

# WISE

Organized communities

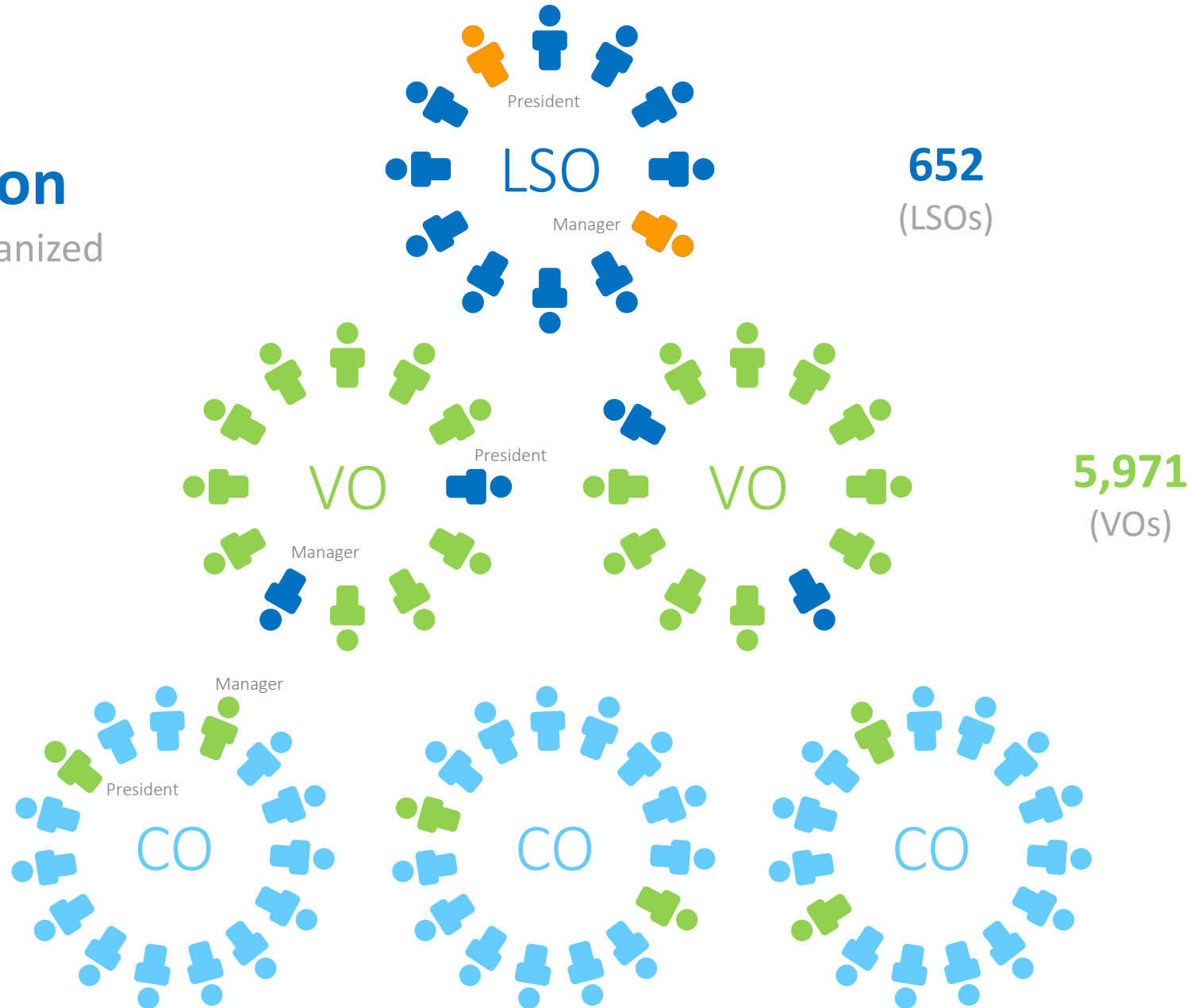
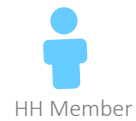


# About NRSP

- Largest Not for Profit in Pakistan involved in CDD
- Largest RSP
  - 2.5 M poor Households organized and networked
- Largest provider of Micro Financial Services in the country
  - 24% in Micro Credit
  - 55% in Micro Savings
  - 31% in Micro Health Insurance

# Core Function of NRSP: Fostering a Three-Tiered Social Mobilization Network

**2.6 Million**  
households organized



# NRSP's Footprint in Pakistan

## LEGEND

NRSP Programme District



NRSP Hub Office



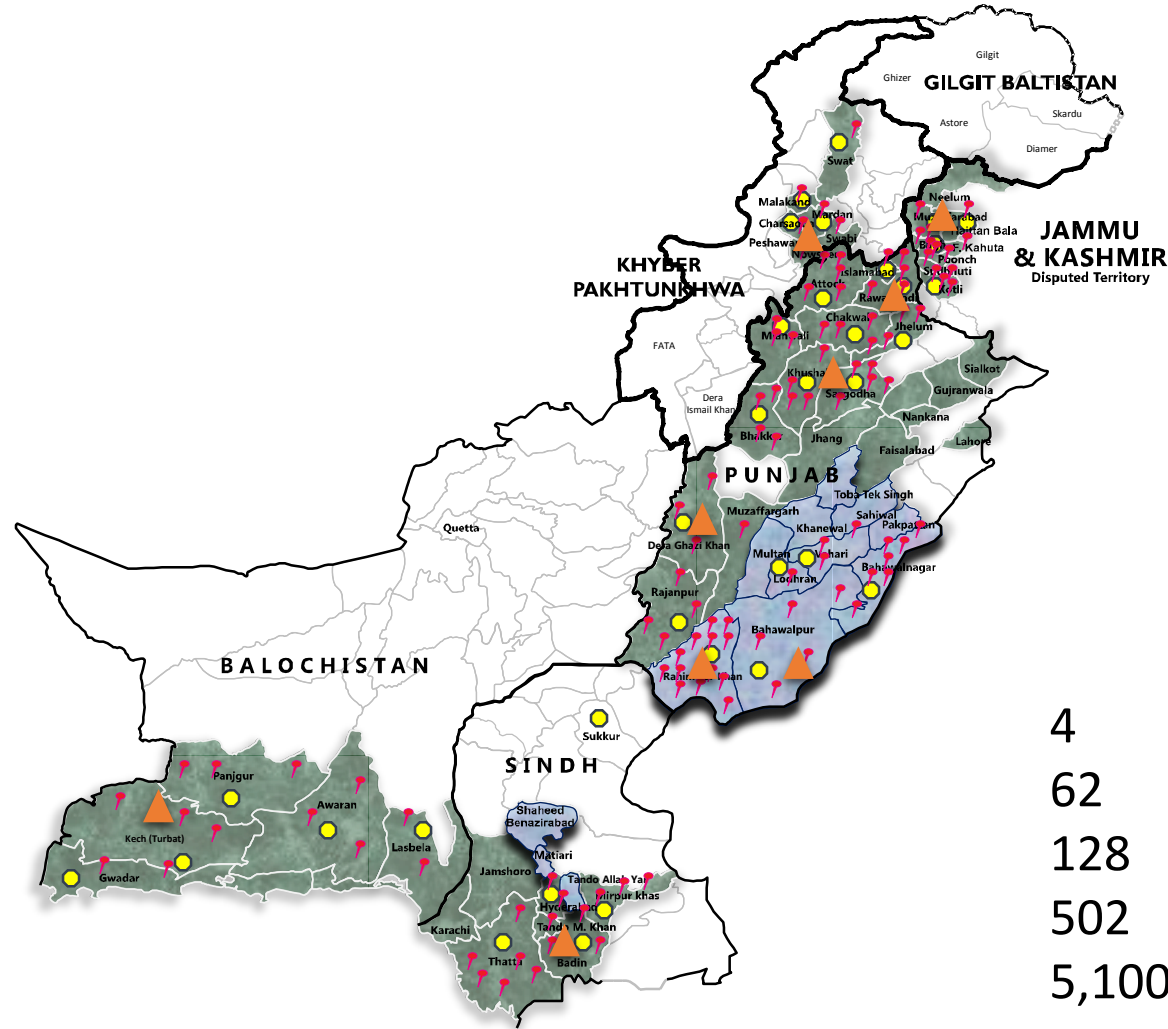
NRSP District Office



NRSP Field Unit



NRSP Bank Districts



4	Provinces & AJK
62	Districts
128	Tehsil Offices
502	Settlement offices
5,100	Professionals

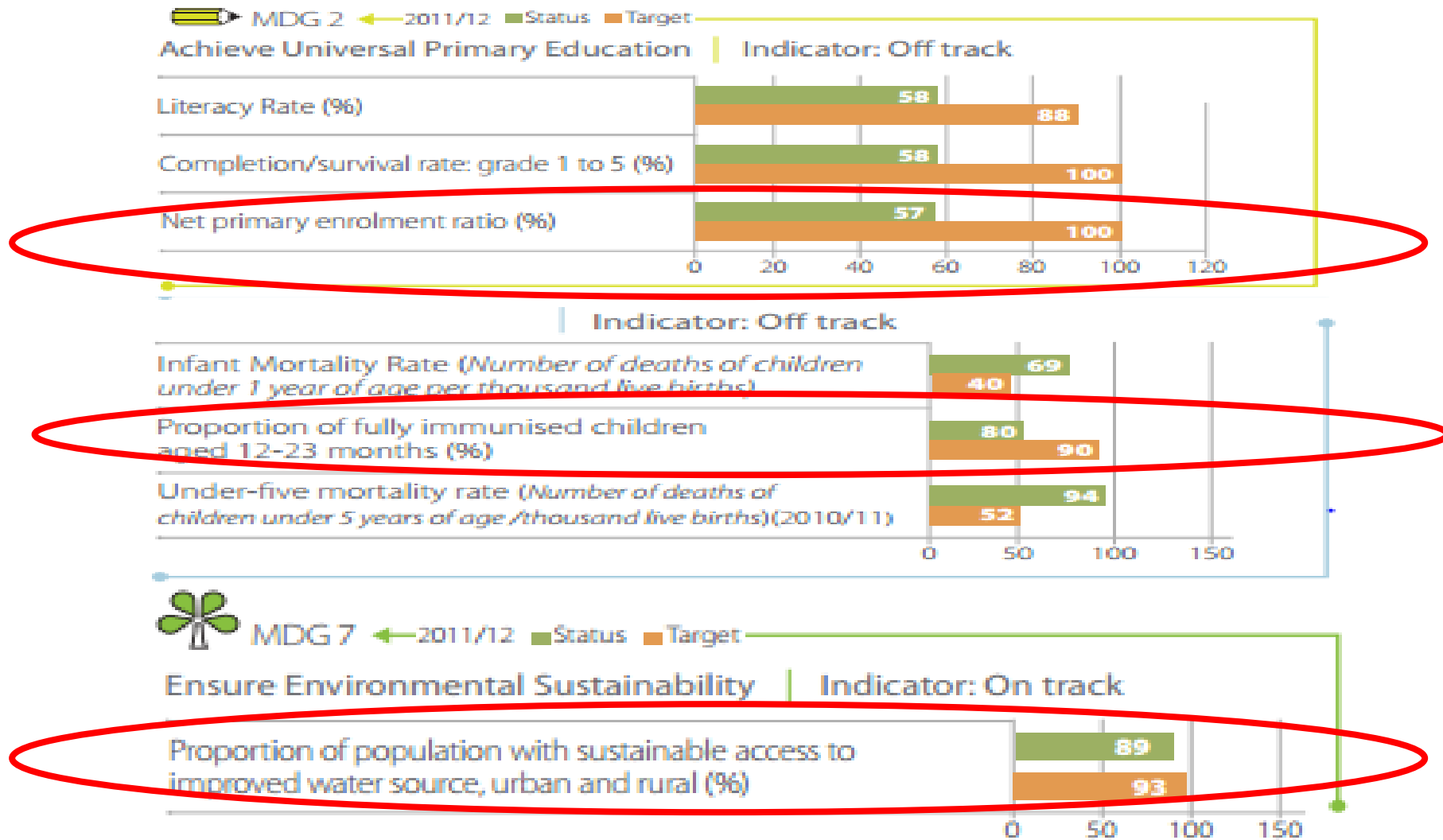
# What is WISE and why are we talking about it?

- Started with a question....What next?
  - UCBPRP was running in Sindh and KP funded by Provincial Govts.
    - Social mobilization with 90% Hhds organized
    - Assets creation
    - Access to finance
    - Skills training
  - Challenge was how to sustain the gains of social mobilization in the post project period
    - How to leverage the forums of organized communities for local “public goods” service delivery

# Local Public Goods

- **W**ater (potable drinking water)
- **I**mmunization (preventive health care)
- **S**anitation (solid and liquid waste)
- **E**ducation (primary education)
- These make more than 50% of any Provincial Government

# Status of WISE MDGs in Pakistan



# WISE & SDGs

- WISE also targets SDGs 6, 3 & 4 which Pakistan missed in MDGs
  - Difficult to achieve on National scale
  - Can be achieved at the local scale...i.e. Union Council Level;
- Provincial departments involved
  - PHED and LG&RD (Potable water)
  - Health (Immunization)
  - TMAs(Sanitation/solid waste management)
  - Education (Schools)



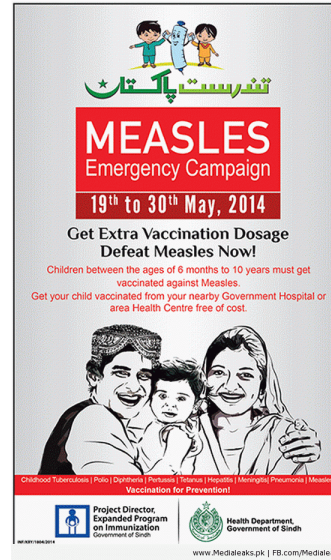


# Social divide that WISE highlights

Water



# Immunization



# Sanitation



# Education



# Is there a hope....?

.....there may be if we are wise to follow **wise**

# How did **WISE** start

- Started where 90% Hhds in a UC are organized in a given Union Council
  - Where NRSP has helped communities to undertake “private goods”
    - Assets creation
    - Access to finance
    - Skills training
- Involved the Organizations of the people and their activists (Community Resource Persons or CRPs)
- Collected primary data on WISE through the CRPs after training them as master trainers

# Pilot Union Councils

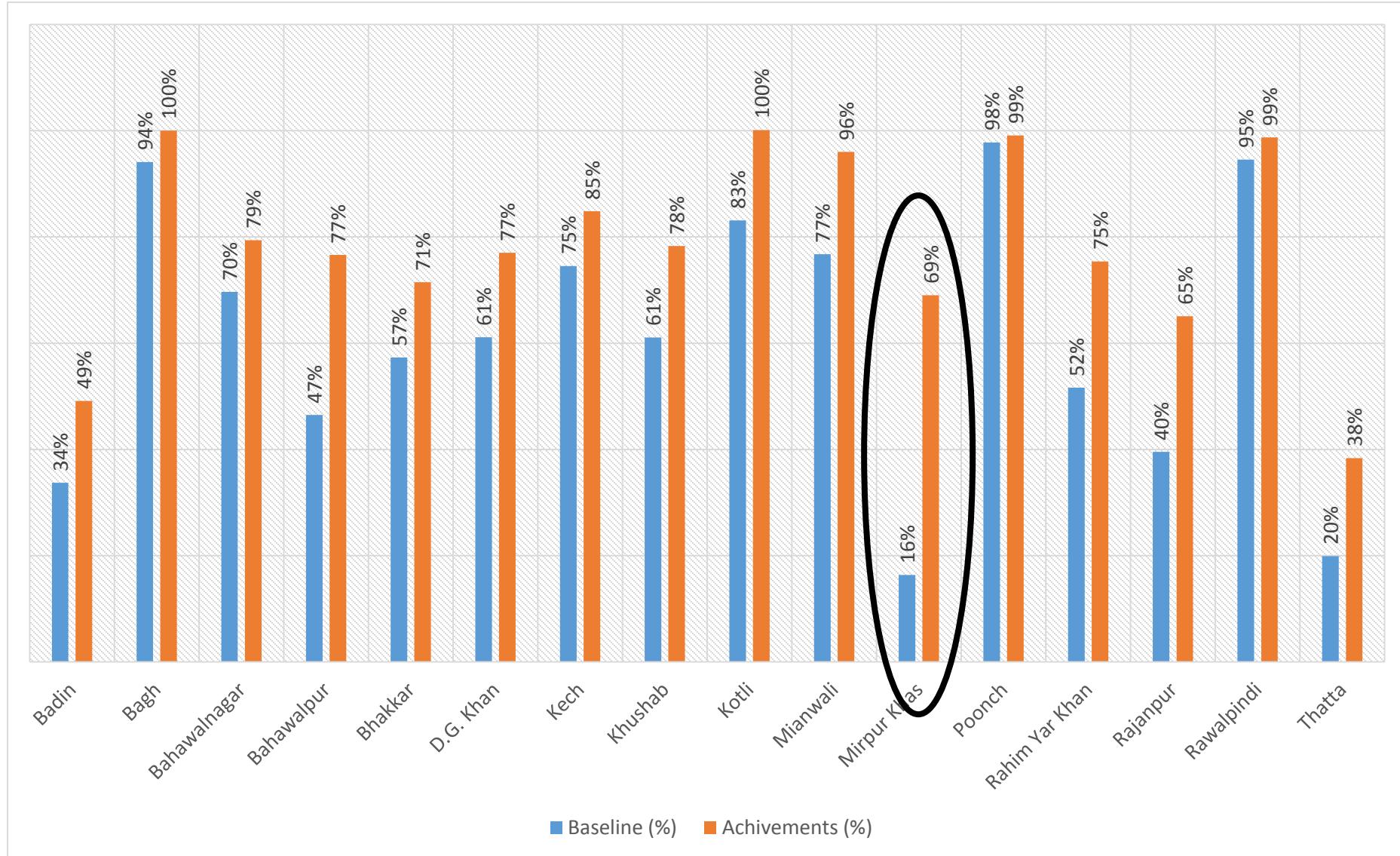
Province	District	Tehsil	Union Council
AJ&K	Bagh	Harighel	Rawali
	Kotli	Sehnsa	Atkora
	Poonch	Hajira	Bhantani
Balochistan	Kech	Turbat	Nodiz
KP	Swabi	Razar	Permoli
	Mardan	Mardan	Fatima
Punjab	Bahawalnagar	Bahawalnagar	Swai Wala
	Bahawalpur	Bahawalpur	24 BC
	Bhakkar	Darya Khan	Angra Dagar
	D.G.Khan	Kot Chutta	Kot Chutta
	Khushab	Khushab	Kufri
	Mianwali	Mianwali	Mari Indus
	Rahim Yar Khan	Rahim Yar Khan	Darri Azeem Khan
	Rawalpindi	Gujar Khan	Jand Mehlu
	Rajanpur	Rajanpur	Haji pur
Sindh	Badin	Badin	Abdullah Shah
	Mirpur Khas	Jhudo	Dilawar Hussain
	Thatta	Ghorabbarri	Garho

# Six month results

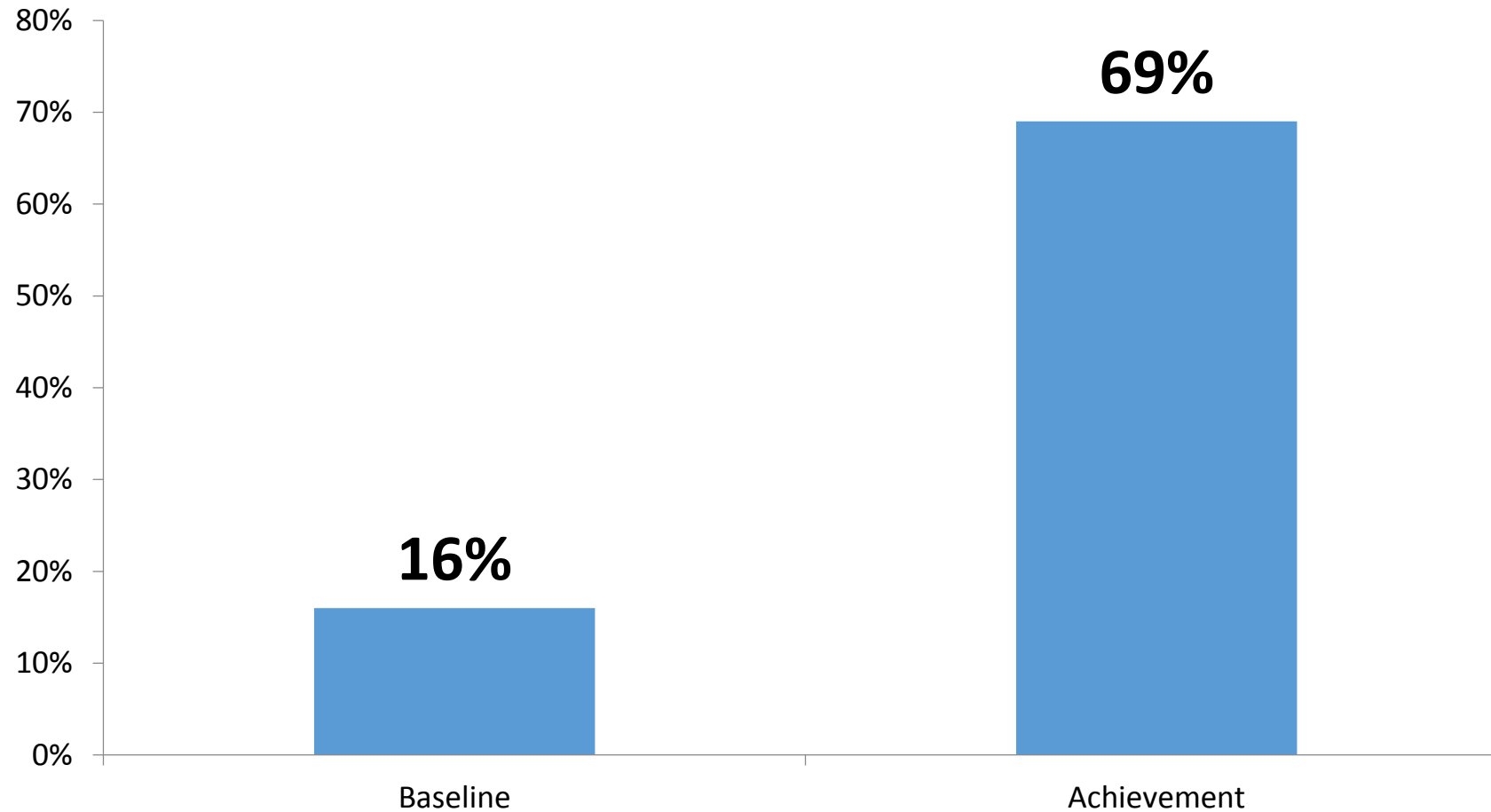
Against baseline



# Enrollment of primary school Children(%age)



# Increased Primary Enrollment in Dilawar Hussain-Mirpur Khas



# Steps Taken by LSO for increasing Enrollment

## **LSO Dilawar Hussain-Mirpur Khas**

- Among 64 schools (52 boys & 12 Girls) 45 were functional
- Through Advocacy meetings & identification of teachers- 10 more schools were made functional
- Out of 49 functional boys schools;
  - Proper building structure was not available in 7 Schools
  - No teacher available in 3 Schools
  - Community Managed Class Rooms and Teachers
- 16 Schools established through IRM ( 2Girls & 14 Co-education)
- Five Self Help Schools were established(One girls/ four Boys schools)
- Arranged funds for teacher salaries
- Supported children for books/stationery
- Second Shift Classes in two Schools due to insufficient infrastructure
- 22 Teachers trained

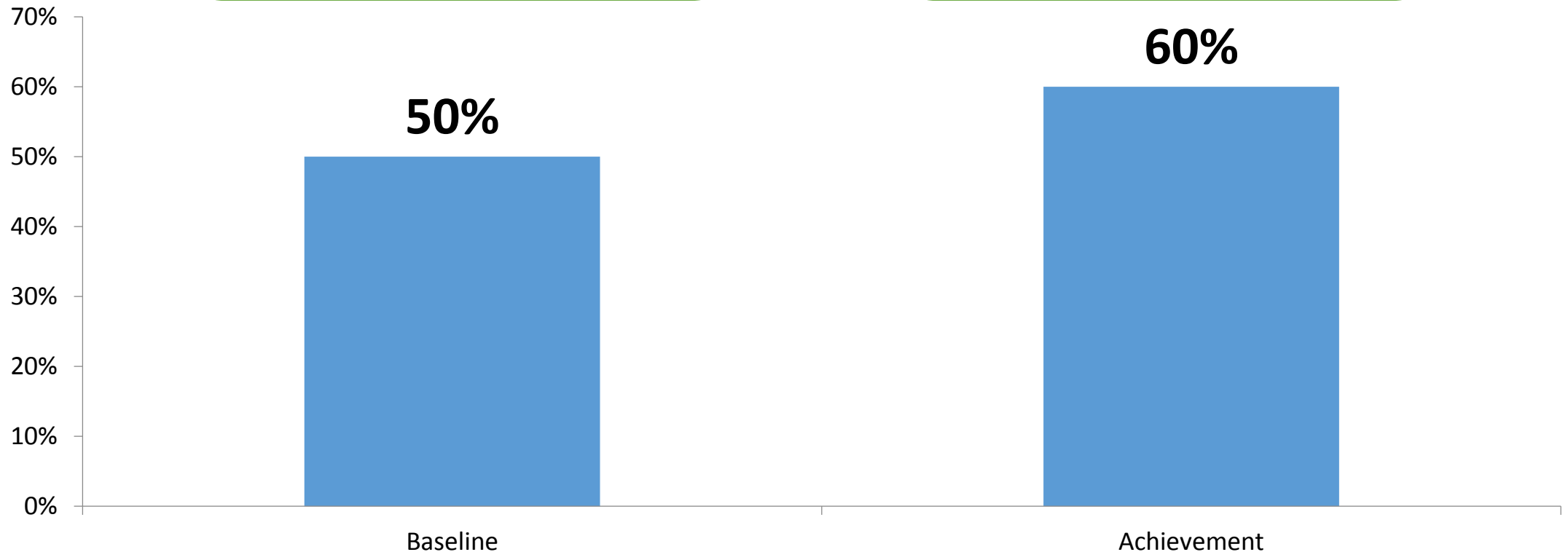
# School Enrollment



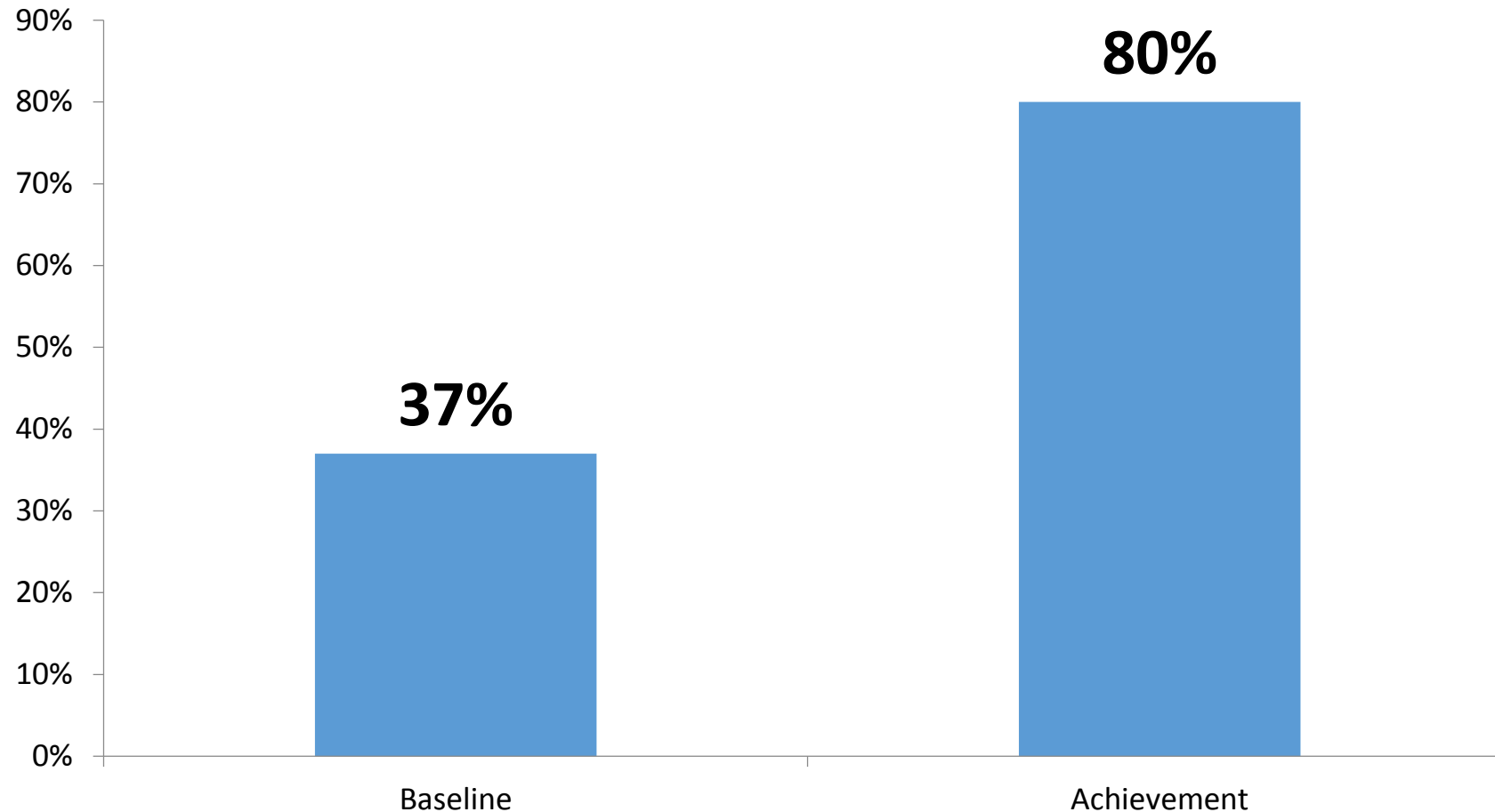
# Increase in Immunization Coverage

16% increase in fully immunized children (PENTA3) from 2007 to 2012 - PDHS

10% increase in fully immunized children (PENTA3) in six months



# Increase in immunization Coverage (Penta 3) in Dilawar Hussain-Mirpur Khas in six months



# Steps taken for improving immunization Coverage

## LSO Dilawar Hussain

- Accompanied vaccinator in non LHW areas especially focused **07 No go villages** and addressed the refusals
- Regular participation of vaccinator in CRP meetings
- Dissemination of vaccinator monthly schedule during sessions
- Regular follow ups through CRPs
- Arranged camps for Hepatitis B vaccination for community with support RHC Jhodo; so far vaccinated 1200 people

# Solid Waste Management

**BEFORE**



**AFTER**





# Solid Waste Management

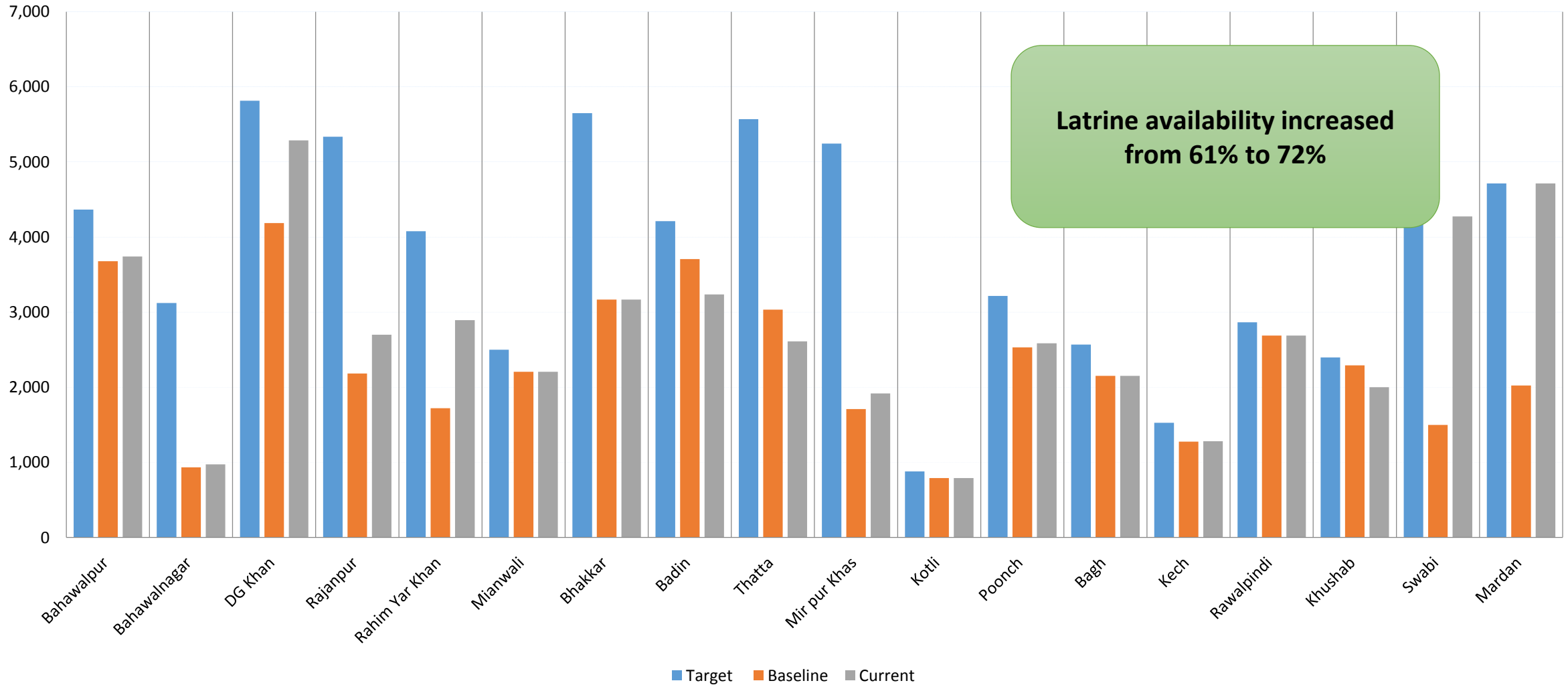
**BEFORE**



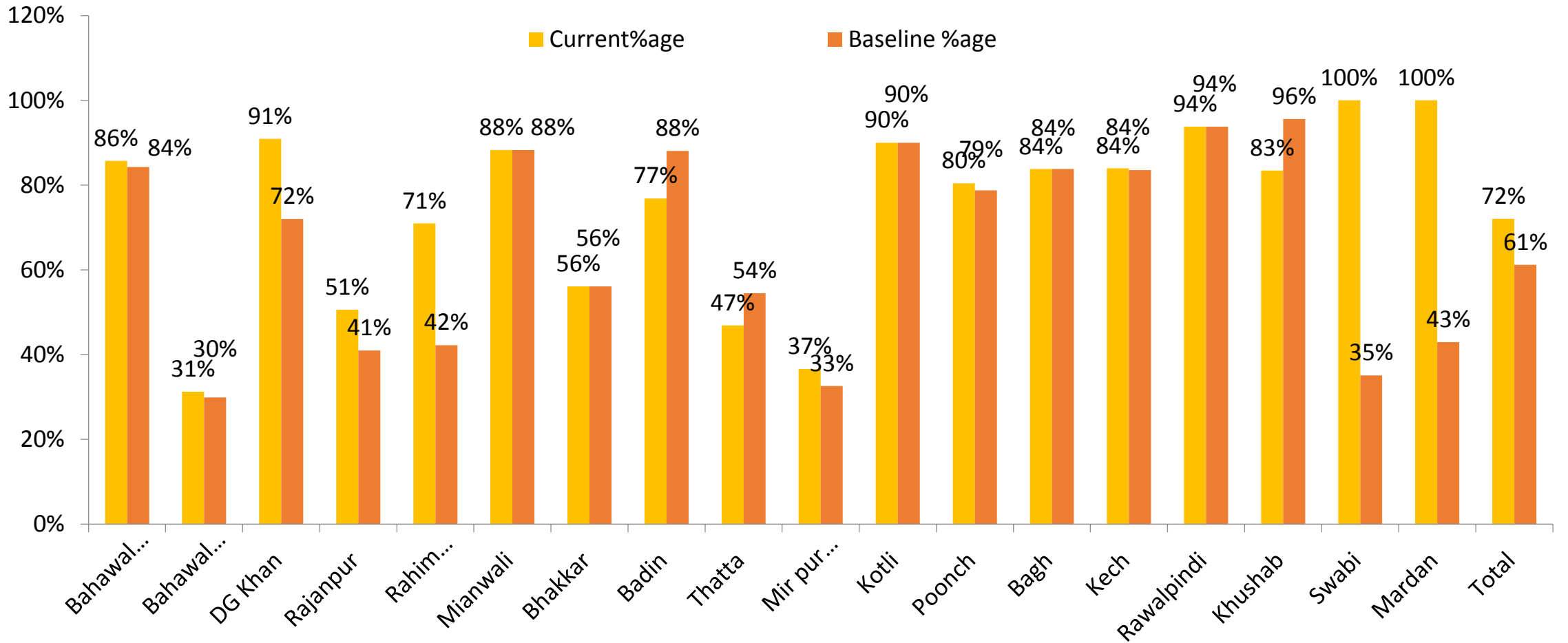
**AFTER**



# Latrines Constructed by Community



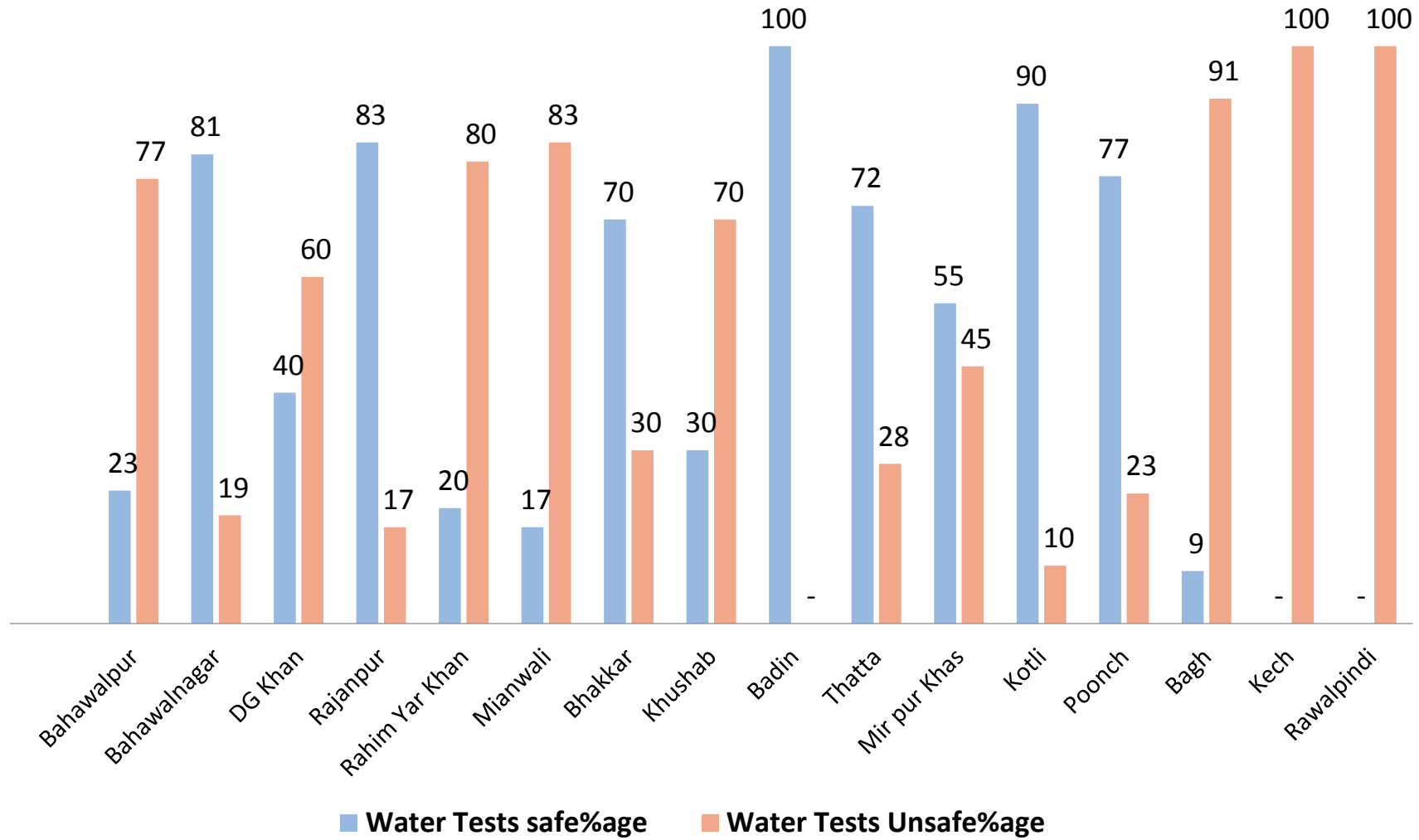
# Latrine Availability



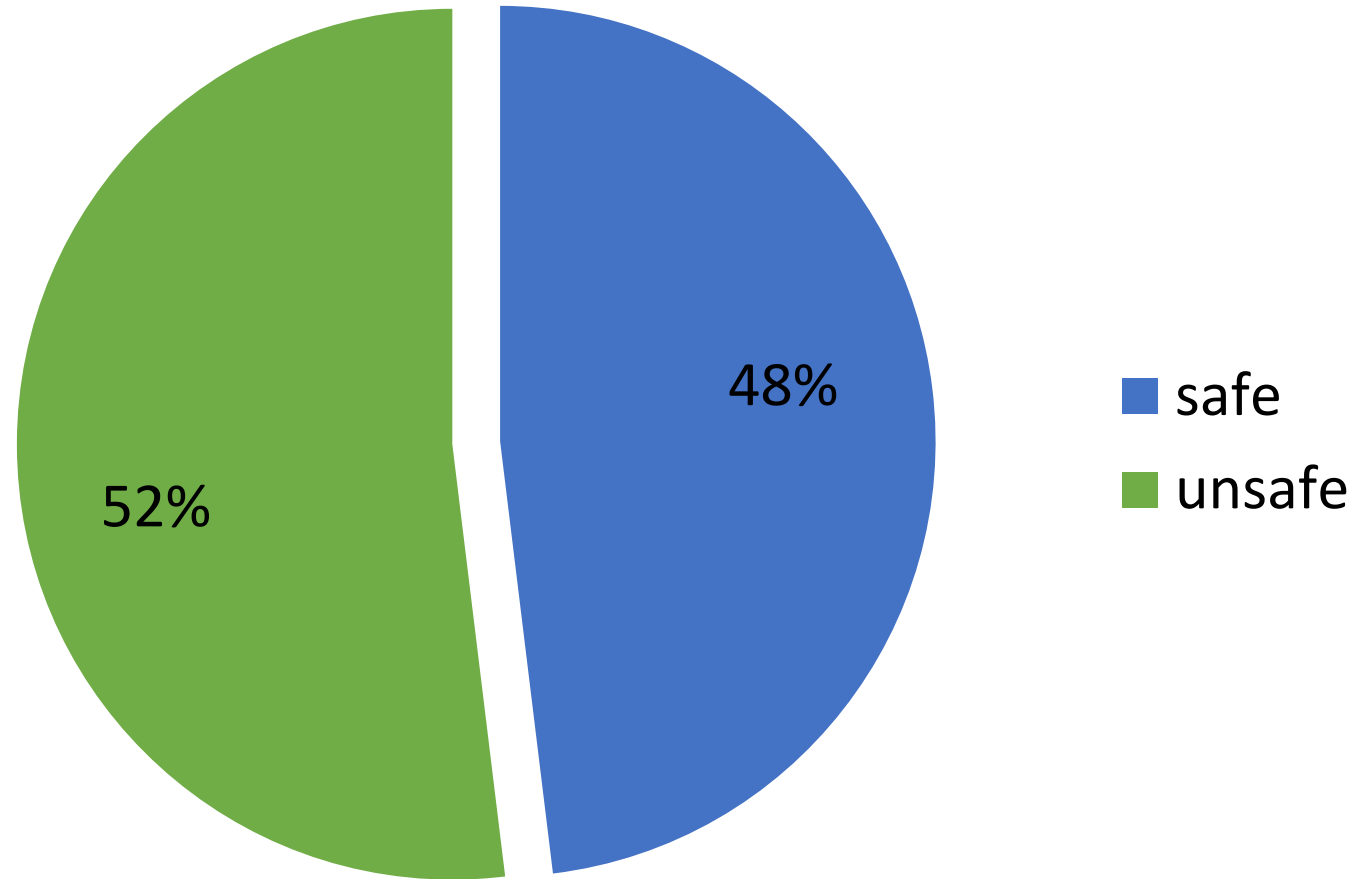
# Solid waste management Initiatives

- **LSO Mari Indus Mianwali**
- Installation of Dustbins
- Community motivated to clean the streets and VOs to ensure the cleanliness
- Hiring of sweepers for disposing of solid waste from dust bins and collection points
- LSO arranged tractors for levelling the areas, cleaning the waste heaps and filled the puddles
  - LSO provided donkey carts/motor cycle and trolleys for collection of solid waste
- Coordination with TMA for solid waste disposal

# Drinking Water Sources Tested



# Drinking Water Tests Results (%age)

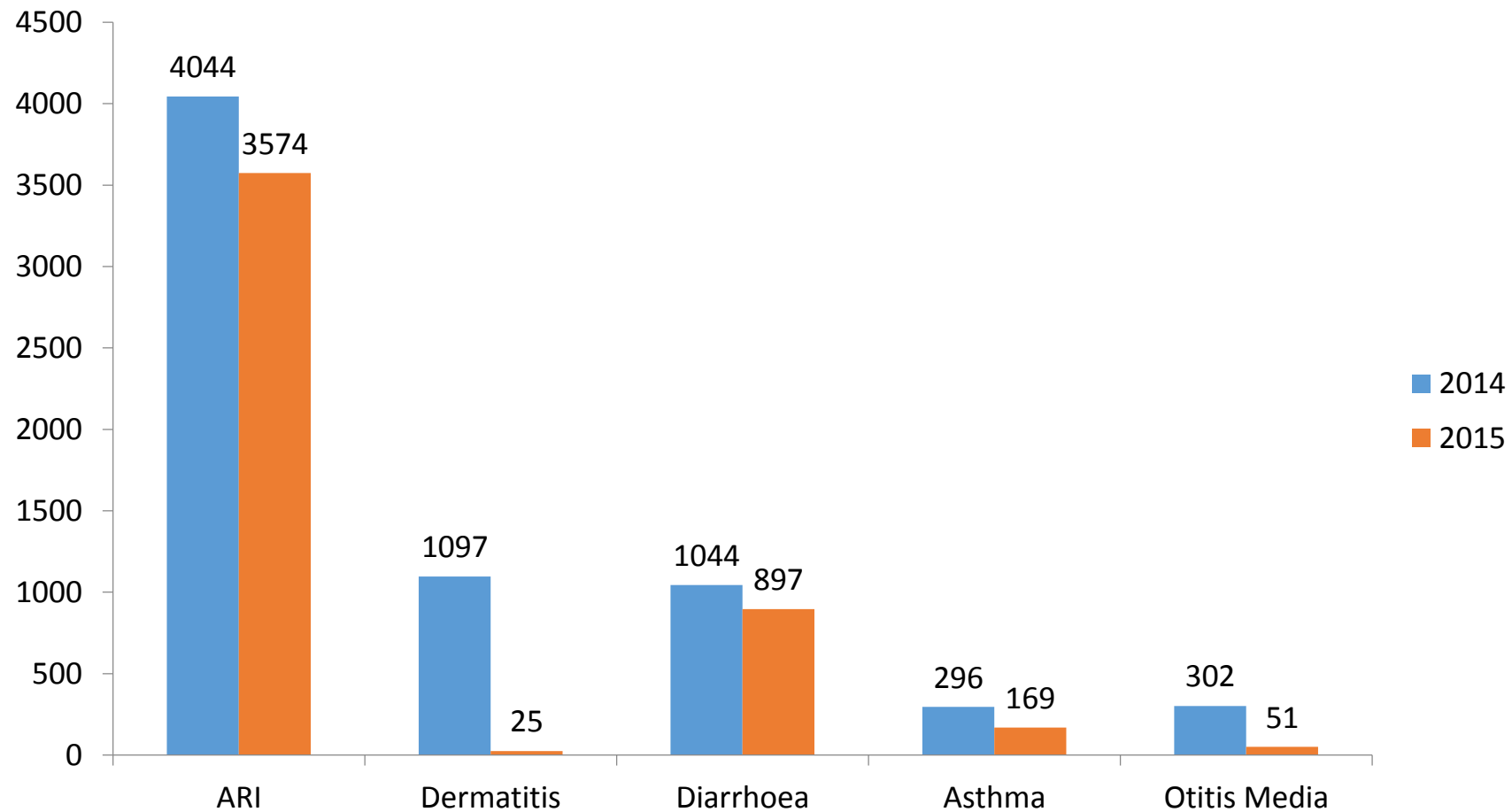


# Safe Drinking Water Initiatives

Community Education through Awareness sessions 57,529 Households educated for:

- Safe Drinking water, water borne infections
- Methods of Purification & Storage of water
- Water Sources/Points having safe drinking water
- Motivation of communities for adopting safe sanitation Practices
- 422 Water tests have been conducted
- More than 54,000 Aqua Tabs have been distributed through social marketing on subsidized rates
- SODIS and Boiling methods are commonly adopted by communities
- Installation of filters/ hand pumps and linking with drinking water schemes through linkages with other organizations
- Celebration of Hand washing/Global Toilet Day
- Theatres for community awareness

# Decreased Disease Trend in Union Council Mari Indus....Full sanitation & solid waste and clean water in six months





# Safe Drinking Water



# Policy implications

- Challenges in public level local service delivery are huge
- All the WISE challenges are now devolved
- Political will is at best “missing”
  - Because challenges are insurmountable
  - Local level politics is more important
  - It is assumed that local Governments will handle WISE
    - Assumption is without budget
    - And even if there was budget, the challenge will not go away
- Federal Government may become interested but the subject is devolved

# Policy Implications

- What the RSPs have demonstrated is that the challenge can be tackled
- Organized communities do take a higher role of “social development” once they are exposed to economic development
- Communities can undertake “WISE” but not on the terms of the Government
  - Issues of Governance and Ownership as these are “public sector” investments
- So the dilemma situation is
  - Will Government pass on ownership of WISE to the people
  - If they don't, will they ever achieve the goals they and the world have set up for them?

# WISE Challenges: Potable Water

- Has to be tackled at five stages
  - Source
  - Transportation
  - Storage
  - Utensils
  - Personal hygiene
- Treatment of chemically contaminated water is expensive
- PHED has no funds for water testing on regular/periodic basis

# WISE Challenges: Immunization

- Vaccinators reluctant in going to non LHW areas without incentives
- Out of stock vaccines especially BCG
- Cold chain management
- Illiteracy and social taboos

# WISE Challenges: Sanitation

- Non availability of Functional Sewerage System in most of the target areas
  - Laying down sewerage system is capital intensive
- Home kept animals and its waste choking open drains
- TMA does not cover rural areas (mostly urban focused)
  - Lack of waste disposal points

# WISE Challenges: Education

- Non Functional Schools
- Non availability of adequate number of Schools
- Physical Infrastructures in schools is not enough to accommodate children

# Can **WISE** be scaled up

- Most certainly as RSPs have a prominent footprint
- Government has to take the lead as it is not about local politics...
  - It is about service delivery
- Comprehensive and meaningful Social mobilization to have 90% social mobilization coverage and a little money is all that is needed



Thank you

Questions?