income. She was also referred to HI's GBV focal person where she was educated on women rights and how to prevent herself from gender-based violence by applying the safety plan that she was guided about by the GBV team.

Due to her husband's abuse, Laila had lost movement in her hand. Hence, she was referred to HI's physiotherapist to enable movement in her hand. With daily exercises and frequent psychotherapy sessions, Laila regained movement in her hand. This was the first true instance where she felt empowered enough to understand that she can at least try to take her own decisions and actions to improve her condition.

Thanks to HI's psychologists' efforts, Laila's husband agreed to consult anti-drug addiction center. He was referred to a center where he was screened for HIV and HCV. Later – within a week – he was admitted in the rehab center for anti-drug addiction therapy. This stopped the cycle of abuse for Laila and granted her some safety and independence in her life.

“  
***Laila shared that she was noticing a major change in her life, after years. She was now aware of her rights and could cope with daily stressors. Laila strived to take control of her life; today, she exhibits hope of a better future.***”



# FIGHTING WITH STRESSFUL ENVIRONMENT BY EMPOWERING HERSELF SOCIALLY AND ECONOMICALLY

*A story of Arfa who is coping with challenging environment and empowering herself economically and socially*

Arfa is a 20-year-old resident of Jalala Refugee camp in Mardan, Pakistan. She lives with her mother and 3 sisters. She has no traditional male support and income source in her family; however, today she runs her kitchen and supports her family with her tailoring skill. She has become the only bread winner for her family. Life had not been so smooth for her previously. She went through a rough time but today, Arfa calls herself “the strongest lady” of Jalala camp.

Few months ago, Arfa contacted the mental health team of Handicap International (HI) after attending one of the mental health group awareness sessions in the community. Arfa was in poor mental health state when she was taken in for the first individual counselling session by the psychologist of HI. She had previously consulted a psychiatrist for her mental health issues; however, she complained of little to no improvement. Arfa believed that after the death of her father – her life turned completely miserable. Being the 1st born in family, all of responsibilities fell on her shoulders as she had no brother.

During the first session, Arfa presented signs of low mood and hopelessness. She hinted at committing suicide and had lost her belief system completely. She was so stressed that she could not stop crying in the first session. The psychologist gave her ample time for catharsis enabling her to speak without getting overwhelmed.

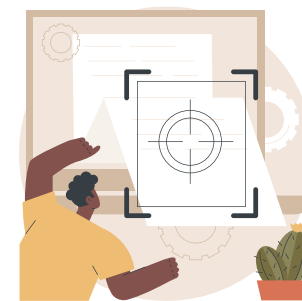
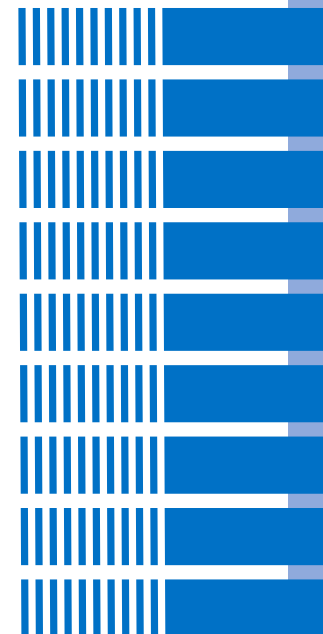
She was asked to share her fears one by one, and the biggest fear was her problem of income generation as being a woman, it was a challenging task for her. Later, with the help of the psychologist, she realized that most of her fears were a result of daily stress, and she could use her sewing skills to generate income for her family and herself.

After receiving several psychological sessions which were geared towards decision making skills, Arfa became emotionally aware and confident. She decided to make use of her tailoring skills and stitch clothes in her camp for refugee women. She started to participate in the activities of ‘normal’ life, generate an income that could help her afford necessities – she also enrolled her younger sisters in school.

“

***Arfa did it! Now Arfa is emotionally stable, strong, and in control; she recommends other women to seek help when needed and there is no shame in being weak for a while, but the stronger ones get up!***

”



# FROM HOPELESSNESS TO HOPEFULNESS

## *A story of Irfan who has transformed himself through psychosocial support*

Irfan is a Pakistani health technician and resides in Akora khattak, Nowshera. He is the sole earner of his family. Life was difficult for Irfan since his father suddenly fell ill and his father's responsibilities were on his shoulder. Since then, he was looking for a job without success. He believes that he was rejected from jobs multiple times because he was unwilling to bribe the people in power. Family would also blame him for not availing the opportunities. Irfan felt dejected, he felt his purpose of life slipping through his fingers.

Despite all issues, Irfan took an initiative. He started working as a daily wager during night shifts at a vegetable market. The hard part was facing the family and disclosing the nature of his new job. He decided against it and started pretending in front of his family that he had a night shift job at a hospital. However, the constant effort to hide his true job started to prove a burden. Deep inside, he was miserable and developed thoughts of suicide; he would cry himself to sleep almost every night. He started losing interest in life. He reduced interaction with his family and friends and remained aloof. As a result, his social life and self-care were non-existent.

Meanwhile, Irfan was contacted by Handicap International for an ongoing Primary Training on Mental Health. Thinking of it as an opportunity to make the best use of his free time during the day, he attended 10-day course. During training, he came to know about mental health, importance of self-care and actual goals of life. He met new people from other communities and listened to their problems. This was a moment of insight for Irfan. He realized that everyone around him had problems, but they were dealing with issues in their own way. He self-evaluated his dilemma, the condition of his job and looked for solutions.

At this point, Irfan's life took a positive turn. He started self-care and valuing himself and would actively participate in every activity of the training. After the completion of training, Irfan did what he never thought he would be doing; he took another initiative and delivered awareness sessions in schools regarding mental health and suicide prevention.

From this point onwards, he witnessed the fruits of his efforts. The District Youth Officer of Nowshera saw pictures of his sessions on social media and offered him a project on mental health awareness in colleges of Nowshera. He is satisfied and content now and grateful to his Trainer from Handicap International for bringing him back to his life. Today, Irfan is helping young people fight mental health issues and empowering them with knowledge, self-awareness, and the spirit to take initiatives in life.

## “ IRFAN TESTIMONIALS ”

*“When I was attending the training, it kept getting better each day. The topics discussed were very powerful for me. I cannot thank you enough”*

*“The most important thing in life is love for one's life. My parents were unhappy because of me. I would pay no attention to self-care or my dressing. I had no value in my own eyes. You made me realize through this training that I can do so much, and I am a talented person”.*

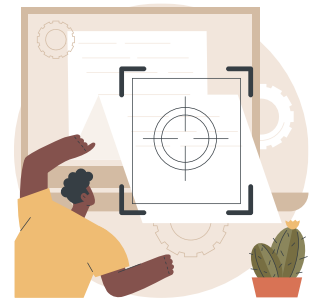
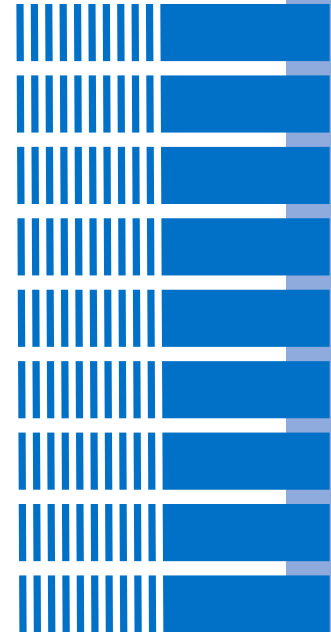
*“By the end of the 10th day of training, I noticed visible changes in myself. My dressing, my way of talking, and social interaction improved.”*

*“I can deal with injustice now because I know that I am a talented person, and I can make my way through these challenges”*

*“Through my own example, I am teaching young boys and girls about mental health and how it can impact one's life”*

*“Till yesterday, I felt I had no value, but today because of what I learnt, the District Health Officer has assigned me tasks on mental health awareness. I know my worth now”*

*“I was taught about mediation and how conflict can be resolved. Through this, our two families are now together, and we were able to clear our misunderstanding”.*



# ENHANCING WOMEN LEADERSHIP BY PROVIDING THE ALTERNATIVE WAY FOR DISPUTE SETTLEMENT AT COMMUNITY AND DISTRICT LEVEL

*An innovative initiative of Oxfam which is ensuring women inclusion to resolve dispute on timely manner*

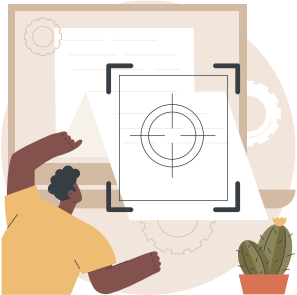
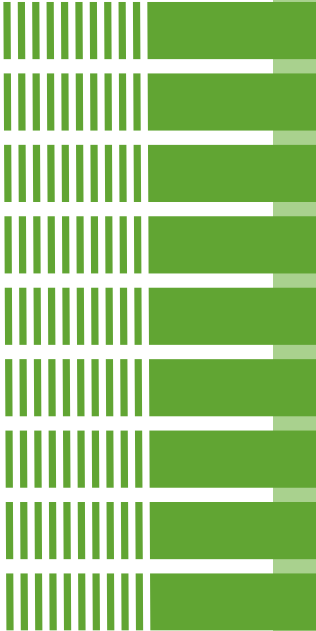


Through its “Addressing Root Causes” (ARC) project, Oxfam in Pakistan established four cadres in Khyber Pakhtunkhwa (KP) to help empower citizens, especially women and other marginalized groups, to become agents of social change and increase their awareness on legal rights and justice mechanisms. Oxfam in Pakistan and its implementing partner, LASOONA, was advocating for the inclusion of women in these cadres and mobilizing communities into the Dispute Resolution Committees (DRC) established by the police department as part of Police Act 2017 in ARC intervention districts of KP.

Through this, functional linkages with the police department in district Nowshera have been established, ensuring for active women representation in the local DRCs. The committees provided a platform for the resolution of minor disputes including some civil cases under the supervision of local police. With Oxfam and LASOONA’s active influencing, eight women who were part of the ARC project’s Ba-ikhtiar groups and mobilized communities were notified as committee members in three DRCs in Nowshera. Five of them are part of the Ba-Ikhtiar Groups, while three of them were active members of the ARC project’s legal awareness sessions.

While traditionally hemmed in by socio-cultural barriers and challenges in claiming their fundamental legal rights, these eight women will now be an active part of dispute cases and decision making, breaking barriers towards access to justice through their formal inclusion in police department’s Dispute Resolution committees. This is the first instance of women inclusion in police department DRCs in KP province and this was made possible through comprehensive paralegal training under ARC project leading to sustainable inclusion of citizens, especially women, in the justice sector in Pakistan.

Under the ARC project, Oxfam formed “Ba-Ikhtiar” groups with its partners, SAFWCO in Sindh, LASOONA in Khyber Pakhtunkhwa, and Strengthening Participatory Organization (SPO) in Punjab. We are creating citizen groups and mobilized communities through these groups, linking women, youth, and marginalized groups with lawyers, local police stations and other justice institutions and justice service providers to help them exercise their legal rights and have equal and meaningful access to justice.





***"I used the skills I learned during the training to run and promote my business. With time, I prioritized procuring the most used supplies in the village which was rice and rice flour."***

During rice season, Farzana had the foresight to purchase rice and store 350 kilograms for flour.

***"I get the rice flour milled from nearby machines, allowing me to earn more profit."***

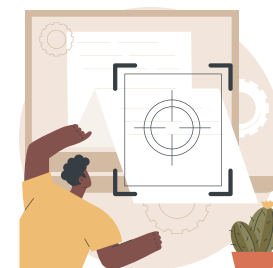
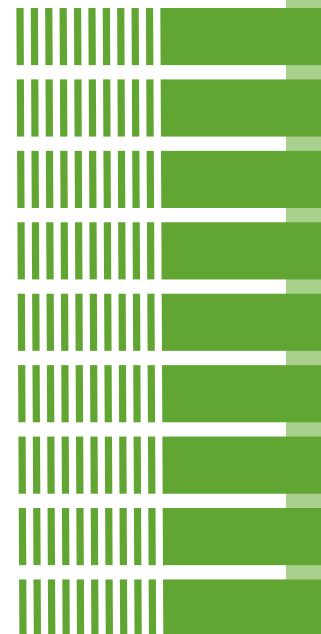
Farzana was able to save PKR 12,000 and purchased a goat. She believes it will be a good source of income for her in case of emergencies. Farzana shared her sentiments,

***"I am happy because I cherish the smiles on my children's faces as they look at our shop. Now, my family's survival is not a struggle for me. I have plans to expand my business and it will help me educate my children to make them upstanding members of the community. This support has changed my life."***

The Building Resilient Communities in Pakistan (BRCP) project works on providing alternate livelihood opportunities to the climate change-affected agriculture sector in Sindh, Pakistan. It is being funded by the Australian Government through the Australian NGO Cooperation Program.

Farzana and her four children reside at her father's house in the Ghulam Ali Jamali village of District Badin. She was in an abusive marriage over money and had to rely on family members for financial support. To earn enough to sustain her children's basic needs, Farzana started working as an agricultural labourer where she would pick chilies and cotton and harvest rice and wheat. Although this allowed to better meet the nutritional needs of her children, agricultural work is dependent on seasonal crops. In off season, she started textile work, applique and traditional "Rilli", and sold her products to feed the family.

Farzana was looking for support for better ways to support her family when she was selected to open a Kiryana Shop (convenience store) by the Village Disaster Management Committee (VDMC) which is one of the initiatives of Oxfam. Following the training, she received supplies for the Kiryana Shop in July 2021 and established her own store in the village.



## RESTRAINING GIRLS FROM CHILD MARRIAGES

*A story of saba who prefer education rather than getting married in early age*



Saba was in 7th Grade when she had to drop out of school due to the overwhelming financial burden that fell on her family. With her brother losing his job due to the onset of the pandemic, her mother was the family's sole breadwinner. The family was already struggling due to her father's drug addiction, so they decided to marry her, to help reduce the financial stress.

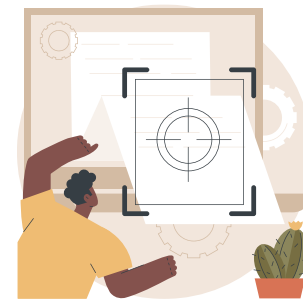
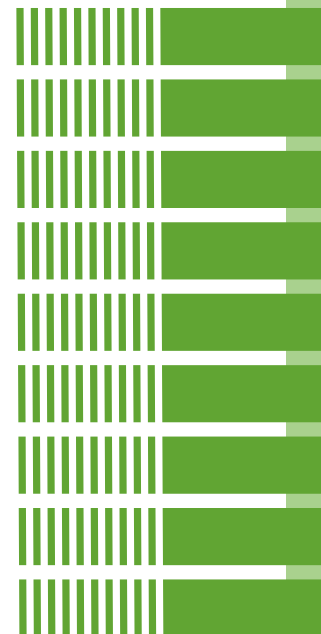
During this time, Saba was part of training sessions arranged by Bedari, at their Child Protection Committee (CPC) premises. These sessions were being carried out under Oxfam's 'Marriage! No Child's Play' project. This project was funded by the Ministry of Foreign Affairs, Netherlands. Through these sessions, Saba was aware of the harmful psychological and physiological impacts of early child marriages on adolescent girls. She knew that getting education trumps early child marriages for the healthy development of any child.

She approached one of her trainers to convince her parents. The trainer explained to her parents about the Punjab Marriage Restraint Act 2015 and the risks associated with early child marriages. As a result, the parents delayed her wedding, and convinced to resume her school after it reopens.

“

***"The workshops have had a huge impact on our village. Before, they used to marry girls at a very young age and did not let them study. Now, there is huge reduction in this practice. There were three other girls in a similar situation as me, and the lady from Child Protection Center also convinced their parents to stop the early marriage." – Saba.***

”



# BREAKING GENDER STEREOTYPES AND SETTING A NORM FOR GENDER EQUALITY

## Reforming Gender Equality in Afghan Refugee Villages

“Expanding MHPSS and Strengthening GBV Prevention and Response for Afghan Refugees in KP Province” is a three-year project funded by Pakistan’s Bureau of Population, Refugees and Migration (PRM). The project began in 2019 and aims to increase GBV prevention and response services and mental health and psychosocial support services (MHPSS). Together with International Medical Corps, PRM is working to promote gender equality and improve the protection of women and girls.

Over the years, previous responses to GBV had failed to create lasting change and only reinforced cultural expectations. They continued to seek men’s permission to teach women new skills. As a result, gender norms remained, and women were still at risk. To succeed, the project is addressing the root of the problem: power dynamics between men and women.

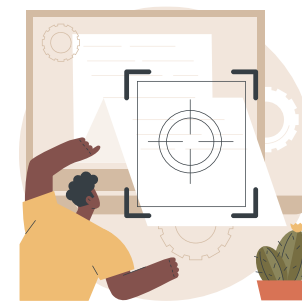
23 years old Abdullah is an advocate for women’s rights and combatting gender-based violence (GBV). However, like many in his village, Abdullah didn’t always believe that the duties of men and women could be equal. He believed that their responsibilities were separate women did household chores while men were the heads of the family, making decisions and earning money.

This belief extended even further. Men and women didn’t just have separate responsibilities; women did not have agency over their actions. They were tied to their husband’s decisions, lacking authority and support. “I used to believe that women could not do anything without the consent of a man,” says Abdullah.

The disparity between the rights of men and women was an urgent issue in Abdullah’s village. Women are vulnerable when social and moral structures break down due to conflict; as people seek control over their circumstances, the likelihood of GBV increases. Over time, it became clear that action was needed. That was when the project team stepped in to help.



Photo by International Medical Corps Pakistan  
Abdullah takes part in the discussion on how to control emotions during one of the EMAP session in Khyber Pakhtun Khwa Province



# BREAKING GENDER STEREOTYPES AND SETTING A NORM FOR GENDER EQUALITY

## Reforming Gender Equality in Afghan Refugee Villages

With support from Pakistan's Bureau of Population, Refugees and Migration (PRM), International Medical Corps is implementing the Engaging Men Through Accountable Practices (EMAP) program in several refugee communities in Pakistan, including Abdullah's.

The EMAP program unites men and women through conversation. Over the course of 16 sessions, participants discuss gender, sexuality and power. Together, they make crucial steps toward valuing women equally and combatting GBV. As men explore how they have been socialized and the gendered impact of conflict, they realize how they can change their behavior.

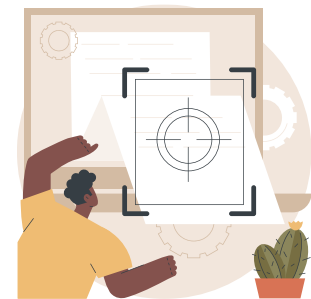
At the seventh session, Abdullah listed the daily activities of women and men to understand power dynamics in the home. He realized the burdens that a woman carries every day—burdens that Abdullah now addresses in his own home with his wife after discussing decision-making with other participants in the program.

***"I listen to and ask for the opinions of the women in my house, to which they still hesitate. But I am hopeful that I will make them comfortable enough to express themselves freely in front of me, and we will eventually make decisions together,"*** he says with a smile. The journey hasn't been easy. Abdullah also recognized the different risks that men and women face when confronting gender roles.

***"Just as women face risks in their community for coming out of the kitchen, men face criticism if they respect women's choices,"*** he explains. "The community and the other men do not approve of being considerate to women."

These risks haven't held Abdullah back from challenging his beliefs on gender norms. He continues to listen, reflect, and work toward establishing equality in his community.

***"I truly feel fortunate for getting the opportunity to realize my behavior and attitude toward women in my family, especially with my wife,"*** he says. ***"Honestly, in the beginning, I was not sure that I would be able to change my perspective, but gradually, I started to reflect on how gender and power affect our lives".***



# PROVIDING RAY OF HOPE TO PEOPLE WITH DISABILITIES DURING PANDEMIC

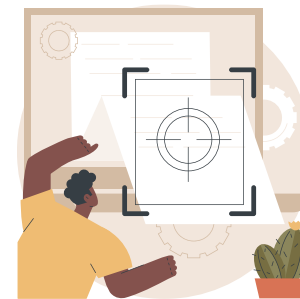
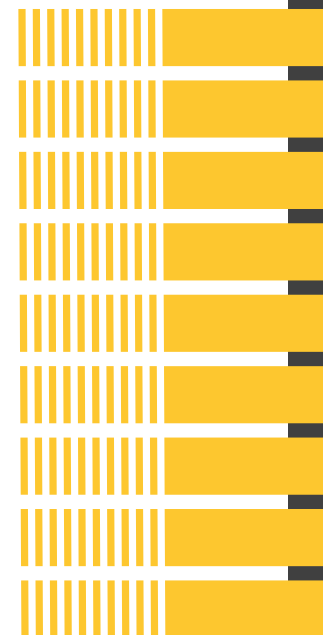
## Mainstreaming of Persons with Disabilities in COVID-19 Response

Sunny skies, grassy slopes, and a tarred road – while these drawings commonly feature a racing red car, the Crayola scribbles on the grimy wall starred a wheelchair, similarly crimson and flaming and bright. At Dar ul Sukun, everything was just a tad bit special. In the dimly lit room, the children all had lively smiles but also distinct needs, their play was spirited but with limited mobility, and they personified the will to thrive but had many more hurdles along the way – with a new one just added to the list. After all, COVID-19 was still no different here.

Dar ul Sukun is a center that provides specialized care, rehabilitation, and protection to children with disabilities. They all have significant physical or mental impairments. Most of these children belong to impoverished backgrounds or have been abandoned by families unable or unwilling to accommodate their lack of normative ability. Already grappling with disability in an unforgiving society, these children and their caregivers were caught completely unaware by COVID-19 in the notorious locality they reside in.

This branch of Dar ul Sukun is situated in the heart of Lyari in Karachi, Sindh. This is the location where the IRC, on the request of the provincial Health Department, established a level II PCR laboratory at Lyari General Hospital – a state of the art establishment meant to support not only the main hospital but also satellite facilities around the area.

The COVID-19 facility was inaugurated and a pathologist, three Medical Officers, three nurses, and eight lab technicians were hired and installed in the facility, managed by IRC's on-ground partner Medical Emergency Resilience Foundation (MERF). This was the requirement and agreed intervention under the funds allocated by European Civil Protection and Humanitarian Aid Operations (ECHO), to manage the caseload of COVID-19 and prevent the overburdening of the healthcare system.



# PROVIDING RAY OF HOPE TO PEOPLE WITH DISABILITIES DURING PANDEMIC

## Mainstreaming of Persons with Disabilities in COVID-19 Response



However, a quick analysis of the demographics of the visitors confirmed the intuitive truth: those flocking to the facility already had the know-how and awareness of COVID-19. That is how they knew to seek help here in the first place.

Those lacking the normative ability, socioeconomic standing, and health-related sensitization were still floundering – even the children with disabilities practically next door.

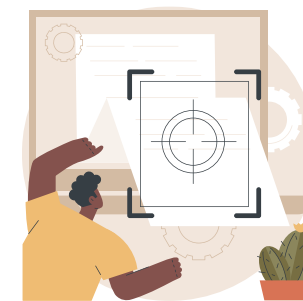
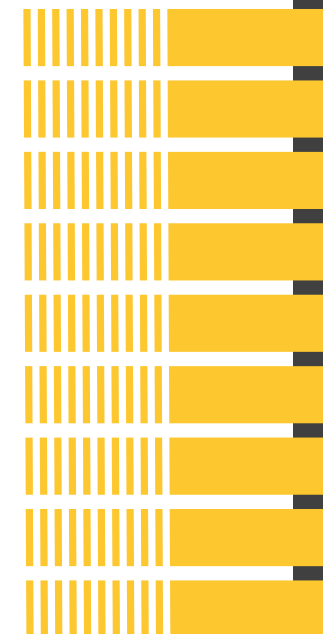
To make the project truly inclusive and help those with the most critical needs, IRC took the initiative of recommending further outreach and MERF teams reached out to Dar ul Sukun to offer COVID-19 related support services. The center requested the screening of all related residents for clarity on the scale and gravity of the COVID-19 crisis in their midst. Almost half i.e. 209 out of the total 450 tests came back positive – representing a ticking time bomb for the rest.

Depending on their condition, these positive patients were either admitted to critical care at the IRC-supported Lyari General Hospital or referred for home-based support at the Dar ul Sukun center itself. In both cases, they received special attention and consideration, with COVID-19 healthcare tailored to their physical or mental impairment. An on-site specialist ensured Mental Health and Psychosocial Support (MHPSS) throughout this understandably grueling process for the children as they fought the illness bravely.

Of the 24 admitted in critical condition, all made a full recovery!

Remarkably, two dozen lives were saved solely because of the proactive outreach of fishing out those in need, instead of waiting for them to waltz in the door. This represents a truly inclusive approach to Healthcare: reducing the barriers to accessing it for those disadvantaged and failed by the mainstream system.

In a pandemic, it is easy to focus on the mainstream, as there is no shortage of acute suffering to address. However, inclusion means to go above and beyond to cater to those typically missed out. As for the children, they are all back in their center, with one less hurdle, free once more to scribble more backdrops of sunny skies for their escapades as they attempt to zoom through life – with just a little help from us.





# Winter Emergencies



## BRINGING HOPE AND SMILE IN SEVERE WEATHER CONDITIONS

### *A story of Hajra who was supported to cope up with extreme weather*

The remote Leepa Valley in AJ&K known for its astounding landscape and snow-clad rice paddies. Surrounded by high mountains, Leepa valley is not only hard to reach during winters but also a challenge to live during that time. With the fears of cross border firing under harsh weather conditions, the struggles of local communities are unimaginable.

Hajra Bibi, who is a mother of three and a widow has been through the most painful realities of life. All her children carry different types of disabilities. The eldest son Rafique is intellectually disabled while Rubeena who is 22 years old has speech impairment while the youngest Mehwish has stunted growth.

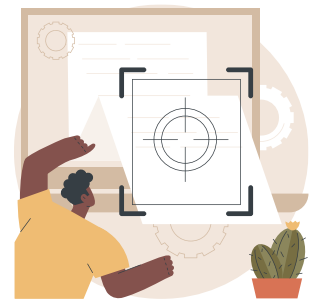
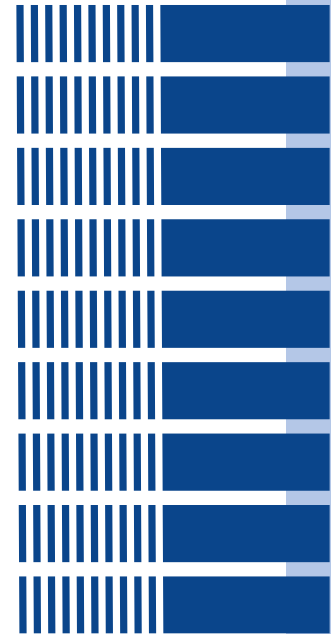
***“Have you seen this area? Look at the surrounding mountains and the snow, what I can do under these circumstances? There are no crops, no other source of income for us. It’s either the relatives or the neighbors who help me.”***

The local communities migrate to other areas during the winters; however, that is also connected to the financial stability of the household. Families like of Hajra solely rely on home fed chickens and some maize crop. Water availability is a huge issue as women must fetch water from a spring at a 20 mins walk from the village.

***“In this freezing cold weather, I go and fetch water twice a day. Whenever the firing starts, I take my children and rush to the nearby bunkers.”***

Traumatized, wearing a white shawl and teary eyes, Hajra seeks help with necessities of life so her children can live a better life.

***“You came to us with all these blankets, jackets, mats, and shawls, believe me no one comes here and thinks about us”,*** said Hajra to the representative of Islamic Relief. Islamic Relief Pakistan through its winterization project reached out to more than 600 families in Leepa with the support of local administration with warm clothes, blankets, floor mats, sweaters, and shawls to provide comfort in these testing times. Hajra and many other households need development efforts and initiatives in Leepa and other remote parts of AJ&K.





# Shelter and NFI

## PROVIDING ESSENTIAL RELIEF EQUIPMENT TO THE FLOOD AFFECTED FAMILIES IN GWADAR

*Relief equipment is bringing smiles on flood affected people*



Asia Usman is one of the affected families in Gwadar who lives with her 4 children. Her husband is a fisherman and daily wager.

***“I lost everything in the flood water”,*** says Asia with tears in her eyes. In her community, there is not a single family who has not lost their belongings or home.

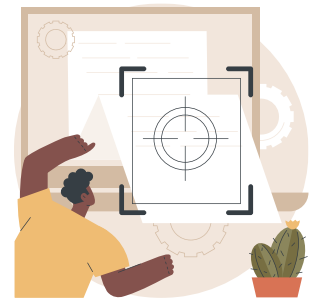
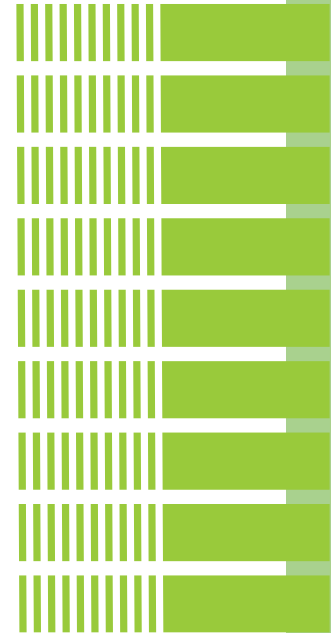
Natural disasters devastate the communities – destroying homes, livelihoods and leaving families in crisis and unsure of the future. Pakistan is prone to such disasters and many communities know how their homes, livelihoods and their lives are often at risk.

From January 5-6, 2022, the continuous rain left Gwadar flooded and people in crisis. The emergency was declared in Gwadar and right after that the emergency response team of Muslim Aid Pakistan was mobilized.

Muslim Aid Pakistan first carried out rapid assessment to support families affected by the flood in the most effective and efficient way possible. Families were identified, given a token, and informed of the time and place when they could collect essential goods such as kitchen utensils, hygiene kits, a tent and other Non-Food items (NFI)s. With the financial assistance of START Network, Muslim Aid Pakistan (MAP), through its partner organizations HANDS and BSDB providing the emergency relief to the affected population in Gwadar.

Keeping the token safe in her hands, Asia came to the collection point after almost 12 minutes' walk from her home. When her name was called to receive the support package, her face lit up with a smile.

***“This flood has brought devastation for us, and we have suffered multiple losses. But we are very grateful to Muslim Aid Pakistan who is helping us to survive with dignity and hope”,*** says Asia.



# FINDING HOPE AND STRENGTH

*Survivors of Earthquake begin the journey of recovery and rehabilitation in District Harnai, Balochistan*



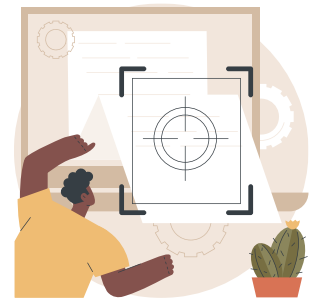
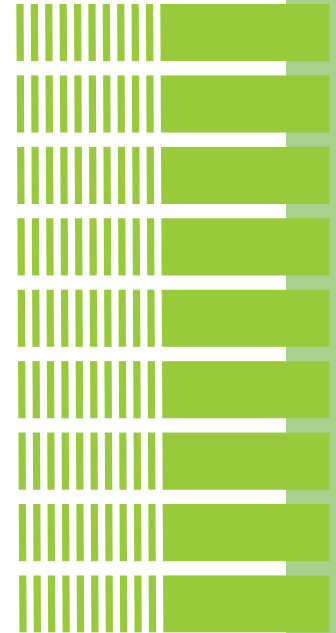
On October 7, around 3 am, a 5.9 magnitude earthquake with a depth of 9 kilometres, followed by a 4.9 magnitude aftershock with a depth of 12 kilometres, struck the district Harnai in Balochistan, causing widespread devastation.

Murad Bibi and her grandson were buried by rubble when the earthquake hit. Her elder son couldn't get them out at first but then with the help of the neighbour, they were able to dig them free. She was shaken but happy that her family is alive.

Murad Bibi lives with her son and his family in a small village – Deewan Shah of District Harnai of Balochistan.

Her house collapsed after the very first tremor. And then they were trapped. It was so fast that she cannot even describe it. Though she doesn't have many scratches on her body but has a backpain. She has 14 grandchildren, and her son is the sole bread earner. With having a large family and their needs, the devastating earthquake made the situation worse for her and the family. She was very worried that how they will rebuild the house. Muslim Aid Pakistan is helping Murad Bibi and her family to rehabilitate her house after a careful assessment.

***"I am very grateful to Muslim Aid Pakistan that they are helping us to rebuild our home that we have built with so much care and love, without this support we were not able to do it on our own with less resources"*** says Murad Bibi



# EMPOWERING PEOPLE TO HAVE THEIR OWN SPACE FOR LIVING

*A story of Meena who build her house with the support from Malteser*



Livestock is the most precious asset a vast majority of villagers possess in Jam Nawaz Ali. So precious that they don't even think about selling their livestock short of a need as big as a life-saving effort. But Meena and her husband Raju – both farm labourer – sold their only cow six months ago. ***“Must have been done to meet a dire need,”*** Meena was asked. “O yes,” the jolly middle-aged woman responded in a resounding affirmation. “We decided to sale our cow the very day we received Rs. 36,000/- from Malteser International to rehabilitate our house, which was fully demolished in last monsoon's torrential rains,” Meena divulged the details.

Although Rs. 36,000/- is quite a hefty sum as humanitarian aid considering the local socio-economic conditions and prevailing practices, still it is not enough to rehabilitate a partially or fully demolished home, no matter how modest. Therefore, the beneficiaries had to add to aid from their own resources, which most of them did diligently – Meena and Raju met the extra expenses by selling their cow. “Having a roof over our kids' heads is most important thing for us. We miss our cow but Raju is now working extra hours so, hopefully, we'll be able to buy another cow in a year or so,” she expressed her strong resolve.

***“Would it not have been better had the Malteser International paid you full sum required to rebuild your house,”*** Meena was teased to eke out a negative remark for the aid agency. “Oh no, not at all,” she dismissed the idea without a second thought. “Look, nobody else – not even the government – came to our rescue last year when we were forced to spend nights under open sky. Malteser International's Village Committee first provided us with a reasonable tented shelter along with food and necessary NFIs and then this cash aid to rehabilitate our house, without which we have not been able to achieve the feat in foreseeable future. This amount enabled us to think about it and then the decision to sell our cow was a very straightforward one. So we just don't have words to express our gratefulness for Malteser International,” Meena concluded with gratitude in her firm tone.

