QUARTERLY HEALTH DIARY PPHI BALOCHISTAN July-September, 2017, Volume-15



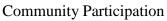


UMEED KI KIRAN



TEN COMPONENTS OF PRIMARY HEALTHCARE







Health Education



Provision of Safe Drinking Water



Provision of Essential Drugs



Curative Care



Non-Communicable Diseases



PPHI

Mental Health



Improve Nutritional Status





Maternal & Child Care

Immunization

ABBREVIATIONS

| ADSM | Assistant District Support Managar |
|---------|---|
| ADSM | Assistant District Support Manager Antenatal Care |
| ARV | Anti-Rabies Vaccine |
| | |
| ASV | Anti-Snake Venom |
| BCG | BacilleCalmette-Guerin |
| BHU | Basic Health Unit |
| BNPMC | Balochistan Nutrition Program for Mother and Children |
| CEO | Chief Executive Officer |
| CHS | Community Health Sessions |
| COCs | Combined Oral Contraceptives |
| CMAM | Community-based Management of Acute Malnutrition |
| DHIS | District Health Information System |
| DMPA | Generic name of Progestin-only inject able |
| DOTs TB | Direct Observing Therapy Tuberculosis |
| DSM | District Support Manager |
| ENT | Ear Nose & Throat |
| EPI | Expanded Program for Immunization |
| FELTP | Field Epidemiology & Laboratory Training Program |
| FMT | Female Medical Technician |
| HF | Health Facility |
| IUCD | Intrauterine Contraceptive Device |
| IYCF | Infant and Young Child Feeding |
| LBW | Low Birth Weight |
| LHV | Lady Health Visitor |
| LMO | Lady Medical Officer |
| LLITMs | Long-lastinginsecticide-treated materials |
| MCH | Mother and Child Health |
| M&EO | Monitoring and Evaluation Officer |
| MO | Medical Officer |
| MT | Medical Technician |
| MUAC | Mid Upper Arm Circumference |
| NET-EN | Generic name of combined inject able |
| OPD | Out Patient Department |
| OPV | Oral Polio Vaccine |
| OTP | |
| | Outpatient Therapeutic Program |
| PNC | PostNatal Care |
| POP | Progestin Only Pill |
| PEM | Protein Energy Malnutrition |
| PHC | Primary Health Care |
| PPHI-B | People's Primary Healthcare Initiatives-Balochistan |
| RHC | Rural Health Center |
| SAM | Severe Acute Malnutrition |
| SG | Support Group |
| SHS | School Health Session |
| SO | Social Organizer |
| TB | Tuberculosis |
| TT | Tetanus Toxoid |
| WHO | World Health Organization |
| | |

1. HEALTH SERVICES PERFORMANCE TARGETS VERSUS ACHIEVEMENTS

1.1 PPHI Balochistan Health Services Performance Measurements Targets and Achievements in Percentages July- September 2017

| | | | Achiever | nents | | | | | | |
|--------|---|---------------------|--------------|----------------|-------------------|--------|------------|--|--|--|
| S # | Health Services | Quarterly Target | July 2017 | August 2017 | September 2017 | Total | Percentage | | | |
| 1. | PREVENTIVE CARE | | | | | | | | | |
| i. | COMMUNITY PARTIC | CIPATION/ | HEALTH | EDUCAT | ION | | | | | |
| a) | Social Group Meetings | 954 | 301 | 303 | 293 | 897 | 94 | | | |
| b) | Community Health Sessions | 954 | 298 | 311 | 303 | 912 | 95 | | | |
| c) | School/Madressa Health Sessions | 954 | 270 | 282 | 279 | 831 | 87 | | | |
| ii. | IMMUNIZATION | IMMUNIZATION | | | | | | | | |
| a) | Fully Immunized Children under one year | 17698 | 3947 | 3817 | 3783 | 11547 | 65 | | | |
| b) | Pregnant Women TT 2 | 37962 | 2831 | 2979 | 2854 | 8664 | 23 | | | |
| iii. | MATERNAL CHILD H | EALTH SE | RVICES | I | I | I | ł | | | |
| a) | Antenatal Care 1 | 37962 | 11158 | 10334 | 9600 | 31092 | 82 | | | |
| b) | ANC Women with Hb <10 g/dl | | 1130 | 1189 | 1552 | 3871 | | | | |
| c) | Antenatal Care Revisit | 37962 | 6400 | 6372 | 5440 | 19212 | 51 | | | |
| d) | Post Natal Care | 37962 | 4787 | 4762 | 6407 | 14156 | 37 | | | |
| e) | Complicated Pregnancies cases referred | 3796 | 551 | 517 | 534 | 1602 | 42 | | | |
| iv. | FAMILY PLANNING VISITS | 149352 | 8495 | 7927 | 8029 | 24451 | 16 | | | |
| 2. | CURATIVE CARE | | _ | | - I | • | | | | |
| a) | OPD | 893008 | 315859 | 305877 | 284298 | 906034 | 101 | | | |
| b) | Under 5 years malnutrition children | | 3478 | 4034 | 3332 | 10844 | | | | |
| c) | Quarterly Incidence of TB | 251 | | | | 77 | 31 | | | |
| d) | Hepatitis B&C Screening | 0 | 1030 | 1270 | 1025 | 3325 | | | | |
| e) | Referred cases to Higher Health Facility | 44650 | 5011 | 5749 | 4858 | 15618 | 37 | | | |
| 3. | MONITORING, SU | | | | | I | | | | |
| a) | DIHS Monthly Reporting | 1881 | 623 | 627 | 627 | 1877 | 99 | | | |
| b) | DSM/ADSM Visits | 1080 | 331 | 334 | 305 | 970 | 90 | | | |
| c) | M&E Officer Visits | 1344 | 341 | 352 | 379 | 1072 | 79 | | | |

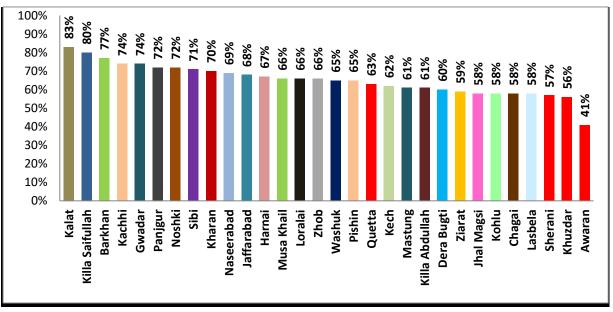
SOURCE: DHIS REPORTS PPHI/ F1 TO F13 REPORTING SYSTEM PPHI BALOCHISTAN

1.2 Percentage of Performance Measurement of Achievements of PPHI Balochistan against Targets for District Health Services July-September, 2017

The achievement of PPHI-Balochistan against the set targets regarding delivery of PHC services in first quarter 2017 as compared to quarter second 2017 has been sustained at 99 %. In certain indicators the reporting of Districts was not up to the mark and such district support units were directed to examine their strenghths, weaknesses, threats to improve their reporting for following indicators:-

- 1. Ensure timely 100 % BHUs monthly reporting specially in newly functional BHUs of District Pishin, Zhob, Kohlu, Musakhail, Khuzdar, Washuk from July 1st, 2017.
- 2. Report follow up case or old case.
- 3. At least 5 % of total OPD cases may be reported in referrals to Higher Health Facilities.
- 4. Stop zero reporting and least 8-10 % of total ANC may be reported in referring complicated pregnancy cases to Higher Health Facilities for saving mothers and their babies.
- 5. Improving MCHS
- 6. Improving immunization coverage.
- 7. TB Care Health Facilities must report and achieve quarterly targets.
- 8. Stop zero reporting of malnourished children under 5 years.
- Number of Malnutrition children under five year reported in monthly DHIS reports in Nutrition Districts Sibi, Noshki, Kharan, Killa Saifullah, Zhob, Panjgoor & Kohlu will be considered as a performance indicator. It was conveyed to District Support Managers of these districts in meeting being held at Head Office PPHI – B on August 8th, 2017
- 10. Stop home treatment & encourage the patients to visit BHUs
- 11. Make women friendly atmosphere & Facilitate them to visit BHUs for MCHS & management of minor eilments.
- 12. Ensure Log Quality Assurance of DHIS Reporting during DSM, ADSM & M & E Officers visits.
- 13. Management of Essential Drugs at BHU
- 14. Enhance the MCH Plus 24/7 activities in BHU
- 15. The DSUs have a internal meeting on monthly DHIS reporting on 5th of every month to check errors, incorrect reporting & compare the DHIS reports with F1-F13 reporting formats.

After proper analysis & evaluation of the DHIS monthly reports and F1 to F13 reports, the districts Kalat, Killa Saifullah ranked as "Excellent" Barkhan, Gwadar, Kachhi, Panjgoor, Noshki, Sibi, Kharan & Naseer Abad ranked as "Best" Jaffar Abad, Harnai, Zhob, Musa Khail, Loralai, Washuk, Pishin, Quetta, Kech, Mastung, Killa Abdullah, Dera Bugti, & Ziarat as "Better", Lasbella, Jhal Magsi, Chaghi, Kohlu, Sherani and Khuzdar and as "Good" Awaran in Everage.



1.3 DISTRICT HEALTH SERVICES PERFORMANCE MEASUREMENTS TARGETS AND ACHIEVEMENTS IN PERCENTAGES JULY TO SEPTEMBER, 2017 (Continued..)

| Pre | eventive care | | | | | | | | | | | |
|------|---------------|-------------|-------------|-------|-------|------------------|--------|-------|-------------|-----|--------------------------------|--------------------|
| | | | Health | Educa | ation | | ınizat | МСН | [| | | |
| S.No | Districts | No. of BHUs | SG Meetings | CHSs | SHSs | Fully < 1 yr uoi | TT 2 | ANC 1 | ANC Revisit | PNC | Comp. Pregnancy Referred | Family Planning |
| 1 | Kalat | 14 | 100 | 100 | 100 | 82 | 62 | 84 | 77 | 76 | 69 | 46 |
| 2 | K.Saifullah | 15 | 100 | 100 | 100 | 75 | 62 | 77 | 81 | 76 | 50 | 45 |
| 3 | Barkhan | 7 | 100 | 100 | 100 | 57 | 17 | 84 | 85 | 86 | 4 | 44 |
| 4 | Gwadar | 22 | 100 | 100 | 94 | 87 | 11 | 77 | 72 | 31 | 43 | 49 |
| 5 | Kachhi | 11 | 100 | 92 | 92 | 76 | 56 | 84 | 89 | 23 | 0 | 21 |
| 6 | Panjgur | 24 | 96 | 100 | 93 | 51 | 13 | 85 | 37 | 56 | 50 | 19 |
| 7 | Noshki | 10 | 83 | 100 | 53 | 86 | 26 | 81 | 65 | 57 | 60 | 16 |
| 8 | Sibi | 15 | 100 | 100 | 56 | 50 | 44 | 73 | 30 | 61 | 74 | 13 |
| 9 | Kharan | 14 | 100 | 100 | 78 | 43 | 20 | 89 | 49 | 42 | 41 | 19 |
| 10 | Naseerabad | 15 | 100 | 100 | 100 | 84 | 66 | 70 | 55 | 43 | 41 | 22 |
| 11 | Jaffarabad | 38 | 61 | 61 | 72 | 86 | 49 | 84 | 60 | 42 | 48 | 11 |
| 12 | Harnai | 7 | 100 | 100 | 100 | 86 | 51 | 43 | 9 | 38 | 0 | 8 |
| 13 | Zhob | 17 | 100 | 100 | 83 | 53 | 16 | 84 | 63 | 41 | 0 | 4 |
| 14 | Musa Khail | 21 | 100 | 100 | 100 | 67 | 16 | 59 | 48 | 46 | 31 | 33 |
| 15 | Loralai | 35 | 100 | 100 | 100 | 57 | 27 | 52 | 27 | 19 | 26 | 14 |
| 16 | Washuk | 23 | 100 | 100 | 100 | 14 | 6 | 72 | 39 | 42 | 0 | 15 |
| 17 | Pishin | 30 | 100 | 100 | 100 | 54 | 15 | 85 | 70 | 34 | 51 | 12 |
| 18 | Quetta | 38 | 100 | 100 | 100 | 71 | 35 | 44 | 27 | 13 | 74 | 23 |
| 19 | Kech | 38 | 94 | 100 | 41 | 59 | 22 | 86 | 43 | 22 | 66 | 12 |
| 20 | Mastung | 14 | 100 | 100 | 100 | 18 | 12 | 37 | 55 | 26 | 0 | 13 |
| 21 | K.Abdullah | 37 | 100 | 97 | 100 | 60 | 17 | 30 | 12 | 9 | 33 | 1 |
| 22 | Dera Bugti | 32 | 100 | 92 | 89 | 87 | 16 | 28 | 34 | 22 | 31 | 0 |
| 23 | Ziarat | 14 | 100 | 100 | 100 | 52 | 7 | 38 | 16 | 50 | 0 | 11 |
| 24 | Lasbela | 42 | 100 | 100 | 100 | 29 | 12 | 69 | 46 | 27 | 23 | 22 |
| 25 | Jhal Magsi | 11 | 94 | 100 | 100 | 35 | 21 | 46 | 15 | 16 | 0 | 8 |
| 26 | Chagai | 12 | 100 | 100 | 100 | 84 | 15 | 14 | 5 | 2 | 13 | 10 |
| 27 | Kohlu | 36 | 100 | 100 | 100 | 12 | 4 | 48 | 23 | 14 | 1 | 4 |
| 28 | Sherani | 11 | 100 | 100 | 100 | 38 | 0 | 61 | 38 | 22 | 0 | 1 |
| 29 | Khuzdar | 43 | 91 | 85 | 100 | 37 | 9 | 41 | 13 | 11 | 0 | 20 |
| 30 | Awaran | 7 | 67 | 44 | 0 | 32 | 15 | 17 | 13 | 5 | 18 | 0 |
| | | 653 | | | | | | | | | | |

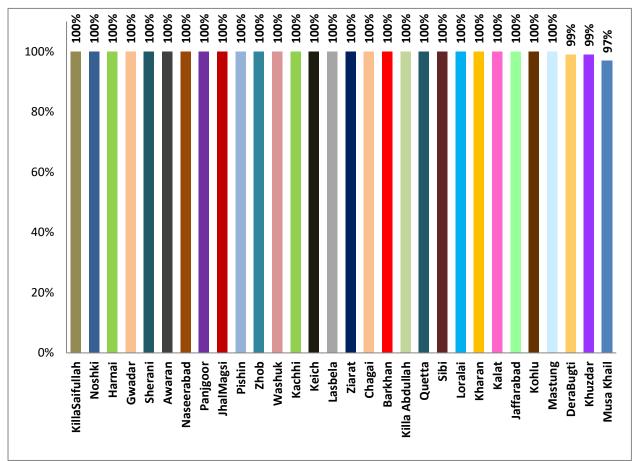
SOURCE: DHIS REPORTS PPHI/ F1 TO F13 REPORTING SYSTEM PPHIBALOCHISTAN

DISTRICT HEALTH SERVICES PERFORMANCE MEASUREMENTS TARGETS AND ACHIEVEMENTS IN PERCENTAGES JULY TO SEPTEMBER, 2017

| | | | | Curat | tive Car | e | | Super | nitorii rvision portin | and | tion | ing | stricts |
|------|-------------|----------------|-----|--|--------------------------------|-----------|-----------|---------------------------|------------------------------|-----------------------|------------------------|------------------------|-----------------------|
| S.No | Districts | No. of BHUs | OPD | No. <5 years malnourished children | No. Hepatitis B&C screening | Quarterly | Referrals | Monthly DHIS reporting | DSMs/ADSM Visits | M&E Officer Visits | BHU Utilization | District Rating | Category of Districts |
| 1 | Kalat | 14 | 101 | 740 | 354 | 1 | 40 | 100 | 100 | 0 | 111 | 83 | A=80-89 |
| 2 | K.Saifullah | 15 | 103 | 55 | 308 | - | 62 | 100 | 100 | 71 | 107 | 80 | A=80-89 |
| 3 | Barkhan | 7 | 132 | 21 | 83 | 3 | 61 | 100 | 100 | 95 | 63 | 77 | B=70-79 |
| 4 | Gwadar | 22 | 90 | 0 | 36 | 0 | 17 | 100 | 83 | 100 | 137 | 74 | B=70-79 |
| 5 | Kachhi | 11 | 100 | 0 | 0 | - | 10 | 100 | 100 | 0 | 160 | 74 | B=70-79 |
| 6 | Panjgur | 24 | 103 | 139 | 49 | 1 | 16 | 100 | 100 | 100 | 66 | 72 | B=70-79 |
| 7 | Noshki | 10 | 89 | 157 | 24 | 0 | 23 | 100 | 100 | 43 | 81 | 72 | B=70-79 |
| 8 | Sibi | 15 | 83 | 88 | 22 | 1 | 23 | 100 | 100 | 100 | 115 | 71 | B=70-79 |
| 9 | Kharan | 14 | 90 | 87 | 199 | 13 | 32 | 100 | 100 | 97 | 108 | 70 | B=70-79 |
| 10 | Naseerabad | 15 | 99 | 322 | 0 | 9 | 16 | 100 | 56 | 0 | 86 | 69 | C=60-69 |
| 11 | Jaffarabad | 38 | 95 | 96 | 0 | 17 | 10 | 100 | 100 | 68 | 143 | 68 | C=60-69 |
| 12 | Harnai | 7 | 86 | 49 | 0 | - | 78 | 100 | 100 | 0 | 106 | 67 | C=60-69 |
| 13 | Zhob | 17 | 123 | 67 | 22 | - | 58 | 100 | 100 | 0 | 64 | 66 | C=60-69 |
| 14 | Musa Khail | 21 | 120 | 440 | 121 | 4 | 33 | 100 | 100 | 98 | 102 | 66 | C=60-69 |
| 15 | Loralai | 35 | 121 | 990 | 246 | - | 36 | 100 | 100 | 94 | 81 | 66 | C=60-69 |
| 16 | Washuk | 23 | 111 | 103 | 0 | - | 9 | 100 | 78 | 97 | 164 | 65 | C=60-69 |
| 17 | Pishin | 30 | 102 | 137 | 384 | | 11 | 100 | 100 | 100 | 72 | 65 | C=60-69 |
| 18 | Quetta | 38 | 107 | 458 | 538 | 17 | 28 | 100 | 100 | 95 | 50 | 63 | C=60-69 |
| 19 | Kech | 38 | 110 | 36 | 150 | - | 16 | 100 | 100 | 97 | 94 | 62 | C=60-69 |
| 20 | Mastung | 14 | 77 | 643 | 0 | 4 | 59 | 100 | 100 | 100 | 79 | 61 | C=50-59 |
| 21 | K. Abdullah | 37 | 110 | 82 | 62 | 0 | 18 | 100 | 100 | 99 | 87 | 61 | C=50-59 |
| 22 | Dera Bugti | 32 | 104 | 11 | 0 | 2 | 0 | 99 | 100 | 0 | 104 | 60 | C=60-69 |
| 23 | Ziarat | 14 | 89 | 148 | 0 | - | 29 | 100 | 100 | 90 | 64 | 59 | D=50-59 |
| 24 | Lasbela | 42 | 107 | 35 | 38 | 0 | 7 | 100 | 91 | 79 | 81 | 58 | D=50-59 |
| 25 | Jhal Magsi | 11 | 97 | 82 | 61 | 0 | 26 | 100 | 94 | 100 | 82 | 58 | D=60-69 |
| 26 | Chagai | 12 | 102 | 26 | 25 | 5 | 15 | 100 | 100 | 94 | 76 | 58 | D=50-59 |
| 27 | Kohlu | 36 | 101 | 53 | 104 | 2 | 27 | 100 | 100 | 100 | 91 | 58 | D=50-59 |
| 28 | Sherani | 11 | 72 | 0 | 0 | - | 78 | 100 | 100 | 0 | 50 | 57 | D=60-69 |
| 29 | Khuzdar | 43 | 102 | 654 | 0 | 4 | 32 | 99 | 83 | 60 | 118 | 56 | D=60-69 |
| 30 | Awaran | 7 | 86 | 3 | 0 | - | 0 | 100 | 69 | 75 | 120 | 41 | E=50-41 |
| | | 653 | | 10844 | 2,826 | 77 | | | | | | | |

No TB Health Care Facility 0 = Non reporting TB Health Care Facility Under 5 years malnourished children, Hepatitis B&C Screened cases& TB cases are in numbers A1= Extra Ordinary, A = Excellent, B = Best, C= Better, D = Good, E = Average * Balochistan Nutrition Program for Mothers & Children (BNPMC)

SOURCE: DHIS REPORTS PPHI/ F1 TO F13 REPORTING SYSTEM PPHIBALOCHISTAN



1.4 THE DISTRICT HEALTH INFORMATION SYSTEM REPORTING

SOURCE: DHIS REPORTS PPHI BALOCHISTAN

REGULARITY IN THIRD QUARTER OF 2017 (JULY-SEPTEMBER) IS AS FOLLOWING

The DHIS reporting in HF/BHUs is performing well and 99% facilities are reported in third quarter (Julyl to September) 2017 in PPHI-managed facilities. Now we are looking to cut down errors in reporting from BHUs and audit of information with feed-back to the healthcare provider. There is no Homeopathic care facility at any BHU yet some districts like Lasbela 20, Awaran 51, Khuzdar 70 & Loralai 25 reported cases for Homeopathic treatment and Tibb/Unani cases were reported from Khuzdar 1, Mastung 10 & Loralai 2. These errors were identified and conveyed to these districts accordingly.

It was observed the major errors recorded in Section V, VII and VIII; in Section V in sub sectin 3 Fully Immunized Childeren are those who received "*Penta 3 and Measal 1" for example BHU Khajak report Penata 3 are 17 and Measal 1 are 21, so* Fully Immunized Childeren should be 17. Section VII Family Planning sub section 1 Total FP vists = 2+3+4+5+6+7+8+9+10 (6 Condom Pieces are equal 1 visit for example distribution of 60 condomms is equal 10 visits so write 10 sub colume 6 not 60, <u>Family</u> <u>Planning Rigister</u>. Let us come to Section VIII Maternal and New Boern Health sub section 1,2,3,4 are easy to put numbers of ANC1, ANC with Hb <10g/dl <u>MCH rigister</u> (where loborateries are functional or a case refferes to other facility for Hb) and sub section 5 Normal Deliveries are = 6+7+8+9+10. <u>Obstetrics Rigister</u>

The timely reporting of more than 627 BHUs/HFs is owing to improvement of health information and management system which has been obtained due to continuous efforts of BHU in-charges, district PPHI teams & DHIS cell in head office. The district manager and head office can use this data in planning, supervision, monitoring & evaluation of health services. The data can be used for research and policy making in the requisite field.

2. PERFORMANCE OF PPHI-B IN NUTRITION COMPONENT IN THIRD QUARTER OF 2016-2017 (JULY-SEPTEMBER 2017)

The declaration of the 2017 census results, the demographic profile of the districts and targets have been changed. The target of the children under five and pregnant and lactating women have been changed in seven targeted districts. The detail union Council wise census report is not available so far, thereby the catchment areas of the BHUs's Population could not have been calculated accurately according to new census.

Keeping in view the previous practices, estimated population covered by BHUs managed by PPHI was about 38 %. Quarter 3, 2017 report 38 % districts has been taken as PPHI-B covered population as denominator. After availability of detailed census data, Demographic Profile and target will be changed according to new census report. Against the Target of 105 OTPs, 107 OTPS had been established and made functional in seven target districts which include seven OTPs in DHQ hospitals.

During the review of the performance of the PPHI-B with BNPMC, Program Director pointed out that one OTP each in Nushki and Kharan and two BHUs in Zhob in the area of Kakar Kursan were found closed during his monitoring visits. Immediate action has been taken and DSMs of the concerned districts were strictly conveyed to take immediate action to open and functionalize the said OTPs with evidence based reporting for the same.

| S:NO | District | Target of BHUs/ OTPs | Established\Functional OTPS |
|------|----------------|----------------------|-----------------------------|
| 1 | Noshki | 10 | 11 |
| 2 | Kharan | 13 | 14 |
| 3 | Panjgoor | 19 | 18 |
| 4 | Sibi | 15 | 15 |
| 5 | KillaSaifullah | 15 | 16 |
| 6 | Zhob | 15 | 14 |
| 7 | Kohlu | 18 | 19 |
| | Total | 105 | 107 |

2.1 PERFORMANCE OF PPHI-B IN NUTRITION PROGRAM ESTABLISHMENT OF OTPS IN THIRD QUARTER 2017

In seven targeted districts, the target of Pregnant and Lactating Women (PLWs) for screening has been achieved which is overall 94% of the target. District Zhob and Kholu needs to improve their screening performance for PLWs. Default SAM cases in current quarter in the entire district exceeded, except Noshki. There is space to improve the performance by the respective DSMs and focal persons of the nutrition Project districts.

According census 2017 against the target of 15244 Pregnant and Lactating Women (PLWs) 8580 PLWs were screened during the reporting period. Which needs to be enhanced with mass mobilization and appointment of female social mobilizes in the catchment areas of the BHUs. Against the target of 30486 children under five the 17038 children screened in the OTPs. Review meeting Performance with BNPMC, NGOs was discussed that involvment for mass screening of the children under five with referral to OPT with enrollment of the SAM and MAM cases.

Against the target of 6 to 24 months 8571 children, the 7696 children were screened in the OTPs which is about 90% of the target and out of that 2891 cases of SAM identified and enrolled in the OTPs. District Noshki and Panjgur exceeded the target of screening of the children 6 to 24 months which seems to be satisfactory performance in this regard. The detail report and community health session were held is below; (203, 2.2)

2.2 COMMUNITY SESSIONS CONDUCTED IN 7 DISTRICTS THIRD QUARTER 2017

| S:NO | Districts | Total Health Sessions | Participants | | | | | |
|-------|----------------|--------------------------|--------------|--------|---------|------|------------|--|
| | | 565510115 | Male | Female | Married | PLWs | Adolescent | |
| 01 | Noshki | 30 | 286 | 0 | 187 | 0 | 0 | |
| 02 | Kholu | 29 | 260 | 0 | 193 | 0 | 0 | |
| 03 | Panjgur | 43 | 353 | 282 | 361 | 38 | 14 | |
| 04 | Zhob | 22 | 140 | 0 | 27 | 0 | 0 | |
| 05 | Sibi | 45 | 552 | 0 | 188 | 0 | 0 | |
| 06 | Killasaifullah | 20 | 224 | 0 | 173 | 0 | 0 | |
| 07 | Kharan | 35 | 229 | 208 | 338 | 90 | 62 | |
| Total | | 224 | 2044 | 490 | 1467 | 128 | 76 | |

| S.NO | District | Target of the screened children (6-24 months) | Percent of the Screened Children (6-24 months) | Percent of the Children Complying with SAM/MAM | Percent of the Screened PLWs | # of PLWs Complying with IFAs | Percent of the Screened PLWs |
|------|---------------------------------|---|---|---|---------------------------------|-------------------------------------|---------------------------------|
| 1 | Noshki | 864 | 157 % | 221 % | 99% | 550 | 146 % |
| 2 | Kohlu | 1036 | 53 % | 100 % | 76% | 684 | 85 % |
| 3 | Panjgur | 1530 | 137 % | 130 % | 85% | 1402 | 128 % |
| 4 | Zhob | 1502 | 88 % | 138 % | 66% | 987 | 75 % |
| 5 | Sibi | 1226 | 55 % | 118 % | 88% | 732 | 75 % |
| 6 | K. Saifullah | 1658 | 87 % | 179 % | 260% | 674 | 301 % |
| 7 | Kharan | 755 | 89 % | 104 % | 110% | 482 | 133 % |
| Cu | mulative Number/ Percentages | 8571 | 89 % | 142 % | 94% | 5511 | 117 % |

2.3 NUTRITION TARGET AND ACHIEVEMENTS IN PERCENTAGES OF SEVEN DISTRICTS THIRD QUARTER 2017

2.4 ACHIEVEMENT OF THE DISTRICTS

| S.NO | District | Admissions | Cured | Defaulter | Deaths | Discharge |
|------|-----------------|------------|-------|-----------|--------|-----------|
| 1 | Nushki | 308 | 195 | 21 | 1 | 219 |
| 2 | Kohlu | 399 | 188 | 99 | 3 | 409 |
| 3 | Panjgoor | 441 | 167 | 152 | 0 | 325 |
| 4 | Zhob | 643 | 223 | 68 | 0 | 291 |
| 5 | Sibi | 295 | 172 | 94 | 0 | 273 |
| 6 | Killa Saifullah | 639 | 316 | 107 | 2 | 450 |
| 7 | Kharan | 175 | 102 | 26 | 0 | 114 |
| | Total | 2900 | 1363 | 567 | 6 | 2081 |

Source; Balochistan Nutrition Program For Mother & Children

| Before Treatment | After Treatment | Before Treatment | After Treatment |
|------------------|------------------------|------------------|-----------------|
| | District Kohlu & Killa | Saif Ullah | |
| | | | |
| | Zhob &Khara | n | |
| | | | |
| | Nushki & Sib | pi | |
| | Fanjgoor | | |
| 11.4cm | | | |

3. DETAIL OF HEALTH INFRASTRUCTUREINBALOCHISTAN

No. of Districts with PPHI BALOCHISTAN

No. of BHUs/ Health Facilities with PPHI BALOCHISTAN

| Sr. # | Description | Total HFs | With PPHI-B |
|-------|----------------------------------|------------------|-------------|
| i) | Teaching Hospitals | 9 | 0 |
| ii) | Divisional HQ Hospitals | 2 | 0 |
| iii) | District HQ Hospitals | 23 | 0 |
| iv) | TB Clinics | 23 | 0 |
| v) | 50-Beded Hospitals | 4 | 0 |
| vi) | Civil Hospitals | 12 | 0 |
| vii) | Rural Health Centers | 101 | 1 |
| viii) | Basic Health Units | 649 | 649 |
| ix) | Basic Health Units 24/7 MCH Plus | | (36) |
| x) | Static Centers | (451) | (292) |
| xi) | Civil Dispensaries | 541 | 3 |
| xii) | MCHCs | 92 | 0 |
| xiii) | Other HFs | 37 | 0 |
| xiv) | Health Houses (LHWs) | 6720 | 0 |
| | TOTAL | 8213 | 653 |

SOURCE: F1 TO F13 REPORTING SYSTEM PPHI BALOCHISTAN





Repair & Renovation of BHU Sabaz Ali District Nasir Abad

Repair & Renovation of BHU Mahmoood Guhram District Kalat



Repair & Renovation of BHU District Kech



Repair & Renovation of BHU Kaich Baig District Quetta

635

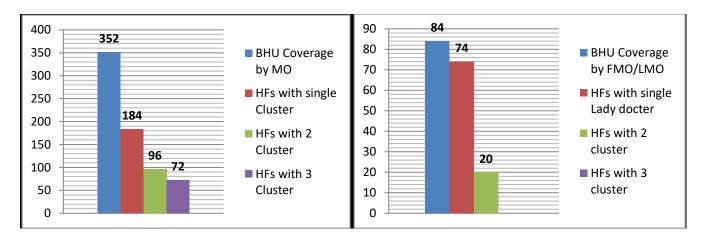
4. HUMAN RESOURCE DEVELOPMENT

| S # | | lthcare ovider | Sanctioned Posts | Working | Government Employees | PPHI Contract | % PPHI Staff | Vacant |
|------------|-------------------|-------------------|---------------------|---------|-------------------------|------------------|--------------------|--------|
| 1 | MOs | | 582 | 258 | 168 | 90 | 35 % | 332 |
| 2 | LMOs | | 113 | 84 | 53 | 31 | 37 % | 22 |
| 3 | Dental | Surgeon | 1 | 1 | 1 | 0 | 0 | 0 |
| | Total | | 696 | 343 | 222 | 121 | | |
| 4 | Social C | Organizers | 0 | 55 | 0 | 55 | 100 % | 0 |
| 5 | LHVs | | 368 | 346 | 177 | 169 | 49 % | 39 |
| 6 | MTs | Male | 503 | 500 | 351 | 149 | 30 % | 29 |
| 6 | NI I S | Female | 350 | 246 | 209 | 55 | 22 % | 109 |
| 7 | Dispen | sers | 347 | 384 | 237 | 149 | 39% | (35) |
| 8 | Vaccin | ators | 286 | 457 | 247 | 210 | 82 % | (171) |
| 9 | Lab As | sistants | 5 | 63 | 3 | 60 | 95% | (58) |
| 10 | 0 X-Ray Assistant | | 3 | 2 | 2 | 1 | 0 | 0 |
| | Tota | al | 1862 | 2017 | 1171 | 851 | | |

4.1 Detail of sanctioned posts, contract employees and vacant positions.

SOURCE: DHIS REPORTS PPHI/F1 TO F13 REPORTING SYSTEM PPHI BALOCHISTAN

4.2 Medical Officers/ Female Medical Officers/Lady Medical Officers coverage





Femal OPD at BHU Khidrani Harnai

Femal OPD at BHU Kingri Musakhail



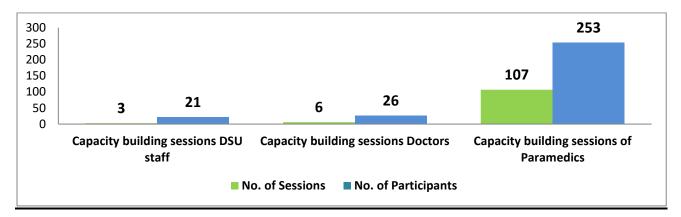
OPD at a BHU Bernima Janan Diatrict Loralai

Female OPD BHU District Gwadar



Male OPD at BHU Jalbani Kachhi

Female OPD at BHU Sozo District Harnai



SOURCE: F1 TO F13 REPORTING SYSTEM PPHI BACHISTAN

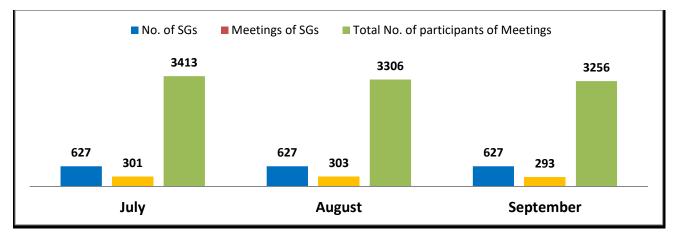


One Day awareness session held on Checkengunya & Dangue with Colloboration of WHO Balochistan at Turbat, The Guest Speaker was Dr. Dawood Riaz a prominent public health analyst.

5. PREVENTIVE & PROMOTIONAL SERVICES

5.1 HEALTH EDUCATION

5.1.1 SUPPORTGROUP MEETINGS



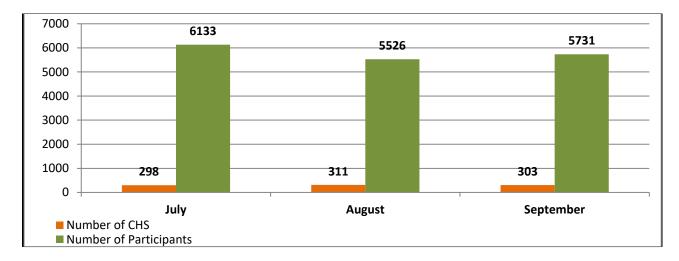
SOURCE:F1 TO F13 REPORTING SYSTEM PPHI BALOCHISTAN



Support Group Meeting, District Harnai

Support Group Meeting, District Dera Bugti

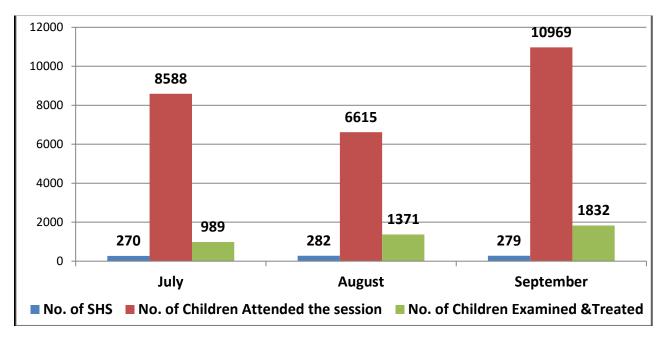
1.2 COMMUNITY HEALTH SESSIONS



SOURCE: F1 TO F13 REPORTING SYSTEM PPHI BALOCHISTAN



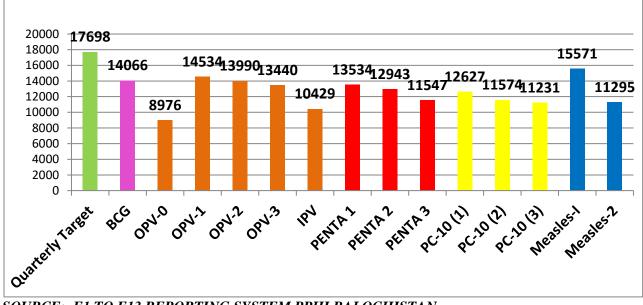
5.1.3 SCHOOL/ MADRASSA HEALTH SESSIONS AND CHILDREN TREATED



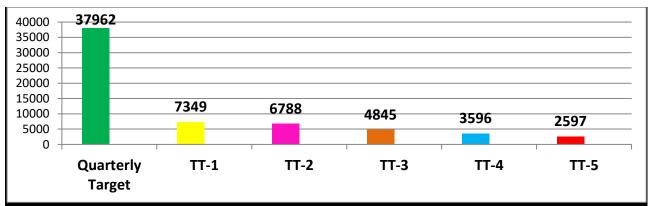
SOURCE: F1 TO F13 REPORTING SYSTEM PPHI BALOCHISTAN



5.2 IMMUNIZATION APRILTOJUNE, 2017

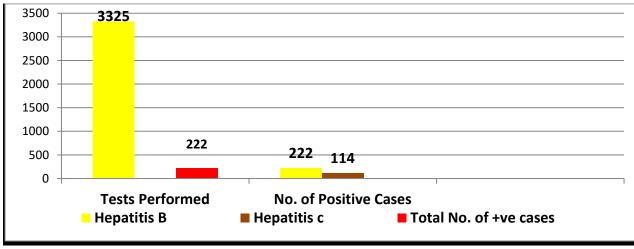


SOURCE: F1 TO F13 REPORTING SYSTEM PPHI BALOCHISTAN 5.3 TT Vaccination



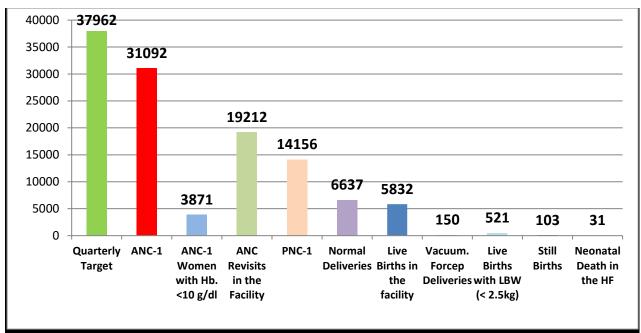
SOURCE: DHIS REPORTS PPHI BALOCHISTAN/F1 TO F13 REPORTING SYSTEM PPHI BALOCHISTAN



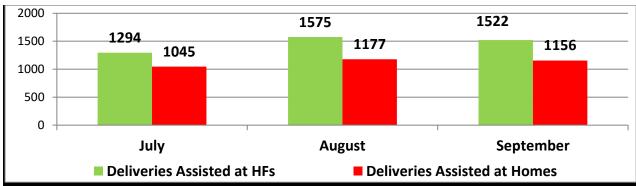


SOURCE: F1 TO F13 REPORTING SYSTEM PPHI BALOCHISTAN

5.5 MOTHER CHILD HEALTHCARE

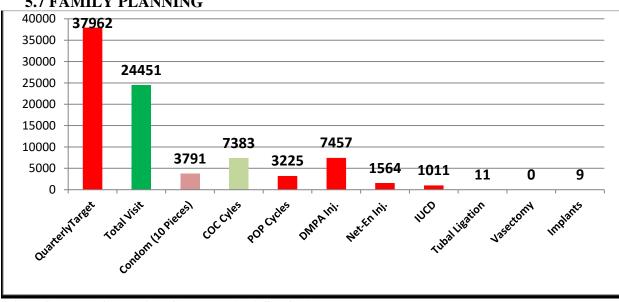






5.6 DELIVERIES CONDUCTED





5.7 FAMILY PLANNING

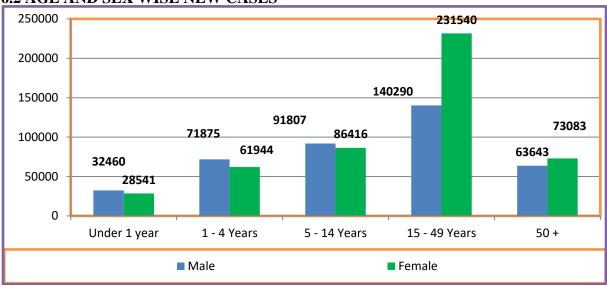
SOURCE: DHIS REPORTS PPHI BALOCHISTAN

6. CURATIVE SERVICES

6.1. DETAIL OF OPD IN THIRD QUARTER OF 2017 (JULY-SEPTEMBER) OF THE DISTRICTS WITH BREAKUP OF MALE, FEMALE, FOLLOW-UP CASES, REFRRELSAND CASES OF UNDER 5 YEARS MALNURISHED CHILDREN.

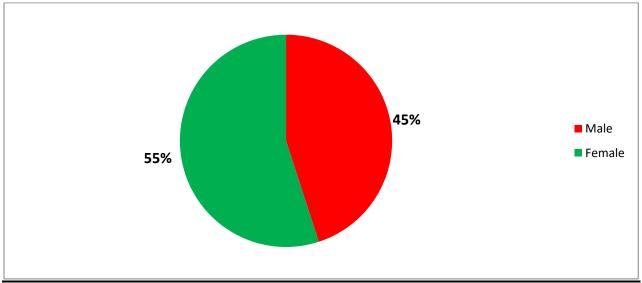
| S.No | District | M (new cases) | F(new cases) | Follow- ups | Referrals | Total OPD | No. of cases of <5 year Children |
|------|--------------|---------------|-----------------|----------------|-----------|-----------|---|
| 1 | Awaran | 6190 | 7132 | 356 | 0 | 13322 | 3 |
| 2 | Barkhan | 4857 | 3797 | 361 | 525 | 8654 | 21 |
| 3 | Chagai | 6526 | 6706 | 230 | 100 | 13232 | 26 |
| 4 | Dera Bugti | 17534 | 13616 | 150 | 2 | 31150 | 11 |
| 5 | Gwadar | 16488 | 20284 | 968 | 962 | 36772 | 0 |
| 6 | Harnai | 3893 | 4330 | 235 | 319 | 8223 | 49 |
| 7 | Jaffarabad | 37044 | 42749 | 1333 | 415 | 79793 | 96 |
| 8 | Jhal Magsi | 8316 | 6753 | 279 | 398 | 15069 | 82 |
| 14 | K. Abdullah | 22162 | 32317 | 4102 | 487 | 54479 | 87 |
| 15 | K. Saifullah | 7440 | 8945 | 613 | 1018 | 16385 | 555 |
| 9 | Kachhi | 8797 | 10663 | 276 | 192 | 19460 | 0 |
| 10 | Kalat | 12644 | 13129 | 1714 | 1019 | 25773 | 740 |
| 11 | Kech | 25072 | 33909 | 2290 | 964 | 58981 | 36 |
| 12 | Kharan | 7955 | 6752 | 852 | 473 | 14707 | 798 |
| 13 | Khuzdar | 32196 | 31705 | 1126 | 1016 | 63901 | 654 |
| 16 | Kohlu | 13683 | 6565 | 233 | 273 | 20148 | 823 |
| 17 | Lasbela | 24467 | 26589 | 513 | 382 | 51056 | 35 |
| 18 | Loralai | 20852 | 15306 | 880 | 1304 | 36158 | 990 |
| 19 | Mastung | 7744 | 9691 | 755 | 514 | 17435 | 643 |
| 20 | Musa Khail | 13911 | 7366 | 778 | 705 | 21277 | 440 |
| 21 | Naseerabad | 12841 | 14419 | 899 | 434 | 27260 | 322 |
| 22 | Noshki | 4711 | 8574 | 480 | 156 | 13285 | 2224 |
| 23 | Panjgoor | 13735 | 21209 | 438 | 271 | 34944 | 454 |
| 24 | Pishin | 21950 | 26512 | 359 | 256 | 48462 | 137 |
| 25 | Quetta | 36178 | 59438 | 1499 | 1322 | 95616 | 458 |
| 26 | Sherani | 2251 | 2016 | 453 | 431 | 4267 | 0 |
| 27 | Sibi | 9740 | 10411 | 449 | 235 | 20151 | 494 |
| 28 | Washuk | 12856 | 13136 | 385 | 120 | 25992 | 103 |
| 29 | Zhob | 8451 | 7075 | 875 | 899 | 15526 | 420 |
| 30 | Ziarat | 7565 | 6891 | 203 | 426 | 14456 | 148 |
| | Total | 428049 | 477985 | 24084 | 15618 | 906034 | 10844 |

| SOURCE: | DHIS REPORTS PPHIBALOCHISTAN |
|---------|------------------------------|
| DUCKCL. | |



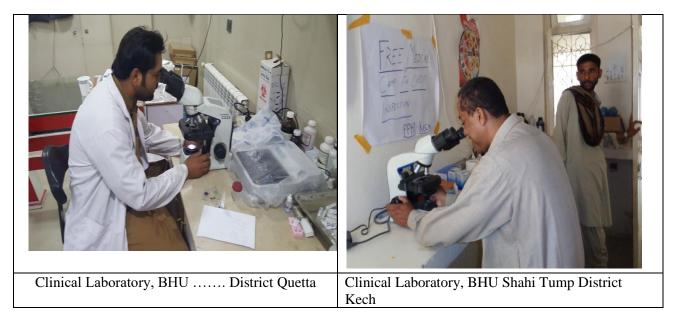
6.2 AGE AND SEX WISE NEW CASES

SOURCE: DHIS REPORTS PPHI BALOCHISTAN

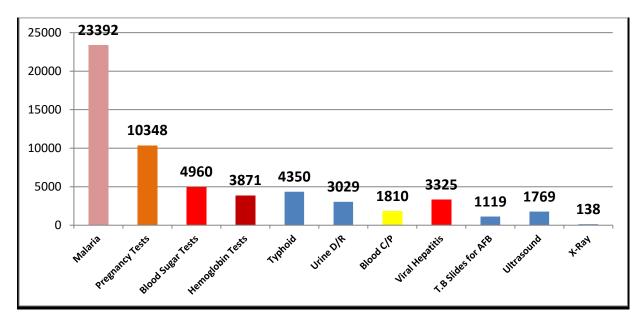


6.3 NEW PATIENT'S DISTRIBUTION BY SEX:

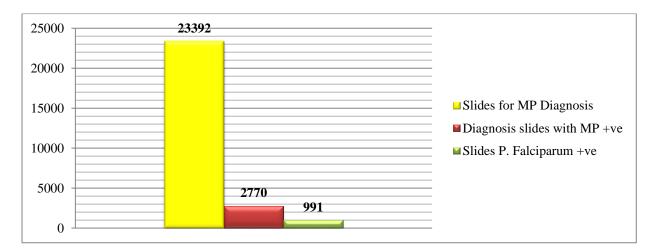
SOURCE: DHIS REPORTS PPHI BALOCHISTAN



6.4 LAB/ DIAGNOSTIC TESTS



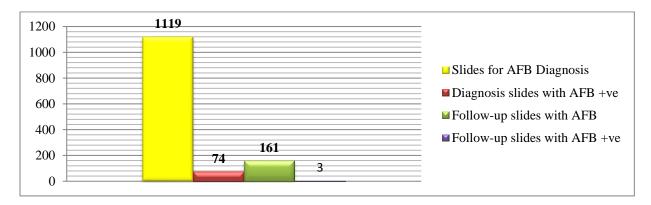
SOURCE: DHIS REPORTS PPHI/ F1 TO F13 REPORTING SYSTEM PPHIBALOCHISTAN



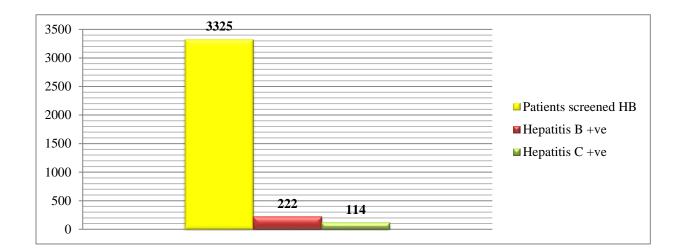
6.5 Test performed for Malaria MP

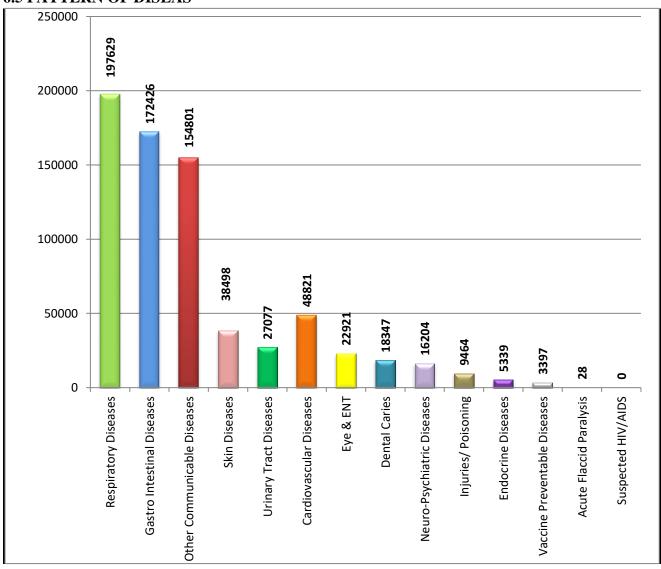
SOURCE: DHIS REPORT, PPHI-B

6.6 Test performed for AFB



SOURCE: DHIS REPORT, PPHI-B

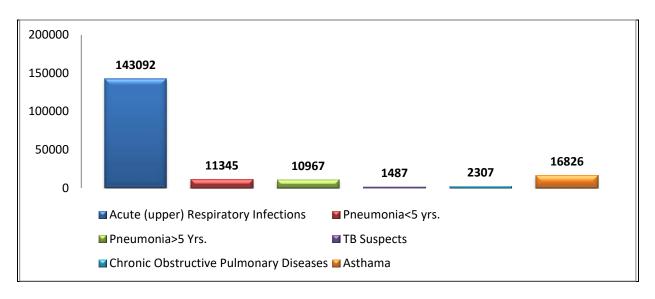




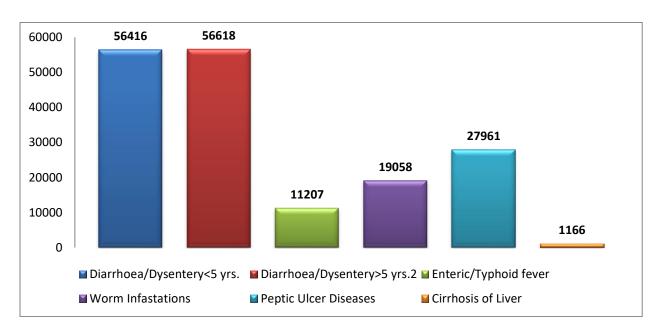
6.5 PATTERN OF DISEAS

SOURCE: DHIS REPORTS PPHI BALOCHISTAN

6.6 Respiratory Diseases

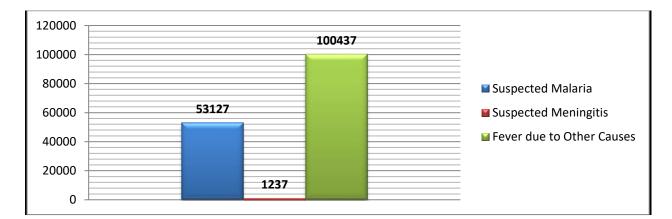


SOURCE: DHIS REPORTS PPHI BALOCHISTAN



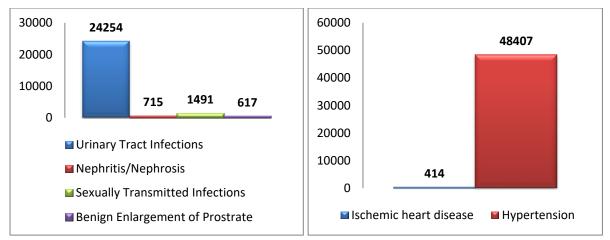
6.7 Gastro Intestinal Diseases

SOURCE: DHIS REPORTS PPHI BALOCHISTAN



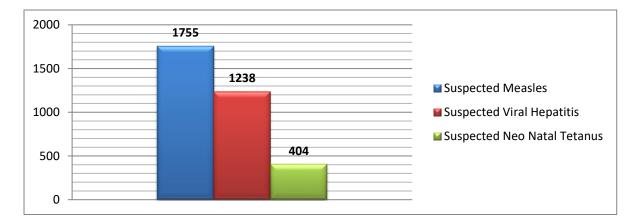
6.8 Other Communicable Diseases



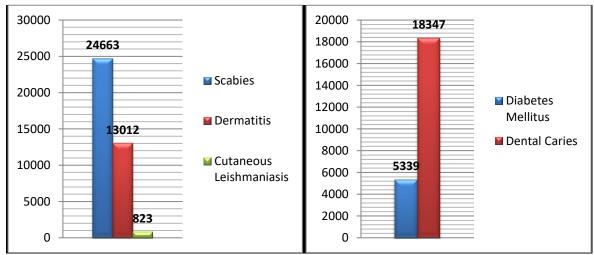


SOURCE: DHIS REPORTS PPHI BALOCHISTAN



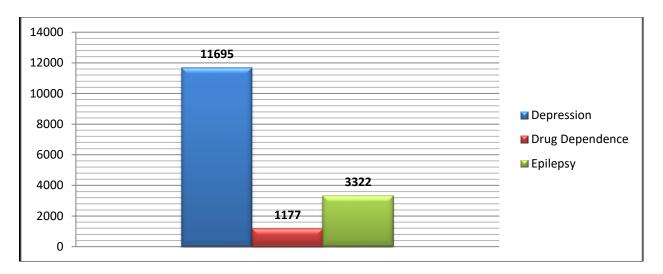


SOURCE: DHIS REPORTS PPHI BALOCHISTAN 6.11. Skin Diseases/ Endocrine Diseases and Oral Diseases

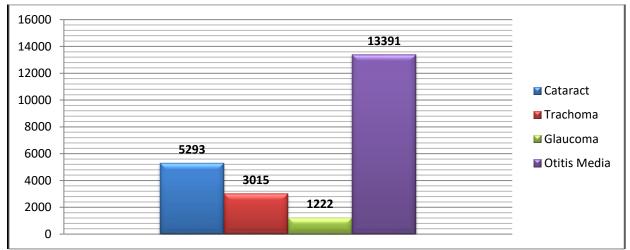


SOURCE: DHIS REPORTS PPHI BALOCHISTAN

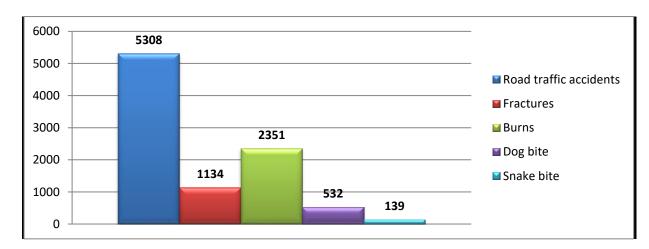
6.12. Neuropsychiatric Diseases



6.13. Eye, Ear, Nose& Throat



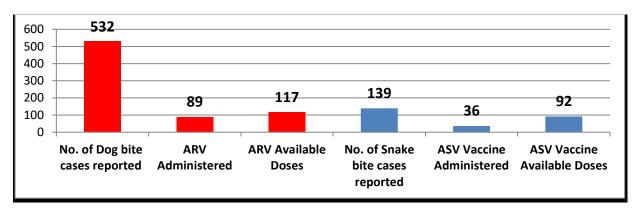
SOURCE: DHIS REPORTS PPHI BALOCHISTAN



6.14. Injuries and Poisoning

SOURCE: DHIS REPORTS PPHI BALOCHISTAN

6.15. ANTI RABIES VACCINE/ ANTI SNAKEVACCINE:



SOURCE: DHIS REPORTS PPHI/ F1 TO F13 REPORTING SYSTEM PPHIBALOCHISTAN





7. DETAIL OF BHUS DESIGNATED AS TB CARE HEALTH FACILITY



Free Chest Camps with Colloboration Global Fund & TB Control Program Balochistan at Saroona Tehsil Wadh District Khuzdar



Free Chest Camps with Colloboration Global Fund & TB Control Program Balochistan at Behman Distt. Kech

Free Chest Camps with Colloboration Global Fund & TB Control Program Balochistan at Padak Distt. Chaghi

7.1 DETAIL OF BHUS DESIGNATED AS TB CARE HEALTH FACILITY TARGETS THIRD QUARTER JULY- SEPTEMBER 2017 (SUPPORTED GLOBAL FUND)

| | Districts | No. of BHUs | | Quarterly Incidence of TB | Current Status | | | | | |
|-----------|-------------|-------------|---------------------|------------------------------|--------------------------------|-----------|---|-------|---------------------|--|
| S.No | | | BHU | | Reporting/N on Reporting | New Cases | | | Achievement in % | |
| | | | | | | Μ | F | Total | III 70 | |
| 1 | Chaghi | 1 | Padag | 6 | 1 | 0 | 0 | 0 | | |
| 2 | Gwadar | 1 | Surbandar | 6 | 0 | 0 | 0 | 0 | | |
| 3 | Khuzdar | 1 | Saroona | 5 | 1 | 1 | 5 | 6 | 120 | |
| 4 | Kalat | 1 | Lakhorian | 3 | 1 | 0 | 0 | 0 | | |
| 5 | K. Abdullah | 1 | Milat Abad | 3 | 1 | 0 | 0 | 0 | | |
| | Lasbela | 2 | Ismailani | 14 | 0 | 0 | 0 | 0 | | |
| 6 Lasbela | Lasbela | | Daam | 4 | 0 | 0 | 0 | 0 | | |
| | IZ 1 | | Shahi Tump | 12 | 1 | 0 | 0 | 0 | | |
| 7 | Kech | 2 | Buloo | 8 | 0 | 0 | 0 | 0 | | |
| | Daniason | 2 | Garamkan | 23 | 0 | 0 | 0 | 0 | | |
| 8 | 8 Panjgoor | | Eisai | 2 | 0 | 0 | 0 | 0 | | |
| 9 | Quetta | 3 | Ahmed Khanzai | 31 | 1 | 0 | 0 | 0 | | |
| | | 3 | Wahadat Colony | 5 | 1 | 1 | 0 | 1 | 20 | |
| | | | Kechi Baig | 22 | 1 | 0 | 0 | 0 | | |
| 10 | Sibi | 1 | Khajjak | 8 | 1 | 0 | 0 | 0 | | |
| | Total | 15 | 10 District BHUs 15 | 149 | 9/15 | 2 | 5 | 7 | 3 | |

1 = Reporting TB Health Care Facility and 0 = Non- reporting TB Health care Facility Source: TB Control Program Balochistan, Quetta

| 7.2 DETAIL OF BHUS DESIGNATED AS TB CARE HEALTH FACILITY TARGETS THIRD |
|--|
| QUARTER (JULY- SEPTEMBER) 2017 |

| | | | PTEMBER) 2017 | TB | Current Status | | | | | |
|------|--------------|-------------|-----------------------------|------------------------------|--------------------------------|-----------|-----------|-------|---------------------|--|
| S.No | Districts | No. of BHUS | BHU | Quarterly Incidence of TB | Reporting/N on Reporting | New Cases | | | Achievement in % | |
| | | Ž | |) Inci | Rep Re | Μ | F | Total | | |
| 1 | Barkhan | 1 | Rakhani | 11 | 1 | 10 | 11 | 21 | 191 | |
| 2 | DeraBugti | 1 | PirKoh | 6 | 1 | 1 | 1 | 2 | 33 | |
| 3 | Gwader | 1 | Pishukan | 9 | 0 | 0 | 0 | 0 | | |
| | | | Gandakha | 13 | 1 | 5 | 4 | 9 | 69 | |
| 4 | Jaffarabad | 3 | ManjhiPur | 11 | 1 | 8 | 3 | 11 | 100 | |
| 4 | | | SuhbatPur | 11 | 1 | 5 | 1 | 6 | 55 | |
| 5 | JhalMagsi | 1 | KotMagsi | 15 | 1 | 0 | 0 | 0 | | |
| 6 | Kharan | 2 | Hurro | 3 | 1 | 3 | 5 | 8 | 267 | |
| 0 | Kilarali | 2 | Sarawan | 4 | 1 | 2 | 5 | 7 | 175 | |
| 7 | K. Abdullah | | Habib Zai | 15 | 1 | 1 | 3 | 4 | 27 | |
| | Mastung | 2 | AshkanRoodini | 4 | 1 | 1 | 3 | 4 | 100 | |
| 8 | Wastung | 2 | Dasht Kombaila | 9 | 1 | 2 | 3 | 5 | 56 | |
| | Musa Khail | 2 | Kingri | 3 | 1 | 0 | 2 | 2 | 67 | |
| 9 | Widsu Wildir | 2 | Rarasham | 5 | 1 | 2 | 0 | 2 | 40 | |
| | Naseerabad | 2 | Hameed Khoso | 7 | 1 | 2 | 2 | 4 | 57 | |
| 10 | | | AllahDadUmrani | 7 | 1 | 5 | 4 | 9 | 128 | |
| 11 | Noshki | 1 | Kochal Mall | 4 | 1 | 0 | 1 | 1 | 25 | |
| 12 | Kohlu | 1 | Tamboo | 4 | 1 | 1 | 0 | 1 | 25 | |
| | Panjgoor | 2 | Washboad | 23 | 1 | 0 | 0 | 0 | | |
| 13 | 1 unjgoor | 2 | Tasp | 13 | 1 | 0 | 0 | 0 | | |
| | | | KilliKabir Tajik | 9 | 1 | 2 | 7 | 9 | 100 | |
| | | | N.Pashtoon Abad | 3 | 1 | 1 | 2 | 3 | 100 | |
| 14 | | | PashtoonBagh | 16 | 1 | 1 | 1 | 2 | 12.5 | |
| | Quetta | 8 | Nasaran | 5 | 1 | 1 | 1 | 2 | 40 | |
| | Z | | Sraghurgi | 3 | 1 | 0 | 2 | 2 | 67 | |
| | | | Nohsar | 5 | 1 | 1 | 0 | 1 | 20 | |
| | | | Hudda. | 9 | 1 | 1 | 0 | 1 | 11 | |
| 15 | | | Village Aid, Sultan Kot, | 18 3 | 1 0 | 1 0 | 1 0 | 2 | 11 | |
| 15 | Sibi | 2 | Bakhtiar Abad | 4 | 1 | 0 | 0 | 0 | | |
| | Total | 30 | 15 District BHUs 30 | 4 252 | 26/2 | 56 | 62 | 118 | 47 | |
| | i Utai | 50 | 15 DISTICT DITUS 50 | 434 | <i>40/4</i> | 50 | 04 | 110 | | |

1 = Reporting TB Health Care Facility and 0 = Non- reporting TB Health care Facility Source: TB Control Program Balochistan, Quetta

"I am from a generation who has witnessed the devasting effects of Polio. When I discovered how close we were to eradicating Polio, I was very motivated to be a part of this movement. It is so rare when you can accomplish some thing so spacular".

Angelique Kijo (Singer, song writer

8. EPIDEMICS AND FREE MEDICAL CAMPS



Diarrhea out break at village Drakhala & Free Camp Drakhala, Wadh, District Khuzdar





BHU Malik Yar District Pishin strenghthening of refferel system

9. SUPERVISION& MONITORING VISITS



SOURCE: F1 TO F13 REPORTING SYSTEM PPHI BALOCHISTAN



10. SPECIAL EVENTS



Mr. Munir Badini Chaired Board of Directors Meetining held on August 8, 2017 at Pishin



Members Board of Ditectors PPHI- B visited BHU Batai Zai District Pishin on August 8, 2017





Mr. Munir Badini Chaired Board of Directors Meetining held on September 21, 2017





Mir Hamal Khan Kalmati visited BHU Surbander District Gwadar Prof: A. J. Jaffar (Member BoD) chaired a meeting in CHQ Hospital on 20-07-2017 to re-visit the Essential Drug list of PPHI-B



Group Photo Members Board of Ditectors PPHI- B visited BHU Batai Zai District Pishin



Mr. Abdul Rouf Baloch Additional Secretery, Department of Health, Govt. of Balochistan was briefed PPHI-B Khuzdar District Peforrmance during his visit.



The World Food Program Provincial Team meeting Implementation of TSFP with District Managers Zhob, Nushki, Kharan & K.Saifullah visitd PPHI-B Head Office

BNPMC, Quetta and PPHI-B performance reviw meeting held on

11. PPHI BALOCHISTAN AT A GLANCE



District Support Manager Presented Annual Report 2016 to Deputy Commissioner Harnai



The Deputy Commissioner Sheerani visited BHU Mani Khuwa



Monthly Review Meeting chaired by the Deputy Commissioner Zhob



Monthly Review Meeting chaired by the Deputy Commissioner Musa Khail



Monthly Review Meeting chaired by the Deputy Commissioner Kalat



Monthly Review Meeting chaired by the Deputy Commissioner Loralai

12. National Immunization Days & PPHI Balochistan

This could be the year that we eliminate one of the most tragic diseases in history

Polio is a crippling and potentially fatal infectious disease. There is no cure, but there are safe and effective vaccines. The strategy to eradicate polio is therefore based on preventing infection by immunizing every child until transmission stops and the world is polio-free. Polio (poliomyelitis) is a highly infectious disease caused by a virus. It invades the nervous system and can cause irreversible paralysis in a matter of hours. Polio can strike at any age, but it mainly affects children under five years old. Polio is spread through person-to-person contact. When a child is infected with wild poliovirus, the virus enters the body through the mouth and multiplies in the intestine. It is then shed into the environment through the faeces where it can spread rapidly through a community, especially in situations of poor hygiene and sanitation. If a sufficient number of children are fully immunized against polio, the virus is unable to find susceptible children to infect, and dies out.

Young children who are not yet toilet-trained are a ready source of transmission, regardless of their environment. Polio can be spread when food or drink is contaminated by faeces. There is also evidence that flies can passively transfer poliovirus from faeces to food. Most people infected with the poliovirus have no signs of illness and are never aware they have been infected. These symptomless people carry the virus in their intestines and can "silently" spread the infection to thousands of others before the first case of polio paralysis emerges. For this reason, WHO considers a single confirmed case of polio paralysis to be evidence of an epidemic – particularly in countries where very few cases occur.

Pakistan is one of only three countries in the world with ongoing wild poliovirus transmission, alongside Afghanistan and Nigeria. The Global Polio Eradication Initiative is focusing on reaching every last child in Pakistan with vaccines, strengthening surveillance and maintaining political commitment, financial resources and technical support at all levels. So far this year, only tweleve (12) polio cases have been reported in the entire world and five (3) cases are from Pakistan and seven (7) from Afghanistan and no cases have been reported in Nigeria.

Through polio eradication efforts, a significant investment has also been made in strengthening health service delivery systems in many countries. Hundreds of thousands of health workers have been trained, millions of volunteers have been mobilized to support immunization campaigns, and cold-chain transport equipment has been refurbished. More than 1.5 million childhood deaths have been averted, thanks to the systematic administration of Vitamin A during polio activities.

Not Gone Yet

Polio is highly infectious. It spreads through human contact, usually through infected stool, a particularly dangerous route of transmission among children who are not yet potty-trained, as well as in areas with poor sanitation systems. People can also catch it by coming into contact with contaminated food or water. Pakistan,Afghanistan and Nigeria are the only three countries where polio is still spreading naturally. They were responsible for all 20 wild cases last year, and all 8 wild cases reported so far this year.

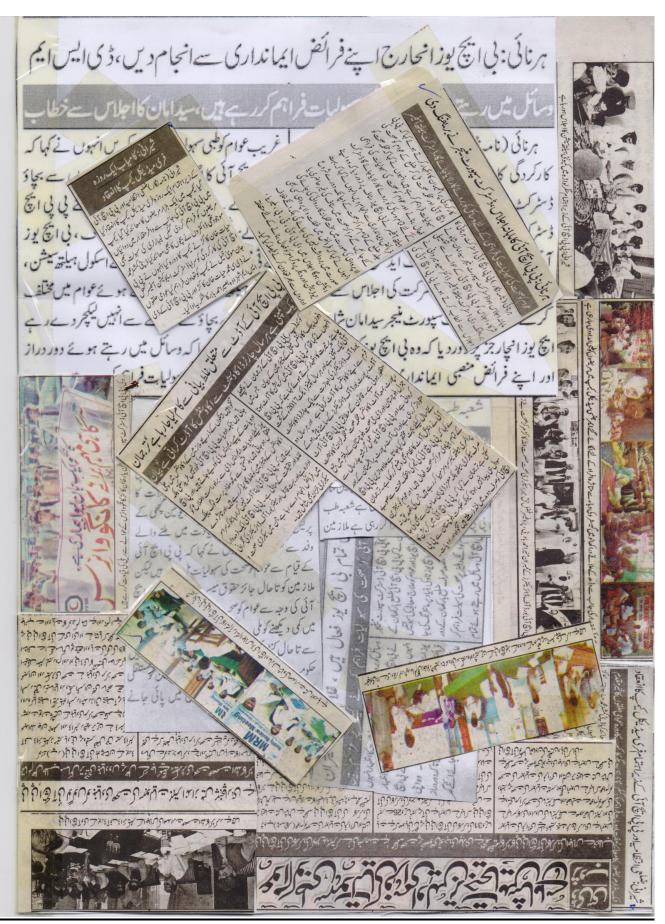
| Province | 2010 | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 |
|------------------|------|------|------|------|------|------|------|------|
| Punjab | 7 | 9 | 2 | 7 | 5 | 2 | 0 | 1 |
| Sindh | 27 | 33 | 4 | 10 | 30 | 12 | 8 | 1 |
| КРК | 24 | 23 | 27 | 11 | 68 | 17 | 8 | 1 |
| FATA | 74 | 59 | 20 | 65 | 179 | 16 | 2 | 0 |
| Balochistan | 12 | 73 | 4 | 0 | 25 | 7 | 2 | 1 |
| Gilgit-Baltistan | 0 | 1 | 1 | 0 | 0 | 0 | 0 | 1 |
| Azad Kashmir | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 144 | 198 | 58 | 93 | 306 | 54 | 20 | 5 |

| PROVINCE | District | No. of Cases | Total Districts | Total Cases |
|------------------|-------------|--------------|-----------------|-------------|
| Gilgit-Baltistan | Diamir | 1 | 1 | 1 |
| AJ&K | | | | |
| КРК | Luki Marwat | 1 | 1 | 1 |
| FATA | | | | |
| Punjab | Lodhran | 1 | 1 | 1 |
| Sindh | Gadap | 1 | 1 | 1 |
| Balochistan | K. Abdullah | 1 | 1 | 1 |
| PAKISTAN | | 5 | 5 | 5 |

SOURCE: End polio Pakistan



13. PPHI BALOCHISTAN IN NEWS AND VIEWS





4

PEOPLE'S PRIMARY HEALTHCARE INITIATIVE (PPHI)

BALOCHISTAN

Head Office

H # 8-A Jinnah Town Samungli road, Quetta

Ph # 081-2863623 & 081-2863620

Fax # 081-2863652

Email: pphibln@yahoo.com

Website: http://pphibalochistan.org.pk

If you have any kind of complaints against PPHI-Balochistan in your area Please call on **PPHI-B's Complaint cell, Toll Free 0800-77711**