



CONTRACEPTIVE PERFORMANCE REPORT

2012-2013

GOVERNMENT OF PAKISTAN
STATISTICS DIVISION
PAKISTAN BUREAU OF STATISTICS

PREFACE

Pakistan Bureau of Statistics (PBS) is the prime official agency of Pakistan, responsible for the collection, compilation and timely dissemination of reliable statistical information to the policy makers, planners and researchers. This organization publishes a variety of data, primary as well as secondary, especially on economics and social aspects of the country.

The task of producing Contraceptives Performance Report has been assigned to PBS as a sequel to the devolution of Ministry of Population Welfare (MoPW). Pursuantly, Population Welfare Statistics Section (PWSS) of PBS has produced the 3rd issue of the Annual Contraceptive Performance Report of Population Welfare Program for the year 2012-13.

Requisite information stem from all service delivery points in the country in order to ensure nationwide coverage of Family Planning/Reproductive Health activities. Annual contraceptive performance report is an important intervention to gauge outlet, sector and method-wise contraceptive progress and observe the direction and track/trend for future Contraceptive Requirement and Distribution (CRD) in the country.

I am grateful to Provincial Population Welfare Departments (PPWDs), the District Population Welfare Office, Islamabad Capital Territory (ICT), Population Welfare Department Azad Jammu & Kashmir (AJK), Population Welfare Programme Gilgit-Baltistan (GB), Social Marketing of Contraceptive (SMC) and other stakeholders for their valuable support in the compilation of this document.

I hope that the user of the report would be able to learn about important facts of contraceptive activities. Comments and suggestions for improvement of Contraceptive Performance Report would be highly appreciated.

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SUMMARY

The profile of contraceptive performance in 2012–13, compared with the preceding year 2011–12 is summarized as under:-

- a) The overall Contraceptive Performance for the year 2012-13 in terms of Couple Year of Protection (CYP) has decreased by 2.2% in comparison with the last year 2011-12.
- b) The Province-wise profile of CYP indicates a decrease in all provinces i.e. Punjab (8.0%), Sindh (21.7%), Khyber Pakhtunkhwa (3.9%) and Balochistan (7.9%) whereas a decrease of 20.3% witnessed in the district Islamabad. The Contraceptive Performance of Population Welfare Departments depicted decrease of 9.9% whereas NGOs sector and Social Marketing of Contraceptive (SMC) have shown an increase of 3.5% and 16.6% respectively, as compared with the previous year.
- c) Method-wise comparison of CYP, shows increase in Condoms (25.7%), Oral Pills (3.8%) and Injectable (7.6%) while decrease in IUDs (6.6%) and Contraceptive Surgery (13.2%) is observed.
- d) Outlet-wise CYP depicts increase of 4.8% in Hakeems and Homeopaths (H&H), 7.0% in Male Mobilizers (MM), 13.1% in AJK, 0.8% in Gilgit-Baltistan, 3.0% in Family Planning Association of Pakistan (FPAP), 7.4% in Marie Stopes Society of Pakistan and 16.6% in Social Marketing of Contraceptives (SMC). The performance has decreased by 7.9% in Family Welfare Centers (FWCs), 11.6% in Reproductive Health Services-A (RHS-A) Centers, 2.1% RHS-B Centers, 44.0% in Mobile Service Units (MSUs), 16.1% in Provincial Line Departments (PLDs), 4.6% in Registered Medical Practitioners (RMPs), 0.3% in FATA and 58.8% in Regional Training Institutes (RTIs).
- e) The overall Contraceptive Prevalence Rate (CPR) on the basis of modern methods, during 2012-13 is 26.03%. The provinces make the rising sequence of CPR as Balochistan (6.91%), Sindh (13.62%), Khyber Pakhtunkhwa (17.37%) and Punjab (18.36%). The highest CPR is observed in the Federal district Islamabad (38.46%).

1. INTRODUCTION

Population dynamics are important to promote the economic development and security in Pakistan. Demographic profile shows that, in 1950, Pakistan's population were recorded 37 million people, making it the world's 13th most populous country, while in the year 2012-13, Pakistan's estimated population has reached to 184.35 million with Growth Rate is 2.0 percent . At present, Pakistan is the 6th most populous country in the world and will attain 5th place in the world by 2050 due to high Population Growth Rate. The country's high fertility rate is a major contributor to this situation since mortality rate has been fairly stable over the years. Such a rapid growth in population poses serious threats to the country's social progress, economic stability, health, environment, law & order and food security.

Reduction in population growth is one of the top priorities of the government of Pakistan to balance between country's resources and population. In this context, Family Planning Programs contribute significantly as there is negative correlation between the Total Fertility Rate (TFR) and the Contraceptive Prevalence Rate (CPR). The decline in the TFR could be more substantial if there is greater use of contraceptives in the country. Keeping in view the key role of contraceptives in the reduction of TFR, this report is an effort to have an up to date data on the usage of contraceptives provided in the market by the government and private stake holders under the population welfare programme.

1.1 History of Family Planning Program- in Pakistan

Recognizing the consequences of high Population Growth Rate (PGR) on its economic and social development programmes, family planning activities were started in Pakistan on limited scale in the First Five Year National Development Plan (1955-1960) through voluntary organizations. In the Second Five –Year Plan (1960-65), however, family planning services were dispensed through the health infrastructure. Family Planning gained priority in the Third Five year Plan (1965-1970), when an independent setup was established for managing and executing the Population Welfare Programme. Institutional arrangements for the programme attained the status of an independent ministry on 12th June, 1990. Pakistan's first Family Planning Scheme was a part of the country's Third Five Year Plan (1965–1970). This scheme became the template for all subsequent family planning strategies. The scheme's goal was to have a vast impact in the shortest time possible, with a reduction of the birth rate from 50 to 40 per 1000 by 1970. At the onset of the program, condoms were the most available method of contraception, but by 1966 the Intrauterine Device (IUD) had replaced it and has become the "corner-stone" of the Scheme. The programme witnessed a positive change and received sustained political support from 1988 to 2002 and, as a signatory to the Programme of Action developed at the International Conference on Population and Development at Cairo in 1994, Pakistan pledged to provide universal access to family planning by 2010. There was consistency

and continuity in the operations during these years. As a result, Pakistan was referred to be entering the fertility transition phase, with the increasing trend of Contraceptive Prevalence Rate (CPR), resulting in the reduction of Total Fertility Rate (TFR) and Population Growth Rate (PGR). In 2002, the Ministry of Population Welfare (MOPW) drafted an explicit Population Policy to attain replacement level of fertility by 2020 with the objective to achieve population stabilization expeditiously. Pakistan's current family planning policy reflects the government's concern with rising population trends and poverty. The policy's goals include reducing population growth (from 2.1 percent in 2002 to 1.3 by 2020), fertility through voluntary family planning (from 4 births per woman in 2004 to 2.1 births per woman by 2020). The five-year Population Welfare Programme (2003-2008) set the ultimate goal of population stabilization as a development priority to attain sustainable socio-economic development

Though Pakistan was one of the first Asian countries to begin a family planning program with some help from international donors, fertility has declined slower than in neighboring countries. Historical political strife and cultural restrictions on women constraining their empowerment have hampered implementation of family planning strategies throughout the country. Most women who say they do not want any more children or would like to wait a period of time before their next pregnancy do not have the contraceptive resources available to them in order to do so.

1.2 Review of Organizational Pursuits of Population Welfare Programme

Population Welfare Programme is an ongoing social development endeavor, operating within the framework of nationally accepted broad-based and strategically focused Population and Development policies. Since its launching, the Population Welfare Programme has experienced many phases in terms of administrative and financial setup.

Before devolution process- 2010, the Federal Government was responsible for the overall execution and entire funding of the Population Welfare Programme through MOPW. The MOPW was responsible for Policy Planning, advocacy of population issues including reproductive health and gender concern, target setting, training, coordination with other ministries, negotiations for foreign assistance and fulfilling related obligation, monitoring, research, evaluation, information, education and communication programme, services statistics, procurement, warehousing & distribution of contraceptives/commodities, providing policy support to NGOs, public-private partnership and social marketing of contraceptives.

In pursuance to 18th Constitutional Amendment Act 2010, the Ministry of Population Welfare (MoPW) has ceased to exist from 07-12-2010. The functions of Collection, Maintenance and Analysis of Population Statistics being handled by the Ministry of

Population Welfare (MoPW) has been relocated to Statistics Division (Pakistan Bureau of Statistics). To implement the decision of the Government of Pakistan, the Statistics Division has established a new section in PBS entitled “Population Welfare Statistics Section (PWSS)” with the following objectives:

- a. To collect, compile and disseminate contraceptive performance data on monthly, quarterly and yearly basis at provincial and national level;
- b. To maintain data base on contraceptive services statistics;
- c. To carry out periodic analysis of contraceptive performance statistics and
- d. To develop liaison with national & international statistical agencies

1.3 Methodology

As per past practice in the Ministry of Population Welfare, the Pakistan Bureau of Statistics collects the contraceptive performance data on monthly basis by post, through e-mail and by fax from the Provincial Population Welfare Departments (PWDs); Population Welfare Departments AJK, GB, FATA; District Population Welfare Office, ICT, Islamabad; Family Planning Association of Pakistan (FPAP); Marie Stopes Society of Pakistan (NGO); Social Marketing of Contraceptive (SMC); Regional Training Institutes (RTIs) and Public-private Partnership (PPP)/Target Groups Institutes (TGIs). After editing and coding, the data is classified according to tabulation plan and processed at Data Processing Centre of PBS.

The data is entered on monthly basis and after three months, it is consolidated into the quarterly performance report. At the end of financial year, the performance of all four quarters is combined together and annual report is prepared. In the current annual report, the percentage change in the contraceptive performance for the financial year 2012-13 using Couple Years of Protection (CYP) is compared with the last year (2011-12). Contraceptive Prevalence Rate (CPR) on the basis of Modern Methods is also estimated to gauge the birth control process in the country. Methodology involved in the calculation of Couple Years of Protection (CYP) and Contraceptive Prevalence Rate (CPR) is detailed below:

1.3.1 Couple Years of Protection (CYP)

The term Couple Years of Protection (CYP) is one of several commonly used indicators to assess internationally the family planning efforts. It is the protection provided by contraceptive methods during one-year period, based upon the volume of all contraceptives sold or distributed to clients during that period. It is also an indirect estimator of birth control.

CONVERSION FORMULA FOR CONTRACEPTIVE COUPLE YEARS OF PROTECTION (CYP)	
144 UNITS OF CONDOM	= 1 CYP
15 CYCLES OF ORAL PILL	= 1 CYP
1 INSERTION OF IUD	= 3.5 CYP
5 VIALS OF INJECTABLE	= 1 CYP
1 CASE OF CONTRACEPTIVE SURGERY (CS)	= 12.5 CYP

1.3.2 Contraceptive Prevalence Rate (CPR)

The CPR is the percentage of women who are practicing, or whose sexual partners are practicing, any form of contraception. It is usually measured for married women having ages between 15-49 years only. The Contraceptive Prevalence Rate (CPR) of Pakistan is calculated on the basis of consumption of contraceptive by converting number of units sold into users with the help of the formulae given in the following table:

CONVERSION FORMULA FOR USERS		
100 UNITS OF CONDOM	=	1 USER
13 CYCLES OF ORAL PILL	=	1 USER
1 INSERTION OF IUD	=	1 USER
5 VIALS OF INJECTABLE	=	1 USER
1 CONTRACEPTIVE SURGERY (CS) CASE	=	1 USER

Thereafter, number of users is divided by number of Married Women of Reproductive Age (MWRA), symbolically represented as under:

$$\text{CPR (\%)} = \frac{\text{No. of Users}}{\text{MWRA}} * 100$$

1.4 Service Delivery Units

The following Service Delivery Units are spread all over in the country to facilitate the users for their needs:

1.4.1 Family Welfare Centre (FWC)

The FWC is the cornerstone of Pakistan's Population Welfare Programme. These centers constitute the most extensive institutional network in the country for promoting and delivering family planning services in both urban and rural areas. As a static facility, it

serves a population of about 7000; while operating through its satellites clinics and outreach facility, an FWC covers a population of about 12000.

1.4.2 Reproductive Health Services Centers

The Reproductive Health Service Centers are the major clinical component of the Pakistan's Population Welfare Programme. They provide services through RHS-A Centers and RHS-B Centers. The RHS-A centers are hospital-based service delivery units. They provide contraceptive surgery facilities for women and men with safe and effective backup medical support. Well - established hospitals and clinics with fully-equipped operating facilities (operation theatre facilities, beds for admission, post-operative care, sterilization and emergency resuscitation equipment, etc.) and trained work force.

1.4.3 Mobile Service Units (MSUs)

The MSUs are the flagship of the Population Welfare Programme. These provide a package of quality Family Planning/Reproductive Health (FP/RH) services to the people of those remote villages and hamlets where no other health facility exists. The MSUs operate from specially-designed vehicles which carry with-in them all the facilities of a mini clinic ensuring complete privacy for simple gynecological procedures.

1.4.4 Regional Training Institutes (RTIs)

The RTIs provide skill-based training in FP/RH for all categories of health care providers i.e. Doctors, medical students, nurses, student nurses, lady health visitors and other paramedics. The RTIs also undertake activities focused on raising the awareness level of hakims, homeopaths, community health workers, teachers and college students.

1.5 Data Sources

The Contraceptive Performance Report is prepared on the basis of data received from the following sources:

- Provincial Population Welfare Departments (PPWDs);
- Population Welfare Departments AJK, GB and FATA;
- The District Population Welfare Office, ICT, Islamabad
- Family Planning Association of Pakistan (FPAP) ;
- Marie Stopes Society of Pakistan (NGO);
- Social Marketing of Contraceptive (SMC);
- Regional Training Institutes (RTIs) and
- Public-private Partnership(PPP)/Target Groups Institutes(TGIs)

1.6 Flow of Data/Performance Reports

The District Population Welfare Office is the main operational tier of Population Welfare Program. It is responsible for actual implementation of population welfare activities in the field. For the purpose, it collects Contraceptive Performance Reports of all the reporting units (FWCs, RHS-A, MSUs etc), then compile / consolidate these reports and transmit it to its provincial Population Welfare Department. The provincial Population Welfare Department send these report to Pakistan Bureau of Statistics. Apart from the provincial department, FATA, AJK, GB, prominent NGOs (FPAP & Marie Stopes) and SMC also provide Contraceptive Performance data to PBS for preparation of contraceptive performance reports.

1.7 Objectives:

Main objectives of the Contraceptive Performance Report are as following:

- To assess the province/sector-wise, method-wise and outlet-wise contraceptives performance using Couple Year of Protection (CYP).
- To provide basis for estimating annual contraceptives requirements and distribution in the country.
- To obtain Contraceptive Prevalence Rate (CPR) to assess the birth control strategy of the country

2 RESULTS AND DISCUSSION

2.1 Source-wise Comparison in terms of Couple Years of Protection

The province/sector-wise comparison of contraceptive performance during the year 2012-13 in terms of Couple Year of Protection (CYP) has been made with the previous year 2011-12 in **Table-1** annexed with the report.

At national level, a decrease of 2.2 % has been observed for all program and non-program outlets during the year (2012-13) compared with 2011 -12.

At provincial level, contraceptive performance of the current financial year in comparison with the previous year, a decrease has been witnessed in all provinces Punjab (8.0%), Sindh (21.7%), Khyber Pakhtunkhwa (3.9%) and Balochistan (7.9%)

As far as the district Islamabad and FATA are concerned, the contraceptive performance for the year 2012-13 compared with year 2011-12 has depicted a decrease of 20.3% and 0.3% respectively, whereas an increase has been recorded in the performance of AJK (13.1%) and Gilgit-Baltistan (0.8%). The contraceptive performance in respect of Population Welfare Departments has decreased by 9.9% in year 2012-13 compared to year 2011-12 and for NGOs and Social Marketing of Contraceptive (SMC), it has increased by 3.5% and 16.6% respectively.

2.2 Method-wise Comparison of Contraceptive Performance

In absolute terms, the contraceptive performance of program and non-program service outlets have reported a sale of 187.707 million units of Condoms, 6.460 million cycles of Oral Pills, 1.228 million insertions of Internal Uterine Devices (IUDs) and 2.911 million vials of Injectables. Also 103,842 Contraceptive Surgery (CS) cases have been performed during the financial year 2012-13.

At national level, method-wise comparison during 2012-13 over 2011-12, in terms of CYP, has shown an increase in Condoms (25.7%), Oral Pills (3.8%) and Injectables (7.6%) whereas a decrease of 6.6% in IUDs and 13.2% in Contraceptive Surgery (CS) cases has been observed. The details are shown in **Table-2** given at the end of report.

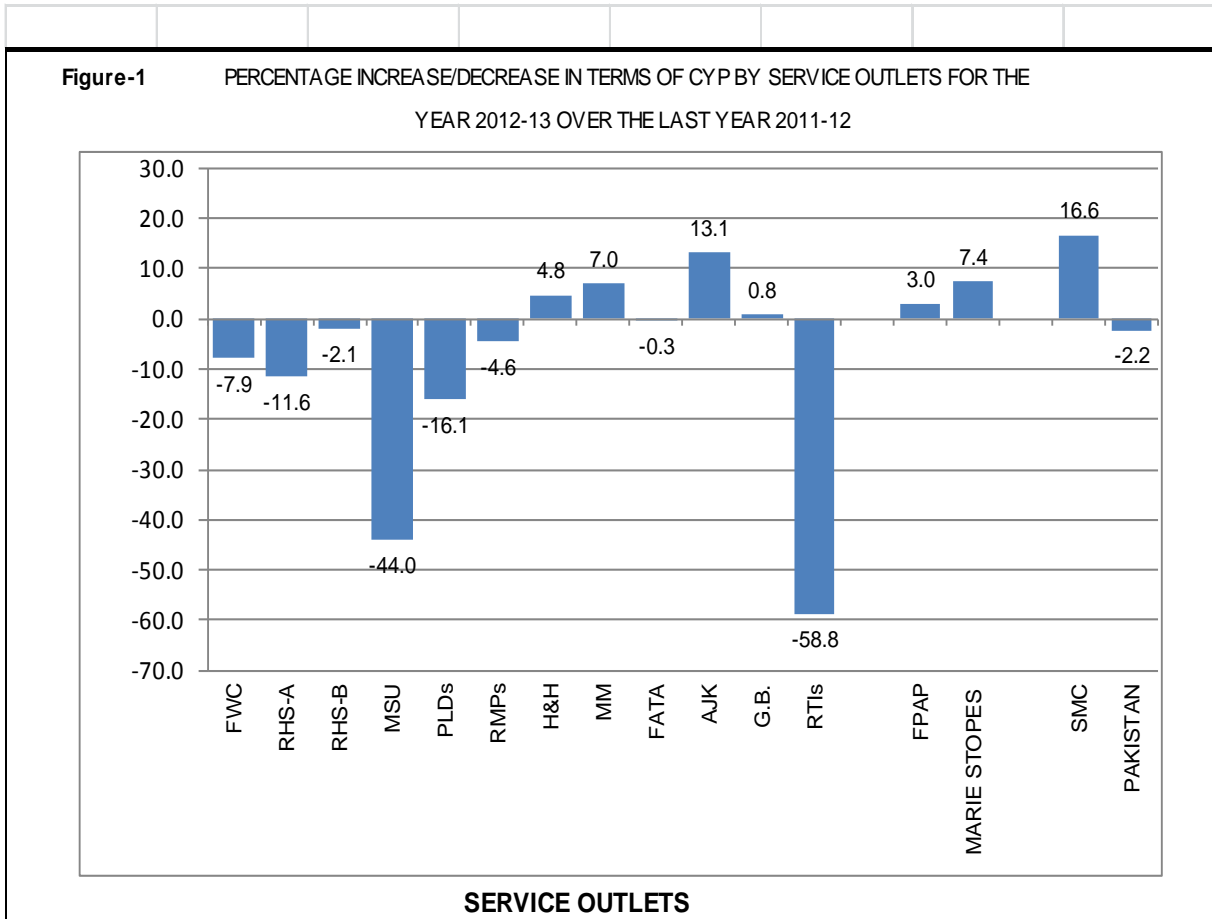
At provincial level, method-wise contraceptives performance for the year 2012-13 is highlighted by using CYP in the proceeding paragraphs.

In case of condoms, method-wise performance of year 2012-13 when compared with the last year (2011-12), has reflected an increase in Punjab (9.7%), Sindh (4.5%), Khyber Pakhtunkhwa (19.1%), Islamabad (10.4%), FATA (20.3%), Gilgit-Baltistan (26.2%) , FPAP (14.4%) Marie Stopes (40.3%) and SMC (39.1%). However, a decrease in Balochistan (1.6%), AJK (6.1%), and RTIs (34.9%) has been noticed. For Oral Pills, an increase has been witnessed in Punjab (2.7%), Khyber Pakhtunkhwa (14.9%), FATA (52.5%), Gilgit-Baltistan (1.4%), FPAP (9.2%), Marie Stopes Society (17.5%) and SMC (6.7%), while decrease has been shown in Sindh (14.1%), Balochistan (14.8%), Islamabad (5.5%), AJK(5.4%) and RTIs (21.0%).

For IUDs, an increase has been noticed AJK (17.9%), Gilgit-Baltistan (2.5%) , Marie Stopes Society (7.4%) and SMC (3.9%) while a decrease has been observed in Punjab (6.1%), Sindh (31.6%), Khyber Pakhtunkhwa (9.4%), Balochistan (4.5%), Islamabad (28.6%), FATA (14.9%), RTIs (67.3%) and FPAP (1.6%). In case of Injectables, an increase has been observed in Khyber Pakhtunkhwa (5.7%), FATA (39.1%), FPAP (24.3%), and SMC (16.4%) whereas a decrease has been observed in Punjab (4.8%), Sindh (7.7%), Balochistan (7.7%), Islamabad (19.8%), RTIs (15.4%) and Marie Stopes Society (13.4%). When we look into the figure of Contraceptives Surgery cases, an increase has been recorded in AJK (27.3%), FPAP (11.6%) and SMC (52.4%) whereas a decrease has been observed in Punjab (16.9%), Sindh (21.2%), KPK (4.2%), Balochistan (21.4%) and Islamabad (2.6%). The details are reflected in **Table-3**.

2.3 Outlet-wise Comparison in terms of Couple Year of Protection

The contribution of service outlets in terms of CYP during the year 2012-13 when compared with year 2011-12, has shown an increase of 4.8% in Hakeems and Homeopaths (H&H), 7.0% in Male Mobilizers (MM), 13.1% in AJK, 0.8% in Gilgit-Baltistan, 3.0% in Family Planning Association of Pakistan (FPAP), 7.4% in Marie Stopes Society of Pakistan and 16.6% in Social Marketing of Contraceptives (SMC). The performance has decreased by 7.9% in Family Welfare Centers (FWCs), 11.6% in Reproductive Health Services-A(RHS-A) Centers , 2.1% in RHS-B, 44.0% in Mobile Service Units (MSUs), 16.1% in Provincial Line Departments (PLDs), 4.6% in Registered Medical Practitioners (RMPs), 0.3% in FATA and 58.8% in Regional Training Institutes (RTIs), The details are given in **Table-4**. Graphical presentation is in **Fig.1**.



2.4 Comparative Outlet-wise Contraceptive Performance of Delivery Services

The Outlet/ Province/Sector-wise comparison of Contraceptives Performance for Delivery Services has been given in detail at **Table-5**. Discussion on the results is as under:

2.4.1 Family Welfare Centers (FWCs)

The performance of FWCs in terms of CYP has decreased by 7.9%, at the national level during the year 2012-13, when compared with the last year (2011-12). At the provincial level, decrease has also been observed in all provinces Punjab (5.1%), Sindh (22.7%), Khyber Pakhtunkhwa (3.6%) and Balochistan (3.9%). Whereas district Islamabad reported a decrease of 20.1%. In the Method wise comparison, at national level, FWCs have shown an increase of 10.1% in Condoms and 3.3% in Oral Pills whereas a decrease is observed for IUDs 11.3% and Injectables by 1.1%.

2.4.2 Reproductive Health Services Centers (RHS-A)

The performance of RHS-A centers, at national level, during the year 2012-13 compared with the last year (2011-12) in terms of CYP has decreased by 11.6%. At provincial level, a decrease has been observed in Punjab by 10.2%, Sindh by 18.9%, Khyber Pakhtunkhwa by 3.3% and Balochistan by 19.0%, whereas Islamabad has shown an increase of 2.0%. In the Method-wise comparison, the performance of RHS-A centers, at national level, has shown an increase for Condoms by 23.4% and Oral Pills by 5.7% whereas a decrease is witnessed in IUDs; Injectables and Contraceptive Surgery by 3.9%, 1.7% and 13.8% respectively.

2.4.3 Reproductive Health Services Centers (RHS-B)

The performance of RHS-B centers for the year 2012-13 compared with the last year, in terms of CYP has decreased by 2.1%, at national level. At provincial level, an increase in Punjab is observed by 9.0%, whereas a decrease has been reported in Sindh by 33.0%, Khyber Pakhtunkhwa 23.6%, Balochistan by 25.7% and Islamabad by 28.4%. In the Method wise comparison, the performance of RHS-B centers has shown an increase for Oral Pills (91.2%), IUD (523.4%) and Injectables (42.2%) whereas a decrease has been observed in Condoms (5.6%) and Contraceptive Surgery (33.0%), at the national level.

2.4.4 Mobile Service Units (MSUs)

The performance of MSUs for the year 2012-13 compared with the year 2011-12, in terms of CYP, has decreased by 44%, at national level. At provincial level, decrease has also been witnessed in all provinces i.e. in Punjab by 69.6%, Sindh by 19.2%, Khyber Pakhtunkhwa by 20.9% and Balochistan by 4.7% whereas Islamabad has shown an increase of 23.3%. In the Method wise comparison, the Performance of MSUs has shown a decrease in Condoms (12.8%), Oral Pills (26.3%) and IUDs (48.3%) and Injectables by 27.3%, at national level.

2.4.5 Provincial Line Departments (PLDs) including outlets of Health Department

The performance of PLDs for 2012-13 compared with the last year (2011-12), in terms of CYP, has decreased by 16.1%, at national level. At Provincial level, a decrease has been observed in all provinces i.e. in Punjab by 15.9%, Sindh by 78.7%, Khyber Pakhtunkhwa by 23.2%, Balochistan by 4.7% and Islamabad by 26.5%. In the method-wise analysis, the performance has increased in Condoms by 6.3% and Oral Pills by 12.8% whereas the performance has decreased in IUDs (18.8%) and Injectables (4.5%), at national level.

2.4.6 Registered Medical Practitioners (RMPs)

While comparing the performance of RMPs for the current year with the last year (2011-12), in terms of CYP has decreased by 4.6%, at national level. At provincial level, an increase has been noticed in Punjab (23.1%) and Khyber Pakhtunkhwa (23.4%). Whereas decline has been reported in Sindh (51.5%) , Balochistan (5.2%) and in Islamabad by 32.0%. The method-wise performance of RMPs has shown an increase in Condoms (8.6%) whereas a decrease has been noticed in Oral Pills (3.2%), IUD (7.2%) and Injectables (8.2%), at national level.

2.4.7 Hakeems and Homoeopaths (H&H)

In terms of CYP, an increase has been observed in the performance of H&H during the year 2012-13 as compared to year 2011-12, by 4.8%, at national level. At provincial level, increase is observed in Punjab (1.4%), Sindh (12.3%) and Khyber Pakhtunkhwa (16.5%) whereas a decrease has been reported in Balochistan (25.0%). The method-wise performance of H&H for the year 2012-13 has shown an increase in Condoms by 2.2% and in Oral Pills by 6.6%, at national level.

2.4.8 Male Mobilizer

In terms of CYP, an increase has been observed in the performance of Male Mobilizer by 7.0%, at national level. At provincial level, increase has been witnessed in Punjab (8.6%), and Khyber Pakhtukhwa (21.4%). The decrease has been observed in Sindh (10.8%), Balochistan (100%). The method-wise performance of Male Mobilizer has shown an increase in Condoms by 10.9%, whereas a decrease has been reported for Oral Pills by 4.4%, at national level.

2.4.9 Non-Governmental Organization (NGO)-FPAP

For NGO (FPAP), the overall contraceptive performance for 2012-13 has shown an increase by 3.0%, in terms of CYP, compared with the last year (2011-12). The comparison of the method-wise performance has revealed an increase in Condoms (14.4%), Oral Pills (9.2%), and injectables (24.3%) and Contraceptive Surgery cases (11.6%) whereas a decrease has been observed for IUDs (1.6%).

2.4.10 Azad Jammu & Kashmir (AJK)

The contraceptive performance during 2012-13 for AJK has increased in terms of CYP by 13.1% over the previous year. In the method-wise performance, an increase has been reported in IUDs (17.9%) and Contraceptive Surgery cases (27.3%) whereas a decrease has been reported in Condoms (6.1%), Oral Pills (5.4%) and Injectables (8.9%).

2.4.11 Gilgit – Baltistan (GB)

A minor increase of 0.8% has been reported in terms of CYP. In the method-wise analysis, the contraceptive performance of GB for the year 2012-13 has been reported positive for Condoms (26.2%), Oral Pills (1.4%) and IUDs (2.5%) whereas reported negative for Injectables (3.4%).

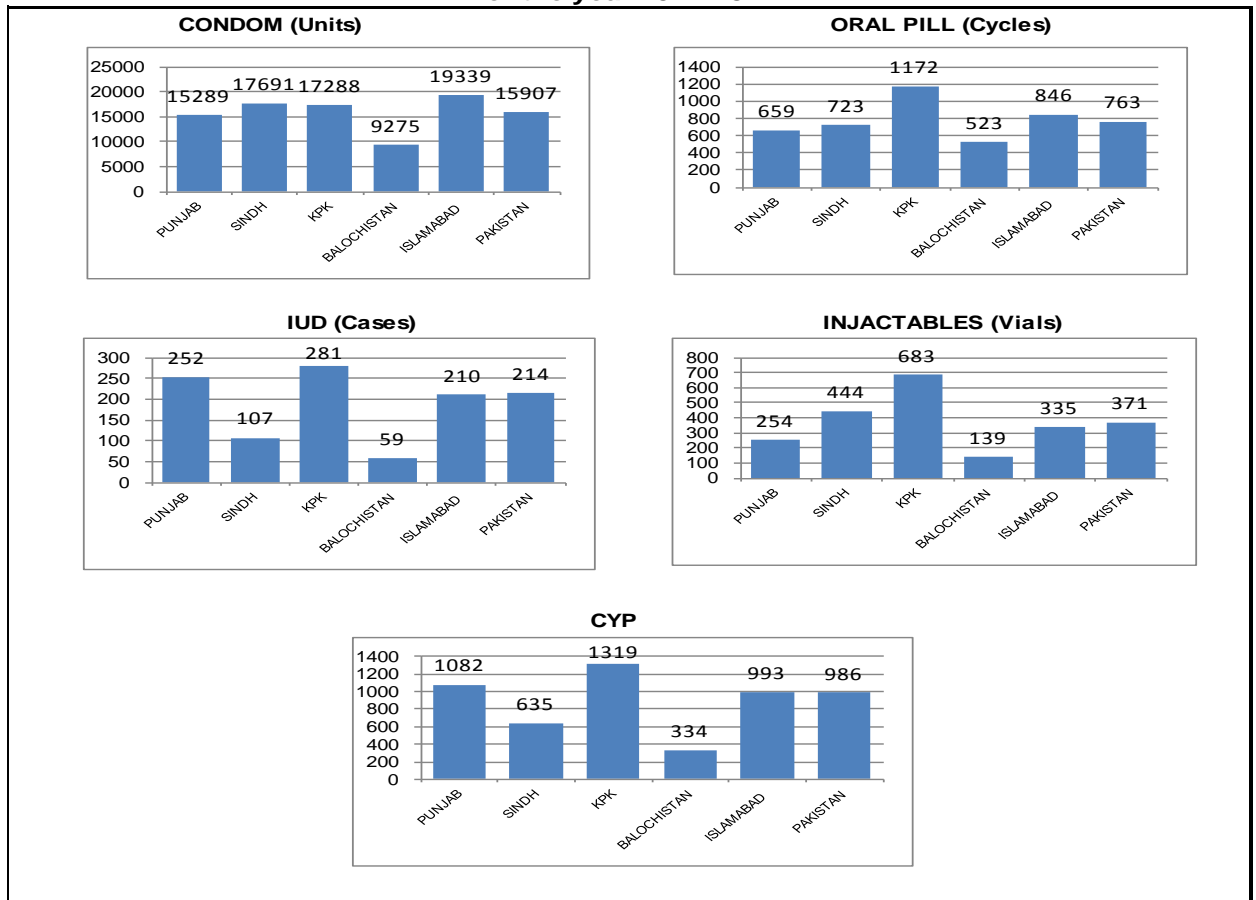
2.5 Method and Outlet-wise Average Performance

Method and Outlet-wise Average performance for the Federal and Provincial setup during the financial year 2011-12 is given in **Table-6**. The details are as under:

2.5.1 Average performance of FWC by method

The highest average performance of FWC has been reported for Condoms i.e. 17,691 units in Sindh, followed by 17,288 units in Khyber Pakhtunkhwa, 15,289 units in Punjab and 9,275 units in Balochistan were sold per FWC whereas 19,339 units per FWC have been reported in Islamabad. The maximum numbers of 1172 cycles of Oral Pills were dispensed by Khyber Pakhtunkhwa and the lowest 523 cycles were reported by FWCs of Balochistan. The highest insertions of IUDs i.e. 281 have been reported by FWCs of Khyber Pakhtunkhwa and the lowest figure (59) is reported by FWCs of Balochistan, whereas 210 insertions have been witnessed in Islamabad. When we look into the figure for injectables, it is seen that the maximum number has been reported by Khyber Pakhtunkhwa as 683 vials while the minimum number i.e. 139 has been observed in Balochistan. When these contraceptive performances are translated into CYP, it is observed that on average, the highest number of CYP i.e. 1319 has been reported by Khyber Pakhtunkhwa while the lowest 334 for Balochistan, whereas 993 has been calculated for Islamabad. The graphical presentation of each contraceptive method dispensed per FWC is presented in **Fig-2**:

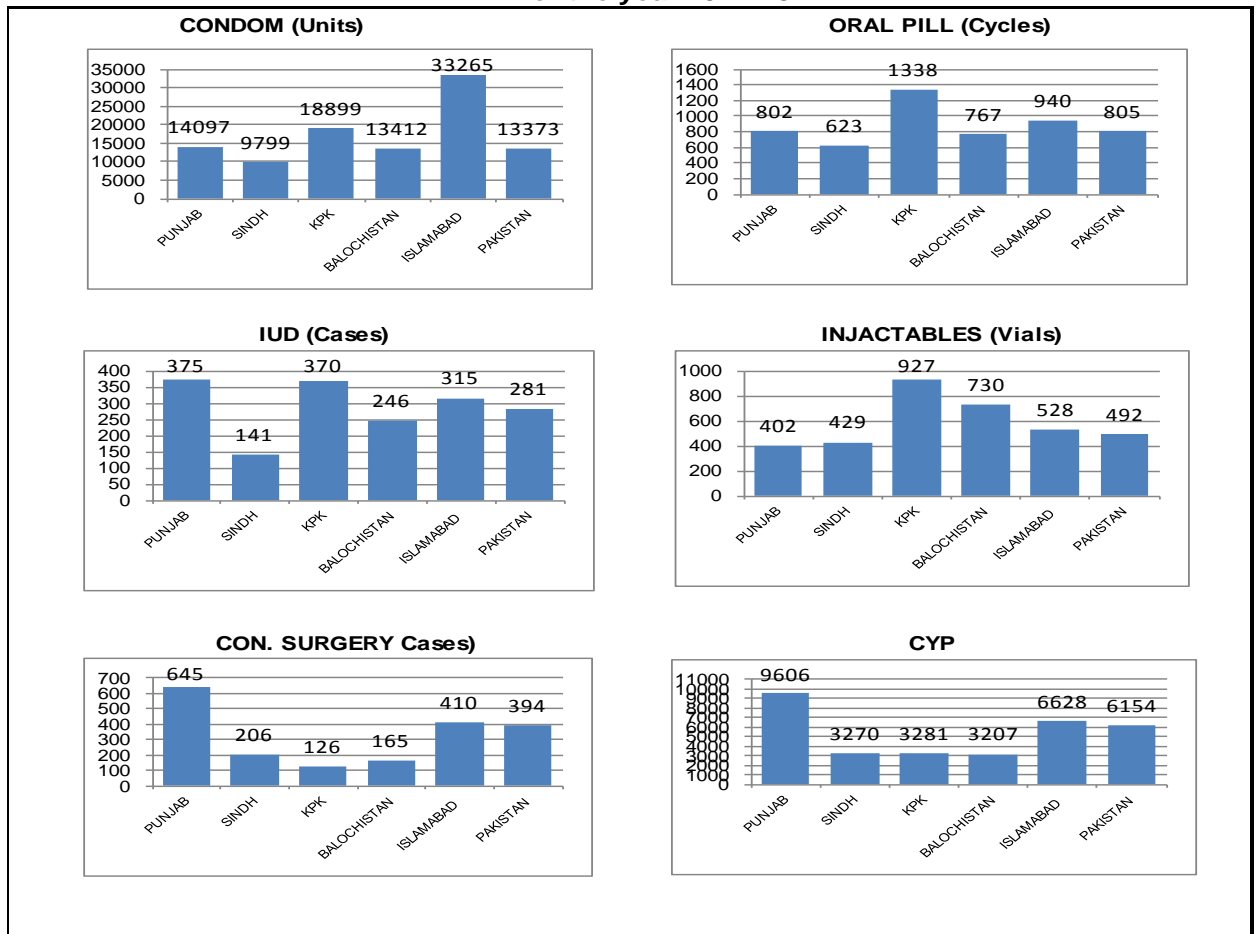
Figure-2 Average Achievement Per FWC by Method and Province for the year 2012-13



2.5.2 Average performance of RHS-A by method

The highest average achievement for Condoms per RHS-A is 18,899 units which have been sold in Khyber Pakhtunkhwa, followed by 14,097 units in Punjab, 13,412 units in Balochistan and 9799 units in Sindh whereas 33,265 units have been sold in Islamabad. The Reproductive Health Services-A Centres of Islamabad were able to dispense 940 cycles of Oral Pills. Among provinces, highest dispensation of Oral Pills i.e.1338 cycles for RHS-A of Khyber Pakhtunkhwa as compared to the lowest 623 cycles of Oral Pills by RHS-A of Sindh. The highest insertions of 375 IUDs were reported by RHS-A of Punjab in comparison to the lowest 141 insertions carried out by RHS-A in Sindh. The highest Injunctables i.e. 927 vials were observed by Khyber Pakhtunkhwa in comparison to the lowest 402 vials reported by RHS-As of Punjab whereas Islamabad reached to 528 vials. The highest Contraceptive Surgery cases were performed by Punjab i.e. 645 and the lowest (126) in Khyber Pakhtunkhwa whereas RHS-A of Islamabad carried out 410 cases of contraceptive surgery. When the data of contraceptives performance is translated into CYP, it is observed that on the average, the highest numbers of CYP for Punjab (9,606), while the lowest (3,207) have been calculated for Balochistan. The graphical presentation of each contraceptive method recorded per RHS-A is presented below:

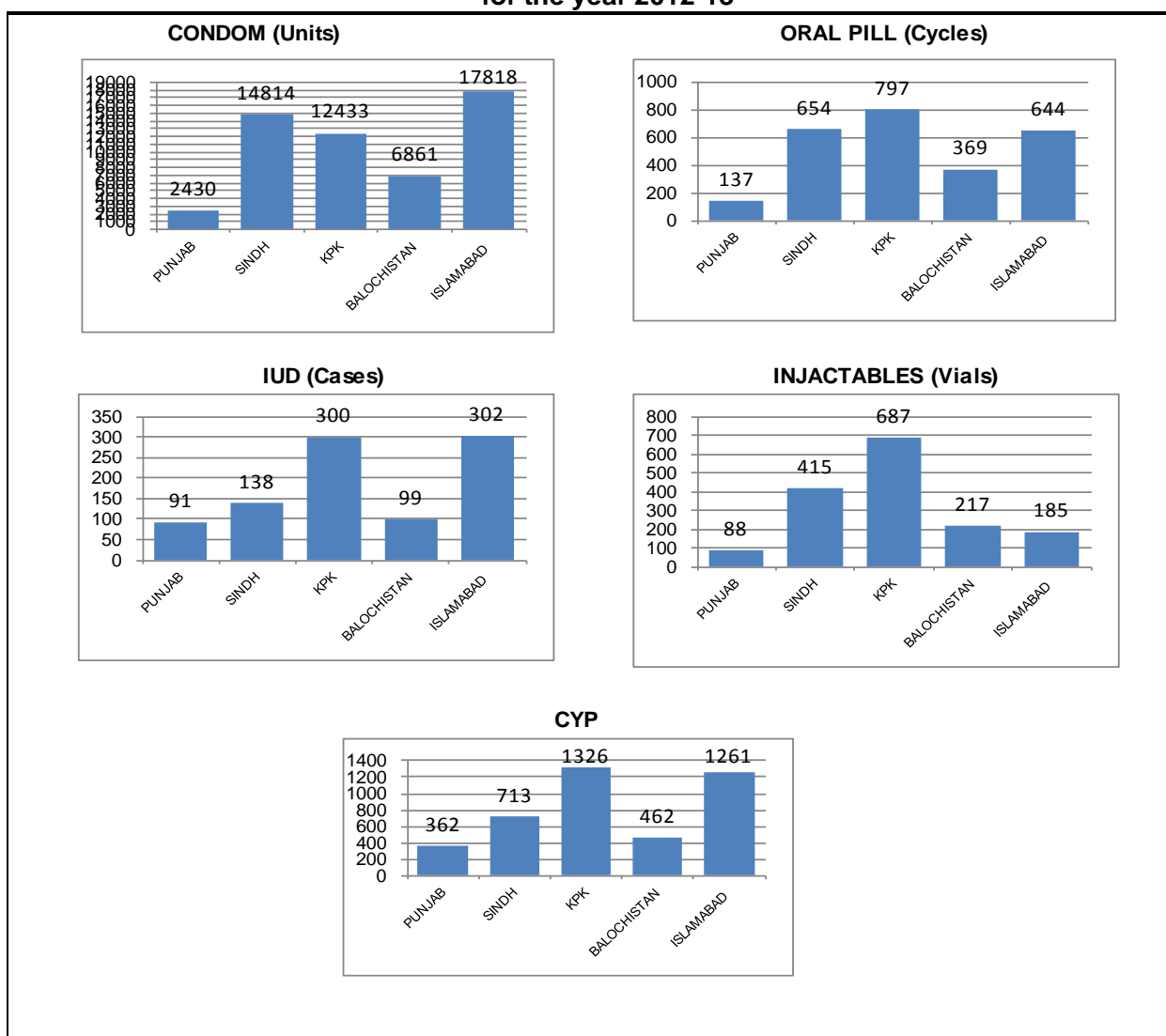
Figure-3 Average Achievement Per RHS-A by Method and Province for the year 2012-13



2.5.3 Average performance of MSU by method

The highest average reported performance for Condoms per MSU is 14,814 units sold in Sindh followed by 12,433 units in Khyber Pakhtunkhwa, 6861 units in Balochistan, 2430 in Punjab and 17,818 in Islamabad. The Mobile Service Units of Khyber Pakhtunkhwa were able to dispense 797 cycles of Oral Pills as compared to the lowest 137 cycles in Punjab whereas in Islamabad 644 cycles were dispensed. The highest reported insertions of IUDs (300) took place in Khyber Pakhtunkhwa compared to the lowest (91) in Punjab, whereas in Islamabad, 302 insertions of IUDs were reported. The highest numbers of Injectables 687 vials reported by Khyber Pakhtunkhwa compared to the lowest 88 vials reported by MSUs of Punjab, whereas in Islamabad, 185 vials of injectables have been witnessed. When the contraceptive performance data is translated into CYP, it is observed that on the average, the highest numbers of CYP (1326) were calculated for Khyber Pakhtunkhwa while the lowest (362) are for Punjab whereas 1261 CYP were noted in Islamabad. The graphical presentation of each contraceptive method as reported by MSUs is presented below:

Figure-4 Average Achievement Per MSU by Method and Province for the year 2012-13



2.6 Percentage Distribution of Total CYP by Source

The percentage distribution of total CYP by Province/Sector, during the financial year 2012-13, is reflected in Punjab (37.51%), Sindh (9.67%), Khyber Pakhtunkhwa (11.21%), Balochistan (1.26%), Islamabad (1.08%), FATA (0.39%), AJK (0.37%), GB (0.12%), RTIs (0.05%), Family Planning Association of Pakistan (FPAP) (7.50%), Marie Stopes Society of Pakistan (1.03%) and Social Marketing of Contraceptive (SMC) by (29.83%). The details are given in **Table-7**.

2.7 Percentage Distribution of Total CYP by Service Outlets

The percentage distribution of total CYP by Service outlets, during the financial year 2012-13, is depicted 35.44% in FWCs, 15.47% in RHS-A, 3.22% in RHS-B, 1.94% in

MSUs, 1.03% in PLDs, 1.28% in RMPs, 0.12% in H&H and 2.22% in MM. The details are presented in the **Table-8**.

2.8 Percentage Distribution of Total CYP by Methods

The method-wise percentage contribution for IUDs, Condom, Contraceptive Surgery, Injectables and Oral Pills, in terms of total CYP, has been 54.33%, 16.47%, 16.40%, 7.36% and 5.44%, respectively. The details are given in **Table-9**.

2.9 Province-wise Family Planning and Mother & Child Health (MCH) Services Delivery

The data indicates that during the year (2012-13), 10.202 million clients availed Family Planning Services of various Contraceptive methods out of which the Family Welfare Centers provided the services to 503,293 clients for Pre-natal and 360,300 for Post-natal Care. Apart from these, Family Welfare Centers had provided treatment to 2,765,243 General Ailments (Children + Adults). The details are given in **Table-10**.

2.10 Pakistan-Contraceptive Prevalence Rate (CPR) by Modern Methods

The overall Contraceptive Prevalence Rate, on the basis of modern methods, during the year 2012-13 is 26.03%, under the Population Welfare Programme. In the Provincial setup, the CPR in Punjab is 18.36%, Sindh 13.62%, Khyber Pakhtunkhwa 17.37%, Balochistan 6.91% and in Federal district Islamabad is 38.46%. The CPR is calculated from Contraceptive Performance data received from the Provincial Population Welfare Departments (PPWDs); Population Welfare Departments AJK, GB & FATA; The District Population Welfare Office, ICT, Islamabad; Family Planning Association of Pakistan (FPAP) ; Marie Stopes Society of Pakistan (NGO); Social Marketing of Contraceptive (SMC) and Regional Training Institutes (RTIs). The details are given in **Table-11**.

STATISTICAL TABLES

STATISTICAL TABLES

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- TABLE-3** SOURCE AND METHOD-WISE PERFORMANCE OF CONTRACEPTIVES DELIVERY SERVICES FOR THE YEAR 2012-13 OVER THE LAST YEAR 2011-12.
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Table-1

SOURCE WISE PERFORMANCE DURING 2012-13 OVER THE LAST YEAR 2011-12

PROVINCE/SECTOR	COUPLE YEARS OF PROTECTION (CYP)		%age Change
	2012-2013	2011-2012	2012-2013 over
			2011-12
A POPULATION WELFARE DEPARTMENTS			
PUNJAB	2,968,060	3,225,326	-8.0
SINDH	765,073	976,571	-21.7
KHYBER PAKHTUNKHWA	887,349	923,250	-3.9
BALUCHISTAN	99,867	108,394	-7.9
ISLAMABAD	85,164	106,906	-20.3
FATA	30,569	30,675	-0.3
AJK	29,061	25,693	13.1
GILGIT BALTISTAN (GB)	9,106	9,032	0.8
REGIONAL TRAINING INSTITUTES (RTIs)	3,665	8,897	-58.8
SUB- TOTAL	4,877,914	5,414,744	-9.9
B NON-GOVERNMENTAL ORGANIZATIONS (NGOs)			
FAMILY PLANNING ASSOCIATION OF PAKISTAN (FPAP)	593,648	576,323	3.0
MARIE STOPES SOCIETY OF PAKISTAN (MSS)	81,465	75,858	7.4
SUB-TOTAL	675,113	652,181	3.5
C OTHERS			
SOCIAL MARKETTING OF CONTRACEPTIVES (SMC)	2,360,493	2,023,996	16.6
GRAND TOTAL (A+B+C)	7,913,520	8,090,921	-2.2

Table-2

METHOD WISE PERFORMANCE DURING 2012-13 OVER THE LAST YEAR 2011-12

METHOD	OVERALL PERFORMANCE		%age Change
	2012-2013	2011-2012	2012-2013 over
			2011-12
CONDOM (Units)	187,706,739	149,278,307	
CYP	1,303,519	1,036,655	25.7
ORAL PILL (Cycles)	6,459,915	6,223,180	
CYP	430,661	414,879	3.8
IUD (Insertions)	1,228,305	1,315,298	
CYP	4,299,068	4,603,543	-6.6
INJECTABLE (Vials)	2,911,237	2,705,346	
CYP	582,247	541,069	7.6
CON. SURGERY (Cases)	103,842	119,582	
CYP	1,298,025	1,494,775	-13.2
TOTAL CYP	7,913,520	8,090,921	-2.2

Table-3 SOURCE AND METHOD WISE PERFORMANCE OF CONTRACEPTIVE DELIVERY SERVICES FOR THE YEAR 2012-13 OVER THE YEAR 2011-12

PROVINCE/ SECTOR	CONDOM (Units)			ORAL PILL (Cycles)			IUD (Insertions)		
	2012-13	2011-12	% CHANGE	2012-13	2011-12	% CHANGE	2012-13	2011-12	% CHANGE
	1	2	4	2	2	7	8	9	10
POPULATION WELFARE DEPARTMENTS									
PUNJAB	38,718,472	35,293,845	9.7	1,533,147	1,493,212	2.7	476,805	508,034	-6.1
SINDH	16,869,248	16,144,384	4.5	691,497	805,184	-14.1	88,045	128,776	-31.6
KHYBER PAKHTUNKHWA	14,196,352	11,923,105	19.1	901,828	784,569	14.9	169,178	186,785	-9.4
BALUCHISTAN	2,130,937	2,166,214	-1.6	114,043	133,821	-14.8	16,085	16,842	-4.5
ISLAMABAD	1,087,086	984,673	10.4	41,882	44,311	-5.5	14,715	20,601	-28.6
FATA	432,414	359,550	20.3	54,990	36,048	52.5	5,386	6,327	-14.9
A.J.K.	233,243	248,323	-6.1	14,772	15,614	-5.4	5,413	4,590	17.9
GILGIT BALTISTAN (GB)	52,042	41,229	26.2	12,275	12,100	1.4	1,289	1,258	2.5
RTIs	22,981	35,295	-34.9	2,042	2,585	-21.0	747	2,282	-67.3
SUB-TOTAL	73,742,775	67,196,618	9.7	3,366,476	3,327,444	1.2	777,663	875,495	-11.2
NGOs									
FPAP	948,579	828,927	14.4	121,892	111,612	9.2	124,404	126,476	-1.6
MARIE STOPES SOCIETY	93,401	66,552	40.3	14,443	12,288	17.5	22,515	20,961	7.4
SUB-TOTAL	1,041,980	895,479	16.4	136,335	123,900	10.0	146,919	147,437	-0.4
OTHERS									
SMC	112,921,984	81,186,210	39.1	2,957,104	2,771,836	6.7	303,723	292,366	3.9
TOTAL	187,706,739	149,278,307	25.7	6,459,915	6,223,180	3.8	1,228,305	1,315,298	-6.6
PROVINCE/ SECTOR									
PROVINCE/ SECTOR	INJECTABLE (Vials)			CONTRACEPTIVE SURGERY (Cases)			COUPLE YEAR OF PROTECTION (CYP)		
	2012-13	2011-12	% CHANGE	2012-13	2011-12	% CHANGE	2012-13	2011-12	% CHANGE
	11	12	13	14	15	16	17	18	19
POPULATION WELFARE DEPARTMENTS									
PUNJAB	481,899	506,005.0	-4.8	66,542	80,109	-16.9	2,968,060	3,225,326	-8.0
SINDH	342,839	371,559.0	-7.7	18,008	22,860	-21.2	765,073	976,571	-21.7
KHYBER PAKHTUNKHWA	412,654	390,370.0	5.7	4,319	4,506	-4.2	887,349	923,250	-3.9
BALUCHISTAN	38,155	41,349.0	-7.7	1,083	1,377	-21.4	99,867	108,394	-7.9
ISLAMABAD	24,415	30,428.0	-19.8	1,475	1,514	-2.6	85,164	106,906	-20.3
FATA	25,244	18,153.0	39.1	0	0	0.0	30,569	30,675	-0.3
A.J.K.	15,432	16,937.0	-8.9	354	278	27.3	29,061	25,693	13.1
GILGIT BALTISTAN (GB)	17,075	17,679.0	-3.4	0	0	0.0	9,106	9,032	0.8
RTIs	2,083	2,461.0	-15.4	27	0	0.0	3,664	8,897	-58.8
SUB- TOTAL	1,359,796	1,394,941.0	-2.5	91,808	110,644	-17.0	4,877,914	5,414,743	-9.9
NGOs									
FPAP	445,914	358,860.0	24.3	4,347	3,895	11.6	593,648	576,323	3.0
MARIE STOPES SOCIETY	5,257	6,068.0	-13.4	0	0	0.0	81,465	75,858	7.4
SUB-TOTAL	451,171	364,928.0	23.6	4,347	3,895	11.6	675,113	652,181	3.5
OTHERS									
SMC	1,100,270	945,477.0	16.4	7,687	5,043	52.4	2,360,493	2,023,996	16.6
TOTAL	2,911,237	2,705,346.0	7.6	103,842	119,582	-13.2	7,913,520	8,090,921	-2.2

Table-4

OUTLET WISE PERFORMANCE DURING 2012-13 OVER THE LAST YEAR 2011-12

OUTLETS/SECTOR	COUPLE YEARS OF PROTECTION (CYP)		%age Change
	2012-2013	2011-2012	2012-2013 over
			2011-12
FAMILY WELFARE CENTRES (FWCs)	2,804,233	3,043,998	-7.9
REPRODUCTIVE HEALTH SERVICES-A CENTRES (RHS-A)	1,224,584	1,385,347	-11.6
REPRODUCTIVE HEALTH SERVICES-B CENTRES (RHS-B)	254,610	259,942	-2.1
MOBILE SERVICE UNITS (MSU)	153,210	273,596	-44.0
PROVINCIAL LINE DEPARTMENTS(PLDs)	81,463	97,135	-16.1
REGISTER MEDICAL PRATICIONERS (RMPs)	101,553	106,481	-4.6
HAKKEEMS & HOMOEOPATHS(H&H)	9,868	9,415	4.8
MALE MOBILIZER (MM)	175,993	164,533	7.0
FATA	30,569	30,675	-0.3
AJK	29,061	25,693	13.1
GILGIT BALTISTAN (GB)	9,106	9,032	0.8
REGIONAL TRANNING INSTITUTES (RTIs)	3,664	8,897	-58.8
NON-GOVERNMENTAL ORGANIZATIONS (NGOs)			
FAMILY PLANNING ASSOCIATION OF PAKISTAN (FPAP)	593,648	576,323	3.0
MARIE STOPES SOCIETY OF PAKISTAN	81,465	75,858	7.4
OTHERS			
SOCIAL MARKETTING OF CONTRACEPTIVES (SMC)	2,360,493	2,023,996	16.6
PAKISTAN	7,913,520	8,090,921	-2.2

Table-5

**COMPERATIVE OUTLETS WISE PERFORMANCE OF CONTRACEPTIVE DELIVERY SERVICES
FOR THE YEAR 2012-13 OVER 2011-12**

CATEGORY OF SERVICE OUTLETS/ PROVINCE	CONDOM (Units)			ORAL PILL (Cycles)			IUD (Insertions)		
	2012-13	2011-12	% CHANGE	2012-13	2011-12	% CHANGE	2012-13	2011-12	% CHANGE
1	2	2	4	5	5	7	8	8	10
FAMILY WELFARE CENTRES (FWC)									
PUNJAB	22,933,272	20,886,142	9.8	988,182	953,597	3.6	377,587	406,164	-7.0
SINDH	11,109,847	10,404,137	6.8	453,760	478,723	-5.2	67,374	100,831	-33.2
KHYBER PAKHTUNKHWA	9,197,245	7,791,399	18.0	623,526	549,352	13.5	149,597	162,795	-8.1
BALUCHISTAN	1,437,572	1,489,375	-3.5	81,067	93,994	-13.8	9,143	9,348	-2.2
ISLAMABAD	560,817	505,510	10.9	24,529	26,602	-7.8	6,094	8,047	-24.3
PAKISTAN	45,238,753	41,076,563	10.1	2,171,064	2,102,268	3.3	609,795	687,185	-11.3
REPRODUCTIVE HEALTH CENTRES-A (RHS-A)									
PUNJAB	1,254,645	919,758	36.4	71,396	62,195	14.8	33,372	31,225	6.9
SINDH	734,956	636,729	15.4	46,690	47,827	-2.4	10,581	13,251	-20.1
KHYBER PAKHTUNKHWA	491,377	438,029	12.2	34,776	32,506	7.0	9,617	11,031	-12.8
BALUCHISTAN	80,473	77,864	3.4	4,600	5,470	-15.9	1,475	1,816	-18.8
ISLAMABAD	99,794	84,898	17.5	2,820	3,684	-23.5	946	943	0.3
PAKISTAN	2,661,245	2,157,278	23.4	160,282	151,682	5.7	55,991	58,266	-3.9
REPRODUCTIVE HEALTH CENTRES-B (RHS-B)									
PUNJAB	52,113	2,488	1994.6	6,388	892	616.1	24,516	2,800	775.6
SINDH	-	56,363	-100.0	80	1,705	-95.3	-	318	-100.0
KHYBER PAKHTUNKHWA	3,401	2,857	19.0	1,162	838	38.7	362	441	-17.9
BALUCHISTAN	1,000	1,360	-26.5	270	421	-35.9	61	73	-16.4
ISLAMABAD	13,900	11,500	20.9	525	550	-4.5	195	400	-51.3
PAKISTAN	70,414	74,568	-5.6	8,425	4,406	91.2	25,134	4,032	523.4
MOBILE SERVICE UNITS (MSU)									
PUNJAB	284,253	729,412	-61.0	16,065	48,326	-66.8	10,633	35,609	-70.1
SINDH	1,066,627	961,826	10.9	47,067	47,763	-1.5	9,953	13,576	-26.7
KHYBER PAKHTUNKHWA	372,993	341,764	9.1	23,919	24,863	-3.8	8,993	11,923	-24.6
BALUCHISTAN	274,452	271,651	1.0	14,755	17,558	-16.0	3,962	4,098	-3.3
ISLAMABAD	17,818	7,856	126.8	644	576	11.8	302	255	18.4
PAKISTAN	2,016,143	2,312,509	-12.8	102,450	139,086	-26.3	33,843	65,461	-48.3
PROVINCIAL LINE DEPARTMENTS (PLDs)									
PUNJAB	273,343	271,855	0.5	50,006	42,599	17.4	17,263	21,249	-18.8
SINDH	3,588	5,190	-30.9	500	1,109	-54.9	15	108	-86.1
KHYBER PAKHTUNKHWA	6,746	1,981	240.5	936	728	28.6	175	252	-30.6
BALUCHISTAN	58,066	46,288	25.4	3,560	4,072	-12.6	1,444	1,507	-4.2
ISLAMABAD	28,320	22,861	23.9	1,505	1,567	-4.0	765	1,105	-30.8
PAKISTAN	370,063	348,175	6.3	56,507	50,075	12.8	19,662	24,221	-18.8
REGISTER MEDICAL PRATICIONERS (RMPs)									
PUNJAB	1,405,824	1,065,697	31.9	47,259	42,658	10.8	13,434	10,987	22.3
SINDH	447,844	695,851	-35.6	22,597	34,677	-34.8	27	692	-96.1
KHYBER PAKHTUNKHWA	200,510	109,836	82.6	15,139	9,582	58.0	434	343	26.5
BALUCHISTAN	272,940	270,822	0.8	9,207	11,474	-19.8	-	-	
ISLAMABAD	128,139	118,544	8.1	11,644	10,972	6.1	6,413	9,851	-34.9
PAKISTAN	2,455,257	2,260,750	8.6	105,846	109,363	-3.2	20,308	21,873	-7.2
HAKEEMS & HOMOEOPATHS (H&H)									
PUNJAB	701,464	712,860	-1.6	25,174	22,666	11.1	-	-	0.0
SINDH	179,168	155,167	15.5	9,543	10,684	-10.7	-	-	0.0
KHYBER PAKHTUNKHWA	105,321	94,526	11.4	7,411	5,931	25.0	-	-	0.0
BALUCHISTAN	6,434	8,666	-25.8	584	769	-24.1	-	-	0.0
PAKISTAN	992,387	971,219	2.2	42,712	40,050	6.6	-	-	0.0
MALE MOBILIZER (MM)									
PUNJAB	11,813,558	10,705,633	10.3	328,677	320,279	2.6	-	-	0.0
SINDH	3,327,218	3,229,121	3.0	111,260	182,696	-39.1	95	-	0.0
KHYBER PAKHTUNKHWA	3,818,759	3,142,713	21.5	194,959	160,769	21.3	-	-	0.0
BALUCHISTAN	-	188	-100.0	-	63	-100.0	-	-	0.0
ISLAMABAD	238,298	233,504	2.1	215	360	-40.3	-	-	0.0
PAKISTAN	19,197,833	17,311,159	10.9	635,111	664,167	-4.4	95	-	0.0
FAMILY PLANNING ASSOCIATION PAK. (FPAP)	948,579	828,927	14.4	121,892	111,612	9.2	124,404	126,476	-1.6
SOCIAL MARKETING CONTRACEPTIVE (SMC)	112,921,984	81,186,210	39.1	2,957,104	2,771,836	6.7	303,723	292,366	3.9
MARIE STOPES SOCIETY	93,401	66,552	40.3	14,443	12,288	17.5	22,515	20,961	7.4
A.J.K.	233,243	248,323	-6.1	14,772	15,614	-5.4	5,413	4,590	17.9
GILGIT BALTISTAN (GB)	52,042	41,229	26.2	12,275	12,100	1.4	1,289	1,258	2.5
REGIONAL TRAINING INSTITUTES (RTIs)	22,981	35,295	-34.9	2,042	2,585	-21.0	747	2,282	-67.3
FATA	432,414	359,550	20.3	54,990	36,048	52.5	5,386	6,327	-14.9
TOTAL ALL OUTLETS	187,706,739	149,278,307	25.7	6,459,915	6,223,180	3.8	1,228,305	1,315,298	-6.6

CATEGORY OF SERVICE OUTLETS/ PROVINCE	INJECTABLE (Vials)			CON. SURGERY (Cases)			COUPLE YEARS OF PROTECTION		
	2012-13	2011-12	% CHANGE	2012-13	2011-12	% CHANGE	2012-13	2011-12	% CHANGE
11	12	12	14	15	16	17	18	18	20
FAMILY WELFARE CENTRES (FWC)									
PUNJAB	381,661	399,588	-4.5	-	-	0.0	1,623,024	1,710,107	-5.1
SINDH	278,922	296,893	-6.1	-	-	0.0	398,996	516,453	-22.7
KHYBER PAKHTUNKHWA	363,373	335,317	8.4	-	-	0.0	701,702	727,576	-3.6
BALUCHISTAN	21,609	22,407	-3.6	-	-	0.0	51,710	53,809	-3.9
ISLAMABAD	9,710	13,024	-25.4	-	-	0.0	28,801	36,053	-20.1
PAKISTAN	1,055,275	1,067,229	-1.1	-	-	0.0	2,804,233	3,043,998	-7.9
REPRODUCTIVE HEALTH CENTRES-A (RHS-A)									
PUNJAB	35,742	33,895	5.4	57,400	65,999	-13.0	854,923	951,588	-10.2
SINDH	32,202	33,924	-5.1	15,483	19,319	-19.9	245,228	302,261	-18.9
KHYBER PAKHTUNKHWA	24,089	25,598	-5.9	3,288	3,145	4.5	85,308	88,250	-3.3
BALUCHISTAN	4,380	4,516	-3.0	987	1,247	-20.9	19,242	23,752	-19.0
ISLAMABAD	1,583	1,745	-9.3	1,230	1,201	2.4	19,884	19,497	2.0
PAKISTAN	97,996	99,678	-1.7	78,388	90,911	-13.8	1,224,584	1,385,347	-11.6
REPRODUCTIVE HEALTH CENTRES-B (RHS-B)									
PUNJAB	11,910	1,389	757.5	9,142	14,110	-35.2	203,251	186,530	9.0
SINDH	-	6,158	-100.0	2,525	3,541	-28.7	31,568	47,112	-33.0
KHYBER PAKHTUNKHWA	470	729	-35.5	1,031	1,361	-24.2	14,350	18,778	-23.6
BALUCHISTAN	242	417	-42.0	96	130	-26.2	1,487	2,001	-25.7
ISLAMABAD	390	460	-15.2	245	313	-21.7	3,955	5,521	-28.4
PAKISTAN	13,012	9,153	42.2	13,039	19,455	-33.0	254,610	259,942	-2.1
MOBILE SERVICE UNITS (MSU)									
PUNJAB	10,256	32,193	-68.1	-	-	0.0	42,312	139,357	-69.6
SINDH	29,894	30,790	-2.9	-	-	0.0	51,359	63,538	-19.2
KHYBER PAKHTUNKHWA	20,616	22,526	-8.5	-	-	0.0	39,784	50,267	-20.9
BALUCHISTAN	8,690	10,060	-13.6	-	-	0.0	18,495	19,412	-4.7
ISLAMABAD	185	186	-0.5	-	-	0.0	1,261	1,023	23.3
PAKISTAN	69,641	95,755	-27.3	-	-	0.0	153,210	273,596	-44.0
PROVINCIAL LINE DEPARTMENTS (PLDs)									
PUNJAB	26,531	26,172	1.4	-	-	0.0	70,959	84,334	-15.9
SINDH	176	989	-82.2	-	-	0.0	146	686	-78.7
KHYBER PAKHTUNKHWA	50	43	16.3	-	-	0.0	732	953	-23.2
BALUCHISTAN	2,637	3,319	-20.5	-	-	0.0	6,222	6,531	-4.7
ISLAMABAD	2,150	2,503	-14.1	-	-	0.0	3,405	4,631	-26.5
PAKISTAN	31,544	33,026	-4.5	-	-	0.0	81,463	97,135	-16.1
REGISTER MEDICAL PRACTITIONERS (RMPs)									
PUNJAB	15,799	12,768	23.7	-	-	0.0	63,092	51,253	23.1
SINDH	990	2,805	-64.7	-	-	0.0	4,909	10,127	-51.5
KHYBER PAKHTUNKHWA	4,056	6,157	-34.1	-	-	0.0	4,732	3,833	23.4
BALUCHISTAN	597	630	-5.2	-	-	0.0	2,629	2,772	-5.2
ISLAMABAD	10,397	12,315	-15.6	-	-	0.0	26,191	38,496	-32.0
PAKISTAN	31,839	34,675	-8.2	-	-	0.0	101,553	106,481	-4.6
HAKHEELS & HOMOEOPATHS (H&H)									
PUNJAB	-	-	0.0	-	-	0.0	6,550	6,461	1.4
SINDH	645	-	0.0	-	-	0.0	2,009	1,790	12.3
KHYBER PAKHTUNKHWA	-	-	0.0	-	-	0.0	1,225	1,052	16.5
BALUCHISTAN	-	-	0.0	-	-	0.0	84	111	-25.0
PAKISTAN	645	-	0.0	-	-	0.0	9,868	9,415	4.8
MALE MOBILIZER (MM)									
PUNJAB	-	-	0.0	-	-	0.0	103,950	95,697	8.6
SINDH	10	-	0.0	-	-	0.0	30,858	34,604	-10.8
KHYBER PAKHTUNKHWA	-	-	0.0	-	-	0.0	39,516	32,542	21.4
BALUCHISTAN	-	-	0.0	-	-	0.0	0	6	-100.0
ISLAMABAD	-	195	0.0	-	-	0.0	1,669	1,685	-0.9
PAKISTAN	10	195	-94.9	-	-	0.0	175,994	164,533	7.0
FAMILY PLANNING ASSOCIATION OP PAK.(FPAP)	445,914	358,860	24.3	4,347	3,895	11.6	593,648	576,323	3.0
SOCIAL MARKETTING OF CONTRACEPTIVES	1,100,270	945,477	16.4	7,687	5,043	52.4	2,360,493	2,023,996	16.6
MARIE STOPES SOCIETY	5,257	6,068	-13.4	-	-	0.0	81,465	75,858	7.4
A.J.K.	15,432	16,937	-8.9	354	278	27.3	29,061	25,693	13.1
GILGIT BALTISTAN (GB)	17,075	17,679	-3.4	-	-	0.0	9,106	9,032	0.8
REGIONAL TRAINING INSTITUTES (RTIs)	2,083	2,461	-15.4	27	-	0.0	3,664	8,897	-58.8
FATA	25,244	18,153	39.1	-	-	0.0	30,569	30,675	-0.3
TOTAL ALL OUTLETS	2,911,237	2,705,346	7.6	103,842	119,582	-13.2	7,913,520	8,090,921	-2.2

Table-6

OUTLET WISE AVERAGE PERFORMANCE OF CONTRACEPTIVES DURING 2012-13

Category of Service Outlets/Province/Sector	NO. OF OUTLETS	CONDOM (Units)		ORAL PILL (Cycles)		IUD (Insertions)		INJECTABLE (Vials)		CON SURGERY (Cases)		CYP	
		2012-13	Per Outlet	2012-13	Per Outlet	2012-13	Per Outlet	2012-13	Per Outlet	2012-13	Per Outlet	2012-13	Per Outlet
		FWCs											
PUNJAB	1500	22933272	15289	988182	659	377587	252	381661	254	0	0	1623024	1082
SINDH	628	11109847	17691	453760	723	67374	107	278922	444	0	0	398996	635
KHYBER PAKHTUNKHWA	532	9197245	17288	623526	1172	149597	281	363373	683	0	0	701702	1319
BALUCHISTAN	155	1437572	9275	81067	523	9143	59	21609	139	0	0	51710	334
ISLAMABAD	29	560817	19339	24529	846	6094	210	9710	335	0	0	28801	993
PAKISTAN	2844	45238753	15907	2171064	763	609795	214	1055275	371	0	0	2804233	986
RHS-A CENTRES													
PUNJAB	89	1254645	14097	71396	802	33372	375	35742	402	57400	645	854923	9606
SINDH	75	734956	9799	46690	623	10581	141	32202	429	15483	206	245228	3270
KHYBER PAKHTUNKHWA	26	491377	18899	34776	1338	9617	370	24089	927	3288	126	85308	3281
BALUCHISTAN	6	80473	13412	4600	767	1475	246	4380	730	987	165	19242	3207
ISLAMABAD	3	99794	33265	2820	940	946	315	1583	528	1230	410	19884	6628
PAKISTAN	199	2661245	13373	160282	805	55991	281	97996	492	78388	394	1224584	6154
MSUs													
PUNJAB	117	284253	2430	16065	137	10633	91	10256	88	0	0	42312	362
SINDH	72	1066627	14814	47067	654	9953	138	29894	415	0	0	51359	713
KHYBER PAKHTUNKHWA	30	372993	12433	23919	797	8993	300	20616	687	0	0	39784	1326
BALUCHISTAN	40	274452	6861	14755	369	3962	99	8690	217	0	0	18495	462
ISLAMABAD	1	17818	17818	644	644	302	302	185	185	0	0	1261	1261
PAKISTAN	260	2016143	7754	102450	394	33843	130	69641	268	0	0	153210	589

Table-7

PERCENTAGE DISTRIBUTION OF TOTAL CYP BY SOURCE
DURING THE YEAR 2012-13

PROVINCE/SECTOR	CYP	% AGE
PUNJAB	2,968,060	37.51
SINDH	765,073	9.67
KHYBER PAKHTUNKHWA	887,349	11.21
BALUCHISTAN	99,867	1.26
ISLAMABAD	85,164	1.08
FATA	30,569	0.39
AJK	29,061	0.37
G.B.	9,106	0.12
RTIs	3,665	0.05
NGO (FPAP)	593,648	7.50
MARIE STOPES	81,465	1.03
SMC	2,360,493	29.83
TOTAL	7,913,520	100.0

Table-8 PERCENTAGE DISTRIBUTION OF TOTALE CYP BY SERVICE OUTLET DURING THE YEAR 2012-13

OUTLETS/SECTOR	CYP	% AGE
FWC	2,804,233	35.44
RHS-A	1,224,584	15.47
RHS-B	254,610	3.22
MSU	153,210	1.94
PLDs	81,463	1.03
RMPs	101,553	1.28
H&H	9,868	0.12
MM	175,993	2.22
FATA	30,569	0.39
AJK	29,061	0.37
G.B.	9,106	0.12
RTIs	3,664	0.05
NGO (FPAP)	593,648	7.50
MARIE STOPES	81,465	1.03
SMC	2,360,493	29.83
TOTAL	7,913,520	100.00

Table-9 PERCENTAGE DISTRIBUTION OF TOTAL CYP BY METHODS DURING THE YEAR 2012-13

METHODS	CYP	%AGE
CONDOM (Units)	1,303,519	16.47
ORAL PILL (Cycles)	430,661	5.44
IUD (Insertions)	4,299,068	54.33
INJECTABLE (Vials)	582,247	7.36
CON. SURGERY (Cases)	1,298,025	16.40
TOTAL	7,913,520	100.00

Table-10 PROVINCE WISE FAMILY PLANNING AND MCH SERVICES DELIVERY FOR THE YEAR 2012-13

PROVINCE/ FEDERAL TERRITORY	F.P CLIENTS	MOTHER CARE (Number of Clients)			GENERAL AILMENTS (Number of patients)			MCH	ALL
		Pre-Natal	Post-Natal	Total	Children	Adults	Total	CLIENTS (Col 5+8)	CLIENTS (Col.2+5+8)
PUNJAB	2,654,532	172,421	105,885	278,306	204,115	630,608	834,723	1,113,029	3,767,561
SINDH	2,026,872	181,013	152,109	333,122	908,878	0	908,878	1,242,000	3,268,872
KHYBER PAKHTUNKHWA	1,000,607	83,561	56,179	139,740	188,370	471,904	660,274	800,014	1,800,621
BALUCHISTAN	170,664	20,436	15,696	36,132	39,177	154,183	193,360	229,492	400,156
ISLAMABAD	512,091	6,166	4,275	10,441	15,913	33,212	49,125	59,566	571,657
AJK	61,401	12,329	5,370	17,699	10,937	32,170	43,107	60,806	122,207
G.B.	38,757	3,967	4,495	8,462	7,691	14,161	21,852	30,314	69,071
FATA	107,943	23,400	16,291	39,691	18,675	35,249	53,924	93,615	201,558
TOTAL	6,572,867	503,293	360,300	863,593	1,393,756	1,371,487	2,765,243	3,628,836	10,201,703

Table-11 CONTRACEPTIVE PREVALENCE RATE BY MODERN METHODS FOR 2012-13

		(Fig. in million)							
PROVINCE		MWRA**	CONDOM	ORAL PILL	IUD	INJECTABLE	C.S	Total	
PUNJAB	Users	16.028	0.387	0.118	1.540	0.096	0.800	2.942	
	CPR%		2.416	0.736	9.609	0.601	4.993	18.356	
SINDH	Users	7.053	0.169	0.053	0.362	0.069	0.309	0.961	
	CPR%		2.392	0.754	5.126	0.972	4.375	13.619	
KPK	Users	3.966	0.142	0.069	0.334	0.083	0.061	0.689	
	CPR%		3.580	1.749	8.424	2.081	1.540	17.374	
BALUCHISTAN	Users	1.519	0.021	0.009	0.051	0.008	0.016	0.105	
	CPR%		1.403	0.578	3.366	0.502	1.056	6.905	
ISLAMABAD	Users	0.224	0.011	0.003	0.051	0.005	0.016	0.086	
	CPR%		4.853	1.438	22.833	2.180	7.150	38.455	
PROVINCIAL TOTAL	Users	28.790	0.730	0.252	2.338	0.260	1.202	4.783	
	CPR%		2.54	0.88	8.12	0.90	4.18	16.61	
SMC + Others*	Users	0	1.15	0.24	1.03	0.32	0.15	2.90	
	CPR%								
PAKISTAN	Users	29.496	1.877	0.497	3.366	0.582	1.357	7.679	
	CPR%		6.364	1.685	11.411	1.974	4.600	26.034	

Assumptions:

- Carry-over effect of IUD is taken from 2008-09, performance of current year 100% and each next year 20% less.
- Carry-over effect of CS cases is taken from 1999-2000. Current year performance is 100% and each next year is 5% less.
- The provincial CPR is calculated on the basis of performance of PPWDs service delivery outlets only.

* Others include FPAP, Mari Stops Society, AJK, FATA, GB and RTIs.

**Married Women of Reproductive age (MWRA) is taken 16% of total population of Pakistan in Economic Survey, 2013.

GENESIS OF THE REPORT

The Annual Contraceptive Performance Report owes to continuous efforts of the following PBS Officers:

1. Dr. Bahrawar Jan, Deputy Director General
2. Mr. Ghulam Muhammad, Director
3. Ms. Rizwana Siddique, Chief Statistical Officer
4. Syed Adil Hashmi, Statistical Officer
5. Mr. Arshad Ahmad Khan, Research Supervisor
6. Mr. Mahmood-ul-Hasan, Statistical Investigator
7. Mr. Ghulam Kibria , Data Processing Assistant