2016 ANNUAL REPORT
Aahung would like to acknowledge the valuable support of the International Women’s Coalition in developing this publication.
LIST OF ABBREVIATIONS

AIDS: Acquired Immune Deficiency Syndrome
AKUSONAM: Aga Khan University School of Nursing and Midwifery
ASRH: Adolescent Sexual and Reproductive Health
ATH: Aman Tele-health
BoC: Bureau of Curriculum
CCA: Client Centered Approach
CHW: Community Health Worker
CMW: Community Midwife
CSA: Child Sexual Abuse
DoH: Department of Health
DUHS: Dow University of Health Sciences
FLE: Family Life Education
FWW: Female Welfare Worker
HCP: Health Care Provider
HIV: Human Immunodeficiency Virus
HR: Human Resource
IAS: International Accounting Standards
IEC: Information, Education and Communication
LHV: Lady Health Visitor
LHW: Lady Health Worker
LSBE: Life Skills Based Education
LSE: Life Skills Education
LUMHS: Liaquat University of Medical and Health Sciences
MO: Medical Officer
MVA: Manual Vacuum Aspiration
NGO: Non-governmental Organization
NMNCH: National Maternal Neonatal Child Health
PAC: Post Abortion Care
PPC: Pakistan Penal Code
PWD: Population Welfare Department
RAAYH: Responsible Actions for Adolescent and Youths Health
RME: Research Monitoring and Evaluation
SAAF: Safe Abortion Action Fund
SDG: Sustainable Development Goals
SIDA: Swedish International Development Authority
SON: School of Nursing
SP: Service Provider
SRH: Sexual and Reproductive Health
SRHM: Sexual and Reproductive Health Management
SRHR: Sexual and Reproductive Health and Rights
STB: Sindh Textbook Board
STEVTA: Sindh Technical and Educational Vocational Training Authority
ToT: Training of Trainers
UNFPA: United Nations Population Fund
VCAT: Value Clarification and Attitudinal Transformation
VTC: Vocational Training Centre
WMO: Woman Medical Officer
YFS: Youth Friendly Space
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Aahung

Aahung is a Karachi-based NGO that has been working to improve the Sexual and Reproductive Health and Rights (SRHR) of men, women, and young people since 1995. The Aahung team works for capacity development to improve the quality of sexual and reproductive health services while advocating for an enabling environment in which every individual's sexual rights are respected, protected, and fulfilled.

SRHR covers a range of issues including Child Sexual Abuse (CSA), violence against women, early and forced marriages, unwanted pregnancies, sexually transmitted infections, Human Immunodeficiency Virus / Acquired Immunodeficiency Syndrome (HIV/AIDS) and sexual disorders. Aahung works towards the prevention and management of these issues.

Functioning in an environment devoid of expertise or resources, Aahung has been successful in developing culturally relevant strategies to respond to the sexual and reproductive health needs of the Pakistani population. Moreover, Aahung has had success in integrating quality sexual and reproductive health education in medical academic and educational institutions across Pakistan.

Aahung's key strategy involves partnering with organizations for integration of SRHR information into their programs and for advocating policy and practice change at institutions through various communications activities.
3,787
Faculty Members and Health Care Providers Trained

47
Medical and Tertiary Academic Partners

165,061
Student Beneficiaries from Primary and Secondary Schools

522
Partner Schools (Primary and Secondary)
Board of Governors

Maliha Zia
Board Convener
Maliha has been activating for women and human rights law for several years. She has been in the forefront of drafting the new domestic violence law as well as making amendments to the Pakistan Penal Code (PPC) and Criminal Procedure Code (CrPC) so that they can be better used to try cases of Honor crimes. She is well versed in sexuality, sexual and bodily rights in addition to her strong legal background.

Al-Malik Khoja
Treasurer
An economist by qualification, Al-Malik Khoja has had a diverse work experience spanning different sectors such as Mutual Fund, Airline Catering, Hospitality Management, Disaster Management and Micro-insurance. Through his work experience in both commercial and development sectors, he has developed appreciation of the need to develop business models that address the social dimensions but with emphasis on long-term sustainability.

Kamyla Marvi
Kamyla is one of the founding members of Aahung and has more than 20 years experience in the reproductive health, gender and development sector. She has an interest in organisation effectiveness and governance and facilitated the initial organisational development process of Aahung.

Dr. Naila Baig-Ansari
Naila Baig-Ansari has a PhD in Epidemiology from the University of California, Davis. Along with her rigorous training, she has vast experience in the area of health research. Naila is a strong asset to Aahung because as an epidemiologist, she can provide mentorship to strengthen Aahung’s research programs. She is currently part-time research faculty at The Indus Hospital as well as the Director of a local Institutional Review Board (IRD-IRB) that reviews human subject research.
Shama Mohammad
Shama is a freelance consultant with expertise in various research methodologies such as survey design, monitoring and evaluation and participatory research methodologies. She has been working in the development sector since 2000 and has worked in the fields of health, education, gender, community development, early child development, and microfinance. Shama has previously served 2 terms on the Board.

Rabia Khan
Rabia is a freelance development consultant specializing in gender and development and NGO institutional development. Rabia has previously served 2 terms on the Board.

Khusro Mumtaz
Khusro Mumtaz, who has previously served 2 terms on the Board, is a banker and currently the Chief Risk Officer for NIB bank. He writes an op-ed column for the national newspaper The News in which he touches upon various development and civil society related issues. Khusro is also a well-known and award-winning film critic.

Myra Khan
Myra is currently working as Marketing and Communications Manager at IRD. She has previous experience working at GSK in the corporate sector. Myra has vast experience and knowledge about marketing techniques and approaches as well as communications strategy. She is spearheading the marketing and communications initiative at IRD, which has never been done before. Her experience and knowledge in these areas is beneficial to Aahung, as they have been to IRD.
I started working with Aahung in 2003 so I am in my 13th year with the organization. We are now well on our way to a long-term goal of integrating Life Skills Based Education (LSBE) content into the provincial curriculum of Sindh. While we still have a long way to go with not only integration but in supporting the education department to prepare teachers and schools for the actual teaching of the content, we are seeing momentum and ownership develop in the government which is key to the process moving forward. In the coming year, I hope to see the process really take shape through the onset of a pilot project with government schools. Similarly, I really want to move forward with the stellar work Aahung has done with curriculum change in medical teaching institutions and see the work scaled up to new institutions and new geographical locations.

How long have you been with Aahung?
I started working with Aahung in 2003 so I am in my 13th year with the organization.

What changes have you seen in the past year? What changes do you hope to see in the coming year?
In the past year the intensity of Aahung’s advocacy work has really picked up. We are now well on our way to a long-term goal of integrating Life Skills Based Education (LSBE) content into the provincial curriculum of Sindh. While we still have a long way to go with not only integration but in supporting the education department to prepare teachers and schools for the actual teaching of the content, we are seeing momentum and ownership develop in the government which is key to the process moving forward. In the coming year, I hope to see the process really take shape through the onset of a pilot project with government schools. Similarly, I really want to move forward with the stellar work Aahung has done with curriculum change in medical teaching institutions and see the work scaled up to new institutions and new geographical locations.
I think the critical part is that Aahung really brings the “sexual” and “rights” into the sexual and reproductive health and rights based work in the sector. From the beginning, our focus has been on ensuring that the full breadth of sexual rights are addressed through our work including issues of choice, diversity, and agency. While we work actively on reproductive health, Aahung’s mandate has always been to address individual needs and try to create an enabling environment for men, women, and young people in particular, to access their sexual and reproductive rights.

Thankfully there aren’t three major concerns although there may be about 100 minor ones! The most pressing issue for Aahung is establishing financial independence and self-sustenance. This is not only critical for the future of our programs but also so that Aahung can ensure independence and keep working in the manner and on the topics that staff members find important and relevant. At the moment, Aahung is still donor dependent and while we are slowly making our way towards becoming more independent, we still have a lot of work to do in this area.

How do you think Aahung is different in its working from other SRHR focused organizations?

I believe the essence of Aahung has remained the same during the years I have been here and while many staff members have come and gone, I think through maintaining our vision and as a result of some key staff members still being a part of the organization, we have also kept the culture of the organization intact. So for me, Aahung remains my home-away-from-home even today.

Aahung in 2003 or Aahung in 2016?

Visionary, independent, and intrepid – we have always dared to think differently and take on challenges and we continue to do so today which makes me very proud to be a part of Aahung.

What three concerns about the organization’s future keep you up at night?

Thankfully there aren’t three major concerns although there may be about 100 minor ones! The most pressing issue for Aahung is establishing financial independence and self-sustenance. This is not only critical for the future of our programs but also so that Aahung can ensure independence and keep working in the manner and on the topics that staff members find important and relevant. At the moment, Aahung is still donor dependent and while we are slowly making our way towards becoming more independent, we still have a lot of work to do in this area.
"I truly respect the ethos at Aahung and the dedication that the staff shows everyday makes me more passionate about the work we do."

Are you excited about any new upcoming projects?

Aahung is working on some very exciting new initiatives. We are engaging with technology more and more and we are in the process of developing a web portal for adolescents with support from the Packard Foundation, which will allow greater access to SRHR information and education. In addition, we have also started to work on Post-Abortion Care (PAC) in more depth and have just started a project with Amplify Change on training mid-level providers, which will see Aahung engage more actively with the public sector and influence change in quality of care.

Do you feel the SRHR landscape is shifting in Pakistan?

Unfortunately, yes, as it is globally. SRHR is fast moving towards focusing exclusively on reproductive health initiatives largely looking at family planning and maternal health initiatives. While these are, of course, essential and much needed, it is important that the sector not leave out the rights based work and maintain a focus on quality while trying to scale up numbers. A lot of improved SRHR is about empowering individuals and that can only truly be done when they can access the full breadth of their rights.

In your opinion, what does Aahung bring to the table on a multi donor, multi program project such as the Sukh Project?

In the Sukh project, Aahung brings in two very important elements. Firstly, we are the organization that is working with young people. If individuals, particularly women, do not have essential knowledge about their reproductive health and do not feel empowered to make decisions about their bodies from a young age, they are far less likely to use contraception to plan their families. So for Sukh to truly be successful, the goal of the project is not just about adding new users in the here and now, but about creating a movement for non-users who are our current youth to feel empowered to access contraception when they are ready. Additionally, Aahung is working with health care providers, community workers and other key staff members, including telephone helpline operators, on clarifying their values around contraception to create a solid foundation for the project to work effectively.

What keeps you motivated and passionate at work?

It is multiple things but what we work on, especially with adolescents, means a lot to me so that is a definite source of motivation. I also truly respect the ethos at Aahung and the dedication that the staff shows everyday makes me feel more passionate about the work that we do. And finally, I think it is the stories that come back from the field that really reignite the enthusiasm when it gets low at times; every case study of a marriage negotiated and delayed, or a service provider who has changed their attitude towards abortion rights makes me want to keep going.

How would you describe Aahung in a nutshell?

Visionary, independent, and intrepid – we have always dared to think differently and take on challenges and we continue to do so today which makes me very proud to be a part of Aahung.
Our family does not believe in educating girls but my sister and I are very lucky that we were given the opportunity to attend school. My sister was a class ahead of me and we both used to go to school together. When my sister finished class 10, my parents told me I would also have to stop going to school because they did not want me to go alone. I was very upset and disappointed and did not know how I could influence their decision.

After a few days of being very sad, I started to think about the lessons of our LSBE classes. I am a human, it does not matter if I am a girl, and every woman has the right to education. Why should I let anybody take away my basic right to education when I have the ability to think for myself and make decisions about my own future? I spoke to my sister and cousins about this and then we decided to talk to our parents together. I am happy to say that we were able to convince my parents to let me continue my education. Today I am studying in class 10 and it is the LSBE course that gave me the courage to take this step!
Aisha Ijaz, Program Manager

Although I was on study leave for most of the year to pursue my Masters degree, the highlight of the year was to keep hearing about the exciting work that was taking place at Aahung in my absence!

Anayat Baig, Communications Coordinator

Being part of a cross cutting component of Aahung, I was involved in social media campaigns, launching of Aahung’s Instagram, development of introductory documentary, website revamping and dissemination of over 158,000 IEC material etc

Nazo Pirzada, Senior Trainer

For the first time in 20 years of my service with Aahung my hesitance towards language was overcome during my exposure visit, mainly because my entire team was there to support me in India and Colombo

Asrar Ahmed, Field Coordinator

Learning about advocacy and lobbying has helped me work in the education department; reaching out in the community and working with over a million people has given me breaths of experience!

Nuzhat Ansari, Field Coordinator

Learnt how to conduct training sessions along with taking care of logistics. I have also felt that my communication skills have improved during the year which helps me in various platforms

Muhammad Akhlaq, Assistant Manager Finance & Admin

Maintaining International Accounting Standards and increased interaction with auditors, vendors and Aahung team has given me a lot of confidence and has opened new ways of learning. My contribution towards admin has also increased!

Sheena Hadi, Executive Director

Meeting girls in Aahung’s first youth friendly space who are truly breaking barriers by exercising their sexual and reproductive rights and bringing awareness to their communities!

Neha Mankani, RME Manager

Being able to apply all the new things that I learnt in my midwifery degree to my work at Aahung. Working as a service provider gave me a lot of perspective that I was able to apply to our work on reproductive health at Aahung

Rizwan Bhatti, Driver

It feels good to be there for people in times of assistance!

Laxmi Walijee, Support Staff

Overwhelmed by all the love and support from Aahung staff which was provided during my surgery!

Muhammad Umer, Program Logistics & IT Coordinator

Finally being convinced about working towards Sexual and Reproductive Rights and Abortion after having multiple conversations with Aahung staff!

Zainab Khan, RME Coordinator

Working towards the development of a board game from its inception till its culmination!
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<th>Name</th>
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<th>Experience/Achievement</th>
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<td>Sohail Farooqui,</td>
<td>Senior Manager Finance, Admin and HR</td>
<td>Aahung crossed many milestones in its way forward because of robust leadership and staff professional growth trainings. Systems further developed to the level of International level which is a great achievement.</td>
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<td>Munira Muhammad</td>
<td>SRHM Manager</td>
<td>Since I have joined Aahung, I have travelled to 6 different cities across Pakistan. This was an eye-opening experience as I got to see how diverse we are as a nation.</td>
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<td>Musarrat Jabeen</td>
<td>Senior Coordinator Advocacy</td>
<td>Being able to avail the opportunity to participate in the International Family Planning Conference in Bali and Right here Right now workshop in Kuala Lumpur.</td>
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<tr>
<td>Sana Zafar,</td>
<td>LSE Manager</td>
<td>Going for the exposure visit was a great team building experience where we were able to learn about new interventions relating to youth SRHR and engage with these young people directly.</td>
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<td>Mehnaz Rehmani,</td>
<td>LSE Coordinator</td>
<td>Experiencing the fear of missing a flight! I must say this was one of the most amusing events I faced when I almost lost my colleagues at the airport on my way to Colombo from Delhi.</td>
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<tr>
<td>Dr. Sikandar Sohani,</td>
<td>Director Training &amp; Advocacy</td>
<td>Strengthening the knowledge and skills of mid-level providers through right based approach and contributing towards SDG’s and Family Planning 2020.</td>
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<tr>
<td>Sheneel Gill,</td>
<td>Senior Trainer</td>
<td>Getting conceptual clarity on Advocacy such that it has prepared me to facilitate training on advocacy!</td>
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<tr>
<td>Muniza Yaseen,</td>
<td>Trainer</td>
<td>Being directly involved with the development and redesigning of Information Education Communication (IEC) material for Aahung.</td>
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<tr>
<td>Haris Sabir,</td>
<td>Finance Coordinator</td>
<td>Being promoted as Finance Coordinator and learning International Accounting Standards this year!</td>
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<tr>
<td>Sonam,</td>
<td>Support Staff</td>
<td>Seeing women working in this organization has given me hope in the fact that women play an important role and that they are not weak as portrayed in our society!</td>
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<tr>
<td>Shazia Noor,</td>
<td>Field Coordinator</td>
<td>Increased facilitation and exposure with public and private schools has been a worthwhile experience!</td>
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Aahung focuses on providing capacity building to doctors, nurses and public health workers on critical areas of reproductive health such as client-centered care, how to take a sexual history, reproductive tract infections, sexual dysfunction, family planning and post-abortion care. Moreover, a great deal of emphasis is given to working on overcoming healthcare provider prejudices and misconceptions, particularly towards stigmatized issues such as HIV/AIDS, abortion and family planning.

A key niche area for Aahung is working actively with pre-service health care providers who are in nursing schools and medical colleges. Aahung works closely with administrations of medical teaching institutions to evaluate gaps in the teaching curriculum.

Alongside identifying needs, Aahung also develops the capacity of teaching faculty at the institutes to integrate SRHR content in their courses and provides innovative tools and modules for use with students. The goal is to have students gain knowledge and essential skills in reproductive health before they enter their practice. Moreover, students are also exposed to the ways in which SRHR content is interlinked between different disciplines, such as gynecology and obstetrics, psychiatry, dermatology and pediatrics to name a few, which allows them to develop a more holistic understanding of SRHR well being. Perhaps more importantly, students learn to recognize client rights and become more aware of the underlying components of quality of care, which can be applied to all areas of medical practice.
In an environment where children and adolescents are not provided with timely information regarding their body, health and well being, Aahung’s LSBE program supports young people in accessing such information in a safe environment.

Starting from the early primary school years, Aahung’s programs focus on body protection and CSA prevention by teaching children the power of “NO,” and critical skills in communicating discomfort and mistreatment. Building on this momentum, content on the changing body and key skills such as communication, negotiation and conflict resolution are introduced to students in their middle school years. In addition, issues such as harassment and abuse are also discussed as many students, particularly girls, start to face sexual violence during their adolescent years. As young people become more mature in their thinking, reproductive health topics such as: HIV / AIDS, peer pressure, rights within the nikah nama, positive health seeking behaviors, and the importance of planning a family are introduced and explored. Throughout, a great deal of emphasis is given to exploring issues of gender and power as these are key concepts which determine reproductive health outcomes from an early age.

The LSBE program operates predominantly through school systems in which administrative decision makers, teachers and the school community, including parents, are sensitized on the need for LSBE for promoting the well being of young people. Selected teachers are intensively trained on participatory and learner-centered methodology and their knowledge on reproductive health is greatly advanced to allow them to confidently teach the LSBE curriculum in their classrooms. Aahung also offers teachers advanced training skills, such as counseling, to support them in creating an enabling environment in their schools where young people feel empowered to communicate and ask for help when needed.

Aahung also engages with youth in the community by partnering with community-based organizations, vocational training centers and peer education programs. Through such initiatives, Aahung spreads awareness about critical reproductive rights issues such as early age marriages and the health consequences of early age pregnancies and rapid-repeat pregnancies. Often, such community-based initiatives are also tied to awareness raising activities such as theater performances, melas, and mobile cinema campaigns.
ADVOCACY

In recent years, Aahung has gained a great deal of momentum in working with the department of Education to fulfill the vision of integrating LSBE content into the provincial curriculum of Sindh. By working with relevant departments, including the Bureau of Curriculum (BoC) and the Sindh Textbook Board (STB), Aahung has been able to successfully advocate for the integration process to be initiated along with the relevant training and development of public school teachers who would be implementing the curriculum content.

Correspondingly, Aahung also focuses on sustainable integration of SRHR content into the curriculum of medical schools and nursing colleges with the intention of creating strong models that can be replicated. For this to be successful, Aahung must advocate with independent administrative bodies and decision makers within the institutions. Similarly, Aahung also works with the public sector to advocate for improved training of public health workers and service providers such as community midwives, lady health workers and female welfare workers. By targeting per-service providers, the goal is to influence change at the foundational level so that service providers can be better trained and prepared to deal with reproductive health problems during their service.

COMMUNICATIONS

Aahung has engaged with electronic and print media and continues to print information pamphlets for the distribution of important Reproductive Health (RH) information to the public. Aahung also maintains a strong social media presence to provide timely updates about local and global news and Aahung’s ongoing activities.

More recently, Aahung has engaged with new and innovative strategies for reaching out to the community. Theater groups have been trained and frequently perform plays for a large audience on issues such as early age marriages. Mobile cinema campaigns, SMS text campaigns and social media campaigns on critical challenges such as CSA prevention have also been used by Aahung to spread information and promote the adoption of safer behaviors. Aahung is continuing to evolve its communications strategies as technology evolves and prioritize independent access to our tools and training program content.
Nazia is a healthcare professional who was living with her son Zain and daughter-in-law Sara. Due to some conflicts between Zain and Sara, they decided to get a divorce. However, at the time of separation, Sara found out that she was eight weeks pregnant. Sara did not want to have this baby and consequently attempted to terminate the pregnancy by taking Emergency Contraceptive (EC) pills. However, even after taking repeated doses of the EC pill, the pregnancy was not terminated. When Nazia got to know of this, she supported Sara’s decision to get her pregnancy terminated. As Nazia had knowledge regarding the use of Misoprostol, she was able to correctly guide Sara regarding its use. Thus, Sara was able to terminate her pregnancy under medical supervision and in a safe environment. Nazia revealed that Aahung’s training on Vocational Clarification and Attitudinal Transformation (VCAT) had a large role in this as it helped her to empathize with her daughter-in-law. She knew that a divorced woman experiencing a pregnancy would be challenging for Sara, and therefore agreed with Sara’s decision and supported her in it.
In May 2014 Aahung was selected as an implementing partner for promoting and institutionalizing Family Life Education (FLE), which is synonymous with LSBE, as part of the Sukh Initiative. The Sukh Initiative emerged out of commitments made at the London Summit held in July 2012 and is a five-year joint partnership between three private Foundations; Aman Foundation, Bill and Melinda Gates Foundation, and the David and Lucile Packard Foundation. The goal of the Sukh Initiative is to increase modern contraceptive use by 15 percentage points amongst married women in a population of 1 million in selected communities in Karachi, Pakistan. The Sukh Initiative aims to empower women to access contraception by increasing knowledge, improving quality of services and expanding the basket of choices; contributing to the goals of FP2020. Aahung’s role is to prepare young people aged 12-22 years to be better equipped for marital life, be aware of their rights and responsibilities as well as healthy timing and spacing of pregnancies. The idea is to target young people prior to their childbearing years, so that they have improved knowledge related to SRHR. Aahung’s intervention also aims to ensure that young people are better able to communicate on SRHR issues and are empowered to make safe decisions regarding their reproductive health. Over the course of the project, Aahung will build the capacity of health care providers, community health workers, lady health workers, Aman tele-health operators, and school teachers to implement FLE. Through this education young people will learn about protecting and caring for their own bodies; healthy nutrition and hygiene; violence and preventative strategies; human anatomy and physiology; puberty and related changes; and maternal health complications.
 RESPONSIBLE ACTIONS FOR ADOLESCENT AND YOUTH HEALTH (RAAYH) PROJECT

The project ‘Responsible Actions for Adolescent and Youth Health (RAAYH)’ was initiated in 2015. It is a three year project with the goal of contributing towards the realization of the SRHR of marginalized and vulnerable adolescents and youth in Pakistan. The funding for this project was secured through the Swedish International Development Authority (SIDA) and Plan International, Pakistan.

This project aims to increase the demand for, and uptake of, high quality SRHR services among adolescents and youths who are in-school and out of school. It also focuses on creating an enabling environment that empowers adolescents and youth to access SRHR and challenge existing gender norms. Moreover, through sensitizing and advocating with policy makers, LSBE will be included in education curriculum through policy changes at the provincial and national levels.

This project is being implemented in the districts of Faisalabad, Vehari and Muzaffarabad. Aahung’s role in the project is to develop LSBE modules that provide SRHR information in secondary schools and to develop Information Education and Communication (IEC) materials that provide SRHR information for young people, teachers, caregivers, and community stakeholders. Aahung’s staff will build the capacity of teachers and project officers on SRHR and related issues and will also train youth advocates and health care providers.
The project ‘Improving the Quality of Comprehensive Sexual and Reproductive Health Services for Vulnerable Women in Rural Sindh, Pakistan’ has been initiated in June 2016 with funding from the Amplify Change fund. For this project Aahung will be partnering with the Department of Health (DoH) Government of Sindh, National Maternal, Neonatal and Child Health (NMNCH) program and Population Welfare Department Sindh (PWDS). The overall objective of this project is to focus on strengthening the capacity of health care providers (HCPs) working in the public health system in the coastal areas of Badin and Thatta so that they are able to deliver effective comprehensive SRHR services to clients.

Aahung has developed a two-pronged strategy for this project. At the institution level, Aahung will be collaborating with the DoH, NMNCH and PWDS. Aahung will focus on improving the pre-existing policies and the endorsement of HCPs protocols for SRHR services. At the individual level, Aahung will build the capacity of HCPs by conducting trainings on VCAT, Client Centered Approach (CCA), unwanted pregnancies, PAC and integrated family planning counseling. Also, Aahung will help to identify a referral network within each district for CMWs to refer to in case of emergencies.

Due to the inaccessibility and unavailability of adequate SRHR services, including PAC, many of these women end up utilizing alternate services which are unsafe and at times can lead to death.

AMPLIFY CHANGE

Many women in rural Sindh are in need of adequate SRHR services but are unable to seek medical help due to inaccessible healthcare facilities or due to cultural and societal norms. These women are often left untreated or are forced to seek help from untrained and unskilled providers. The use of unsafe equipment and lack of follow up ultimately leads to complications and death of the client. The aim of this project is to reduce the stigma and discrimination associated with SRHR services among HCPs so that clients are able to utilize services related to family planning and post abortion care with ease. Moreover, in order to increase the accessibility of healthcare services, this project will focus on strengthening the capacity of CMWs along with other HCPs working in the public health system in rural areas of Sindh so that they are able to deliver effective comprehensive SRHR services to clients.
The project “Improving Institutional Provision of Comprehensive Sexual and Reproductive Health and Post Abortion Care Education and Services in Sindh, Pakistan” was initiated in January 2014 and will be completed in December 2016. Through this project, which is funded by the Safe Abortion Action Fund, Aahung targeted its interventions towards the urban and semi-urban areas of Sindh where there is a high incidence of early age marriages and unwanted pregnancies. Due to the inaccessibility and unavailability of adequate SRHR services, including post abortion care, many of these women end up utilizing alternate services which are unsafe and at times can lead to death. The purpose of this project was to strengthen SRHR services in Sindh in order to improve the overall reproductive health scenario of Pakistan.

In this project Aahung adopted an innovative strategy by partnering with healthcare institutions as well as teaching institutes in order to build the capacity of service providers, and medical and nursing faculties. By training healthcare providers in institutions to provide comprehensive SRHR services, the provision of safe abortion and PAC services in the short term was ensured. On the other hand, the integration of SRHR education in institutional teaching plans will bring about long-term change in provider capacity and judgmental attitudes towards clients.

The project was initiated by meeting with the heads of various institutions; including those Aahung had previously collaborated with. After gaining institution approval, capacity building sessions were held for healthcare providers and teachers, with a focus on VCAT, Client Centered Approach, use of Misoprostol, and PAC. Through the trainings, participants demonstrated a significant increase in levels of knowledge and also verbalized an increase in comfort and motivation in providing SRHR services to clients. Faculty members also appreciated the modules developed by Aahung and discussed ways in which the content and various tools could be incorporated into their existing teaching plans. This project reflected the need for the institutionalization of SRHR in the pre-service and in-service delivery phases in order to strengthen the capacity of service providers, which will ultimately contribute towards improving the reproductive health scenario of Pakistan.
01

RESOURCE DEVELOPMENT AND TRAINING

MODULE ON NEWLY WED COUNSELING

DEVELOPMENT OF AN ELECTRONIC COURSE FOR FLE

TRAINING OF NEW PARTNER SCHOOLS ON CSA AND LSBE

COMMUNITY GATEKEEPERS’ MODULE

YOUTH ADVOCATES’ GUIDELINES

BODY COMFORT AND GENDER EQUALITY MODULE
This year, Aahung was approached by The United Nations Population Fund (UNFPA) to be their capacity building partners for their project on newly wed counseling. Aahung developed a module ‘Kamiyaab Gharelu Zindagi’ which incorporated cross-cutting themes of SRHR including VCAT, rights and communications while focusing on the needs and problems of newly married couples. This module was designed to sensitize health care providers regarding common SRHR issues faced by newlywed couples, and to equip them with the skills to deal with such issues in a culturally appropriate manner. Similarly, an IEC material was also developed for newly wedded couples in the community to provide knowledge on how to overcome common issues that could arise after marriage. This was the first time the SRHM component developed a module specifically catering to the needs of newly wedded couples, thus increasing the expertise of healthcare providers in this domain.

**MODULE ON NEWLY WED COUNSELING**

Aahung has developed an E-course for FLE through the Sukh initiative. This short course enables young people to attain key SRHR messages in a concise yet comprehensive manner and has been developed using an open source, Course Management System (CMS). Due to the sensitive nature of the topics, the content of the E-course has been segregated for boys and girls to ensure cultural appropriateness and privacy, and the course is available in both Urdu and English. Additionally, an offline version has also been created to account for electricity outages and internet issues.

Aahung will be implementing the E-course on a pilot basis at various government run vocational center and the newly established Youth Friendly Space (YFS). In the long-run, this course will be offered for free on various websites/portals that youth can access directly and on an independent basis. This in turn will maximize the reach of young people to accurate and user-friendly SRHR information.
This toolkit equips teachers to address sensitive issues related to body protection with adolescents. It provides young people with the knowledge and skills to identify good touch and bad touch, as well as the communication skills to be assertive, say “No” and tell a trusted adult. It assures young people that it is not their fault in order to overcome feelings of shame, guilt and fear.

As part of the RAAYH project, Aahung has developed content on ‘Engaging Community Gatekeepers to Promote SRHR’. For this purpose 28 project officers have been trained to discuss key youth SRHR issues with parents, and the roles that they can take on as decision makers to address these within the community. The range of issues include lack of information about pubertal changes, the consequences of early marriages, the importance of gender equality, and access to youth friendly healthcare services. An essential component of the module focuses on improving and increasing communication between caregivers and young people, thereby bridging the communication gap that exists. As a result, this intervention seeks to contribute to an enabling environment where young people feel safe and supported in addressing such sensitive issues.

Under the RAAYH project, Aahung has also developed content that empowers young people to engage with policy makers and address key youth SRHR issues. To this effect, 31 youth volunteers from Vehari, Faisalabad, and Muzzafarabad have been trained to design and implement SRHR advocacy campaigns in their respective communities. The guideline explains the concept of advocacy, the importance of advocacy, and the need for young people to lead advocacy initiatives. It also equips young people with the technical skills to mobilize community members and decision makers. Feedback from the participants revealed that they have a better understanding of the roles and responsibilities that they can take on as youth advocates. They are now also clearer about the processes involved in promoting youth SRHR at an individual, institutional, and policy level. This intervention gave Aahung the opportunity to develop specific content on advocacy, work directly with youth from diversified backgrounds, and gain exposure to working in new districts within Punjab.
This year the LSE Component has been working on improving and updating its existing school curriculum. A new upper primary module has been developed to introduce foundational SRHR concepts such as body comfort and gender equality to adolescents in class 4 and class 5. This will enable students to understand the depth and complexity of concepts that are more advanced in the secondary school modules taught in older classes, with greater ease. Thus far, 69 teachers from 21 schools have been trained to reach out to 2028 students. Feedback received from teachers during the training has revealed that the module addresses key areas of need for early adolescents. These include increased information about their bodies at a time when they are more aware of themselves and have an evolving sense of self-esteem, and more in depth discussions around gender roles.
02
STRENGTHENING INSTITUTIONALIZATION

EXTRA-CURRICULAR GUIDELINES

TEACHER EXPOSURE FORUMS

ADVANCED COUNSELING

PARTNERSHIP WITH SINDH TECHNICAL AND EDUCATIONAL VOCATIONAL TRAINING AUTHORITY (STEVTA)

WHOLE SCHOOL ACTIVITIES

SCALING UP SEXUAL AND REPRODUCTIVE HEALTH MANAGEMENT (SRHM)
EXTRA-CURRICULAR GUIDELINES

The LSE component has developed an LSBE themed extra-curricular guideline that utilizes physical, emotional, and social components to enable more holistic learning.

Teachers are trained to explain topics such as gender equality, peer pressure, and HIV/AIDS through sports, art, critical thinking activities and other educational simulation exercises. Such an initiative encourages schools to reinforce classroom learning within other spaces where soft skills such as leadership, communication, and decision making can be actively practiced.

TEACHER EXPOSURE FORUMS

Aahung hosted two teacher exposure forums this year that focused on interventions to scale up and strengthen the institutionalization of LSBE in schools. The first forum was held in September 2015 and was attended by over 50 teachers from 55 schools in Karachi and Interior Sindh. The objective of this forum was to launch Aahung’s animated video clip that provides a brief summary of the LSBE program and the impact it has created. The development of this video was funded by the United Nations Girls Education Initiative (UNGEI) which selected Aahung’s LSBE program as a “Good Practice in Girls’ Education and Gender Equality”, particularly for the South Asia Region. Aahung took this opportunity to discuss the strategies that can independently be taken by schools to ensure ownership of the LSBE program and its sustainability. In view of this, several teachers shared their experience of successful interventions and the challenges faced by them. Such discussions and exchange of ideas enabled Aahung to work on the foundational elements that lead to institutionalization in schools.

The second forum was the Annual Teacher Exposure Forum which was held in May 2016. This was attended by over 45 headmistresses/-masters and teachers from 41 secondary schools across Karachi and interior Sindh. Aahung shared its advocacy goal of integrating LSBE into the mainstream curricula in Sindh with teachers. This intervention enabled Aahung to include the teachers in the integration process and take their valuable feedback. Based on their rich experiences the teachers were able to identify which activities can be merged into which chapter and draft the integrated framework. The proposed recommendations will be shared with the LSBE Technical Advisory Committee (TAC) - the government body responsible for taking this initiative forward. Aahung also took this opportunity to advocate for SRHR policies at the school level that contribute to an enabling environment. The Aahung team in collaboration with the school teachers drafted a standardized SRHR policy guideline that will be implemented in each school. It was interesting to note that many of the schools are already implementing some of these suggested policies, informally and formally. This reflects Aahung’s success in equipping teachers with accurate SRHR knowledge and the skills to apply it at a practical and institutional level, thereby taking ownership of the LSBE program.
This year Aahung conducted an advanced psycho-social counseling training for 22 secondary school teachers from 18 schools. The training was conducted by Ms. Shazia Mohammad, a notable therapist with significant experience of working with young people. Teachers with long standing experience of implementing LSBE were selected for this training and were equipped with counseling and communication skills that would enable them to identify and effectively address sensitive issues faced by students. These include violence, gender discrimination, peer pressure, and early marriage. Furthermore, the teachers were trained extensively on the notion of trauma and were taught specific exercises on trauma release and aspects of art therapy. This enabled teachers to develop a more practical understanding of how to respond to the needs to young people in and outside of the classroom.

Aahung is working on expanding the institutionalization of LSBE by increasing its outreach from formal schools to alternative learning institutions. In the last year Aahung has partnered with STEVTA, a government led initiative with vocational institutes across Sindh, and will provide a large number of students with access to SRHR information. Aahung’s senior management held several meetings with STEVTA to introduce them to the Sukh Project and FLE curriculum, through which an MOU was signed in April 2016.

The FLE E-course will be pilot tested in four institutes and after successful roll out, the E-course will be implemented in an additional six institutes, covering a total of approximately 4000 young people.
Whole school activities are co-curricular activities that promote activity-based learning and encourage students to creatively share their understanding of FLE and its importance in an age-appropriate manner. Five whole school activities were held this year, where an estimated 5000 individuals, including youth and parents, participated. In particular, two skits stood out as they highlighted some of the key SRHR issues such as the importance of education and peer pressure. In one skit, the importance of education was demonstrated through a scenario where a girl could not read the expiry date of the medicine, which was given to a family member who became ill. The other one highlighted the consequences of peer pressure, particularly the emotional impact it has on those being pressured into doing something they are not comfortable with.
As part of this community program we conduct sessions with young girls who come to our center for stitching, sewing, and adult literacy classes. There was a 17 year old girl in the adult literacy class who came up to me a few days after the session and shared that she was going to be married soon. However, after she attended the community session she was very motivated by the case study in the module about a girl called who gets married after she is well educated, and subsequently lives a very healthy and peaceful life. She told us that after much contemplation, and realizing everything that could go wrong when getting married too early, she took a stand and spoke to her family. She told them that she would like to get married after graduating. Her family did not respond well and she experienced a lot of backlash but after speaking to them a few more times and explaining all the negative consequences of early marriage to them, she was able to convince them to let her complete her education first.

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The core efforts of the SRHM component lie in strengthening the institutionalization process within the organizations and institutes they are working with in order to ensure sustainability of the program. Part of this process involves conducting Training of Trainers (ToTs) with the institutes in order to sensitize and build their capacities on SRHR and related issues. This year, seven ToTs and two refresher sessions were conducted across Sindh and Punjab with over 10 institutions including; Indus Medical College, Lahore College of Nursing in affiliation with Director General Nursing Punjab, Aga Khan University School of Nursing And Midwifery (AKUSONAM), DKT, JHPIEGO, Marie Stopes Society, Peace Foundation, United Nations Fund Program (UNFPA) and affiliated institutes of Director General Nursing Sindh. A total of 229 participants, including faculty members and healthcare providers, were trained on the holistic management of reproductive health issues and prevention of unwanted pregnancies which included some cross cutting themes such as VCAT, CCA, sexual history taking and PAC. Through these trainings, the knowledge of faculties and healthcare providers was enhanced on SRHR and they also felt an increase in their level of comfort in discussing such issues with their students and clients.

75 of the trained participants replicated their learning’s by providing 2437 students with SRHR education. It is also estimated that 7192 clients benefited from improved services related to issues of SRHR.

This year the SRHM component was taken on board by the APPNA Institute of Public Health, Jinnah Sindh Medical University, to conduct sessions on SRHR for their Master of Science in Public Health (MSPH) students. Two sessions related to gender, rights, and reproductive tract infections were conducted and they were received positively by the institution. Consequently it has been decided that these sessions will now be part of the curriculum and will be conducted by Aahung every year, in order to enhance the knowledge and skills of healthcare professionals working in the public health domain. This initiative arose from the institutionalization process with a previous partner, Dow University of Health Sciences (DUHS), which referred the APPNA institute to Aahung. The SRHM component looks forward to further expanding the initiative to other medical and nursing institutes as well.
Standing up for her Rights

As part of our community program we conduct sessions with young girls who come to our center for stitching, sewing, and adult literacy classes. There was a 17 year old girl in the adult literacy class who came up to me a few days after the session and shared that she was going to be married soon. However, after she attended the community session she was very motivated by the case study in the module about a girl called who gets married after she is well educated, and subsequently lives a very healthy and peaceful life. She told us that after much contemplation, and realizing everything that could go wrong when getting married too early, she took a stand and spoke to her family. She told them that she would like to get married after graduating. Her family did not respond well and she experienced a lot of backlash but after speaking to them a few more times and explaining all the negative consequences of early marriage to them, she was able to convince them to let her complete her education first.
EDUTAINMENT

YOUTH MELA

THEATRE PERFORMANCE

DOCUDRAMA
YOUTH MELA

Aahung organized a Sukh Initiative Youth Mela in October 2015, in Korangi, which drew a crowd of 3500 people. This included youth, parents, and some prominent stakeholders from the community. The Youth Mela was organized to disseminate key FLE messages pertaining to youth issues through theatre performances, health sessions, and parent sensitization sessions. All Sukh partners were also invited to set up stalls through which they could share information about the family planning services they offer.

THEATRE PERFORMANCE

Aahung has carried forward its previous experience of conducting theatre performances on the prevention of early marriage in Karachi to districts in interior Sindh. This year the LSE team organized ten large scale performances across five districts, reaching over 7000 young people, caregivers, and teachers. Aahung collaborated with a local theatre team from Sujag Sansar, an NGO deeply entrenched in the community and renowned for its work on early marriage prevention in rural Sindh. Audience members revealed a greater understanding of the harmful effects of early marriage experienced by girls and their families. They also attained greater awareness of the importance of the Computerized National Identity Card (CNIC) and the legal implications of the Sindh Child Marriage Restraint Act 2013. This activity contributed to the promotion of an enabling environment as caregivers and community stakeholders were reached out to in the same areas that schools are implementing LSBE.

As part of the Sukh Initiative, theatre performances were organized in Karachi which focused on disseminating key messages related to the consequences of early marriage and gender inequality. These were performed by the students from the Aahung-Sukh school program. The event had a diverse audience of 500 to 700 people including adolescents, youth, parents, and grandparents, who demonstrated a deep understanding on the above mentioned issues after attending the performance.

DOCU DRAMA

Aahung’s docudrama ‘Bandhan Nahin Bachpan’ was aired from February-May 2016 on two local TV channels (MS and 4XM) in Korangi and Landhi through a cable network dissemination plan. The docudrama was aired 126 times and reached out to over 40,000 households.

The 20 minute short film was about a teenage girl named Abida, whose father made her quit school in order to get her married. She along with her teacher tried convincing her father to delay her wedding so that she could complete her education, but to no avail. In a similar vein, Abida’s father’s friend also got his daughter married early. However, he lost his daughter during childbirth and informed Abida’s father about the consequences of early marriages. After listening to his friend, Abida’s father called off the wedding and sent Abida back to school.
04

INVolVING AGENTS OF CHANGE

YOUTH FRIENDLY SPACE

DEVELOPING THE CAPACITY OF MEDICAL STUDENTS AS FUTURE SRHR ADVOCATES.
The SRHM component applied a different teaching model during their ToT at Indus Medical College, where for the first time third year medical students were part of the capacity building training along with their medical faculties. This model proved to be successful as both students and faculties felt that the training led to the creation of an open environment where SRHR issues could be discussed between students and faculties without any fear or shame. Moving ahead in the institutionalization process, the SRHM component is currently in the process of developing an SRHR integrated curriculum framework at Indus Medical College. This intervention is expected to bring about a large impact on the quality of teaching of SRHR content, ultimately enhancing the skills of future service providers in reproductive health.

Aahung’s Sukh team has established a Youth Friendly Space in partnership with the City District Government Karachi (CDGK) in Arif Hussain School. The purpose of establishing such a space is to provide a platform for youth aged 12 - 22 years where they, regardless of their cultural backgrounds, can come together in a safe environment and learn about SRHR and youth issues. Trained YFS Staff will conduct sessions directly on FLE as well as provide counseling services. Various games and co-curricular activities are also available at the space to further support these efforts. Additionally, an Aman tele-health booth has also been set up so that young people can make calls to the tele-health number without any hesitation.
COMMUNITY MOBILIZATION

COMMUNITY AWARENESS PROGRAM ON MARITAL RIGHTS

COMMUNITY OUTREACH
COMMUNITY OUTREACH

Aahung works closely with the Aman Community Health Program (ACHP) to build the capacity of Community Health Workers (CHWs) and Lady Health Workers (LHWs) on FLE. Aahung holds annual refreshers to assist them with the topics that they find most challenging. This year, Aahung converted the pictorial FLE manual utilized in community sessions, into an electronic format to be played on the CHW’s/LHW’s tablets. This will ease their mobility as they will be able to store and carry all their materials in one place. Furthermore, digitalizing such content will enable the CHWs/LHWs and others to utilize the module beyond the project cycle, contributing to sustainability.

Aahung has also introduced LHW initiative at the community level which includes a component on dissemination of FLE content related to early age marriages. In order to facilitate this process, Aahung has built the capacity of 200 LHWs who will replicate this module with young people aged 16-22. Feedback from the LHW’s post-training revealed a stronger understanding of the Sukh initiative and FLE as well as increased comfort in talking about such sensitive concepts.

COMMUNITY AWARENESS PROGRAM
ON MARITAL RIGHTS

Aahung’s LSE community awareness program on marital rights and early age marriage came to an end in November 2015. Through this intervention, Aahung was able to reach out to over 6900 young people aged 16-22 years. This community program enabled Aahung to identify the key knowledge and skill gaps among out of school youth. Moreover, it gave Aahung an opportunity to understand the factors that contribute to the effectiveness of community based interventions. These can now be utilized and built upon in other community initiatives such as those within the Sukh Initiative. Overall, the experience of this activity reaffirmed the magnitude of the problem of early marriage in Pakistan even within urban districts.
This year Aahung has made significant strides in its advocacy efforts. An advocacy seminar was held in December 2015 with key policy makers to discuss the importance of LSBE and its integration into the secondary school provincial curriculum in Sindh. At this forum the Senior Minister for Education and Literacy, Mr. Nisar Ahmed Khuhro, and other decision makers endorsed the LSBE integration process. They also recommended the formation of a technical advisory group to take ownership of this initiative. Aahung was subsequently invited to the Sind Curriculum Council meeting in February 2016 to present its advocacy strategy and work plan, which was unanimously approved, and the head of the curriculum wing was nominated as the focal person to lead the operationalization of LSBE integration.

Furthermore, an MOU was signed between Aahung and the Sindh Education and Literacy Department in May 2016 to ensure sustainability of the efforts. The document outlines the roles, responsibilities, and processes that will be undertaken to create an evidence based model for the formal integration of LSBE into the mainstream curricula in Sindh. The technical committee that will take this forward maintains representation from the Curriculum Wing, Bureau of Curriculum, Sindh Textbook Board, Provincial Institute for Technical Education, Subject Specialists, Master Trainers, and Aahung. This reflects diverse interests from across the Education Department and will help to ensure that the process is continuously inclusive, participatory and systematic.
SRHM ADVOCACY

As part of Aahung’s ongoing efforts in advocating for policy level changes, the SRHM component focused on strengthening its ties with existing partners as well as expanding their network with new partners. Over the past year, the SRHM component has established a strong relation with the Director General Nursing office. They have provided SRHM with continuous support in the training of healthcare providers on PAC and family planning and have voiced the need to increase the number of trainings so that maximum HCP can benefit. Another long term affiliation has been with the Pakistan Nursing Council (PNC), which have integrated many SRHR related topics into the draft of the Lady Health Visitor (LHV) curriculum.

Aahung’s annual core group meeting involved a number of representatives from partner institutions including DUHS, DGN, AKUSONAM, Aga Khan Health Service, Pakistan (AKHSP), PWD and Karachi Medical and Dental College (KMDC). The advisors of the core group shared their interests in developing a network of trainers in order to generate a good resource pool that could be utilized in conducting capacity building sessions across Sindh. Moreover, the model of curriculum integration framework established at DUHS was appreciated and it was suggested that other medical and nursing institutes should be approached to adopt a similar model in order to integrate SRHR education into the mainstream curricula. These suggestions revealed a greater acceptance of Aahung’s work and provided motivation to continue advocating for SRHR at a policy level.

This year, the SRHM component also shared the process of curriculum integration at the Indus Medical College (IMC) in Tando Muhammad Khan and the University of Health Sciences (UHS) in Lahore. Both these institutions are willing to adopt SRHR education into their curricula and Aahung will continue working with them for the curriculum integration process.
STAFF TRAINING AND EXPOSURE

EXPOSURE VISIT TO INDIA AND SRILANKA

EIGHTH ASIA PACIFIC CONFERENCE ON REPRODUCTIVE AND SEXUAL HEALTH RIGHTS (APCRSHR) CONFERENCE, BURMA

ASIAN PACIFIC RESOURCE AND RESEARCH CENTRE FOR WOMEN, MALAYSIA

INTERNATIONAL CONFERENCE FOR FAMILY PLANNING, INDONESIA

WOMEN DELIVER CONFERENCE 2016, COPENHAGEN
EXPOSURE VISIT TO INDIA AND SRILANKA

The LSE team conducted an exposure visit to India and Sri Lanka in January 2016. The team met with five organizations to discuss their SRHR programs. These include Community on Researchers of Excellence for all (CREA), Talking about Reproductive and Sexual Health Issues (TARSHI), Youth Parliament (YP) Foundation, Break-through in India and Y Peer Network in Sri Lanka. This opportunity enabled the team to explore an array of interventions that engage youth directly. The team attained firsthand experience of peer-to-peer education programs, youth leadership programs (in and out of school), youth networks/groups, as well as a range of ways in which technology can be used as an SRHR information tool. This information will feed into Aahung’s activities that seek to increase young people’s active participation and leadership with respect to SRHR.

EIGHTH ASIA PACIFIC CONFERENCE ON REPRODUCTIVE AND SEXUAL HEALTH RIGHTS (APCRSHR) CONFERENCE, BURMA

The LSE manager was invited to present Aahung’s “Good Practice Guideline for Advocacy Strategies in Conservative and Less Developed Countries” at the 8APCRSHR Conference in Burma in February, where 120 stakeholders attended the session. The strategies developed by Aahung resonated with representatives of organizations in other culturally similar countries working on similar advocacy initiatives. United Nations Education Scientific and Cultural Organization (UNESCO) and UNFPA have also requested Aahung for a meeting to reiterate the presentation to their team.

ASIAN PACIFIC RESOURCE AND RESEARCH CENTRE FOR WOMEN, MALAYSIA

Aahung was recently invited to attend a youth strategizing meeting hosted by the Asian Pacific Resource and Research Centre for Women in Malaysia. The purpose of this meeting was to revisit the concept of ‘youth’- deconstructing who this is comprised of, what their needs are, how they can be met, and what an ideal program addressing these issues would look like. Exposure to organizations from culturally similar contexts, with varied experience of working with youth, provided an opportunity to discuss their learnings and exchange ideas on challenges and strategies to address these. The LSE team will incorporate these findings in the development of its own youth programs.
INTERNATIONAL CONFERENCE FOR FAMILY PLANNING, INDONESIA

Aahung was represented at the International Conference for Family Planning in Indonesia. The use of edutainment to promote Family Planning was very extensive throughout the conference as many countries battle with the same issue as Pakistan of being able to access women in rural settings. It was observed that people have to see analogues of them in entertainment in order to be drawn in and connect with the characters and be influenced by them. During the conference, participants from Aahung also learnt that multiple modes of communication are always more effective for behavior change so each additional form of exposure increases your chances of impact i.e. “dose response” – more is good within communications.

WOMEN DELIVER CONFERENCE 2016, COPENHAGEN

This year the Women Deliver Conference 2016 was held in Copenhagen, Denmark from 16th to 19th May. It was the largest gathering on girls’ and women’s health and wellbeing in more than a decade and was attended by 6000 participants including youth, civil society members, journalists, donors and government officials from 169 countries. The focus of this year’s conference was implementation of the Sustainable Development Goals, especially related to health. Aahung was represented at the Women Deliver Conference by Neha Mankani; our Research, Monitoring and Evaluation manager. Neha was able to attend various sessions at the conference and network with key players from around the world in the fields of adolescent health and rights, reproductive health, maternal and neonatal health, PAC, and other topics related to Aahung’s work. Aahung was also invited to present their work as an Amplify Change grantee at a session titled ‘Voices for change – transforming SRHR advocacy’ which was very well received and was attended by Princess Mary, the Danish Crown Princess, the Minister, and Princess Mabel Van Oranje, initiator and chair of international advocacy organization Girls Not Brides.
A support group session was conducted in Mehran Town where the participants were informed about the dangers of early marriage. One of the mothers present at the session shared the story of her daughter who was married at the age of 14 and was subsequently unable to have a baby even after four years of marriage. During this time, her husband would beat her and her in-laws would mistreat her as they were unhappy with this situation. They also ran a lot of tests on her and found out that all her test results were fine. The doctor suggested having the husband tested to which he refused and sent the girl back to her parent’s house. As a result, her mother shared that she found the session to be very informative and developed a better understanding of the effects of such decisions and decided to not let any of her other daughters be married at an early age.
There is a strong emphasis on the growth of employees who are the strongest assets of Aahung. The profile of staff development at Aahung has been raised in recent years by placing great importance on continuing professional development through exposure visits and on-site and off-site trainings. Employees are also given ample space and time to polish personal skills by taking part in various seminars and programs pertaining to individual interests. Each year Aahung also organizes a recreational event where all staff members are taken for an outing.

Between October 2015 and March 2016, Aahung organized various workshops for the professional and personal development of staff members. The first workshop was conducted by two in-house members. The focus of this workshop was to break the ice between old and new employees at Aahung along with getting the new staff acquainted with the organizational structure. The other themes of the workshop emphasized intra and inter personal communication so that staff members can reflect on ways to effectively communicate with each other. Aahung also invited Shazia Mohammad, who is a therapist by profession, to conduct a four day workshop on mindfulness. The workshop focused on listening to the inner voice and practicing communication skills and various team building activities. The Aahung staff thoroughly enjoyed Shazia’s training as it gave them an opportunity to reflect on their inner selves and their thoughts.

Towards the end of the year an art therapist also conducted a one day workshop with the Aahung staff. This workshop was more focused on the beauty of spontaneity. He divided the staff members into pairs, provided them with clay, and let them create a piece of art without having any conversation with each other. In this way silence was used as an expressive language of the conscious and the unconscious mind.
Kanwal was one of the girls who attended a support group session through the Sukh Initiative. She told an Aahung staff member that she was only 15 years old when she got married to a man from her village, without her consent. A few months into her marriage she visited the doctor for a checkup, and found out that she was pregnant. As she was very young at that time, she had a miscarriage. She underwent many treatments to conceive, but to no avail. Due to her inability to conceive, her husband and in-laws sent her back to her parents’ house. She told us that she could have easily prevented it all, had she been educated on FLE.

After attending the session and learning about the risks and dangers of early marriage, Kanwal decided to educate other families about the consequences of early marriage and share her example so that no one else goes through what she did.
SOCIAL MEDIA CAMPAIGN ON PREVENTING CHILD SEXUAL ABUSE

In April 2016, Aahung launched its first ever social media campaign. Facebook was used as a platform for raising awareness to prevent CSA, enabling caregivers to empower their children to protect themselves. The campaign was divided into four phases: the first phase was about introducing the concept and facts around CSA. In the second phase Aahung focused on deflating myths and misconceptions related to CSA. The third phase included identifying signs and symptoms of CSA. The last phase is still underway, and Aahung is focusing on providing caregivers with relevant skills, particularly communication. It has also been decided that a referral guide of organizations working towards psycho-social support will be shared with viewers. The campaign gained significant support from viewers as witnessed through their engagement with posts, leading to increased visibility for Aahung. Ever since the launch of the CSA campaign, the number of likes on Aahung’s Facebook page increased by over 10,000 people.
Aahung’s communications component set up a stall at the first International Conference on Obstetrics and Gynecology held at Liaquat University of Medical and Health Sciences (LUMHS) Jamshoro, where Aahung’s IEC material was widely disseminated among the conference participants. Aahung’s advocacy videos were also projected on the stall site. The videos were watched by a large number of viewers and were widely appreciated. Aahung’s IEC material was disseminated to approximately 150 doctors, 40 Para-medical staff, and 30 medical/nursing students.

The communications component has made efforts to showcase Aahung on multiple social media platforms. A new Instagram account has been created and the Twitter account has been made active again. Aahung’s website is currently being revamped, and will be launched by the end of November, 2016. Although our media presence through social media is on the rise, we aim to keep our presence concentrated towards our target audience.
With various programs being implemented by Aahung, increased emphasis is being given to monitoring and evaluation. This is not only taken care of by a separate Research Monitoring and Evaluation (RME) component, each component is also responsible for measuring the impact of their existing programs.

On an on-going basis, the LSE component carries out monitoring visits to measure the efficacy of its trainings and implementation with various stakeholders (schools, teachers, students, parents, etc). This is known as supportive supervision, where the Aahung staff observes teachers while they are taking classes and intervene in case teachers are facing challenges in implementation. At the end of the session, Aahung staff gives their feedback and encourages the teachers to make the classroom environment participatory. This also involves talking to them about their existing problems and figuring out how Aahung can support them. This support could be in the form of refreshers, or on-site support in case they identify issues with students in classrooms.
This year RME conducted a Baseline study between November 2015 and January 2016 for the Sukh Initiative which focused on FLE. A sample of FLE intervention schools was taken and the study was conducted using a quantitative interviewer administered tool, and qualitative focus group discussions with 469 boys and girls from 12 secondary schools. The purpose of this study was to assess the baseline knowledge and attitudes of adolescents prior to implementation of FLE in schools. Results of this survey have been used to develop recommendations and to modify the program strategy in order to ensure efficacy. The tools administered in the baseline survey will be administered post-implementation, at the midline and at the project end, and the results will be analyzed against baseline findings.

This year Aahung introduced another tool for measuring data qualitatively. This is being done through the use of a participatory research tool. This tool involves activities, use of arts and crafts, conversations, and discussions along with teambuilding activities. A participatory tool does not only capture the existing knowledge of participants, but it also helps in assessing their attitudes and behaviors in given circumstances. With the use of various activities, such as body mapping, it has become easier to evaluate the level of knowledge, along with the comfort levels of participants, when it comes to talking about the changes associated with puberty. Moreover, participants are removed from the usual class-room setting, made to sit in a large group, and provided a safe space to talk about trust. They are able to reflect on who they can trust in various situations; reflect on what it takes to have a challenging conversation, and explore their confidence levels by indulging in debates. This also gives students a chance to engage with their classmates, sit with them, and at times have difficult conversations.

Aahung has developed an entire tool-kit which contains various activities aiming to capture student knowledge in fun and creative ways. Currently there are over 15 activities in this kit and Aahung will keep adding more activities as the need arises.
LIFE SKILLS EDUCATION

Over the next year, Aahung will continue to work on strengthening the LSE program and scaling up its institutionalization. The LSE team will be introducing advanced concepts of gender in secondary schools. This includes content on masculinities, femininities, tolerance for different gender identities, and gender in the media. As a result, students will have a stronger understanding of the pervasive powers of gender dynamics, how they are perpetuated through different mediums, and underlie individuals’ ability to exercise their sexual and reproductive health rights. Additionally, the LSE team will scale up its interaction with parents of children enrolled in partner schools and build their capacity on addressing youth SRHR issues. These interventions will be complimented by the development of a referral guide of psycho-social organizations for schools as well as implementation of the SRHR policy guide. This will ensure systematic and sustainable promotion of SRHR in an enabling environment.

Aahung will also be initiating interventions directly with youth. This will include the on-going development of the Youth Champion’s League where young people are equipped with the knowledge and skills to raise awareness on youth SRHR issues in their communities, and advocate for such rights. This enables meaningful youth participation and ownership of the SRHR agenda.

The LSE team will also expand its communication activities. Given the success of the social media campaign on CSA, the team will continue to develop these on a wide range of SRHR issues. Additionally, Aahung is also exploring other cost effective ways in which to disseminate SRHR information to the increasing populace that has access to technology.

Finally, Aahung will continue to focus on its advocacy goal of integrating LSBE into the secondary school curricula in Sindh. The team will work closely with members from the Technical Advisory Committee (TAC) to expedite the process and ensure long term sustainability.

SEXUAL AND REPRODUCTIVE HEALTH MANAGEMENT

In the upcoming year, the SRHM component looks forward to the institutionalization of SRHR themes into selected medical and nursing institutes of Sindh and Punjab. Moreover, the component will also focus on building the capacity of service providers working in the community in the coastal areas of Sindh. In the process, SRHM will develop a referral network amongst service providers for the safe provision of family planning and PAC services. The SRHM component will also be developing new training tools which will include video documentaries that will highlight the use of the VCAT framework during communication in order to provide clients information on family planning and EC, and IEC materials on the use of misoprostol.
Ashok Babu, a determined and senior support staff member at Aahung, joined us 17 years ago. To date, he has been a great support to the organization and has seen many people join and leave in this time.

The communications team at Aahung interviewed Ashok on his 17th work anniversary. The discussion went as follows:

**Anayat:** Hi Ashok! Many congratulations on the successful completion of 17 years at Aahung.

**Ashok:** Thank you so much – it’s really an honor to be a part of this organization for so long but I feel I only came here yesterday (smiles).

**Anayat:** 17 years of commitment! What kept you motivated for such a long period of time?

**Ashok:** The respect I receive from people here at Aahung is a rare thing. One may find a job anywhere, but at Aahung feels more like family.

**Anayat:** How do you see Aahung now and then?

**Ashok:** Years back, when I joined Aahung, the infrastructure was weak. Every one of us was used to working with very limited resources. Now I see a resourceful place where everybody works so comfortably. I also noticed that people were more into field work previously, now both office and field work seem balanced.

**Anayat:** Any closing remarks?

**Ashok:** I just want to say that I always try to apply Aahung’s values at my home and I think it has had a positive impact in my life. I wish and pray for Aahung’s success in the cause that it stands for.
# IEC Material Dissemination

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**Total IEC Material Disseminated**: 158,226