ACTION PLAN (2019-24) FOR IMPLEMENTATION OF RECOMMENDATIONS APPROVED BY CCI REGARDING ALARMING POPULATION GROWTH IN PAKISTAN

The Supreme Court of Pakistan, taking Family Planning as a human right issue, took Suo Moto Notice on 4th July 2018 and constituted a Task Force to frame clear, specific and actionable recommendations to address matters relating to alarming population growth. The Task Force, after a series of meetings, framed a set of recommendations aiming at enhancing Contraceptive Prevalence Rate to 50% thereby lowering the total fertility rate to 2.8 children per woman by 2025 and; to further raising CPR to 60% and reaching a total fertility rate of 2.2 children per woman by 2030. This would lower our population growth rate to 1.5% by 2024 and to 1.1% by 2030. These recommendations were placed before the Supreme Court Bench headed by the Honorable Chief Justice of Pakistan on 30th October 2018. The Honorable Court, while endorsing these recommendations as such, ordered the Ministry NHS to place it before the Council of Common Interest (CCI) chaired by the Prime Minister and represented by Chief Ministers of the provinces for immediate consideration for approval. Accordingly, the recommendations were placed before CCI on 19th November, 2018. The CCI approved all the recommendations in principle and asked the Ministry NHSR&C to prepare an Action Plan with financial modalities for operationalization of the recommendations in consultation with all relevant stakeholders.

- 2. The CCI approved recommendations are basically a set of interventions in eight focused areas identified while keeping in view the population situation in Pakistan, the challenges faced and the global best practices and initiatives which are likely to yield tangible results and help in addressing matters relating to rapid population growth rate, low contraceptive prevalence, high fertility and high mortality rates. These recommendations would be implemented by the federal and provincial governments with active support from private sector, civil society organizations and international development partners.
- 3. In pursuance to the direction / decision of CCI, the recommendations have been translated into an Action Plan, prepared in consultation with provincial governments, relevant CSOs and other implementing partners in the private sector. The Action Plan shall enable advancing towards the national and provincial program objectives and targets. At the same time, it will help in assessing the extent of progress towards various international commitments such as FP2020, ICPD beyond 2014 and SDGs of the 2030 Agenda.

ACTION PLAN (2019-24)

IMPLEMENTATION OF RECOMMENDATIONS APPROVED BY THE CCI REGARDING ALARMING HIGH POPULATION GROWTH IN PAKISTAN

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
1. Establish National	& Provincial Task Forces for st	eering, provid	ding oversight ar	nd taking criti	ical decisions	to reduce population	n growth, lower
fertility rate and increa	se contraceptive prevalence rate	(CPR):					
a. National TF chaired by Prime Minister to include Chief Ministers of all the Provinces, Federal & Provincial Ministers of Population, Health, Education, Finance,	Issuance of Notification of the Federal Task Force with Composition and Terms of Reference (TORs)	By31stDec,18	M/o NHS	NA	NA	Notification No. F.No10-6/2018- PPW/P&S dated December 4, 2018 issued by M/o NHS published in weekly Gazette	M/o NHS, PM Office
Planning and representatives of civil society.	2. Formulation of the Action Plan	By 14 th Jan,2019	M/o NHS	NA	NA	Action Plan document	M/o NHS in consultation with all Implementing Partners
Responsibility: M/o NHS Time Frame: By 31st Dec, 2018	3. Setting up of Technical Support Unit (TSU) for Federal Task Force	By 31 st Dec,2018	M/o NHS	25.00 UNFPA 05.00 GOP	100.00 UNFPA 20.00 GOP	Notification by UNFPA's letter dated 26th Nov, 2018.	M/o NHS with the support of UNFPA
	4. Convening meetings of the Federal Task Force and providing it secretarial support [including coordination with all Implementing Partners (IPs), preparing progress assessment reports and evaluations	Feb &Oct, 2019 and April &Oct, 2020 and onwards	M/o NHS	GOP	GOP	1. Working Papers/technical proposals / projects 2. Minutes of the meeting, 3. Progress assessment reports	M/o NHS with the support of TSU as per its TORs

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
						4. Evaluation reports	
b. Provincial TFs chaired by respective Chief Ministers to include	Issuance of Notification of the Provincial Task Forces	By31stDec,18	PWDs	NA	NA		PWDs/CMs Office
Provincial Ministers of Population, Health, Education,	2. Formulation of Provincial Action Plans	By31stDec,18	PWDs	NA	NA	Action Plan documents	PWD, DOH and other IPs in the Province
Finance, Planning and representatives of civil society.	Setting up of Provincial Task Force Secretariats (TFSs) with UNFPA resources	By31stDec,18	PWDs	35.00 UNFPA	140.00 UNFPA	Notification by UNFPA's letters dated	PWDs with the support of UNFPA/TSU
				20.00 GOP	80.00 GOP		
Responsibility: Population Welfare Departments (PWDs) Time Frame: By 31st Dec, 2018	4. Convening Meetings (Quarterly) and provide secretarial support to the Provincial Task Force [including coordination with all Implementing Partners (IPs) in the province, progress assessment reports and evaluations	Mar,2019) Jun,2019) Sep,2019) Dec,2019) And onwards on quarterly basis	PWDs	Provincial Governments	Provincial Governments	1. Working Papers / technical proposals / projects 2. Minutes of the meeting, 3. Progress assessment reports 4. Evaluation reports	PWDs with the support of Provincial TFSs– vide TORs of Provincial TFSs
c. Progress towards reducing population growth rate, lowering fertility and increasing contraceptive prevalence rate to be monitored through a robust	1. Design M&E Framework / Plan with indicators and action steps covering all aspects of the Action Plan (Federal & Provincial) and linked to national & provincial goals and objectives and global commitments (e.g. SDGs and FP2020)	By 30 th Apr,2019	M/o NHS/TSU PWDs/TSFs	03.00	NA	M&E Framework / Plan available at TSU and Provincial Task Force Secretariats	M/o NHS/TSU, PWDs/TFSs, PBS, Provincial BOS, NIPS, TRACK20, DHIS, GHSC- PSM (outsourcing)
data collection system and assessments of results and	2. Strengthening relevant Management Information Systems to implement the M&E framework / plan	Onwards of 30 th Apr,2019	M/o NHS/TSU PWDs/TSFs	02.00	NA		M/o NHS/TSU, PWDs/TSFs and DOH (outsourcing)

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
presented before National & Provincial Task Forces. Responsibility:	3. Orientation / training of population / health on M&E framework and MIS:	Onwards of 30 th Apr,2019	Population Program Wing (PPW) for ICT, GB & AJK;	05.00	20.00	Training reports	M/o NHS/PPW (ICT, GB & AJK) (outsourcing)
M/o NHS and PWDs Time Frame: Bi-annually (NTF); Quarterly (PTF)	a. managers and organizations like NIPS, PBS, etc. b. service providers		PWDs for the respective provinces	15.00	60.00		PWDs with DOH (outsourcing)
	4. Implement the M&E plan, prepare and present M&E reports as per agreed scope and time schedule	1st Report July, 2019 2nd Report Sep, 2019 Next report(s) after every Task Force meeting	M/o NHS/TSU & Provincial PWDs/ TFSs to finalize reports as per M&E framework/plan	02.00	04.00	Reports from TSU and Provincial TFS	M/o NHS/TSU & PWDs/Provincial TFSs, DOH, CSOs/Private Sector
	5. Strengthen the capacities of national and provincial governments and research institutions to collect analyze and disseminate data at national, provincial and district levels and their interrelationship with development.	2019-2023	M/o NHS, PWDs, DOH	As per requirement of respective organization	As per requirement of respective organization	Data quality, timely reporting, peer reviewed research, evidence based policies and programs	M/o NHS/TSU and M/o PD&R, (NIPS, PBS, Provincial BOS; TRACK20, PMA2020, CLMIS, DHIS, Think Tank Network)
	6. A National Symposium for progress sharing	Annual basis	M/o NHS	08.00	32.00	Symposium report	Law & Justice Commission of Pakistan (LJCP) with the support

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions	nted cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
							of M/o NHS/TSU & UNFPA
	7. Provincial Symposium for progress sharing	July,2019 (WPD)	PWDs	20.00	80.00	Symposium reports	PWDS with DOH and other IPs
2. Ensure Universal Ac	cess to FP/RH Services:						
i. Mandate all public health facilities (BHUs, RHCs, THQHs, DHQHs, Teaching Hospitals) to deliver family planning services as	Issue notifications by the Provincial Departments of Health that mandates all health service delivery points to provide family planning information & services	By 31 st Mar,2019	M/o NHS for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Notifications	PWD, DOH, Provincial Task Forces
part of the essential service package. Responsibility: Federal/Provincial Governments	2. Review implementation of Health Sector Strategy to assess provision of family planning services at all levels	Onwards of 31 st Mar,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	03.50	NA	Revised health sector strategy	PWDs with Provincial DOH (outsourcing)
Time Frame: By 30 th June, 2019	3. Develop roadmap to provide FP services in Service Delivery Outlets of Department of Health as essential part of Minimum Health Service Delivery Package (MHSDP)	Onwards of 31 st Mar,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Roadmap document	PWDs with DOH
	4. Revise list of Key Performance Indicators (KPIs) for Department of Health to reflect on family planning services	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Revised list of KPIs	PWDs with DOH

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
	5. Performance reporting to Provincial Task Forces	2019-2023	PWDs	NA	NA	Service Statistics / Performance reports	PWDs with Provincial TFSs
ii. All general registered private sector practitioners and hospitals to provide FP counseling, information and	Mapping of all general private hospitals and Registered Medical Practitioners (RMPs).	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	RMPs / hospitals listed	Provincial Public Health Commissions / DOH supported by PWDs
services to male & female clients. Responsibility: Federal/Provincial Governments	2. Enlisting and signing Letter of Understanding (LOU)	By 31 st Dec,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Letter of Understanding	M/o NHS, PWDs, DOH
Time Frame: By 30 th June, 2019	3. Review / development of standardized orientation modules	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	1.00	NA	Module developed	M/o NHS, PWD (outsourcing to private sector CSOs)
	4. Conduct Training of Trainers (ToT)	By 30 th Sep, 2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	1.50	NA	Training report	M/o NHS, PWD (outsourcing to private sector CSOs)
	5. Step down training	Onwards of 30 th Sep,2019	PPW for ICT, GB & AJK; PWDs for the	600.0	NA	36000 RMPs and Service providers of 1000 private hospitals trained	M/o NHS, PWD (outsourcing to private sector

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
			respective provinces				CSOs)
	6. Monthly performance report to PWDs [linked to Recommendation 1 (C)]	On going	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Service statistics / progress reports	
iii. Lady Health Workers to provide FP, ante-natal and post-natal counseling, and contraception services on priority	Revision of job description of existing LHWs to ensure that at least 50% of its time is devoted on FP/RH information & services	By 30 th Jun, 2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Notification of revised job description issued.	M/o NHS, Provincial PWDs, DOH
basis. Responsibility: Federal/Provincial Governments Time Frame: By 30th June, 2019	Refresher training to emphasize communication and counseling skills to address myths and misconceptions	By 31st Dec,2019 and onwards	PPW for ICT, GB & AJK; PWDs for the respective provinces	200.0	NA	All lady health workers trained on FP counseling and services	M/o NHS, Provincial PWDs, DOH
	3. Ensuring availability of contraceptives to LHWs	On going	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	CLMIS/Dashboard	M/o NHS, Provincial PWDs, DOH
	Performance Monitoring to ensure implementation	Monthly / Quarterly Basis	PPW and PWDs	NA	NA	LHW MIS reports	M/o NHS, Provincial PWDs DOH/ LHW

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
iv. Current cadre of Male Mobilizers to be made active and accountable for counseling men on family planning.	Revision of job specification and job description of social mobilizers / male assistants for enhanced focus on counseling of men	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Notification of revised job description issued.	M/o NHS/PPW and PWDs
Responsibility: Federal/Provincial Governments Time Frame: By 30th June, 2019	Develop and/or update existing job aids for male motivators	Onwards of 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	01.50	NA	Job aids revised	M/o NHS, PWDs and DOHs (Outsourcing)
, ,	Training / Refreshers to address myths and misconceptions and enhanced focus on counseling of men	By 31 st Dec,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	03.0	NA	3300 male mobilizers / FW assistants trained on FP counseling and community mobilization	M/o NHS, PWDs, and DOHs (outsourcing to private sector / CSOs)
	4. Performance Monitoring to ensure implementation [linked with Recommendation No. 1 (C)]	Monthly / Quarterly Basis	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	No. of referrals per month.	M/o NHS, PWDs, DOHs, CSOs
v. NGOs and Civil Society Organizations to work in close coordination with	Mapping (periodic) of SDPs of NGOs/CSOs and private sector providing FP/RH services	By 31st Mar,2019 and onwards	PPW for ICT, GB & AJK; PWDs with DOH for the	02.50	08.00	Mapping report	M/o NHS, PWDs, DOHs, CSOs

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions	ited cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
provincial DOHs & PWDs to extend FP/RH services to underserved and			respective provinces				
unserved areas. Responsibility: Federal/Provincial Governments	2. Partnership mechanism / MOUs between PWDs and CSOs	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	MOUs	PWDs utilizing CEWG Forum
Time Frame: By 31st March, 2019	3. Provision of counseling and/or services by NGOs in underserved and unserved areas.	30 th Jun,2019 onwards	PPW for ICT, GB & AJK; PWDs for the respective provinces	1800.0	7200.0	10000 community health workers engaged	PPW,PWDs with / through CSOs
	Coordination / Periodic Performance Review	On going	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Performance reports	PWDs utilizing CEWG Forum
vi. Federal and Provincial Governments to link population programs with Social Safety Net programs like	1. Convening a National Consultative meeting of relevant authorities to work out details of the linkages with Social Safety Networks like BISP and National Health Card.	By 30 th Apr,2019	M/o NHS	1.0	NA	MOU with operational details	M/o NHS, M/o Finance, M/o PD&R and BISP
Benazir Income Support Program and introduce conditional cash transfer schemes or	Provincial consultative meetings to work out modalities / modus operandi	By 31stMay,2019	PWDs	NA	NA	Partnership protocol developed	DOH, Finance Department, Social Welfare, Women Development,

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
incentivized schemes for							and BISP
adoption of FP service and institutionalized birth delivery. Responsibility: M/o NHS, PWDs & BISP	3. Implementation of BISP supported initiative as per MOU/agreement	July, 2019 and onwards	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Periodic progress Reports	PWDs and provincial outfits of BISP
Time Frame: By 30 th June, 2019 3. Finances:							
i. Federal Government to create a five-year non-lapsable Special Fund for reducing Population Growth Rate with annual allocation of Rs.10 bn. The Fund shall be set up exclusively from federal resources without any cut from provincial	Working paper/concept note for setting up Special Fund for Population Initiatives (SFPI) for consideration by Federal Task Force. SFPI to be managed by an Executive Committee of the Federal Task Force to be chaired by the Finance Minister with Minister for PD&R, NHS, IPC and nominees of Provincial Chief Ministers as members.	By 10 th Feb,2019	M/o NHS	10,000	40,000	Working Paper Minutes / Approval by the Federal Task Force	M/o NHS, MOF, PM Office, TSU
funds. The Fund will: Responsibility: M/o Finance and M/o NHS.	2. Submission of Summary to the Prime Minister for setting up SFPI	By 31 st Mar,2019	M/o NHS	NA	NA	Notification by M/o Finance	M/o NHS, MOF, PM Office, TSU

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
Time Frame: By 30th June, 2019							
a. Meet, for 5 years, 50% amount of additional allocations made by the provinces for procurement of	Forecasting & quantification of contraceptive requirement of provincial governments and the private sector (for one year and five years)	By 15 th Mar,2019	M/o NHS with PWDs	NA	NA	Provincial demand	M/o NHS,TSU, PWDs, HOHs, CSOs/ Private Sector
contraceptive commodities over and above the budget provision of F.Y 2018-19 in the respective head.	2. Working out the requirement to be met out of Fund for each province based on national and provincial goals and usage reporting	By 15 th Apr,2019 and onwards	M/o NHS with PWDs	NA	NA	Proposed share	M/o NHS,TSU, PWDs, HOHs, CSOs/ Private Sector
Responsibility: M/o NHS in coordination with PWDs and Finance Div. & PD&R Div. Time Frame:	3. Submission of requirement to the Fund for consideration, approval and release of funds	By 30 th Apr,2019 and onwards	TSU / M/o NHS	NA	NA	Funds sanctioned and released	M/o NHS/TSU
FY 2019-20 thru FY 2023-24							
b. Meet, for 5 years, 50% cost of increase in LHWs for 100% coverage for doorstep	Identification of uncovered areas in district / province	By 15 th Mar,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Provincial demand	M/o NHS (ICT, GB & AJK) and Provincial PWDs & DOH
services in rural and peri-urban areas. Responsibility:	2. Working out additional requirement for 100 percent coverage (district / province wise)	By 15 th Apr,2019 and onwards	PPW for ICT, GB & AJK; PWDs for the respective	NA	NA	Proposed share	M/o NHS for ICT, GB & AJK and Provincial PWDs & DOH

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
M/o NHS in coordination with DOH and Finance Div. & PD&R Div. Time Frame: FY 2019-20 thru FY 2023-24	Formulating recruitment plan of provincial / regional governments and its implementation	By 31 st Dec,2019	provinces PPW for ICT, GB & AJK; PWDs for the respective provinces	As per Provincial Plan	As per Provincial Plan	100 percent coverage in each district of province	M/o NHS,TSU, PWDs, HOHs
	4. Submission of requirement/recruitment plan to the Fund for consideration, approval and release of funds	Onwards of 31st Dec,2019	TSU / M/o NHS	NA	NA	Funds sanctioned and released	M/o NHS/TSU
c. Support innovative approaches of	Seminar to share global best practices	By 15 th Apr,2019	PPW / M/o NHS	01.00 UNFPA	NA	Seminar Report	M/o NHS/TSU
Federal & Provincial Governments for reaching poor and marginalized population to reduce population	2. Developing the scope and criteria for innovative project proposals to address population groups such as men and young couples and health system issues such as human resource development, governance and accountability.	By 31 st May,2019	M/o NHS	0.80	NA	Scope outline and criteria developed	M/o NHS/TSU with PWDs, DOHs, CSOs
growth and increase contraceptive prevalence rate (CPR).	3. Inviting innovative projects from Federal & Provincial Departments of Health & Population and CSOs.	By 30 th Jun,2019	TSU / M/o NHS	NA	NA	Project proposals	M/o NHS/TSU with Provincial PWDs, DOH & CSOs
Responsibility:	4. Consideration / approval by the Executive Committee of the SFPI	By July, 2019	TSU / M/o NHS	NA	NA	Minutes of the meeting / Sanction /	M/o NHS/TSU and Executive

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
M/o NHS in coordination with PWDs & DOH.						release of funds	Committee of the SFPI
<u>Time Frame:</u> FY 2019-20 thru FY 2023-24	5. Implementation of approved innovative projects	By Aug, 2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	1000.00	4000.00	Completion report	M/o NHS for ICT, GB & AJK and Provincial PWDs & DOH
ii. Federal & Provincial Population & Health budgets for FP/RH to be doubled over the next two years and protected from reallocation to other programs & departments while ensuring timely releases. Responsibility: M/o Finance, M/o NHS, DOH and PW/Ds. Time Frame: FY 2019-20 and FY 2020-21	Matter to be placed before Federal & Provincial Task Forces for necessary direction to M/o Finance and Finance & Planning Departments of the provincial governments	By or before 31 st May, 2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Pink book	M/o NHS for ICT, GB & AJK and Provincial PWDs & DOH
iii. Donor financing to NGOs and private sector organizations involved in FP/RH	Federal Government (MoFA and EAD) to mobilize external resources through bi-lateral, multilateral and international community arrangements for NGOs and	By 31st May,2019 and onwards	M/o NHS/ TSU	NA	NA	Additional resources mobilized for private sector	M/o NHS/ TSU, M/o FA, EAD

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
to be streamlined through an effective coordination mechanism.	private sector under different modalities including social / commercial marketing and social franchising						
Responsibility: EAD and M/o NHS in coordination with PWDs and DOH. Time Frame: By 31st March, 2019	EAD to establish a donor consortium for supporting the advancing family planning agenda	By 31 st Mar,2019	M/o NHS/ TSU	NA	NA	EAD Circular / Notification of consortium	M/o NHS/ TSU and EAD (Provincial Governments could also consider setting up such consortium: PWD-Sindh)
	3. Consultative meeting under the chair of Secretary EAD to finalize protocols / mechanism for supporting Civil Society Organizations	By 31 st Mar,2019	M/o NHS/ TSU (PWD to be part of consortium: PWD-Sindh)	NA	NA	Protocols developed	EAD and M/o NHS/TSU in coordination with PWDs, DOH and donors
	4. Circulation of Instructions from EAD to the concerned quarters	By 15 th Apr,2019	M/o NHS	NA	NA	Letter from EAD	M/o NHS/ TSU, EAD
iv. Corporate Sector to allocate CSR funds for FP services and advocacy.	1. Hold meetings with M/o Finance, FBR and SECP to require compulsory allocation of substantial part of CSR funds for family planning.	By 28 th Feb,2019	M/o NHS /TSU	NA	NA	Modified Notification / SRO	M/o NHS, M/o Finance, FBR and SECP
Responsibility: SECP / FBR.	2. Jointly review and work out modalities of utilization of CSR by the corporate sector bodies for FP services & advocacy	By 30 th Jun,2019	M/o NHS /TSU	NA	NA	Quantified contribution for FP program	M/o NHS/TSU and Corporate Organizations
<u>Time Frame:</u>							M/o NHS/TSU

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions	ited cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
By 31st January, 2019	Devise review system and ensure its implementation and reporting on annual basis	30 th Jun, 2019 and onwards	M/o NHS /TSU	NA	NA	Annual progress reports	and Corporate Organizations
4. Legislation:	I				I		
i. Family Planning & Reproductive Health (FP&RH) Rights Bill ensuring mandatory FP/RH services by all	1. Drafting the FP&RH Rights Bill in consultation with relevant stakeholders and departments including DOH and getting it vetted from Law Division / Department	By 31 st Mar,2019	PPW for ICT, GB & AJK; PWDs for the respective	0.50	NA	Draft Bill	M/o NHS for ICT, GB & AJK (outsourcing)
general health care facilities in public and private sector.			provinces	1.00	NA		Provincial PWDs/DOH (outsourcing)
Responsibility: M/o NHS, M/o Law & Justice & Provincial Govts / PWDs Time Frame:	2. Obtaining approval from the respective Cabinets and Provincial Assembly	By 31 st Mar,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Notification by National/ Provincial Assemblies	M/o NHS, Provincial PWDs/DOH
By 31st March, 2019	3. Obtaining assent from the President of Pakistan / respective Governor and notification by the Law Division / Department	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Gazette notification	Law Division / Departments
ii. Early Child Marriage Restraint Act be introduced by Federal & Provincial Governments (Sindh passed this Act in 2013).	Advocacy and Consultative meetings with all stakeholders	By 28 th Feb,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	1.50	NA	Minutes of meeting	M/o NHS, M/o Law and Human Rights and Provincial PWDs, Social Welfare and Women

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
Responsibility:							Development (outsourcing)
M/o NHS, M/o Law & Justice & Provincial Governments / PWDs Time Frame: By 31st March, 2019	2. Drafting the Child Marriage Restraint Act in consultation with relevant stakeholders and departments including Social Welfare and Women Development / Empowerment Department and getting it vetted from Law Division / Department	By 31 st Mar,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	0.50	NA	Draft or Final Act	M/o NHS/TSU and Law Division (outsourcing) Provincial PWDs/ Social
	'			1.00	NA		Welfare and Women Empowerment / Development, Law Department (outsourcing)
	3. Obtaining approval from the respective Cabinets and Provincial Assembly	By 31 st Mar,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Notification by National / Provincial Assemblies	M/o NHS, Provincial PWDs/ Social Welfare and Women Empowerment / Development
	4. Obtaining assent from the President of Pakistan / respective Governor and notification by the Law Division / Departments	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Gazette notification	Law Division / Departments
iii. Pre-marital counseling on family planning should be	Study the practices in Iran & Indonesia and develop / adapt counseling module for Pakistan	By 31 st May,2019	PPW / M/o NHS	1.50	NA		M/o NHS, PWDs (outsourcing)

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions	nted cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
mandatory for Nikkah registration; LHWs or appropriate service providers to provide the requisite counseling.	Advocacy and sharing of proposed model with all stakeholders including legislators	By 15 Apr, 2019	PPW / M/o NHS PWDs for respective	1.50	NA	Minutes of meeting	M/o NHS and PWDs
Responsibility: M/o NHS, M/o Law & Justice and Provincial			provinces				
Governments / PWDs Time Frame: By 31st March, 2019	3. Drafting the bill for pre-marital counseling for Nikah registration	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	0.50	NA	Draft bill	M/o NHS, PWDs, / Local Government (outsourcing)
	4. Obtaining approval from the respective Cabinets and Provincial Assemblies	By 30 th Sep,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Notification by National / Provincial Assemblies	M/o NHS, PWDs, / Local Government
	5. Obtaining assent from the President of Pakistan / respective Governor and notification by the Law Division / Departments	By 30 th Oct,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Gazette notification	Law Division / Departments
	6. Amendment in the Nikkah Registration Form	By 30 th Nov,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Amended Nikkah Registration Form	M/o NHS for ICT, GB & AJK and Provincial Local Government & Rural

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
	7. Implementation of the approved Law including material development, orientation / training and conducting counseling sessions and certifications	31 st Dec,2019 onwards	PPW for ICT, GB & AJK through PC-Is; PWDs for the respective provinces through PC-Is	100.0	400.0	Nikkahs registered after counseling certification	Developments M/o NHS for ICT, GB & AJK and Provincial Local Government & Rural Developments, DOH and PWDs
iv. "Right to promotive and primary health care for mother and child be made mandatory" as the right to education given in Article 25-A of the Constitution. Responsibility:	Drafting the bill for "right to promotive and primary health care for mother and child" in consultation with relevant stakeholders including M/o Law & Human Rights/NCSW, DOH and getting it vetted from Law Division	By 31 st Mar,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	0.50	NA	Draft Bill	M/o NHS (outsourcing)
M/o NHS / M/o Law & Justice <u>Time Frame:</u> By 31st March, 2019	Obtaining approval from the Cabinet and Assembly	By 31 st Mar,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Notification by National Assembly	M/o NHS
	3. Obtaining assent from the President of Pakistan and notification by the Law Division	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	NA	NA	Gazette notification	Law Division

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions	ited cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
5. Advocacy & Commu	inication:						
i. A national narrative to be developed in consultation with provinces and other stakeholders to create a sense of	Conduct political economy and stakeholders analysis for developing national narrative	By 31 st Mar,2019	M/o NHS/TSU	1.00	NA	Peer reviewed PEA report	M/o NHS/TSU (UNFPA has commissioned the study (TSU to follow- up)
urgency and necessity of reducing population growth rate and achieving socio-economic wellbeing for all.	Preparation of technical paper after review of existing provincial advocacy and communication strategies	Feb,2019	M/o NHS/TSU	0.50	NA	Technical paper	UNFPA has already commissioned this activity to Population Council (TSU to follow-up)
M/o NHS, M/o Information, M/o Religious Affairs and PWDs Time Frame: By 28th February, 2019	3. Consultative / brainstorming conference with political leaders, corporate sector, academia, executive, ulema, media, intelligentsia, civil society and youth on the concept and strategy of the National Narrative. Followed by calls-on judiciary.	By 31 st Mar,2019	M/o NHS /TSU	10.00	NA	Meeting report	M/o NHS, M/o Information, M/o PD&R, M/o Religious Affairs and PWDs (outsourcing)
	Finalization of national narrative accompanied by provincial / regional narratives	By 30 th Apr,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	04.00	NA	Document on national narrative	M/o NHS, M/o Information, PWDs & Provincial Information Departments (Outsourcing)
	5. Develop a comprehensive advocacy strategy containing a		M/o NHS/ TSU	01.00 UNFPA	NA	Advocacy strategy document	M/o NHS, M/o Information and

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
	pro-active communication plan, public information mechanism and mass awareness campaign						PWDs (outsourcing)
	6. Implementing advocacy strategy after pre-testing and followed by periodic reviews of its effectiveness	By 30 th Sep,2019 onwards	PPW for ICT, GB & AJK; PWDs for the respective provinces	2500.0 (For Federal & Provincial Govts and the private sector)	10000.0	Regular progress reports Independent assessment reports	M/o NHS, M/o Information, Provincial Information & PWD Departments and PWDs
ii. Mass movement leading to a call of action to be launched involving political leaders, corporate sector, academia,	Preparation of annual report(s) titled i) State of Population in Pakistan; ii) State of Population in Province	By 15 th Apr,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	2.50	10.0	Annual report	M/o NHS and PWDs (outsourcing)
judiciary, executive, ulema, media, intelligentsia, civil society and youth. Responsibility: Federal & Provincial Governments and all stakeholders	2. Parliament (Senate & NA) /Provincial Assemblies to hold a Special Debate on alarming population growth in each province / Pakistan [The PM/CM as Chairperson of respective Task Force(s) to open the Debate with State of Population Report(s)]	2019 and onwards on annual basis	PPW / M/o NHS PWDs for the respective provinces	5.00	20.00	Resolutions passed	M/o NHS & M/o Parliamentary Affairs PWDs and Law & Parliamentary Affairs Department
Time Frame: Immediate	3. To amend TORs of relevant House Standing Committees to incorporate population issue to ensure its mainstreaming in developmental processes	By 30 th Sep,2019	PPW / M/o NHS PWDs for the respective provinces	10.00	NA	The issue of population and FP listed through notification in the TORs of Committees	M/o NHS & M/o Parliamentary Affairs PWDs and Law & Parliamentary Affairs Department

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
	To design mass movement campaign / IEC material involving all relevant stakeholders	By 30 th Sep,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	2.50	10.0	Mass movement plan / document	M/o NHS/TSU & PWDs (Outsourcing)
	5. To Produce, publish literature of FP/RH, demography, MCH, girls education etc. and distribution	By 30 th Nov,2019 onwards	PPW for ICT, GB & AJK; PWDs for the respective provinces	1000.00	4000.00	IEC material produced, printed and distributed	M/o NHS, PWDs, DOH and private sector / CSOs
	6. Workshops, Seminars, Melas, Walks at National / Provincial and District and Sub-District level	onwards of 30 th Nov, 2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	1000.00	4000.00	Workshops, seminars, etc. reports	M/o NHS, PWDs, DOH and private sector / CSOs
	7. Launching electronic media campaign through TV, Radio and Social Media (TVC, Talk Shows, Plays, Songs, Dramas etc.)	onwards of 30 th Nov, 2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	3000.00	12000.00	Transmission certificates	M/o NHS, M/o Information, PEMRA, PWDs, DOH and Provincial Information Departments
	8. Other innovative initiatives	onwards of 30 th Nov, 2019	M/o NHS/TSU	Cost to be met out of SFPI	Cost to be met out of SFPI		M/o NHS, M/o Information, PEMRA, PWDs, DOH and Provincial

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
							Information Departments,
iii. PEMRA to provide free airtime for FP messages on radio and TV channels at prime time.	1. To urgently produce brief edited audio and video spots of excerpted remarks by the PM, CJP, other speakers on 05-12-2018 and other leaders of public opinion to provide them to PEMRA.	By 31 st Jan,2019	M/o NHS/ TSU	02.00	NA		M/o NHS, PTV, PBC and private media production houses
Responsibility: M/o Information and PEMRA Time Frame: By 15 th March, 2019	2. Meetings with PEMRA authorities for allocation of free prime time on TV and Radio channels to telecast / broadcast on a regular basis statements by the PM, four CMs and other dignitaries / leaders of public opinion on population and urge PEMRA to immediately advise these channels to cover the subject of population in talk-shows, drama serials, entertainment programs, etc.	Onwards of 31 st Jan, 2019	M/o NHS/ TSU	NA	NA	Time allocated and media campaign launched	M/o NHS, M/o Information and PEMRA
iv. Behavioral Change Communication campaign to highlight the roles and responsibilities of men in family	Designing BCC campaign based on national narrative	By 30 th May,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	1.00	NA	BBC strategy document	M/o NHS/ TSU, PWDs & DOH (outsourcing)
planning. Responsibility: Federal / Provincial	2. Designing, pre-testing and producing relevant material	By 31 st Aug,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	1000.0	4000.0	Material tested and produced	M/o NHS /TSU, PWDs & DOH (outsourcing)

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
Governments / Media & Civil Society <u>Time Frame:</u> Immediately	Engaging CBOs for implementation of BCC campaign in addition to public sector field workers	By 30 th Nov,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	1.00	NA	List of CBOs engaged and MOU signed	M/o NHS/TSU, PWDs & DOH (outsourcing)
	Orientation/training on social mobilization and male counseling on continuous basis	Onwards of 30 th Sep,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	2.50	10.0	Training Reports	M/o NHS/ TSU, PWDs & DOH (outsourcing)
	5. Implementation of BCC campaign	Onwards of 30 th Sep,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	2000.00	8000.00	Implementation reports	M/o NHS for ICT, GB & AJK, PWDs & DOH (outsourcing)
6. Curriculum and Trai	ning:						
i. Health & hygiene to be included at primary school level. Responsibility: PWDs and Federal & Provincial Education	Review of existing curriculum and teacher training modules regarding inclusion of health & hygiene related matter, if needed	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	2.50	NA	Revised curriculum	PWDs, DOH & Elementary / Primary Education Departments (outsourcing)
Departments Time Frame: By 30th June, 2019	2. Production of revised learning material for students and modules for teachers	30 th Jun,2019 onwards	PPW for ICT, GB & AJK; PWDs for the respective	2000.0	NA	Text books / material revised and distributed	PWDs & Elementary / Primary Education departments

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions	ited cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
	Orientation / refresher training for elementary / primary school teachers on rolling basis	30 th Jun,2019 onwards	provinces PPW for ICT, GB & AJK; PWDs for the respective provinces	10.00	40.00	Teachers training report	PWDs, DOH & Elementary / Primary Education departments
ii. Life Skills Based Education and Population Studies to be included in Secondary and Higher Secondary schools.	Review of existing curriculum and teacher training modules regarding inclusion of Life Skills Based Education (LSBE) and Population Studies, if needed.	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	2.50	NA	Revised curriculum	PWDs & SSC & HSSC Departments (outsourcing)
Responsibility: PWDs and Federal & Provincial Education Departments Time Frame:	2. Production of revised learning material for students and modules for teachers	30 th Jun,2019 onwards	PPW for ICT, GB & AJK; PWDs for the respective provinces	1000.0	NA	Text books / material revised and distributed	PWDs & SSC & HSSC Departments
By 30 th June, 2019	3. Orientation / refresher training for Secondary School teachers on rolling basis	30 th Jun,2019 onwards	PPW for ICT, GB & AJK; PWDs for the respective provinces	10.00	40.00	Teachers training report	PWDs & SSC & HSSC Departments
iii. Population Dynamics in Pakistan to be included in College and University level education.	Review of existing curriculum and teacher training modules regarding inclusion of Population Dynamics in Pakistan, if needed. Production of revised learning	By 30 th Jun,2019	PPW / M/o NHS PWDs for respective provinces PPW / M/o NHS	2.50	NA NA	Revised curriculum Text books / material	PWDs & Higher Education Departments and HEC (outsourcing) PWDs & Higher

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
Responsibility: HEC, Federal & Provincial Education Departments	material for students and modules for teachers	Jun,2019 onwards	PWDs for respective provinces			revised and distributed	Education Departments and HEC
Time Frame: By 31st March, 2019	3. Orientation / refresher training for Secondary School teachers on rolling basis	30 th Jun,2019 onwards	PPW / M/o NHS PWDs for respective provinces	10.00	40.00	Teachers training report	PWDs & Higher Education Departments and HEC
iv. Population modules to be included in training at all Civil Services and Judicial Training Institutions. Responsibility: National School of Public Policy Time Frame: Dec 24st March 2010	Development of modules for inclusion in their training plans	By 30 th Sep,2019	M/o NHS/ TSU	1.00	NA	Training module developed	M/o NHS/ TSU, Establishment Division and Law & Justice Commission (outsourcing)
By 31st March, 2019 V. PMDC and PNC to include modules on FP/RH in MBBS and Nursing Degree Programs, respectively. Responsibility: M/o NHS, PMDC and PNC Time Frame:	Development of modules for inclusion in MBBS and Nursing Degree Programs	By 30 th Sep,2019	TSU / M/o NHS	1.00	NA	Training module developed	M/o NHS/ TSU, PMDC and PNC (outsourcing)
Time Frame: By 31st March, 2019							

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	(Rs. Millions)	ted cost) with Funding urce	Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
vi. Training to be provided to all public & private health care providers on all modern	Updating National / Provincial Standards and training material on FP&RH to include infusion of a rights based approach	By 31st Dec,2019	PPW / M/o NHS PWDs for respective provinces	NA	NA	Updated standards and training material	M/o NHS, PWDs & DOH
contraceptive methods. Responsibility:	2. Training of Trainers of RTIs, RHS-A master training centers and Public Health Schools of DOH	By 31st Dec,2019 and onwards	PPW for ICT, GB & AJK; PWDs for the respective provinces	5.0	20.0	Training reports	M/o NHS, PWDs and DOH (outsourcing)
M/o NHS, DOH and PWDs Time Frame: By 31st December, 2019	Step down training of the services providers (public & private)	By 31st Dec,2019 and onwards	PPW for ICT, GB & AJK; PWDs for the respective provinces	20.0	80.0	Training reports	RTIs, RHS-A master training centers and Public Health Schools of DOH
7. Contraceptive Comr	modity Security:						
i. Incentivizing Local Production of Contraceptives: Federal and Provincial	Undertake feasibility study for local production of contraceptives	-	Study commissioned and completed with USAID fund	5.00	NA	Feasibility study report	M/o NHS, DRAP & GHSC-PSM
Governments should encourage / incentivize the pharmaceutical companies / investors to establish contraceptive production units in	2. Organize an interface between pharmaceutical companies and government functionaries of relevant departments (DRAP, BOI, FBR, M/o Industries, DFIs and USAID) and present feasibility study as well	-	Interface held in Karachi	5.00	NA	Interface report	M/o NHS, DRAP & GHSC-PSM
Pakistan on	3. Invite Expression of Interest	By 31st	PPW / M/o NHS	NA	NA		M/o NHS and

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	Estimated cost (Rs. Millions) with Funding Source		Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
WHO/FDA standards. Responsibility:	(EOI) and Technical Proposals from interested parties / potential investors	Feb,2019					GHSC-PSM
M/o NHS in coordination with relevant Federal & Provincial authorities Time Frame: By 30th June, 2019	Evaluate Expression of Interest / Technical Proposals from the companies	By 15 th May,2019	PPW / M/o NHS	NA	NA	Evaluation report / short listing	M/o NHS, DRAP, BOI, FBR, M/o Industries, DFIs, etc.
	5. Inviting workable business plan from the potential investors	By 31 st May,2019	PPW / M/o NHS	NA	NA	Lol	M/o NHS, PWDs, DOH, DRAP, BOI, FBR, M/o Industries, DFIs, etc.
	6. Appraisal of Business of Plan and awarding contract for indigenous contraceptive production	By 31 st Aug,2019	PPW / M/o NHS	NA	NA	Appraisal report Contract awarded	DFIs, BOI & DRAP (M/o NHS to coordinate & pursue)
ii. Pooled Procurement model to be adopted by the Federal & Provincial Governments (subject to their consent) to garner	Holding meeting of Inter- Ministerial Strategic Forum on Health & Population to develop consensus on pooled procurement	By 31 st May,2019	PPW / M/o NHS with the support of GHSC-PSM	1.00	NA	Minutes	M/o NHS, PWDs, DOH (special invitees: private sector CSOs)
the benefits of economy of scale. Responsibility: M/o NHS, PWDs and	2. Taking up the matter at respective Provincial Task Forces for endorsement	TF meeting onwards of 31st May,2019	PWDs with the support of Provincial TFSs	NA	NA	Minutes	PWDs with DOH and private sector CSOs

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	Estimated cost (Rs. Millions) with Funding Source		Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
Time Frame: FY 2019-20 onwards	3. Finalization of operational modalities	By 30 th Jun,2019	PWDs with the support of USAID/GHSC- PSM	1.00	NA	Protocols	PWDs with DOH and private sector CSOs (outsourcing)
iii. Supply Chain Management System to be strengthened to ensure availability of all contraceptives at Service Delivery Points. Responsibility:	Develop/improve dashboard at the district / sub-district level showing method wise availability of contraceptives at all service delivery points of public & private sectors including CSOs	By 31 st Mar,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	2.00	NA	Dashboard developed	M/o NHS/ TSU, PWDs, DOH, GHSC-PSM and private sector / CSOs (outsourcing)
M/o NHS, PWDs and DOH Time Frame: By 30th June, 2019	Develop Android app for real time reporting on performance and availability of contraceptives at sub-district offices and SDPs	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	1.00	NA	Android App developed	M/o NHS for ICT, GB & AJK, PWDs, DOH, GHSC-PSM and private sector / CSOs (outsourcing)
	3. Provide Android tablets at all sub-district offices and service delivery points including private sector	By 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	200.00	NA	Android tablets distributed	M/o NHS/ TSU, PWDs, DOH, GHSC-PSM and private sector / CSOs (outsourcing)

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	Estimated cost (Rs. Millions) with Funding Source		Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
	4. Design & conduct training of supervisors and service providers of public & private sectors including CSOs;	Onwards of 30 th Jun,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	30.00	60.00	Training reports	M/o NHS for ICT, GB & AJK, PWDs, DOH, GHSC-PSM and private sector / CSOs (outsourcing)
iv. FP Commodities should be included in the essential drug list of primary, secondary and tertiary drug list. Responsibility: PWDs and DOH Time Frame: By 31st March, 2019	Include FP commodities in the National and Provincial Essential Medicines Lists as per WHO guidelines	Already done	PPW / M/o NHS (WHO's EML updated in 2018, next update is 2020.)	NA	NA	Revised National and Provincial Essential Medicines Lists	M/o NHS, DRAP, DOHs
8. Support of Ulema:					1		
Joint Declaration of Ulema made at Population Summit- 2015, Islamabad to be widely advocated. Responsibility: M/o NHS, M/o Religious Affairs, M/o Information, PWDs and DOH	1. Produce audio and video spots featuring excerpts from the Joint Declaration of Ulemas 2015 and from other declarations for broadcast in both free airtime through PEMRA and through paidfor time.		PPW / M/o NHS PWDs for the respective provinces	05.00	20.00	Audio / Video material available	M/o NHS/ TSU, M/o Religious Affairs, M/o Information, PTV, PBC and as required, private production houses

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	Estimated cost (Rs. Millions) with Funding Source		Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
Time Frame: On Continuous basis	2. Produce audio and video spots featuring recent and newly recorded endorsements by prominent Ulemas of the need for responsible parenthood.	By 31 st Mar,2019	M/o NHS/ TSU PWDs for the respective provinces	04.00	16.00	Audio / Video material available	M/o NHS/ TSU, M/o Religious Affairs, M/o Information, PTV, PBC and as required, private production houses
	3. Organizing one national and four provincial meetings of Ulema of various schools of Islamic jurisprudence to: • Help formulate national and province specific strategies by which the essence of the declaration can be widely disseminated at the grassroots level • Help outline a new ethos of the family planning program to be in conformity with the responsible parenthood concept endorsed by Islam • Help develop mass media messages on the Islamic view on family rights including those of the husband, mother and the child	By 30 th Apr,2019 and onwards	M/o NHS PWDs for the respective provinces	06.00	30.00	Meetings held	M/o NHS/ TSU, M/o Religious Affairs, M/o Information and PWDs (outsourcing)

Recommendation	Broad Actions to Implement the Recommendations	Timeframe	Responsibility / Accountability	Estimated cost (Rs. Millions) with Funding Source		Indicator / Evidence	Other key Stakeholders
(1)	(2)	(3)	(4)	1 st Year (5A)	Four Years (5B)	(6)	(7)
	4. Engage religious leaders of other faiths to advocate and endorse the national narrative and accompanying narratives on family planning	By 30 th Apr,2019 and onwards	PPW / M/o NHS PWDs for the respective provinces	05.00	20.00		M/o NHS, M/o Religious Affairs, M/o Information and PWDs and Departments of Minorities Affairs
ii. Training courses on family planning to be arranged at Provincial Judicial Academies and relevant training institutes for Ulemas and Khateebs.	Develop training strategy, curricula modules and training material while identifying the approach for inclusion of the responsible parenthood concept in the teaching curricula	Onwards of 30 th April,2019; to be completed in three months (By 30 th Jun,2019)	M/o NHS PWDs for the respective provinces	01.00	NA	Training strategy, curricula modules and training material developed	M/o NHS/ TSU, M/o Religious Affairs, PWDs and Auqaf (Outsourcing)
Responsibility: DOH/PWDs and Provincial Judicial Academies Time Frame: By 30th June, 2019	Production of curricula modules and training material	By 31 st Aug,2019	M/o NHS/PPW PWDs for the respective provinces	1000.00	NA	Curricula modules and training material printed	M/o NHS and PWDs (Outsourcing)
	3. Training of Trainers	Onwards of 31st Aug,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	50.00	NA	1000 TOT completed	M/o NHS, M/o Religious Affairs, PWDs and Auqaf (Outsourcing)
	4. Training of Khateebs	Onwards of 31st Oct,2019	PPW for ICT, GB & AJK; PWDs for the respective provinces	150.00	NA	250000 Khateebs trained	M/o NHS, M/o Religious Affairs, PWDs and Auqaf (Outsourcing)