

## NAYA QADAM COVID-19 PANDEMIC RESPONSE

Pathfinder International is implementing the Bill and Melinda Gates Foundation investment, titled: *Naya Qadam: Increase Post-Pregnancy Family Planning Through Expanding Public and Private Sector Service with a Focus on Young Women in Pakistan*. The Naya Qadam (NQ) Project was launched in May 2018 in six districts across Sindh and Punjab with five development partners: *Ipas, Greenstar Social Marketing (GSM), National Committee of Maternal and Neonatal Health (NCMNH), Aahung, and Shirkat Gah-Women's Resource Centre (SGAH)*.

This document outlines Naya Qadam's Response to the COVID-19 Global Pandemic and emergence of the outbreak in Pakistan. The overarching Response is based on the following key assumptions and strategic principles.

### KEY UNDERLYING ASSUMPTIONS

- ✓ The COVID-19 Pandemic is likely to restrict all physical movement during the period April to June 2020.
- ✓ Restricted field movement is likely to improve but it is unlikely that the operational landscape will normalize at the end of 3 months.
- ✓ The pandemic is likely to severely impede physical access to facilities for women and girls.

### STRATEGIC PRINCIPLES

- ✓ Response strategies must align with the key NQ objectives, and planned strategies for Year 3.
- ✓ Short-term response strategies must be formulated with a view towards long term positioning, feasibility and sustainability of approach.
- ✓ Focus on long-term shift towards virtual program management and field operations through application of available technology.

### NAYA QADAM COVID-19 RESPONSE STRATEGIES

In addition to adopting response strategies to ensure strong management, the NQ team used the Social-Ecological Framework to identify risks to project strategies at four social-ecological levels. Program Responses were then described for each level for ensuring woman-centered PpFP service delivery in the currently evolving emergency context.

### NAYA QADAM PROJECT CORE STRATEGIES

1. Improve PpFP policies, and create an enabling environment for of PpFP

**Program Response 1**  
**Ensure Policy Relevance and Support**

2. Improving skills of service providers for provision of quality PpFP services.

**Program Response 2**  
**Ensure continued PpFP services**

3. Create demand and promote PpFP through culturally congruent communication.

**Program Response 3:**  
**Build on salience of pandemic to promote PpFP**

SOCIETAL	1. Support public sector for developing policy for PpFP in pandemic setting.	3. Assess Commodity (FP, MVA, PPE) security and ensure continued supplies.	<b>7. NQ COVID-19 Response Communication Campaign Level 1</b> <ul style="list-style-type: none"> <li>✓ Mass media public service messaging</li> </ul> <b>Level 1 &amp; 2</b> <ul style="list-style-type: none"> <li>✓ Community &amp; Facility based signposting.</li> <li>✓ Public announcements through community hubs.</li> <li>✓ Mobile public announcements</li> </ul> <b>Level 3 &amp; 4</b> <ul style="list-style-type: none"> <li>✓ Digital signposting and AV narratives through mobile &amp; online applications, and local cable and radio.</li> <li>✓ SMS based awareness campaign.</li> </ul>
COMMUNITY	2. Support District officials in implementation of PpFP policy in pandemic setting.	4. Strengthen community-based provision of PpFP through <i>NQ Community Response Clusters</i>	
HOUSEHOLD		5. Establish virtual groups to link NQ youth, LHWs, and service providers in each response cluster.	
INDIVIDUAL		6. Introduce Digital Supportive Supervision for service provider training and mentoring.	

**PROGRAM RESPONSE 1**

**ENSURE POLICY RELEVANCE AND SUPPORT FOR PpFP SERVICES DURING THE PANDEMIC**

A clear actionable policy directive regarding PpFP in the current Pandemic setting (or other emergency settings) does not currently exist. While Sindh has circulated general policy guidelines, there is a need for a comprehensive policy response to the current challenge.

NQ will coordinate with the relevant government officials in both Sindh and Punjab province to ensure policy support for PpFP during the COVID-19 Pandemic. Towards that end, NQ will undertake the following.

✓ **Over the short-term**

Under the stewardship of CIP Sindh, and IRMNCH Program Punjab, support the articulation of comprehensive policy guidelines for provision of PpFP services in epidemic/pandemic and emergency settings.

✓ **Over the longer term**

Advocate for formal inclusion of PpFP in Emergency Settings as a section in the following:

- PpFP policy for Sindh and Punjab.
- National and Provincial Disaster Management Policies.
- Provision of FP commodities for PpFP in emergency settings.

**PROGRAM RESPONSE 2**

**ENSURE CONTINUED DELIVERY OF HIGH QUALITY PpFP SERVICES**

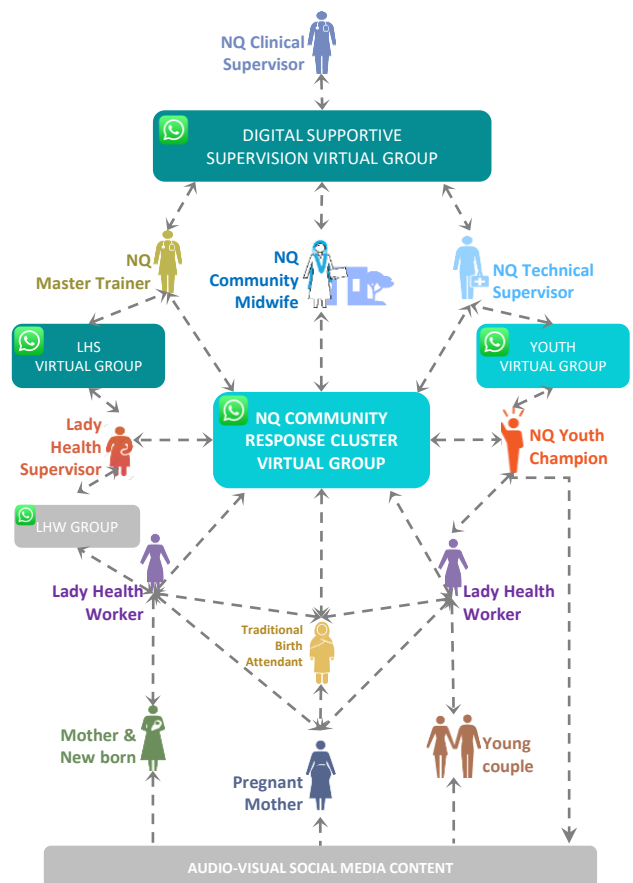
The COVID-19 Pandemic has the potential to severely impede PpFP service delivery for women due to several threats:

- Restricted mobility of people, particularly for women.
- Strain on the health system resulting in facility-level resource constraints and/or closure of service delivery points.
- Disruption of supply chains due to adverse impact on manufacturing, financing and distribution of commodities and supplies to NQ Service Delivery Points (SDPs).

To respond to these threats, following initiatives will adapt NQ strategies to the operating environment.

1. **Ensure commodity security** through assessment of NQ SDP stocks, and necessary mitigation response, such as inter-location and/or procurement of commodities.
2. **Strengthen community-based provision of PpFP services** through CMW-led *NQ Community Response Clusters*. Each cluster will be centered around a NQ trained community-based service provider and will include NQ district staff, NQ Youth Champions, LHWs, LHSs, and local traditional birth attendants. Please see Figure 1 for a schematic of a response cluster.
3. **Establish Virtual Group for each response cluster**, managed by NQ youth champions, and linking NQ staff, LHWs, traditional birth attendants, and service providers in each response cluster for effective communication, coordination, and identification of women in need of referrals and services (Figure 1).
4. **Develop and introduce Digital Supportive Supervision** for service provider training and mentoring by leveraging technology, under Clinical Supervisor’s lead.
5. **Strengthening NQ Public and Private sector SDPs** to respond to COVID 19 through facility-based signposting, provision of information to SDP staff using virtual platforms, and nomination of an SDP staff as on-site mentor.

**Figure 1: NQ Community Response Cluster and Virtual Network Structure for identifying & connecting women with community-based NQ service providers.**



**PROGRAM RESPONSE 3**

**BUILD ON SOCIAL SALIENCE OF COVID-19 PANDEMIC TO PROMOTE PFP THROUGH MULTI-LEVEL COMMUNICATION CAMPAIGN**

Using community-based interpersonal communication is no longer feasible nor a socially responsible approach in the context of social distancing and lockdowns across the country.

Guided by the *NQ COVID-19 Response Communication Framework* presented in Figure 2, the campaign focus on specific psychosocial constructs at four different social-ecological to ensure that communication messages reach primary audience. Please see Figure 2.

Figure 2: NQ COVID-9 Response Communication Framework



**KEY MESSAGES**

- ✓ SOURCE FRAMEWORK: National Narrative on Family Planning
- ✓ PRIMARY THEME: COVID19 outbreak threat, containment and prevention.
- ✓ SUB-THEMES: Social Responsibility to safeguard own self, family, and community; Safeguarding pregnant mothers and newborns with respect to health, and food security in the post birth period.
- ✓ CONCLUDING THEME: Link to information on COVID-19, PpFP, and NQ service providers and delivery points.

**MULTI-LEVEL, MULTI-CHANNEL COMMUNICATION PLAN**

	<b>Audience</b>	<b>Psychosocial targets</b>	<b>Behavioral Objective</b>	<b>Communication Channels</b>
<b>SOCIETAL</b>	Opinion Leaders Movement Builders Policy Makers	<ul style="list-style-type: none"> <li>✓ Influence leadership</li> <li>✓ Cultural identity</li> </ul>	Endorse salience of PFP decisions for social well being and NQ messages.	<ul style="list-style-type: none"> <li>✓ Mass Media Joint-Public Service Messages by Opinion Leader and Federal Ministry of Health</li> </ul>
<b>COMMUNITY</b>	Community Influencers and gatekeepers	<ul style="list-style-type: none"> <li>✓ Salience</li> <li>✓ Shared values</li> <li>✓ Collective efficacy</li> <li>✓ Gender norms</li> <li>✓ Stigma</li> </ul>	Community leaders encourage heads of household to discuss health planning for women and children with family.	<ul style="list-style-type: none"> <li>✓ Community and Facility sign posting</li> <li>✓ Public service community announcements by local champions (e.g. Imam, teacher, Councilor, DHO, MPA), delivered through                             <ul style="list-style-type: none"> <li>▪ Static community hubs such as Masaajid.</li> <li>▪ Mobile branded vehicles in local neighborhoods</li> </ul> </li> </ul>
<b>HOUSEHOLD</b>	Husbands & Mothers-in-Law Service providers	<ul style="list-style-type: none"> <li>✓ Injunctive norms,</li> <li>✓ Descriptive norms,</li> <li>✓ Inter-spousal communication</li> </ul>	Husbands discuss using family planning with wives for safeguarding health of the family.	<ul style="list-style-type: none"> <li>✓ Community and Facility sign posting</li> <li>✓ Public service community announcements</li> <li>✓ Audio-video messaging through                             <ul style="list-style-type: none"> <li>▪ Local Radio and Cable Television</li> <li>▪ Mobile/Online audio-video content</li> </ul> </li> <li>✓ SMS-based social marketing</li> <li>✓ Helpline &amp; Service providers</li> </ul>
<b>INDIVIDUAL</b>	Women & Girls. Primary segment: Currently in their third trimester expected to deliver in the response period	<ul style="list-style-type: none"> <li>✓ Knowledge</li> <li>✓ Instrumental attitude (utility, safety, responsibility, perceived threat/benefits),</li> <li>✓ Self-efficacy</li> <li>✓ Personal Agency</li> </ul>	Increased intention and adoption of PpFP from community service provider.	<ul style="list-style-type: none"> <li>✓ <b>Pre-Contemplation to Contemplation</b> Peers, current FP Users, LHW, Youth, Champions, Helpline &amp; Service providers, digital and mass media content.</li> <li>✓ <b>Contemplation to Intention for PFP</b> Husband, Mother-in-Law</li> <li>✓ <b>Intention to Adoption of PFP</b> LHW, Helpline, NQ Service Provider</li> </ul>

## MANAGEMENT RESPONSE

Pathfinder International maintains a low risk threshold for response triggers to the pandemic in Pakistan. The organization started planning for lock down on 13 Mar 2020 and initiated self-isolation and remote work from home for its staff on 17 Mar 2020. As the organization enters its third week of lock down, the team has completed contingency planning for continuing internal and external operations, adapting well to a virtual working environment with a Rhythm of Business that is regular and comfortable for them. Over the next three months (Apr to Jun 2020) the NQ team will adopt the following overarching response strategies to ensure operational effectiveness and alignment with the underlying project implementation plan.

### 1. STRUCTURAL ORGANIZATION OF VIRTUAL SPACE TO MAINTAIN RHYTHM OF BUSINESS DURING LOCK DOWN.

The use of virtual space is currently unstructured and not conducive to efficient flow of information. Building on existing strengths, Pathfinder International has established a cascade of hierarchical virtual groups capable of facilitating rapid, seamless communication across levels (Figure 3). NQ will adopt the following overall Rhythm of Business for an extended period during the pandemic.

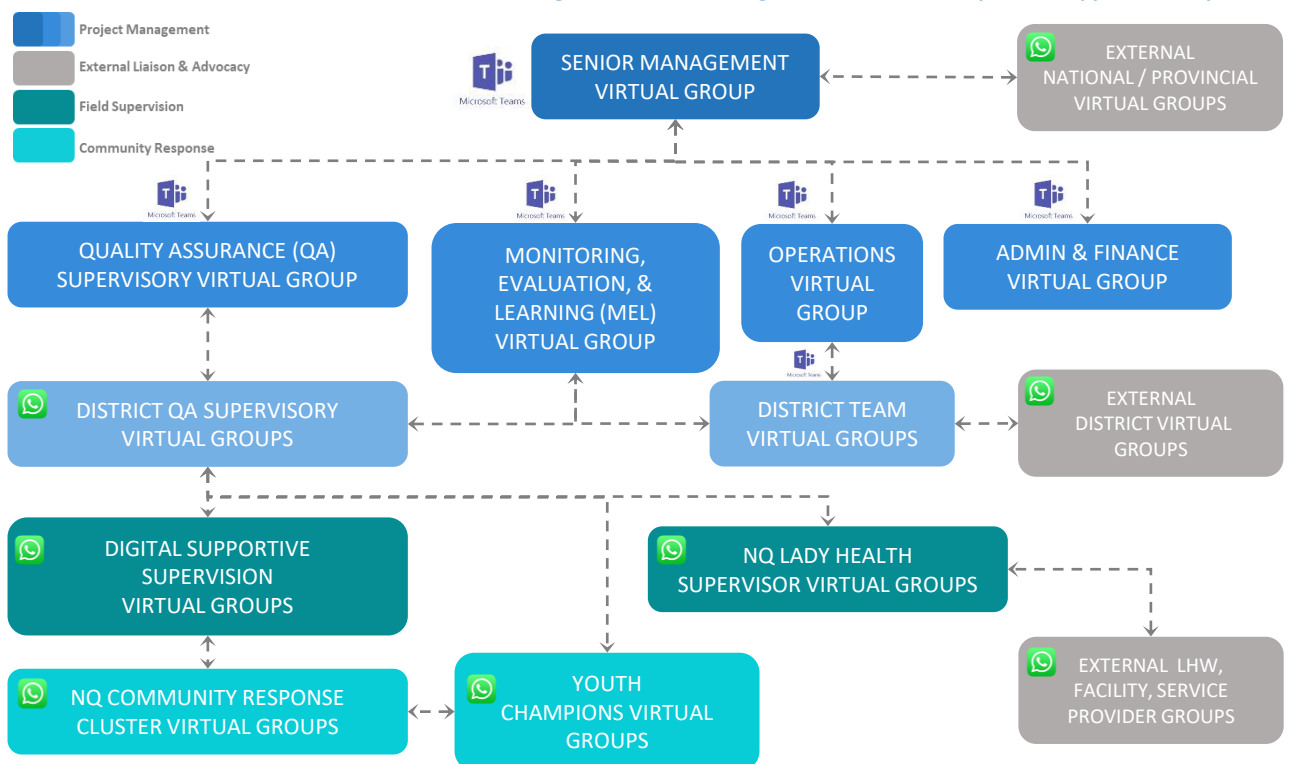
- ✓ Senior Management Morning Meeting: To review progress made by all functional leads towards planned outputs and discuss business unit and individual challenges.
- ✓ Business Unit Daily Meeting: Led by each business unit lead with their respective teams under the same format as follow-on meetings.
- ✓ Need-based online meetings between relevant staff for coordination and communication.
- ✓ End-of-Day documentation of daily progress in shared online document by functional leads for review next day.

### 2. FOCUS INTERNALLY ON SYSTEM STRENGTHENING FOR A NEW NORMAL OVER THE LONGER TERM

Pathfinder International is cognizant of the long-term ramifications of the COVID-19 Pandemic and has commenced planning for the “New Normal” that will emerge from this event.

- ✓ The NQ project had planned to undertake a rigorous systems review during Year 3 for strengthening operations and long-term project impact. The NQ project will maintain an inward focus on planned internal reviews of current systems, policies, and procedures during the immediate lock down period, with a view to adapting these to the evolving operating context.
- ✓ The NQ MEL team will focus on adapting the NQ MIS for continued performance tracking, developing plans for assessment of response strategies, and writing research papers using project data.

**Figure 3: Structural Organization of Virtual Space to support NQ Objectives**



## GENDER STRATEGY

Pathfinder International has ensured that NQ project’s response strategies during the COVID-19 Pandemic continue to remain gender sensitive. The strategies consider and attempt to address challenges due to unfavorable gender norms and cultural mores for responding to women’s needs. The overarching focus of the NQ COVID-19 response is to enhance personal agency among women at individual and collective levels. The gender strategy, therefore, has been operationalized at different social-ecological levels for creating an enabling environment within which women are able to exercise their agency for making informed choices related to PpFP. This is summarized in the overleaf schematic.

### SAFEGUARDING AND SUPPORTING NQ STAFF AND SERVICE PROVIDERS

There are systemic barriers to information and resources for women and girls in NQ communities. These barriers are driven by deeply rooted unfavorable cultural mores and gender norms which limit women’s access to information and services, curtailing their agency, and restricting women’s mobility in social spaces.

The NQ Project is a system intervention “For Women, By Women”. While Pathfinder International strategizes to respond to the impact that gender norms will have on women’s ability to access services at NQ SDPs during the Pandemic, we also remain cognizant of the fact that women who work and deliver services in NQ project, including staff and service providers, are similarly vulnerable during the Pandemic by virtue of their gender. These risks include:

- ✓ Restrictions on mobility of NQ Technical Supervisors, Master Trainers, and Youth Champions.
- ✓ Increased vulnerability to COVID-19 infection for service providers, particularly CMWs and LHWs who are working in the field
- ✓ Increased vulnerability to domestic violence during lock-down and work from home for NQ project staff, supervisors, service providers, and youth champions.

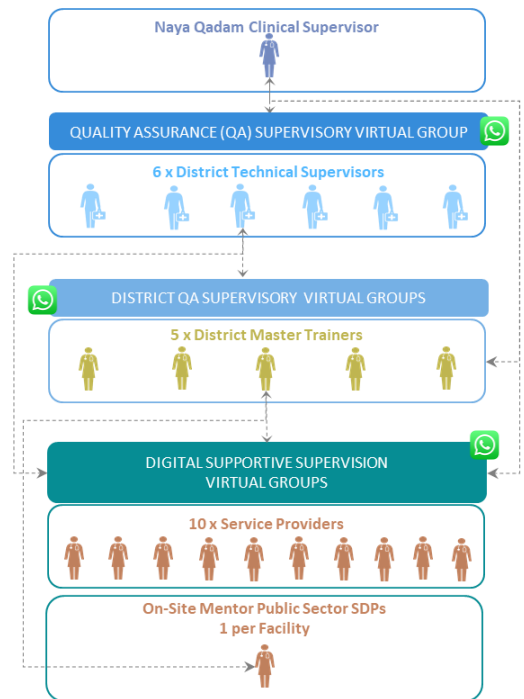
## DIGITAL SUPPORTIVE SUPERVISION

To support the women of NQ project, gender response strategies have been built into the overall program response to the Pandemic. To ensure that avenues remain open for support and communication during the lock down period, NQ will continue to train, supervise, and support NQ staff, service providers, and women field workers using digital technology (please see Program Response 2). Specifically, the NQ project will introduce Digital Supportive Supervision (DSS). This will be launched using existing technological platforms and subsequently developed as a digital solution/application encompassing four Quality Assurance (QA) domains: Training, Supportive supervision and feedback, Mentoring, and Quality technical assistance. The DSS will incorporate the following gender strategies in the first three functional domains of the system:

- 1. Training and capacity building of staff, service providers, and field workers**  
A module on Gender in COVID-19 Training Package consisting of two sections:
  - ✓ Provision of gender sensitive social support and health services
  - ✓ Accessing social support services for safeguarding and protection from domestic violence
- 2. Supportive supervision for undertaking work planning and risk mitigation**
  - ✓ Supervisors will routinely screen staff and service providers for vulnerability or exposure to domestic violence and provide support as per established protocols.
- 3. Mentoring and social support**
  - ✓ DSS will link individual women working as NQ staff, and NQ service providers with clinical supervisory mentors. Mentors will be trained and positioned as social support buddies to allow for safe communication and

The figure on the right shows the actors in the DSS cascade.

**Figure 4: NQ Digital Supportive Supervision Cascade**



**GENDER STRATEGY**

Naya Qadam’s Gender Response has been embedded within the overall response strategies. These are summarized and described in the matrix below for each social-ecological level to address specific challenges for the operating context.

	Challenge	Gender Response Strategy	Application & Tactics
<b>SOCIETAL</b>	<ul style="list-style-type: none"> <li>✓ Lack of social salience of FP during the Pandemic</li> <li>✓ Lack of gender sensitive health services.</li> </ul>	<ul style="list-style-type: none"> <li>✓ Build on the social salience of the Pandemic to promote shared values for safeguarding women and children during the Pandemic.</li> <li>✓ Adopt a “Services For Women, By Women” approach to increase availability of gender services PpFP services for women.</li> </ul>	<ul style="list-style-type: none"> <li>✓ Mass media public service messaging to create social salience of FP and PpFP during the Pandemic.</li> <li>✓ The NQ Response is managed and delivered by a cohort of skilled staff and service providers who are all women (Figures 1 and 2)</li> <li>✓ All staff and service providers are trained in gender sensitivity, and gender-based risks to women.</li> </ul>
<b>COMMUNITY</b>	<ul style="list-style-type: none"> <li>✓ Restrictions on women’s mobility and access to community spaces.</li> <li>✓ Gender norms limiting women’s access to community-level communication channels.</li> <li>✓ Disruption in services further limiting access for women during the Pandemic.</li> <li>✓ Cultural sensitivity of FP and PpFP messages.</li> </ul>	<ul style="list-style-type: none"> <li>✓ Bring services closer to women.</li> <li>✓ Create, sustain and expand a community-wide referral network of key sources of information for women for connecting women with services.</li> <li>✓ Screen all women receiving services for intimate partner violence (IPV) and link to public sector support services.</li> <li>✓ Influence community level gender norms regarding women’s rights and positioning at household level and importance of joint-decision making.</li> <li>✓ Build on social salience of the Pandemic and embed FP messages in the response.</li> </ul>	<ul style="list-style-type: none"> <li>✓ Delivering services through locally-based Community Midwives, and Lady Health Workers (LHWs).</li> <li>✓ Create a community-wide network of LHWs and their supervisors (LHSs), traditional birth attendants (TBA), NQ Youth Champions, and NQ project staff for identifying and connecting women with services.</li> <li>✓ Training all points of contact for women in screening and counseling for IPV and referral linkages with support services for victims.</li> <li>✓ Targeted multi channel communication aimed at influencing community gatekeepers to promote inter-spousal communication for safeguarding health.</li> </ul>
<b>HOUSEHOLD</b>	<ul style="list-style-type: none"> <li>✓ Conservational patriarchal cultural mores which restrict autonomy and agency among women.</li> <li>✓ Increased risk of intimate partner violence (IPV) during lockdown.</li> </ul>	<ul style="list-style-type: none"> <li>✓ Build on social salience of the Pandemic and embed gender sensitive FP and messages in Pandemic response messages for men.</li> <li>✓ Influence key referents of women at the household level (husbands and mothers in law) regarding gender norms, and women’s role in the family to promote inter-spousal communication for FP and PpFP.</li> </ul>	<ul style="list-style-type: none"> <li>✓ Targeted multi channel communication aimed at household influencers (husband &amp; mother-in-law) to specifically promote inter-spousal communication.</li> </ul>
<b>INDIVIDUAL</b>	<p>Women’s limited agency in</p> <ul style="list-style-type: none"> <li>✓ Accessing information, particularly through mobile and digital platforms</li> <li>✓ Accessing household finances</li> <li>✓ Decision-making</li> </ul>	<ul style="list-style-type: none"> <li>✓ Mobilize and strengthen bi-directional flow of information among primary sources of information for women at the community level.</li> <li>✓ Sensitize women’s information sources on gender sensitivity</li> <li>✓ Linking women with information and services using a mix of on-ground and virtual communication channels.</li> <li>✓ Focus on favorably influencing women’s knowledge, attitudes, and agency for adopting FP and PpFP.</li> </ul>	<ul style="list-style-type: none"> <li>✓ Establishing a women-led Community Response Cluster.</li> <li>✓ Targeted multi channel, multi level gender sensitive communication aimed at increasing the flow of information to women regarding FP, PpFP, IPV, COVID-19, and access to health, social and protective services.</li> <li>✓ Gender sensitization of gatekeepers, husbands, mothers in law, service providers, and referral sources.</li> <li>✓ Engagement of Youth Champions to mobilize and engage young people through mobile, and online social media.</li> </ul>