



User/Beneficiary Satisfaction Survey

(PPR, PMIFL, LACIP-I and HRE)

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List of Abbreviations

AJK	Azad Jammu Kashmir
BHU	Basic Health Unit
CHC	Community Health Center
CMW	Community Mid Wives
CO	Community Organization
CPI	Community Physical Infrastructure
DAD	Delay Action Dam
D.I.K	Dera Ismail Khan
DPM	Disaster Preparedness Measures
FA	Financing Agreements
FATA	Federally Administered Tribal Areas
FGD	Focused Group Discussion
GB	Gilgit Baltistan
GM-MER	General Manager, Monitoring Evaluation and Research
HRE	Hydropower and Renewable Energy
IAUP	Integrated Area Up -graduation Project
IFAD	International Fund for Agricultural Development
IP	Implementation Plan
KfW	Development Bank of Germany
KII	Key Informant Interview
KM	Kilometer
KP	Khyber Pakhtunkhwa
LACIP	Livelihood Support & Promotion of Small Community Infrastructure Project
LEP	Livelihood Enhancement & Protection
LHV	Lady Health Visitor

LHW	Lady Health Worker
LOC	Level of Confidence
LPG	Liquid Petroleum Gas
LSO	Local Support Organization
M&E	Monitoring & Evaluation
MHP	Micro & Mini Hydro Power Plants
MOE	Margin of Error
NRSP	National Rural Support Programme
OECD	Organization for Economic Co-operation & Development
PKR	Pakistani Rupee
PMIFL	Prime Minister's Interest Free Loan
PO	Partner Organization
PPAF	Pakistan Poverty Alleviation Fund
PPR	Program for Poverty Reduction
RHC	Rural Health Center
SDPI	Sustainable Development Policy Institute
SLS	Solar Lighting Systems
SPSS	Statistical Package for Social Sciences
SRF	Statistics for Results Facility
TV	Television
UC	Union Council
VDMC	Village Disaster Mitigation Committees
VO	Village Organization
WAPDA	Water & Power Development Authority
WGI	Water Governance Initiative

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Executive Summary

This study is aimed to conduct the user/beneficiary¹ satisfaction survey to assess the value of interventions as perceived by the users/beneficiaries of various programs implemented by the Pakistan Poverty Alleviation Fund (PPAF) in selected districts of Khyber Pakhtunkhwa (KP) and Balochistan. The study assessed the satisfaction of four programs, namely;

- Programme for Poverty Reduction (PPR)
- Livelihood Support & Promotion of Small Community Infrastructure Project (LACIP-I)
- Development of Hydropower & Renewable Energy Project in Khyber-Pakhtunkhwa Province (HRE) and
- Prime Minister's Interest Free Loan (PMIFL)

The socioeconomic profile of beneficiaries showed that majority of the respondents (53.7%, n=2,334) never went to school; only 11% were primary pass while another 11% were matriculate. Regarding the marital status of respondents, 86.2% of respondents were married. With regard to the occupation of the respondents, 33.9% of respondents were housewives, 14.3% were providing services for living and 13.4% were farmers. Rest of the respondents were associated with combination of livestock, fisheries, government services etc. Regarding the household's income per month, 25.7% households were falling in the range of PKR 0-5,000, 32.1% were in the range of PKR 5,001-10,000 while 21.4% were in the range of PKR 10,001-15,000. The income data clearly shows that vast majority of the respondent households belong to the lower income bracket. 92.7% respondent households had their own accommodation while 4.6% were living on rented accommodation.

Programme for Poverty Reduction (PPR)

The programme has a total budget of 40 million EUR financed by the Government of Italy (GoI) through the Directorate General for Development Cooperation (DGCS) and managed by Italian Agency for Development Cooperation (AICS). The programme is being implemented in 14 districts in Balochistan (Gwadar, Awaran, Kech, Panjgur, Lasbela, Killa Abdullah, Killa Saifullah, Pishin and Zhob) and Khyber Pakhtunkhwa (Upper Dir, Lower Dir, Swat, Chitral and Bajur). Initially, it was a three years programme (ending September 12, 2016), which was extended for two more years (ending September 12, 2018). Recently, due to late receipt of 4th Instalment from the donor, the programme has been further extended till 31st December 2020. This program particularly focused on the most vulnerable and underserved areas which suffer from extreme poverty, as well as face severe security issues. The specific objective of the program is to establish a social and productive infrastructure system and also to establish effective and sustainable social safety nets.

¹ As per ToRs, users and beneficiaries have been considered for the study

This programme had multiple components. Social Mobilization (SM) was successfully carried out to form and strengthen community institutions with the focus on women's inclusion and participation. On an average, almost 92% of the beneficiaries reported their active participation in community activities (directly or indirectly) as a result to social mobilization. Beneficiaries highly regarded the capacity building of Social Organizers (SOs) which remained fruitful in understanding and dealing with local issues and challenges. Community Management Skills Training (CMST), Leadership Management Skills Training (LMST) and Women Leadership Training were among the maximum number of trainings obtained by members of the community institutions (CIs). The survey found that women's role in community development improved after the training under social mobilization component. On average across all the districts, 96% of the women beneficiaries regarded trainings as helpful in improving their management and leadership skills.

Under the programme, one of the major challenges was that smooth and timely was not available to the POs which ultimately affected programme implementation. PPAF initially tried covering the gap through bridge-financing from its own resources, but later on as per advice of the donor, the organization stopped bridge-financing from its own resources which resulted in suspension of the programme activities. The issue may be a contributing factor towards decreased satisfaction level of users.

Despite cultural barriers, the programme through its various interventions is striving to enhance women's role in the society and their decision-making power. However, still challenges like restricted women's mobility is contributing towards their lower representation at higher tiers of community institutions.

For the Livelihood Enhancement and Protection (LEP), the overall 56% respondents are extremely satisfied while 36% respondents are very satisfied with the quality of assists. 96.5% women in Lasbela and 89.7% in Upper Dir reported that their decision-making power has increased after they received the skills training. Beneficiaries were overall satisfied with the quality of asset, as 77.8% respondents in Pishin, 62.5% in Zhob and 55.2% respondents in Upper Dir rated their satisfaction level as extremely satisfied. The key challenge identified was the cost of maintaining asset. In case of livestock, beneficiaries told that they face vaccination issues.

Under the Community Physical Infrastructure, majority of beneficiaries expressed satisfaction with drinking water schemes. 89.3% respondent reported that they have now access to clean drinking water because of water scheme. Overall, 65.2% respondents stated that they are paying no fee for water facility in their locality. In addition to being cost-effective and time saving, less water borne diseases are reported (88.4%) and as a result less expenditure on health are to be realized (86.2%).

The vast majority, 86% of respondents (n=46) replied that the flood protection wall increased the area of cultivated land. The survey results indicated that 95% (n=21) were fully satisfied with the installation of the basic drainage and sanitation services.

Almost 89% reported an increase in leisure time, 92% reported improved access to health facilities whereas the same percentage of respondents reported better access to education facilities. In overall terms these results indicate an improvement in quality of life. 86% of respondents reported better farm outputs while 83% reported an increase in their income. 93% of respondents (n=51) stated Delay Action Dam (DAD) help protect the community from water related calamities. The survey results show that 95% (n=21) were fully satisfied with the installation of the basic drainage and sanitation services.

During this survey, 412 household who used health facilities supported by PPR were interviewed. 82% (n=339) of the beneficiaries have stated that they felt better after receiving the treatment. The basic health services included, pre-natal and post-natal checkups, family planning, pharmacy, children's vaccination etc.

Majority of the beneficiaries' avail health services either free or within PKR 20. Most of the respondents 35% (n=144) and 37% (n=152) could access facilities in less than 15 minutes and less than 30 minutes, respectively. Out of 412 households surveyed, 77% (n=318) informed that PPR supported health facilities were appropriate for women. The staff was present at health facilities and they listened to the patients attentively and properly.

Overall 69% of the household respondents positively responded to availability of health services in their area as suitable for their children. The overall district-wise response also positive for availability of services and doctors, necessary vaccinations, medicines and equipment.

The behaviour of medical staff complemented the data on satisfaction. The highest rated behaviour of medical staff was from Chitral, where doctors were rated 80% (n=12) 'Excellent' and 13% (n=2) 'Good'. Even the lowest medical staff, a dispenser was rated average or above.

To facilitate beneficiaries while they wait, 87% (n=357) health facility users had access to drinking water at the health facility. Similarly, overall 92% (n=381) respondents reported that the health facility they visited had the toilet available.

However, the primary concerns were regarding the shortage of medicines at the RHC. They have to be bought from outside and those available at the RHC are for common diseases only. The medicines required for chronic illnesses are usually not available. Overall 30% of the respondents mentioned the insufficiency of medicines and equipment. Secondly, the lack of availability and quality of medical staff is a concern. There is a shortage of staff and no emergency services exist. The incentive and processes to attract and retain quality staff require improvement. Lastly, the existing health facilities require upgradation of medical technology.

Under education, the efforts of activities under PPR is reflected well in the enrolment as 96% (n=370) of these households had all children in school going age attending the PPAF supported schools. Overall, 99% parents stated that their children enjoyed going to the school. The access was most convenient in district Chitral as 85% of the children went to school that was less than 500 meters away and in Chitral maximum children had to travel was 2 KMs for 10% of the

beneficiaries. On average, 82% of the beneficiary's children were provided basic items essential for school. On average, there was 90% satisfaction level with teacher's performance and 91% with teacher's attendance. In terms of infrastructural capacity, 88% beneficiaries were satisfied with the availability of the classrooms in the schools. 84% of the parents were satisfied with the overall classroom environment. As far as training is concerned, there were very few teachers in the sample who have gone through the training conducted by PPAF. Major reason for very few responses were linked to the fact that teachers who went through trainings conducted by PPAF have moved to other place or it was observed at different levels of schools that number of teachers are very less i.e. out of three either one or two have obtained training.

Teachers who have gone through the training and were interviewed though were satisfied but complained about the duration of the project and training which was short.

Parents highlighted two key challenges in the educational services near them. Firstly, the current infrastructure lacks playgrounds, and this hinders the extracurricular activities for children. Moreover, lack of skilled teachers is a recurrent problem due to frequent staff turnover. A related aspect is the absence of regular teacher trainings which overtime adds to parent's dissatisfaction. Parents demand sophistication in teaching overtime which may not be the case due to lack of regular capacity building.

Livelihood Support & Promotion of Small Community Infrastructure Project (LACIP phase-I)

LACIP-I is funded by KfW Germany with funding amount EUR 31.56 million under execution of PPAF in eight selected districts of Khyber Pakhtunkhwa (Abbottabad, Chitral, Dera Ismail Khan, Charsadda, Buner, Haripur, Nowshera and Swabi). LACIP focused on improving the living conditions for the poor in the selected districts in KP. The programme reduced poverty by increasing opportunities for the beneficiaries. It has ensured increased access to social and economic infrastructure and its sustainable utilization. It has also strengthened local civic society organizations to enhance their participation in decision making. This was accomplished through 4 components, mainly institutional development, livelihood enhancement and protection, community physical infrastructure, health and education and disaster preparedness measures.

We observed 95.9% respondents in D I Khan, 65.1% (n=70) in Swabi (n=28) and 50% (n=13) in Chitral who informed that local communities are empowered through community institutes. 100% respondents from the male side and 76% from the female side in D I Khan, 44.4% male and 41% female in Chitral and 71% male and 15% female in Swabi said that women empowerment has increased through formation and strengthening of community institutes. Despite overall favorable behavioral change, respondents still highlighted that some cultural issues still exist for women which is a major impediment in active participation of women in social and economic activities.

89.3% respondents in Chitral and 36.1% in Dera Ismail Khan were utilizing the roads and bridges made under the interventions as primary route. All the respondents in Dera Ismail Khan and 75% in Chitral said that their income has increased with the construction of roads and bridges facility. Though, it was requested that repair and maintenance work should be done so that people can have better access towards services.

Regarding Drainage and Sanitation, the vast majority in D I Khan and Chitral were satisfied with the Provision but in Swabi only 44% of the responses were positive. Moreover, with respect to the change respondents observed after the provision, their answers were categorized into three categories namely cleanliness, disease control, economic benefits. Majority of the responses were positive except for from Swabi where 44% responses were negative in relation to Disease Control.

93% respondents stated they experienced an increase in their agricultural land due to provision of flood protection wall while 40% respondents reported a 5-10% increase in income due to increased efficacy of land. This clearly shows the positive economic and social impact this intervention has had.

Respondents were pleased that their access to water has improved as 83.9% (n=47) explained that water facility is just next to their house. All the respondents (n=56) confirmed that hand pumps in the locality have saved them time in fetching water while 89.3% (n=50) said that their physical labor has reduced.

68% of the respondents stated floods affected their households prior to the provision of Flood Protection Walls. Respondents mostly reported damage to household property, injury to human health, loss of human life, wastage of agriculture land/crop and injury to livestock as the main types of damage that occurred due to floods.

Positive feedback in regard to LEP was given by the respondents and they were extremely satisfied with the training provided to them. All respondents in Chitral while 90.4% in D I Khan and 50% in Swabi said that skills training helped in increasing their earnings. All the respondents in Chitral, 85.7% in Swabi while 62.5% in D I Khan were extremely satisfied with usefulness of asset provided to them. During FGD, it was pointed out that availability of various assets increased their household income due to which they are enjoying better living standards.

Survey results show that beneficiaries receiving a larger share of the total trainings in the two districts, 2.1% of the beneficiaries in Swabi regarded the trainings as 'somewhat dissatisfactory' while only 14.6% regarded the trainings as extremely satisfactory. On the other hand, in Dera Ismail Khan 81.5% of beneficiaries were 'extremely satisfied' with the trainings and only 18.5% were 'very satisfied'. Overall however, the trainings proved successful as all survey respondents stated that these helped raise awareness and could help mitigate dangers of flood water.

Enrolment Rates in the school remained high for each district. With Swabi and Chitral receiving 95.7% enrolment rates while Dera Ismail Khan reported 95.1% enrolment rates. Apart from that, most of the other facilities such as teacher attendance, provision of water, extracurricular activities etc. were termed

satisfactory by the respondents. Availability of the playgrounds was deemed inadequate by most respondents. The most significant challenges that persist according to the parents is the non-availability of schools for girls in their localities. Finally, they informed regarding inadequacy of teachers for different subjects taught in the school.

Survey data indicated that beneficiaries were satisfied from the level of access to health facilities. As most of the respondent's 55% (n=44) could access health facilities in less than 15 minutes, 37% (n=30) could access in less than 30 minutes. However, the overall results may be of concern as most responses were between 'somewhat dissatisfied' and 'very dissatisfied'. The most concerning response was received in the case of the availability of medicines with 20% (n=16) mentioning that they were extremely dissatisfied with the availability and quality of medicines. Moreover, health staff was also rated very poorly as there was a lack of relevant staff to address the needs of the community. Unfortunately, there was a lack of comprehensive maternal facilities for antenatal and post-natal care in the community health centers. Furthermore, inadequate female staff could not provide the necessary support to women in large numbers. The availability of in-house medicine was constrained. When doctors prescribe medicines, beneficiaries have to collect medicines from a pharmacy.

Similar to DPM Project interventions, 93.8% respondents in Swabi stated that no emergency response center was available in their locality. This is an alarming statistic as villagers would not know where to resort to if disaster occurs.

Overall the survey results are satisfactory. However, it would be beneficial to focus on the future programs in lieu of the best practices and recommendations derived from this survey discussed in this report. These interventions have the potential to tackle issues like unemployment, role of women and poverty. This will improve the living standards of the beneficiaries and enhance their socio-economic development.

Development of Hydropower & Renewable Energy (HRE)

Hydropower and Renewable Energy Project is funded by KfW Germany with EUR 10 Million funding amount in selected districts of Khyber Pakhtunkhwa. Districts include Buner, Chitral, Karak, Lakki Marwat, Swabi and Upper Dir. The overall objective of the program is to improve the standard of living and quality of life of the poor in KP. It will increase access to energy mainly for unserved communities. This project aims to increase employment and income opportunities through production and promotion of renewable energy, especially for the poor. It will also work to strengthen local civil society organizations and enhanced participation in the decision making at the community level.

An overwhelming majority, 98.4% (n=62) respondents reported increased access to energy after the program intervention. 79% respondents (n=50) confessed that this energy provision is very reliable. The data clearly validates the satisfaction level of the vast majority proving its efficacy. 65% respondents (n=41) reported that MHP provision was satisfactory for their needs and sufficient for them and the

locality. Around 76%, have been found as just satisfied with the MHP provision and 15% have been found as highly satisfied and 9% were dissatisfied. Only 14% (n=9) respondents reported receiving training regarding usage of MHP of which 7 are male and 2 are female.

In Swabi, 100% of the respondents termed Solar Lighting System through SLS Mini Grids as the prime source of energy in their area. 63% respondents (n=44) admitted saving in between PKR 0-500. 17% respondents (n=12) reported saving in between PKR 501-1000 while 20% respondents (n=14) identified savings in the range of PKR 1001-1500. 33% respondents (n=23) identified spending the saved money on health while 30% respondents (n=21) identified spending their saved money on food. This indeed has favorable health and nutrition implications.

We had 77% respondents (n=54) who regarded SLS as very reliable while 23% respondents (n=16) considered it as slightly reliable. Almost 100% respondents (n=70) identified an increase in the usage of electrical appliances with 89% respondents (n=62) stating Mobile Charging, Fans or/and Lights as the main type of appliance used. 83% respondents (n=58) reported the energy provision as sufficient for them and the locality. 70% have been found satisfied with the provision of solar system where 20% of the respondents have been found as highly satisfied. Only, 31% respondents (n=22) reported receiving end user training.

Most of the respondents admitted that they encouraged participation and promoted community organization activities. They also stated that they help people in developing committees related to education, infrastructure and health. 80% of the respondents termed the interventions for local community empowerment as extremely successful.

The impact of these trainings was limited. The trainings tried to help bring women into the fold of Community Institutions helping them play a role in improving community management and leadership capacities of women but it was reported that the attendance of women in these trainings was negligible. Moreover, lack of awareness and basic education still remains to be the main issue indicated by the respondents. Cultural intolerance and lack of basic willingness among women to partake in trainings and societal issues has its toll on them and their place in society.

Prime Minister's Interest Free Loan Scheme (PMIFL)

To address the issue of poverty and unemployment, the Government of Pakistan launched the Prime Minister's Interest Free Loan (PMIFL) Scheme in June, 2014 to enable poor people to become self-sufficient by offering them a chance to set up their own small enterprises. Total amount disbursed under this program is PKR 3.5 billion. Sampled districts of Balochistan and Khyber Pakhtunkhwa are Zhob, Pishin, Lasbela, Swabi, Chitral and Dera Ismail Khan respectively.

From a total of 402 respondents across the Balochistan and KP districts, commodity and loans for trade purposes were the most utilized by 41% (n=164). 50% (n=201) of the beneficiaries claimed they were extremely satisfied, 35%

(n=141) were rated as very satisfied, 14% (n=56) were somewhat satisfied with the loan provisions.

Another important factor for satisfaction is the instalment plan and loan payback period; 45% (n=182) stated that they were 'extremely satisfied' with the plan. Only 18% of the beneficiaries regarded themselves as 'somewhat satisfied'. 75% (n=303), there were no major issues reported in the processing of the loan. 68% respondents (n=273) confessed that the loan facility indeed helped them in generating employment opportunities as the non-agricultural segment is now able to employ a greater degree of labour force due to new capital inflows.

Around 72% respondents (n=292) stated that the loan facility helped them to invest in assets such as livestock, household items and cash. After availing credit facilities 93% (n=374) of beneficiaries, admitted that their household conditions have improved. The survey results showed that the major item that increased was food intake (89% n=357) and 83% (n=334) increased spending on health. 82% of respondents noted that female decision-making in financial decisions had greatly improved after the provision of the loan.

However, the key challenges were, firstly, many beneficiaries suggested an increase in the instalment plan timeframe and a larger sum of money. Moreover, providing beneficiaries with easier to understand information and guidance to fill documentation. Lastly, some female beneficiaries had requested trainings and information that would help them set up their own enterprises.

1. Background and Rational of the Study

This study aimed to conduct the user/beneficiary satisfaction survey to assess the value of interventions as perceived by the (intended) beneficiaries for various programs implemented by the Pakistan Poverty Alleviation Fund (PPAF) in selected districts of Khyber Pakhtunkhwa (KP) and Balochistan. The study assesses the satisfaction of four programs, namely; Programme for Poverty Reduction (PPR), Development of Hydropower & Renewable Energy Project in Khyber-Pakhtunkhwa Province (HRE), Livelihood Support & Promotion of Small Community Infrastructure Project (LACIP-I) and Prime Minister's Interest Free Loan (PMIFL).

The intent was to obtain people's perspectives on development results in a fair way and to use the findings to provide an overview of how these projects have contributed to the original goals of each project. Therefore, the study highlights the key interventions and the related contributory factors that resulted in their increased satisfaction. The beneficiary assessment appraises the level of participation, community satisfaction and the sense of ownership of PPAF supported projects, in order to ensure that the interventions had a sustained benefit for the beneficiaries. It also assesses the process initiated through training and that the interventions meet the priority needs of the communities.

PPAF has previously conducted two phases of user/beneficiary surveys for PPAF-III. The consultants developed two questionnaires, one for administration at village/CO level and other for the households. To ensure survey tools are relevant, accurate and complete, the questions were carefully worded. It was both qualitative and quantitative by design. The household questionnaire was specifically quantitative. The initial questions developed a socioeconomic profile of the Household and were followed by questions following either a yes/no answer or Likert scale questions to assess the benefits and level of satisfaction of households under various interventions of PPAF.

In addition, the satisfaction assessment compiled the accomplishments and lessons learned that would provide a basis for recommendations aimed at facilitating the design of the next phase of the program alongside further planning and implementation of current ongoing phases in parallel with related interventions. Finally, the study assists stakeholders in identifying the approaches that are perceived by the beneficiaries as working effectively for poverty reduction and improving their overall well-being and quality of life.

1.1 Pakistan Poverty Alleviation Fund (PPAF)

Pakistan Poverty Alleviation Fund (PPAF) is one of the leading institutions for community-driven development in Pakistan. It was set up by the Government of Pakistan as an autonomous not-for-profit organization, thus it works as a private organization to support public policy that aims to serve the poorest and most marginalized rural communities across Pakistan. PPAF has a widespread outreach as it currently covers 137 districts. Their work ranges from access to improved

infrastructure, clean water, energy, health, education and livelihoods to finance and resilience in disaster-stricken areas.

PPAF also works to strengthen institutional capacity of civil society organizations. PPAF's action research agenda revolves around government's poverty reduction strategies. The adopted approach has been successfully tested and supported by multiple donors. Currently, PPAF is supported by the government of Pakistan, Italian Agency for Development Cooperation, The World Bank, International Fund for Agricultural Development (IFAD), KfW (Development Bank of Germany), and other corporate donors. The approach uses integrated and holistic set of tools based on an understanding of multi-dimensional aspects of poverty.

1.2 Program Briefs

The present study aims to assess satisfaction about four programs namely; Programme for Poverty Reduction (PPR), Development of Hydropower & Renewable Energy Project in Khyber-Pakhtunkhwa Province (HRE), Livelihood Support & Promotion of Small Community Infrastructure Project (LACIP-I) and Prime Minister's Interest Free Loan (PMIFL).

Overall these programs use different approaches and tools but the common underlying theme is to work for poverty reduction and improving standard of living by creating earning opportunities for marginalized communities through various tools. HRE has been completed, PMIFL and LACIP phase-I are undergoing and extension has been approved for PPR.

1.2.1 Programme for Poverty Reduction (PPR)

PPR is financed by the Government of Italy (GoI) through the Directorate General for Development (DGCS) and managed by Italian Agency for Development Cooperation (AICS) and implemented by the PPAF. This five-year program with a total budget of Euro 40 million aimed to reduce poverty amongst the population of the selected areas through the creation of sustainable conditions of social and economic development. The PPR was legally operational since early 2013. This Program particularly focused on the most vulnerable and underserved areas which suffer from extreme poverty, as well as face severe security issues. The specific objective of the program is to establish a social and productive infrastructure system and also to establish effective and sustainable social safety nets. Its goal is to reduce poverty through creation of sustainable conditions of social and economic development that includes increase in income as well as production capacity. The program is being implemented in 38 union councils of 14 districts in the areas of Balochistan, KP and FATA through 17 partner organizations (POs).

a. Social Mobilization

Social Mobilization provides basis for all other components of the program within an integrated framework of community demand driven approach. Under this program, local communities have been empowered through formation/strengthening of 4,917 community institutions with 43% women at CO level. It also focused on strengthening and graduation of these

community institutions at village and union council level. The capacity of these community institutions has been fostered to formulate village and union council integrated developmental plans and improve governance, record keeping and linkages ensuring their overall sustainability and implementation of these plans in their respective villages and UC's. Under 3rd and 4th work plan, Social Mobilization activities are being carried out for advance level awareness and engagement including inclusion of women in leadership role and their access to public services and economic empowerment. It also includes activities on youth engagement for promoting peace and harmony.

b. Livelihood Enhancement and Protection Program (LEP)

Under Livelihood Enhancement and Protection component, the support so far is being extended through capacity building and provision of productive assets in livestock, small businesses, fishing, agriculture and kitchen gardening etc. For this purpose, productive assets have been provided to 6,887 individuals (47% women) belonging to vulnerable poor households while 25,549 individuals (29% women) have been trained around promoting income generating activities and rural microfinance development.

c. Community Infrastructure

One of the components under PPR aims to construct and improve existing small-scale community infrastructure as per the need of the community organizations identified in union council development plans. So far 1,164 infrastructure schemes have been completed which include clean drinking water schemes, link roads, food protection works, irrigation and renewable energy projects. These initiatives are for improving communities particularly women's access to drinking water and improved sanitation.

d. Health and Education

Health and education is another component of the PPR program related to poverty reduction. Within this component basic purpose was to enhance access of targeted communities to primary health care services. A total of 180 community/enterprise schools (including 28 coaching/learning centres) have been established till date. Community organizations are involved in these schools to ensure sustainability. These schools are contributing towards increased access to education for the children of areas where no education facilities were available. In total, almost 1200 children (4780 girls and 7300 boys) are enrolled in these schools/coachingcentres established under PPR.

Almost, 865 community resource persons and LHWs and CMWs which include 60% women have been trained so far on disease prevention and health seeking behaviour, nutrition and maternal and child health. Further this programme supported government and community health facilities resulting in improved access resulting in more than 1,288,689 consultation visits, out of which 42% were women and 28% were children, to better health services.

1.2.2 Livelihood Support & Promotion of Small Community Infrastructure Project (LACIP phase-I)

LACIP-I was initiated in 2012 and completed in 2017 with funding from KfW Germany. Total project budget was EUR 31.56 million, out of which EUR 16.70 million was a soft loan and EUR 14.86 million was a grant. The project was implemented in 57 union councils of eight selected districts (Swabi, Charsadda, Buner, Haripur, Nowshera, Chitral, Dera Ismail Khan and Abbottabad) of Khyber Pakhtunkhwa (KP).

LACIP focused to improve the living conditions for poor population in 8 selected districts in KP. The program reduced poverty by increasing opportunities for the beneficiaries. It increased access to social and economic infrastructure and its sustainable utilization. It aims to provide employment and earning opportunities for the poor in targeted districts. It has strengthened local civic society organizations to enhance their participation in decision making. This was accomplished through 4 components, mainly Institutional Development, Livelihood Enhancement and Protection, Community Physical Infrastructure, Health and Education and Disaster Preparedness Measures.

a. Institutional Development

ID component was initiated with the objective to empower poor and marginalized communities, so they can successfully setup and sustain development interventions under LACIP-I. Activities under this were focused on formation and/or revival of Community Organizations (COs) and clustering at various levels; (ii) Village Organizations (VOs); and (iii) Union Council area level, known as Local Support Organizations (LSOs). PPAF will also conduct capacity building for POs' Staff and Community Members.

The project was completed in 2017. In total, 5,196 community institutions across all three tiers (4,760 COs, 398 VOs and 38 LSOs) were formed or revitalized, organizing over 95,000 beneficiaries in the five-year period. Around 64% of the members of the established COs were men and 36% were women.

b. Livelihood Enhancement & Protection

Another component was Livelihood Enhancement, it included skills training, enterprise training and targeted asset transfers for beneficiaries with Poverty Score Card scores less than 24. There were two further categories, in Assets Transfers scheme supported the poorest community members with an aim of increasing their earning opportunities and providing sustainable livelihoods. Under the Skills Development component, technical and vocational training was conducted to equip the beneficiaries with technical knowhow to start their businesses. Overall, 8,759 assets were transferred to the end beneficiaries, including 4,900 men and 3,859 women (56% and 44%, respectively). While, skills training was provided to 5,315 beneficiaries – 3,535 (66%) men and 1,780 (34%) women.

c. Community Physical Infrastructure

The main focus area of LACIP-I was the construction of needs-based, sustainable community-driven infrastructure schemes for which major portion of the funds (EUR 14.96 million) was allocated. The component included construction and / or rehabilitation of: i) Irrigation schemes, ii) Link road and bridges, iii) Drainage and sanitation, iv) Drinking water supply schemes, v) Flood protection works, vi) Integrated area up gradation project (IAUP). The biggest category of the implemented schemes was roads and bridges (31%), followed by sanitation projects (22%), drinking water and irrigation projects (18% each) and flood protection (5%). Out of 2012 CPI projects, 120 IAUPs (6%) were initiated before June 2017 and 117 had been completed by the end of 2017.

d. Health & Education

Under this component missing facilities in health centres and public schools were provided. The overall commitment under the component was EUR 1.78 million. Cumulatively, 152 schools and 4 health centres were supported by LACIP. Cumulatively, 152 schools (151 government schools and 1 community school) were supported under LACIP-I that benefited 13,883 boys and 18,150 girls enrolled in those schools. Furthermore, in regard to the health component, overall 4 health centres were supported that benefited 76,760 patients including 9,955 men, 37,521 women and 29,284 children.

e. Disaster Preparedness Measures

Lastly, the DPM component worked to reduce or prevent the potential losses caused by the natural disasters through strengthening the DPM capacities of the local communities through training programs and construction of the disaster mitigation structures. This was supplemented by the community mobilization and formation of the Village Disaster Mitigation Committees (VDMCs). This component allotted EUR 1 million financial allocation. Additionally, 115 early warning training sessions and 9 mock drills were completed. As a result, 9,423 beneficiaries increased their awareness of disaster preparedness measures, hazard mapping and vulnerability, as well as early warning mechanisms and coordination, including around 33% of women and girls.

1.2.3 Development of Hydropower & Renewable Energy Project in Khyber Pakhtunkhwa Province-HRE

Pakistan is blessed with numerous energy resources including hydropower, solar and wind. Despite the fact, the country remains energy deficient, where by heavily relying on imports (oil, coal and LPG) to meet its energy needs. Despite the efforts made by various government organizations and private sector, the energy demand of the country is not yet met.

The overall objective of the program is to improve the standard of living and quality of life of the poor in KP. It will increase access to energy mainly for

unserved communities. This will decrease the use of other sources of energy such as fuel wood, kerosene and diesel in rural areas. This project aims to increase employment and income opportunities through production and promotion of renewable energy, especially for the poor. It will also work to strengthen local civil society organizations and enhanced participation in the decision making at the community level.

a. Micro and Mini Hydropower Plants

This component includes planning, designing and implementation of 05 MHPs (ranging from 36 - 306 kW). These include;

1. 36 kW MHP Bagaria Khwar in District Buner,
2. 200 kW MHP Bishoo Patrak in District Upper Dir,
3. 125 kW MHP Pursat,
4. 136 kW MHP Gollen Astore
5. 306 kW MHP Gazeen in District Chitral.

b. Solar Lighting System

Planning, design and implementation of about 68 solar lighting systems (SLS) including;

1. Solar systems with total capacity of 195 kW in Swabi,
2. Solar systems with total capacity of 186 kW in Karak
3. 24 solar systems with total capacity of 119 kW in Lakki-Marwat districts.

c. Social Mobilization and Capacity Building

Under this program, there were total 89 community organizations/village organization were formed with total membership of 1948 members consisting of 1316 men and 632 women. The program conducted 48 Community Management Skill trainings, 55 refresher workshops on Roles and Responsibilities, 65 Operators' trainings and 1137 End Users awareness sessions.

1.2.4 Prime Minister's Interest Free Loan Scheme (PMIFL)

Rural areas in Pakistan are particularly more vulnerable to suffer poverty. As, there is high unemployment and lack of income earning opportunities further worsening the poverty situation especially for women, youth and marginalized groups. To address the issue, the Government of Pakistan launched the Prime Minister's Interest Free Loan (PMIFL) Scheme in June, 2014 to enable poor people to become self-sufficient by offering them a chance to set up their own small enterprises.

Based on previous experience, PPAF has been mandated by the Government of Pakistan to design, mobilize, implement and monitor the PMIFL Scheme. The Scheme has been initiated in selected priority districts where the financial inclusion is limited or completely unavailable to the poorest of the poor. Total allocation for the Scheme is PKR 3.5 billion, out

of which PKR 3.1 billion is for on-lending and PKR 0.4 billion is for operational cost, capacity building of POs/community and media activities.

Under the scheme, PPAF is implementing this Scheme through its Partner Organizations (POs). Funds were disbursed to POs by PPAF as per their Implementation Plans (IPs) included in the Financing Agreements (FAs). The POs have established Loans Centers at Union Council (UC) levels and funds are disbursed to beneficiaries as interest free loans as per eligibility criteria of PMIFL Scheme. The POs recover loans from borrowers and revolve efficiently for generating new loans. Overall, 291 Loan Centers/Branches have been established by 26 implementing partners of the Scheme covering 442 Union Councils (UCs) of 45 districts across the country including GB, FATA & AJK. The coverage of UCs has surpassed the planned target of 250 UCs to be covered under the scheme due to increasing demand in adjacent UCs.

1.3 Literature Review

Beneficiary satisfaction surveys have been widely conducted in many countries by many international donors at both regular and irregular intervals. Hence, there is considerable literature available to guide the planning, design and conduct of the survey tools.

PPAF has previously conducted two phases of user/beneficiary surveys for PPAF-III. The consultants developed two questionnaires, one for administration at village/CO level and other for the households. To ensure survey tools are relevant, accurate and complete, the questions were carefully worded. It had both the qualitative and quantitative design. The household questionnaire was specifically quantitative. The initial questions developed a socioeconomic profile of the Household and were followed by questions following either a yes/no answer or Likert scale questions to assess the benefits and level of satisfaction of households under various interventions of PPAF.

In May 2017, UN field support conducted its 5th Global Client Survey² for Civilians involved in peacekeeping and field missions. The survey acted as a key management tool to help assess client views on support services and identify areas for further improvement. It used a Likert Scale ranging from very dissatisfied to highly satisfy for service delivery and other relevant themes such as timeliness, effectiveness and responsible services in peacekeeping and special political field missions. It found an improvement in overall satisfaction levels as compared to 2016. To ensure that the survey results are translated into actions, the results are shared with relevant management authorities and service leadership teams.

²https://fieldsupport.un.org/sites/default/files/fs_global_client_survey_2017_0.pdf

Likewise, European Commissions Eurostat³ regularly conducts general User Satisfaction Survey to measure the degree to which it meets its obligations to its users. It is designed to gain a better knowledge about users, their needs and satisfaction with the services provided by Eurostat. It also used a typical Likert Scale to measure the satisfaction for different themes such as timeliness, completeness, comparability and trust etc.

Similarly, the OECD Water Governance Initiative (WGI)⁴ was launched in March 2013 as an international multi-stakeholder network of public, private and not-for-profit stakeholder groups in the form of a policy forum. After 2 years to assess the outcomes and the value added and to identify any required adjustments, the secretariat conducted a Satisfaction Survey across 115 members of the WGI. The results found an extremely high level of satisfaction. It further highlighted the main benefits and opportunities that the members were most satisfied with and those that needed more work. Quantitative and qualitative results collected through the Satisfaction Survey provided the evidence base to adjust the structure and functions of the WGI for 2015-2018. The Steering Committee prepared a strategic paper proposing amendments to the organization of the WGI along its strategic priorities.

The Economic Development Institute, World Bank⁵ used SERVQUAL technique in their Service Delivery Survey. Client surveys will be developed that will enable the customer to voice his/her opinion on the quality of service delivery, make suggestions for improvements, and indicate the relative importance of particular services. The perception indicators will measure how the services are being experienced by the public. Perception indicators will complement quantitative indicators by revealing customers' expectations and perceptions of service delivery. Perception indicators help create priority rankings for resource allocation purposes.

The guidelines of the Statistics for Results Facility (SRF)⁶ outline multiple approaches for conducting user satisfaction survey. The survey in this study start with a cover page that identifies the beneficiary, the area and the program intervention they are linked to. Then it will use a general section to provide a unique brief socio-economic profile of the user. For the main user satisfaction survey, it will use a traditional Likert Scale approach that will give the beneficiaries options ranging from highly satisfied to highly dissatisfied. Lastly, it each section will have a comment/suggestion box. The survey will be carried out with a carefully selected sample of users to fulfil the objectives discussed below.

a. Social Mobilization

Social Mobilization is a process whereby people are organized in order to enable them to collectively think and act upon their development. Social Mobilization consists of the organizing of communities in rural and peri-urban areas into three

³<https://ec.europa.eu/eurostat/documents/64157/4375449/USS2016+Report/610a7767-b9ab-4936-8c5c-364eab6994ec>

⁴<https://www.oecd.org/cfe/regional-policy/WGI-Survey-synthesis.pdf>

⁵<http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.104.9989&rep=rep1&type=pdf>

⁶<http://siteresources.worldbank.org/SCBEXTERNAL/Resources/SRF-user-satisfaction-survey-guidelines-and-questionnaire.pdf>

tiers. At the first tier, these communities are organized into Community Organizations (COs) which are organizations at the neighborhood or Mohallah level. At the second tier, the COs federate at the village level into a Village Organization (VO). At the third tier, VOs federate at the Union Council level to form a Local Support Organization (LSO).

Gine et.al (2017) assessed social mobilization's role in strengthening women's participation in collective action can improve the performance of public health providers even in absence of ancillary health inputs or financing. They found little improvement in the quality of services provided by supra-village public providers like Basic Health Units (BHU). Further they found substantial increase in the quality of service provision by village-based skilled female health workers under the Lady Health Worker program.

b. Health

The main purpose of this component is to improve the health indicators of targeted communities through increasing their access to primary health care services and capacitating health professional on prevention of diseases, health seeking behaviours, maternal & child health and nutrition. PPAF held surveys to inspect health related activities including health center facilities, performance of staff and household situations. It is examined that patient tend to be satisfied by the personal attention paid by doctor and the medical staff. Health awareness is increasing within lower income households.

c. Education

In order to increase literacy rate in targeted UCs, the prime focus of this component is improving access of communities to education facilities through supporting government and community enterprise schools. Furthermore, teachers and community resource persons have also capacitated on school development planning, awareness on right to education, innovative teaching methodologies and the concept of promoting social enterprise. PPAF conducted a study to explore its interventions in education regarding efficacy, efficiency and sustainability. These interventions were implemented in primary, middle and secondary schooling where community driven facilities were established along with public private partnerships. The results pointed out that morale boosting and motivation provided by teacher is most significant in improving student performance records. The students' learning objectives can be achieved better through close interaction of teacher and student.

Khan (2018) pointed out that education system in Pakistan follows a didactic approach to teaching and learning. The approach fails to teach child as a whole and well-being of children remains unaddressed. Developed countries follow research-based contemporary approaches for child education and development which ensures child development to its full potential.

d. LEP (Livelihood Enhancement & Protection Program)

In this sector, destitute and vulnerable communities are getting benefits from capacity building endeavours and provisioning of productive assets in livestock, small enterprises, agriculture and kitchen gardening etc.

An assessment survey by PPAF (2011) on social safety net examined the impact of asset provision and found that beneficiaries of the program earn more revenue as compared to non-beneficiaries whereas the spending of beneficiaries is also more than other group. The assets holding make the beneficiaries wealthier than the non-beneficiaries. It is also examined that beneficiary households earn income from several sources as compared to non-beneficiaries who are dependent only on labour income. This in turn makes the beneficiaries to save more than non-beneficiaries while the social status of beneficiaries also proves to be higher than non-beneficiary group.

1.4 Study Objectives

The goal of the study was to assess the performance of the programs as per the satisfaction level of direct beneficiaries and other stakeholders. The study should be helpful for PPAF to streamline its programmes' operations by incorporating experiences and views of the beneficiaries about outcomes of the programmes' interventions.

The specific objectives of the study are:

- To assess the overall satisfaction of the target beneficiaries/project end-users and community institutions regarding the programmes interventions and achievements carried out in their respective target areas.
- The study will also highlight the key interventions and the related contributory factors that resulted in their increased satisfaction. These may include, but not limited to, the quality of the development interventions undertaken, timeliness of the delivery of the interventions, conduct and behaviour of the staff of POs and PPAF etc.

2. Proposed Methodology, Approach and Implementation Plan

The study employs a mix method approach of qualitative and quantitative techniques to achieve the objectives outlined above. This study surveyed beneficiaries across four Programs of PPAF, namely Programme for Poverty Reduction (PPR) (Italian Program), Prime Minister's Interest Free Loan (PMIFL), Scheme, Hydropower & Renewable Energy (HRE) and Livelihood and Community Physical Infrastructure Project (LACIP).

The study aims to obtain people's perspectives on development results in a fair way and to use the findings to provide an overview of how these projects have contributed to the original goals of each project. The beneficiary assessment appraises the level of participation, community satisfaction and the sense of ownership of PPAF supported projects, in order to ensure that the interventions had a sustained benefit for the beneficiaries.

2.1 Proposed Techniques

The approach relied primarily on following techniques:

2.1.1 Secondary Data Collection

a. Detailed Desk and Literature Review

An extensive desk review of research about the programs of PPAF was conducted. The relevant documents and reports of the PPR, LACIP-I, HRE and PMIFL such as the, annual narrative reports, baseline survey report, quarterly narrative reports, policies/procedures, case studies and work plans was reviewed by our team. This review was facilitated by extensive consultation with the PPAF staff and PPAF's partner organizations.

b. Review of PPAF Programs (PPR, LACIP-I, HRE and PMIFL)

SDPI team has reviewed the PPAF programs and documents from sources available. Main key areas looked at were: 1) criteria for selection of preferred area; 2) criteria for selection of targeted population; 3) impacts of program on the population; and 4) externalities or challenges in application of the program. This review of PPAF programs was facilitated by extensive consultation with current and updated secondary data available with PPAF and PPAF's partner organizations.

2.1.2 Primary Data Collection

During the survey exercise, following key activities were carried out:

a. User/Beneficiary Satisfaction Survey

For user/beneficiary satisfaction survey, the objective was to assess the perceived performance of multiple PPAF programs as per the satisfaction level of direct beneficiaries. The intent was to get people's perspectives on development results in a fair way and to use the findings to provide an overview of how these projects have contributed to the original goals of each project. Therefore, the study highlights the key interventions and the related contributory factors that resulted in their increased satisfaction. The beneficiary assessment appraises the level of participation, community satisfaction and the sense of ownership of PPAF supported projects.

b. Key Informant Interviews

For an in-depth and detailed understanding of the programs, its benefits and challenges in implementation, the team conducted face-to-face interviews from Partner Organizations (POs) of PPAF and district administration. For in-depth and key informant interviews, a semi-structured questionnaire was developed and executed to gather information on various aspects of the program in order to try to identify challenges for better and effective implementation. The study has at least 24 KIIs.

c. Focus Group Discussions

The focused group discussions were conducted to gain a deeper understanding of beneficiaries' perceptions. FGDs were done with beneficiaries, community elders, representatives of local government

(Nazim and former Nazim) and Community Institutes. FGDs allow the participants to agree or disagree with each other so that it provides an insight into how a group thinks about an issue, about the range of opinion and ideas and the inconsistencies and variation that exists in a particular community in terms of their experiences and practices. Through FGDs the team explored the meanings of survey findings that cannot be explained statistically, the range of opinions/views on a topic of interest and to collect a wide variety of local knowledge. The meeting was started with the introduction of the facilitator who defined the purpose of the whole activity. The study had at least 16 Focus Group Discussions (break-up is given in table-1).

d. Designing the Survey: Questionnaire development

In order to develop questionnaire for the user beneficiary survey in Balochistan and Khyber Pakhtunkhwa province, following steps are taken into the consideration:

Step-1: Determination Objectives, Resources and Time Constraints

Before developing the questionnaire, the initial ingredients taken into account were determination of the survey objectives, resources to be utilized and time availability. Survey objectives basically revolved around the assessment of the overall satisfaction of the target beneficiaries/project end-users and community institutions regarding the programmes interventions and achievements carried out in their respective target areas. Further as per the demography, resources (e.g. skilled manpower (enumerators), transportation, office supplies and other related equipments) and time allocation was taken into consideration.

Step-2: Determine how the questionnaire will be administered

After determination of the survey objectives, resources and time constraints with the help of PPAF, it was determined that to whom these questions will be asked in the selected districts. It was agreed upon that respondent will be direct beneficiary of the PPAF intervention and he or she should be of 18 years and above. Further to identify these direct beneficiaries, local Partner Organizations (POs) were also taken into consideration who helped SDPI team in reaching the location and identify beneficiaries with the help of community elders or representatives of community institutes.

Step-3: Determine the question format

For this study, the instrument design follows a **Likert Scale approach**. This scale offers survey respondents the opportunity to indicate the extent to which they agree or disagree with a given statement or to express a neutral response. People are not forced into making a binary choice between agree or disagree-It gave usually 5 options to beneficiaries, ranging from highly satisfied to highly dissatisfied. This helped capture the beneficiary perception of benefits and level of satisfaction under the program interventions. 4,500 households were selected under the four programs from Khyber Pakhtunkhwa and Balochistan.

Step-4: Composition of Questions

With the clarity of objectives and resources for each of the component, questions were written with clarity and intent. This helped conveying information and asking questions in local languages both in Khyber Pakhtunkhwa and Balochistan. An internal peer-review process was also carried out.

Step-5: Designing the Question flow

For this study after designing the question in accordance to the format determined with clarity, questions were designed in a flow for each of the component/intervention by PPAF. Flow was ensured by taking into the account within each intervention accessibility, availability, affordability and satisfaction of the beneficiary and household.

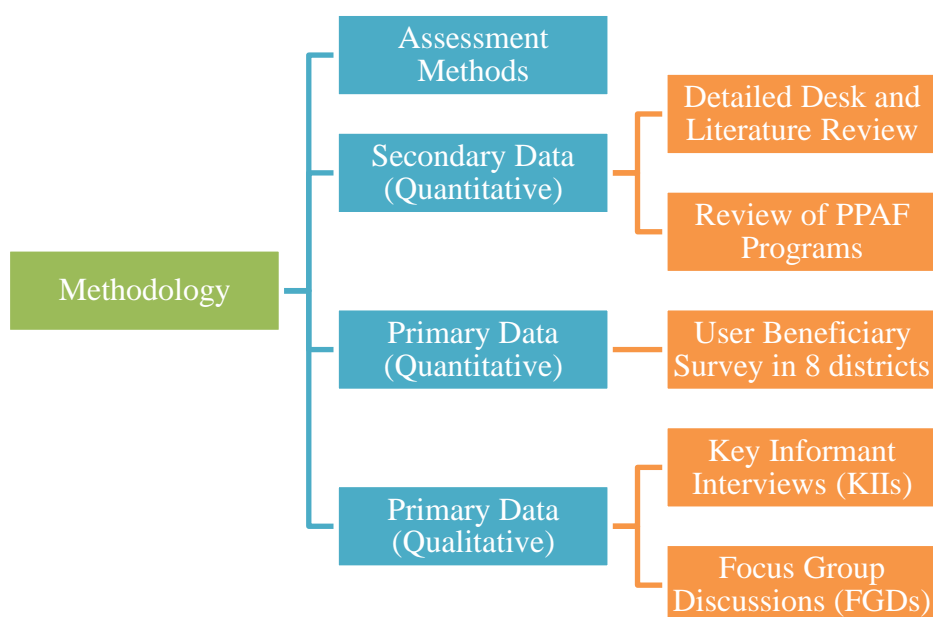
Step-6: Questionnaire Evaluation

After going through all the steps leading to questionnaire development, questionnaire was evaluated in order to confirm that all questions are clear, in order and have a flow in asking with greater clarity.

Table 1: Detailed Summary of KIIs and FGDs

Table 1: Detailed Summary of KIIs and FGDs			
Program Districts	Key Informant Interviews (KIIs)	Focus Group Discussions (FGDs)	
		Male	Females
PPAF and Partner Organizations	2 in each selected district	01 in each district	01 in each district
District Administration	1 in each selected district		
Grand Total (KIIs and FGDs)	24	16	

Figure 1: Methodological Framework



Sampling Methodology

In this study our sampling technique was multistage stratified random sampling. This approach was useful when subdividing the target population for minimizing error. Program wise proposed sample is given below:

Table 2: Program-wise proposed Sample Size

Program-wise proposed Sample Size		
Program	Proposed Sample Size	Percentage Share in Sample
PPR	2,800	62%
LACIP	1000	22%
PMIFL	400	9%
HRE	300	7%
Total	4,500	100%

Stage-1 Selection of Districts

Districts' selection was based on maximum appearance of PPAF Programs such as PPR, LACIP-I, PMIFL and HRE. It covers beneficiaries from each of the program through stratified multistage sampling. There were 08 districts from both provinces. In KP three from north KP and one from south KP, whereas in Balochistan, two from the Pashtun belt and one from the Baloch belt in order to make our sample representative in terms of ethnicity and geography. Districts' selection was based on the most overlapping programs and top number were selected. This allowed us to reach and survey majority of the beneficiaries and capture the overall feedback. The districts where the programmes interventions were most pronounced are highlighted as follows:

Province/District	PPR	PMIFL	LACIP	HRE
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Balochistan				
Awaran	√			
Gawadar	√			
JhalMagsi		√		
Kech	√			
Kharan		√		
Khuzdar		√		
Killa Abdullah ⁷	√	√		
Lasbela (Baloch Region)	√	√		
Loralai		√		
Panjgur	√			
Pishin (Pashtun Region)	√	√		
Quetta		√		
Zhob (Pashtun Region)	√	√		
Ziarat		√		
Khyber Pakhtunkhwa				
Charsadda		√		
Chitral (Northern Region)	√	√	√	
D.I Khan (Southern Region)		√	√	
Haripur		√	√	
Karak				√
Nowshera			√	
Swabi (Northern Region)		√	√	√
Manshera		√		
Swat	√	√		
Lower Dir	√			
Upper Dir (Northern Region)	√			√
Buner				√

Stage-2: Selection of Union Councils (UCs) and villages

⁷Initially, Killa Abdullah was selected, however due to security complications arising in the district, Pishin district was selected during field operations.

Union Councils' selection depended upon the number of interventions whereas within UCs villages were selected on the basis of highest proportion. Across UCs, villages with highest proportion were selected on the basis of random sampling. This approach was followed primarily for beneficiaries of PPR. For programmes where population size was unknown, sampling was based on margin of error (MOE) and level of confidence (LOC). The contemporary empirical studies use 5% margin of error with 95% confidence level, but this condition may vary accordingly depending upon fixed sample as provided. Therefore, based on fixed sample size we will present scientific justification against the sample size and selection of respondents.

Following self-explanatory table and formula we can get optimal sample size.

Table 3: Calculation for Optimal Sample Size

Level of Confidence (LOC)	Recommended value: 1.96 (for 95% confidence level)
Margin of Error, desired precision (MOE)	The smaller the margin of error, the larger the sample size needed. Recommended value: 0.05
Baseline levels of the indicators, Expected true Proportion. (Ind)	Recommended value: 0.5

Formula: for LOC = 1.96 (95% Confidence Level); MOE = 5% and Ind = 0.5

$$n = \frac{LOC^2 \times Ind \times (1 - Ind)}{MOE^2}$$

Table-4: Sampled Districts, Number of UCs and Villages

District	Total Program UCs	Sampled UCs	Total Program Villages	Sample Villages
Pishin	2	2	37	2
Lasbela	2	2	21	3
Zhob	3	1	32	5
Chitral	5	4	14	6
D.I.Khan	6	2	22	2
Swabi	13	6	12	8
Upper Dir	3	2	71	4
Buner	1	1	1	1

Programme for Poverty Reduction (PPR)

In third stage after selection of UCs and villages, beneficiaries' selection varies program wise. Difference in the selection criteria for beneficiaries occurs because of program nature. Below is criterion of selecting respondents for each of the given program. Within PPR, division of sample is taken into consideration while looking at programme components i.e. social mobilization, Health and Education, Community Physical Infrastructure and Livelihood Enhancement and Protection Program (LEP).

Social Mobilization

For social mobilization component, data was categorized into institutes such as Community Organizations (COs), Village Organizations (VOs) and Local Support Organizations (LSOs) followed by training component where representatives from COs were being trained or in other words it can be said that representatives from COs were undergoing capacity-building. Within the given population data, total of 621 respondents were covered from selected districts, union councils and villages. The division of this sample is as follows in the steps below:

Selection of COs

Within selected districts there were total 1392 COs across all villages. Out of 1392 COs, there were 61 such entries where no village was mentioned therefore total number of COs was reduced to 1331. Out of this, sample was selected at 5% level of precision.

- Proportion of male and female COs was initially determined by number of male and female COs within the selected district. This criterion was further followed while dividing responses within the selected village.

Selection of VOs and LSOs

- Within selected districts, UCs and villages number of VOs is complete enumeration i.e. since number of VOs were less therefore all were selected present within selected area.

Community Trainees

- As per the data provided, number of responses within community trainees was selected from community organizations (COs). Therefore, number in this case was same as that of COs but here the variation was in gender depending upon who has been trained within the organization.

Health and Education Component

For health and education component within selected districts and UCs the total number of beneficiaries and total number of enrolments were taken into the consideration. For example, in case of health component total beneficiaries in the selected districts and UCs are 113,276 from which sample size extracted is 408 at 5% level of precision. This sample size of 408 is further sub-divided into each district based on number of health facilities. Similarly, for education component, out of 33,358 enrolments over all quarters in each of the educational facility/unit, total sample to be drawn is at 5% level of precision i.e. 413 which is further sub-divided into each district using same approach as that of health.

Community Physical Infrastructure

Another important component of the PPR program is Community Physical Infrastructure (CPI). Within CPI total sample interviewed is 1,071. This number for respondents was selected at 7% level of precision with some adjusted numbers because of free-riders i.e. those who are not paying for infrastructure are also using it. Within the selected UCs and villages beneficiaries were also questioned.

LEP Component

Within Livelihood Enhancement and Protection Component of the PPR program total sample was 569 which is selected on the basis of gender criteria within selected Districts, UCs and Villages. Within selected districts above i.e. Pishin (Bostan, Khushab), Lasbela (Chorr, Kassi, Pariya-2), Zhob (Meena Bazar, Badinzai, Chanizai, Rakhpoor), Upper Dir (Bibour, Dir Khan and Subat Khor) and Chitral (Potoniandeh, Shah Nigar) all assets were taken into consideration. Within this sample all male and female were interviewed. This selection was based on the size of population within selected area which is not significantly high.

Livelihood Support and Promotion of Small Community Infrastructure (LACIP phase-I)

Before going into the sample selection, LACIP component is divided into 4 components i.e. Health and Education, LEP, Disaster Management and Community Physical Infrastructure (CPI) in order to cover 1,000 respondents. Within this component 10% level of precision was used as sample selection criteria where applicable. There are areas within this component where respondents due to low number got selected. As this program was only active in Khyber Pakhtunkhwa therefore selection was limited to only this province. UCs and villages selection were based on the random selection across this component. Within this process health and education components divisions, are divided by number of patients, beneficiaries from basic health units (BHUs) and enrolment of boys and girls in the school. Here for BHUs and Schools restricting sample within the limit 10% level of precision was selected to get the sample value.

From 76,760 total beneficiaries, we have targeted 102 beneficiaries across Swabi (97), D.I.Khan (03) and Chitral (02). For the education component, sample of size 130 was selected in Swabi (45), Chitral (45) and D.I.Khan (40).

Under LACIP project, total 157 sample size was targeted in Swabi, Chitral and D.I.Khan for LEP. Total number is further divided into asset and skill trainings. Number of respondents against asset transfer is selected directly from the population without applying any technique because of low sample. In this component, gender also has direct influence as it is dependent on the person getting asset. Whereas respondents for trainings selected are also directly from the data based on population number given in the dataset.

In the disaster program (DPM) respondents were only covered in 2 of the selected districts D.I.Khan and Swabi. This component of DPM is further divided into beneficiaries and community trainings. Sample for project beneficiaries is selected at 10% level of precision in order to control the limits and restricting sample to

the given sample size. Whereas community training program in case of Dera Ismail Khan Miali will be targeted. In Swabi, two villages VDMC Itafaq Zarobi and VDMC Alkhedmat under UC Zarobi total 38 respondents will be covered.

Similarly, for Community Physical Infrastructure (CPI) a core component of LACIP, sample selected was on 10% level of precision with gender division based on proportion within selected districts, UCS and villages.

Prime Minister Interest Free Loan (PMIFL)

Interventions under the PMIFL were recorded both in Balochistan and Khyber Pakhtunkhwa. The given sample size as per terms of reference in this case was 0 which was allocated within 6 of the selected districts. The selected districts across program were: 1) Pishin; 2) Zhob; 3) Lasbela; 4) Swabi; 5) Chitral; and 6) Dera Ismail Khan. Within each district 67 respondents will be interviewed within selected UCs.

Development of Hydropower & Renewable Energy Project in Khyber Pakhtunkhwa Province (HRE)

The last component of the PPAF is linked with renewable energy. Within renewable energy programs included were linked to micro hydel, solar and trainings associated to the use of instruments for renewable energy. In case of micro hydel only district is Buner therefore survey was conducted in UC Pandhair within which Sar Kalay was the targeted village. Total number of respondents covered here were 215 out of 592 total beneficiaries at 5% level of precision. Similarly, for solar, selected district was Swabi within which UC Ganni Chhatra was the targeted UC and villages Badga and Nogram were the selected villages. For solar, within this selected village, respondents from each household (77) were considered. Rest of the sample was allocated to Social Mobilization component i.e. 8 from Badga in Swabi. Within this sample, the ratio of male to female was selected based on the proportion within total number of beneficiaries. Following this approach, total number of respondents equalled to 300.

Meena Bazar		16	19	46	40	121												
KPK																		
Chitral																		
Darosh I	92	16	50	70	52	280												
Darosh II	31		27	100		158												
Koh								2 ⁸	26	45	14		83	170				
Chitral I							34											
Chitral II							33											
Upper Dir																		
BarawalBindi	55	63	28	104	97	347												
Bibiour		25	30		35	90												

⁸[No UC mentioned in data file](#)

Chuki atan	64		68	68		200											
D I Khan																	
Dera Dehat I						67											
Marha							3 ⁹	70	40	74	69	70	326				
Swabi																	
Chakn oda							47 ₁₀						47				
GaniC hhatra											99		99		77	8	
Zarobi						67					38		38				
Yaqoo bi							15	20					35				
Ambar							10	17					27				

⁹[No UC mentioned in data file](#)

¹⁰[No UC mentioned in data file](#)

SardC heena								25	25	45	69		94	258				
Buner																		
Pandh air															215			
Grand Total	620	404	413	818	569	2,824	402	102	158	130	157	206	247	1000	215	77	8	300

Summary

The study is focused on 8 districts across 2 provinces with 24 union councils selected, based on the overlap of maximum programs interventions.

Table 5: Selected Districts and Union Councils

Balochistan			Khyber Pakhtunkhwa				
Baloch Region	Pashtun Region		Southern		Northern		
<i>Lasbela</i>	<i>Pishin</i>	<i>Zhob</i>	<i>D I Khan</i>	<i>Buner</i>	<i>Upper Dir</i>	<i>Swabi</i>	<i>Chitral</i>
Sakran	Bostan	Badinzai	Marha	Pandhair	BarawalB ndi	Chaknoda	Darosh I
Winder	Khushab	Shahabzai	Dera Dehat I		Bibiour	GaniChha tra	Darosh II
		Meena Bazar			Chukiatan	Zarobi	Chitral I
						Yaqoobi	Chitral II
						Ambar	Koh
						SardChee na	

2.2 Field Plan

Key Informant Interviews (KIIs) and FGDs were conducted by SDPI team while beneficiary satisfaction survey was conducted mainly by enumerators. The enumerators were hired locally (added benefit that they understand social, culture and local language) from the selected districts and were trained on data collection instruments. Before conduction of field survey, half day training was organized for enumerators in order to prepare them for the survey during field visit and meeting with beneficiaries¹¹. During training, SDPI representatives discussed the following issues with data collectors:

- How to approach the beneficiaries (what behaviour is appropriate, how to introduce ourselves; familiarise the respondents with the situation etc.
- Interviewing techniques
- Going through and interpreting each of the questions

The beneficiary survey was conducted in a participatory way through discussion. Enumerators did not ask questions one by one from the beneficiaries but discussed them in a way that respondents felt more comfortable and shared their

¹¹ Training component will include MOC exercise and there will be field level pre-testing.

unbiased opinions. The team consisted of 48 enumerators (6 in each district, 3 male and 3 female) and 4 SDPI staff members. Detailed field plan (team composition including enumerators, training of enumerators, field activities with date wise) was shared with PPAF before going into field.

2.3 Data Management

For any survey, data management is a key step to look into and this management is in the form of data processing. The aim of data processing was to transform raw data into meaningful results. For this purpose quantitative data was entered and analysed in SPSS version 25 and presented in a way that answers the research questions through cross-tabulation in order to provide comprehensive information about relationship between variables. The qualitative data was analysed through N-Vivo software. Structured questionnaires consisting of open and close ended questions were employed to collect the qualitative and quantitative data.

2.4 Demographic Profiles

Khyber Pakhtunkhwa

Dera Ismail Khan

District D.I. Khan covers an area of 7,326 sq.km with a total population of 1,627,132, and male population of 838,793 and female population of 788,294. Population density in 2017 census was reported to be 220 per sq.km. Urban population was only 22.26% of the total population with an annual growth rate reported to be 3.29%.¹² Rural population was only 77.73% of the total population. This population is a mix of ethnic Saraikis, Baloch and Pashtun segments, with a significant number of Urdu-speaking immigrants. Main spoken language in the region is Saraiki with Pashto being spoken in old areas along with Balochi in some tribes¹³.

While looking at the economy of D.I. Khan, major output is in the form of lacquered woodwork, glass and ivory ware, mats and sarongs. There are also industries related to sugar, soap, textile and oil milling. For agricultural activities Chashma Right Bank Canal (CRBC) is the major canal that provides water for irrigation.

One of the most famous products of the district is the Dhakki date which is exported to the Middle East, United States and Europe. Beside dates being one of the key product of Dera Ismail Khan, delicacy desert (Sohan Halwa) is another product which is exported within and outside Pakistan. This district also produces wheat, sugar cane, rice, and mangoes. Economy of Dera Ismail Khan further deals with coal with mines present on the edge of CRBC Canal.

¹²<http://www.pakinformation.com/population/dera-ismail-khan.html>

¹³https://en.wikipedia.org/wiki/Dera_Ismail_Khan

Other exportable item from D.I. Khan is waistcoat being a traditional and national dress. These waistcoats are transported across Pakistan and are exported to Afghanistan.¹⁴

Primary participation for the year 2012-13 reveals that there are 50.12% enrolled pupils, of which 55.47% are male children and 44.23% are female children. Middle participation also showed a similar picture, with total of 25.57% children enrolled in middle schools, 29.95% are male and 20.58% are female children. ¹⁵ From the health perspective when we analyze the district, there were 9 hospitals in the entire district.¹⁶ There were only 216 doctors as reported in 2013.¹⁷

Total roads in the district recorded in 2006-07 are 615.6km, in this high type roads are 526.5 km and low type roads are 89.1 km.¹⁸ This is only one indicator which in fact exhibits population's lack of access to markets, education places and hospitals.

Upper Dir

Upper Dir is a small district of Khyber Pakhtunkhwa, with an area of 3,699 sq.km. According to the population census of 2017, population of the district was 946,421, with a male population of 466173 and female population of 480247. Population density was reported to be 155.7 per sq.km and urban proportion was only 4.6%. Population's annual average growth was reported to be 2.64%.¹⁹

Economy of Upper Dir primarily depends on remittances from abroad. Along with remittances outputs which plays pivotal role in economy of Upper Dir are knives, caps (white), woollen mats, daggers and furniture goods²⁰.

Female population proportion participated in primary and middle level is relatively lower than male proportion. Of the total enrolled population of 80.13% in primary education 64.53% are female children and of the total population of 30.73% participated in middle level, only 18.94% are female children.

While looking at the health statistics released by bureau of statistics of Khyber Pakhtunkhwa in 2013, there were 5 hospitals in the district at that time with 688 beds. Further there were also present at that time 2 rural health centers and 40 health units to cadre with the health demands of the province. Within these health facilities there were 71 doctors.

¹⁴https://en.wikipedia.org/wiki/Dera_Ismail_Khan

¹⁶Khyber Pakhtunkhwa Government. Available from: <http://www.khyberpakhtunkhwa.gov.pk/Departments/BOS/nwfpdev-statis-health-tab-109.php> [Accessed 01/12/2012]

¹⁷http://kpbos.gov.pk/prd_images/1399372381.pdf

¹⁸Khyber Pakhtunkhwa Government. *Chief Engineer, Works & Services*. Peshawar.

¹⁹<http://www.pakinformation.com/population/upper-dir.html>

²⁰http://culture.kpdata.gov.pk/cci_mapping.html

Buner

Buner District before becoming district in 1991 was a tehsil within Swat district. It lies on the Peshawar valley border of the Khyber Pakhtunkhwa. It is a small mountain valley, dotted with villages and divided into four sub-divisions. The Mora Hills and the IIam range divide it from the Swat Valley, the Sinawar range from Yusafzai, the Guru Mountains from the Mardan Valley and the Duma range from the Puran Valley. Total area of district Buner is 1,865 square kilometer (720 sq mi) and population as per 2017 census is 897,319. Out of this population as recorded by census 2017, total male population was 446997 (49.81%) whereas female population was recorded at 450317 (50.18%)²¹.

With this population numbers, population density was recorded at 480 sq. km with 100% population living in the rural area and growth rate of 3.05%.

As far as economy of Buner is concerned, beside depending on marble²² exports from the region to Saudi Arabia, Middle East, USA, Malaysia and China. There is also demand of fishnet from Buner.

Now looking at the social side by taking into the consideration education participation and health services, Buner has significantly improved with the passage of time. By the statistics reported by Khyber Pakhtunkhwa Bureau of Statistics, primary education participation rate by 2012-13 was 82.82 percentage points. The male population which contributed to primary participation was 83.94% whereas female population was recorded at 81.58%.

On the parallel side when looking at the middle participation it was not encouraging in comparison to primary participation. Out of total population middle participation rate was 32.64% with male participation of 44 % and female participation of 19.58%.

Within district Buner there were 4 hospitals with 295 beds as per the statistics reported in 2013. Further there were 3 rural health centres and 19 basic health units contributing to the health sector of Buner district. With these low number of health services ingredients, for every 3009 people there was only 1 bed present with total number of doctors at 59.

Chitral

Chitral is the largest district in the Khyber-Pakhtunkhwa province of Pakistan covering an area of 14,850 square kilometers. It is northernmost district of Pakistan and shares border with Gilgit-Baltistan to the east, with Kunar, Badakshan and Nuristan provinces of Afghanistan to the north and west, and with the Khyber-Pakhtunkhwa districts of Swat and Dir to the south. A narrow strip of Wakhan Corridor separates Chitral from Tajikistan in the north.

²¹<http://www.pakinformation.com/population/buner.html>

²²http://culture.kpdata.gov.pk/cci_mapping.html

The district has a population of about 447,362. The general population is mainly of the Kho people who speak the Khowar, which is also spoken in parts of Yasin, Gilgit, Dir and Swat. Chitral is also home to the Kalash tribe, who live in Bumburet and two other remote valleys southwest of Chitral town. Out of this total population according to census of 2017, there was total of 225,846 (50.48%) male population whereas female population was recorded at 221,515 (49.51%)²³. Annual population growth in comparison to 1998 census in Chitral was observed at 1.8% with 11.1% population living in the urban areas.

When one look at the economic output of Chitral district, beside marble exports there are commodities like Shu/Chitrali Patti, Beads Work, Rugs, Wool Products, Furniture Goods, Traditional Embroidery, Cushions, Wood Decoration, Embroidery, Napkin and Purse Making²⁴ which are transported within and outside Pakistan.

Similarly looking at the educational front, according to the statistics released by Bureau of Statistics of Khyber Pakhtunkhwa, in 2012-13 primary participation rate was reported at 56.98%. Out of the total male population at that time male participation rate was recorded at 58.46% whereas for female it was recorded at 55.42 %. Also for middle level of education, total participation rate was recorded at 49.45% with 53.6% of the total population being male and 45.22% female.

Further looking at the health statistics, in 2013 there were 4 hospitals in Chitral district with 184 beds. With these hospitals providing health services to the people of Chitral, there were also 40 dispensaries and 21 basic health units as key contributors by providing health facilities to the people of Chitral. According to these same statistics in Chitral there were 38 doctors providing services whereas 1 bed was present for 2505 people of the district.

Swabi

Swabi district is in Mardan Division of Khyber Pakhtunkhwa province in Pakistan. It lies between the Indus and Kabul Rivers. Before becoming a district in 1988, it was a tehsil within Mardan District. 96% of the population have Pashto as their first language.

With the population of 1,624,616 as per 2017 census, Swabi District is now home to many excellent educational institutes. But there was no public sector university till 2012. The only degree awarding institution then was private sector Ghulam Ishaq Khan Institute of Engineering Sciences and Technology, which was inaugurated in 1993. In 2012, Government of Khyber Pakhtunkhwa established first public sector university in Swabi, when it upgraded Abdul Wali Khan University Mardan Swabi campus into full-fledge University of Swabi while Women University Swabi was established in 2016. Swabi district also has a public sector medical college Gajju Khan Medical College Swabi, which was established in 2014.

²³<http://www.pakinformation.com/population/chitral.html>

²⁴http://culture.kpdata.gov.pk/cci_mapping.html

The district also has 2 public sector Postgraduate degree colleges: Government Postgraduate College Swabi and Govt Girls Post Graduate College Maneri Swabi.

Balochistan

Lasbela

It has area of 12,574 km.sq and population of 574,292 (Male: 299,299 (52.12%), Female: 274,985 (47.88%)) out of which Urban Population is 48.62%. The annual population growth rate is 3.24% with the Population Density of 46 per sq.km. Education at Primary Level: Total enrolment: 19663-4.7%. Enrolment Male: 12088-4.8%. Female enrolment: 7575-4.6%. Education at middle level: Total enrolment: 8595-5.4%. Enrolment Male: 5134-6.1%. Female enrolment: 3461-4.7%. Health: Number of hospitals: 3 with 92 beds; Number of dispensaries: 26; Number of doctors: 76; Number of RHCs: 4; Number of BHUs: 42

Pishin

It has area of 7819 km.sq with the population of 736,481 (Male: 379,122 (51.48%), Female: 357,356 (48.52%)) with Urban Population: 19.44%. The annual population growth rate is 3.58% with population density of 94 per sq.km. Education at Primary Level: Total enrolment: 29569-7.1%. Enrolment Male: 19345-7.7%. Female enrolment: 10224-6.2%. Education at middle level: Total enrolment: 13623-8.6%. Enrolment Male: 7263-8.6%. Female enrolment: 6360-8.7%. Health: Number of hospitals: 2 with 55 beds; Number of dispensaries: 10; Number of doctors: 106; Number of RHCs: 10; Number of BHUs: 30.

Zhob

It has area of 20,297 km.sq with the population of 310,544 (Male: 168,358 (54.21%), Female: 142,186 (45.78%)) and Urban Population of 14.89%. The annual population growth rate is 2.52% and population density is 15 per sq.km. Education at Primary Level: Total enrolment: 12115-2.9%. Enrolment Male: 8001-3.2%. Female enrolment: 4114-2.5%. Education at middle level: Total enrolment: 4040-2.6%. Enrolment Male: 1516-1.8%. Female enrolment: 2524-3.5%. Health: Number of hospitals: 1 with 104 beds; Number of dispensaries: 17; Number of doctors: 56; Number of RHCs: 3; Number of BHUs: 17.

2.5 Monitoring & Evaluation

Process and Progress Monitoring

For secondary data sources, statistical quality control measures were put in place, particularly at the program and district levels, to enhance the process of monitoring and quality assurance. SDPI through its M&E team made rigorous analysis of the selection and supervision of the field staff; the training imparted to the field teams; and enumeration in the field including quality control. The monitoring team ensured that all missing information and errors were communicated well in time to the concerned for course correction.

Monitoring and Evaluation Tools

As part of the M&E strategy and plan, regular field monitoring visits and feedback to the staff was held. Quality assurance spot checks were undertaken. The survey staff was required to report on all proceedings in daily activity sheet and share them with the Survey Coordinator. Once the primary data was completed, the data collection was physically verified.

3. Programme Wise Findings of User/Beneficiary Satisfaction Survey

3.1 Socioeconomic Profiles of Beneficiary/Households

A total of 4344 beneficiaries, 52% male and 48% were female surveyed across 8 districts. 16% beneficiaries were from the age of (18-25), 32% were (26-35), 17% were (36-42), 20% were (51-58) and 17% were 58 above.

The majority of respondents (53.7%) never went to school, while 11% were Primary educated and 11% were Metric educated. Regarding the marital status of respondents, 86.2% of respondents were married whereas 11.9% were single. (See Annexure-II)

As for household income, 32.1% respondents were in the range of PKR 5001-10000, 25.7% respondents in the range of PKR 0-5000 while 21.4% were in the range of PKR 10001-15000. The data clearly shows that vast majority of the respondents belong to the lower range of incomes.

92.7% respondents owned their houses while only 4.6% were on rented accommodation. In relation to the house structure, 73.2% of respondents had a katcha house structure and 10.6% were living in a pakka house structure while 16.3% of respondents were living in a mix of kacha and pakka house structure.

With regard to the occupation of respondents, 33.9% of respondents were housewives, 13.4% were farmers while 14.3% provided services for a living. The rest were a combination of livestock, fisheries, government services etc.

Table-6: Overall socioeconomic characteristics of beneficiaries

Education								
	Primary	Middle	Metric	Intermediate	Graduation	Master	Never Went to School	Religious Education/Madrassa
Total	11.0%	8.7%	11.0%	6.4%	3.9%	2.5%	53.7%	2.8%
Age								
	18-25	26-35	36-42	43-50	51-58	59-66	67-74	75-82
Total	16%	32%	17%	20%	7%	4%	3%	1%

Marital Status							
	Single		Married		Divorced	Widowed	Separated
Total	11.9%		86.2%		0.7%	1.2%	0.0%
Household Income							
	0-5000	5001-10000	10001-15000	15001-20000	20001-25000	25001-30000	More than 30000
Total	25.7%	32.1%	21.4%	9.7%	4.5%	3.6%	3.1%
Household Ownership							
	Own House	Rented	Subsidized Rent		Sharing	Sharing	Free
Total	92.7%	4.5%	0.4%		1.6%	0.9%	0.0%
Household Structure							
	Katcha				Pakka		Mixed
Total	73.2%				10.6%		16.3%
Occupation							
Farming		13.4%	Government Servant		3.3%	Looking for Work	3.5%
Livestock		7.0%	Private Employee		2.7%	Housewife	33.9%
Fisheries		1.2%	Farm Home Help (Paid)		0.9%	Retired	4.1%
Agriculture(Wage Labor)		5.0%	Farm Home Help (Unpaid)		0.0%	Small Enterprise/Grocery Shop	7.0%
Agriculture (Self Employed/Own Land)		1.6%	Student		2.0%	Services (Tailor, Carpenter, Beauty Parlor, Driver)	14.3%

3.2 Key Findings of Programme for Poverty Reduction (PPR)

This section presents the user and beneficiary satisfaction assessment from PPR interventions as perceived by the (intended) beneficiaries in selected districts of Khyber Pakhtunkhwa and Balochistan. The survey aimed to obtain people's perspective on the benefits of the multiple interventions under PPR that are discussed below.

3.2.1. Social Mobilization

Formation/Revitalization of Community Institutes

Social mobilizers are playing a key role in resolving local issues through community meeting and collective decision making. Respondents of households stated that this provides them a platform where they can bring forward their local issues and find communal solutions for them accordingly. This also serves the purpose of being useful in terms of trust building among the community. Apart from this, social mobilizers form linkages with local and district governments. Respondents argued that they can now better communicate their problems towards local government which helps them in resolving local issues.

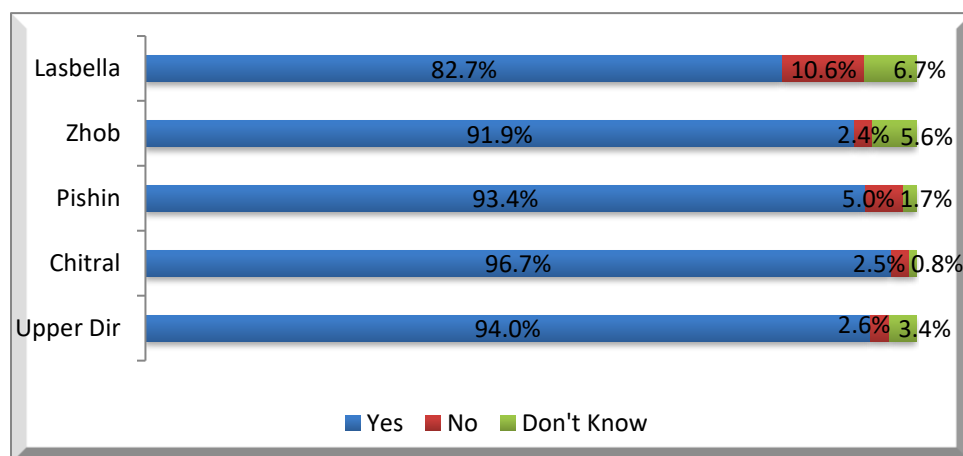


Figure-2: Empowerment of local communities through community institutes

In terms of the district wise results, almost 96% (n=118) respondents in Chitral, 94% (n=110) in Upper Dir and 93.4% (n=113) in Pishin reported that local communities have been empowered through formation and strengthening of community institutes. Whereas, 57.9% (n=70) respondents in Pishin and 32.5% (n=38) in Upper Dir termed that these interventions are extremely successful. Apart from this, 99.2% (n=120) respondents in Chitral and 97.5% (n=118) in Pishin stated that they are actively participating in community organization activities. An important observation was that respondent's own understanding regarding civic responsibility had also improved. There was a sense of urgency for initiative and sustainable change at an individual level as a result of the interventions.

Enhancing the Capacity of Community Institutes

Beneficiaries highly regarded the capacity building of local organizers done through trainings which help them in dealing with local challenges. Capacity building on community management or leadership skills training, community resource persons and women leadership training were among the maximum number of trainings obtained by social mobilizers. 99.8% respondents (n=483) said that the trainings were useful. A respondent reported in FGD that "trainings helped me in better management of community meetings and record keeping".

A female respondent told in FGD that "leadership training assisted me to work for raising awareness regarding women's role in the society". 95.1% (n=116)

respondents in Chitral and 87% (n=87) in Lasbela stated that they also helped other people in developing local committees. These committees are known for dealing with issues related to health, education disaster management, infrastructure and livelihood support.

Women Empowerment

The data reveals that women's role in community development increased after the training interventions. 99.2% (n=121) in Pishin, and 89.5% (n=94) in Lasbela said that training helped in this regard. Not only this but women's role in decision making also improved as 98.3% (n=118) in Pishin and 92.9% (n=78) in Upper Dir said that male are now realizing about importance of women's role in family decision making. Also, the team was informed that women were now able to better communicate at a household level how they could be more productive members and support male members in, for example, economic and livelihood activities.

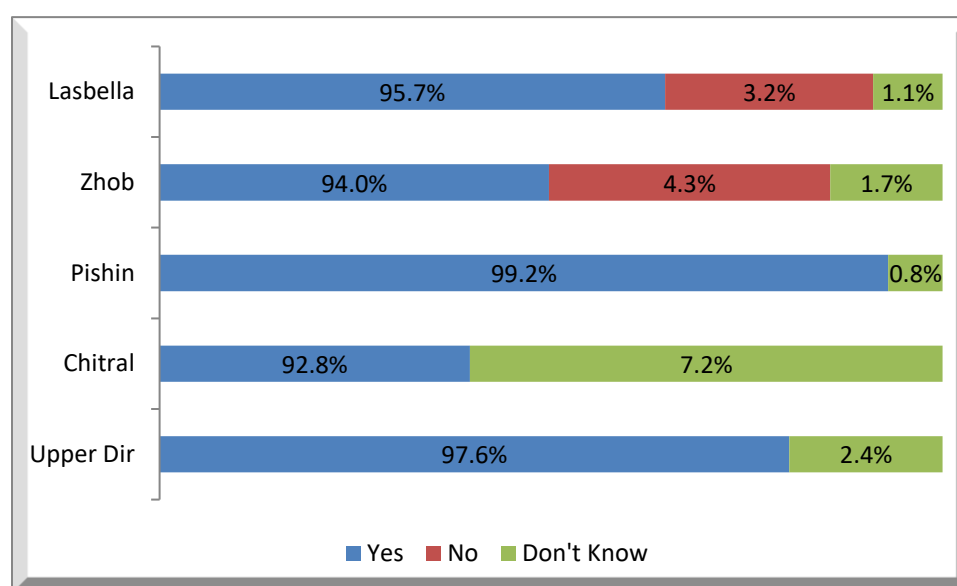


Figure-3: Increase in community management & leadership capacities of women

99.2% (n=119) respondents in Pishin and 97.6% (n=83) in Upper Dir said that training helped to improve community management and leadership capacities of women who are part of community institutes. A key success here was to actually convince the women to be part of such interventions and remain so during the length of the activity.

Table-7: Interventions for empowerment of local women

	Upper Dir	Chitral	Pishin	Zhob	Lasbela	Total
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Increased representation in the Executive Body of Village and Union Council Based Organization (LSO)	20.7%	8.7%	22.8%	30.4%	17.4%	100%
Increased membership of women in community institutions	22%	45.6%	9.6%	10.5%	12.3%	100%
Increased access to public services by women	25.5%	37%	15.7%	11.8%	9.5%	100%
Increased business/income generation activities by women	31.3%	32.8%	12.5%	8.6%	14.8%	100%
Increased value of women's work at family and community level	17.7%	21.9%	20.5%	17%	22.8%	100%
Improved decision making at household level	25.0%	34.8%	12.9%	10.6%	16.7%	100%
Improved decision making at community level	21.2%	40.4%	15.4%	7.7%	15.4%	84.70%
Decrease in domestic and community level violence against women	17.1%	34.3%	8.6%	5.7%	34.3%	100%

Respondents highlighted that interventions under social mobilization transformed the role of women in the family and overall society. It was pointed out during FGDs that women's representation in local organizations increased after these interventions were introduced and now there is a greater number of women in these organizations. This helped in resolving women specific issues as women are more comfortable in discussing their issue among themselves instead of any male person. This also tackled the cultural barriers that were previously faced by women such as going outside of their homes. It was identified that women are now more actively participating in economic activities which increased their household income and along with their decision-making power at community level.

Key challenges

The respondents pointed out that there still are lot of challenges being faced by the community mainly due to lack of awareness and basic education among people. Cultural barriers restrict the women's role in society and decision-making power which includes reasons like still having lower representation in community institutes and women's going outside their home. The situation worsens because of the lack of willingness among people to participate in resolving social issues. Furthermore, lack of appropriate trainings such as need of more awareness trainings is also identified by the respondents as a barrier to addressing local challenges.

3.2.2. Livelihood Enhancement and Protection Program

Livelihood Enhancement and Protection Program was divided into two components. One was Skill development covering training part where total sample covered was 326 with 52.1% (n=170) male and 47.9% (n=156) female. Whereas other

component was Asset transfer having total sample of 310 out which 55.8% were male (n=173) and 44.2% were female (n=137).

Skills Development

Respondents reported that skills training helped them earning more income than before. During FGD they pointed out that training played key role in their capacity building and they are more efficient now.

Total of 96% (n=313) of the respondents attained skill training²⁵. Out of the ones who attained training 40.1% (n=125) of the respondents were extremely satisfied with the training contents while 42.5% (n=134) were extremely satisfied with the duration of the training.

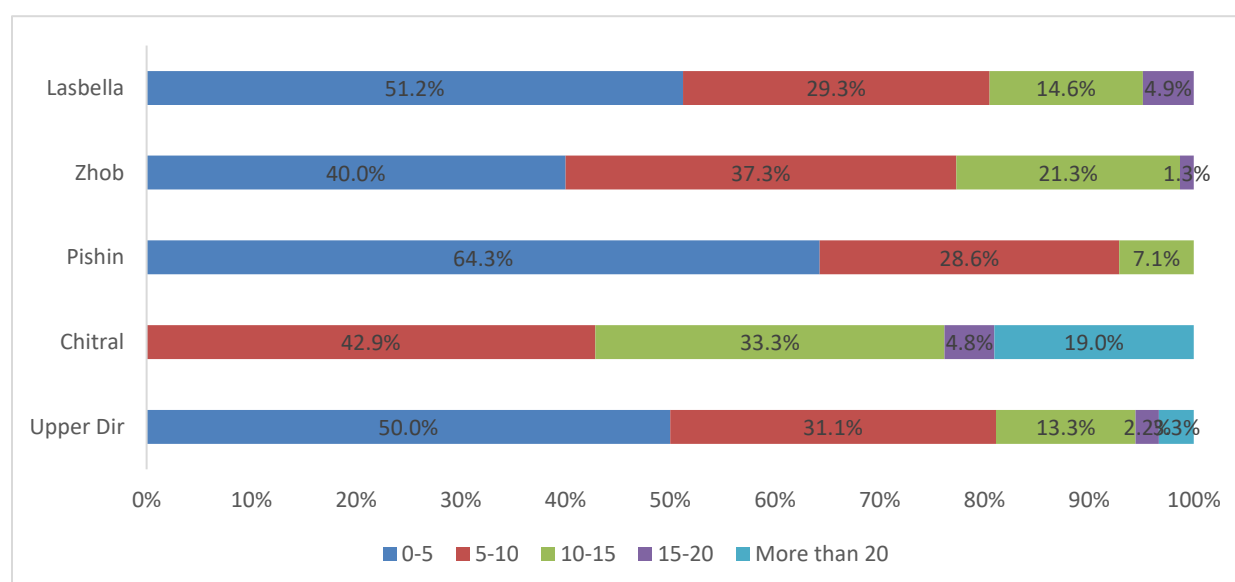


Figure-4: Increase in income through skills training

19% (n=4) respondents in Chitral stated that more than 20% increase in income was observed with the help of trainings received under PPR. 4.8% respondents each in Chitral (n=1) and Lasbela (n=4) pointed out that their income increased by 15-20% after training. During FGDs respondents told that they learned new methods and techniques from trainings and are now implementing these skills in their daily work. The additional income is being spent on food, health, education and fulfilling electricity requirements. One respondent mentioned that with the help of increased income, he can now afford the schooling expense of his children. A woman said that through increased income she has purchased another sewing machine which generates further income.

Women Empowerment

²⁵ For detail satisfaction please refer to Annex-IV.

Trainings also increased the women empowerment as women are utilizing the knowledge to become economically active. 74.6% respondents (n=156) said that husbands were supportive towards women in receiving these training. 75.5% respondents (n=157) reported that husband or other family members involved in business follow their advice. 96.5% (n=82) women in Lasbela and 89.7% (n=87) in Upper Dir reported that their decision-making power has increased after they received the skill training. The study by Chaudhry et al. (2012)²⁶ explained that economically empowered women play an active role in decision making. It was highlighted that there is lack of higher education among women and they cannot work outside their home due to cultural issues but training has equipped them with necessary vocational skills to support themselves and their family. Now not only they are supporting their male household members but also their role in decision making within the household has increased. As far as future trainings are concerned, it was told that trainings such as computer related, sewing and tailoring should be provided.

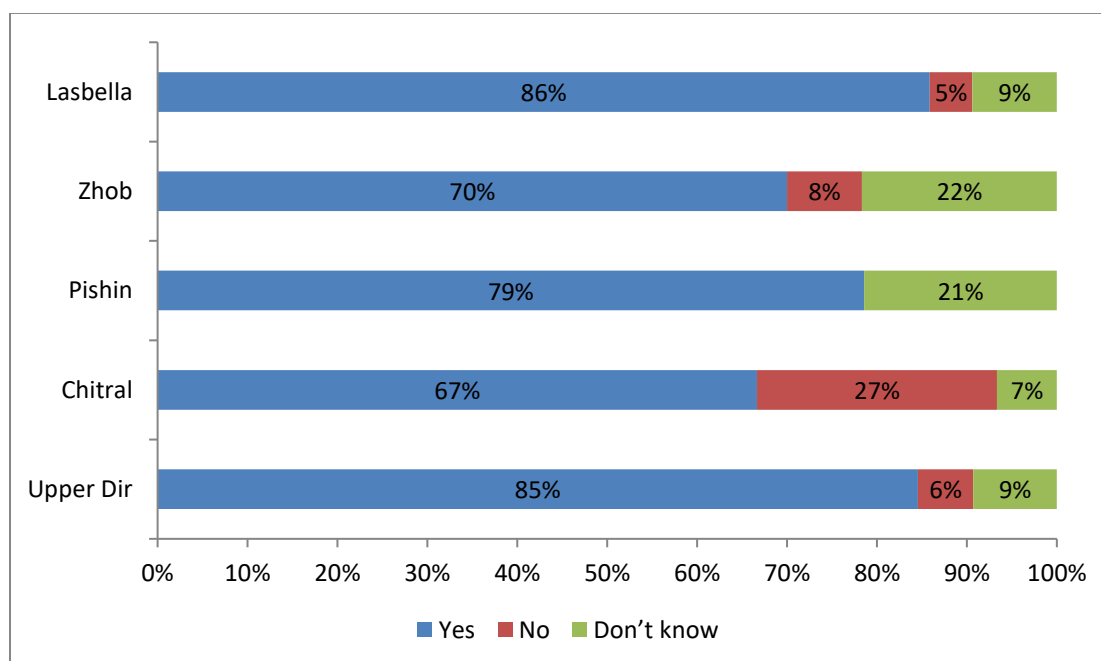


Figure-5: Increase in decision making through economic empowerment

Asset Transfer Scheme

Overall, 58% respondents (n=179) were extremely satisfied with the type of asset provided to them while 56% (n=173) respondents were extremely satisfied with the quality of asset. Similarly 54% (n=167) respondents were extremely satisfied with the usefulness of the asset and 53.2% (n=165) were extremely satisfied with the procurement process. 71.1% (n=217) reported that increase in asset base occurred due to provision of productive asset.

²⁶ Chaudhry, I. Nosheen, F. and Lodhi, M. (2012) 'Women Empowerment in Pakistan with Special Reference to Islamic Viewpoint: An Empirical Study' Pakistan Journal of Social Sciences, Vol. 32, No. 1

Increased income opportunities

Majority of respondents stated that their income level increased considerably with the use of provided assets which mostly are related to livestock and trading assets. It was explained that through livestock assets beneficiaries are having more food supply and income level while trading assets also increases earnings than before.

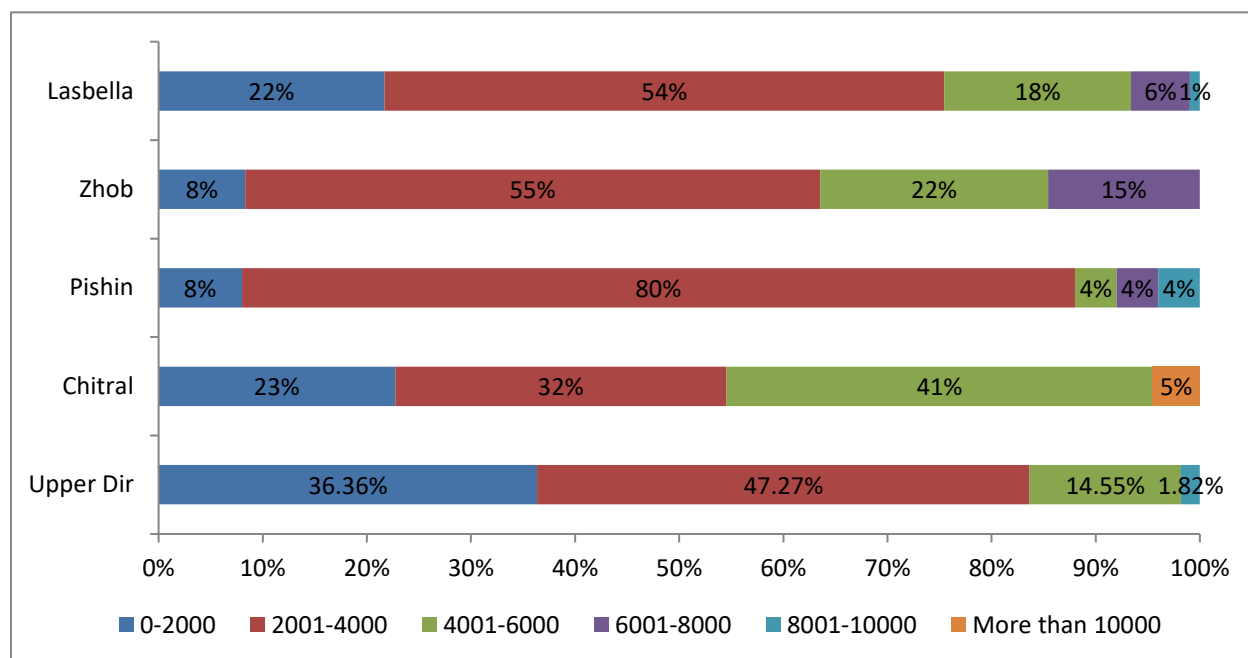


Figure-6: Average increase in household income

40.9% (n=9) respondents in Chitral, 21.9% in Zhob (n=21) and 17.9% respondents in Lasbela (n=19) reported that their household income increased approximately within the range of PKR 4000-6000. A female respondent during FGD stated that with the help of sewing machine she is earning for her household and very satisfied with her contribution towards her family and children. A respondent said that he received grocery items for his shop as an asset which increases his daily sales. Another respondent said that he purchased new school shoes for his child.

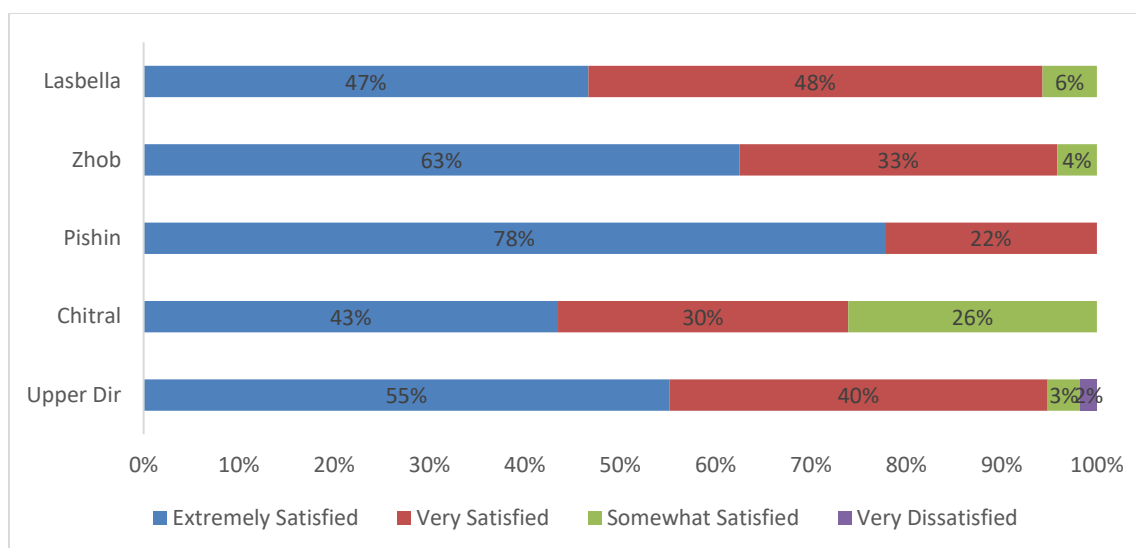


Figure-7: Satisfaction with quality of asset

overall 56% respondents are extremely satisfied while 36% respondents are very satisfied with the quality of assets. 77.8% (n=21) respondents in Pishin, 62.5% (n=60) in Zhob and 55.2% (n=32) respondents in Upper Dir rated their satisfaction level as extremely satisfied with the quality of asset While their satisfaction is based on having more income through the asset.

Key Challenges

Beneficiaries are very pleased with the asset transferred under PPR, however, the cost to maintain asset once its provided falls on the beneficiary. In case of livestock, beneficiaries told that they face vaccination issues.

3.2.3. Community Physical Infrastructure

Under Community Physical Infrastructure (CPI) programmes such as Drinking Water Supply Scheme (Total Sample: 224, Male: 55.4% (n=124) and female: 44.6% (n=100)), Flood Protection Wall (Total Sample: 52, Male: 57.7% (n=30), Female: 42.3% (n=22)), Roads and Bridges (Total Sample: 202, Male: 51.5% (n=104), Female: 48.5% (n=98)), Delay Action Dams (Total Sample: 55, Male: 63.6% (n=35), Female: 36.4% (n=20)), Drainage and Sanitation (Total Sample: 22, Male: 54.5% (n=12), Female: 45.5% (n=10)), Irrigation (Total Sample: 214, Male: 59.8% (n=128), Female: 40.2% (n=86)) and Renewable Energy (Total Sample: 54, Male: 57.4% (n=31), Female: 42.6% (n=23)) were covered.

Drinking Water Supply Scheme

Water Accessibility

The major source of drinking water scheme identified by the respondents was tap water and water storage tanks. While previously nearby lake and water tanker were major sources previously. During FGD, respondents mentioned that these water schemes have provided them with clean drinking water, free from any contamination. As per UNICEF (2008)²⁷ report, insufficient supply of water, poor water sanitation and hygiene are major reasons for water related diseases. They further added that prior to the scheme, they relied on other water resources that resulted in water shortages from time to time but now their problem has been resolved with continuous supply of clean water.

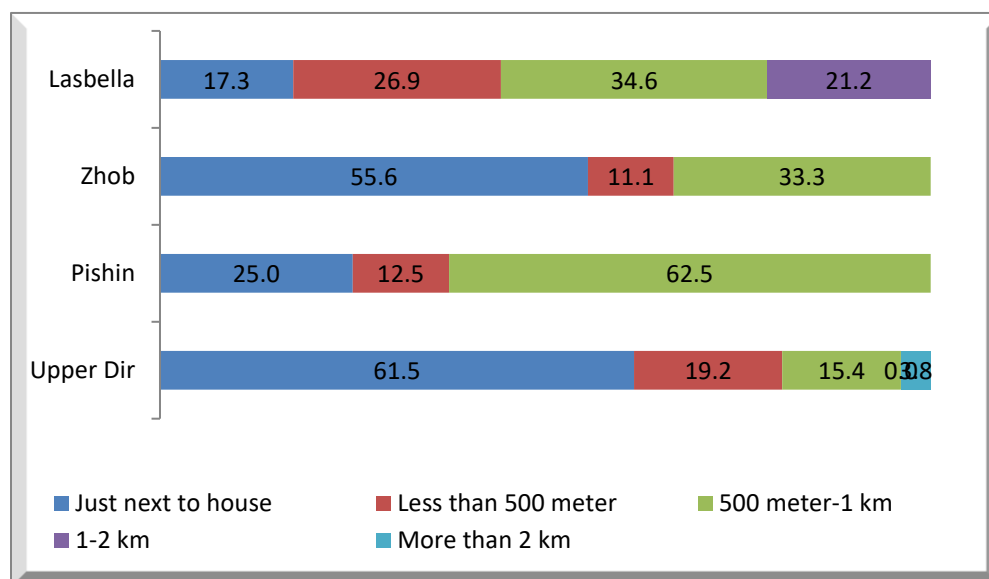


Figure-8: Distance to current water source

Respondents stated that their access to clean drinking water has increased remarkably as compared to previous water sources. 61.5% (n=16) respondents in Upper Dir and 55.6% (n=5) respondents in Zhob said that existing water scheme is just next to their house which saves them time and effort to fetch water. Whereas prior to this, 15% respondents in Lasbela (n=12) and 13.5% respondents in Upper Dir (n=10) said that they had to travel 1-2 km to fetch water. Women especially, were more satisfied that their physical labour has reduced after the provision of water facility near their homes. This is due to the fact that women have to spend more time in storing and fetching water as compared to men. The same is observed by Khan and Javed (2007)²⁸ which stated that water fetching is being done mostly by women in the rural areas of Pakistan. 84.5% (n=71) respondents in

²⁷ UNICEF. 2008. UNICEF Handbook on Water Quality. New York: UN Plaza, 118 - 119

²⁸ Khan, F. and Javed Y (2007) 'Delivering access to clean drinking water and adequate sanitation in Pakistan' PIDE working papers 2007:30

Upper Dir, while 70.2% (n=40) in Pishin and 61.2% (n=52) in Lasbela reported that women are responsible to store and fetch water.

A female respondent during FGD discussed that “she and her other neighbouring women have to fetch water at regular intervals due to which most of them get too tired to do household chores. However, the location of current water scheme near their homes helped them to overcome this issue and their health and quality of life has improved drastically”. Furthermore, 41.9% (31) respondents in Upper Dir and 40% respondents in each (n=24) Pishin and (n=4) Zhob were extremely satisfied with the accessibility of water supply scheme.

43.2% (n=32) respondents in Upper Dir and 33.3% (n=20) respondents in Pishin were extremely satisfied with regular supply of water in their locality. During FGD respondents pointed out that lake water has depleted over the last few years and they have to face water shortage from time to time. The study by BUITEMS and UNDP (2015)²⁹ pointed out that metrological drought in Balochistan reduced water resources. This has now been resolved as existing water supply scheme ensured sufficient stable supply of water and that’s very near their house.

Table-8: Satisfaction level with regular water supply

	Extremely satisfied	Very satisfied	Somewhat satisfied	Somewhat dissatisfied	Very dissatisfied	Extremely dissatisfied
Upper Dir	43.2%	50.0%	1.4%	5.4%	-	-
Pishin	33.3%	43.3%	18.3%	5.0%	-	-
Zhob	10.0%	10.0%	50.0%	30.0%	-	-
Lasbela	15.0%	26.3%	30.0%	10.0%	10.0%	8.8%

Economic Benefits

Overall, 65.2% (n=146) respondents stated that they are paying no fee for water facility in their locality. They are satisfied to have water supply free of cost which helps them in saving expenses. In Lasbela, 86.3% (n=69) while in Zhob 70% (n=7) respondents are having water supply free of cost. During FGD, respondents said that having water scheme in their locality is very beneficial in terms of both expenditure and time savings.

²⁹ BUITEMS, UNDP (2015) ‘Drought risk assessment in the province of Balochistan, Pakistan’ Balochistan University of Information Technology, Engineering & Management Sciences and United Nations Development Programme



Figure-9: Payment for water facility

Similarly, it was informed that with ground water level decreasing rapidly, it was not possible to rely and get enough water through tube well and hand pump. As a result, they have to rely on other sources including water tanker. However, water tankers are costly. 60.3% (n=135) respondents reported that they are paying for operation and maintenance committees to ensure regular maintenance of infrastructure. Overall, 89.3% (n=198) respondent reported that they have now access to clean drinking water because of water scheme. With the provision of clean drinking water, less water borne diseases are observed (88.4%, n=198) and as a result less expenditure on health are to be realized (86.2%, n=193). According to Pakistan Demographic and Health Survey, 18.1% children in rural areas of Balochistan are affected with diarrhoea (PDHS, 2017-18) due to contaminated water.

Key Challenges

It was highlighted by the respondents that water facilities are not available as per the requirements of the population, especially this issue was pointed out in Pishin and Lasbela. With the growing needs of rising population and stagnant water resources, they have to face water shortage from time to time.

Respondents in Dir and Lasbela said that they have seasonal availability of clean drinking water as rain and flood affect the quality of water. It was also informed by people in Lasbela that there exists shortage of hand pumps as existing number of hand pumps are not sufficient to fulfil water requirements. On the other hand, some of the hand pumps are out of order which makes the situation even worse. Respondents in Dir also reported that land sliding damaged the plastic pipe which needs to be replaced.

People in Zhob and Lasbela argued that there is lack of water storage tanks in their locality due to which supply of water is disturbed. It was also mentioned that the

water connection is far from home and women have to cover long distance to collect water.

Flood Protection Wall

Damage Control

With regard to the benefits of Flood Protection Wall, 36 respondents specified damage control to houses of which 75% of respondents (n=27) were from Chitral and 25% respondents (n=9) were from Zhob. 28 respondents identified damage control to agriculture land as the main benefit achieved from flood protection wall provision of which 68% respondents (n=19) belonged to Chitral and 32% respondents (n=6) were from Zhob. 7 respondents reported clean drinking water supply as their benefit with 86% respondents (n=6) from Zhob and 14% respondents (n=1) from Chitral. 2 respondents both of whom belonged to Zhob indicated less disease spread while 3 respondents from Chitral stated less injury/loss of livestock as their main benefits achieved from provision of flood protection wall.

The FGDs revealed that the local population was now at ease, psychologically, after realizing that the threat to the lives of their children and livestock was contained clearly illustrating the increase in the quality of life of the beneficiaries and their riddance of these basic human security problems that were a hindrance to their social and economic development.

Before Provision of Flood Protection Wall

In relation to natural calamities, specifically floods, 69% of respondents (n=36) stated that floods affected their households before the provision of Flood Protection walls.

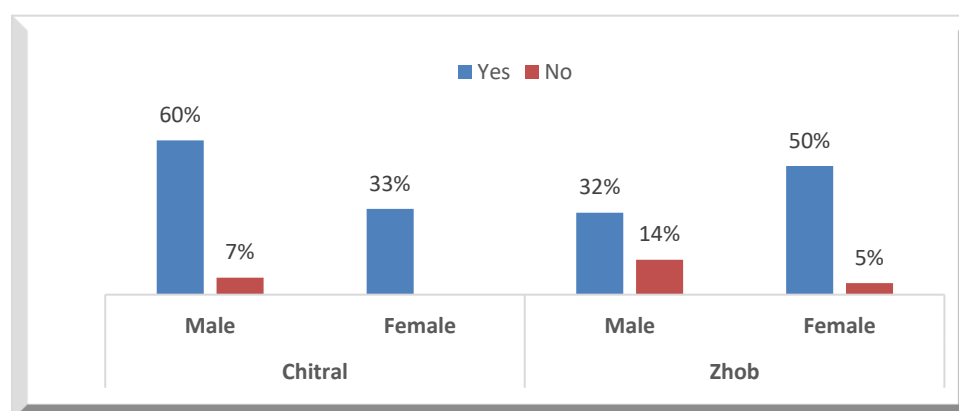


Figure-10: Percentage of flood affected households

As for damage to property, 69% of respondents (n=36) stated that they experienced damage to household property and 12% respondents (n=6) added to that with wastage of agriculture land and crop. 6% of respondents (n=3) identified wastage of agriculture land and crop as the main type of damage occurred due to floods while

the rest chose multiple options, such as the loss of human life and livestock and injury to human life and livestock.

As discussed in the FGDs, the locals faced severe social, economic and environmental consequences. They experienced damage to property, destruction of crops, loss of livestock and deteriorating health conditions due to water borne diseases in the flood season. Communication links and infrastructure were damaged and disrupted, many economic activities came to a standstill and affected people were forced to leave their homes. The traumatic impacts of floods were also discussed, such as victims and their families being displaced from their homes, loss of property and disruption to business and social affairs also being the cause of continuous stress, especially in the case of loss of lives.

Benefits of Flood Protection Wall

The FGDs also uncovered that the sampled households were primarily dependent on agriculture in terms of employment. The vast majority, 86% of respondents (n=46) replied positively that the flood protection wall increased the area of cultivated land while only 12% of respondents (n=6) stated the contrary. This demonstrates quite clearly the effect this provision has had on agricultural land and subsequently a positive impact on the economic and social conditions of the locals.

48% of respondents (n=22) specified a 5-10% increase in cultivated land, 28% of respondents (n=13) identified a 11-15% increase in cultivated land while 15% respondents (n=7) stated they experienced less than 5% increase in cultivated land.

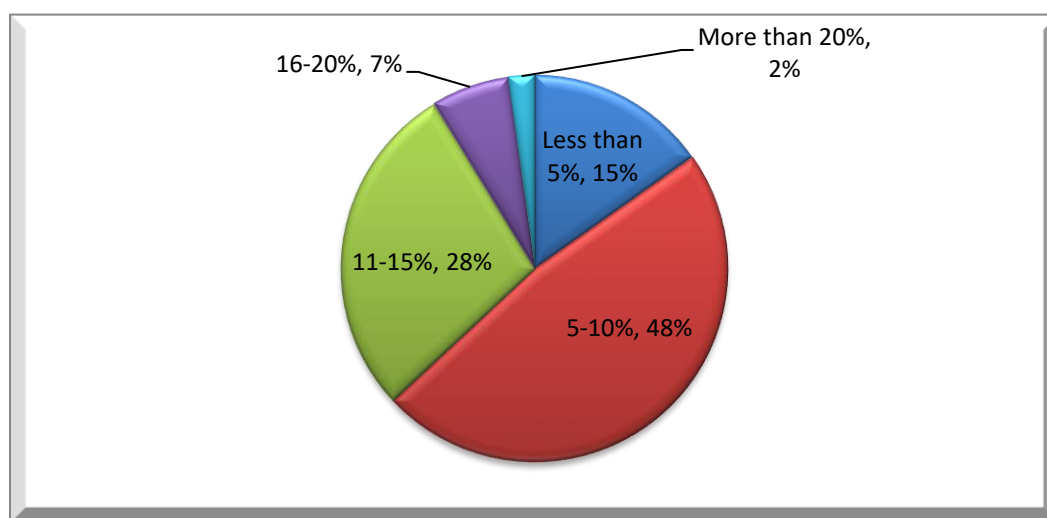


Figure-11: Change in cultivated land

Regarding the efficacy of the cultivated land, 67% respondents (n=35) stated they are growing more crops than before suggesting that the agricultural yields in this area has also increased due to less land now being damaged and waterlogged and increased fertility.

As for economic benefits, 48.1% of respondents (n=25) identified a 5-10% increase in earnings, 26.9% respondents (n=14) reported an 11-15% increase while 6% of respondents (n=3) stated an increase of more than 20% in their earnings. The most serious damage caused by flooding is the widespread deposition of sand. This increase can be explained by the newly established floodplains and wetland systems that help foster new economic possibilities and better utilization of land as can be seen in the following figure (See-figure-12).

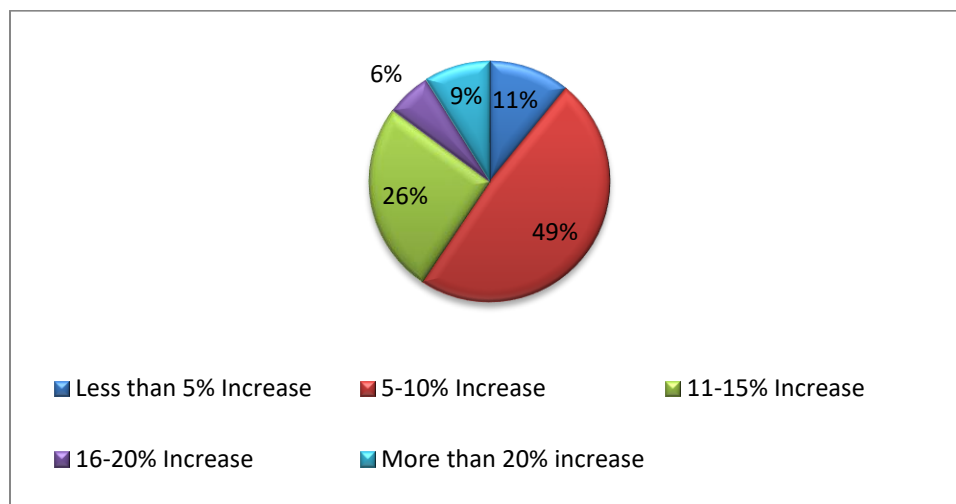


Figure-12: Increase in Beneficiary Earnings after Construction of Wall

The locals also realized that this program will help encourage community self-determination and enhance co-operation among PPR beneficiaries and the community. This increase in earnings was also consequently linked to their increased participation in the program that guarantees people's needs are identified and considered. Subsequently, a sense of responsibility and ownership was nurtured in the community. More importantly, it enabled people to gain a deeper understanding of the nature of constraints that might act as a hurdle in their escape from poverty and their path to socio-economic development.

Operation and Maintenance

Regarding operation and maintenance, 75% of respondents (n=39) indicated that they participated in operation and maintenance of protection. The high susceptibility of the locals to floods is also a key factor that led to such a high participation level in the program. However, it is hard for communities to contribute towards operation and maintenance of flood protection walls with limited resources, thus, leaving them unable to maintain infrastructure resulting in the wall being damaged in some areas.

Requirement of more Flood Protection Wall

An overwhelming majority, 98% of the respondents (n=51) stated that they require more flood protection walls in the locality, as it is necessary and imperative measure

for risk mitigation in case of natural disasters. It is evident that floods are one of the major problems that make this locality highly vulnerable because they inflict substantial damage upon the local economy, infrastructure, environment and property (Liz Tomas). More importantly, this also suggests that the provision of flood protection walls is a highly reliable provision that has greatly impacted the lives of the locals by securing and guaranteeing the protection of their families and livelihood to a great extent.

Some valuable feedback included suggestions such as the strengthening of local social organizations and instruments as an approach of controlling overgrazing and deforestation, using hazard maps to ensure that houses, animal shelters and crops are not in flood prone areas. The locals insisted that this information should be disseminated simultaneously with flood protection walls in reducing risk and ensuring safety.

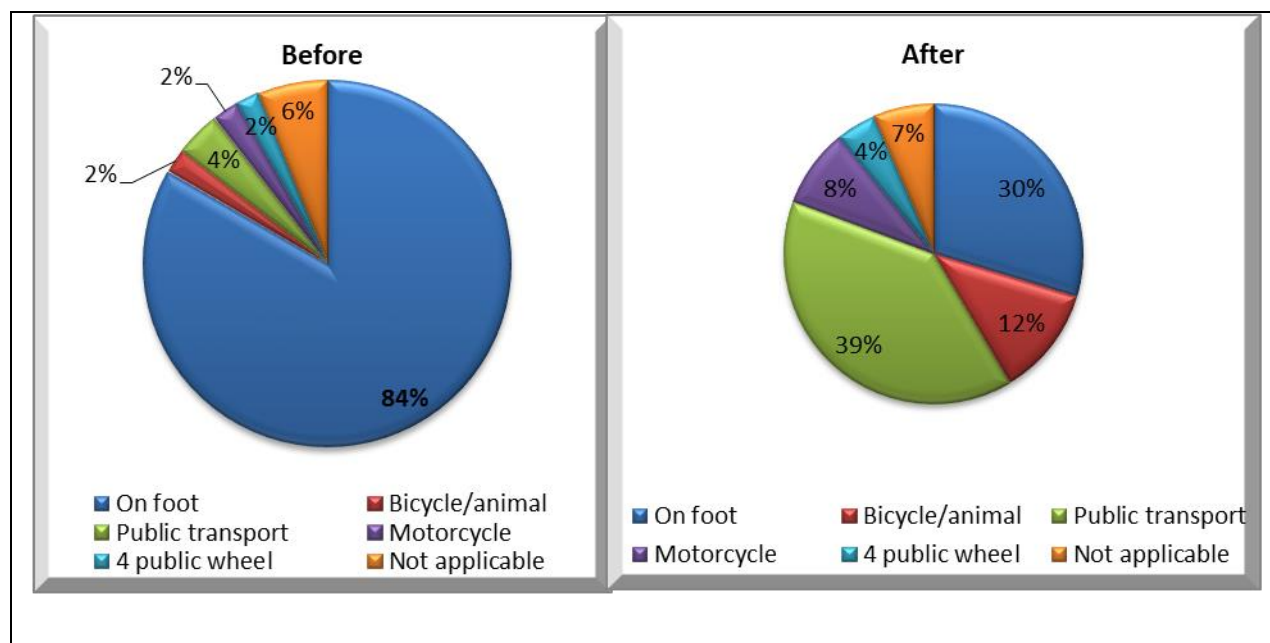
Roads & Bridges

PPAF under PPR has made notable investment in infrastructure such as roads and bridges in Khyber Pakhtunkhwa and Balochistan. Overall 202 respondents were sampled across four districts, Upper Dir (79), Chitral (69), Zhob (33) and Lasbela (21) for the assessment of roads and bridges.

Access to Basic Services

86% (174) of the respondents regarded roads as their primary route whereas the remaining 14% (n=28) regarded it as their secondary route. During FGDs, participants highly appreciated the intervention as it provided them with better access to markets and enhanced their mobility. For the majority of the beneficiaries, most activities previously involved traveling by foot to fulfil their needs and to use of basic facilities such as hospitals, although some minor transport systems were used such as bicycle, animal transport, public transport, and motorcycle.

Considering the main uses of roads and bridges, the average change in time taken to access resources has been directly affected as illustrated in Box-4 below. To access water, 69% (n=140) of the respondents reported having to travel by foot. For schools, 96% (n=193) of the respondents stated that they had to access schools by foot, previously. To visit hospitals and government departments, while majority of beneficiaries did rely on walking, around 11% (n=22) relied on public transport. Thus, the provision of roads has worked to greatly enhance the use of other modes of travel especially for public transport that increased from only 48 users (in the sample) to 475 and recorded the highest increase in use after the completion of the road. Similarly, bicycle and animal use (donkey carts) also significantly increased from 26 to 143 users whilst motorcycle use also increased from 28 to 103 users.



Box-1: Increase of other modes of transport after construction of road

A great reduction in the amount of time taken was noted after the construction of roads and bridges as access to public transport facilities to increase. The distance in the amount of time taken is illustrated in Figure 13 below. The most difference was between 1 to 20 minutes long, however, as water was readily available for a number of villages, no such difference in time was noted.

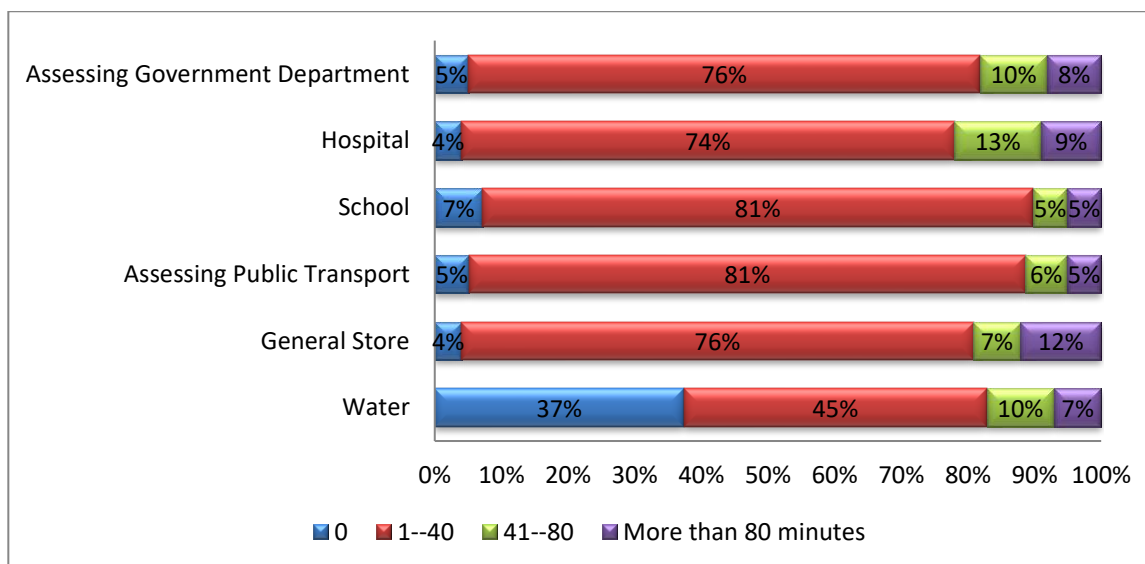


Figure-13: Difference in time taken to access facilities and needs

According to the majority of the beneficiaries, use of roads and bridges has many benefits for them as shown in the figure-14 below. 94% (n=190) reported increase

in timely access of services that were out of their reach previously. 89% (n=180) reported an increase in leisure time, 92% (n=186) reported better access to health facilities whereas 92% (n=185) had better access to education facilities. 86% (n=173) experienced better farm outputs and lastly, 83% (n=167) had an increase in their income.

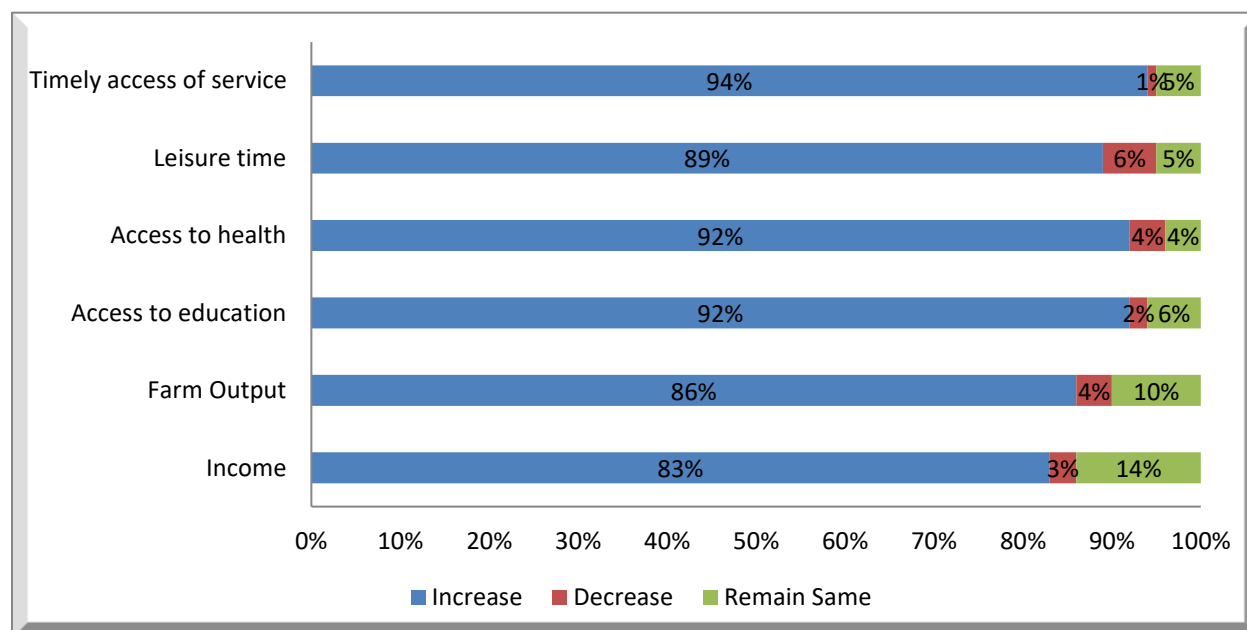


Figure-14: Impact of road in access to services

Delay Action Dams

The delay action Dams project was undertaken in Zhob and consisted of 55 respondents. 64% of respondents (n=35) were Male while 36% respondents (n=20) were Female

Damage Control

93% of respondents (n=51) stated Delay Action Dam (DAD) help protect the community from water related calamities. Flooding massively impacts District Zhob, excess rain causes a rise in the water level and floods the nearby lands making them unusable for agriculture and life threatening for livestock and humans. The provision of DAD has minimized the chances of flooding in that specific region and given the locals some sense of security making the lands reusable again. The FGDs also discovered that the local population was at ease, after realizing that the threat to the lives of their children and livestock was now limited and frequent migrations that

used to occur due to floods were now avoided, clearly demonstrating the improvement in the quality of life of the beneficiaries.

Irrigation Schemes

67% respondents (n=37) specified they have efficient irrigation schemes in the locality that were previously provided by the PPAF. In a sub-question regarding the type of intervention that existed 42.5% respondents (n=17) stated Water Course Lining, 32.5% respondents (n=13) chose Pipe Irrigation and 15% respondents (n=6) specified sprinkler as the main type of intervention while the rest indicated multiple options.

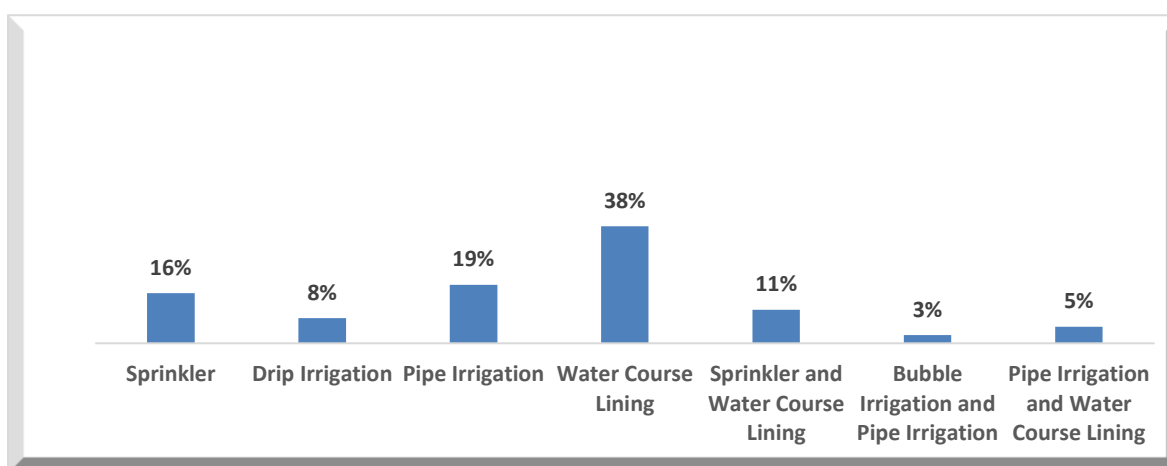


Figure-15: Type of interventions existent

Regarding the benefits of irrigation schemes, 69.1% of respondents (n=38) indicated that irrigation schemes are contributing towards ensuring water for agriculture usage while 31% respondents (n=17) stated it helped reducing water wastages.

Furthermore, 55% of respondents (n=30) stated they were very satisfied while 38% respondents (n=21) indicated they were extremely satisfied. With Zhob now being water scarce suffering frequent cycles of drought, it is evident that the people are satisfied with these irrigation schemes because they help improve the management of the existing scarce water resources. However, the locals stated that advocacy and outreach in the locality was still needed to raise awareness and educate people regarding the conservation of water.

Benefits of Delay Action Dam

25.5% of respondents (n=14) stated that increase in irrigated area was one of the main benefits to their locality. The FGDs revealed that since the local economy of Zhob is primarily dependent on agriculture for livelihood, wastage from rapid flow of water has been curbed and proper use of water through slow water discharge and temporary water storage has improved their productivity. Whereas, 31% respondents (n=17) indicated that the construction of Delay Action Dam (DAD) helped recharge their aquifers. 38% respondents (n=21) highlighted temporary

water storage and slow water discharge as the main benefits to their locality while the rest of the respondents chose multiple options.

As for the ground water table, 96% respondents (n=53) stated that DAD indeed has increased the ground water table. Initially groundwater use in this area was very nominal but now it has been extracted almost to depletion. The rise in ground water table has allowed the locals easier access to fresh water for their livestock, personal and agricultural use and restrained them from over exploiting other sources of fresh water.

Table-9: Delay Action Dam Increased Ground Water Table

	Count	Percentage
Yes	53	96%
No	2	4%

95% respondents (n=52) specified they have rainwater harvesting ponds in the locality. In a sub question 84% respondents (n=46) stated that ponds help store rainwater while the rest chose a combination of multiple options such as Provision of Drinking Water and Usage of Livestock.

Demand for more

An overwhelming majority 98% of respondents (n=54) admitted they require more Delay Action Dams as it is an essential measure for risk mitigation. Floods in this locality cause substantial damage on the local economy, infrastructure and property. Thus, building more dams and water tanks for clean water storage along with additional irrigation schemes. The FGDs further discussed other social instruments such as the use of hazard maps to ensure that houses, animal shelters, and crops are not in flood prone areas until further DADs are built.

Drainage and Sanitation

Cleanliness improvement

Drainage interventions were conducted to ensure a basic sanitation system. Regarding the housing structures, 91% (n=20) of the beneficiaries reported having 'Katchay' or unbuilt houses with the remaining 9% (n=2) stating they had 'Pakkay' or built houses.

The survey results indicated that 95% (n=21) were fully satisfied with the installation of the basic drainage and sanitation services. Sewerage and sanitation systems were the only facilities that were built as reported by all beneficiaries.

Beneficiaries agreed positively to all three categories of improvements in the communities as seen in Figure 16. Only 4% beneficiaries said that there were no economic benefits, whereas 82% agreed that the sanitation system had brought economic benefits to the locality. Moreover, 73% claimed disease control had improved with 14% stating it had not. Finally, 86% stated cleanliness had improved while 14% disagreed.

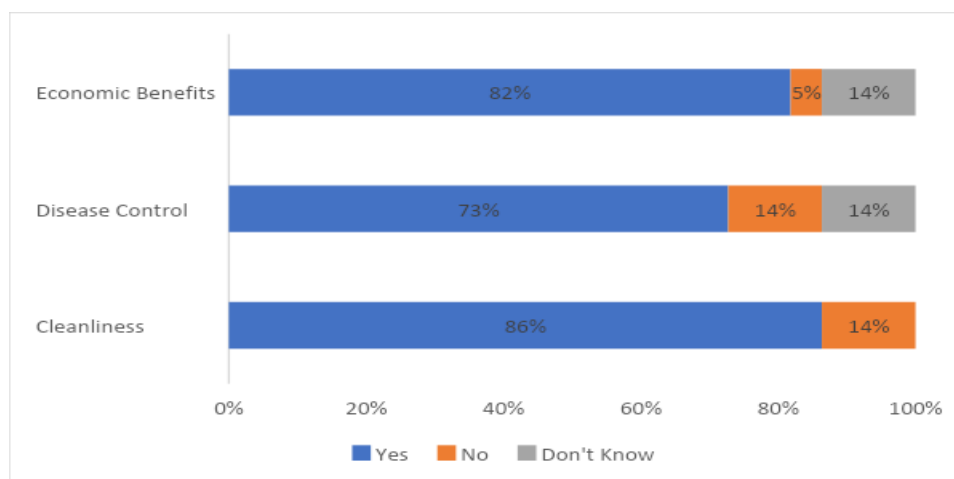


Figure-16: Benefits of improved sanitation systems

100% of the beneficiaries mentioned that they still face cleanliness issues due to poor sanitation.

O&M/Cleanliness Mechanism

Survey results showed that almost half of the beneficiaries (55%, n=12) were responsible for the cleanliness of sanitation lines while the remaining 45% (n=10) collectively cleaned these lines. Probing further, when asked how they disposed the waste, respondents gave various answers. The most common answer was open dumping with 64% (n=14), followed by disposal at dumping site in the village reported by 32% (n=7). Lastly, only one respondent stated that they disposed of the waste through burning which accounted for 4% of the total responses as can be seen in Figure 17.

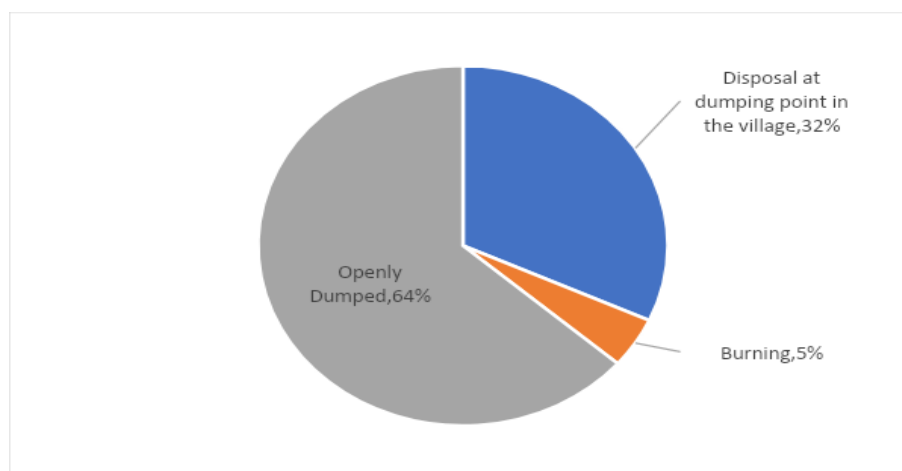


Figure-17: Waste disposal techniques used by respondents

GAP Inadequate Community Latrines

Survey results revealed a number of key challenges. Primarily, the lack of community latrines in the village and a proper water disposal route was highlighted by respondents as it became difficult for them to dispose of the waste by themselves. Furthermore, they argued that if the waste is not properly disposed, it can cause sanitation and health issues.

Irrigation

Two types of irrigation schemes were identified by the respondents which include irrigation channel and water course lining. These irrigation schemes have helped the community in dealing with the water scarcity that the farmers faced before the interventions. 73% of the respondents are part of Operation and Maintenance committees while 86% said that the performance of the committees is very good.

Satisfaction from Irrigation Scheme

Table-10: Satisfaction with provided irrigation facilities

Province	Extremely satisfied	Very satisfied	Somewhat satisfied	Somewhat dissatisfied
Chitral	62.9	34.3	1.4	1.4
Pishin	57.3	31.7	11.0	0.0
Zhob	44.0	36.0	20.0	0.0
Lasbela	59.5	32.4	8.1	0.0

(Note: For detailed analysis please refer to Annex-III)

62.9% (n=44) respondents in Chitral while 59.5% (n=22) respondents in Lasbela 57.3% (n=47) respondents in Pishin and 44% (n=11) in Zhob claimed that they are extremely satisfied with experiencing economic gains as a result of the irrigation scheme in their locality. These gains are made possible with sufficient water for their

crops which helped in increasing crop output. As a result, they are now reaping increased production from the same area.

One respondent during FGD in Lasbela district informed that he is utilizing these additional revenues towards educating his children. Another respondent claimed that the economic gains helped him to improve his house structure as he spent the income on repair and maintenance of house. Apart from this, due to irrigation scheme irrigated area also increased as farmers can now irrigate those areas which were uncultivated before due to water scarcity. 70.3% respondents in Lasbela (n=26) and 68.3% in Pishin (n=56) were extremely satisfied with increase in irrigated area after the scheme. It was highlighted during FGD that due to more irrigated land, more local workers are being engaged now. Farmers pointed out during FGDs that the schemes are also helpful in saving time as previously they have to spent additional time in making arrangements for sufficient supply of water for their agriculture fields. They are now not dependent on other sources of water and can rely on water schemes under PPR for sufficient supply of water.



Figure-18: Water wastage

Farmers also pointed out that irrigation schemes controlled the water losses 42.7% respondents in Pishin (n=35)) and 36% in Zhob (n=19) reported that water wastage reduced in their locality after interventions under PPR program. During FGD, it was identified that they had to bear water losses in the past due to poor irrigation system and the agriculture fields couldn't get enough water as required for the crops. However, now with the new irrigation scheme, water losses have been reduced significantly.

Key Challenges

Respondents during FGDs pointed out that they still face water shortages due to which they cannot cultivate their agriculture land properly. This is both due to lack of water resources and water losses. It was informed during FGD that water shortage has also had an impact on the limited food production. Lack of water caused production losses along with loss in irrigated area. Respondents stated that due to less rains in last few years, their dependence on irrigation system has increased but the available resources are not enough to meet the requirements of agricultural activity. As a result, less water is directed towards crops which not only affected the production but also the productivity of land.

In Chitral, respondents reported that lack of cooperation among community is also one of the key challenges. The community does not work collectively for common problems which resulted in provoking the issue such as provision of water for crops. Irrigation channels are being affected by land sliding in Chitral which caused severe water shortage for irrigation purposes.

During FGDs respondents stated that there is shortage of water reservoirs which may be used as alternate water supply during water scarcity period. As a result, rain and flood water is being wasted which could be used if small water reservoirs are built. The dependence merely on irrigation system is inadequate to provide sufficient water even for irrigation purposes.

It was also highlighted by the respondents that repair and maintenance of existing water channels is also required. These channels require regular maintenance to ensure regular water supply. Respondents shared during that rising temperatures have affected water supply and unlined water course resulted in water losses; apart from this, farmers had to spend additional time in ensuring water supply for crops. Some of the respondents pointed out towards the lack of resources to cultivate their lands as they cannot afford increased expenditure.

Renewable Energy

Access to Energy

In relation to accessibility before renewable energy provision, 100% respondents from Pishin stated that they had access while 86% respondents from District Lasbela indicated they had access to energy before the program. The intervention had to be made in order to facilitate the locals and help them shift from unsustainable and hazardous energy creation methods to renewable energy that is safe, relatively inexpensive and reliable in the long-term.

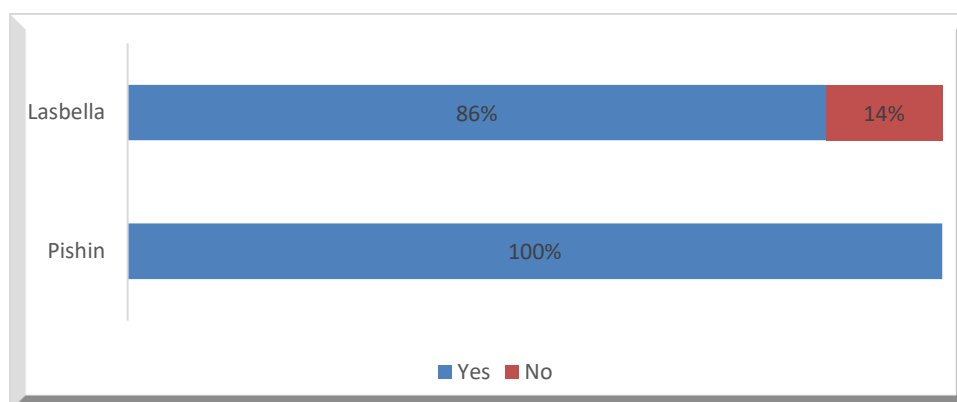


Figure-19: Access to electricity before program

When asked about their previous energy sources, 55% respondents (n=28) stated they utilized wood, 18% respondents (n=9) specified both kerosene oil and wood while only 10% respondents (n=5) reported using personal solar system prior to the program. 6% respondents (n=3) identified micro-hydel whereas 6% respondents (n=3) indicated kerosene oil. Only 4% respondents (n=2) reported using both Personal Solar System and Kerosene Oil while one respondent stated using Gas as their source of electricity before the program.

As the data informs, the local population was highly dependent upon these unsafe, risky and relatively time-consuming methods to meet their energy needs. The provision of renewable energy was particularly welcomed as the tropical climate of these districts is well suited for solar energy, moreover, it comes without any fuel cost, easy installation and minimal repair and maintenance costs.

Regarding hazards due to previous energy sources, 13% respondents (n=7) admitted that accidents did occur due to the above-mentioned energy sources that included damage to household items, property and human health that were mostly due to fires. 39% respondents (n=21) reported suffering from diseases caused by the previous energy supply that includes throat and eye infections among others.

In relation to increased access to energy after Renewable Energy Program, 98% respondents (n=53) confessed they now have more access to energy after the program while 91% respondents (n=49) stated their usage of electrical appliances has greatly increased. The type of electrical appliances mentioned by the respondents were mostly mobile chargers but in the FGDs the beneficiaries expressed their need for more energy, enough to power home appliances such as refrigerators and freezers etc.

Concerning the reliability of Renewable Energy provision 78% respondents (n=42) stated the provision of renewable energy was very reliable whereas 22% respondents (n=12) identified it as slightly reliable owing to the fact that some respondents experienced issues with the battery that links with the solar grid. The respondents identified various obstacles they encountered with previous sources of energy such as kerosene oil and wood that had been known to cause fires and was a health hazard.

The locals were also satisfied with the convenience and immunity Renewable Energy has provided them against unpredictable weather conditions such as excess rainfall or reduced water flow in the summers.

67% respondents (n=36) termed that the provision of renewable energy was sufficient for the locality while 33% respondents (n=18) stated the contrary and insisted they required more to meet their energy needs. Respondents have reported they only use the previous energy sources such as wood and kerosene oil for cooking whereas the lighting has almost been totally replaced by renewable energy.

As for training and maintenance, 65% respondents (n=35) received end user and operation and maintenance training of which all of them termed it as very useful. 81% respondents (n=44) stated either they or one of their household members received training on energy. 75% respondents (n=33) indicated it to be as very effective while 20% respondents (n=9) identified the training as extremely effective. 89% respondents (n=48) affirmed that the training indeed helped spread awareness among the general public.

Benefits to Community

Regarding benefits to households, 30% respondents in district Pishin termed the reduced use of Kerosene Oil, decrease in use of wood and time saved as the main benefit to their household while 24% respondents only stated decrease in use of wood and time saved as their only benefit to their household. 6% respondents indicated decrease in use of wood and another 6% specified improved health and hygiene whereas the rest chose a combination of these. 14% respondents in Lasbela termed the decrease in use of wood, improved health, hygiene and better air quality as the main benefits to their household. Whereas 14% respondents stated time saving and 14% respondents specified less expenditure on energy as the main benefits to their household.

According to the FGDs, availability of bright light produced by renewable energy in households allowed for efficient use of time after dark with many chores to be completed at night saving a lot of time in the process. Gas and dust emissions and minimizing of sound pollution promote a healthier environment in the household. Social conditions improved significantly due to availability of electricity after dark, households are able to interact among each other and are able to charge their mobile phones allowing them uninterrupted communication.

As for benefits to women, in Pishin, 61% of respondents stated increased time spent within home whereas 30% respondents identified increased socialization as the main benefits to women of their household. While the rest chose multiple options. 38% respondents in Lasbela stated improved health as the main benefit to their women whereas 33% identified increased time spent within home and 29% specified increased socialization as the main benefits to their women. As revealed in the FGDs held in these districts, the availability of electricity after dark played a major role in increased socialization and utilization of that time for revenue generating activities.

As renewable energy provision now allows women extended working hours to practice embroidery, weaving, stitching etc. to support their family and dedicate more time to household chores.

With regard to benefits to children, 48% respondents in district Pishin stated increased time spent within home whereas 15% respondents indicated increased socialization as the main benefits to their children. 33% respondents in Lasbela specified increased time spent within home while 29% respondents stated improved educational activities as the main benefits to their children. Respondents in both districts were of the same opinion that renewable energy benefited students the most as they were now able to utilize after-dark hours in studying and can now safely socialize under the supervision of their guardians. Teachers have reported increased attendance in schools. More number of rooms now have access to light, making it easier for children to study, thus, improving their education performance. Unpaid labor such as collecting wood or other less-value adding activities are now avoided. Accidents at night are now also lessening due to better visibility in general.

When asked how much expenditure the locals saved due to renewable energy provision, 87.9% respondents from Pishin replied PKR 0-500 whereas 9.1% stated PKR 501-1000. 71.4% respondents from Lasbela identified saving expenditure in the range of PKR 0-500 while 23.8% respondents stated saving in between PKR 501-1000. Before renewable energy provision there was heavy dependence on firewood which is costless but demands physical effort and time and along with this has its toll on the environment. The FGDs revealed that apart from the expenditure on kerosene oil, diesel, etc. the locals benefited from not having to commute to local markets frequently which were at least a couple of hours away, thus, helping them save time as well.

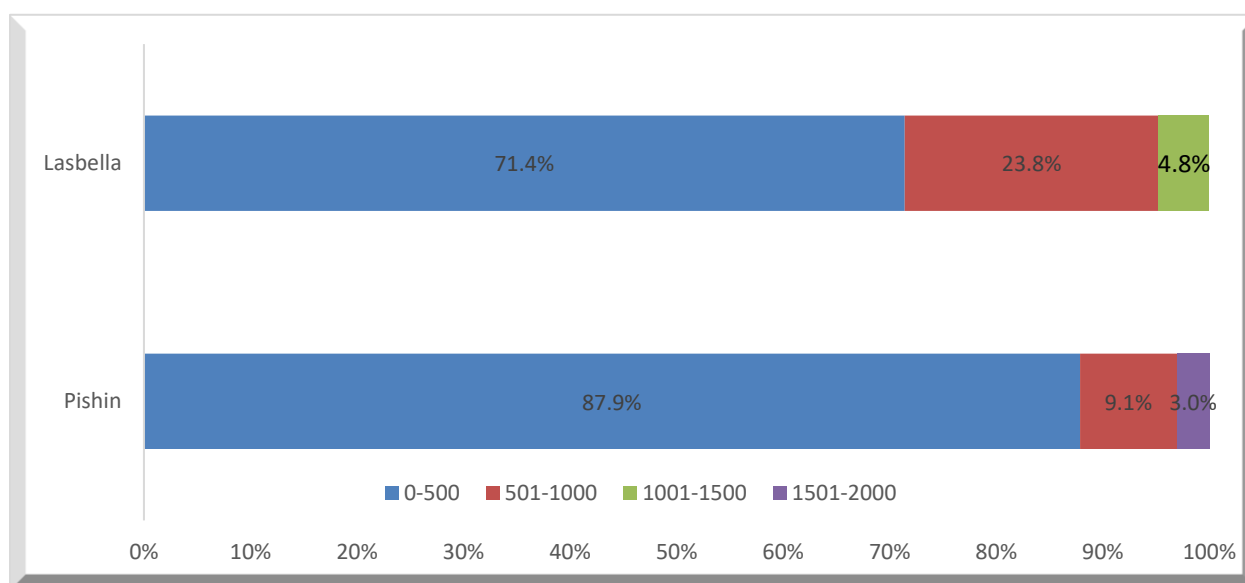


Figure-20: Expenditure saved due to renewable energy provision

Key Challenges

All respondents replied negatively to deforestation during provision of renewable energy confirming that the process was eco-friendly

3.2.4. Health

Under PPR over the multiple years of the program, a total of 114 health facilities (76 government and 38 health centres) were supported. Overall 1.2 million medical consultations have been provided through these health facilities. Where roughly 53% were to men, 40% to women and 27% to children.

Availability of Health Services/Facilities

During this survey, 412 health intervention beneficiary households were interviewed. In Chitral, Upper Dir, Pishin, Zhob and Lasbela majority of the respondents availed the health facilities from a Rural Health Centre. The main reasons for using RHC's were convenience, accessibility and in some cases, it was the only health facility in the area.

In Upper Dir, 36.7% (n=33) of the respondents said that more than 5 household members from the house received treatment at PPAF supported health facility followed by Chitral where this percentage was 31.3 % (n=5). Similarly in case of Balochistan 14.9% (n=14) respondents in Zhob said that more than 5 members of the household received treatment at PPAF supported facility. In Pishin, 30% (n=30) of the respondents said only 1 member of the household availed the health services beside respondent, , similarly in Lasbela for one member of the household this percentage was almost 40% (n=42) This variation across districts is concerning however can be explained through the predicaments originating from factors such as access and outreach which could have been difficult in hard area.

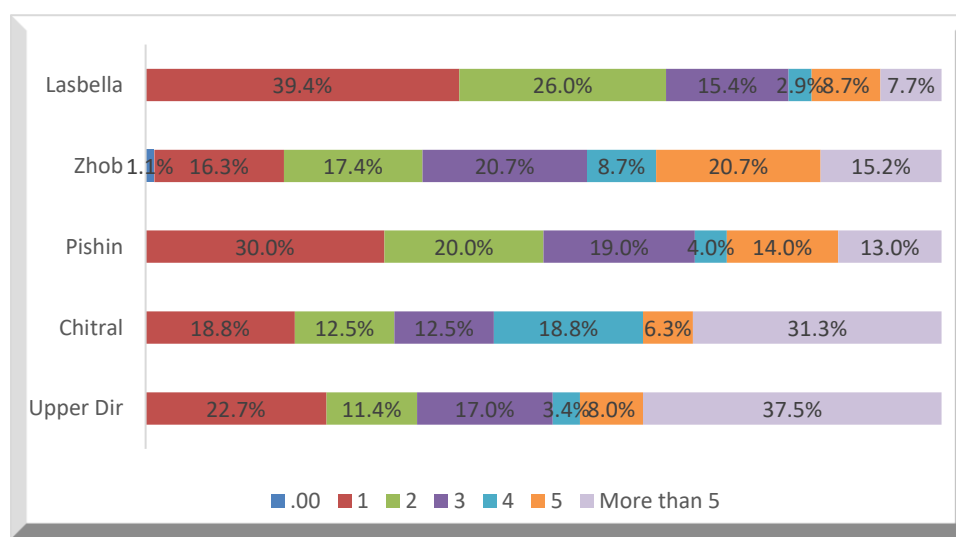
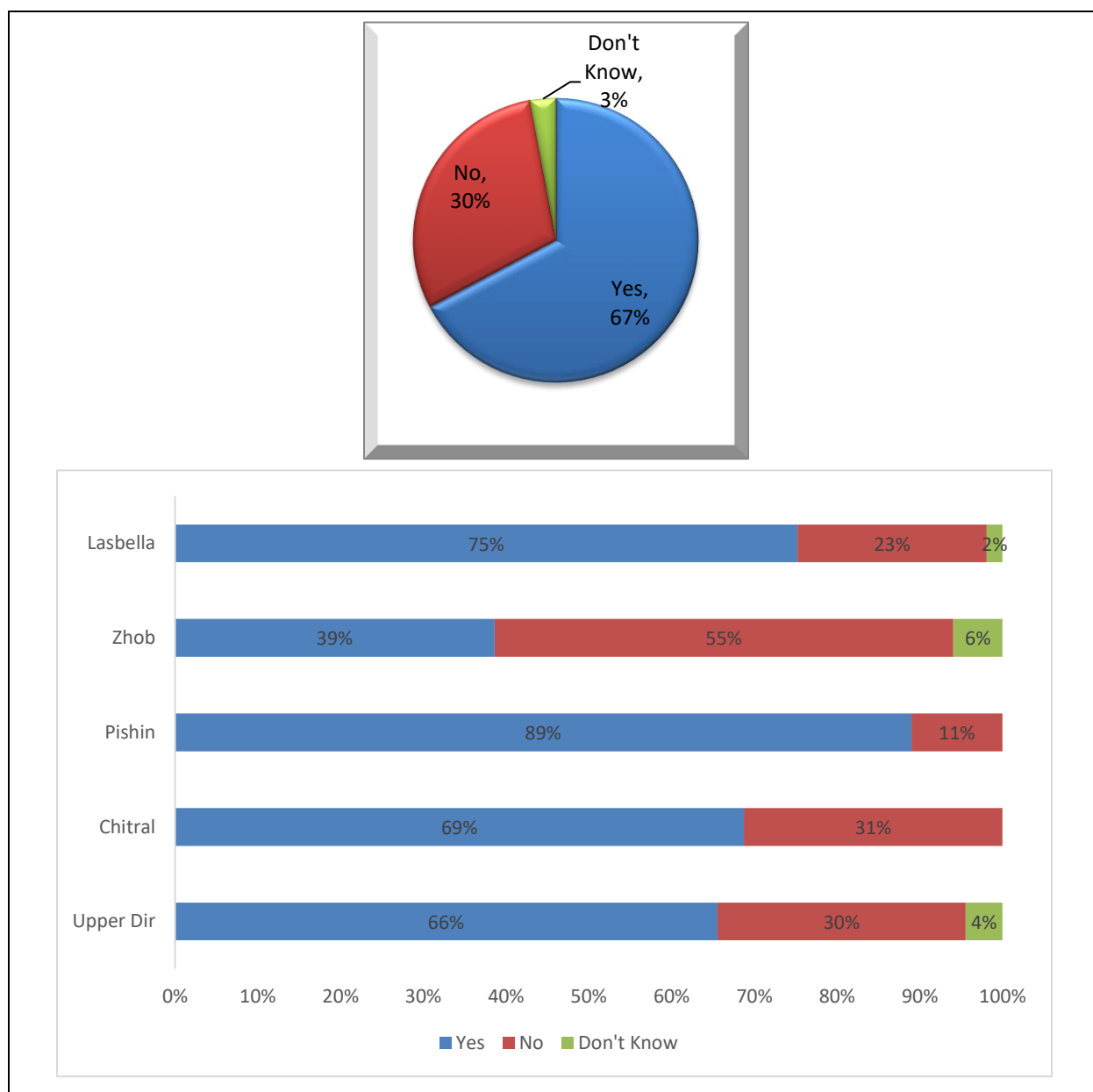


Figure-21: Household members that received health services district wise

In this survey, overall 67% (n=277) of the respondents thought that the medicines and equipment at the community health facility were sufficient to meet their needs. Out of these, in Pishin (89% n=89) had the highest percentage of households that felt that the medicines and equipment were sufficient for them, followed by 75% (n=79) in Lasbela, 69% (n=11) in Chitral, 66% (n=59) in Upper Dir and 39% (n=39) in Zhob.



Box-2: Overall and District-wise percentage beneficiary response to medicines and equipment being sufficient in the community health facilities by PPAF

Overall almost 82% (n=336) of those surveyed, reported that the medical staff listened to their problems properly and attentively. The beneficiaries in Chitral reported the highest satisfaction (100% n=16).

The behaviour of medical staff complemented the data on satisfaction. The highest rated behaviour of medical staff was from Chitral, where doctors were rated 80% (n=12) 'Excellent' and 13% (n=2) 'Good'. Even the lowest medical staff, a dispenser was rated average or above. On the contrary, beneficiaries in Zhob had the worst experience. Almost 29% (n=26) of respondents rated the behavior of doctors as poor or very poor. Similarly, experiences with all other medical staff such as midwife, LHWs, medical technician and dispenser were regarded below average as compared to other districts.

To facilitate beneficiaries while they wait, 87% (n=357) health facility users had access to drinking water at the health facility. In Chitral 100% (n=16) of beneficiaries who used health facility had access to drinking water there, 96% (n=86) in Upper Dir, 90% (n=95) in Lasbela, 84% (n=84) in Pishin and the least in 75% (n=76) in Zhob.

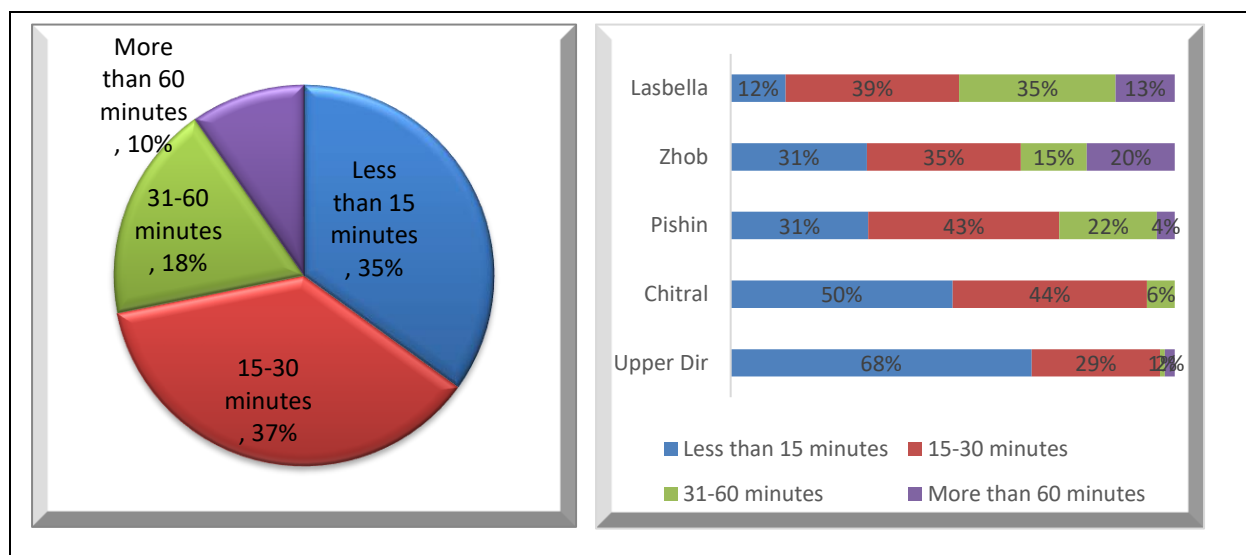
Similarly, overall 92% (n=381) respondents reported that the health facility they visited had the toilet available. Only 6% of the respondents did not have access to toilet at the health facility they visited. Looking at it, the district wise availability of toilet is high. The lowest being 78% (n=79) in Zhob and highest being 99% (n=89) in Upper dir. This is a significant addition to the value beneficiaries place on the health facility.

Disposal of medical waste has a huge role to play on the societal and environmental impact of the health facility. For the waste disposal in our selected districts, the major mechanisms included burning in incinerator, open burning in air, open dumping and burrowing. In Upper Dir, 27% (n=24) reported open dumping as the method of disposal. This of course has implications for health and environment. Whereas Pishin had the best practice as per their percentage share, 35% (n=35) reported the waste being burned in an incinerator. Similarly looking in another district of Khyber Pakhtunkhwa, Chitral 50% (n=8) reported that waste is burned in incinerator, whereas 44% (n=7) reported waste is burned openly and 6% (n=1) mentioned waste is dumped openly. In Zhob all methods were used in similar proportion. However due to some possible lack of awareness 36% (n=35) of the respondents in Zhob were unaware of the disposal method for medical waste. In Chitral, 50% respondents (n=8) reported that they are burning the waste in incinerator while 43.8% (n=7) said that open burning in air method is adopted for waste disposal.

Access to Health Facilities

Overall survey data indicated that within the beneficiary households the level of access to health services is high. Only 10% (n=40) reported that they had to travel more than an hour to reach the medical facility. Most of the respondents 35% (n=144) and 37% (n=152) could access facilities in less than 15 minutes and less

than 30 minutes, respectively. District wise data suggested that Upper Dir had the quickest access to medical facilities in less than 15 minutes for majority of respondents (68% n=61). The access was difficult in Zhob, where 20% (n=20) had to travel more than 60 minutes to access the health facilities supported by PPR.



Box-3: Access to Health Services

Once at the health facility, overall 73% (n=300) reported they had to wait less than 30 minutes to attain medical facilities. Only 10% (n=43) reported having to wait longer than an hour to be seen by the doctor. This aligns with the data reported for access to health facility in each district. Beneficiaries in Chitral had to wait the least, 50% (n=8) received medical services within 15 minutes. Whereas, beneficiary household in Zhob had to wait the longest across all surveyed districts, 17% had to wait more than an hour (n=17). Though majority of beneficiaries in Chitral (68% n=10) received medical attention in less than 30 minutes.

Out of 412 households surveyed, 77% (n=318) informed that PPR supported health facilities were appropriate for women. The program did provide antenatal and post-natal check-ups for women. This indicates a high level of access to health services. However, 33% (n=135) felt that the female staff at these health facilities was not sufficient to meet women's specific health needs. It is likely that the advice provided to respondents has remained same overtime despite improved alternatives available. Majority of the female staff were firstly the mid-wives and secondly Lady Health workers in all districts surveyed. There was on average around 10% availability of lady doctors in all districts.

In the same household set, 69% (n=283) felt that the health services in their areas were suitable for children. The overall district-wise response was positive in relation to the availability of services and doctors, necessary vaccinations, medicines and equipment. Pishin at 91% (n=91) reported the highest satisfaction for services for their children, followed by Chitral at 81% (n=13), Lasbela at 72% (n=75), Upper Dir

at 66% (n=59) and lastly Zhob at 44% (n=41). Very few (less than 2 %) of the respondents were unaware of the facilities available for children. It is important to have deep dive knowledge regarding such respondents to whom information regarding child health care is not reaching. A deeper study, possibly through use of case study approach, regarding the characteristics of such households could lend lessons for future design and how to address the groups who still remain out of the programme reach.

Affordability

Affordability is a major factor when measuring satisfaction from the given health facility. The RHC's have a Parchi fee of between 5-20 rupees. However, the medicines and tests are availed from outside the health facility. The medicines usually cost PKR 100 to PKR 2000. While medical tests cost from PKR 200- PKR 2000. Such expenses are high given that in most of these districts the government approved minimum wages are not being observed. Underemployment is a key phenomenon which can be observed in these areas.

At the district level, overall level of satisfaction across the beneficiaries from the health services remains high except in Zhob. Chitral has the highest percentage of people who rated their level of satisfaction as very satisfied and extremely satisfied in all aspects of health facility such as availability, quality of health services, availability of medicines, working hours of health facilities and affordability. Whereas, Zhob had the highest percentage of people that were 'very dissatisfied' and 'extremely dissatisfied' in all aspects mentioned above.

Table-11: Level of satisfaction in terms of Affordability of health services

	Extremely Satisfied	Very Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Very Dissatisfied	Extremely Dissatisfied	Total
Upper Dir	15.6%	54.4%	23.3%	5.6%	1.1%	0.0%	100%
Chitral	37.5%	50.0%	12.5%	0.0%	0.0%	0.0%	100%
Pishin	43.0%	22.0%	27.0%	7.0%	1.0%	0.0%	100%
Zhob	3.1%	25.5%	32.7%	14.3%	10.2%	14.3%	100%
Lasbella	20.2%	34.3%	25.3%	16.2%	1.0%	3.0%	100%

Key Challenges and Constraints

The respondents were also asked to highlight some of the key challenges and constraints that they feel exist in the health facility near them that was supported by PPAF.

Lack of availability and quality of medical staff

Secondly, the lack of availability and quality of medical staff is a concern. There is a shortage of staff and no emergency services exist. There are services suitable for women and children. However, overall 33% (n=135) felt the female staff was insufficient. In Zhob, only 44% (n=44) of respondents thought the staff was sufficient. Moreover, district wise percent, 11 % (n=10) of beneficiaries in Upper Dir, 11% (n=11) of beneficiaries in Pishin and 10% (n=11) of beneficiaries in Lasbela percent were not satisfied with the availability of staff percent. As mentioned above the behaviour of staff plays a key role in satisfaction ratings too, which was worse in Zhob and Lasbela at all levels of medical staff as compared to other districts. This could also reflect capacity building and training provided to the staff in Zhob and Lasbela which could overtime be improved.

3.2.5. Education

Under PPR, the focus was on three components within education. First was to set up new community schools. Second, to provide continued support for existing schools and lastly to increase enrolment of out of school children. Hence, the program supported schools by providing furniture, bags, water facilities, electricity through solar powers, infrastructure (class rooms, staff rooms, toilets etc.) and teacher trainings.

Overall, the satisfaction levels with education services were very high in both Khyber Pakhtunkhawa and Balochistan based on the responses for factors discussed below.

Availability of Community Schools

During this survey 385 beneficiary households were surveyed. The efforts of activities under PPR is reflected well in the enrolment as 96% (n=371) of these households had all children in school going age attending the PPAF supported schools. District wise the education services are availed by minimum 88 % (n=37) of beneficiaries in Zhob to a maximum of in Lasbela (n=95). In both Khyber Pakhtunkhawa and Balochistan, out of the seven types of schools that PPAF supports, the highest percentage of beneficiary children attended PPAF community schools and Govt. boys' primary school.

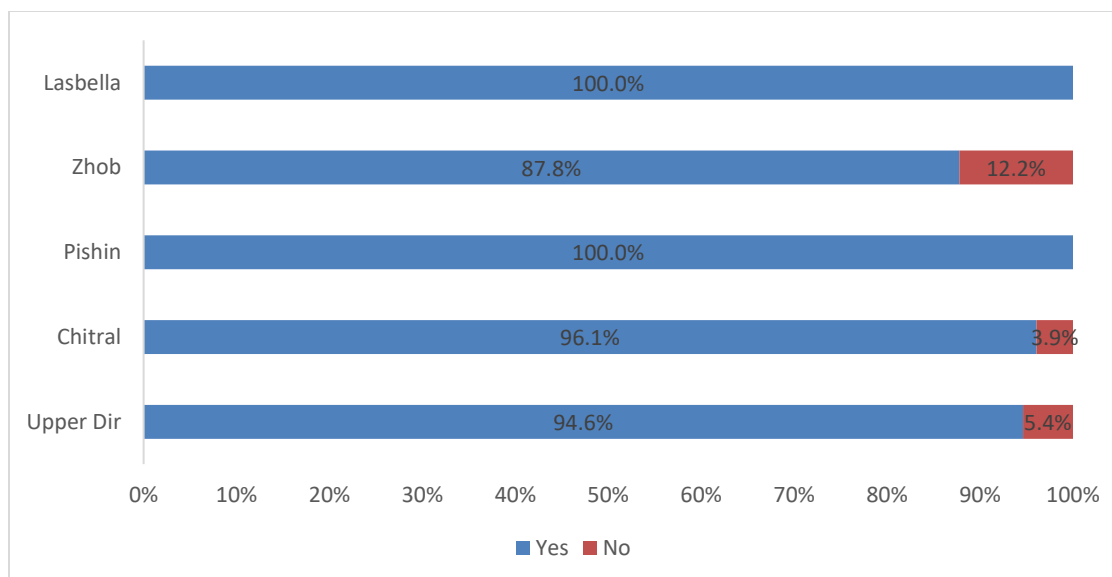


Figure-22: Children who are attending PPAF supported school

Accessibility of Schools

Research shows that one of the main reasons for out of school children, especially girls, is access to schools. The survey showed that the majority of the schools in all districts were within 2 KMs of beneficiaries' residence. The access was most convenient in district Chitral as 84% (n=64) of the children went to school that was less than 500 meters away. In Upper Dir, Pishin and Lasbela the situations are similar. 51% (n=57), 64.4%(n=38) and 33%(n=31) of children from beneficiary household, respectively, had to travel less than 500 meters. In Upper Dir and Pishin no one had to travel more than 2 KMs. In Lasbela 14%(n=13) had to travel more than 3 KMs. However, the situation is worst in Zhob, where 39%(n=15) of children had to travel 1 KM to get to the school and 5.1 %had to travel 3 KMs or more. Moreover, Zhob also has the highest percentage of the out of school children.

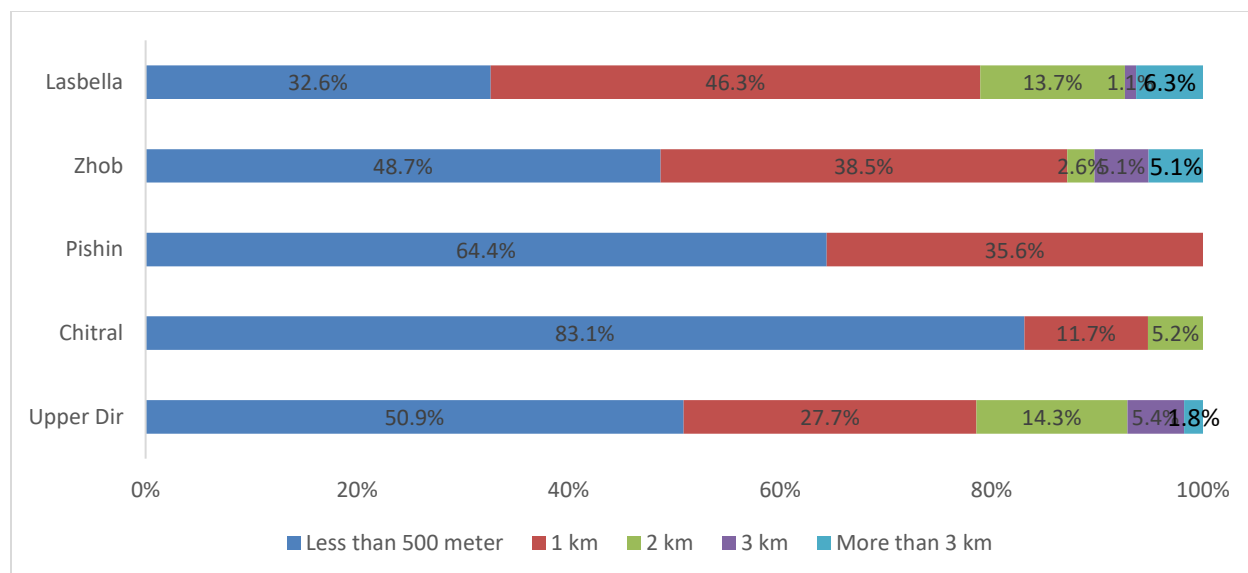


Figure-23: Distance to the PPAF school

In Khyber Pakhtunkhwa and Balochistan, on average parents had to spent less than PKR 1500 in transport costs to travel to school. 85% (n=35) in Zhob and 87% (n=83) in Lasbela did not pay anything for the transport where as other beneficiaries on average spent PKR 1500.

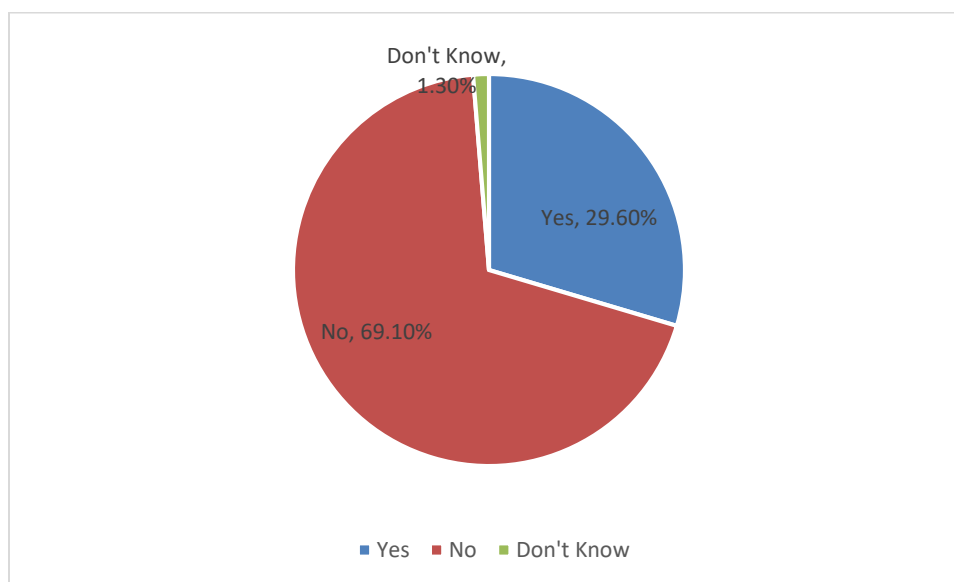
Parents in the beneficiary households had varied expectations for levels of education related to their male or female children. The survey results were complying with the social norms and cultural issues in the areas as overall boys were expected to attain higher level of education as compared to the girls. However, the difference was not too stark as 49% (n=136) of boys and 46% (n=88) of girls were expected to attain university-level education. Even in earlier years of education, 2.5% (n=7) of boys were expected to finish middle school whereas only 0.5% (n=1) of girls were expected to finish middle school. Though, the percentage of expectation of girls finishing secondary and college were slightly higher than boys. This could be because of the reason that majority of boys were expected to take part in income generating activities to support the families earlier as compared to girls.

In the case of boys, majority of them were expected to finish university. District wise, 68% (n=26) of beneficiaries in Pishin expected the highest percentage of their children to finish university whereas it was lowest in Lasbela at 41% (n=37). This number is still very reasonable given the availability and access of universities and their socioeconomic conditions where boys are generally expected to start helping family in income generating activities such as agriculture and livestock that do not require higher level education.

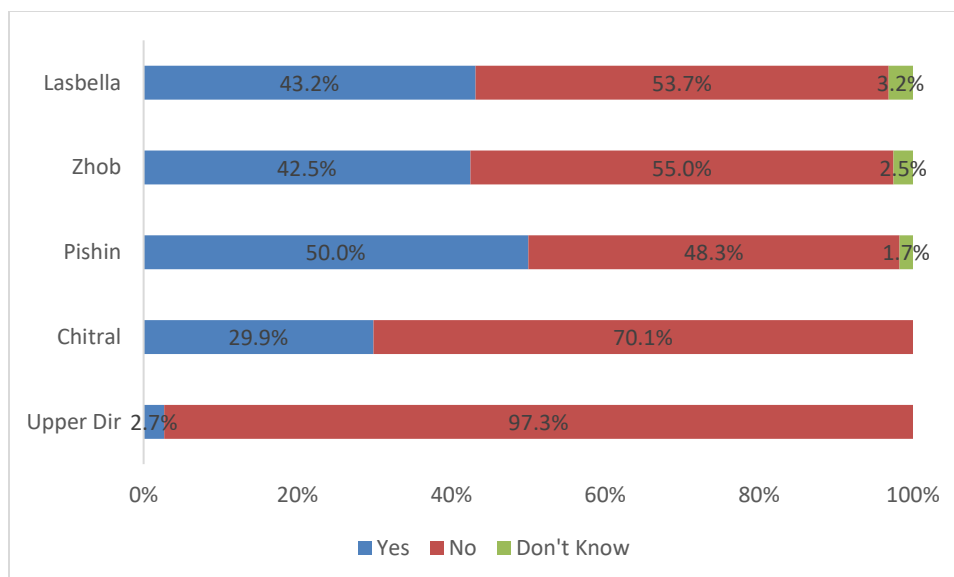
For girls, the data highlights a much different situation. Lasbela has the highest percentage of girls expected to finish university i.e. 77% (n=13) whereas in case of boys Lasbela had the lowest percentage of boys expected to finish university. This could be due to many factors such as boys being involved in farm activity or family

business right after college degree or boys moving to other major cities to work. The lowest percentage of expected degree at university-level is in Upper Dir at 31% (n=24). Similarly, in Upper Dir, 22 % (n=17) of the beneficiaries expected their daughters to attain secondary level education or even less. This is majorly because of two reasons identified in the FGDs. Firstly, the lack colleges and universities nearby.

As a proxy for satisfaction, parents were asked if their child enjoyed going to school. Overall, 99% (n=376) reported 'yes'. The results were similar in all districts, on average higher than 95% with 100% responding their child enjoys going to school in Chitral (n=77) and Pishin (n=60), while the lowest was 95% in Zhob. Hence, overall the parents perceived their children to be happy at school. Research³⁰ has shown that in villages corporal punishment in schools is a norm and acts as a major deterrent for parents to send their kids to school and children not enjoying going to school. Beneficiaries were asked if the schools had corporal punishment. 30%(n=113) reported yes, while 69 % (n=264) said there was no corporal punishment at the school. Highest punishment was in Pishin while the lowest in Upper Dir.



³⁰<https://www.dawn.com/news/1305570>



Box-4: Corporal Punishment in schools

Affordability

Another important factor for parents in deciding whether to send children to school is affordability. In our survey, we asked parents if the books, stationary and uniform were provided free of cost. On average, 80%(n=308) of the beneficiary's children were provided basic items (uniform, stationary, books) essential for school. The highest percentage reported was in Chitral (98%, n=76) and lowest in Lasbela (68 %, n=65).

On average, majority of beneficiaries spent on books less than PKR 200, for stationary it was PKR 300 and for uniform they spent PKR 1500 each academic year. Hence, they needed to spend about PKR 2000; as a result, 20 %(n=77) of parents were reported that basic items were not provided under the program.

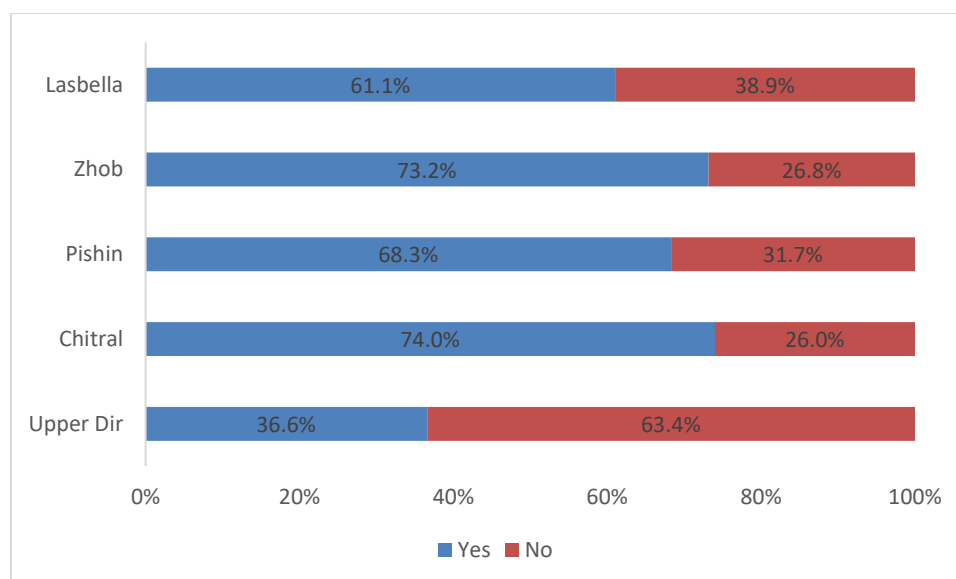


Figure-24: Affordability to meet the education expenditure

Though basic items are provided to majority of the beneficiaries but still parents reported that over the period meeting of expenditures have been challenge. 59 % (n= 227) respondents reported that they somehow afford the expenditures whereas 41 % (n=158) respondents reported that affordability of expenditures is the major concern and over the period it is difficult to afford these expenses. In Upper Dir 63 % (n=71) only reported that it is difficult to afford expenditures on basic items as mentioned above followed by Lasbella, Pishin, Zhob and Chitral with 39 % (n=37), 32% (n=19), 27% (n=11) and 26% (n=20) respectively.

Capacity to deliver educational services

This section reported on two types of capacity; teacher capacity and infrastructural capacity of the schools supported under PPAF. On average, 89% (n=343) of the beneficiaries were satisfied with the number of teachers in their children's schools. Similarly, there was 90% (n=347) satisfaction level with teacher's performance and 91% (n=350) with teacher's attendance.

Parents who were actively involved with teachers felt a greater control in education related decisions for their children, thus, increasing their rating of satisfaction from teachers performance and overall education facility. However, only 32% (n=122) beneficiary households have a member who is part of Parent Teacher School Committee. At district level, Pishin had the highest percentage (60%) of household members that are part of Parent Teacher Committee followed by Lasbela (55%), whereas Upper Dir has the lowest percentage (11%). 62% of the parents reported giving feedback to schools on how to further improve the quality of education and 86% of those believed that their feedback brought some form of positive changes. The main objective of parent teacher school committee is to advance the education and grooming of students by extending relationships between parents and teachers.

In terms of infrastructural capacity, 88% (n=339) beneficiaries were satisfied with the availability of the classrooms in the schools. On average, 82% (n=316) of the respondents reported that they were satisfied with the furniture available in the classrooms. Whereas, 75% (n=289) were satisfied with the availability of electricity at schools. 84% (n=323) of the parents were satisfied with the overall classroom environment.

Moreover, research has found that having separate toilet facilities for children plays an important role in school enrolment especially for girls. In this survey, 58% (n=225) respondents said that the school their children attend does have a separate toilet for girls and boys

There are reportedly three major methods of waste disposal in schools namely; open dumping, waste bins and burning. Open dumping (36%, n=139) was the most used method whereas keeping it in waste bins (28%, n=108) and burning (28%, n=108) were also widely used. Open dumping as a method is used more widely in Upper Dir, storing waste bins was most common practice in Chitral (44%, n=34) while burning was most used in Lasbela (60%, n=57). Unfortunately, 24% (n=10) of people in Zhob were unaware of the methods used for dumping waste highest percentage amongst all districts. Awareness related to waste dumping is essential as each method has unique environmental impact.

61% (n=233) of respondents reported that their children's school had some kind of plantation and cleanliness campaigns conducted. The percentages of campaigns were highest in Lasbela (75%, n=71) and lowest in Zhob (29%, n=12). These campaigns are held as activities in school such as planting trees on Earth day and arranging trips for children to various areas including tourist areas to collect waste dumped in public spaces.

Teacher's perspective

Almost 80% of the teachers reported attaining some form of training under PPAF. They received five types of trainings namely; School development plan, early childhood education, disaster preparedness, science subjects and pedagogy. All of the teachers believed that the teacher's capacity was enhanced through these trainings and they all found them very useful and adopted the practices learned from these trainings into their classrooms.

Key Challenges and Constraints

Parents highlighted key challenges in the educational services near them. Majority were not satisfied with the current infrastructure in terms of play grounds as this hindered the extracurricular activities of the children. Moreover, lack of skilled teachers and only on time teacher trainings also added to parent's dissatisfaction. Lastly, accessibility to school was a problem, even though parents were willing to send children to school, few of them had to incur very high costs relative to their incomes.

3.3 Key Findings of Livelihood Support & Promotion of Small Community Infrastructure Project – LACIP-I

In Livelihood Support & Promotion of Small Community Infrastructure Project (LACIP-I) following components were covered:

1. Institutional Development (Total Sample: 161, Male: 51% (n=82), Female: 49 (n=79).
2. LEP was covered under skill transfer and asset transfer.
 - a. Skill Transfer (Total Sample: 73, Male 57.5% (n=42), Female 42.5% (n=31))
 - b. Asset Transfer (Total Sample: 52, Male 27% (n=14), Female 73% (38))
3. Disaster Preparedness Measure was covered under project beneficiaries and trainings.
 - a. Project Beneficiaries (Total Sample: 161, Male 43.5% (n=70), Female 56.5% (n=91))
 - b. Training Beneficiaries: (Total Sample: 75, Male 77% (n=58), Female 23% (n=17).
4. Education (Total Sample: 133, Male 62% (n=83), Female 38% (n=50))
5. Health (Total Sample: 80, Male: 32.5% (n=26), Female 67.5% (n=54))
6. Community Physical Infrastructure (CPI) was covered under following components:
 - a. Flood Protection Wall (Total Sample: 28, Male 54% (n=15), Female 46% (n=13))
 - b. Drinking Water (Total Sample: 56, Male 61% (n=34), Female 39% (n=22))
 - c. Drainage and Sanitation (Total Sample: 95, Male 65% (n=62), Female 35% (n=33))
 - d. Roads and Bridges (Total Sample: 64, Male 44% (n=28), Female 56% (n=36))

3.3.1. Institutional Development

Institutional development is empowering local communities by assisting them to develop community organizations. This has not only developed trust building among the members but also promotes their linkages with local and district government departments. Overall 49.7% respondents (n=79) obtained training regarding community institutes out of which 96.2% (n=76) stated that the training was useful. 70.3% respondents in D I Khan, 61.5% in Chitral and 39.3% in Swabi said that they are actively participating in community organization activities which include community meetings.

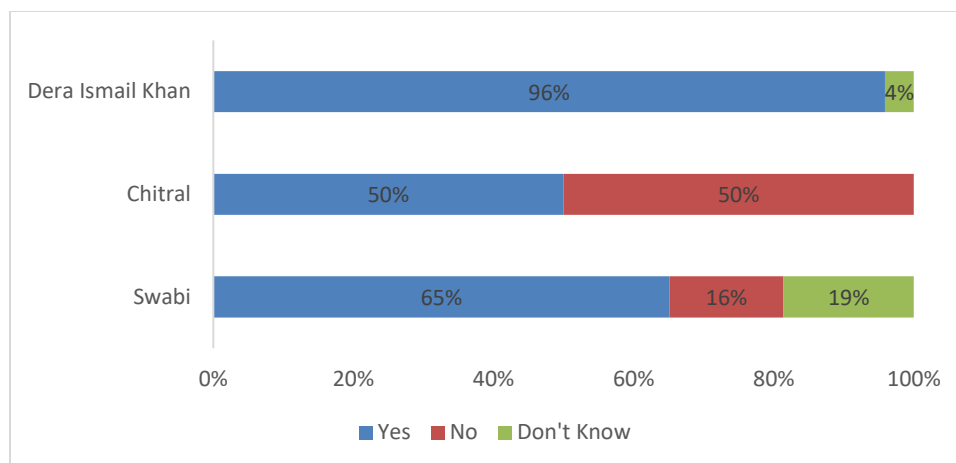


Figure-25: Empowerment of local communities through community institutes

95.9% respondents in D I Khan (n=70), 65.1% (n=28) in Swabi and 50% (n=13) in Chitral said that local communities are empowered through community institutes. 55.4% respondents in D I Khan, 29.2% in Chitral and 27.9% in Swabi pointed out that interventions made to empower local community through institutional development have been extremely successful due to assistance in developing community institutes.

Enhancing the Capacity of Community Institutes

It was pointed out that trainings developed understanding in resolving local issues which includes health and education challenges. Community Management Skills Training (CMST), social mobilization and record keeping and disaster risk management are main training attained by members. 47.4% respondents (n=36) said that they are extremely satisfied with the training contents whereas 53.9% (n=41) were extremely satisfied with the trainer. The members are also developing further committees in order to spread awareness and address local issues. Mostly these committee are related to health, education and infrastructure. Through these committees members bring forward the challenges and discuss it with relevant authority for the solution. It is for this reason that 90% (n=67) respondents in D I Khan, 73.1% (n=19) in Chitral and 36.1% in Swabi (n=22) said that they developed linkages with municipal services.

Women Empowerment

Women's role in community has been realized through constant interventions made under institutional development program.

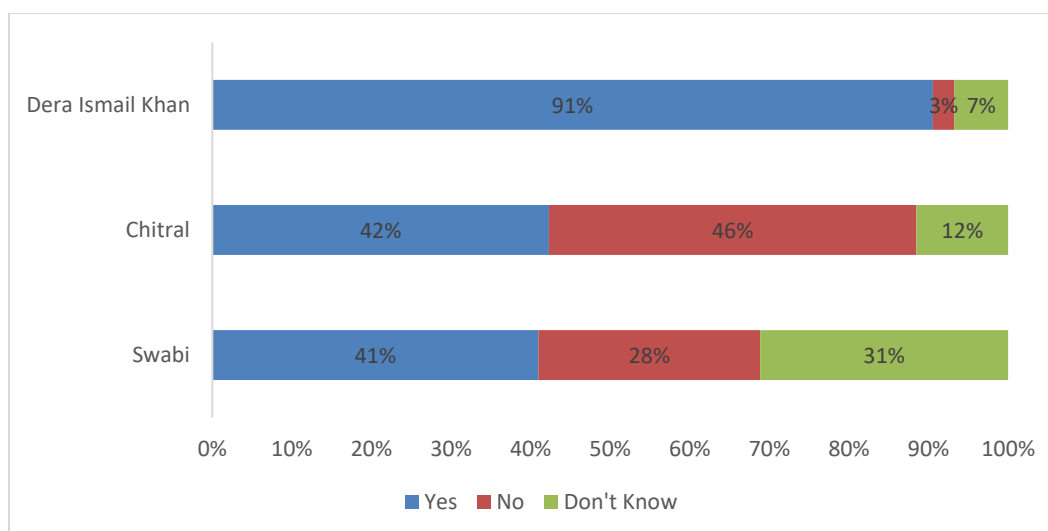


Figure-26: Women empowerment through formation of community institutes

90.5% (n=67) respondents in D I Khan, 42.3% (n=11) in Chitral and 41% in Swabi said (n=25) that women empowerment has increased through formation and strengthening of community institutes. It was explained that more number of women are now engaged in economic activities. 54.1% (n=40) respondents in D I Khan, 26.1% (n=6) in Chitral and 20% (n=5) respondents in Swabi said that project interventions for local women empowerment are extremely successful. The representation of women in village and union council organizations increased and more number of women are now accessing public services.

Key challenges

Respondents highlighted that cultural issues still exist for women which is a major impediment in active participation of women in social and economic activities. There is lack of awareness programs for community as well which may change the perception regarding women's role. CIPE (2011)³¹ emphasized that awareness can be developed in this regard through advocacy and educational programs. It was also pointed out that duration of trainings is short which should be increased.

3.3.2. Community Physical Infrastructure

Drainage and Sanitation

Improved Hygiene and Cleanliness

LACIP Drainage and Sanitation interventions were conducted in three districts namely, Swabi, Chitral and Dera Ismail Khan. The type of facilities developed were drainage and sewerage/sanitation system with almost half being the former and the other half the latter in all the three districts. In Swabi 47% of the drains built were

³¹ CIPE (2011) 'The CIPE Guide to Women's Empowerment Programs' Center for International Private Enterprise

covered while the rest were uncovered. 48.0% of the drains in Chitral were Pakka whereas the rest were uncovered and 100% the drains constructed in Dera Ismail Khan were covered. The respondents also stated there are no community latrines and that they only use the ones at home. Moreover, this unavailability of communal latrines causes health and sanitation issues which further exacerbates the condition of the locals.

In Swabi 44% of the respondents replied positively regarding satisfaction with the provided sanitation facilities. Moreover, 92% respondents in Chitral answered positively whereas 100% of respondents in Dera Ismail Khan had a positive response.

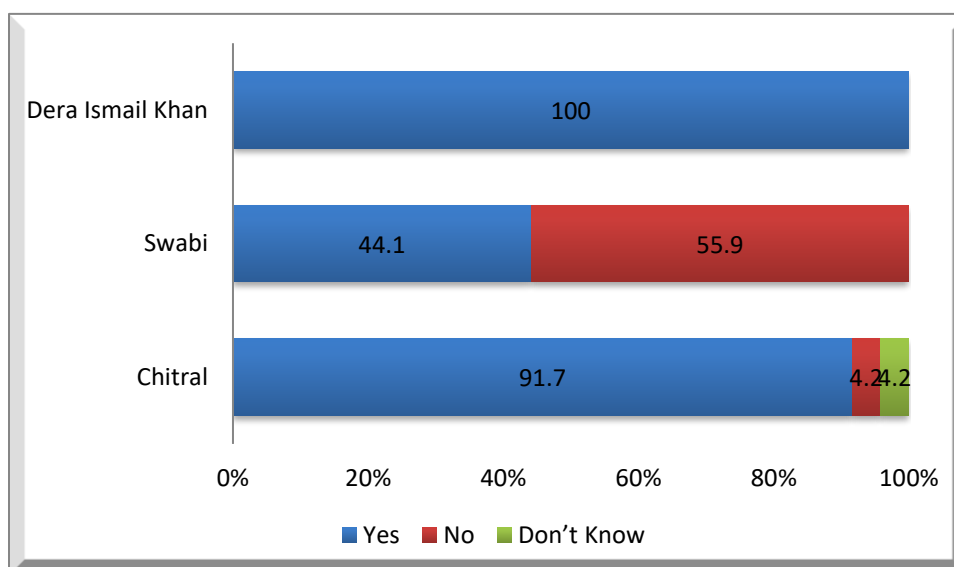


Figure-27: Satisfaction from provided sanitation facilities

The respondents were asked regarding the kind of change they observed after the provision of sanitation; they had to classify their answers in 3 categories, cleanliness, disease control and economic benefits. Most of the responses were positive in respect to all the three categories however, in district Swabi 50% of the responses were negative with regard to disease control and 32% responses were negative in relation to economic benefits. Due to the fact that most of the drainage provisions in Swabi were uncovered water borne diseases were still able to thrive, hence not making a significant difference in regard to disease control and consequently economic benefits. Some of the respondents revealed in the FGDs regarding a basic lack of understanding of drainage systems by the people and expressed their demand for some suitable advocacy intervention to address this issue. Without exception respondents mentioned cleanliness problems and faulty drainage systems as problems the community faces as a whole.

In District Swabi 94% of the respondents stated that they are collectively responsible for the cleanliness mechanism of the sanitation lines. In Chitral 48% respondents

specified that they are personally responsible while 48% stated they are collectively responsible for the cleanliness of sanitation lines. 83% respondents in Dera Ismail Khan also specified that they are collectively responsible for the cleaning of sanitation lines. It was discussed in the FGDs that many citizens do not understand how drainage systems work due to a lack of awareness and participation consequently affecting donors' initiatives to provide for sanitation systems leading to such eco-unfriendly and unsustainable methods for garbage disposal.

With regard to the method of garbage disposal, 59% respondents from District Swabi stated that their preferred method was burning while 38% specified they had a dumping point in the village. 76% respondents from Chitral indicated that their preferred method of disposal was burning whereas 20% respondents stated they openly dumped their waste. 56% of respondents from Dera Ismail Khan identified openly dumping as their preferred method for garbage disposal while 36% of respondents revealed they had a dumping point in the village. The data clearly shows that the locals do not have a proper way to dispose off waste, which they do so through highly polluting, unhygienic and environmentally unfriendly ways. As suggested in the FGDs the locals need to be either provided an alternative to help them treat their waste or trained regarding proper waste disposal as a way to move forward on this issue.

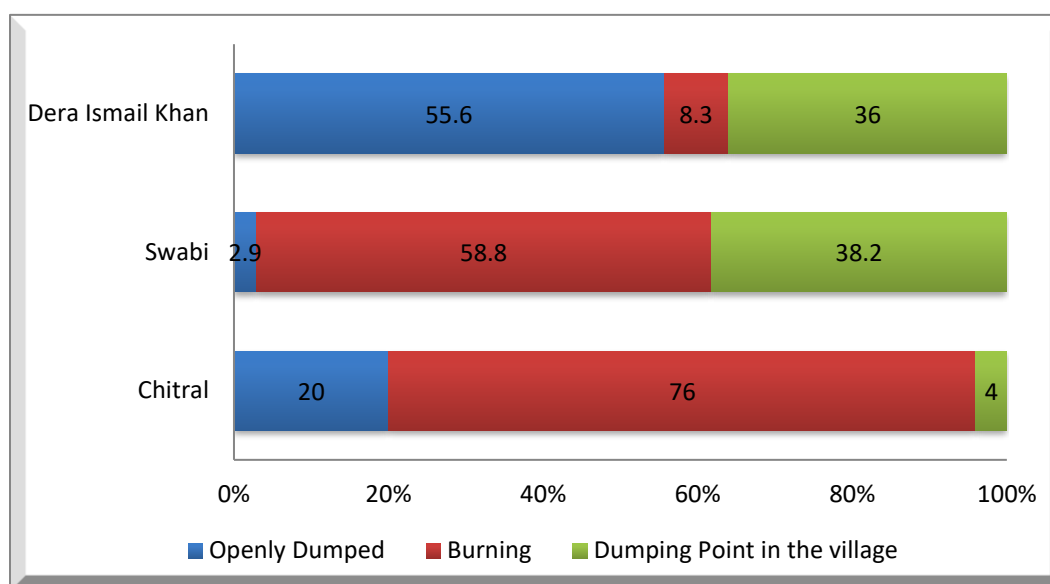


Figure-28: Waste Disposal Methods

Key Challenges

The respondents insisted upon the provision of community latrines as their lack causes health and sanitation issues. They also stated that the sanitation system was faulty and was leaking from certain areas which makes garbage disposal all the more difficult especially in areas like Chitral where they personally look after the cleanliness of sanitation lines.

Roads & Bridges

Respondents in Chitral are benefiting from link road and trail path including foot tracks while in Dera Ismail Khan bridge, retaining wall and trail path and foot tracks are major interventions carried out in their locality. 89.3% (n=25) respondents in Chitral and 36.1% (n=13) in Dera Ismail Khan were utilizing the above mentioned interventions as primary route and because of this less time is required to access the services.

Access to basic services

57.1% (n=16) respondents in Chitral and 11.1% (n=4) in Dera Ismail Khan said that they were assessing water facility on foot before the construction of roads and bridges³². However, after the construction of road and bridges 50% (n=14) respondents in Chitral and 8.3% (n=3) in Dera Ismail Khan are accessing water on foot. Access to school and hospital was also difficult for the people before the construction of roads as 92.9% (n=26) in Chitral and 88.9% (n=32) in Dera Ismail Khan said that they had to send their children to school on foot which was very inconvenient.

Many respondents said that it was troublesome for children to travel on foot and children often get tired which also affect their health. With the construction of road and bridges, access towards public transport and usage of bicycle and animal cart increased. Only 3.6% (n=1) respondents in Chitral were accessing public transport for school which increased to 14.3% (n=4), similarly 2.8% (n=1) respondents in Dera Ismail Khan were accessing public transport for school which increased to 11.1% (n=4) after construction of roads and bridges.

Similarly, it was difficult to attain health facility on foot as 82.1% (n=23) respondents in Chitral and 61.1% (n=22) in Dera Ismail Khan said that they visited hospital on foot when required which was very painful for patients. Usage of public transport was minimum due to lack of access as 17.9% (n=5) in Chitral and 5.6% (n=2) in Dera Ismail Khan were accessing hospital through public transport. After the facility of roads and bridges, 57.1% (n=16) respondents in Chitral and 13.9% (n=5) in Dera Ismail Khan are availing health facility through public transport.

Table-12: Change in time (percentage)

Facility	District	0-15	16-30	31-45	More than 45
Water	Chitral	92.80%	3.60%	-	3.60%
	Dera Ismail Khan	94.50%	2.80%	2.80%	-
School	Chitral	82.10%	17.90%	-	-
	Dera Ismail Khan	49.90%	41.70%	2.80%	5.60%

³²Detailed table in annex 6

Hospital	Chitral	64.30%	28.60%	3.60%	3.60%
	Dera Ismail Khan	41.70%	33.30%	5.60%	19.50%

Respondents pointed out that construction of road and bridges improved their access towards basic facilities and saved them time. 92.8% (n=26) respondents in Chitral and 94.4% (n=34) in Dera Ismail Khan said that roads and bridges facility saved them 15 minutes in access to water facility. It was pointed out that not only their time is being saved but also less physical labor is required now to fetch water. 17.9% (n=5) respondents in Chitral and 41.7% (n=15) in Dera Ismail Khan told that road facility improved their access towards school by approximately 16-30 minutes. Now it is less tiring for children and they enjoy this extra time in home by involving in extracurricular activities. Similarly access to hospital also increased as 28.6% (n=8) respondents in Chitral and 33.3% (n=12) in Dera Ismail Khan said that 16- 30 minutes are saved after construction of roads and bridges in their locality.

Impact of road and bridges scheme

Road and bridges positively impacted the social and economic lives of respondents and they are pleased with the intervention.

Table-13: Impact of road and bridges scheme

Facility	District	Increase	Decrease	Remain same
Income	Chitral	75 %	-	25%
	Dera Ismail Khan	100%	-	-
Farm output	Chitral	67.9%	3.6%	28%
	Dera Ismail Khan	94.4%	-	5.6%
Education	Chitral	85.7%	-	14.3%
	Dera Ismail Khan	100%	-	-
Health	Chitral	100%	-	-
	Dera Ismail Khan	97.2%	-	2.8%
Leisure time	Chitral	92.9%	7.1%	-
	Dera Ismail Khan	61.1%	38.9%	-
Access to service	Chitral	100%	-	-
	Dera Ismail Khan	55.6%	2.8%	41.7%

All the respondents in Dera Ismail Khan (n=36) and 75% (n=21) in Chitral said that their income has increased with the construction of roads and bridges facility. During FGD, a respondent said that it was difficult for customers to reach at his shop but now with better road infrastructure, number of customers at his shop has increased. Similarly, it was also highlighted that farm output has increased as now transporting

output from farm to market is easier than before. Previously farmers bear loss of production due to poor road which affects their output while transporting it to market. The roads have also helped to bridge the information asymmetries. Now information regarding farm inputs and crop prices is more accessible.

Key Challenges

People said that roads required further extension and maintenance to improve access towards basic facilities. It was requested that repair and maintenance work should be done so that people can have better access towards services. Respondents feared if local administration will continue to have funds for regular maintenance. Such issues are important to consider for ultimately ensuring sustainability of these interventions.

Drinking Water Supply Scheme

Under drinking water supply scheme, hand pumps were installed in Swabi to provide clean drinking water. Before the availability of this facility, people collected water from nearby lake, through water tanker and other sources which includes from their neighbor household or from mosque. During FGD, it was highlighted that people faced several difficulties in having sufficient water supply as 48.2% (n=27) said that previously they had to fetch water from a distance of 500 meters to 1 km. The availability of hand pump in their locality has resolved their issue and now they are having enough water for drinking and household usage.

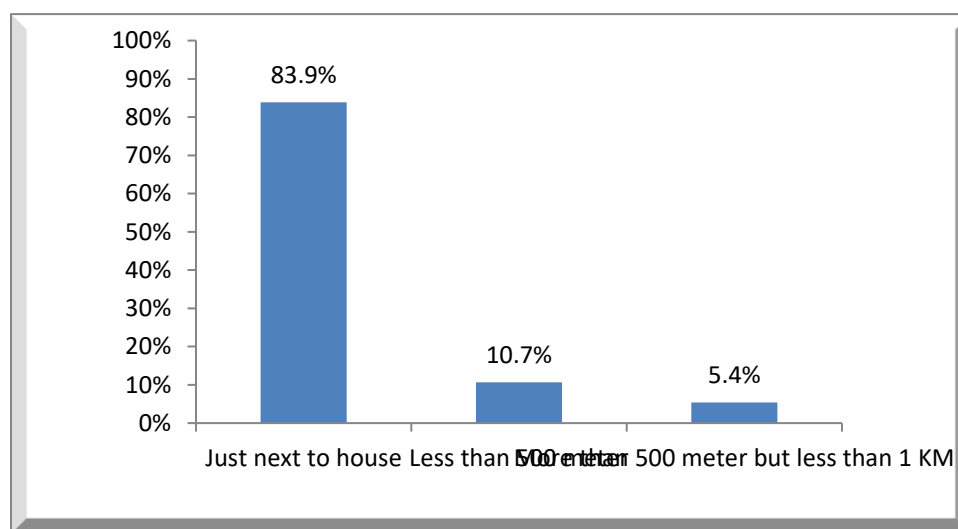


Figure-29: Distance of current water source

Respondents were pleased that their access to water has improved as 83.9% (n=47) explained that water facility is just next to their house. All the respondents (n=56) confirmed that hand pumps in the locality have saved them time in fetching water while 89.3% (n=50) said that their physical labor has reduced. Women respondents said that not only enough water was now available for washing clothes and crockery but with the hand pump near her house, they can fetch water as required. This is in

contrast to the previous practice where large quantities of water had to be physically transported and stored.

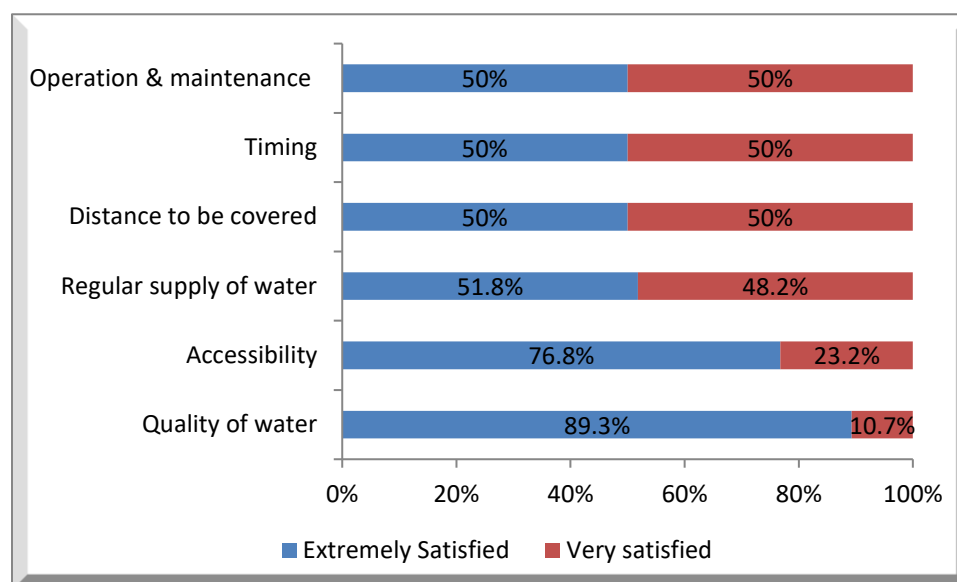


Figure-30: Satisfaction level with regular water supply

89.3% (n=50) respondents were extremely satisfied with the quality of water while 76.8% (n=43) were extremely satisfied with the accessibility. It was explained that in the past quality of water sources was not decent, however the water collected through hand pumps is of better quality and safe for drinking purposes. This is very beneficial for those households who were previously getting water on payment.

The availability of clean drinking water also reduces the vulnerability due to drinking contaminated water which affected the health and gave rise to water-borne diseases. All respondents informed that now they are incurring less expenditure on health than before as less incidence of disease is observed. Women explained that children had diarrhoea due to drinking contaminated water but the clean water supply through hand pump has resolved their concerns.

Key challenges

It was explained that the current number of hand pumps are not sufficient as the usage and demand of water have increased in the recent time due to population rise.

Flood Protection Wall

Benefits of Flood Protection Wall

Flooding causes depositions of a sandy layer, which can have long-term impacts on soil and soil fertility and may even be irreversible (Kalyan Das 2012). With the population primarily being dependent on agriculture controlling floods caused the land quality to increase drastically, 93% of respondents admitted that they experienced increase in agricultural land.

31% respondents stated they experienced a 5-10% increase whereas approximately 19% respondents identified a 16-20% increase in agricultural land clearly demonstrating the economic and social impact this provision has had on the locals.

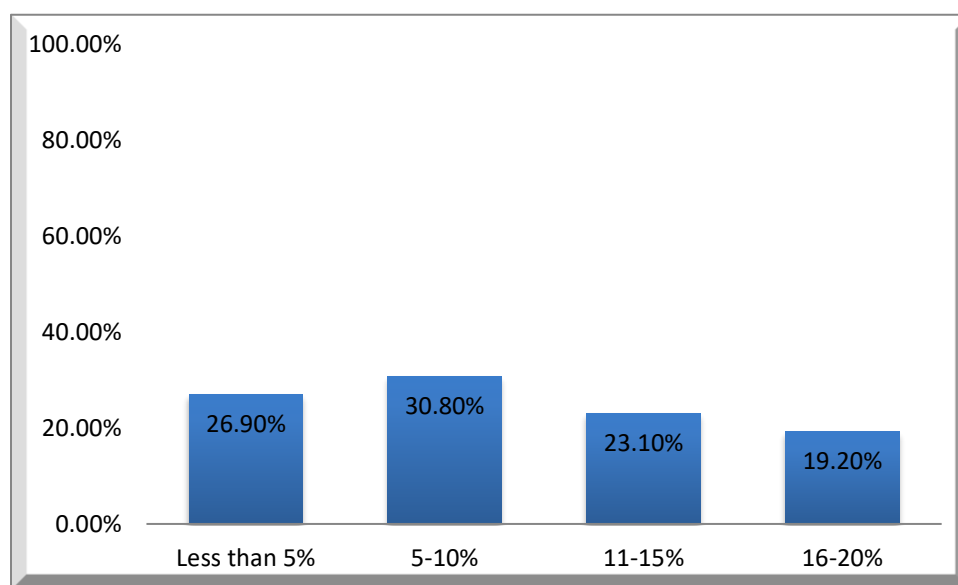


Figure 31: Percentage increase in cultivated land

A significant portion, 40% respondents stated they experienced a 5-10% increase in income whereas some even stated a more than 20% increase showing a visible increase in livelihood and economic scenario of the locality due to the fact that their crops and livestock now are safe from floods.

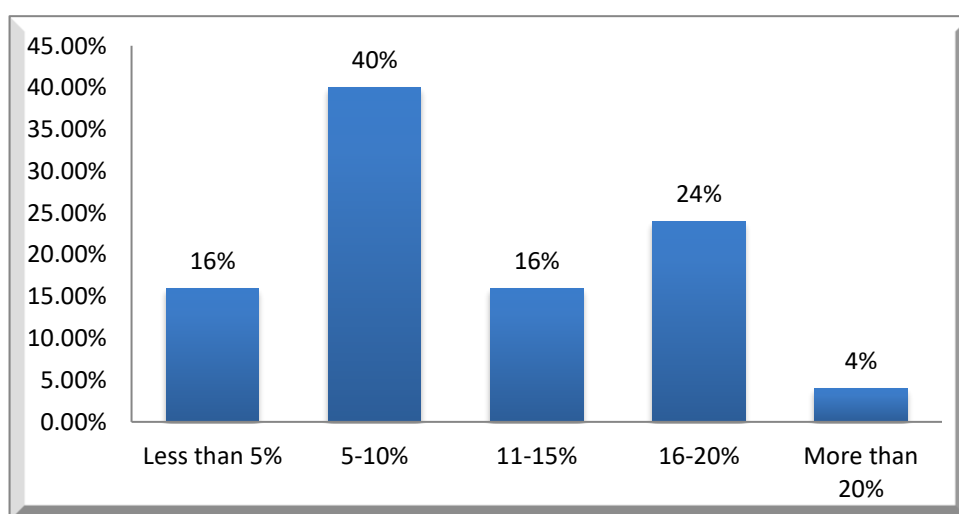


Figure-32: Percentage of respondents' increase in earnings

Regarding the efficacy of the cultivated land 89% respondents stated they are growing more crops than before. According to them there has been less waterlogging and a significant improvement in the quality of land. Research in flooded soils has shown that the oxygen concentration approaches zero after 24 hours. Without oxygen, the plant cannot perform critical life-sustaining functions such as respiration, water uptake, root growth, etc. Water logging also leads to accumulations of compounds like CO₂, which are toxic to plants in high concentrations (Steve Butzen).

Damage Control

With regard to damage control, all respondents admitted Flood Protection Walls benefited their locality by controlling damage to houses and agriculture land, stopping floods from contaminating their water supply, stopped diseases from spreading, helped with the fertility and irrigation of lands and lastly lessened injury/loss of livestock. The FGDs discovered that the local population was psychologically relieved after realizing that the threat to their property and livestock was now contained clearly demonstrating the increase in the quality of life of the beneficiaries.

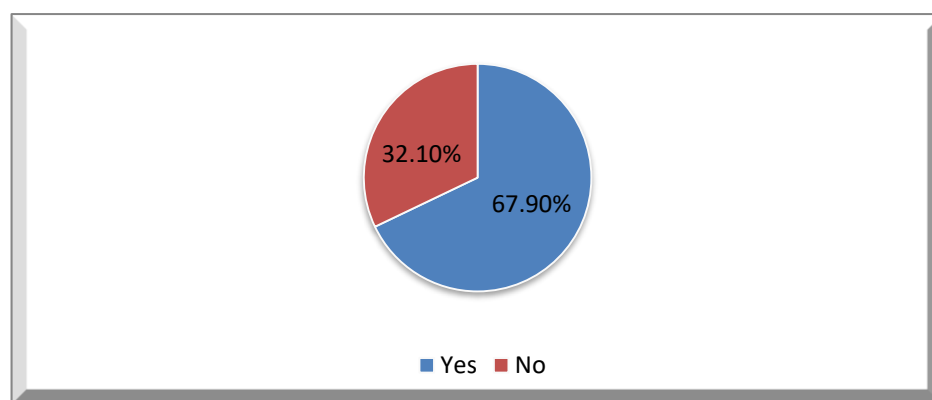


Figure-33: Percentage of households affected from floods

68% of the respondents stated floods affected their households prior to the provision of Flood Protection Walls. Respondents mostly reported damage to household property, injury to human health, loss of human life, wastage of agriculture land/crop and injury to livestock as the main types of damage that occurred due to floods.

As discussed in the FGDs, the locals of Chitral were faced with severe social and economic consequences due to floods. The communication links and infrastructure such as roads and bridges were frequently disrupted in these mountainous regions, economic and social activities came to a standstill and people that were in danger areas were often forced to leave or relocate their homes. Constant stress from displacement from homes, loss of property and vulnerability in general was one of the main problems revealed by the respondents in the FGDs.

Key Challenges

Without exception all respondents demanded more provision of Flood Protection Wall as it is necessary and the locals' only line of defense against floods. It is obvious that

floods are a menace to this locality and make the people highly vulnerable and less resistant to shocks as their assets are always under threat.

Regarding operation and maintenance, 65% of respondents admitted they participated in operation and maintenance work. Such mediocre participation levels were the result of inadequate training and general lack of willingness from the population mostly due to cultural barriers. Limited resources resulted in the wall to be unmaintained in some areas and damaged in others.

Feedback suggested that local social organizations need to be strengthened who in turn may raise awareness regarding training, overgrazing and deforestation. Encouraging use of hazard maps ³³to ensure houses, animal shelters and crops could help flood prone areas.

3.3.3. Livelihood Enhancement Program (LEP)

Skills Development

Respondents informed that skills training proved to be useful in enhancing their earnings prospects. Positive feedback in this regard was given by the respondents and they were extremely satisfied with the training provided to them. All the respondents in Chitral (n=9) while 90.4% (n=47) in D I Khan and 50% (n=6) in Swabi said that technical and vocational skills training helped in increasing their earnings from agriculture and small enterprises. Apart from this, it was also highlighted that they are adopting these skills in everyday dealings with local communities.

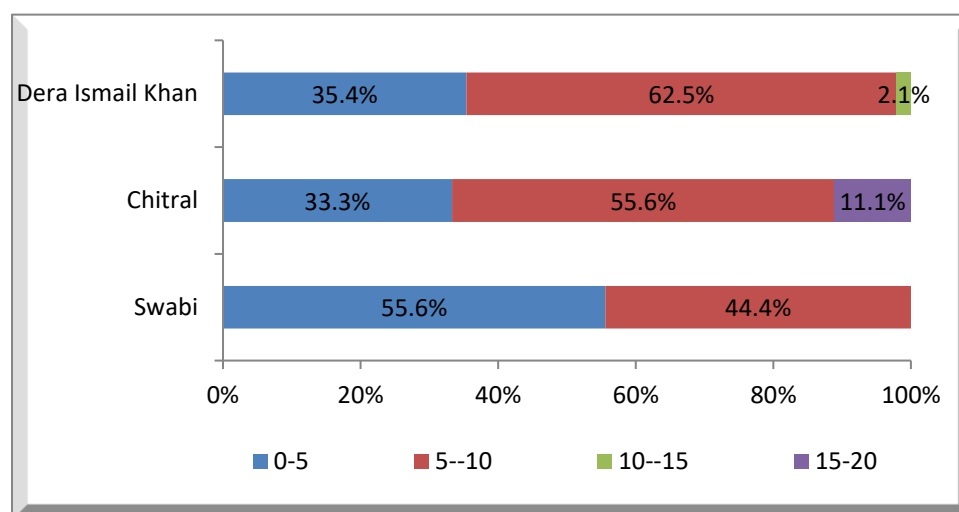


Figure-34: Percentage increase in earning

62.5% (n=30) respondents in D I Khan, 55.6% (n=5) in Chitral and 44.4% (n=5) in Swabi said that their income increased by 5-10% after receiving skills training. The

³³A hazard map is a map that highlights areas that are affected by or are vulnerable to a particular hazard.

increased income is spent mainly on food, health and education. A respondent said that he is spending more on food which improved health of his children. Similarly a respondent told that he purchased new stationary items for his child.

Women empowerment

Respondents highlighted that skills training also helped to enhance the women empowerment as participation in economic activities helped them to play an active role in household.

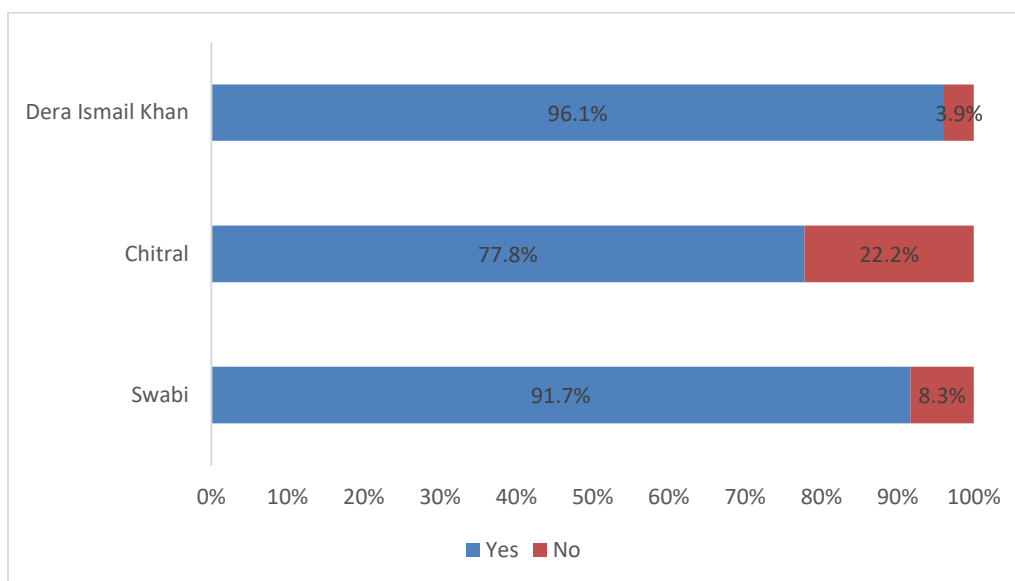


Figure-35: Increase in women empowerment

96.1% (n=49) respondents in D I Khan, 91.7% (n=11) in Swabi while in Chitral 77.8 % (n=7) respondents pointed out that increase in women empowerment was observed after receiving skills training. 80% (n=16) women in D I Khan and 75% (n=6) in Chitral said that their husband were supportive towards them in receiving training.

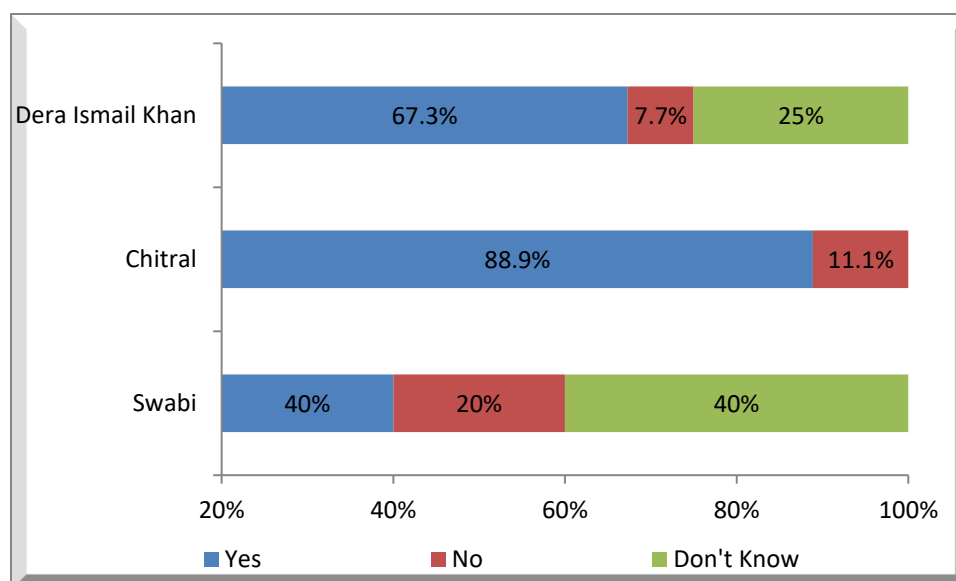


Figure-36: Increase in decision making through economic empowerment

Economic empowerment also impacts decision making power within the household for women as 88.9% (n=35) in D I Khan, 88.9% (n=8) in Chitral and 40% (n=4) in Swabi told that economic empowerment increased women's role within household. During FGD women explained that they now provide their feedback in purchase of household items and education of their children.

Asset Transfer

Type of Asset Transfer

Under LEP, major assets provided to respondents were related to livestock, trading and production. 69.2% (n=18) respondents in Dera Ismail Khan while 50% (n=1) respondents in Chitral and 36% (n=9) in Swabi got livestock assets which includes sheep and goats.

Satisfaction with Asset

84% (n=21) respondents in Swabi and 61.5% (n=16) respondents in Dera Ismail Khan were extremely satisfied with the quality of asset.

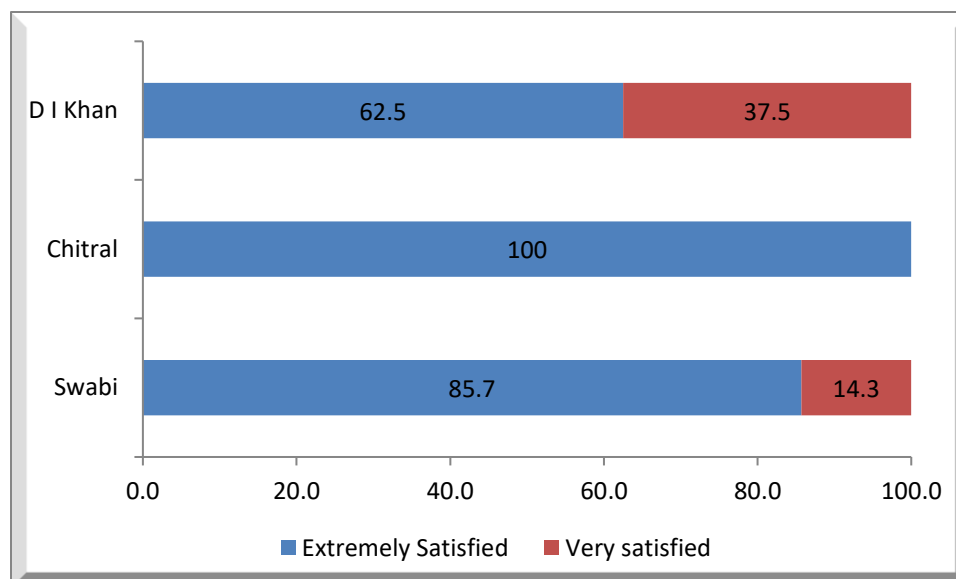


Figure-37: Satisfaction with usefulness of asset

All the respondents (n=2) in Chitral, 88% (n=22) in Swabi while 65.4% (n=17) in D I was extremely satisfied with usefulness of asset provided to them. During FGD, it was pointed out that asset such as livestock increased their household income due to which they are having better living standards.

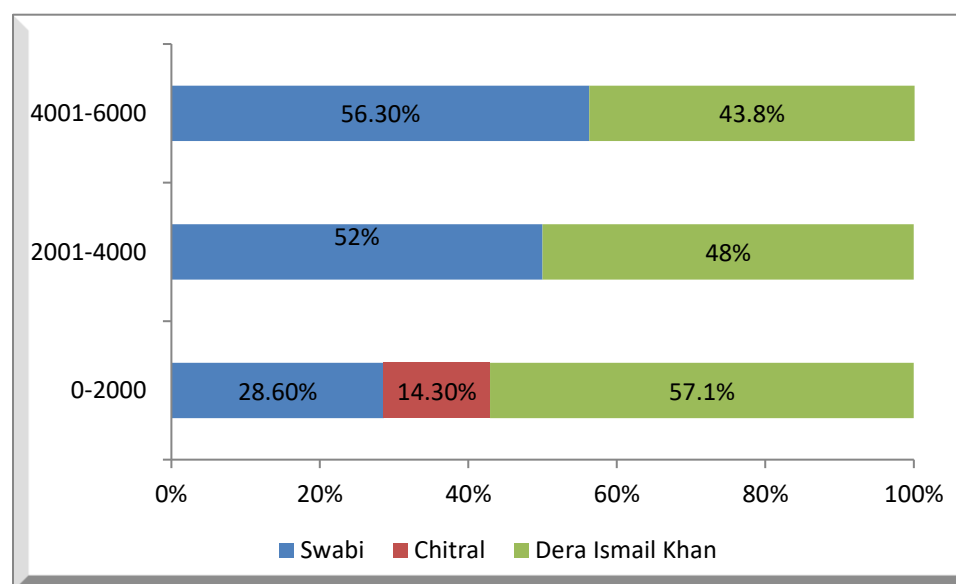


Figure-38: Increase in income

Out of total respondents, 56.3% (n=9) in Swabi and 43.8% (n=7) in D I Khan said that their income increased by upto Rs. 4000-6000. A respondent said that greater income level make it possible for him to carry out repair and maintenance of his home. Similarly another respondent said that he brought new uniform for his children with more income. A woman said that she brought new crockery with additional

earnings. Another woman told that she purchased new sewing machine from additional income. A respondent said that he purchased new tools with increased income.

Key challenges

Respondents identified that the number of skills trainings are not enough. It was also pointed out that the venue of training was not suitable for some of the respondents as it was either far from home or inconvenient for them. Similarly some respondents said that training duration was short and they cannot learn appropriately.

Alongside skills training, during visit to Dera Ismail Khan it was mentioned by respondents and also observed that due to lack of education asset provided has limited benefits. Respondents reported that “We are provided with the assets but no training on utilization and maintenance is provided”. Similarly, asset provided is not sufficient enough for big families in terms of quantity.

3.3.4. Education

Under the LACIP framework, some headways and interventions were conducted in regards to Education to enable access and promote availability of schools and teachers. This was achieved through construction of new community schools and upgradation of previous ones by provision of infrastructure such as toilets, furniture, electricity etc.

Availability of Community Schools

First off, interventions were made to facilitate and provide easier access to nearby schools. Under this component, multiple schools were supported in each district. Table 13 below shows the responses of parents as to which PPAF-supported school their children are going for their education. Looking at the district-wise analysis, a mix of school enrolments can be seen. Moreover, it should be noted that no ‘Govt. Girls Secondary School’ or ‘PPAF-supported Community Schools’ were established in Dera Ismail Khan. Moreover, only 4% of the respondents in Dera Ismail Khan stated that their children are enrolled in a Govt. Boys Middle School.

Table-14: Respondent answers to where they send their children for education

	Swabi	Chitral	Dera Ismail Khan
Govt. Boys Primary School	34%	38%	28%
Govt. Girls Primary School	39%	22%	39%
Govt. Boys Middle School	30%	67%	4%
Govt. Girls Middle School	41%	41%	18%
Govt. Boys Secondary School	25%	50%	25%

Govt. Girls Secondary School	33%	67%	0%
PPAF Community School	50%	50%	0%

Enrolment Rates in the school remained high for each district. With Swabi and Chitral receiving 95.7% enrolment rates while Dera Ismail Khan reported 95.1% enrolment rates. This shows the success of the program in addressing the needs of the parents and promoting availability and reliability of schools through development of infrastructure.

Engagement with teachers and parents

Engagement of teachers and parents have been known to help with the development of children. When parents were queried if they were part of a Parent Teacher School Committee, 53.7% of the parents in Dera Ismail Khan reported that indeed they were. This is followed by Swabi with 45.7% parents stating they are in the committee. Unfortunately, over 91.3% of the respondents in Chitral indicated that they were not parts of the committee. Notwithstanding, all members of the committee in Chitral and Dera Ismail Khan regularly attended these meetings whereas, in Swabi, 100% of the parents participated. Regular parent and teacher interactions can ensure accountability and provide valuable feedback to teachers. Most parents in Swabi and Chitral reported that they had seen positive results from the feedback they provide.

The availability of the playgrounds was deemed poor by most respondents, as there was limited availability of playgrounds in the schools. In Swabi, 19.6%, Chitral 28.3% and Dera Ismail Khan 2.4% of the respondents were extremely dissatisfied with the condition / non-availability of playgrounds for children.

Apart from that, most of the other facilities such as teacher attendance, provision of water, extracurricular activities etc were termed satisfactory by the respondents.

Accessibility of Schools

Distance to schools plays a major part in the enrolment rates as longer distance dissuades parents from sending children to school. The survey results indicate that the majority of the schools in Swabi and Chitral were less than 500 meters distance from households, whereas in Dera Ismail Khan 54% of the schools were less than 500 meters away from the households. In this district, parents reported that 42% of the schools were less 1 kilometre away and for 5% of the parents, less than 2 kilometres away. These longer distances specifically in Dera Ismail Khan suggest that a number of schools are not in nearby localities.

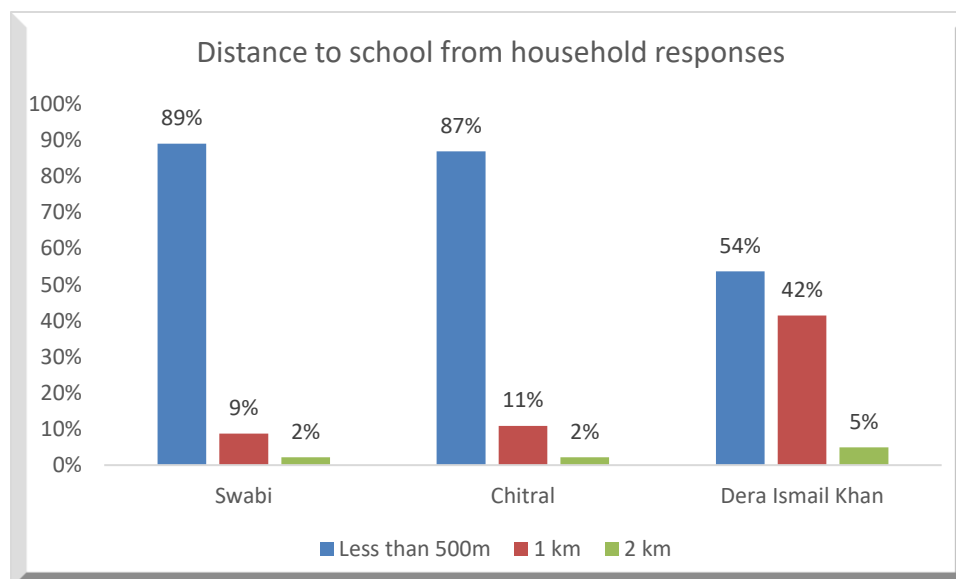


Figure-39: Distance to School from Household

Unfortunately, the survey results showed that most of the respondents were unable to afford the expenditures. The highest affordability was seen in Chitral with 41.3% reporting having enough income to manage the expenditure as seen in Table 14 below. Notwithstanding, basic items such as stationary and books were provided free of cost to all parents to alleviate much of the cost burden.

Similarly, looking at the results from the survey, it was observed that 100 % respondents across Swabi, Dera Ismail Khan and Chitral reported that books and stationary are provided free of cost and water facility is there in each school therefore water is also free of cost. Contrary to this uniform was not provided free of cost at any school. In case of Uniform annually 100 % of the respondents in Chitral and Swabi were spending over PKR 6000 on uniforms. Whereas in case of Dera Ismail Khan 2.4 % (n=1) respondent said that spending annually on uniform is PKR 2400 whereas rest of the respondents found it difficult to bear the expenditures and they are spending above PKR 6000 annually.

Transport was the least used factor in this region depending upon locality. Out of total sample questioned only 4 respondents in Swabi responded to this question positively by mentioning that they are spending above PKR 6000 annually on transport. Whereas 1 respondent in Dera Ismail Khan said that PKR 2400 are annual expenses on transport and 1 of the respondents mentioned above PKR 6000 as annual expenditures on transport.

Table-15: Percentage of individuals who believe expenditures are affordable

	Yes	No
Swabi	26.1%	73.9%

Chitral	41.3%	58.7%
Dera Ismail Khan	17.1%	82.9%

Overall satisfaction with the accessibility of these schools was recorded from survey responses as follows in table-16.

Table-16: Percentage of respondents per district rating their satisfaction with interventions

Accessibility						
	Extremely satisfied	Very satisfied	Somewhat satisfied	Somewhat Dissatisfied	Very dissatisfied	Extremely dissatisfied
Swabi	76%	20%				4%
Chitral	74%	21%				5%
Dera Ismail Khan	71%	24%	5%			

Teacher methods and General Practices

Interestingly, when teachers in the PPAF supported schools were asked about whether they received training or not, a significant number of teachers detailed that they were either not aware or had not taken any trainings from PPAF. Around 41.7% of the teachers in Dera Ismail Khan admitted to receiving trainings whereas only 5.6% teachers in Swabi received trainings. For Chitral, no teachers had receiving any form of training. This statistic is concerning as under-trained and under-equipped teachers can be detrimental towards the educational development of a student. Moreover, although funding has been provided for these interventions, no training for any teacher in Chitral should be a significant cause of concern. For the teachers who did receive the trainings, all of them reported that the interventions for trainings on selected subjects were rightly placed. However, only 13.3% of teachers in Dera Ismail Khan stated that the trainings were useful. Whereas rest of the teachers including the ones in Swabi termed them not useful depending upon duration of training and number of trainings. A further 45.5% of teachers in Dera Ismail Khan reported that they adapted trainings in the classroom.

Regarding punishments, teachers in Chitral had the highest percentage of reported punishments with 41.3% parents reporting as such. See Table 17 for a district-wise breakdown.

Table-17: Percentage of parents reporting whether schools still practice punishment

	Do Punishments occur?	
	Yes	No
Swabi	15.2%	84.8%
Chitral	41.3%	58.7%
Dera Ismail Khan	2.4%	97.6%

When parents were asked about presence of separate latrines in school 45.9 % (n= 61) responded positively that there are separate latrines present for boys and girls whereas 54.1 % (n=72) responded negatively. Within this negative responses 71 % (n= 30) respondents were from Dera Ismail Khan followed by 63 % (n=29) and Chitral with 29 % (n=13).

Similarly When parents were asked if their children were being taught about practicing washing hands before eating meals, around 78% respondents in Dera Ismail Khan noted they were. Similar answers were recorded across all three districts. This can be associated to the fact of enjoying going to school which was 100 % positively responded by parents across each district (Swabi, Chitral and Dera Ismail Khan).

To indirectly measure child satisfaction, parents were asked if their children were happy going to schools to which all respondents stated that their child enjoys going to school.

Key Issues

The lack of a conducive environment was understood as concerning for parents. The most significant challenges that persist according to the parents is the non-availability of schools for girls in their localities. Non-availability of schools for girls limits their development and growth opportunities. Second, parents were critical of the poor infrastructure and lack of playgrounds which limit their children's physical activities. Finally, they stated that a lack of teachers for different subjects was unsustainable long-term and is concerning for the students.

3.3.5. Health

Under LACIP-I, overall 4 health centers (3 BHUs and 1 CHC) were supported that benefited 76,760 patients including 9,955 men, 35,521 women and 29,284 were children. The assessment of beneficiaries' satisfaction from provided health facilities has an important role in designing future health interventions under LACIP-II and to promote beneficiary-oriented health services.

Availability of Health Services and Facilities

During this survey, 80 households were interviewed among 04 villages namely, Sher Afzal Banda (UC Anbar), Azamabad (UC Chaknoda), Tarkhada (UC SardCheena) and Yaqobi Khas (UC Yaqoobi). In these villages, 100 % of the respondents availed the health services from Basic Health Units (BHUs) and Community Health Center (CHC) provided by the PPAF.

The reasons for availing these facilities were asked from respondents with the majority of the respondents claiming that these services are nearest to their homes, easily accessible and only government facilities in their locality. Therefore they are availing health services from these facilities. A woman at village Tarkhada stated that "BHU is easily accessible to their homes so the women from this community can easily visit these health facilities for the treatment". 52.6 % (n=40) claimed that they visited these facilities for acquiring primary health services, 37 % (n=28) visited for child health services and 16 % (n=12) were visited for maternal health.

It has been observed during FGDs at Swabi that these health facilities are mainly providing the basic services and not facilitating maternal cases effectively. This, they claimed is due to several reasons including insufficient training of female health staff to meet women's specific health needs, shortages of medicines and equipment and working hours of these facilities are not enough for women. Therefore, it has been found that women at the time of delivery have to travel to urban areas for child delivery which somewhat defeats the purpose of these centers and puts women at a huge risk.

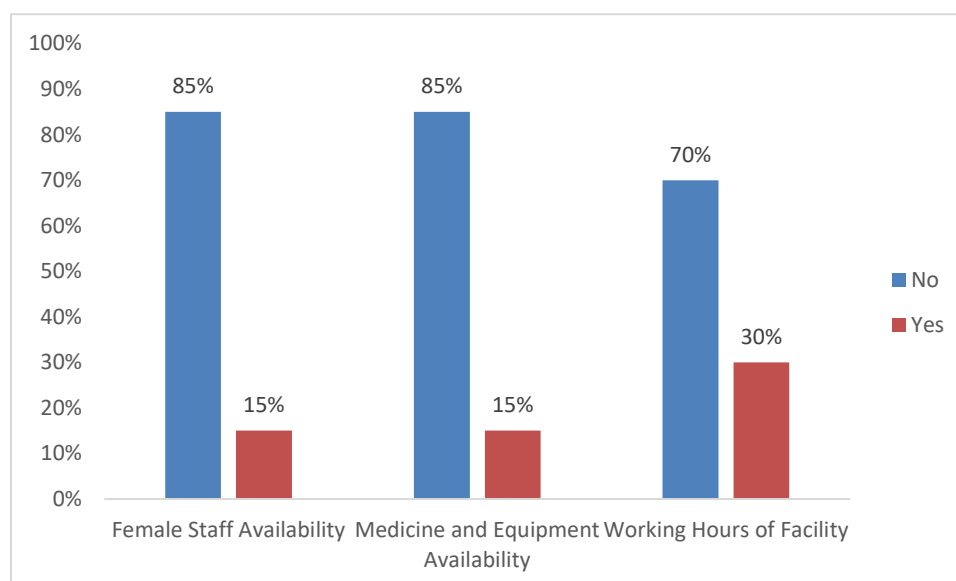


Figure-40: Sufficiency of medical facilities

These health facilities are only providing antenatal and postnatal checkups for women while these facilities are not sufficiently facilitating at the time of delivery. Women

during FGD demanded that the maternal health facilities should be provided fulltime in emergencies.

Access to Health Facilities

Rural populations are more likely to have to travel long distances to access healthcare services. This can be a significant burden in terms of travel time, cost, and time away from the home (Baird et al 2006 and Hussain et al 2017). While, this survey data indicated that beneficiaries were satisfied from the level of access to health facilities. As most of the respondents 55 % (n=44) could access health facilities in less than 15 minutes, 37 % (n=30) could access in less than 30 minutes and only 8%% (n=6) had to travel more than an hour to reach medical facilities as shown in figure-41:

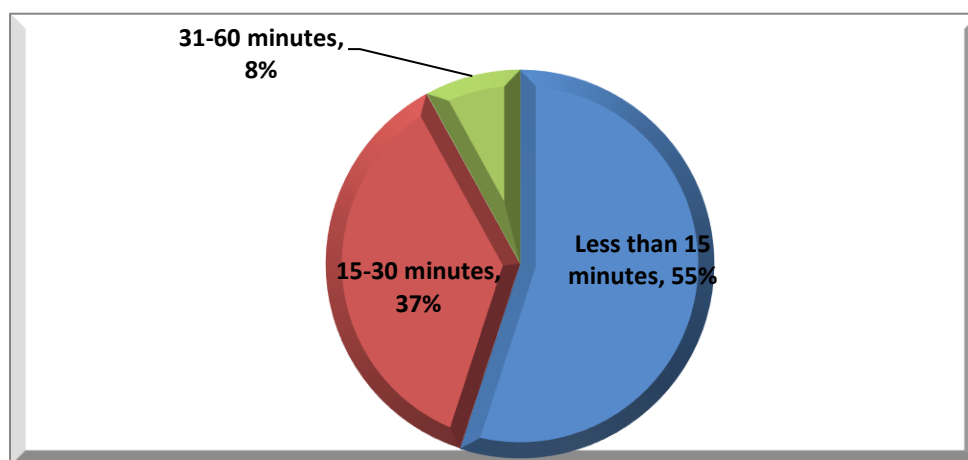


Figure-41: Time required to reach to nearest health facilities

Moreover, when asked how much time the patients have to wait to attain medical services, majority 62 % (n=50) reported less than 15 minutes, 35 % (n=28) had to wait around 15-30 minutes and 2.5 % (n=2) only had to wait more than 60 minutes due to high number of patients and sometimes shortage of staff. Waiting time as well as consultation time are the main factors that affect patient satisfaction. Evidence shows that patients were likely to be satisfied if their waiting time is within 30 minutes.

Affordability

Overall those who need health services are receiving treatment without facing financial hardships. 52% (n=42) found their health services to be affordable, however, most of this group were not paying for their health services. They only have to pay a token 'parchi' fees between Rs. 5-10 rupees. Particularly the respondents found these health services very effective and affordable for child's treatment. During informal discussion, majority of the parents responded that vaccinations are very important for their child's health; they help in stopping the spread of diseases. The children at these health facilities are being vaccinated on regular basis. We also came to know that LHWs and LHVs have been visiting communities on a regular basis

and they are administrating vaccinations. They raise awareness about different diseases such as polio, dengue, malaria and tetanus.

While 48% (n=38) found that health services were not affordable indicated that most of the medical investigation tests and medicines facilities are not available at these centers therefore patients have to pay around PKR 200-300 for tests such as Malaria, Typhoid and TB. Similarly they had to pay PKR 100-500 for medicines if they diagnosed some serious health problems as these centers have only medicines for fever, flue, and cough. During FGD, it was found that lack of medicines in these health facilities was the major problem, where about 70 % of the patients with prescription paper for medicines did not get some or all of the recommended medicines from the center's pharmacy.

Satisfaction from Health Facilities

The participants were asked to rate their overall satisfaction regarding provided health facilities including availability of health staff, provision of quality of services, availability of medicines, working hours of facilities and affordability. More than half of the studied populations were either satisfied or very satisfied with accessibility and waiting time for checkups. Nevertheless, 48 % (n=38) were either dissatisfied or very dissatisfied with the availability of health staffs, working hours of these facilities and availability of medicines.

The overall survey results exhibit that most responses were between 'somewhat dissatisfied' and 'very dissatisfied'. The most negative response was received towards the availability of medicines with 20% (n=16) of the respondents mentioning they were extremely dissatisfied with the availability of medicines. Moreover, health staff was also rated very poorly as there was a lack of staff available to address the needs of the community.

Regarding the characteristics of quality of services, while some beneficiaries were satisfied with the performance, most of them were not satisfied with the service quality at the community health center.

Table-18: Beneficiaries' satisfaction from Health Facilities

	Extremely Satisfied	Very Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Very Dissatisfied	Extremely Dissatisfied
Health Staff	0%	5% (n=4)	22% (n=18)	25% (n=20)	35% (n=28)	12% (n=10)
Quality of Services	2% (n=4)	5% (n=4)	25% (n=20)	30% (n=24)	25% (n=20)	12% (n=10)
Availability of Medicines	0%	5% (n=4)	12% (n=10)	30% (n=24)	32% (n=26)	20% (n=16)

Working Hours of Facilities	2% (n=2)	5% (n=4)	23% (n=18)	36% (n=29)	20% (n=16)	13% (n=10)
Affordability	2% (n=2)	5% (n=4)	23% (n=18)	36% (n=29)	20% (n=16)	13% (n=10)

The FGDs reveal that women are still dependent on unskilled birth attendants. Therefore, birth deliveries mostly take place at home under the care of traditional midwives. The field team has found that most of these health facilities are non-functional because of doctor's absenteeism therefore it is extremely difficult for the poor to visit private doctors or hospitals and as a consequence, unskilled birth attendance remains the only option.

Majority of the respondents were found to be satisfied with the provision of basic health facilities such as drinking water and toilet facilities. Around 78 % beneficiaries had access to drinking water and 82 % confirmed about toilet facilities.

Key Challenges

Lack of emergency facilities

In order to improve maternal, newborn and childcare services and reduce their mobility and mortality, PPAF constructed and upgraded the labor rooms in BHUs. However, it was revealed that these health facilities have failed to deliver the emergency obstetric and gynecological services and putting the patient's lives at stake. As labor rooms were found not functional due to shortage of backup power, functional electricity, delivery lights, delivery table, cannula with injection ports, drip/I.V sets, chlorhexidine gel, cord clamps, disposable syringes, sterile surgical gloves, and non-availability of gynecologist and midwives. Moreover, the working hours for this center were poorly rated, as some respondents stated that at times, there were no lady doctors to see women in the center even during the working hours. Therefore, the majority of women has been requested the availability of medical staff for all 24/7 BHUs in order to facilitate the women's patients at the delivery time in an efficient way.

Lack of medicines

Acute shortage of medicines at these health facilities has been found from the respondents. They claimed that when doctors prescribe medicines, beneficiaries have to buy medicines from a pharmacy. Therefore there is need to provide the prescribed medicines at the Centers.

3.3.6. Disaster Prevention Management (DPM)

DPM Training

Capacity-building through trainings

According to survey results, all the respondents stated that they had attended Disaster Prevention Management trainings. Three categories of trainings were provided to the beneficiaries, namely Early warning training, mock drills and disaster management. Early warning training equipped beneficiaries with the knowledge to identify early signs of disasters such as floods or droughts. Mock drills helped practice emergency procedures in case of such disasters, and disaster management training equipped beneficiaries with the knowledge of the actions to take in the event of floods, earthquakes or droughts.

Early warning trainings and mock drills were held in a significantly larger quantity in Swabi than in Dera Ismail Khan at 45.8% and 10.4% respectively. Whereas disaster management training was held almost equally in both districts with 54.2% respondents in Swabi and 81.4% in Dera Ismail Khan reporting taking part in the trainings. This can be seen in Table 19 below:

Table-19: Beneficiaries who received training

	Swabi	Dera Ismail Khan
Early Warning Training	45.8%	18.5%
Mock Drills	10.4%	3.7%
Disaster management	54.2%	81.4%
Any other	4.2%	

Survey results show that beneficiaries in Swabi were not as satisfied as in Dera Ismail Khan. Although receiving a larger share of the total trainings, 2.1% of the beneficiaries in Swabi regarded the trainings as 'somewhat dissatisfactory' while only 14.6% regarded the trainings as extremely satisfactory. The remaining beneficiaries 83.4% noted the trainings as 'very satisfactory' (41.7%) or 'somewhat satisfactory'(41.7%). On the other hand, in Dera Ismail Khan 81.5% of beneficiaries were 'extremely satisfied' with the trainings and only 18.5% were 'very satisfied'. Hence, even though receiving fewer trainings, respondents in Dera Ismail Khan deemed the trainings to be very positive and fruitful as FGDs revealed that the trainings were relevant for the beneficiaries. The following Figure 42 illustrates the satisfaction of the beneficiaries across each district.

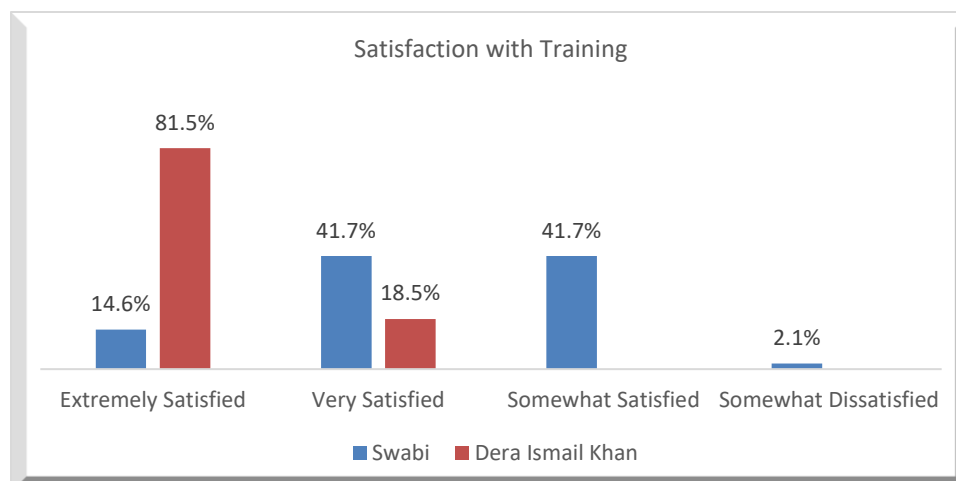


Figure-42: Satisfaction with trainings

When asked whether the trainings helped spread awareness among the locals, all respondents in Dera Ismail Khan agreed, while in Swabi, 83% agreed with the statement and 12.8% stated that they are not aware. Only 4.3% of Swabi respondents considered the trainings unsuccessful in raising awareness of the public. Overall however, the trainings proved successful as all survey respondents stated that these helped raise awareness regarding disaster preparedness and could help mitigate dangers of flood water.

Personal Emergency Tools provided

In the case of an emergency, some emergency response tools such as flashlights, first aid kits and fire extinguishing equipment were provided in villages that would allow villagers to be better equipped to deal with disasters. During the survey, it was found that only First Aid Kits had been provided in both Swabi and Dera Ismail Khan. Whereas Dera Ismail Khan received all other tools and equipment as shown in Table 20 below.

Table-20: Equipment provided per district

	Districts	
	Dera Ismail Khan	Swabi
Excavation Tools	Provided	
Basic Search and Resource Items	Provided	
First Aid Kits	Provided	Provided
Fire extinguishing Equipment	Provided	

These limited interventions in Swabi could be due to resource limitations or the fact that more equipment was provided in Dera Ismail Khan while more trainings were provided in Swabi as seen in previous section.

Disaster-related offices in area

Beneficiaries from Swabi reported that there were no emergency response centres established in their area, with 87.9% of respondents stating as such, and the remaining 12.1% claiming they were not aware of any response center. Dera Ismail Khan on the other hand received mixed responses, with 43.5% of the respondents stating that an emergency response centre had been established in their locality and around 56.5% stating no such centre had been established. Overall, this contributed to 83.3% of all beneficiaries stating that there were no centers or they were not aware.

These results can be seen in the following Figure (See Figure-43) below:

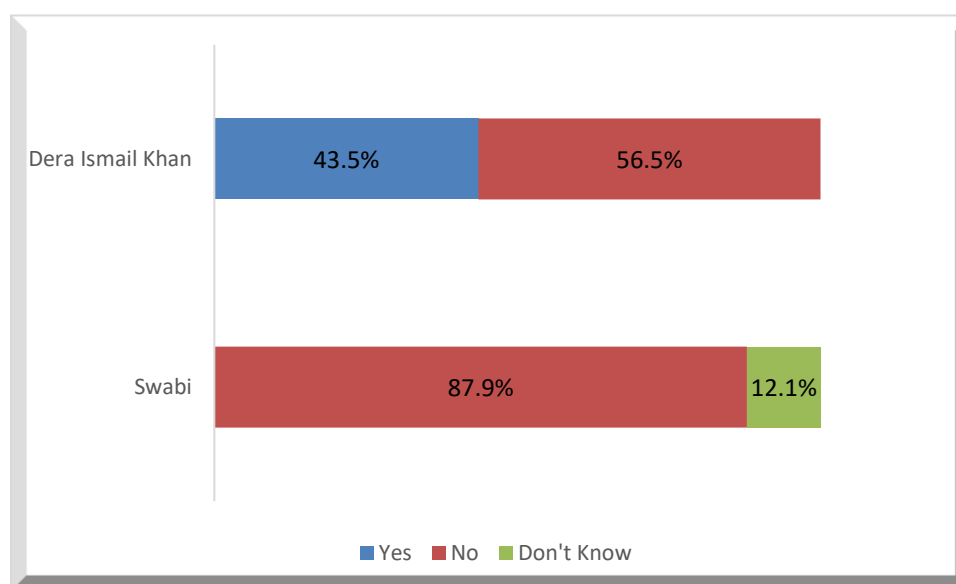


Figure-43: District-wise response to awareness about emergency centers in the locality

Community meetings were held to identify vulnerabilities of the villages to disasters. For Swabi, 36.4% of the respondents stated such meetings were held, whilst 95.2% of respondents in Dera Ismail Khan stated meetings were held. 12.1% of the respondents in Swabi noted they were not aware of any community meetings, as some respondents being female, they were either not involved or unaware of these meetings or their contents.

Key Challenges

Projects to mitigate disasters included flood protection walls and retaining walls. All respondents in Swabi noted that no drought mitigation and preparedness projects were held in their localities. While 75.8% of the respondents in Dera Ismail Khan admitted to having seen project implementation in their locality which helped

mitigate danger of flood water. Followed by 16.1% responding they were not aware and only 8.1% suggesting no such interventions were conducted. A simple breakdown can be seen in Table 21 below.

Table-21: Individuals who noted Drought Mitigation and Preparedness Projects in their locality

	Yes	No	Don't Know
Swabi		100%	
Dera Ismail Khan	75.8%	8.1%	16.1%

Beneficiaries highlighted that flooding still remains a key issue and hence have desired the need of more flood protection walls.

3.4 Key Findings of Hydropower & Renewable Energy Program in Khyber Pakhtunkhwa (HRE)

This section presents the key findings of beneficiary satisfaction survey for micro hydropower, solar energy and social mobilization interventions. The overall objective of the program is to improve the standard of living of poor communities by increasing access to energy mainly for those who did not have energy access prior to the programme³⁴. This will potentially decrease the use of other sources of energy such as fuel wood, kerosene and diesel in rural areas. This project aims to increase employment and income opportunities through production and promotion of renewable energy, especially for the poor. It will also work to strengthen local civil society organizations and enhance participation in decision making at the community level.

Micro and Mini Hydropower Plants (MHP)

Household accessibility to energy sources

During the bilateral government negotiations between the Islamic Republic of Pakistan and the Federal Republic of Germany; a grant amount of EUR 22.50 million has been committed for the "Development of Hydropower and Renewable Energy (HRE) project in Khyber Pakhtunkhwa.

The target site for this MHP is a remote and isolated area which not connected to the national grid and unlikely to be connected in foreseeable future. The beneficiaries, therefore, are the rural people residing in more distant and inaccessible areas. Therefore, MHP plant was installed in village Sarklay with the main objective to provide efficient energy alternatives to firewood that is commonly used in the region.

³⁴ Further details can be seen <http://www.ppaf.org.pk/HRE/index.html>

Currently all households in the village have access to electricity; altogether there are 63 households as a beneficiary group of the village.

Almost all the respondents termed hydel power plant as the prime source of energy in their village. The respondents did not have access to WAPDA supplied electricity before the project and relied on temporary and relatively unsafe methods to meet their energy requirements. When asked what was the source of their energy prior to the MHP, respondents stated multiple options as seen in Table 22, 95 %(n=60) of the respondents used kerosene oil while 62 %(n=39) used wood. whereas 17 % respondents (n=11) identified personal solar systems as their prime source of energy before the program. This explains the high dependency the local population on these unreliable, unsafe and relatively expensive methods in terms of time and cost to fulfill their energy needs as shown in following table:

Table-22: Sources of Energy before MHP Program

Sources	Number of Responses	Sources of Energy (%)
Kerosene oil	60	95%
Wood	39	62%
Personal solar system	11	17%
Diesel	11	17%
Total	63	

Moreover, the respondents were asked if there had been any accidents or mishaps due to the use of aforementioned energy sources. There were 2 out of 63 (both females) respondents admitted that an accident occurred of which both reported damage to household items. During FGDs, one participant claimed that a fire had started in their house due to wood and had caused damaged to household items, but it was ultimately controlled. However almost all respondents understood the health hazards of the unreliable fuels they had been using in the past. They informed about lung and heart related diseases which came about due to the fuel use.

The respondents were further probed to identify if they or members of their household suffered from any disease or ailment caused by the previous energy sources. There were 4 respondents who admitted to suffering from disease caused by previous energy supply of which 50% males (n=2) and 25 %females, reported eye infection while 25 %reported both eye and throat infection. The data clearly shows that even though the number of adverse incidents is minute, there was still a possibility of an accident occurring, as brought up in the FGDs. This risk has now been fully mitigated with a safer and more reliable replacement in the form of hydropower plants.

Since the power supply is reliable and reportedly shuts down only in the month of June and July, the beneficiaries have had to rely less on kerosene oil for lighting purposes. Not only did purchasing kerosene deplete the villager's already low cash savings but it also had a negative effect on the health of community particularly children who studied by the light from kerosene lamps.

As shown in Figure 44, 79% respondents (n=50) confessed that the energy provision is very reliable, 19% respondents (n=12) considered it as slightly reliable while only one respondent identified it as not reliable due to load shedding in the month of June and July. The data clearly validates the satisfaction level of the vast majority proving its efficacy. In FGDs, many participants regarded the MHPs as much safer compared to previous energy sources such as Kerosene oil which had caused fires in the past.

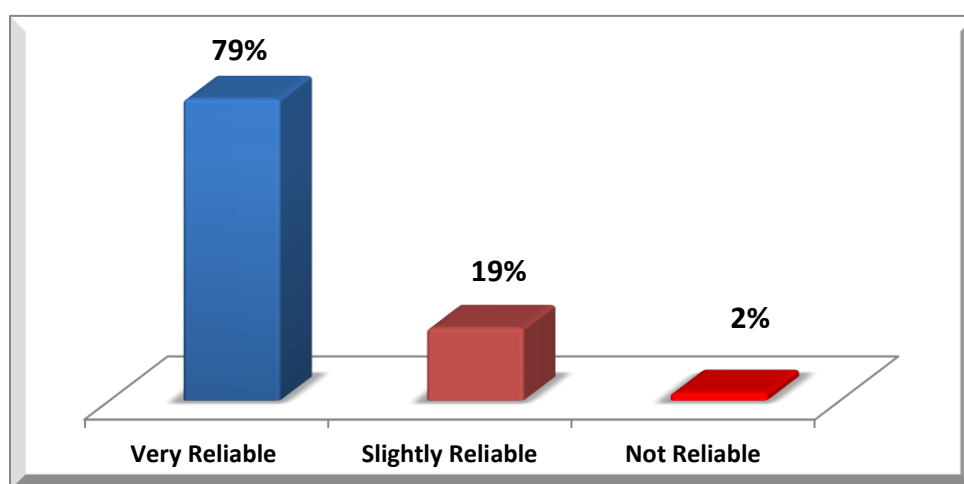


Figure-44: Respondent views on the reliability of MHP Provision

In FGDs, almost all respondents stated that they indeed faced electricity shortages during the summer season as the water flow would reduce. A few respondents in the FGD suggested that there should be an alternative energy source for the summer period when there is no water flow that ensures a stable supply of electricity. However they didn't have much knowledge on how this could be made possible.

Benefits of Renewable Energy

Mini and micro-hydro power plants convert the energy of flowing water into electrical energy and as there are little to no carbon emissions; it has little consequence on the environment (Umar et al. 2017). An efficient provision of electricity can improve the socio-economic conditions (Torero 2015) of the people particularly for those who still lack access to electricity and rely on traditional biomass such as firewood, kerosene oil and animal dung for cooking, heating and lighting in their homes. This MHP project has a number of benefits over other previous for power generation. Some of the advantages for the beneficiaries are given below:

- Benefits to Households
- Benefits to Women
- Benefits to Children

Benefits to the Households

According to the interviewed respondents, the village electrification has brought series of positive changes in the daily lives. Bright electric lights in their homes extended the evening hours for the people and helped them engage in various income generating activities. Owing to the access to electricity, villagers now have facilities for mass communication as most people possess mobile phones. Television (TV) was noted to be available in 4 households; even some households have internet facilities.

When asked from respondents the benefits they received due to MHP interventions, 87 %respondents (n=55) reported the reduced use of kerosene oil whereas 54% (n=34) reported. Similarly 14 % (n=9) reported less expenditure on energy as major benefit. While time saving, productive use of time saved, reliability, safe energy supply and damage control to home appliances was reported by 60 % (n=38), 29 % (n=18), 56 % (n=35), 52 % (n=33) and 2 % (n=1) respectively.

The data confirms that a significant amount of time was being wasted earlier due to unavailability of energy during dark hours that was now also being utilized. During FGDs with male member's households, the demands were made for allowing use of main appliances such as TV, refrigerator and washing machines. Various benefits to households can be seen from following table-23:

Table-23: Benefits to Households due to MHP provision

Benefits	Number of Responses	Benefits to Household (%)
Reduced use of Kerosene Oil	55	87%
Decrease in use of Wood	34	54%
Less expenditure on Energy	9	14%
Time Saving	38	60%
Productive use of time saved	18	29%
Reliable	35	56%
Safe energy supply	33	52%
Damage control to home appliances	1	2%
Total	63	

Having access to a reliable and affordable supply of electricity, gives small enterprises the opportunity to be developed at the community level that can directly affect the

rural economy. However, in this village, electricity is mainly used for meeting household lighting demand. Therefore, people are not realizing significant benefits in terms of economic development from the MHP provision. While, electrification availability has positive impact on social structure of rural people, as agriculture is the main source of subsistence in the community, people spend more of their time in their fields. During the evening time, the villagers get together for social activities (Peters 2018) .

Benefits to Women

In an FGD, a female stated that the electrification has brought positive change in their livelihoods. A woman explained that due to availability of bright electric lights in the evening time, the working hours extended and allowed them to engage in different income generating activities including weaving clothes. The female respondents were asked about the benefits of MHP provision, 78 %respondents (n=49) answered with increased time spent within home as the main benefits to women as shown in Table 24. They stated that in their homes, they could dedicate more time towards household chores and taking care of the family. 41 %respondents (n=26) responded with increased socialization as their benefits.

As discussed in FGDs, socialization increased due to the availability of energy after dark while according to 2 females this extra time now was also being spent in income generating activities which was previously not possible. Clearly indicating the long-term economic benefits of MHP provision on the community. During FGDs, women conveyed that they now had more time to wash clothes, do embroidery and stitching activities that helped promote their business. One woman claimed that she earned Rs. 800-1,000 per month because she could do stitching at night once she was free from household work. As discussed in the FGDs, MHP provision has brought about great qualitative changes in the lives of beneficiaries ranging from lesser health risks to more time spent and utilized on value adding activities.

Table-24: Main benefits to Women due to MHP provision

Benefits	Number of Responses	Benefits to Women (%)
Increased access to information and entertainment activities	6	10%
Increased socialization	26	41%
Increased time spent within home	49	78%
Improved health	6	10%

Use of time saved for income generating activities	13	21%
Any other (please mention)	1	2%
Total	63	

Benefits to Children

Traditionally, education has not been part of the culture of the people in Sarklay even though quality education plays a pivotal role in influencing the economic well-being of rural areas (Torero 2014). According to a NRSP officer, owing to the access to electricity, the academic performance of children has been greatly influenced in the village. Electric lights in households extend the day providing additional hours for evening readings and also reduced drudgery for children. The number of students attending schools is also increasing according to women in FGDs. Moreover, improvements in the education sector have brought about new hope and inspiration and help build confidence in village students.

When respondents were asked about the primary benefits to the children in their locality after MHP provision, 70 %respondents (n=44) stated with improved studies as the main benefit to their children while 32 %respondents (n=20) added to that with increased time spent within home, as shown in Table 25. Furthermore, 16 %respondents (n=10) stated increased socialization as benefits to children.

The data indicates the variety of benefits obtained and the effectiveness of MHP provision. One respondent informed that it was much safer at night, due to indoor lighting which led to lower crimes and better general visibility at night. Another male respondent stated that before MHP provision, students had to spend most of their productive time in collecting firewood and fodder to meet their household demand.

Additionally, students had to use inefficient traditional kerosene lamps and firewood as a means of illumination to study at night. A grandmother in FGD told that her whole family resided in a two-room house, with one room serving as a kitchen, study room and living room using only one light source. This creates an unfavorable environment for the students to study. After MHP provision, she added that the children now comfortably study in the second room. The benefits to children in the village can be seen from following table-25:

Table-25: Benefits to Children after MHP provision

Benefits	Number of Responses	Benefits to Children %
Improved Studies	44	70%
Increased access to information and entertainment activities	1	2%
Increased socialization	10	16%
Increased time spent within home	20	32%
Any other (Please mention)	8	13%
	63	

Before the MHP provision, children assisted members of the household to collect firewood which occupied most of their time. After the provision of electricity, less time is spent searching for firewood and hence, school attendance and time spent indoors has increased. A male teacher in the village during an interview reported,

'In the past, kids would not show up for school if they hadn't finished their domestic work. Now the attendance is much better. Before electricity, parents used to prevent their kids from studying at night because it used up kerosene but now with electricity, the children can study late into night especially during examinations.'

Economic Benefits

It was further investigated from those respondents who reported monetary savings after MHP provision on which items they spent their saved amount. 30% respondents (n=19) identified spending the saved income on food while 11% respondents (n=7) added health to this response.

Moreover, it was asked from the respondents whether energy provision allows them to get involved in economic activities. 57 % respondents (n=36) replied positively as some of them had bought internet devices (wireless internet services) while some mentioned mobile phones and how they can easily get updated information about agriculture products, prices, input costs, and other related information. A farmer stated that with the use of cellphones a key benefit has been immediate knowledge of market prices for their produced goods. Also, it was easier now to reach potential clients.

Furthermore, it was asked that on average, how much time (in hours) is saved in one month after MHP Provision. Around 95% respondents (n=60) informed saving less than 10 hours in one month while 5% respondents (n=3) stated they saved 11-15 hours. Respondents in FGDs relayed that a considerable amount of time was saved

as they previously had to travel to nearby markets to purchase kerosene oil and diesel. As Pandhair was a few hours' drive from the nearest market, traveling to and from markets took up to 7-8 hours. These trips were conducted once or twice a month for groceries. Women responded through FGD that they benefited from time-saving as they had more time to give to livestock care.

Usage of Electric Appliances

Analysis revealed that usage of electric appliances has increased. 45 %respondents (n=63) stated mobile charging, light and fan as their main type of appliance. 10 %respondents (n=14) added to this with Television as their main appliance. The ease of access to mobile phone and television has improved connectivity and availability of broad based information for the community. Overtime such changes have the potential to bring about greater awareness and behavioral transitions.

Most of the households use lights and fans as their primary appliances. A mother in FGDs stated that modern electric lights and fans in summer in the households allow more time for students to conduct their study during night time. While the proliferation of cellphones is very high, televisions are still a rarity. When questioned whether the MHP provision was satisfactory for their needs, 65% respondents (n=41) reported that the energy provision is sufficient for them and the locality, whereas 35% respondents (n=22) stated the contrary. The latter's view could be because of a desire to have greater energy for use in production activities including cottage and micro enterprises.

Overall Satisfaction

Most of the respondents, around 76%, have been found as 'just satisfied' with the MHP provision and 15% have been found as 'highly satisfied' and 9% were dissatisfied as seen in Figure 45. They are found dissatisfied with the summer season as they informed that they face electricity shortage during the month of June and July. This according to them also requires some supplementary alternatives.

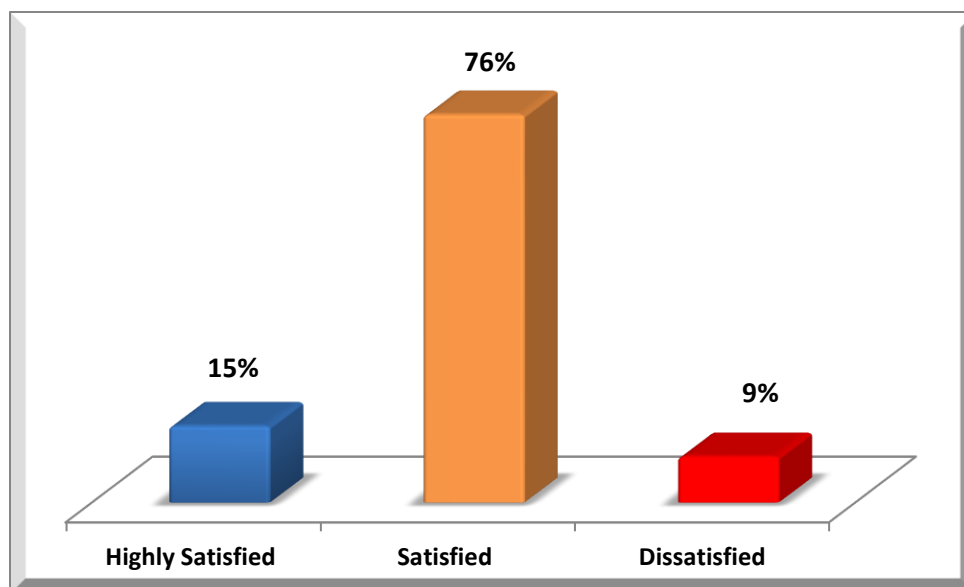


Figure-45: Overall Satisfaction with MHP Electricity Provision

When probed about satisfaction from electrification, a senior female in an FGD responded that 'before electricity we were in the darkness, but now we feel like we have joined the rest of the Pakistan.' Another female stated that having lights at night means we can work around without fear and even during late evenings.

Hydropower schemes should play a significant role in poverty alleviation and raise the economic standards of a community (Hussein 2012). Before connecting electricity to the village, people heavily relied on firewood, which is a free resource, as the only cost of firewood collection is physical effort and time. In an FGD, male community conveyed to the team that before electricity, they completely relied on the local forest wood and kerosene oil for meeting their household demands for lighting. Therefore, the expenditure was very minimal but after MHP provision their expenditure has been increased. Now they have to pay on average Rs. 500-1,000 per month through electricity bills which they claimed are too high for them to pay each month.

Therefore, the field team inquired that on average how much expenditure was saved in one month only for lighting. 62% respondents (n=39) reported an increase in expenditure while 32% respondents (n=20) admitted saving up to Rs. 500 as shown in Figure 46. Only 5% respondents (n=3) stated saving between Rs. 501-1000. These households were using diesel and personal solar systems therefore their expenditure was relatively high before MHP provision. A male member briefed the team in an FGD that his family purchased up to 3 liters of kerosene oil in a month to provide lighting for the house before the micro hydropower plant was opened. Not only was the kerosene expensive but it had to be carried from a market town that was four hours walk away.

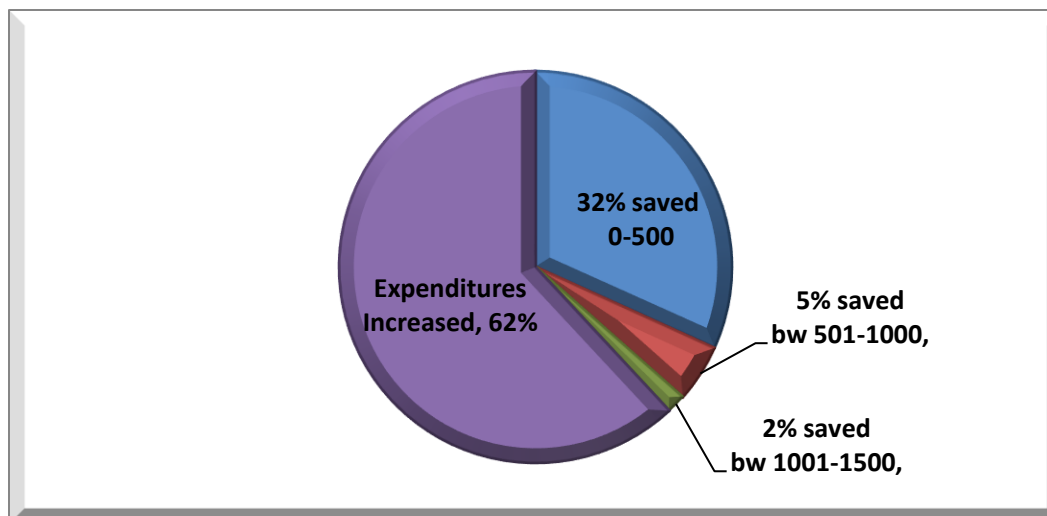


Figure-46: Savings and Expenditure from MHP Provision

MHP plant is owned by the community, which is structured to include an equitable participation of all households of the community and hence, benefits sharing is equitable between different groups including people both with high and low status in the community and is only differentiated according to their purchasing power. Therefore, the community has organized a committee for managing the plant and also appointed a local plant manager.

As briefed by NRSP officer, the management of the Hydro-Power plant is run by the management committees. The members of this committee make decisions regarding tariff rates, having staff and setting salaries. They are also responsible for all repair and maintenance work and they meet on a monthly basis to discuss any issues related to MHP maintenance and management.

When asked from the respondents that they received end user training regarding usage of MHP, 14% respondents (n=9) reported receiving training regarding usage of MHP of which 7 are male and 2 are female. While 86% respondents (n=54) of which 22 are male and 32 female, denied receiving any training as shown in figure 47 below. Furthermore, it was asked from the respondents that if their household members received any training on usage of energy. 32% respondents stated "yes" while 68% stated "no" as shown in figure 47 below.

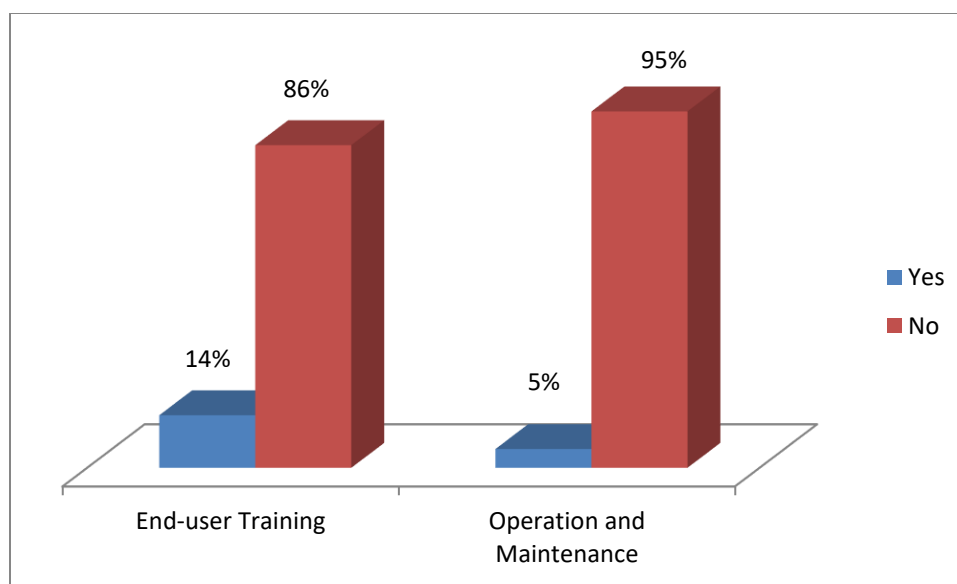


Figure-47: Respondents who received trainings

Moreover, it was also probed from respondents about operation and maintenance training. Majority of the respondents were beneficiaries and did not receive maintenance trainings. However, the technician employed at the MHP who received such training argued that the training he had received helped in the day-to-day operations of the MHP Plant. Moreover, he added the system was simple enough to easily maintain.

Feedback regarding trainings was taken from the individuals who received them. Almost all the respondents, male and female stated that training was useful. 10% respondents (n=2) and 75% respondents (n=15) cited the effectiveness of training as extremely effective and very effective respectively. The data illustrates that the majority of the respondents deemed the effectiveness of the training as very effective, this also shows how the locals have readily accepted MHP provision and the positive change it has brought about in their lives as discussed in the FGDs held in Pandhair.

Field Responses of Solar Lighting System

Household accessibility to energy sources

A Solar Lighting System (SLS) plant was installed in village Badgah with the main objective to provide efficient energy alternatives to firewood, commonly used in the

region. Currently all households in the village have access to electricity, altogether there are 70 households as a beneficiary group of the village.

Primary Source of Energy in locality

All the respondents termed solar lighting system through SLS Mini Grids as the primary source of energy in their area. The respondents did not have access to WAPDA electricity before the project and relied on temporary and relatively unsafe methods to meet their energy requirements. SLS provision was particularly welcomed in the village as it comes with no monthly bills, no fuel cost, little repair and maintenance costs and easy installation. Photovoltaic panels convert the sun's rays directly into electricity resulting in inexhaustible and pollution free energy (Chowdhury 2019). With the tropical climate of Pakistan suitable for solar energy it is an extremely reliable way to provide electricity that is also sustainable (Irfan 2019).

When asked what was the source of their energy, respondents chose multiple options, 77 %chose (n=54) kerosene oil and wood was reported by 79 % (n=55) of the respondents. Similarly, diesel was reported by 24 % (n=17) respondents while gas and cattle dung was reported by 3 % (n=2) and 4 % (n=3) respondents respectively. This clearly demonstrates the high dependency of the local population on these unreliable, unsafe and relatively expensive methods to fulfill their energy needs as shown in following table (See table-26 below):

Table-26: Source of Energy before SLS provision

Sources	Number of Responses	Source of Energy before SLS (%)
Kerosene Oil	54	77%
Deisel	17	24%
Wood	55	79%
Gas	2	3%
Cattle Dung	3	4%
Total	70	

Moreover, the respondents were asked if there had been any accidents or mishaps due to the use of aforementioned energy sources. 9% respondents (n=6) admitted that an accident occurred. 3 respondents reported damage to household items while 3 respondents reported damage to human health. The participants informed that the cause of damage to their household items was mainly due to fire from previous energy generating practices.

Upon further investigation 26% respondents (n=18) replied positively when asked if they suffered from any disease caused by previous energy supply practice. 50% respondents (n=9) reported they had acquired eye infection, 33% stated (n=6) that

they acquired asthma. While 17% respondents (n=3) reported acquiring both asthma and eye infection. The data shows that a significant number of respondents were affected due to the previous energy sources, as discussed in the FGDs held in Swabi the possibility of such events reoccurring had been minimized if not entirely eradicated by the provision of SLS.

Benefits of Renewable Energy

SLS provision has impacted greatly the lives of the locals and has brought about immense qualitative changes in their everyday lives ranging from lesser health risks and increased time spent on value adding activities. SLS project has a number of benefits over other previous power generating sources. Some of the advantages for the beneficiaries are given below:

- Benefits to Households
- Benefits to Women
- Benefits to Children

Benefits to the Households

Lack of basic infrastructure causes serious social problems such as poverty, illiteracy, unemployment, poor health and education, therefore, introduction of SLS may contribute to building social, human and physical capital (Karim et al. 2012). As all the assets are interlinked, access to the electricity will have productive effects on the other assets as well (Joshua 2016). Skills, knowledge, the ability to work and good health are termed as human capital. These are as important as the physical capital for a viable livelihood income. Therefore, the village electrification has brought series of positive changes in the daily lives of households.

When asked from respondents the benefits they received due to SLS provision, 53% respondents (n=37) stated the reduced use of kerosene oil and 73 %respondents (n=56) termed decrease in use of wood as the main benefits to their household. 27% respondents (n=19) recognized less expenditure on energy as benefits to their household, while 61 %respondents (n=43) said time saving as main benefit. It is evident from the data that a significant amount of time was now being saved principally due to the utilization of electricity after dark hours which was previously not an option.

It has been found in FGDs that availability of bright light in the household allowed for efficient use of time at night with many errands and chores now possible. Generating electricity now required significantly less labor also promoting a healthier environment in the household as there was no emission of gas, dust and no sound pollution from SLS. A significant improvement in the social conditions was also brought about by the provision of SLS, education was facilitated and lighting after dark, telecommunication and charged mobile phones all facilitated the social conditions of the locals.

The rural population usually sets their routines according to daylight, which was no longer an issue hence allowing them to manage their activities with ease ultimately increasing productivity. A reduction in crime and petty theft was also noted due to accessibility of light in the community. Due to the implementation of supplementary systems, the quality of access to electricity was expected to improve in all households and lead to a measurable change in their quality of life.

Table-27: Benefits to Households due to SLS Provision

Benefits	Number of Responses	Benefits to Households (%)
Reduced use of Kerosene Oil	37	53%
Decrease in use of Wood	53	76%
Less expenditure on Energy	19	27%
Time Saving	43	61%
Productive use of time saved	15	21%
Reliable	22	31%
Safe energy supply	28	40%
Damage control to home appliances	7	10%
Total	70	

Benefits to Women

All form of social interactions and building of trust in the community can be included under the heading of social capital (Kay 2006). As some women reported that access to such form of capital has had a meaningful impact on their livelihood allowing better cooperation and a stronger support network among the community. Similarly, access to electricity has improved social capital greatly, especially in women, by providing new options, improving the livelihood of the community as a whole.

SLS provision now allows women extended working hours to practice embroidery, weaving and stitching to support their family and dedicate more time to household chores. 29% respondents (n=20) identified increased time spent within home and 17% respondents (n=12) stated increased socialization as benefits to women. While 20% respondents (n=14) recognized both increased socialization and increased time spent within home as the main benefits to women. 13% respondents (n=9) stated multiple responses. As discussed in FGDs held in village, availability of electricity after

dark played a major role in increased socialization and utilization of that time for income generating activities.

Table-28: Main benefit to Women due to SLS provision

Benefits	Number of Responses	Benefits to Women (%)
Increased time spent within home	20	28%
Increased socialization	12	17%
Use of time saved for income generating activities	6	9%
Increased socialization and increased time spent within home	14	20%
Increased time spent within home and time saved for income generating activities	9	13%
Others	9	13%
Total	70	100%

Benefits to Children

Most of the respondents in the selected sample specifically stated that the solar home systems contribute most to the students as it plays an important role in supporting education in terms of improving study hours of the children. Light produced from SLS is better in quality than kerosene, diesel or other energy sources that were previously used that could be argued as injurious to health. Respondents have also stated that now more number of rooms in their houses have light that allows children to study better.

26% respondents (n=18) stated improved studies and 11% respondents (n=8) termed increased time spent within home as benefits to the children. 13% respondents (n=9) indicated increased socialization while 29% respondents (n=20) recognized both improved studies and increased time spent within home as the main benefits to children. 21% respondents (n=15) chose multiple responses. The data clearly demonstrates the variety of benefits obtained from SLS provision.

Therefore, children are now able to spend more time in their homes and are able to avoid non-value adding activities such as collecting wood that also placed their health and wellbeing at risk, accidents at night are now also avoided generally due to better visibility. Teachers in FGDs have also reported that attendance in schools has also increased.

Table-29: Benefit to children after SLS Provision

Benefits	Number of Responses	Benefits to Children (%)
Improved studies	18	26%
Increased time spent within home	8	11%
Increased socialization	9	13%
Improved studies and increased time spent within home	20	29%
Others	15	21%
Total	70	100%

Economic Benefits from SLS Provision

Prior to SLS provision in the village, there was heavy reliance on firewood that is costless but demands physical effort, time, deforestation and environmental degradation. In an FGD held in the village, the male community particularly discusses their reliance on the local forests and kerosene oil for meeting their daily household demands of lighting. Expenditures on these fuel sources were now being saved. The commute to near market that used to take at least a couple of hours, to buy these fuel sources was now also avoided saving both time and money in the process.

63% respondents (n=44) admitted saving in between PKR 0-500. 17% respondents (n=12) reported saving in between PKR 501-1000 while 20% respondents (n=14) identified savings in the range of PKR 1001-1500. 33% respondents (n=23) identified spending the saved money on health while 30% respondents (n=21) identified spending their saved money on food.

Extending the electricity grid even for one mile comes at a gigantic cost; shifting to SLS Grids in rural areas removes this cost burden from electric companies and the general tax paying citizens. Majority of the respondents also agreed that healthy environment is available due to no emissions of gas, dust from SLS and lesser labor is needed to light up the shop. Many vendors are now starting to sell inexpensive solar powered items due to increased demand. SLS has also extended working hours creating a convenient environment for business. Increased usage of mobile phones and their charging at night has also facilitated communication greatly further improving the economic situation in the area. Details can be seen in following figure:

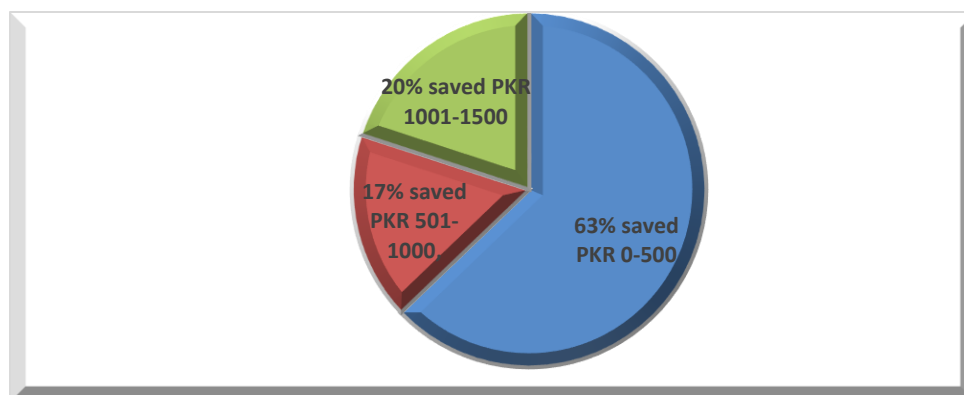


Figure-48: Savings from SLS provision

It was further investigated from the respondents that on which items they spent their savings. 33% respondents (n=23) identified spending on health, 30% (n=21) on food and 7% (n=5) on education. Moreover, it was asked from the respondents whether energy provision allows them to get involved in economic activities. 89% (n=62) replied positively as most of them had mobile phones that can provide updated information from markets.

Time Saving after SLS Provision

Furthermore, on average, around 64% respondents (n=45) identified saving less than 10 hours, 21% respondents (n=15) identified saving 11-15 hours while 14% respondents (n=10) stated they saved 16-20 hours per month. Respondents in the FGDs communicated that valuable time that was previously being wasted in the commute to purchase kerosene oil and diesel from the nearest market which is at least a few hours away was now being saved and invested in other value adding activities.

Reliability of Energy

After the provision of SLS, 77% respondents (n=54) regarded SLS as very reliable while 23% respondents (n=16) considered it as slightly reliable. As 100% respondents (n=70) identified an increase in the usage of electrical appliances with 89% respondents (n=62) stating mobile charging, fans or/and lights as the main type of appliance used.

The data clearly validates the satisfaction level of the beneficiaries proving its efficacy. The respondents identified various hurdles they encountered with previous sources of energy such as kerosene oil and diesel that had been known to cause fires. In FGDs, the locals emphasized on the unpredictable weather conditions such as excess rainfall or reduced water flow in the summers that caused inconvenience but SLSs' immunity to weather conditions has made life easier with stable access to electricity. It further created new opportunities for a comfortable livelihood also leading to additional income.

83% respondents (n=58) reported the energy provision as sufficient for them and the locality while 17% respondents (n=12) stated the contrary. Respondents have reported that the consumption of kerosene oil and diesel has now been completely replaced by SLS as they were only used for lighting before in these remote areas. Looking at the overall impact, old form of lighting such as candles, kerosene and gas lamps caused indoor pollution but with the provision of SLS the air quality has greatly improved thus positively affecting the health of the community.

Overall Satisfaction of the Household Consumers from SLS provision

Most of the respondents, around 70% have been found satisfied with the provision of solar system. 20% of the respondents have been found as highly satisfied and 10% were dissatisfied as seen in Figure 49. They rated their experience as dissatisfied as they are not allowed to use the heavy appliances such as fridge and washing machine on SLS. Overall respondents were very pleased with the SLS provision.

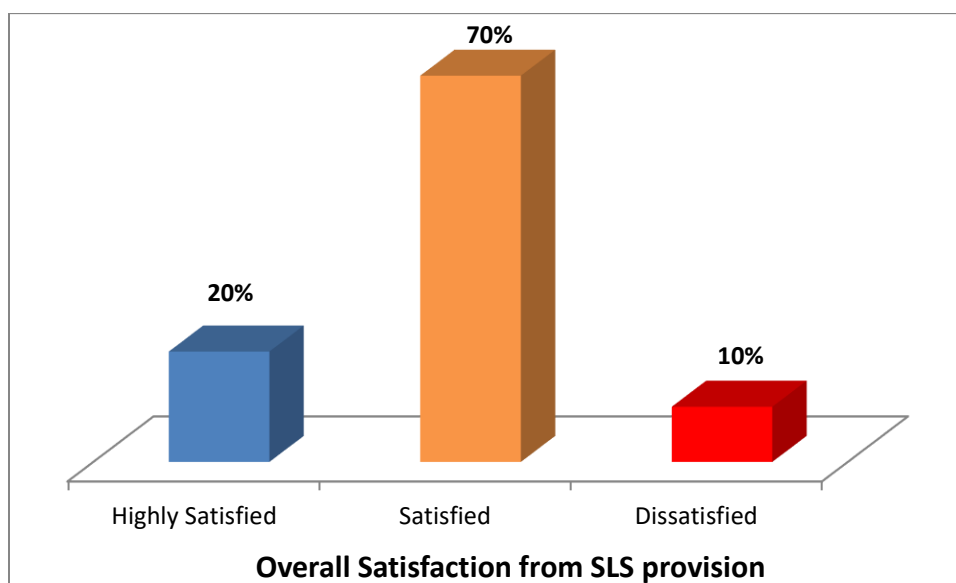


Figure-49: Overall satisfaction with SLS provision

Strengthening Capacity for Usage of SLS

The SLS plant is owned by the community, which is logistically structured to include an evenhanded participation of all households of the community and hence, benefits sharing is unbiased between different groups including people both with different statuses in the community and is only differentiated according to their purchasing power. Therefore, the community has organized a committee from community for managing the plant and also appointed a local plant manager.

As briefed by NRSP members, the management of the SLS provision is run by the management committee. The member of this committee makes all decisions regarding tariff rates, staff hiring and setting salaries. The committee is also

responsible for all repair and maintenance work and they meet monthly to discuss any issues related to SLS maintenance and management. 31% respondents (n=22) reported receiving end user training while 69% respondents (n=48) denied receiving any training. Moreover, 29% respondents admitted receiving operating and maintenance training. 36% respondents (n=25) of which 16 are male and 9 are female admitted that either they or their household members received training on energy as shown in following figure50.

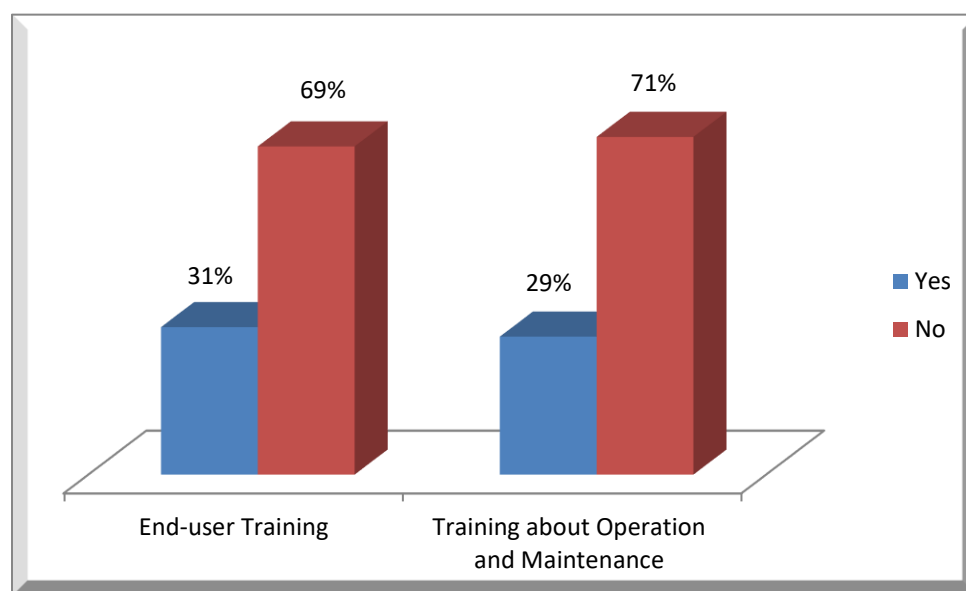


Figure-50: Respondents who received trainings pertaining to the usage of SLS and operation and Maintenance

Moreover, feedback was received from individuals that attained training, 95% respondents (n=21) that received training termed it as useful. 68% respondents (n=17) stated training to be very effective while 12% respondents (n=3) cited the effectiveness of training as extremely effective. This clearly illustrates that the majority of respondents regarded the effectiveness of training as very effective, this also demonstrates how the locals have readily accepted SLS provision and the progressive change it has brought about in their daily lives.

Field Responses of Social Mobilisation

Development of Community Organizations

The role of social mobilizers is crucial in organizing people to enable them to collectively think and consequently, make decisions aiding them in resolving their problems (Masolo 2002 and Sadan 2015). Respondents agreed that social

mobilization is a central component of effective rural livelihood development³⁵. Other than this, linkages with the district and local government that have been created through the empowerment of local institutes are facilitating them in better communicating their problems and address their issues on the local level.

Most of the respondents admitted the initiative encouraged participation and promoted community organization activities. Respondents also stated that the NRSP helped people in developing committees related to education, infrastructure and health. 33 % (n=3) respondents felt that local communities have been empowered through formation and strengthening of community institutes whereas 80 % of the respondents termed the interventions for local community empowerment as extremely successful.

Enhancing the Capacity of Community Institutes

More than half of the respondents admitted receiving training related to Community Institutes. Trainings were related to end-user and operators trainings to which all the beneficiaries responded positively. The focus of the HRE programme on enhancing capacity of community organizers through trainings in selected subjects was rightly placed according to all of the respondents. The respondents were pleased that the trainings did help them in their everyday dealings with the community, which included improving attendance, transparency in record keeping and organizing frequent meetings. The respondents further expressed themselves in the FGDs by stating these institutions played a vital role in emergency decision making, dividing roles and responsibilities and by providing linkages with internal and external actors.

Key Challenges

The aim of social mobilization training was to enhance women's role in community development, unfortunately in both villages namely Badgah and Sarklay, the impact of these trainings was limited. The trainings tried to help bring women into the fold of community institutions helping them play a role in improving community management by educating them in how to communicate effectively and build leadership capacities of women such as training to lead local welfare committees but it was reported that the attendance of women in these trainings was negligible. The respondents were all male but they agreed that the trainings did help to increase men's sensitization and awareness about importance of women's role in terms of family decision making, mobility, freedom from threatening relations with husband and access to and control over economic resources³⁶ as well as community

³⁵<http://siteresources.worldbank.org/PAKISTANEXTN/Resources/293051-1177200597243/ch6.pdf>

³⁶Jejeebhoy, Shireen J., and Zeba A. Sathar. "Women's autonomy in India and Pakistan: the influence of religion and region." *Population and development review* 27.4 (2001): 687-712.

development which includes creating and improving the skill sets of rural villagers; transferring technologies to improve management of natural resources, and developing skills that enhance human capital³⁷. Even though the women were granted increased representation in the executive body of village, they would not participate due to social and cultural barriers; consequently, the project interventions for local women empowerment had a very inadequate outcome.

Moreover, lack of awareness and basic education still remains to be the main issue indicated by the respondents. Cultural intolerance and lack of basic willingness among women to partake in trainings and societal issues has its toll on them and their place in society. Some of the trainings were also considered inappropriate and not in line with the local traditions and customs thus not able to achieve their end goal.

3.5 Prime Minister's Interest Free Loan Scheme (PMFIL)

Interest-free loans were provided

Under the PMIFL scheme, various types of loans were provided to beneficiaries with no interest and easy instalment paybacks. From a total of 403 respondents across the Balochistan and Khyber Pakhtunkhwa districts, commodity and trading-type loans were the most utilized by 41% (n=164) of the respondents. Followed by livestock and agriculture with 21% and 20%, respectively. Minor loans were allotted to asset purchasing such as machinery, tools and household furniture (8%, n=34), services (4%, n=18), handicrafts (4%, n=15) and manufacturing (1%, n=5) as seen in Table 30. The programme is inclined towards providing loans for trading and commodities as well as owning livestock, which help generate income and enable greater access to facilities and services, such as healthcare and education leading to improved livelihood.

Table-30: Types of Loan provided to Beneficiaries

Types of Loan provided	Count	Percentage
Agriculture/Cropping	82	20%
Commodity/Petty Trading	164	41%
Livestock/Poultry	85	21%
Manufacturing/Light Engineering/Workshops	5	1%
Embroidery/Stitching/Handicrafts	15	4%
Services (Beauty Parlour, Barber, Carts, Service Station, etc)	18	4%

³⁷Khan, Mahmood Hasan. "Participatory Rural Development in Pakistan: Experience of Rural Support Programmes." (2013): 95-97.

Asset Purchase	34	8%
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Most beneficiaries (86%, n=345) conveyed that the loans were being utilized by themselves whilst 14% (n=58) indicated that the loans were being utilized by their family member. The beneficiary's identified their spouse as the prime user for the money in their place, followed by their sons and daughters. When asked as to why they couldn't utilize the loans themselves, beneficiaries shared a variety of reasons, but primarily to support their spouse or children in starting or supporting their businesses. District-wise, Zhob had the highest number of beneficiaries who had their loans utilized by other family members as can be seen in Figure 51 below.

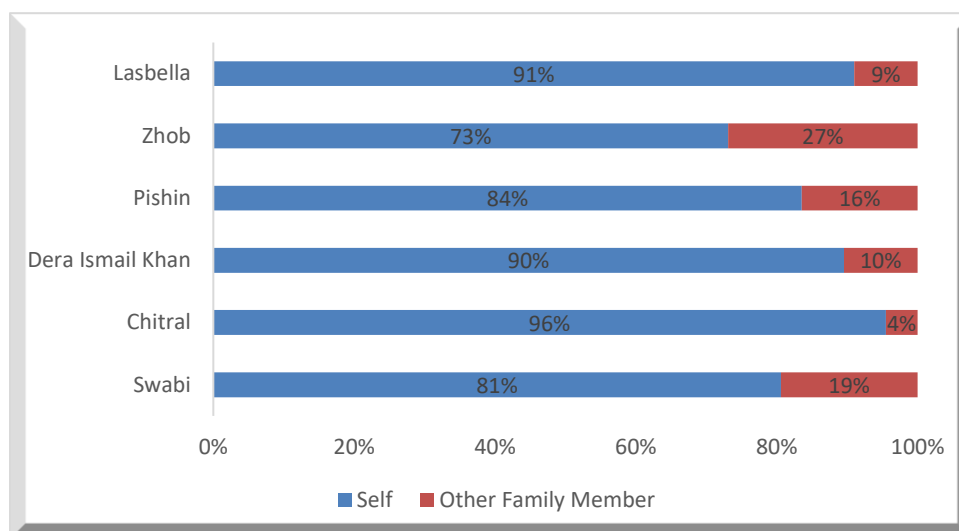


Figure-51: District-wise results of who utilized loans

Satisfaction from Loan

As seen in Figure 52 below, 50% (n=201) of the beneficiaries claimed they were extremely satisfied, 35% (n=141) were rated as very satisfied, 14% (n=58) were somewhat satisfied with the loan provisions. Also 0.2% (n=1) rated somewhat dissatisfied and 0.2% (n=1) rated not very satisfied with the loan as they felt that the loan amount was inadequate for their needs and the instalment plan was not suitable for them. The overall positive satisfaction is linked towards the success of the program which FGDs also pointed out as being effective and sufficient for the needs of the beneficiaries.

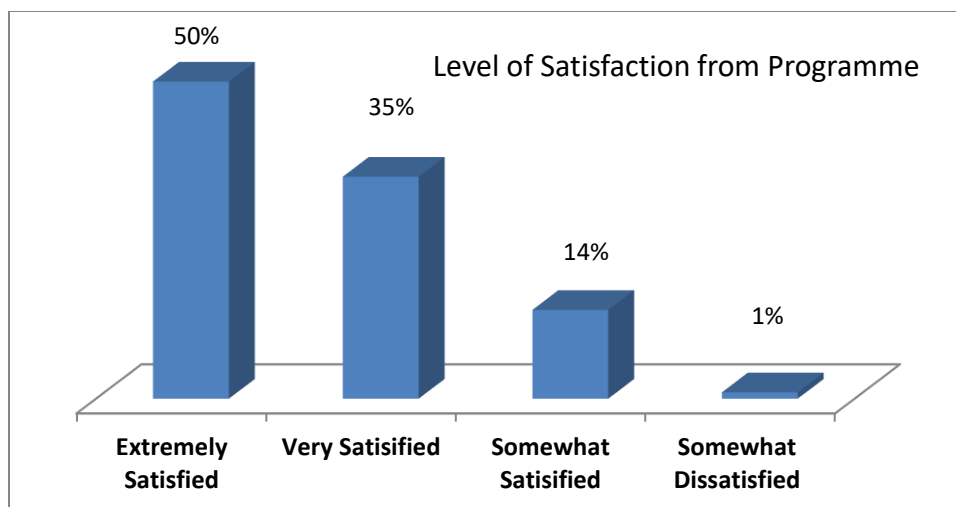


Figure-52: Percentage of beneficiaries who rated their satisfaction with the program.

Another important factor for satisfaction is the instalment plan and loan payback period, 45% (n=182) stated that they were 'extremely satisfied' with the plan. Only 18% of the beneficiaries regarded themselves as 'somewhat satisfied' and 1% as 'somewhat dissatisfied', proving that the instalment plan has fulfilled its purpose and is sufficient for the beneficiaries. However, one of the survey responses rightly pointed out that rising prices make it difficult to pay back instalments in a timely manner.

Satisfaction from POs

For the majority of the respondents both male and female POs were at their service. 54.8% (n=161), reported no major issues with the behavior of male POs and termed their treatment as extremely satisfied. Similarly, 52.1% (n=62) particularly in case of female beneficiaries termed behavior of female POs extremely satisfied. This satisfaction level of beneficiaries was linked to the whole process from initiating the process of loan to disbursement of loan and repayment of loan. Behavior of POs in this whole process was termed friendly and supportive during the whole process.

Processing and Procedure

For the majority of the respondents, 75% (n=303), there were no major issues reported in the processing of the loan, whilst 25% (n=100) reported facing difficulties in tedious paperwork specifically in information and communication, the preparation of documents and the processing of applications. A district-wise percentage result can be seen in Figure 53.

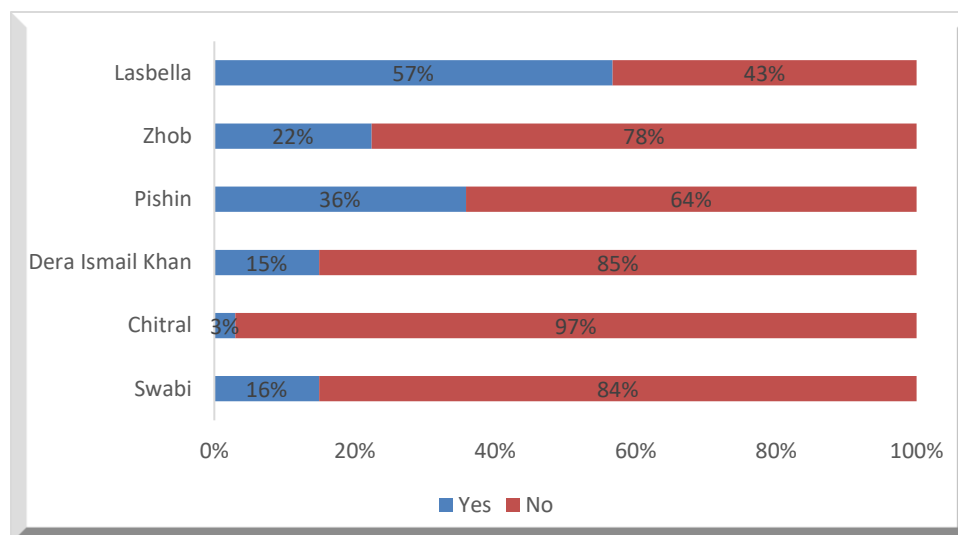


Figure-53: District-wise percentage of users who reported facing difficulties in loan processing.

Survey results helped identify three of the primary bottlenecks in the provision of loan that proved difficult for beneficiaries as shown in Figure 54 below. Preparation of documents (39%), information communication³⁸ (28%) and processing of application (20%). In FGDs with beneficiaries, complaints were directed towards the loan officers whom they claim had weak information and communication skills which led to a poorer understanding of the terms and conditions of the loan. Respondents further suggested that the officers should undergo communication training.

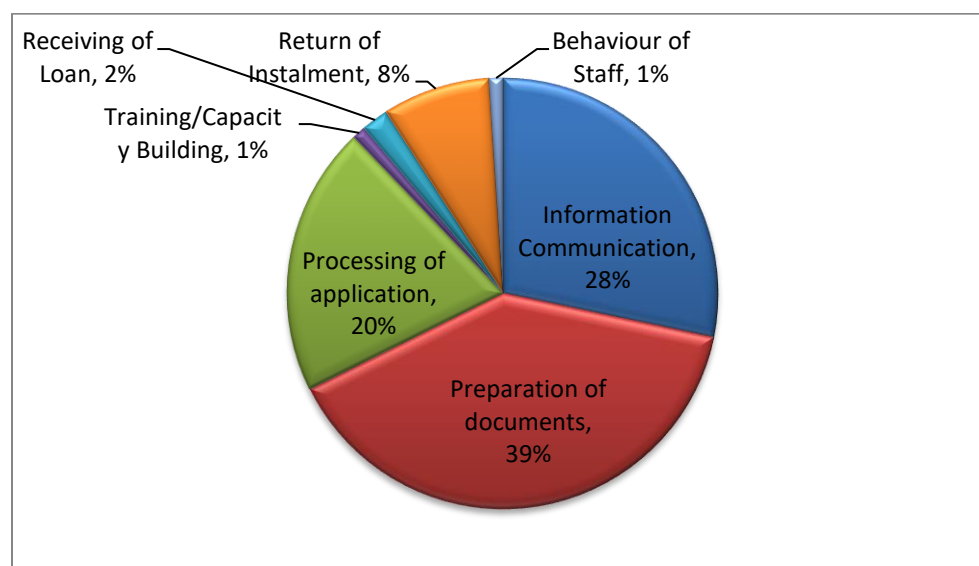


Figure-54: Where beneficiaries faced the most problems in stages of loan

³⁸ Information provided about the terms and conditions about the loan

Employment Opportunity increased

Respondents admitted loan facilities affected their saving pattern with 87% of them (n=349) stating an increase while 9% respondents (n=38) indicated no change. The data clearly shows that the overwhelming majority has increased their savings that makes them less vulnerable to shocks, helps them in asset creation and allows them to provide loans to others in the community as this was the major source of loans prior to the PMIFL.

Regarding employment opportunity, 68% respondents (n=273) confessed that the loan facility indeed helped them in generating employment opportunities as the non-agricultural segment is now able to employ a greater degree of labour force due to new capital inflows. Many enterprises frequently made use of unpaid female/family labour but with women gaining easy access to loans, they are able to generate their own livelihood through their own skills such as stitching, weaving and embroidery.

The district-wise analysis in Figure 55 shows that not all regions gained uniform employment opportunities. Dera Ismail Khan had the highest reported increase in employment opportunity at 93%. Whereas, Chitral and Zhob were tied at the lowest reported employment opportunity at 51% each.

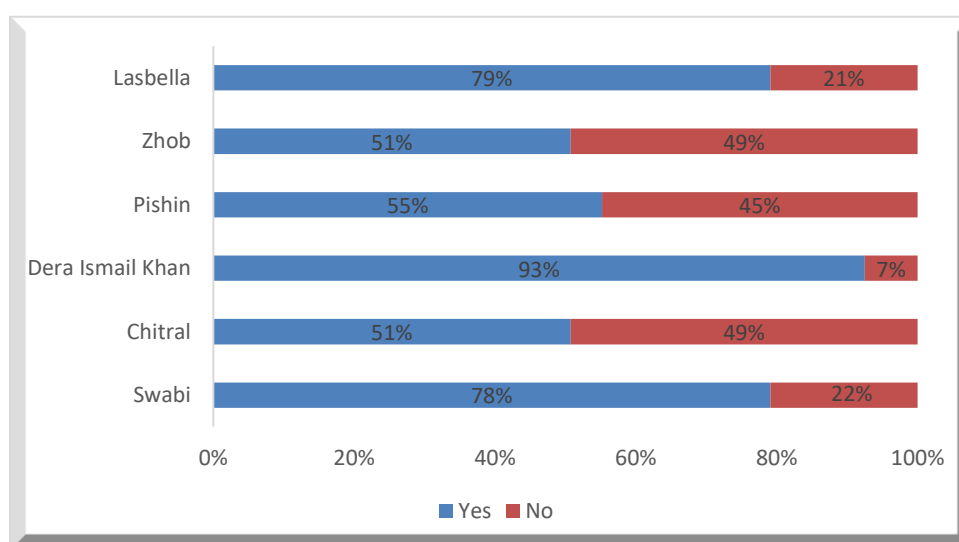


Figure-55: District-wise response to increase in employment opportunity

Asset Development

Around 72% respondents (n=292) stated that the loan facility helped them to invest in assets such as livestock, household items and cash. Lower income households have a lesser tolerance of risk and vulnerability essentially because they possess fewer assets to guard them against it. As discussed in the FGDs, the risk efficacy of the poor has increased and they can now tolerate higher levels of risk and vulnerability

such as changes in the economy, sudden expenses and shocks as they have a contingency to fall back on.³⁹

It was found in FGDs that returns on investments and asset building allows beneficiaries to spend income towards improving conditions within their household through greater access to services and facilities. After availing credit facilities 93% (n=374) of beneficiaries, admitted that their household conditions have improved.

District-wise analysis when looked for household (HH) conditions showed that all respondents in Dera Ismail Khan reported an increase in their income through the provision of loan, highlighting the effectiveness of loan provision. However, as seen in Figure 56 below, 25% respondents in Swabi noted that there was no improvement in their household condition.

During FGDs, a female beneficiary shared that her business which she had started through the loans had been lost due to a fire and hence, she was unable to generate additional income for her business. There should be some mechanism of insurance or reinsurance of loans or assets developed through loans. Moreover, some beneficiaries identified that they did not have any additional 'household' income as they had been re-investing in their businesses which led to increased income generation in the long-run but short-term decrease in finances.

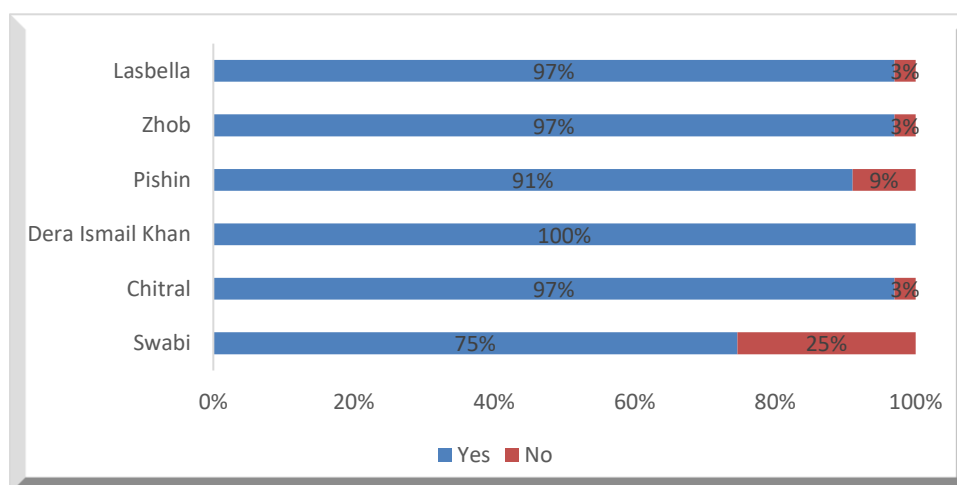


Figure-56: District-wise percentage response of beneficiaries for improvement in the household Condition

Expansion of enterprise

One of the benefits of these loans was to enable beneficiaries to improve and expand their existing enterprise premises. When questioned whether the provision of loans helped them do so, out of 403 respondents, 74% (n=297) responded positively, whereas 26% (n=106), negatively. Expanded and improved enterprises can lead to

³⁹Eakin, H., 2005. Institutional change, climate risk, and rural vulnerability: Cases from Central Mexico. *World Development*, 33(11), pp.1923-1938.

better livelihood and increased income for beneficiaries; this is true for both farm and non-farm enterprises.

Looking at the district-wise response as shown in Figure 57 below, no significant differences were identified, except for Pishin which had the lowest number of respondents at 52% who admitted to using the funds to expand their premises and in Dera Ismail Khan, where all respondents reported expanding their enterprises.

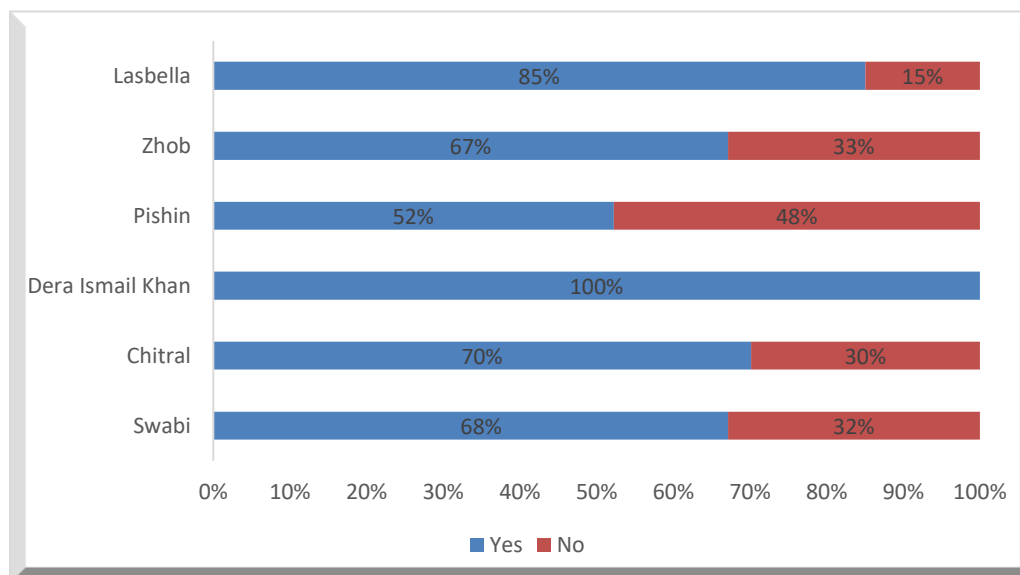


Figure-57: District-wise percentage of beneficiaries responding to expanding their enterprises

Improvement in Living Standards

Beneficiaries were asked to share whether there had been an increase or decrease in their consumption or demand of the following items: food, health, education, entertainment, traveling and energy. The percentage response has been provided in Table 31 below. Participants in FGDs relayed that primarily, they were able to afford a healthier diet and had increased access to medicines and healthcare due to increased revenues. The survey results show that the most popular item that increased was food intake, 89% (n=357) beneficiaries reported as having increased. Followed by health, which earned 83% (n=334) of the total responses. The largest decrease in spending was for traveling as reported, it reduced by 18% (n=74).

Table-31: Change in income expenditure on facilities and necessities.

Description	Increase	Decrease	No change
Food	357	24	22
Health	334	26	43
Education	260	32	110
Entertainment	139	68	195
Traveling	185	74	143
Energy	240	49	113

Women empowerment through loans

Income development through micro and small enterprises

Loans were provided to women through the PMIFL scheme which gave women a certain degree of financial freedom. Through FGDs, it was found that although a number of loans that women took were provided to their male family members, many women did retain those amounts and invested them in various areas. When probed, female participants in FGDs responded that they had started stitching and embroidery business within their homes which allowed them to generate additional income for their households. The majority of respondents at 93%, including males, held the view that loan increased earnings and savings trends for women.

Increased decision-making within household

As communicated in FGD's, women have had greater opportunities in the household to earn additional income through embroidery and stitching businesses. These micro-enterprises enabled women to have a greater say in financial decision-making and worked greatly in favour of women by empowering them. Survey results show that 82% (n=331) indeed agreed with this statement while 18% disagreed. Due to cultural barriers, men still retain financial decision-making and limit women involvement in business decisions.

Pishin, being in close proximity to Quetta had relatively greater awareness in terms of women's involvement in household decision-making and hence, as seen in Figure 58. 97% of respondents in Pishin and Dera Ismail Khan noted that women decision-making in financial decisions had greatly improved after the provision of the loan. In the Chitral region, due to a varied socio-cultural background and greater access to education, women enjoy a greater role in household decision-making.

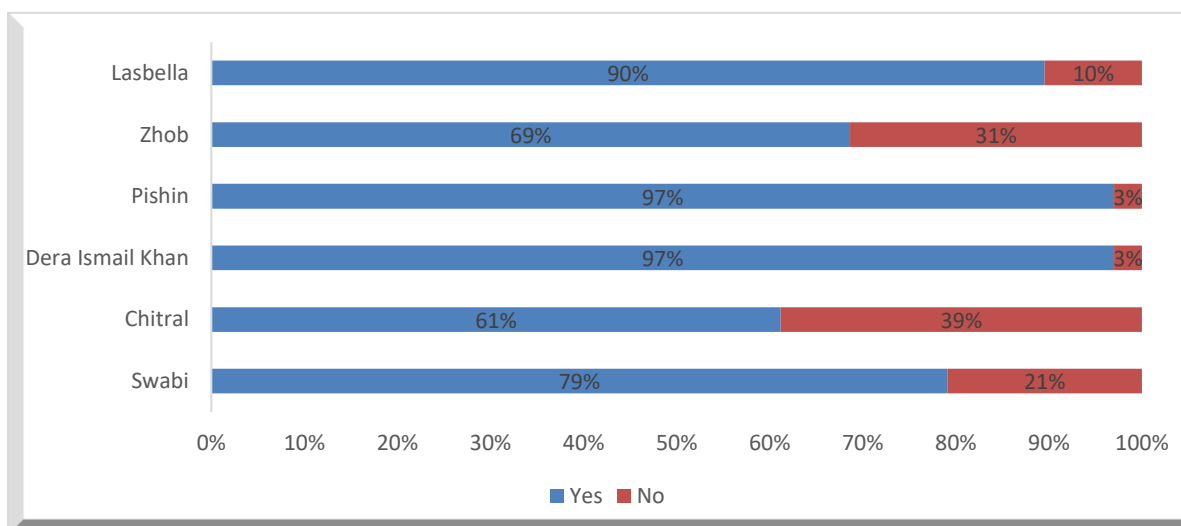


Figure-58: District-wise Percentage beneficiary response to female household decision-making

Key challenges and Constraints

Difficulty in maintaining instalment plan

In addition to rising prices that limit the ability of beneficiaries to pay instalments on time, when asked for further opinions, suggestions and feedback, many beneficiaries suggested an increase in the instalment plan timeframe and a larger sum of principle money. For this case, perhaps a “Loan Plus” program which addresses these demands should be considered as an additional option. This would allow beneficiaries a degree of flexibility and greater control over their finances.

Difficult documentation process

As discussed above, the documentation process was assessed as being cumbersome for the beneficiaries which they felt was difficult for them to comprehend and complete. Hence, one of the suggestions for this would be to provide beneficiaries with easier to understand information and guidance to fill documentation and that also in both Urdu and local language

Cultural barriers and lack of awareness

As mentioned previously, 14% of beneficiaries admitted that their loans are utilized by family members and 93% respondents are in agreement that loans can be beneficial for women. In contrast, one of the social barriers that was identified through FGDs and observations was that male family members are not sensitized about women’s role in utilizing loans and hence limit their development. While many headways have been achieved empowering women, minor barriers such as exclusion in financial decision-making limit opportunities for growth. Trainings specifically designed to sensitize men on the potential economic benefits such as increased household income must be considered, therefore there is need to allocate budget for such trainings.

Demands of women for trainings

Through the survey, some female beneficiaries had requested trainings and information that would help them set up their own enterprises. While the PMIFL scheme does not permit Partner Organizations (POs) to train beneficiaries under agreed upon Implementation Plans (IPs), an amendment that allows allocation of budget for such trainings of women, as one of the primary objectives of the PMIFL scheme is to provide women with income generating opportunities.

4. Programme Wise Conclusion

4.1 PPR Conclusion

Overall, the program interventions helped reduce poverty and raise the welfare levels in most areas. In most districts, interventions were analysed critically and beneficiaries in most instances reported being satisfied with the interventions.

Social mobilization efforts had been successful as training, provision of record-keeping and capacity-building all helped improve communication, coordination and engagement of the communities. This change positively impacted women as they were able to voice their issues. Lack of awareness and education was highlighted as one of the factors that limited increased coordination.

Skills developed under the Livelihood Enhancement Programme taught beneficiaries core skills to encourage employment opportunities. It's role in empowering women was profound as they were able to generate additional income from within their homes. The female beneficiaries demanded better quality assets such as sewing machines which can help improve their efficiency and the quality of their work.

The Livelihood Enhancement Program was successful in increasing the income of most respondents through skills-based trainings and transfer of assets that can help generate income. The respondents were satisfied with the type of asset and stated that the asset is useful in increasing their earnings. Across the three districts, most women mentioned being more involved in the financial decision-making in their households; attributing this to the asset transfer schemes. Some of the beneficiaries' demands include more localized trainings as traveling long distances for beneficiaries was difficult.

Water accessibility greatly improved, with beneficiaries citing benefits of having clean drinking water within their communities where as respondents were also satisfied with regular supply of water. Alarming, groundwater level has been decreasing; causing concerns to the villagers and at some place water pipelines was found damaged or non-functional.

Under PPR, construction of flood protection walls and delay action dams performed similar functions as they both led to flood mitigation and increase in agricultural land. Respondents stated their satisfaction with the damage control due to flood wall and delay action dams. However, the beneficiaries strongly demanded more similar construction to further mitigate the effect of floods in their localities.

Respondents were satisfied with the creation of roads and bridges across various districts was highly regarded by all beneficiaries, reducing travel time to basic facilities such as healthcare and contributing to an increase in their income.

Due to the provision of the Drainage and Sanitation systems, hygiene, cleanliness and disease control were controlled in the localities, however beneficiaries demanded a proper water storage facility and community latrines which they claimed would help sustain the improvements in cleanliness.

Multiple benefits were recorded for the irrigation systems. Most respondents were satisfied with the results, however a number of farmers mentioned that there is still some water wastage. Reduced rainfall also troubled the farmers as their agriculture was affected. Apart from regular maintenance, water storage facilities were suggested to be built that would enable water use during droughts.

The respondents were satisfied with the provision of renewable energy resources which ensure clean and reliable energy to the respondents. Most energy needs were met with overwhelming number of beneficiaries supportive of the interventions but demanded additional capacity to install and make use of more electrical appliances.

Regional and community Health Centers were supported through this program which helped provide access to basic healthcare. Respondents also showed their satisfaction with the affordability of health services. While some respondents argued that distance from health centers was still far in some districts, most centers were accessible in less than 60 minutes time. While maternal healthcare was deemed appropriate for women in antenatal and post-natal care, lady doctors and staff availability were believed to be a significant problem.

For the education program, interventions included infrastructure development of schools, training for teachers and provision of free books and stationery. These proved highly successful as enrolment rates had increased in all districts and all respondents stated their children go to school happily, however, the use of corporal punishments is still prevalent in some districts. Respondents also stated that they are satisfied with the availability of furniture in the schools

4.2 LACIP Conclusion

LACIP was a comprehensive programme that focused on improving the living conditions of the beneficiaries. The programme was successful in empowering the local communities through institutional development where village organizations, community organizations and local support organizations were given trainings. The women regarded these trainings as immensely helpful, as these trainings allowed them to participate in local committees, however, they were of the opinion that the trainings were short-lived.

Beneficiaries of the drainage and sanitation infrastructure were appreciative of the interventions and reported that while the interventions helped improve disease control, however overall cleanliness remained an issue. The lack of general cleanliness could also put the program results in danger. The villagers also stated that there should be community latrines as well as a functional water disposal method as they have to dispose the waste themselves.

Construction of roads and bridges in the local areas helped beneficiaries' access services and facilities in shorter time through different modes of transport such as motorcycles and public transport as they previously were relying only on traveling by foot. Respondents in Dera Ismail Khan stated that they had to travel on-foot for hospitals which were almost an hour away. On the other hand, access to schools greatly increased and so did employment opportunities as traveling times decreased.

The drinking water supply scheme helped provide accessible and clean drinking water and was well-received by the localities as almost 90% respondents stated that they now had water sources just next to their houses. The only grievance beneficiaries

reported was that the pumps are not enough in number for the locality and having only minor repair and maintenance.

Similar to PPR, LACIP-1 also included the construction of flood protection walls. Findings were similar as the households previously vulnerable to flooding were now protected. Benefits of the protection wall included increased agricultural land which leads to 5-10% increase in income for most beneficiaries. Similar to PPR interventions, the respondents demanded that additional construction walls be built.

The programme interventions supported schools with infrastructure, trainings for teachers, provision of free stationery and books and construction of new schools where needed. Most beneficiaries identified that the schools were less than 500m away from their households. Most parents were highly satisfied with the overall availability of schools close to their vicinity that led to higher enrolment rates, however, a number of these schools lacked playgrounds. Moreover, many of the teachers mentioned never receiving any training and still practice corporal punishments. There is also a need for more teachers as multiple subjects are being taught by one teacher.

Health services and facilities were strengthened by providing BHUs with medicinal supplies, equipment, and training of doctors, nurses and midwives. Most respondents stated that health facilities were accessible within 30 minutes time and affordable for children's healthcare. However, findings show that trainings given to medical staff were lacking, and very concerningly, non-availability of staff and medical equipment lead to local women traveling to urban areas to give birth which places them at great risk. This led to high numbers of dissatisfaction with the health facilities across most districts.

Disaster Prevention Management (DPM): Early warning trainings, mock drills and disaster management trainings were conducted with beneficiaries to strengthen their resilience in the event of a calamity and identify early signs of such events. Moreover, provision of emergency tools such as flashlights and first aid kits were also provided. Beneficiaries in Swabi however identified that no disaster prevention infrastructure was present. More training was held in Swabi, whilst more emergency response tools were provided in Dera Ismail Khan, and according to respondents, no emergency response centres were available in Swabi.

4.3 HRE Conclusion

Due to the Micro-hydel and mini hydropower plants (MHP) the use of previously polluting fuels has been reduced greatly but not completely as wood burning was still used for cooking. Almost 80% respondents stated that MHPs provided reliable energy. The provision of energy enabled residents to use appliances such as mobile chargers and lightbulbs and hence actively partaking in the economy. Some respondents stated having internet devices which they used to access the internet. Women stated these interventions had improved the conditions of the household as they could now take part in income-generating activities such as knitting/weaving.

Children were able to study more due to lighting available at night and they could spend more time indoors.

Economic activity also increased the income levels and greater expenditure was now possible on food and medicines. Time savings were dedicated to livestock development and domestic work. Most beneficiaries were highly satisfied with the interventions.

Similar benefits were reported by Solar Lighting System (SLS) beneficiaries as MHP. Teachers in the locality revealed in FGDs that enrolment rates had increased in the area due to the provision of electricity. Around 63% of the respondents reported having an increase of up to PKR 500 in their savings and up to 77% of all respondents stated that the provision of SLS electricity was reliable.

As the program also included efforts to strengthen social mobilization, number of trainings related to community management skills and local support organizations were carried out to strengthen the community through mobilization. These helped men as they became sensitized on the role of women in family decision making and community development. Community organizations also had their capacity improved with trainings on everyday dealings, organizing frequent meetings and record-keeping.

According to survey results, the impact of social mobilization interventions under this programme was fairly limited. Some of the challenges included exclusion of women in the village committee meetings and lack of awareness of the benefits of including women in the decision-making.

4.4 PMIFL Conclusion

The provision of interest-free loans was positively received with beneficiaries taking advantage of loans for various purposes such as agriculture, commodity and petty trading, livestock and poultry, embroidery, services and asset purchasing. The most common choice for the loan was for setting up petty trading shops.

Although minor problems were reported from each district, analysis shows that Lasbela had the highest percentage of complainants in the loan process. Furthermore, when asked to specify the problems, beneficiaries identified the preparation of documents to be the most arduous process.

As a result of the loans, opportunities for employment had increased as positive cash-flow meant that business and farm owners could hire workers for their enterprises. Moreover, women also benefited as the loan assisted them in generating their own livelihood through their own skills such as stitching, weaving and embroidery.

The loans were also utilized to help develop assets. Satisfaction was shown over improved income through provided assets, as reported by over 93% of beneficiaries stating that their spending on services and facilities such as health and education had increased.

Similarly, enterprise expansion can help increase income. A majority of respondents stated that loans helped them expand their enterprise premises, which can be applied to both farm and non-farm enterprises.

One of the key aims of the PMIFL scheme was to empower women by helping them make key decisions in their household. In this regard, the loan scheme has helped women generate their income through micro and small enterprises within their homes such as stitching and embroidery activities. This empowerment allotted them with confidence to have more say in the financial decision-making within the household.

A number of challenges such as difficulty in maintaining payments within the instalment plan and problems faced in the documentation process were highlighted. Moreover, when asked what challenges they face, women demanded that they should receive more training for starting and maintaining a business. They would like more information regarding micro and small business opportunities. Likewise, they require business match-making services where they can meet potential clients.

5. Programme Wise Recommendations

5.1 Program for Poverty Reduction (PPR)

Social Mobilization

- In view of the abovementioned findings, it is recommended that future capacity building and trainings sessions for women may be modified and upgraded in knowledge and information provision. These efforts should be linked to potential aim of increasing women's safe participation in public spaces
- A more focused criteria in terms of regular meetings for community management and committees is required. Their performance may be benchmarked so that overtime these committees can learn from their operations. This will also allow sharing of experiences across committees

Livelihood Enhancement Program

Skill Trainings

- Training on livestock should include contents based on housing and watering management, environmental risk and mitigations, animal health management, vaccination first aid and temperature
- Trainings on color choice and patterns, fabric selection, pattern design, alteration, garment decoration and stitching technique can be valuable to increase income from sewing and stitching
- Training should include both practical and theoretical knowledge while the time duration should be around 2-4 weeks

Asset Transfer

- In case of livestock asset, vaccinations should be provided

Drinking Water Supply Scheme

- Steel pipes should be used instead of plastic pipes in order to minimize the damage occurred to pipes due to land sliding and other natural or man-made disasters
- Protection wall should be built around water scheme to protect it from flood water and other adversities
- More water storage tanks should be built to conserve water. Regular maintenance of these water storage tanks is also required. Whereas, trainings on water storage in houses should be provided
- Attention towards water purification should also be given so that water borne diseases can be reduced. Modern purification techniques at the community level or micro-purification equipment for the household level may be assessed and delivered

Flood Protection Wall

- The locals should be made aware that the repair and maintenance is 100% responsibility of the locals
- Number of organisations involved in the repair and maintenance should be limited to avoid any disagreements
- More flood protection walls are required given the recurrent flooding and climatic changes
- Hazard maps should be provided to local organizations ensure houses, animal shelter and crops are not in flood-prone areas
- Warning systems should be put in place on flood walls to warn the locals of impending danger

Roads & Bridges

- Identification of potential new routes should be carried out under next phase of PPR, which can reduce the time taken to facilities such as markets, health centres and schools

Delay Action Dams

- The locals should made aware that repair and maintenance is solely their responsibility
- The number of organisations concerning repair, maintenance and inspection should be limited to avoid any disagreements or duplication of efforts
- The beneficiaries insisted that more Delay Action Dams be installed where required
- Flood warning systems should be placed on Dams to warn locals of impending danger

Drainage & Sanitation

- Additional community latrines and water storage facilities are required

- Alongside repair and maintenance of drainage system is needed which can be helped by providing trainings and guidance to the community regarding cleanliness of sanitation lines
- Provision of sustainable waste disposal mechanisms that turn waste to reusable materials such as compost as well as the introduction of sustainable toilets that minimize the use of water. This could be provided in PPRs next phase with particular emphasis on the sustainability and long-term usage of the latrines

Irrigation

- Steel pipes should be used to provide water for irrigation purposes as it will reduce seepage losses
- Micro sprinklers and overhead micro sprinkler should be installed under drip irrigation for the efficient use of water
- Regular repair, maintenance and dredging of water channels is also essential to ensure continuous flow of water. For this, more effective role of operation and maintenance committees is essential
- PPR programs based on provision of water resources including small dams, ponds and karez irrigation systems are required

Renewable Energy

- Scale of energy interventions needs to be increased as demanded by households which will allow them to use additional electrical appliances
- Awareness workshops for the effective utilization of renewable energy should be organized to ensure sustainable use
- Capacity building of operation and maintenance committees in local communities should be conducted which enables them to become self-sustainable
- Exposed electrical wires in the vicinity should be covered to avoid any mishaps
- Although, the locals still insist that there is an energy crisis in their areas and provision of more solar panels is needed as it is not possible for the government to deliver electricity to these far flung areas. They also recommend that in future PPAF install more and better sources of energy that allow electrifying areas near their villages.

Health

- Availability and quality of medical staff especially for emergency services should be ensured. Not only presence of require staff be ensured during normal visiting hours but also in emergency times. Capacity building of such staff in terms of communication skills and trauma management is need of the hour
- Medical equipment also needs regular audit and operational check. Standard operating procedures need to be adhered to so that regular maintenance work is performed. A careful evaluation is required where medical equipment is not being activity used due to lack of quality practitioners or other reasons

Education

- Key performance indicators for teaching staff need to be regularly updated and linked with their capacity building. Teachers should be provided with updated and regular trainings that enhance their skills as well as mitigate use of corporal punishments
- Play-grounds in schools are required for extracurricular activities of children. Moreover provision of missing sports equipment needs to be addressed
- Students should be made aware of civic sense and the harmful effects of improper waste disposal. Such awareness among children will also have a positive spill over effect at the household and community level

5.2 LACIP

Institutional Development

- Advocacy and outreach interventions are needed to spread awareness regarding importance of women's role in social and economic activities. For this, community elders can be engaged to spread awareness while programs in educational institutes can be initiated
- Duration of training should be at least one week while training frequency should be bi-annual

Drainage & Sanitation

- Provision of community latrines and water storage facilities are required
- The locals should be made aware that repair and maintenance is entirely their responsibility
- Operation and maintenance training regarding cleanliness of sanitation lines is to be given to community members to maintain the positive results obtained from drainage provision
- Proper sustainable waste disposal mechanisms such as composting need to be provided to locals for hygienic waste disposal

Roads & Bridges

- LACIP-II should continue creation of roads and bridges by identifying needy and remote communities that have limited means of transport
- Assessments of the road condition should be carried out when possible under LACIP-II framework to ensure that beneficiaries are able to access basic facilities

Drinking Water Supply Scheme

- Awareness should be raised among community through training under LACIP regarding importance of clean drinking water and costs of unsafe water
- Protection of existing water supply schemes should be ensured through operation and maintenance committees

Flood Protection Wall

- The locals need to be made aware through their local committees and organisations that inspection, repair and maintenance is exclusively their responsibility
- Total organisations involved in repair and maintenance should be minimal to avoid any disagreements
- More flood protection walls are required given the frequency of floods due to climatic changes
- Hazard maps should be provided to local organizations ensure houses, animal shelter and crops are not in flood-prone areas
- Warning systems should be put in place on flood walls to warn the locals of impending danger

Livelihood Enhancement Program

- For better livestock management, beneficiaries should be trained regarding animal health management, wound treatment, common infections
- Embroidery and sewing trainings should focus on garment decoration, new stitching techniques and alteration
- Training venue should be selected by considering the access and convenience of the beneficiaries

Education

- Due to non-availability of secondary schools for girls in Dera Ismail Khan, there is no progression to further education for girls after middle school. Hence, PPAF should support the development of the required schools in this district
- Playgrounds in schools should be developed to promote extracurricular activities such as field trips, inter-school competition, sports competitions, martial arts and community activities
- As there is a dearth of teachers, in some cases, one teacher is teaching 3-4 subjects in a single classroom. Hence, more teachers are needed to balance the workload and improve the quality of education

Health

- Maternal facilities are required in health centres for facilitating women by 24/7
- There is need to increase women staff in health centres and working hours should also increase
- Availability of supplies for emergency services should be ensured

DPM

- Regular trainings should continue in vulnerable areas by PPAF to spread awareness among the community about the disaster resilience
- Emergency response centres should be established by donors and government agencies to respond to emergency situations promptly
- Tools and equipment should be provided to vulnerable communities to deal with emergency situations under the DPM project

- A lack of disaster mitigation infrastructure was noted in some vulnerable areas, hence, PPAF should seek to construct flood protection walls and delay action dams where after proper consultation

5.3 HRE

- There is a need and demand from households to increase the scale of energy interventions allowing them to use more electrical appliances
- To improve the efficiency of the MHP and SLS, awareness workshops should be arranged for the community members so that they can use the energy in a sustainable manner by avoiding misuse and losses
- Local workshops should be established in order to provide operating maintenance and repair services at local level
- Exposed electrical wires inside and outside homes need to be covered to avoid any accidents
- Men need to be sensitized on the role of women in household decision-making through advocacy and outreach

5.4 PMIFL

- Loan amount should be increased and the instalment plan should be flexible
- Beneficiaries' facilitation is required in documentation process
- Provision of clear information for better understanding of loan processes
- Entrepreneurial guidance and counselling should be provided to women for business development
- Men should be sensitized regarding the role of women in income generating activities
- There should be some mechanism of insurance or reinsurance of loans or assets developed through loans

6. Annexures

Annex-I

User/Beneficiary Satisfaction Survey

Note for Enumerators

The respondent for this questionnaire will be a person of age group 18 years and above. The respondent should be the direct beneficiary. This survey is being conducted by the Pakistan Poverty Alleviation Fund (PPAF) with the collaboration of Sustainable Development Policy Institute (SDPI). The information provided by you in this questionnaire will be used for research purpose. It will not be used in a manner which would allow identification of your individual response. You are free to decide whether to participate in this questionnaire or not participate. This questionnaire will take 15-20 minutes approximately.

Questionnaire for PPR

Background

The Programme for Poverty Reduction (PPR) is an integrated and holistic project launched by Pakistan Poverty Alleviation Fund (PPAF) with the ultimate goal of serving humanity. PPAF has joined hands with Government of Italy to transform the lives of poor and marginalized communities in Pakistan's provinces i.e. Balochistan, Khyber Pakhtunkhwa and Federally Administered Tribal Areas (FATA). The objective of the Programme for Poverty Reduction (PPR) is to establish a social and productive infrastructure system and also to establish effective and sustainable social safety nets. Its goal is to reduce poverty through creation of sustainable conditions of social and economic development that includes increase in income as well as production capacity.

پی پی اے ایف نے خیبر پختونخوا اور بلوچستان کی بہت سے اضلاع میں کچھ پروگرامز کیے ہیں جیسا کہ غربت کو ختم کرنے کا پروگرام، قابل تجدید توانائی کی فراہمی، معاشی امداد اور چھوٹے پیمانے پر بنیادی ڈھانچے کا فروغ اور بغیر سود قرض کی فراہمی۔

اس سروے کا مقصد یہ ہے کہ لوگوں سے ان کا نقطہ نظر دریافت کیا جاسکے جن لوگوں نے ان پروگرامز سے فائدہ اٹھا یا ہے۔ اس سلسلے میں ایس ڈی پی آئی والے تحقیق کر رہے ہیں کہ فراہم کردہ سہولیات سے آپ کتنا مطمئن ہیں۔ اس سوال نامہ کے لئے مجھے آپ کے بیس سے پچیس منٹ درکار ہوں گے۔ کیا مجھے اجازت ہے کہ میں آپ سے یہ سوالنامہ پوچھ سکوں

IDENTIFICATION شناخت

Name of respondent/beneficiary نام جواب دہندہ کا نام	CNIC Number شناختی کارڈ نمبر
Age عمر	Gender (Male/Female/Transgender) صنف (مرد/ عورت/ مخنث)
Contact Number (cell number preferable) رابطہ نمبر (سیل نمبر قابل ترجیح)	
Date of Survey (DD/MM/YY) سروے کی تاریخ (دن/ ماہ/ سال)	Province صوبہ
District ضلع	Tehsil تحصیل
Union Council یونین کونسل	Revenue Village مالیہ کا گاؤں
Settlement/Hamlet ٹیرہ	Interviewer Name سوال کنندہ کا نام
Section I (General) پہلا سیکشن (عمومی)	

Q1. What is your education status? (only tick a single choice) آپ کی تعلیم کیا ہے؟ (صرف ایک پر نشان لگائیں)

a. Primary پرائمیری b. Middle میڈل c. Metric میٹرک d. Intermediate انٹر میڈیٹ e. Graduation گریجوایشن	f. Master's ماسٹرز g. Never went to school سکول کبھی نہیں گیا۔ h. Religious education/Madrassa مذہبی تعلیم / مدرسہ i. Any Other ((please mention): دیگر (مہربانی فرما کر : (please mention): وضاحت کریں
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Q2. What is your marital status (only tick a single choice) آپ کی ازدواجی حیثیت کیا ہے؟ (کسی ایک پر نشان لگائیں)

a. Single غیر شادی شدہ b. Married شادی شدہ c. Divorced طلاق یافتہ	d. Widowed بیوہ e. Separated علیحدگی یافتہ
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Q3. What is your occupation آپ کا پیشہ کیا ہے؟

a. Farming زراعت b. Livestock مال مویشی c. Fisheries مابی گیری d. Agriculture (Wage Labour) زراعت (مزدور) e. Agriculture (self-employed/own land) زراعت (مالک/ اپنی زمین) f. Government servant سرکاری ملازم g. Private employee نجی ملازم h. Farm home help (paid) فارم کے کام میں مدد (با معاوضہ) i. Farm Home help (unpaid) فارم کے کام میں مدد (بلا معاوضہ)	j. Student طالب علم k. Looking for work کام کی تلاش l. Housewife گھریلو خاتون m. Retired ریٹائرڈ n. Small enterprise/grocery shop چھوٹا کاروبار / کریانہ کی دکان o. Services (tailor, carpenter, beauty parlor, driver, etc. خدمات (درزی، ترکھان، بیوٹی پارلر، ڈرائیور وغیرہ) p. Any other (please mention): دیگر (مہربانی فرما کر : (please mention): وضاحت کریں
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Q4. What is your household income level (including all sources) approximately (per month/in rupees)

آپ کی گھریلو ماہانہ آمدنی کیا ہے؟ (تمام ذرائع سے) تقریباً (ماہانہ/ روپیوں میں)؟

a. 0-5,000 b. 5,001-10,000 c. 10,001-15,000 d. 15,001-20,000	e. 20,001-25,000 f. 25,001-30,000 g. More than 30,000
---	---

Q5. What is your house ownership status? آپ کی رہائشی حیثیت کیا ہے؟

a. Own House اپنا گھر b. Rented کرایہ کا مکان c. Subsidized رعایت یافتہ	d. Sharing حصہ داری e. Free مفت f. Any other (Please mention): دیگر (مہربانی فرما کر وضاحت کریں)
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Q6. What is your house structure? آپ کے مکان کی تعمیر کی نوعیت کیا ہے؟

a. Katcha کچا	b. Pakka پکا	c. Mixed ملا جلا
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Section-I: Social Mobilization

1. What type of community institution you are part of?

آپ کون سے کمیونٹی ادارے کا حصہ ہیں؟

- Female CO خواتین سی او
- Male CO مرد سی او
- Mix/Combine CO مشترکہ / ملے جلے سی او
- Female VO خواتین وی او
- Male VO مرد وی او
- Mix/Combine VO مشترکہ / ملے جلے وی او
- Male LSO مرد ایل ایس او
- Female LSO خواتین ایل ایس او
- Mix/Combine LSO مشترکہ / ملے جلے ایل ایس او

2. What is your status in Community Institution?

کمیونٹی ادارے میں آپ کی حیثیت کیا ہے؟

- General Body Member عام رکن
- Executive Body Member ایگزیکٹو رکن
- Manager منتظم
- President صدر
- Any other (Please mention): دیگر (وضاحت کریں)

3. Did you obtain any training regarding CI?

کیا آپ نے کمیونٹی ادارہ کے بارے میں کوئی تربیت حاصل کی ہے؟

- Yes ہاں
- No نہیں

3.1 If yes, in which area did the training belong to? اگر ہاں، تو کس شعبہ میں؟

a. Capacity building on community management or leadership skills training (CMST and LMST) کمیونٹی انتظامی امور میں استعداد کار بڑھانے یا رہنمائی کرنے کی تربیت	b. Sustainable Development Goals (SDGs) پائیدار ترقی کے احداث	c. Community Resource Persons (CRP) کمیونٹی کے سرکردہ افراد	d. Peace Pluralism and Inter Provincial Harmony امن اجتماعیت اور بین الصوبائی ہم آہنگی	e. Community Livelihood Fund (CLF) کمیونٹی معیشت کا فنڈ
f. Physical Infrastructure development (e.g. Project Management, O & M) بنیادی تعمیرات کی ترقی (مثلاً پراجیکٹ اور انتظام)	g. Environmental and natural resource development ماحولیاتی اور قدرتی وسائل کی ترقی	h. Environmental and Social Monitoring ماحولیاتی اور سماجی نگرانی	i. Women leadership training/conference/seminar خواتین رہنما تربیت/ کانفرنس/ سیمینار	j. Any Other (Please mention) دیگر (مہربانی فرما کر وضاحت کریں)

4. In your opinion, was the focus of PPR/PPAF on enhancing capacity of local organizers through trainings in selected subjects was rightly placed?

آپ کی رائے میں، پروگرام کا مرکز ٹریننگ کے ذریعے کمیونٹی کے منتظمین کی کے بارے صلاحیت کو بڑھانے میں صحیح تھا؟

- Yes ہاں
- No نہیں

5. How did you find these trainings? آپ نے ان تربیتوں کو کیسا پایا؟

- Useful مفید
- Not useful غیر مفید

5.1 If useful, have you adopted these learned skills in your everyday dealings with local communities?

تو کیا آپ نے ان مہارتوں کو مقامی برادری کے ساتھ اگر یہ مفید تھا، اپنے روزمرہ کے معاملات میں اپنایا ہے؟

6. How the training has been helpful for you in terms of the following governance related dimensions?

کیا آپ مندرجہ ذیل اجزاء کے لحاظ سے موصول شدہ تربیت سے مطمئن ہیں؟

Description تفصیل	Yes ہاں	No نہیں	Don't know معلوم نہیں
Attendance حاضری			
Accountability & transparency احتساب اور شفافیت			
Office bearer election عہدیداروں کا انتخاب			
Participatory decision making شراکتی فیصلہ سازی			
Frequency of meeting اجلاس کا تسلسل			
Any other (please mention) دیگر (مہربانی سے واضح کریں)			

a. Yes ہاں b. No نہیں

5.2 If not useful, what was missing? What would you like to add in the training?

اگر مفید نہیں ہے، تو کیا کمی تھی؟ آپ تربیت میں کیا شامل کرنا چاہتے ہیں؟

7. Did the training help to improve community management and leadership capacities of women CI members?

کیا تربیت نے کمیونٹی ادارہ کی خواتین اراکین کی انتظامی امور اور قیادت کی صلاحیت کو بہتر بنانے کے لئے مدد کی؟

a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

8. Did the training help to enhance women's role in community development?

کیا تربیت نے کمیونٹی کی ترقی میں خواتین کے کردار کو بڑھانے کے لئے مدد کی؟

a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

9. Did the training help to increase men's sensitization and awareness about importance of women's role in family decision making as well as community development?

کیا تربیت نے خواتین کے فیصلہ سازی اور کمیونٹی کی ترقی میں کردار کی اہمیت کے بارے میں مردوں میں حساسیت اور شعور کو اجاگر کیا؟

a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

10. Did the training help to improve record keeping?

کیا تربیت نے ریکارڈ رکھنے میں مدد کی؟

a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

11. Did the training help to develop linkages ensuring overall sustainability of CIs?

کیا تربیت نے کمیونٹی انسٹی ٹیوٹس کی مجموعی پائیداری کو یقینی بنانے کے سلسلے کو فروغ دینے میں مدد کی؟

a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

12. Did you create/develop any linkages in following areas?

کیا آپ نے مندرجہ ذیل شعبوں میں روابط تخلیق یا انہیں بڑھایا؟

Area	Yes	No
a. Municipal services میونسپل سروسز		
b. Local government لوکل گورنمنٹ		
c. District government ضلعی گورنمنٹ		
d. Government line agencies گورنمنٹ کے ذیلی ادارے		
e. NGOs/Donors این جی اوز / ڈونرز		
f. Other دیگر		

13. Do you think local communities have been empowered through formation/ strengthening of community institutes?

کیا آپ کو لگتا ہے کہ مقامی کمیونٹی کو کمیونٹی اداروں کے قیام / مضبوطی کے ذریعے بالاختیار بنایا گیا ہے

a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

14. How much successful are the interventions for local community empowerment?

مقامی برادری کو باختیار بنانے کے لئے مداخلت کتنی کامیاب ہے

- a. Extremely successful انتہائی کامیاب
- b. Very successful بہت کامیاب
- c. Somewhat successful کسی حد تک کامیاب
- d. Somewhat unsuccessful کسی حد تک ناکام
- e. Very unsuccessful بہت ناکام
- f. Extremely unsuccessful انتہائی ناکام

15. Do you think local women have been empowered through formation/ strengthening of community institutes?

کیا آپ کو لگتا ہے کہ مقامی خواتین کو کمیونٹی اداروں کے قیام / مضبوطی کے ذریعے باختیار بنایا گیا ہے

- a. Yes ہاں
- b. No نہیں
- c. Don't know معلوم نہیں

16. How much successful were the project interventions for local women empowerment?

مقامی خواتین کو باختیار بنانے کے لئے منصوبے کی مداخلت کتنی کامیاب رہی؟

a. Extremely successful انتہائی کامیاب	b. Very successful بہت کامیاب
c. Somewhat successful کسی حد تک کامیاب	d. Somewhat unsuccessful کسی حد تک ناکام
e. Very unsuccessful بہت ناکام	f. Extremely unsuccessful انتہائی ناکام

17. How the interventions are useful for empowerment of local women?

مقامی خواتین کو باختیار بنانے کے لئے سرگرمیاں کس طرح مفید ہیں؟

- a. Increased representation in the Executive Body of Village and Union Council Based Organization (LSO) اور گاؤں اور یونین کونسل پر مبنی تنظیم (ایل ایس او) میں نما زندگی میں اضافہ
- b. Increased membership of women in community institutions . کمیونٹی تنظیموں میں خواتین ارکان میں اضافہ
- c. Increased access to public services by women خواتین کی فراہم کردہ عوامی خدمات
- d. Increased business/income generation activities by women. خواتین کی کاروبار / آمدن پیداوار کی سرگرمیوں میں اضافہ
- e. Increased value of women's work at family and community level. خاندان اور کمیونٹی کی سطح پر خواتین کے کام کی قدر میں اضافہ
- f. Improved decision making at household level خانہ داری کے فیصلوں میں بہتری
- g. Improved decision-making community level برادری کی سطح پر فیصلہ سازی میں بہتری
- h. Decrease in domestic and community level violence against women گھرانے اور برادری کی سطح پر خواتین کے خلاف تشدد میں کمی

17. Do you actively participate/promote in community organization activities?

کیا آپ کمیونٹی تنظیم کی سرگرمیوں میں فعال طور پر شرکت یا انہیں فروغ دیتے ہیں؟

- a. Yes ہاں
- b. No نہیں

18. Do you help people in developing committees?

کیا آپ کمیٹیوں کو فروغ دینے میں لوگوں کی مدد کرتے ہیں؟

- a. Yes ہاں
- b. No نہیں
- c. Don't know معلوم نہیں

19. Please identify key challenges in social mobilization in your locality.

براہ کرم اپنے علاقے میں سماجی تحرک میں اہم چیلنجوں کی شناخت کریں

18.1 If yes, which area these committees belongs to?

اگر ہاں، تو کونسی کمیٹیوں سے ان کا تعلق ہے؟

a. Health صحت	b. Education تعلیم
c. Disaster management آفات سے بچاؤ	d. Infrastructure انفراسٹرکچر
e. Livelihood support روزگار میں مدد	f. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)

20. Please identify key challenges in mobilization and formation of women community organizations.

مہربانی فرما کر خواتین کمیونٹی تنظیموں کے قیام کو متحرک کرنے میں کلیدی چیلنجوں کی شناخت کریں

21. How many members of your households have NIC/CNIC?

آپ کے خاندان کے کتنے ممبران کے پاس این آئی سی / سی این آئی سی ہیں؟

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

22. How many members of your households having NIC/CNIC are registered voters?

میں کتنے ممبران رجسٹرڈ ووٹرز ہیں؟ آپ کے گھر والوں

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

How many registered voters of your households have casted vote in General Elections of 2018?

2018 کے عام انتخابات میں آپ کے خاندان کے کتنے رجسٹرڈ ووٹرز نے ووٹ ڈالے ہیں

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

Section-II: Community Physical Infrastructure

Livelihood Enhancement & Protection (LEP)

Beneficiary sampled for:

1. Through which of the following PPR supported interventions your household is being/has been benefitted:

A. Institutional Development
B. Livelihood Enhancement & Protection (LEP)
C. Community Physical Infrastructure
D. Disaster Preparedness and Management (DPM)
E. Health
F. Education

Livelihood Enhancement and Protection

Q1. Did you receive training on vocational or technical skills?

کیا آپ نے پیشہ ورانہ یا تکنیکی مہارتوں پر تربیت حاصل کی ہے؟

- a. Yes ہاں
b. No نہیں

Q2. If yes, which vocational or technical skills training were provided to you/household and how satisfied you are? (Tick the relevant training only)

اگر ہاں، آپ / خاندان کو کون سی پیشہ ورانہ یا تکنیکی مہارت کی تربیت فراہم کی گئی تھی اور آپ کتنے مطمئن ہیں؟

	Extremely Satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن

				کسی حد تک غیر مطمئن		
Tailor made training for assets receipt اثاثوں کے وصولی کی تربیت						
Group Training گروپ ٹریننگ						
CIG/PC management سی آئی جی / پی سی مینجمنٹ						
CLF/Loan Center management training سی ایل ایف/ لون سنٹر مینجمنٹ ٹریننگ						
Technical and Vocational skills training ٹیکنیکل اور ووکیشنل سکلز ٹریننگ						

Q2.1. How did you find these trainings?

آپ نے ان تربیتوں کو کیسا پایا؟

- a. Useful مفید
b. Not useful غیر مفید

Q2.2. If useful, have you adopted these learned skills in your everyday dealings with local communities?

تو کیا آپ نے ان مہارتوں کو مقامی برادری کے اگر یہ مفید تھا، ساتھ اپنے روزمرہ کے معاملات میں اپنایا ہے؟

- a. Yes ہاں
b. No نہیں

Q2.3. If not useful, what was missing? What would you like to add in the training syllabus?

اگر مفید نہیں ہے، تو کیا کمی تھی؟ آپ تربیت میں کیا شامل کرنا چاہتے ہیں؟

Q3. Are you satisfied with the received training under LEP in terms of following dimensions?

کیا آپ مندرجہ ذیل پہلو میں LEP کے تحت موصول شدہ تربیت سے مطمئن ہیں؟

Description تفصیل	Extremely Satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Duration دورانیہ						
Venue مقام						
Trainer تربیت کنندہ						
Training contents تربیت کے اجزا						
Selection process انتخاب کا پروسس						

Q4. Does the training help in increasing your earnings?

کیا آپ کی آمدنی میں اضافہ میں تربیت نے مدد کی ہے؟

- a. Yes ہاں
b. No نہیں

Q5. Does the training help in establishing your own enterprise?

کیا آپ کی اپنا کاروبار قائم کرنے میں تربیت نے مدد کی ہے؟

- a. Yes ہاں
b. No نہیں

Q4.1 If yes, by which percentage the monthly earnings increase?

اگر ہاں، کتنے فی صد سے ماہانہ آمدنی میں اضافہ ہوا ہے؟

a. 0-5	b. 5-10
c. 10-15	d. 15-20
e. More than 20%	

Q4.2 Where the increased earnings were spent most?

اضافی آمدنی کہاں زیادہ تر خرچ کی گئی؟

a. Food خوراک	b. Education تعلیم
c. Health صحت	d. Energy توانائی
e. Any other (please mention) دیگر (مہربانی سے وضاحت کریں)	

Q8. Has the training helped you start or improve on your business?

کیا تربیت نے آپ کے کاروبار شروع یا بہتر بنانے میں مدد کی ہے؟

- a. Yes ہاں
b. No نہیں

Q10. After training does your husband or other family members involved in the business follow your advice?

تربیت کے بعد کیا آپ کے شوہر یا خاندان کے دیگر ممبران جو کاروبار میں ملوث ہوتے ہیں وہ آپ کے مشورہ پر عمل کرتے ہیں؟

- a. Yes ہاں
b. No نہیں

Q12. Which training/s do you want to attain in future?

مستقبل میں کونسی تربیت حاصل کرنا چاہتی ہیں؟

- a.
b.
c.

Q6. Does the training help in increasing women empowerment?

کیا خواتین کو باختیار بنانے میں تربیت نے مدد کی ہے؟

- a. Yes ہاں
b. No نہیں

Q7. Are you utilizing the knowledge from your trainings in your daily work?

کیا آپ اپنے روزانہ کام میں تربیت کا علم استعمال کر رہے ہیں؟

- a. Yes ہاں
b. No نہیں

Q9. Was your husband supportive of you receiving the training?

کیا آپ کا شوہر آپ کے تربیت حاصل کرنے میں معاون تھا؟

- a. Yes ہاں
b. No نہیں

Q11. Does economic empowerment increase your decision-making power within the household?

کیا اقتصادی استحکام آپ کے گھر میں آپ کے اندر فیصلہ کرنے کی طاقت میں اضافہ کرتا ہے؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q13. Did you receive any asset under LEP?

کیا آپ نے LEP کے تحت کوئی اثاثہ حاصل کیا؟

- a. Yes ہاں
b. No نہیں

Q13.1. If yes, which asset was provided to you/household?

اگر ہاں، آپ کے گھر کو کونسا اثاثہ فراہم کیا گیا تھا؟

- a. Livestock (cow, goats, Sheep, bull, Buffalo etc.) مال مویشی، (گائے، بکریاں، بھیڑیں، بھینسا، بھینس وغیرہ)
b. Trading (grocery store, cloth shop, electric store etc.) تجارت (کریانہ، کپڑے کی دکان، الیکٹرک سٹور وغیرہ)
c. Services (cycle repair, barber shop, tailoring shop, auto mechanic etc.) خدمات (سائیکل مرمت، حجام، درزی خانہ، آٹو مکینک وغیرہ)
d. Production (bakery, food items, sewing machines, cement for block making etc.) پروڈکشن (بیکری، خورد و نوش کی اشیاء، سلائی مشین، بلاک بنانے کے لئے سیمنٹ وغیرہ)
e. Transport (motorcycle, auto/chingchi rickshaw, donkey/horse cart, hand cart etc.) ذرائع نقل و حمل (موٹر سائیکل، آٹو/چنگچی ریکشا، گدھا/گھوڑا گاڑی، ہتھریڈ)

Q14. Did you take loan for employment/enterprise purpose?

کیا آپ نے روزگار / انٹرپرائز کے مقصد کے لئے قرض لیا تھا؟

- a. Yes ہاں
b. No نہیں

Q14.1. If yes, how productive was the loan?

اگر ہاں، قرض کس طرح مؤثر تھا؟

- a. Extremely productive انتہائی مؤثر
b. Very productive بہت مؤثر
c. Somewhat productive کسی حد تک مؤثر
d. Somewhat unproductive کسی حد تک غیر مؤثر
e. Very unproductive بہت غیر مؤثر
f. Extremely unproductive انتہائی غیر مؤثر

Q15. How satisfied are you with the provided asset in terms of following components?

مندرجہ ذیل اجزاء کے مطابق فراہم شدہ اثاثہ سے آپ کتنے مطمئن ہیں؟

Description تفصیل	Extremely Satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Type of asset اثاثہ کی اقسام						
Quality of asset اثاثہ کا معیار						

Usefulness of asset provided اثاثہ کی افادیت						
Involvement in procurement process خریداری کے عمل میں شراکت						
Any other دیگر						

Q16. Were you informed about status of vaccination in case livestock transferred by PPAF? کیا آپ PPAF کے مویشیوں کے لئے منتقل ہونے والے ویکسین کی حیثیت کے بارے میں آگاہ تھے؟ a. Yes ہاں b. No نہیں	Q17. Was the asset helpful in increasing income level of household? کیا اثاثہ گھریلو آمدنی کی سطح میں اضافہ میں مددگار تھا؟ a. Yes ہاں b. No نہیں Q17.1. If yes, average approximate increase in HH income (Rs./month) due to asset transferred? کتنی اگر ہاں، منتقل شدہ اثاثہ کی وجہ سے ماہانہ گھریلو آمدنی اوسط تخمینہ بڑھتی ہے۔ a. 0-2000 b. 2001-4000 c. 4001-6000 d. 6001-8000 e. 8001-10000 f. More than 10000
Q18. Did any increase in asset base takes place due to provision of productive asset? پیداواری اثاثے کی فراہمی کے باعث اثاثہ کی بنیاد میں کوئی اضافہ ہوا؟ a. Yes ہاں b. No نہیں	Q20. Are you aware about expiry dates on eatable and non-eatable items being sold on supported by PPAF grocery shops? کیا آپ PPAF کی دکانوں پر فروخت ہونے والے کھانے اور غیر خردہ اشیاء پر ختم ہونے کی تاریخوں کے بارے میں آگاہ ہیں؟ a. Yes ہاں b. No نہیں c. Don't Know معلوم نہیں
Q19. Is child labor involved in any LEP activity? کیا بچوں سے مشقت لینا کسی بھی سرگرمی میں شامل ہے؟ a. Yes ہاں b. No نہیں	Q21. Please identify key challenges and constraints still existing in provision of LEP facilities? براہ کرم LEP سہولیات کی فراہمی میں موجودہ مشکلات اور رکاوٹوں کی شناخت کریں۔
Q22. What are the key areas that can be incorporated where you prefer PPAF to focus in future for livelihood enhancement and protection? Please explain مستقبل میں روزگار میں اضافے کے لئے PPAF کن کلیدی شعبوں پر اپنی توجہ مبذول کریں گے؟ وضاحت کریں	

Q23. Any comments/suggestions you want to give?

کوی سی بھی آراء / تجاویز جو آپ دینا چاہتے ہیں؟

Section-II: Community Physical Infrastructure

Drinking Water Supply Schemes

Beneficiary sampled for:

Through which of the following PPR supported interventions your household is being/has been benefitted:

- i. Drinking Water Supply پینے کے پانی کی فراہمی
- ii. Drainage and Sanitation نکاسی آب اور صفائی کا نظام
- iii. Irrigation آبپاشی
- iv. Roads and bridges سڑکیں اور پُل
- v. Dams ڈیم
- vi. Flood protection wall سیلاب سے بچاؤ کی دیوار

Drinking Water Supply Schemes

Q1. Which type of water scheme/s your household is currently being benefitted?

آپ کے گھرانے نے پانی کی کون سی سکیم سے فائدہ حاصل کیا ہے؟

- c. Drinking water supply scheme (tap) پینے کے پانی کی فراہمی سکیم
- d. Water storage tank واٹر سٹوریج ٹینک
- e. Solar drinking water supply scheme سولر پینے کے پانی کی سکیم
- f. Hand Pump ہتھ نلکا
- g. Any Other (Please mention)----- دیگر (وضاحت کریں)

Q2. Do you have water tap in your house?

کیا آپ کے گھر میں پانی کا نلکا ہے؟

- a. Yes ہاں
- b. No نہیں

2.1 If no, then is there any water connection near your house?

اگر نہیں، تو کیا آپ کے گھر کے پاس پانی کا کوئی کنکشن ہے؟

- a. Yes ہاں
- b. No نہیں

Q3. Do you get regular water supply through tap?

کیا آپ کو نلکے کے ذریعے مسلسل پانی ملتا ہے؟

- a. Yes ہاں
- b. No نہیں

Q4. If water connection is not at home then who fetches water for family every day?

اگر گھر پر پانی کا کنکشن نہیں ہے تو خاندان میں سے کون روز پانی بھر کر لاتا ہے؟

- a. Women خواتین
- b. Girls لڑکیاں
- c. Boys لڑکے
- d. Children بچے
- e. Men مرد
- f. Both women and men مرد اور خواتین دونوں
- g. Both boys and girls لڑکے اور لڑکیاں دونوں

<p>Q5. What was the main source of water prior to the PPR provided scheme آپ سکیم سے پہلے پانی کس ذریعہ سے حاصل کرتے تھے؟</p> <p>a. Nearby lake قریبی جھیل b. Tube well ٹیوب ویل c. Hand pump (ہنڈ پمپ) (ہنڈ پمپ) d. Water tanker پانی کا ٹینکر e. Water filtration plant واٹر فلٹریشن پلانٹ f. Any other (please mention): دیگر (وضاحت کریں):</p>	<p>Q6. How far was the previous water source? پانی کتنی دور سے لانا پڑتا ہے؟</p> <p>a. Just next to house گھر کے بالکل قریب سے b. Less than 500 meter پانچ سو میٹر سے کم فاصلے سے c. More than 500 meter but less than 1 KM پانچ سو میٹر سے زیادہ اور ایک کلو میٹر سے کم فاصلے سے d. 1-2 KM ایک سے دو کلو میٹر سے e. More than 2 KM دو کلو میٹر کے زائد فاصلے سے</p>																																				
<p>Q7. How far is the current nearest water source to bring the water for household consumption? گھریلو استعمال کے لئے موجودہ قریب ترین پانی کا ذریعہ کتنے فاصلے پر ہے؟</p> <p>a. Just next to house گھر کے بالکل قریب سے b. Less than 500 meter پانچ سو میٹر سے کم فاصلے سے c. More than 500 meter but less than 1 KM پانچ سو میٹر سے زیادہ اور ایک کلو میٹر سے کم فاصلے سے d. 2 KM دو کلو میٹر سے e. More than 3 KM تین کلو میٹر سے زائد</p>	<p>Q8. Who spends more time in storing and fetching water for household consumption? گھریلو استعمال کے لئے پانی لانے اور ذخیرہ کرنے پر کون زیادہ وقت صرف کرتا ہے؟</p> <p>a. Women خواتین b. Men مرد c. Girls لڑکیاں d. Boys لڑکے</p>																																				
<p>Q9. Do you have water storage facility in your house? کیا آپ کے گھر میں پانی ذخیرہ کرنے کی سہولت موجود ہے؟</p> <p>a. Yes ہاں b. No نہیں</p> <p>Q9.1. If no, how do you ensure water storage (especially in summers) اگر نہیں، تو آپ پانی کس طرح ذخیرہ کرتے ہیں؟ (خاص طور پر موسم گرما میں)</p>																																					
<p>Q10. How drinking water schemes are benefiting you in following areas پانی کی سکیمیں آپ کو مندرجہ ذیل میں سے کس طرح فائدہ پہنچا رہی ہیں؟</p>																																					
<table border="1"> <thead> <tr> <th>Description تفصیل</th> <th>Yes ہاں</th> <th>No نہیں</th> <th>Don't know معلوم نہیں</th> </tr> </thead> <tbody> <tr> <td>Saving time in fetching water پانی لانے میں وقت کی بچت</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Reduced physical labor جسمانی مشقت میں کمی</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Income saving آمدن میں بچت</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Ensure water availability پانی کی یقینی فراہمی</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Availability of Clean drinking water پینے کے صاف پانی کی فراہمی</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Less Water borne diseases پانی سے لگنے والی بیماریوں میں کمی</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Less expenditures on health صحت پر اٹھنے والے کم اخراجات</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Any other دیگر</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Description تفصیل	Yes ہاں	No نہیں	Don't know معلوم نہیں	Saving time in fetching water پانی لانے میں وقت کی بچت				Reduced physical labor جسمانی مشقت میں کمی				Income saving آمدن میں بچت				Ensure water availability پانی کی یقینی فراہمی				Availability of Clean drinking water پینے کے صاف پانی کی فراہمی				Less Water borne diseases پانی سے لگنے والی بیماریوں میں کمی				Less expenditures on health صحت پر اٹھنے والے کم اخراجات				Any other دیگر				
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Q11. How satisfied are you with the provided PPAF water facilities?

آپ فراہم کردہ پانی کی سہولیات سے کس حد تک مطمئن ہیں؟

Description تفصیل	Extremely Satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Quality of water پانی کا معیار						
Accessibility رسائی						
Regular supply of water پانی کی باقاعدہ فراہمی						
Distance to be covered فاصلے کی کمی						
Timing وقت کی بچت						
Operation & maintenance پانی کے حصول کے لئے عملی اقدام اور اس کی برقراری						
Any other دیگر						

Q12. If you are not satisfied then what are the key reasons behind your dis-satisfaction?

اگر آپ مطمئن نہیں ہیں تو اس کے پیچھے کون سی وجوہات ہیں؟

Q13. Do you boil your water daily before drinking?

کیا آپ اپنے پینے کے پانی کو روزانہ استعمال سے پہلے ابالتے ہیں؟

- a. Yes ہاں b. No نہیں

Q14. How much are you paying (in rupees per month) for PPR provided water supply scheme facility?

آپ فراہم کردہ پانی کی سہولیات کے لئے کتنی رقم ادا کر رہے ہیں؟

- a. Rs. 0 صفر روپے
b. Rs. 1-100 ایک سو ایک سے ایک سو سو روپے تک
c. Rs. 101-200 ایک سو ایک سے دو سو تک
d. Rs. 201-300 دو سو ایک سے تین سو تک
e. Rs. 301-400 تین سو ایک سے چار سو تک
f. Rs. More than 400 چار سو سے زیادہ

Q15. Please identify key challenges and constraints still existing in provision of water supply scheme facility?

مہربانی فرما کر پانی کی سہولیات میں موجود مشکلات اور رکاوٹوں کی نشاندہی کریں؟

Q16. What are the key areas that can be incorporated where you prefer PPAF to focus in future for water? Please explain

آپ کے خیال میں پی پی اے ایف کو مستقبل میں پانی کے حوالے سے کن پہلوؤں پر زور دینا چاہئے؟

Q17. Any comments/suggestions you want to give?

کوئی سی بھی آراء / تجاویز جو آپ دینا چاہتے ہیں؟

General Questions
1. Are you a member of any Operations and Maintenance Committees (operating under CO or VO of the area)?

کیا آپ کسی انتظامی اور بحالی کمیٹی کے رکن ہیں

- a. Yes ہاں
b. No نہیں

2. Do you pay any dues to O&M committees to ensure regular maintenance of the infrastructure provided under PPAF projects?

کیا آپ انفراسٹرکچر کی تعمیر و ترقی کے لئے کمیٹیوں کو باقاعدگی سے رقم ادا کرتے ہیں؟

- a. Yes ہاں

	b. No نہیں
3. How do you define the performance of project committees? آپ منصوبے کی کمیٹیوں کی کارکردگی کو کس طرح بیان کریں گے a. Very good بہت اچھی b. Good اچھی c. Satisfactory اطمینان بخش d. Not satisfactory غیر اطمینان بخش e. Poor کمزور f. Very poor بہت کمزور	4. Are trees cutting done during construction work? کیا تعمیراتی کام کے دوران کوئی درخت کاٹے گئے؟ a. Yes ہاں b. No نہیں
	5. Any mitigation measures taken against tree cutting? کیا درختوں کی کٹائی کے بچاؤ کے لئے کوئی عمل کیا گیا a. Yes ہاں b. No نہیں
6. Which mitigation measures are taken against tree cutting? درختوں کی کٹائی سے بچاؤ کے لئے کون سی تدابیر اختیار کیں؟ a. New tree plantation شجر کاری b. Alteration in scheme design to avoid tree cutting درختوں کی کٹائی سے بچنے کے لئے متبادل سکیم کا اجراء c. Any other دیگر	7. What is the nature of land used for scheme / intervention? سکیم کے تحت زمین کی استعمال کی نوعیت کیا ہے؟ a. Donated عطیہ شدہ b. Rented کرائے پر c. Disputed متنازعہ d. Government سرکاری e. Any other دیگر
8. Is child labor involved in any construction activity? کیا تعمیراتی کام میں بچوں سے مشقت لی جاتی ہے a. Yes ہاں b. No نہیں	9. Which issue of climatic change is facing by you or community? ماحولیاتی تبدیلی کے کن مسائل کا آپ یا آپ کے علاقے کو سامنا کرنا پڑا؟ a. Drought / less rain خشک سالی / کم بارشیں b. Floods سیلاب c. Earthquake زلزلہ d. Any other دیگر

Section-II: Community Physical Infrastructure

Flood Protection Wall

Beneficiary sampled for:

Through which of the following PPR supported interventions your household is being/has been benefitted:

- Drinking Water Supply پینے کے پانی کی فراہمی
- Drainage and Sanitation نکاسی آب اور صفائی کا نظام
- Irrigation آبیاشی
- Roads and bridges سڑکیں اور پل
- Dams ڈیم
- Flood protection wall سیلاب سے بچاؤ کی دیوار

Flood Protection Wall

<p>Q1. How does the flood protection wall benefit you/ your locality?</p> <p>سیلاب سے حفاظتی دیوار نے آپ کے علاقے کو کس طرح فائدہ پہنچایا ہے؟</p> <p>a. Damage control to houses گھروں کے نقصان پر قابو</p> <p>b. Damage control to agriculture land زراعی اراضی کے نقصان پر قابو</p> <p>c. Clean drinking water supply پینے کے صاف پانی کی فراہمی</p> <p>d. Less disease spread بیماریوں کا کم پھیلاؤ</p> <p>e. Irrigation water for fertile lands زرخیز زمین کے لیے آبپاشی کا پانی</p> <p>f. Less injury/loss of livestock مال مویشیوں کا کم نقصان</p> <p>g. Any other (please mention) دیگر (مہربانی فرماکر وضاحت کریں)</p>	<p>Q2. In case of agriculture land, does the area under cultivation increased after flood protection wall?</p> <p>سیلاب سے حفاظتی دیوار بننے کے بعد کیا زیر کاشت رقبے میں اضافہ ہوا؟</p> <p>a. Yes ہاں</p> <p>b. No نہیں</p> <p>Q2.1. If yes, how much increase in cultivation land was observed?</p> <p>اگر ہاں تو زیر کاشت رقبہ میں کتنے فیصد اضافہ ہوا؟</p> <p>a. Less than 5% پانچ فیصد سے کم</p> <p>b. 5-10% پانچ سے دس فیصد</p> <p>c. 11-15% گیارہ سے پندرہ فی صد</p> <p>d. 15-20% پندرہ سے بیس فیصد</p> <p>e. More than 20% بیس فیصد سے زیادہ</p>
<p>Q3. Are you growing more corps than before?</p> <p>کیا آپ پہلے سے زیادہ فصلیں کاشت کر رہے ہیں؟</p> <p>a. Yes ہاں</p> <p>b. No نہیں</p>	<p>Q4. How much increase in earnings do you observe?</p> <p>آپ کی آمدن میں کتنے فیصد اضافہ ہوا؟</p> <p>a. Less than 5% پانچ فیصد سے کم</p> <p>b. 5-10% پانچ سے دس فیصد</p> <p>c. 11-15% گیارہ سے پندرہ فی صد</p> <p>d. 15-20% پندرہ سے بیس فیصد</p> <p>e. More than 20% بیس فیصد سے زیادہ</p>
<p>Q5. Do you take part in operation and maintenance of protection work?</p> <p>کیا آپ نے حفاظتی کام کی تعمیر میں حصہ لیا؟</p> <p>a. Yes ہاں</p> <p>b. No نہیں</p>	<p>Q6. Does flood ever affected you/ household?</p> <p>کیا سیلاب نے آپ / گھر والوں کو متاثر کیا؟</p> <p>a. Yes ہاں</p> <p>b. No نہیں</p> <p>Q6.1. If yes, what was the damage occurred due to the calamity?</p> <p>اگر ہاں تو اس آفت سے کس قسم کا نقصان ہوا؟</p> <p>a. Damage to household property گھریلو جائیداد کا نقصان</p> <p>b. Injury to human health انسانی صحت کا نقصان</p> <p>c. Loss of human life انسانی زندگی کا نقصان</p> <p>d. Wastage of agriculture land/crop زراعی رقبے اور فصلوں کا نقصان</p> <p>e. Injury to livestock مال مویشیوں کو زخم</p> <p>f. Loss of livestock مال مویشیوں کا نقصان</p> <p>g. Any other (please mention) دیگر (مہربانی فرماکر وضاحت کریں)</p>
<p>Q7. Are there any requirements of more flood protection walls in the locality?</p> <p>کیا آپ کے علاقے میں مزید سیلاب سے حفاظتی دیواروں کی ضرورت ہے؟</p> <p>a. Yes ہاں</p> <p>b. No نہیں</p>	

Q8. Any comments/suggestions you want to give

کوئی آراء/ تبصرہ دینا چاہیں

General Questions
1. Are you a member of any Operations and Maintenance Committees (operating under CO or VO of the area)?

کیا آپ کسی انتظامی اور بحالی کمیٹی کے رکن ہیں

- c. Yes ہاں
d. No نہیں

2. Do you pay any dues to O&M committees to ensure regular maintenance of the infrastructure provided under PPAF projects?

کیا آپ انفراسٹرکچر کی تعمیر و ترقی کے لئے کمیٹیوں کو باقاعدگی سے رقم ادا کرتے ہیں؟

- c. Yes ہاں
d. No نہیں

3. How do you define the performance of project committees?

آپ منصوبے کی کمیٹیوں کی کارکردگی کو کس طرح بیان کریں گے

- g. Very good بہت اچھی
h. Good اچھی
i. Satisfactory اطمینان بخش
j. Not satisfactory غیر اطمینان بخش
k. Poor کمزور
l. Very poor بہت کمزور

4. Are trees cutting done during construction work?

کیا تعمیراتی کام کے دوران کوئی درخت کاٹے گئے؟

- c. Yes ہاں
d. No نہیں

5. Any mitigation measures taken against tree cutting?

کیا درختوں کی کٹائی کے بچاؤ کے لئے کوئی عمل کیا گیا

- c. Yes ہاں
d. No نہیں

6. Which mitigation measures are taken against tree cutting?

درختوں کی کٹائی سے بچاؤ کے لئے کون سی تدابیر اختیار کیں؟

- d. New tree plantation شجر کاری
e. Alteration in scheme design to avoid tree cutting درختوں کی کٹائی سے بچنے کے لئے متبادل سکیم کا اجراء
f. Any other دیگر

7. What is the nature of land used for scheme / intervention?

سکیم کے تحت زمین کی استعمال کی نوعیت کیا ہے؟

- f. Donated عطیہ شدہ
g. Rented کرائے پر
h. Disputed متنازعہ
i. Government سرکاری
j. Any other دیگر

8. Is child labor involved in any construction activity?

کیا تعمیراتی کام میں بچوں سے مشقت لی جاتی ہے

- c. Yes ہاں
d. No نہیں

9. Which issue of climatic change is facing by you or community?

ماحولیاتی تبدیلی کے کن مسائل کا آپ یا آپ کے علاقے کو سامنا کرنا پڑا؟

- e. Drought / less rain خشک سالی/ کم بارشیں
f. Floods سیلاب
g. Earthquake زلزلہ
h. Any other دیگر

Section-II Community Physical Infrastructure

Roads & Bridges

Beneficiary sampled for:

Through which of the following PPR supported interventions your household is being/has been benefitted:

- i. Drinking Water Supply پینے کے پانی کی فراہمی
- ii. Drainage and Sanitation نکاسی آب اور صفائی کا نظام
- iii. Irrigation آبپاشی
- iv. Roads and bridges سڑکیں اور پل
- v. Dams ڈیم
- vi. Flood protection wall سیلاب سے بچاؤ کی دیوار

Roads and Bridges

Q1. What type of repair/maintenance work carried out in your locality?

آپ کے علاقے میں مرمت/ بحالی کا کس قسم کا کام کیا گیا ہے؟

- a. Bridge پل
- b. Link road رابطہ سڑک
- c. Retaining wall سہارا دینے والی دیوار
- d. Trail path/foot tracks پیڈل چلنے کا راستہ
- e. Culvert پلیاں
- f. Causeway کچا پکا راستہ
- g. Any other (please mention):----- دیگر (وضاحت کریں)

Q2. In which capacity you are utilizing the above-mentioned intervention?

آپ کس حیثیت میں اس منصوبے سے فائدہ حاصل کر رہے ہیں؟

- a. Primary route بنیادی راستہ
- b. Secondary route ثانوی راستہ

Q3. How you were assessing following services before construction/ maintenance of PPR road/bridge?

آپ سڑک/ پل بنانے سے پہلے مندرجہ ذیل خدمات کا کیسے رسائی کر رہے تھے؟

Services خدمات	On foot پیدل	Bicycle/animal بائیسکل/ جانور	Public transport پبلک ٹرانسپورٹ	Motorcycle موٹر سائیکل	4 public wheel بسیں وغیرہ	Not applicable غیر متعلقہ
Water پانی						
General store جنرل سٹور						
Assessing public transport پبلک ٹرانسپورٹ تک رسائی						
School سکول						
Hospital ہسپتال						
Assessing government department گورنمنٹ محکموں تک رسائی						

Q4. How you are assessing following services after construction/ maintenance of PPR provided road/bridge?

آپ سڑک/ پل بنانے کے بعد مندرجہ ذیل خدمات تک کیسے رسائی کر رہے تھے؟

Services	On foot	Bicycle/animal	Public transport	Motorcycle	4 public wheel	Not applicable
Water						
General store						
Assessing public transport						
School						
Hospital						
Assessing government department						

Q5. How much time (in minutes) required to access following services before and after PPR provided road/bridge?

پروگرام کے تحت مندرجہ ذیل خدمات تک پہلے اور بعد رسائی میں کتنا وقت درکار ہوتا ہے (منٹوں میں)

Services	Before پہلے	After بعد	Change in time وقت میں تبدیلی
Water پانی			
General store جنرل سٹور			
Assessing public transport پبلک ٹرانسپورٹ تک رسا			
School سکول			
Hospital ہسپتال			
Assessing government department گورنمنٹ محکموں تک رسا			

Q6. What impact scheme has created on following categories?

مندرجہ ذیل اقسام پر سکیم کے کیا اثر ڈالا؟

Services خدمات	Increase اضافہ	Decrease کمی	Remain same وہی
Income آمدن			
Farm output فارم کی پیداوار			
Access to education تعلیم تک رسا			
Access to health صحت تک رسا			
Leisure time فارغ وقت			
Timely access of services خدمات کی وقت پر رسا			

Q7. Any comments/suggestions you want to give?

کوئی سی بھی آراء / تجاویز جو آپ دینا چاہتے ہیں؟

5. Any mitigation measures taken against tree cutting?

کیا درختوں کی کٹائی کے بچاؤ کے لئے کوئی عمل کیا گیا

- a. Yes ہاں
b. No نہیں

General Questions	
1. Are you a member of any Operations and Maintenance Committees (operating under CO or VO of the area)? کیا آپ کسی انتظامی اور بحالی کمیٹی کے رکن ہیں e. Yes ہاں f. No نہیں	2. Do you pay any dues to O&M committees to ensure regular maintenance of the infrastructure provided under PPAF projects? کیا آپ انفراسٹرکچر کی تعمیر و ترقی کے لئے کمیٹیوں کو باقاعدگی سے رقم ادا کرتے ہیں؟ e. Yes ہاں f. No نہیں
3. How do you define the performance of project committees? آپ منصوبے کی کمیٹیوں کی کارکردگی کو کس طرح بیان کریں گے m. Very good بہت اچھی n. Good اچھی o. Satisfactory اطمینان بخش p. Not satisfactory غیر اطمینان بخش q. Poor کمزور r. Very poor بہت کمزور	4. Are trees cutting done during construction work? کیا تعمیراتی کام کے دوران کوئی درخت کاٹے گئے؟ e. Yes ہاں f. No نہیں
	5. Any mitigation measures taken against tree cutting? کیا درختوں کی کٹائی کے بچاؤ کے لئے کوئی عمل کیا گیا e. Yes ہاں f. No نہیں
6. Which mitigation measures are taken against tree cutting? درختوں کی کٹائی سے بچاؤ کے لئے کون سی تدابیر اختیار کیں؟ g. New tree plantation شجر کاری h. Alteration in scheme design to avoid tree cutting درختوں کی کٹائی سے بچنے کے لئے متبادل سکیم کا اجراء i. Any other دیگر	7. What is the nature of land used for scheme / intervention? سکیم کے تحت زمین کی استعمال کی نوعیت کیا ہے؟ k. Donated عطیہ شدہ l. Rented کرائے پر m. Disputed متنازعہ n. Government سرکاری o. Any other دیگر
8. Is child labor involved in any construction activity? کیا تعمیراتی کام میں بچوں سے مشقت لی جاتی ہے e. Yes ہاں f. No نہیں	9. Which issue of climatic change is facing by you or community? ماحولیاتی تبدیلی کے کن مسائل کا آپ یا آپ کے علاقے کو سامنا کرنا پڑا؟ i. Drought / less rain خشک سالی/ کم بارشیں j. Floods سیلاب k. Earthquake زلزلہ l. Any other دیگر

Section-II Community Physical Infrastructure

Delay Action Dams

Through which of the following PPR supported interventions your household is being/has been benefitted:

- Drinking Water Supply پینے کے پانی کی فراہمی
- Drainage and Sanitation نکاسی آب اور صفائی کا نظام
- Irrigation آبیاشی
- Roads and bridges سڑکیں اور پل
- Dams ڈیم
- Flood protection wall سیلاب سے بچاؤ کی دیوار

Delay Action Dams	
<p>Q1. How many Delay Action Dams (DADs) are constructed in your locality? آپ کے علاقے میں کتنے تاخیری ڈیمز بنائے گئے ہیں؟</p> <p>a. 1 b. 2 c. 3 d. More than 3 تین سے زیادہ</p>	<p>Q2. How does the construction of DAD help you/your locality? تاخیری ڈیم نے آپ/آپ کے علاقے کو کس طرح فائدہ پہنچایا ہے؟</p> <p>a. Temporary water storage پانی کا عارضی ذخیرہ b. Slow water discharge پانی کی آہستہ نکاسی c. Recharge aquifers پانی کا دوبارہ حصول d. Protection from rapid flow of water پانی کے تیز بہاؤ سے بچاؤ e. Increase in irrigated area آبپاشی کے رقبے میں اضافہ f. Any other (please mention):</p>
<p>Q3. Does DAD help in protecting community from water related calamities? کیا تاخیری ڈیمز نے علاقے کو پانی سے متعلق تکلیفوں سے بچاؤ میں مدد کی؟</p> <p>a. Yes ہاں b. No نہیں</p>	<p>Q4. Is there requirement of more delay action dams in the locality? کیا آپ کے علاقے میں مزید تاخیری ڈیمز کی ضرورت ہے؟</p> <p>a. Yes ہاں b. No نہیں</p>
<p>Q5. Have delay action dams increased the ground water table in your village? کیا تاخیری ڈیمز نے آپ کے علاقے میں زیر زمین پانی کی سطح میں اضافہ کیا؟</p> <p>a. Yes ہاں b. No نہیں</p>	<p>Q6. Are there any rainwater harvesting ponds in the locality? کیا آپ کے علاقے میں بارشی پانی کے تالاب موجود ہیں؟</p> <p>a. Yes ہاں b. No نہیں</p> <p>Q6.1. If yes, how does the pond help the locality? اگر ہاں، تو تالاب نے علاقے کو کس طرح فائدہ پہنچایا ہے؟</p> <p>a. Hold rainwater بارشی پانی کا ذخیرہ b. Provision of drinking water پینے کے پانی کی فراہمی c. Usage for livestock مال مویشی کے لئے استعمال d. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں):</p>
<p>Q7. Are there any water efficient irrigation schemes in your locality? کیا آپ کے علاقے میں آبپاشی کی مؤثر سکیمیں موجود ہیں؟</p> <p>c. Yes ہاں d. No نہیں</p> <p>Q7.1. If yes, please explain which type of interventions exists? اگر ہاں، تو کس قسم کی سکیمیں پائی جاتی ہیں؟</p> <p>a. Sprinkler چھڑکاؤ b. Drip irrigation نالی کے ذریعے قطرہ قطرہ آبپاشی c. Bubbler irrigation ببلر آبپاشی d. Pipe irrigation نالی کے ذریعے آب پاشی e. Water course lining پانی کا کھالا</p>	<p>Q8. How does the irrigation schemes are contributing? آبپاشی کی سکیمیں کس طرح فائدہ پہنچا رہی ہیں؟</p> <p>a. Ensuring water for agriculture usage زرعی استعمال کے لئے پانی b. Reduce water wastages پانی کے زیاں میں کمی c. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں):</p>
<p>Q9. What is your level of satisfaction due to this type of intervention in your area? اس سہولت میں آپ کس حد تک مطمئن ہیں؟</p> <p>a. Extremely satisfied انتہائی مطمئن b. Very satisfied بہت مطمئن c. Somewhat satisfied کسی حد تک مطمئن d. Somewhat dissatisfied کسی حد تک غیر مطمئن e. Very dissatisfied بہت غیر مطمئن f. Extremely dissatisfied انتہائی غیر مطمئن</p>	<p>Q10. If you are not satisfied, then what are key reasons behind your dis-satisfaction? اگر آپ مطمئن نہیں ہیں تو ان کی کیا بنیادی وجوہات ہیں؟</p>

Q11. Any comments/suggestions you want to give

کوئی آراء/ تبصرہ دینا چاہیں

General Questions**1. Are you a member of any Operations and Maintenance Committees (operating under CO or VO of the area)?**

کیا آپ کسی انتظامی اور بحالی کمیٹی کے رکن ہیں

g. Yes ہاں

h. No نہیں

2. Do you pay any dues to O&M committees to ensure regular maintenance of the infrastructure provided under PPAF projects?

کیا آپ انفراسٹرکچر کی تعمیر و ترقی کے لئے کمیٹیوں کو باقاعدگی سے رقم ادا کرتے ہیں؟

g. Yes ہاں

h. No نہیں

3. How do you define the performance of project committees?

آپ منصوبے کی کمیٹیوں کی کارکردگی کو کس طرح بیان کریں گے

s. Very good بہت اچھی

t. Good اچھی

u. Satisfactory اطمینان بخش

v. Not satisfactory غیر اطمینان بخش

w. Poor کمزور

x. Very poor بہت کمزور

4. Are trees cutting done during construction work?

کیا تعمیراتی کام کے دوران کوئی درخت کاٹے گئے؟

g. Yes ہاں

h. No نہیں

5. Any mitigation measures taken against tree cutting?

کیا درختوں کی کٹائی کے بچاؤ کے لئے کوئی عمل کیا گیا

g. Yes ہاں

h. No نہیں

6. Which mitigation measures are taken against tree cutting?

درختوں کی کٹائی سے بچاؤ کے لئے کون سی تدابیر اختیار کیں؟

j. New tree plantation شجر کاری

k. Alteration in scheme design to avoid tree cutting درختوں کی کٹائی سے بچنے کے لئے متبادل سکیم کا اجراء

l. Any other دیگر

7. What is the nature of land used for scheme / intervention?

سکیم کے تحت زمین کی استعمال کی نوعیت کیا ہے؟

p. Donated عطیہ شدہ

q. Rented کرائے پر

r. Disputed متنازعہ

s. Government سرکاری

t. Any other دیگر

8. Is child labor involved in any construction activity?

کیا تعمیراتی کام میں بچوں سے مشقت لی جاتی ہے

g. Yes ہاں

h. No نہیں

9. Which issue of climatic change is facing by you or community?

ماحولیاتی تبدیلی کے کن مسائل کا آپ یا آپ کے علاقے کو سامنا کرنا پڑا؟

m. Drought / less rain خشک سالی/ کم بارشیں

n. Floods سیلاب

o. Earthquake زلزلہ

p. Any other دیگر

Section II: Community Physical Infrastructure**Drainage & Sanitation**

Through which of the following PPR supported interventions your household is being/has been benefitted:

- Drinking Water Supply پینے کے پانی کی فراہمی
- Drainage and Sanitation نکاسی آب اور صفائی کا نظام
- Irrigation آبیاشی

- iv. Roads and bridges سڑکیں اور پل
v. Dams ڈیم
vi. Flood protection wall سیلاب سے بچاؤ کی دیوار

Drainage and Sanitation

Q1. What type of sanitation facilities developed under CPI in your area?

آپ کے علاقے میں نکاسی آب کی کون سی سہولتیں موجود ہیں مندرجہ ذیل سے بتائیں؟

- c. Drainage نکاسی آب
d. Sewerage system سیوریج سسٹم
e. Community latrines کمیونٹی لیٹرین
f. Household latrines گھریلو لیٹرین
g. Any other دیگر

Q2. What is the nature of drains constructed by PPAF?

پی پی اے ایف نے کس قسم کے نکاسی آب تعمیر کئے ہیں؟

- e. Covered ڈھاکے ہوئے
f. Uncovered کھلے
g. Pakka پکا
h. Kacha کچا

Q3. If community latrines, what is the fee per visit (in rupees)?

اگر آپ کمیونٹی لیٹرین استعمال کرتے ہیں تو ایک دفعہ جانے پر کتنی رقم دیتے ہیں؟

- a. 10
b. 15
c. 20
d. 25
e. 30
f. More than 30
g. No fee at all بغیر رقم دینے کے

Q4. What is the satisfaction level with the community latrines in following components?

کمیونٹی لیٹرین کے متعلق مندرجہ ذیل عناصر سے آپ کتنے مطمئن ہیں؟

Description تفصیل	Extremely satisfied مطمئن انتہائی	Very satisfied بہت مطمئن	Somewhat satisfied	Somewhat dissatisfied کسی حد تک غیر م	Very dissatisfied	Extremely dissatisfied
Water پانی						
Cleanliness صفائی						
Maintenance بحالی						
Operational timing استعمال کا وقت						
Number of latrines لیٹرین کی تعداد						
Accessibility رسائی						
Safe Space محفوظ جگہ						
Any other دیگر						

<p>Q5. Do you play any part in cleanliness/ maintenance of community latrines? کیا آپ صفائیا بحالی کے لئے کوئی کردار ادا کر رہے ہیں؟</p> <p>a. Yes ہاں b. No نہیں</p>	<p>Q6. Do women regularly use these community latrines? کیا خواتین کمیونٹی لیٹرین باقاعدگی سے استعمال کرتی ہیں؟</p> <p>a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں</p>																				
<p>Q7. If No, then what are the reasons that women are not using these community latrines? اگر نہیں، تو اس کی کیا وجوہات ہیں؟</p>	<p>Q8. Are you satisfied with the provided sanitation facilities? کیا آپ نکاسی آب کی فراہم کردہ سہولتوں سے مطمئن ہیں؟</p> <p>a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں</p>																				
<p>Q9. What kind of change do you observe after provided sanitation facilities? نکاسی آب کی سہولتوں کی فراہمی کے بعد آپ مندرجہ ذیل عناصر میں کیا تبدیلی محسوس کرتے ہیں؟</p> <table border="1"> <thead> <tr> <th>Description</th> <th>Yes</th> <th>No</th> <th>Don't know</th> </tr> </thead> <tbody> <tr> <td>Cleanliness صفائی</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Disease control بیماری پر قابو</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Economic benefits معاشی فوائد</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Any other دیگر</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Description	Yes	No	Don't know	Cleanliness صفائی				Disease control بیماری پر قابو				Economic benefits معاشی فوائد				Any other دیگر				<p>Q10. What kind of problems do you or community face due to poor sanitation? خراب نکاسی آب کی وجہ سے آپ کو یا علاقے کو کن مشکلات کا سامنا کرنا پڑتا ہے</p>
Description	Yes	No	Don't know																		
Cleanliness صفائی																					
Disease control بیماری پر قابو																					
Economic benefits معاشی فوائد																					
Any other دیگر																					
<p>Q11. What is the cleanliness mechanism of sanitation lines? نکاسی آب کی صفائیکا کیا انتظام ہے؟</p> <p>a. Personally ذاتی طور پر b. Collectively مجموعی طور پر c. Municipal authority بلدیہ d. Any other دیگر</p>	<p>Q12. Which method is adopted in your village for waste/garbage disposal? آپ کے گاؤں میں کوڑا کرکٹ کو رفع کرنے کا کیا طریقہ کار ہے؟</p> <p>a. Garbage/waste collection by municipal authority کوڑا کرکٹ اکٹھا کرتی ہے b. Disposal at dumping point in the village گاؤں کے اندر کوڑا کرکٹ پھینکنے کی جگہ c. Burning جلانا d. Openly dumped کھلا جگہ میں پھینکا e. Any other دیگر</p>																				
<p>Q13. Please identify key challenges and constraints still existing in provision of drainage/sanitation/community latrines facilities? آپ کو نکاسی آب / کمیونٹی لیٹرین کی سہولیات میں کس قسم کی مشکلات اور رکاوٹوں کا سامنا کرنا پڑتا ہے؟</p>																					
<p>Q14. What are the key areas that can be incorporated where you prefer PPAF to focus in future for drainage/sanitation/ community latrines? Please explain آپ کے خیال میں پی پی اے ایف کو مستقبل میں نکاسی آب / کمیونٹی لیٹرین کی سہولت کے لئے کن پہلوؤں پر غور کرنا چاہئے؟ مہربانی فرما کر وضاحت کریں</p>																					

Q15. Any comments/suggestions you want to give

کوئی بھی آراء/ تجاویز آپ دینا چاہیں گے

Section II: Community Physical Infrastructure**Irrigation**

Through which of the following PPR supported interventions your household is being/has been benefitted:

- Drinking Water Supply پینے کے پانی کی فراہمی
- Drainage and Sanitation نکاسی آب اور صفائی کا نظام
- Irrigation آبپاشی
- Roads and bridges سڑکیں اور پل
- Dams ڈیم
- Flood protection wall سیلاب سے بچاؤ کی دیوار

Irrigation	
Q1. What type of irrigation schemes develop by PPAF in your area/village? آپ کے علاقے/ گاؤں میں پی پی اے ایف نے آبپاشی کی کون سی سکیمیں بنائی ہیں؟ a. Irrigation channel آبپاشی چینل b. Pipe Irrigation آبپاشی پائپ c. Water course Lining واٹر کورس لائننگ d. Pumps and water storage reservoir پمپ اور پانی کا ذخیرہ e. Any other (please mention): دیگر (مہربانی فرما رک وضاحت کریں)	Q2. How many acres of agriculture land do you have? آپ کے پاس کتنے ایکڑ زرعی زمین ہے؟ Q3. Are you a tenant or land owner? کیا آپ مزارعہ ہیں یا زمین کے مالک؟ a. land owner مالک b. tenant مزارعہ
Q4. Do you have legal entitlement (papers) of the land? کیا آپ کے پاس زمین کے قانونی کاغذات ہیں؟ h. Yes ہاں i. No نہیں	Q5. Who owns the land in your house (Men, Women) آپ کے گھر میں زمین کس کی ملکیت ہے (مرد ، خواتین) a. Men مرد b. Women خواتین
Q6. How much do you pay to the landlord (if tenant)? In cash or kind آپ زمین کے مالک کو کتنی رقم ادا کرتے ہیں؟ a. Cash (PKR) نقد رقم (روپے) b. Kind قسم	Q7. Does the women of your household work in the agriculture fields? کیا آپ کے گھر کی خواتین کھیتوں میں کام کرتی ہیں؟ a. Yes ہاں b. No نہیں

<p>Q8. How water is directed towards your field آپ کے کھیتوں میں پانی کس ذریعہ سے آتا ہے؟ a. Lined water course لائنڈ واٹر کورس b. Unlined water course ان لائنڈ واٹر کورس c. Pipes پائپس d. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)</p>	<p>Q9. Does any water wastage still take place in provided PPAF irrigation schemes? کیا پی پی اے ایف کی آبپاشی سکیموں میں ابھی بھی پانی کا زیاں ہوتا ہے؟</p> <table border="1"> <tr> <td>a. Yes ہاں</td> <td>b. No نہیں</td> <td>c. Don't know معلوم نہیں</td> </tr> </table> <p>Q9.1. If yes, how this water wastage is affecting your field activities? اگر ہاں۔ تو پانی کا زیاں آپ کے کھیتوں کو کس طرح متاثر کرتا ہے؟ a. Loss of water پانی کا نقصان b. Loss of time وقت کا نقصان c. Loss of irrigated area آبپاشی شدہ علاقے کا نقصان d. Loss in production پیداوار میں نقصان e. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)</p>	a. Yes ہاں	b. No نہیں	c. Don't know معلوم نہیں
a. Yes ہاں	b. No نہیں	c. Don't know معلوم نہیں		
<p>Q10. How much are you paying monthly fee for water facility? آپ پانی کی سہولت کے لئے ماہانہ کتنی رقم ادا کرتے ہیں؟</p> <p>Q10.1. If yes, what is the basis for the payment? اگر ہاں، تو رقم ادا کرنے کی نوعیت کیا ہے؟ a. Per hour فی گھنٹہ b. Per acre فی ایکڑ c. Per crop فی فصل d. Per month ماہانہ</p>	<p>Q11. Have irrigation schemes lowered the ground water table in your village? کیا آبپاشی کی وجہ سے آپ کے گاؤں میں زیر زمین پانی کی سطح کم ہوئی ہے؟ a. Yes ہاں b. No نہیں</p>			

Section III: Health

<p>1. Did your household receive any health services provided by PPAF? کیا آپ کے گھرانے نے پی پی اے ایف کی صحت کی سہولیات سے فائدہ حاصل کیا؟ a. Yes ہاں b. No نہیں</p>	<p>2. If yes, from where did you/household get these facilities? اگر ہاں، تو آپ / آپ کے گھرانے نے یہ سہولیات کہاں سے حاصل کیں؟</p> <table border="1"> <tr> <td>a. Basic Health Units بنیادی صحت یونٹ</td> <td>b. Community Health Center (CHC) کمیونٹی ہیلتھ سینٹر</td> <td>c. Any other (Please Mention) دیگر (مہربانی فرما کر وضاحت کریں)</td> </tr> </table>	a. Basic Health Units بنیادی صحت یونٹ	b. Community Health Center (CHC) کمیونٹی ہیلتھ سینٹر	c. Any other (Please Mention) دیگر (مہربانی فرما کر وضاحت کریں)
a. Basic Health Units بنیادی صحت یونٹ	b. Community Health Center (CHC) کمیونٹی ہیلتھ سینٹر	c. Any other (Please Mention) دیگر (مہربانی فرما کر وضاحت کریں)		
<p>3. What are the possible reasons of availing health facility provided by P PAF? کیا فراہم کردہ صحت کی سہولیات حاصل کرنے کی ممکنہ وجوہات کیا ہیں</p> <p>a. Only available facility in the area علاقے/گاؤں میں یہ واحد دستیاب سہولت ہے</p> <p>b. Nearest to home گھر سے قریب ترین ہے</p> <p>c. Easily accessible آسانی سے قابل رسائی ہے</p> <p>d. Satisfaction with the services provided فراہم کردہ خدمات تسلی بخش ہیں</p> <p>e. Family/friend referred to this facility خاندان/دوست اس سہولت کا حوالہ دیتے ہیں</p> <p>f. Low cost/affordable services provision خدمات کی فراہمی کم قیمت / قابل برداشت</p> <p>g. Other (please mention): دیگر (وضاحت کریں)</p>				

4. What type of medical services are required/accessed more often?

- کس قسم کی صحت کی سہولیات زیادہ تر درکار / قابل رسائی ہیں
- a. Chronic illness داعمی مرض
- b. Acute illness سنگین بیماری
- c. Primary Health Care Services حفظان صحت کی بنیادی خدمات
- d. Child health بچے کی صحت
- e. Immunization حفاظتی ٹیکوں کا کورس
- f. Maternal health زچہ کی صحت
- g. Antenatal Care and Postnatal Care Nutrition – treatment for stunting, wasting, malnutrition, low birth weight babies, کم وزن پیدا ہونے والے بچوں کی غذایت کا تحفظ
- h. Any other (please mention): دیگر (وضاحت کریں)

5. Are the services provided by the PPAF supported health facilities appropriate for women?

- کیا پی پی اے ایف کی فراہم کردہ صحت کی سہولیات خواتین کے لئے مناسب ہیں؟
- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

6. In community health facilities by PPAF, are the female staff sufficient to meet women's specific health needs?

- کیا پی پی اے ایف کی کمیونٹی کی صحت کی سہولیات میں خواتین سے متعلق صحت کا عملہ خواتین کافی ہے؟

- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

7. What type of female staff is available at PPAF health facilities?

- پی پی اے ایف کی صحت کے مراکز میں کسی قسم کا عملہ خواتین موجود ہے

a. Trained Birth Attendant/mid-wife تربیت یافتہ دائیاں	b. LHV's لیڈی ہیلتھ ورکر	c. Female Medical Technician فیملی میڈیکل ٹکنیشن	Lady Doctor لیڈی ڈاکٹر
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8. Are the medicines and equipment sufficient in the community health facilities by PPAF?

- کیا پی پی اے ایف کی کمیونٹی صحت کی سہولیات میں دوائیاں اور آلات کافی ہیں

- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

9. Are the services provided in the health facilities by PPAF appropriate for Children?

- کیا پی پی اے ایف کی فراہم کردہ صحت کی سہولیات میں بچوں کے لئے کافی ہیں

- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

10. How many visits you have made for the above-mentioned disease treatment in last one month?

- آپ نے پچھلے ایک ماہ میں اوپر بیان کردہ مرض کے علاج کے لئے کتنی بار کلینک کا رخ کیا؟

- a. 1 b. 2 c. 3 d. More than 3 تین سے زیادہ بار

11. How many visits you have made (approximately) for the above mentioned disease treatment during the last one year?

- آپ نے گزشتہ ایک سال میں اس مرض کے علاج کے لئے اوسطاً کتنی مرتبہ کلینک کا رخ کیا؟

12. How many of instances of diarrhea were experienced by household members in the past one year?

- آپ کے گھرانے میں گزشتہ ایک سال میں اسہال کے کتنے واقعات ہوئے

13. What do you think is the cause of this diarrhea?

- آپ کے خیال میں ڈائیریا کی کیا وجوہات ہیں

14. Do you feel better after receiving treatment?

- کیا آپ علاج کے بعد بہتری محسوس کر رہے ہیں

- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

15. How much time does it require to reach to the nearest medical facility in health institute?

- نزدیک ترین صحت کے مرکز تک پہنچنے میں کتنا وقت لگتا ہے؟

- a. Less than 15 minutes b. 15-30 minutes c. 31-60 minutes d. More than 60 minutes

16. How much you have to wait to attain medical facility in health institute?

- صحت کے مرکز میں علاج کرانے کے لئے کتنا انتظار کرنا پڑتا ہے

- a. Less than 15 minutes b. 15-30 minutes c. 31-60 minutes d. More than 60 minutes

پندرہ منٹ سے کم	پندرہ سے تیس منٹ	اکتیس سے ساٹھ منٹ	ساٹھ منٹ سے زیادہ	پندرہ منٹ سے کم	پندرہ سے تیس منٹ	اکتیس سے ساٹھ منٹ	ساٹھ منٹ سے زیادہ
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17. How much you have to pay (in rupees) on average per visit for treatment?

اوسطاً علاج کے لئے کتنی رقم ادا کرنا پڑتی ہے ایک دفعہ جانے پر؟

- a. Purchi fee _____ پرچی فیس
- b. Medicines _____ ادویات
- c. Medical tests _____ میڈیکل ٹیسٹ
- d. Any other (please mention) _____ دیگر (وضاحت کریں)

18. Did you find these health services useful?

آپ نے صحت کی سہولیات کو کیسا پایا؟

a. Useful _____ مفید	b. Not useful _____ غیر مفید
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18.1 If not useful/dis-satisfied, what was missing?

اگر آپ مطمئن نہیں ہیں تو کیا کمی موجود ہے

19. How much satisfied are you with the following health services?

آپ صحت کی سہولیات سے کس حد تک مطمئن ہیں؟

Description تفصیل	Extremely satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Availability of health staff ہیلتھ سٹاف کی دستیابی						
Quality of services خدمات کا معیار						
Availability of medicines ادویات کی دستیابی						
Working hours of health facilities صحت کی سہولیات کے کتنے گھنٹے						
Affordability قابل برداشت مصارف						

20. How do you define the behavior of following medical staff in PPAF supported health facilities?

پی پی اے ایف کی صحت کے مراکز میں موجود عملہ کے رویے کو آپ کس طرح بیان کریں گے

Description تفصیل	Excellent بہت اچھا	Good اچھا	Average اوسط درجہ	Poor کمزور	Very poor بہت کمزور
Doctor ڈاکٹر					
Mid-wife مڈ وائف					
LHVs لیڈی ہیلتھ وزیٹر					

Medical technician طبی ٹیکنیشن					
Dispenser ڈسپنسر					
Any other (Please mention) دیگر (وضاحت کریں)					

21. Did doctor/LHV in PPAF supported health facilities listen to your problem properly?

کیا ڈاکٹر / لیڈی ہیلتھ وزیٹر نے پی پی اے ایف کے مرکز میں آپ کے مسئلہ کو صحیح طرح سنا؟

a. Yes ہاں	b. No نہیں	c. Don't know معلوم نہیں
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22. How many household members received treatment at PPAF health facilities?

آپ کے گھرانے کے کتنے افراد نے پی پی اے ایف کی صحت کی سہولیات سے علاج کروایا؟

a. 1	b. 2	c. 3	d. 4	e. 5	f. More than 5
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23. Drinking water facility available in health facility?

کیا صحت کے مراکز پر پانی موجود ہے

a. Yes ہاں	b. No نہیں	c. Don't know معلوم نہیں
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24. Is toilet available in health facility?

کیا لیٹرین کی سہولت صحت کے مرکز میں موجود ہے

a. Yes ہاں	b. No نہیں	c. Don't know معلوم نہیں
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25. What is the waste disposal mechanism in health facility?

صحت کے مرکز میں کوڑا کرکٹ کے ضائع کرنے کا کون سا طریقہ موجود ہے

- a. Burning in incinerator غلازت کی بھٹی میں جلانا
- b. Open burning in air کھلی ہوا میں جلانا
- c. Open dumping کھلی فضاء میں کوڑا پھینکنا
- d. Burrowing دفن کرنا
- e. Don't Know معلوم نہیں

26. Please identify key challenges and constraints still exist in provision of health facilities by PPAF?

مہربانی فرما کر پی پی اے ایف کی فراہم کردہ صحت کی سہولیات میں موجود مشکلات کی نشاندہی کریں

Q12. How satisfied are you with provided irrigation facilities in terms of following?

آپ آبپاشی کی فراہم کردہ سہولیات سے کس حد تک مطمئن ہیں؟

Description تفصیل	Extremely Satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Increase in crop yield فصل کی پیداوار میں اضافہ						
Increase in irrigation area آبپاشی کی زمین میں اضافہ						
Crops Diversification فصلوں کا تنوع						
Reduced water losses پانی کے زیاں میں کمی						
Economic benefits معاشی فائدے						
Any other دیگر						

Q13. If you are not satisfied then what are the key reasons behind your dis-satisfaction?

اگر آپ مطمئن نہیں ہیں تو اس کی بنیادی وجوہات کیا ہیں؟

Q14. What is your or your household role in maintenance of irrigation facility?

آپ یا آپ کے گھرانے کا آبپاشی سہولیات کی بحالی میں کیا کردار ہے؟

- g. No role کوئی کردار نہیں
- h. Clearance of water channels پانی کے چینلوں کی صفائی
- i. Operating the water facility پانی کی سہولت کا عمل
- j. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں):

<p>Q15. Does any mechanism exists in your area/village regarding water distribution/rationing? پانی کی تقسیم / ذخیرہ سے متعلق آپ کے گاؤں میں کوئی طریقہ کار ہے؟ . Yes ہاں b. No نہیں</p> <p>Q15.1. If yes, what is the nature of water distribution mechanism? اگر ہاں، تو پانی کی تقسیم کا کیا طریقہ کار ہے؟ a. Verbal زبانی b. Written تحریری c. Any other دیگر</p>	<p>Q16. What are the key reasons for non-cultivable land? غیر استعمال شدہ زرعی زمین کی کیا وجوہات ہیں؟ a. Water scarcity پانی کی کمیابی b. Salinity کھاری پن c. Hilly land پہاڑی زمین d. Any other دیگر</p>
<p>Q17 Please identify key challenges and constraints still existing in provision of LACIP irrigation facilities? مہربان فرما کر ایل اے سی آئی کی آبپاشی کی سہولیات میں پائی جانے والی مشکلات اور رکاوٹوں کی نشاندہی کریں؟</p>	
<p>Q18. What are the key areas that can be incorporated where you prefer PPAF to focus in future for irrigation facilities? Please explain آپ کے خیال میں پی پی اے ایف کو مستقبل میں آبپاشی سہولیات میں کن پہلوؤں پر زور دینا چاہیے؟</p>	
<p>Q19. Any comments/suggestions you want to give? کوئی سی بھی آراء / تجاویز جو آپ دینا چاہتے ہیں؟</p>	

General Questions	
<p>1. Are you a member of any Operations and Maintenance Committees (operating under CO or VO of the area)? کیا آپ کسی انتظامی اور بحالی کمیٹی کے رکن ہیں i. Yes ہاں j. No نہیں</p>	<p>2. Do you pay any dues to O&M committees to ensure regular maintenance of the infrastructure provided under PPAF projects? کیا آپ انفراسٹرکچر کی تعمیر و ترقی کے لئے کمیٹیوں کو باقاعدگی سے رقم ادا کرتے ہیں؟ i. Yes ہاں j. No نہیں</p>
<p>3. How do you define the performance of project committees? آپ منصوبے کی کمیٹیوں کی کارکردگی کو کس طرح بیان کریں گے y. Very good بہت اچھی z. Good اچھی aa. Satisfactory اطمینان بخش bb. Not satisfactory غیر اطمینان بخش cc. Poor کمزور dd. Very poor بہت کمزور</p>	<p>4. Are trees cutting done during construction work? کیا تعمیراتی کام کے دوران کوئی درخت کاٹے گئے؟ i. Yes ہاں j. No نہیں</p> <p>5. Any mitigation measures taken against tree cutting? کیا درختوں کی کٹائی کے بچاؤ کے لئے کوئی عمل کیا گیا i. Yes ہاں j. No نہیں</p>

6. Which mitigation measures are taken against tree cutting? درختوں کی کٹائی سے بچاؤ کے لئے کون سی تدابیر اختیار کیں؟ m. New tree plantation شجر کاری n. Alteration in scheme design to avoid tree cutting کی درختوں کی کٹائی سے بچنے کے لئے متبادل سکیم کا اجراء o. Any other دیگر	7. What is the nature of land used for scheme / intervention? سکیم کے تحت زمین کی استعمال کی نوعیت کیا ہے؟ u. Donated عطیہ شدہ v. Rented کرایے پر w. Disputed متنازعہ x. Government سرکاری y. Any other دیگر
8. Is child labor involved in any construction activity? کیا تعمیراتی کام میں بچوں سے مشقت لی جاتی ہے؟ i. Yes ہاں j. No نہیں	9. Which issue of climatic change is facing by you or community? ماحولیاتی تبدیلی کے کن مسائل کا آپ یا آپ کے علاقے کو سامنا کرنا پڑا؟ q. Drought / less rain خشک سالی / کم بارشیں r. Floods سیلاب s. Earthquake زلزلہ t. Any other دیگر

Education

These questions to be asked from the parent/guardians and school children only and not from the teachers

<p>1. Are there any children in your household who are attending PPAF supported school?</p> <p>کیا آپ کے گھر کے بچے پی پی اے ایف کے تعاون سے چلنے والے اسکول جاتے ہیں</p> <p>a. Yes ہاں b. No نہیں</p>	<p>2. If yes, what is the type of school supported by PPAF wherein your children going for education?</p> <p>اگر ہاں ، تو کس قسم کے اسکول جاتے ہیں ؟</p> <p>a. Govt. Boys Primary School گورنمنٹ بوائز پرائمری سکول</p> <p>b. Govt. Girls Primary School گورنمنٹ گرلز پرائمری سکول</p> <p>c. Govt. Boys Middle School گورنمنٹ بوائز مڈل سکول</p> <p>d. Govt. Girls Middle School گورنمنٹ گرلز مڈل سکول</p> <p>e. Govt. Boys Secondary School گورنمنٹ بوائز سیکنڈری سکول</p> <p>f. Govt. Girls Secondary School گورنمنٹ گرلز سیکنڈری سکول</p> <p>g. PPAF Community School پی پی اے ایف کمیونٹی سکول</p> <p>h. Any Other کسی دوسرے</p>												
<p>3. How many children from your household are attending the schools?</p> <p>آپ کے گھر سے کتنے بچے سکول جاتے ہیں</p>													
<p>4. Are all your school going children age (5-16 years) enrolled in schools? If not, why?</p> <p>کیا پانچ سے سولہ سال والے سارے بچے آپ کے گھر سے سکول جاتے ہیں؟ اگر نہیں تو کیوں</p> <p>a. Yes ہاں b. No نہیں c. If not, why اگر نہیں تو کیوں؟ وضاحت کریں</p>	<p>5. How far is the PPAF school from your house?</p> <p>پی پی اے ایف کے تعاون سے چلنے والا سکول آپ کے گھر سے کتنے فاصلے پر ہے</p> <p>a. Less than 500 meter پانچ سو میٹر سے کم</p> <p>b. 1 km ایک کلو میٹر</p> <p>c. 2 km دو کلو میٹر</p> <p>d. 3 km تین کلو میٹر</p> <p>e. More than 3 km تین کلو میٹر سے زیادہ</p>												
<p>6. In which class your child/children is currently enrolled?</p> <p>آپ کے بچے کس جماعت میں پڑھتے ہیں</p> <table><tr><td>Child No.</td><td>Class جماعت</td><td>Child Gender (Boy or Girl) (لڑکا یا لڑکی)</td></tr><tr><td>1</td><td></td><td></td></tr></table>	Child No.	Class جماعت	Child Gender (Boy or Girl) (لڑکا یا لڑکی)	1			<p>7. What is the education level attained by child/children in your house?</p> <p>آپ کے گھر کے بچوں نے کتنی تعلیم حاصل کی ہے؟</p> <table><tr><td>Child No.</td><td>Level Attained درجہ حاصل کیا</td><td>Boy/Girl لڑکا / لڑکی</td></tr><tr><td></td><td></td><td></td></tr></table>	Child No.	Level Attained درجہ حاصل کیا	Boy/Girl لڑکا / لڑکی			
Child No.	Class جماعت	Child Gender (Boy or Girl) (لڑکا یا لڑکی)											
1													
Child No.	Level Attained درجہ حاصل کیا	Boy/Girl لڑکا / لڑکی											

2	1
3	2
4	3
5	4
	5

<p>8. How many level of education do you expect your child to complete? Give for girls and boys? آپ کیا امید کرتے ہیں کہ آپ کے بچے کتنا پڑھ لیں گے</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Boys</th> <th style="width: 50%;">Girls</th> </tr> <tr> <td>a. Primary پرائمری</td> <td>f. Primary پرائمری</td> </tr> <tr> <td>b. Middle مڈل</td> <td>g. Middle مڈل</td> </tr> <tr> <td>c. Secondary سیکنڈری</td> <td>h. Secondary سیکنڈری</td> </tr> <tr> <td>d. Higher Secondary/College ہائیر سیکنڈری / کالج</td> <td>i. Higher Secondary/College سیکنڈری / کالج</td> </tr> <tr> <td>e. University یونیورسٹی</td> <td>g. University یونیورسٹی</td> </tr> </table>	Boys	Girls	a. Primary پرائمری	f. Primary پرائمری	b. Middle مڈل	g. Middle مڈل	c. Secondary سیکنڈری	h. Secondary سیکنڈری	d. Higher Secondary/College ہائیر سیکنڈری / کالج	i. Higher Secondary/College سیکنڈری / کالج	e. University یونیورسٹی	g. University یونیورسٹی	<p>9. Does your child enjoy going to school? کیا آپ کا بچہ اسکول جانا پسند کرتا ہے؟ a. Yes ہاں b. No نہیں</p> <p>9.1 If not then why? اگر نہیں تو کیوں</p>
Boys	Girls												
a. Primary پرائمری	f. Primary پرائمری												
b. Middle مڈل	g. Middle مڈل												
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e. University یونیورسٹی	g. University یونیورسٹی												

<p>10. Is there corporal punishment in schools? کیا اسکول میں جسمانی سزا ملتی ہے</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">a. Yes ہاں</td> <td style="width: 33%;">b. No نہیں</td> <td style="width: 33%;">c. Don't know معلوم نہیں</td> </tr> </table>	a. Yes ہاں	b. No نہیں	c. Don't know معلوم نہیں	<p>11. Do schools have separate functional toilet facilities for girls and boys? کیا سکول میں لڑکے اور لڑکیوں کے علیحدہ لیٹرین ہے ؟ (قابل استعمال)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">a. Yes ہاں</td> <td style="width: 33%;">b. No نہیں</td> <td style="width: 33%;">c. Don't know معلوم نہیں</td> </tr> </table>	a. Yes ہاں	b. No نہیں	c. Don't know معلوم نہیں
a. Yes ہاں	b. No نہیں	c. Don't know معلوم نہیں					
a. Yes ہاں	b. No نہیں	c. Don't know معلوم نہیں					

<p>12. Does your child get breakfast at home before going to school? آپ کا بچہ گھر پر سکول جانے سے پہلے صبح ناشتہ کرتا ہے</p> <p>12.1 If yes, what do they eat? اگر ہاں، تو کیا کھاتا ہے</p>	<p>13. Are basic items (books, stationary, uniform) provided free of cost? کیا ضروری اشیاء (کتابیں، اسٹیشنری اور یونیفارم) مفت ملتے ہیں</p> <p>a. Yes ہاں b. No نہیں</p> <p>13.1 If yes, then which items are provided free of cost? اگر ہاں کون سی اشیاء مفت ملتی ہیں</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">a. Books کتابیں</td> <td style="width: 50%;">Stationary اسٹیشنری</td> </tr> </table>	a. Books کتابیں	Stationary اسٹیشنری
a. Books کتابیں	Stationary اسٹیشنری		

14. Do you have the affordability to meet the expenditure mentioned above?

کیا آپ اوپر بتائے ہوئے اخراجات کو برداشت کر لیتے ہیں

a. Yes ہاں b. No نہیں

c. Uniform یونیفارم

d. Water پانی

e. Any other (please mention): دیگر (وضاحت کریں):

13.2 If no, then how much you have to spend on following items per month?

اگر نہیں تو آپ کتنا ہر چیز پر خرچ کرتے ہیں

Description تفصیل	Expense (Montly) ماہانہ خرچ	Expense (Yearly) سالانہ خرچ
Books کتابیں		
Stationary سٹیشنری		
Uniform یونیفارم		
Transport نقل و حمل کی سہولت		

15. What is your level of satisfaction level with available facilities in the school?

آپ سکول کی طرف سے مندرجہ ذیل دستیاب شدہ سہولیات سے کتنا مطمئن ہیں

Description تفصیل	Extremely satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Accessibility رسائی						
Number of teachers اساتذہ کی تعداد						
Teacher performance اساتذہ کی کارکردگی						
Teacher attendance اساتذہ کی حاضری						
Availability of classrooms کمرہ جماعت کی دستیابی						
Availability of furniture in classrooms کمرہ جماعت میں فرنیچر کی دستیابی						
Availability of electricity بجلی کی دستیابی						
Classroom environment کمرہ جماعت کا ماحول						
Extracurricular activities غیر نصابی سرگرمیاں						
Provision of water پانی کی فراہمی						
Availability of latrines لیٹرین کی دستیابی						
Availability of play grounds کھیل کے میدان کی دستیابی						
Parent-teacher meeting والدین اور اساتذہ کی میٹنگ						
Any other دیگر						

16. If you are not satisfied, then what are key reasons behind your non-satisfaction?

اگر آپ مطمئن نہیں ہیں تو اس کے پیچھے اصل وجہ ہے؟

17. Are you a member of Parent Teacher School Committee?

کیا آپ اساتذہ اور والدین کی سکول کمیٹی کے رکن ہیں

a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

17.1 If yes, then do you attend committee meetings regularly?

اگر ہاں، تو آپ کمیٹی کی میٹنگ میں باقاعدگی سے جاتے ہیں

a. Yes ہاں b. No نہیں

18. Is there anyone from your household who is a member of Parent Teacher School Committee?

کیا آپ کے گھر سے کوئی اور فرد اساتذہ اور والدین کی کمیٹی کا رکن ہے

a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

19. Are students aware about hand washing practice before eating meals and after using toilet?

کیا ٹاءلٹ کے استعمال کے بعد اور کھانے سے پہلے طلبہ میں ہاتھ دھونے کا رجحان ہے؟

a. Yes ہاں b. No نہیں

20. What is the waste disposal mechanism in school?

سکول میں فضلات کو رفع کرنے کے لئے کیا طریقہ کار اپنایا جاتا ہے

a. Open dumping کھلی فضا میں پھینکنا

b. Kept in waste bins کوڑے دان میں رکھنا

c. Burning جلا دینا

d. Don't know معلوم نہیں

21. Is any plantation and cleanliness campaign conducted in school?

کیا سکول میں شجر کاری اور صفائی کی مہم ہوئی

a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

22. Do you provide any feedback to improve quality of education?

کیا آپ تعلیم کے معیار کو بلند کرنے کے لئے کوئی رائے دیتے ہیں

a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

22.1 If yes, does your feedback bring forth positive results?

اگر ہاں، کیا آپ کی رائے نے مثبت نتیجہ دیا

a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

23. Please identify key challenges and constraints still existing in provision of education facilities?

مہربانی فرما کر سکول میں درپیش اہم مشکلات اور رکاوٹوں کی نشاندہی کریں جو اب بھی تعلیمی سہولیات درکار ہیں

24. What are the key areas that can be incorporated where you prefer PPAF to focus in future for education? Please explain

وہ کون سے چیزیں ہیں جو پی پی اے اف تعلیم کے مستقبل کو بہتر بنانے کے لئے کر سکتا ہے؟

25. Any comments/suggestions you want to give

آپ کچھ اور بتانا چاہیں

<p>26. Did you receive any training from PPAF? کیا آپ نے پی پی اے ایف سے کوئی ٹریننگ حاصل کی a. Yes ہاں b. No نہیں</p> <p>26.1 If yes, in which area the training was received? اگر ہاں، تو کس موضوع پر ٹریننگ حاصل کی</p> <p>a. School as enterprise اسکول بطور ایک ادارہ b. Early childhood education بچے کی ابتدائی تعلیم c. School development plan اسکول کا ترقیاتی پروگرام d. Science subjects سائنس مضامین e. Environment improvement ماحولیاتی بہتری f. Disaster preparedness آفات سے بچاؤ کی تیاری g. Inclusive education جامع تعلیم h. Pedagogy علم تدریس</p>	<p>27. In your opinion, was the focus of PPAF on enhancing teachers' capacity through trainings in selected subjects was rightly placed? کیا آپ کی رائے میں پی پی اے ایف کی توجہ اساتذہ کی صلاحیت بڑھانے کے لئے ٹریننگ ٹھیک تھی</p> <p>a. Yes ہاں b. No نہیں</p>
<p>28. How did you find these trainings? آپ نے ان ٹریننگز کو کیسا پایا</p> <p>a. Useful مفید b. Not useful غیر مفید</p> <p>29. If useful, have you adopted these learned skills in classrooms? اگر مفید ہیں تو کیا آپ نے کمرہ جماعت میں اس کو استعمال کیا</p> <p>a. Yes ہاں b. No نہیں</p>	

Questionnaire for LACIP

Background: The project is mandated to work in institutional development as a foundation and creating an integrated approach towards development using the components of Small and Medium Infrastructure, Livelihood Enhancement and Protection (LEP), Health and Education (H&E) and Disaster Preparedness and Mitigation (DPM) in the 8 selected districts (Chitral, Buner, Swabi, Charsadda, D.I. Khan, Haripur, Nowshera and Abbottabad) of Khyber Pakhtunkhwa, Pakistan. Small and Medium Infrastructure is responding to the community basic needs and demands following the Community Driven Development approach. Small and Medium Infrastructure is responding to the community basic needs and demands following the Community Driven Development approach. 2,012 infrastructure projects (including 120 IAUPs) have been completed under LACIP-I in the eight target districts. Livelihood support is a major component in the project. Overall 8,759 productive assets (44% asset to women) have been transferred to ultra and vulnerable poor households (PSC 0-18) and 5,315 persons have received technical and vocational training (34% women). Overall 152 schools (151 government and 1 community school) were supported under LACIP-I that benefited 13,883 boys and 18,150 girls enrolled in those schools. While on health component side, overall 4 health centres were supported that benefited 76,760 patients including 9,955 men, 35,521 women and 29,284 children. Disaster Preparedness and Mitigation (DPM) is vital to the project that is not only mainstreaming Disaster Risk Reduction (DRR) in the small community infrastructure schemes but also enhancing capacities of communities to prepare for and cope with likely disasters.

Beneficiary sampled for:

1. Through which of the following LACIP supported interventions your household is being/has been benefitted:

A. Institutional Development
B. Livelihood Enhancement & Protection (LEP)
C. Community Physical Infrastructure
D. Disaster Preparedness and Management (DPM)
E. Health
F. Education

IDENTIFICATION شناخت

Name of respondent/beneficiary نام جواب دہندہ/ کا نام	CNIC Number شناختی کارڈ نمبر
Gender (Male/Female/Transgender) صنف (مرد/ عورت/ مخنث)	Contact Number (cell number preferable) رابطہ نمبر (سیل نمبر قابل ترجیح)
Date of Survey (DD/MM/YY) سروے کی تاریخ (دن/ ماہ/ سال)	Province صوبہ
Age عمر	
District ضلع	Tehsil تحصیل
Union Council یونین کونسل	Revenue Village مالیہ کا گاؤں
Settlement/Hamlet ڈیرہ	Interviewer Name سوال کنندہ کا نام

Section I (General) پہلا سیکشن (عمومی)

- Q1. What is your education status? (only tick a single choice) آپ کی تعلیم کیا ہے؟ (صرف ایک پر نشان لگائیں)

a. Primary پرائمری	f. Master's ماسٹرز
b. Middle مڈل	g. Never went to school سکول کبھی نہیں گیا۔
c. Metric میٹرک	h. Religious education/Madrassa/مدرسہ/مذہبی تعلیم
d. Intermediate انٹرمیڈیٹ	i. Any Other ((please mention): دیگر (مہربانی فرما کر وضاحت کریں)
e. Graduation گریجوایشن	

- Q2. What is your marital status (only tick a single choice) آپ کی ازدواجی حیثیت کیا ہے؟ (کسی ایک پر نشان لگائیں)

a. Single غیر شادی شدہ	d. Widowed بیوہ
b. Married شادی شدہ	e. Separated علیحدگی یافتہ
c. Divorced طلاق یافتہ	

- Q3. What is your occupation آپ کا پیشہ کیا ہے؟

a. Farming زراعت	j. Student طالب علم
b. Livestock مال مویشی	k. Looking for work کام کی تلاش
c. Fisheries مابی گیری	l. Housewife گھریلو خاتون
d. Agriculture (Wage Labour) (مزدور) زراعت	m. Retired ریٹائرڈ
e. Agriculture (self-employed/own land) (مالک/ اپنی زمین) زراعت	n. Small enterprise/grocery shop چھوٹا کاروبار / کریانہ
f. Government servant سرکاری ملازم	o. Services (tailor, carpenter, beauty parlor, driver, etc.) خدمات (درزی، ترکھان، بیوٹی پارلر، ڈرائیور وغیرہ)
g. Private employee نجی ملازم	p. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)
h. Farm home help (paid) (با معاوضہ) فارم کے کام میں مدد	
i. Farm Home help (unpaid) (بلا معاوضہ) فارم کے کام میں مدد	

- Q4. What is your household income level (including all sources) approximately (per month/in rupees)

آپ کی ماہانہ آمدنی کیا ہے؟ (تمام ذرائع سے) تقریباً (ماہانہ/ روپیوں میں)

a. 0-5,000 پانچ ہزار سے کم	e. 20,001-25,000 بیس ہزار ایک سے پچیس ہزار
b. 5,001-10,000 پانچ ہزار ایک سے دس ہزار	f. 25,001-30,000 پچیس ہزار ایک سے تیس ہزار
c. 10,001-15,000 دس ہزار ایک سے پندرہ ہزار	g. More than 30,000 تیس ہزار سے زیادہ
d. 15,001-20,000 پندرہ ہزار ایک سے بیس ہزار	

Q5. What is your house ownership status? آپ کے مکان کی ملکیت کی حیثیت کیا ہے؟

a. Own House اپنا گھر	d. Sharing حصہ داری
b. Rented کرایہ کا مکان	e. Free مفت
c. Subsidized رعایت یافتہ	f. Any other (Please mention): دیگر (مہربانی فرما کر وضاحت کریں)

Q6. What is your house structure? آپ کے مکان کی تعمیر کی نوعیت کیا ہے؟

a. Katcha کچا	b. Pakka پکا	c. Mixed ملا جلا
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Section A: Institutional Development

Q1. What type of community institution you are part of?

آپ کون سے کمیونٹی ادارے کا حصہ ہیں؟

- Female CO خواتین سی او
- Male CO مرد سی او
- Mix/Combine CO مشترکہ / ملے جلے سی او
- Female VO خواتین وی او
- Male VO مرد وی او
- Mix/Combine VO مشترکہ / ملے جلے وی او
- Male LSO مرد ایل ایس او
- Female LSO خواتین ایل ایس او
- Mix/Combine LSO مشترکہ / ملے جلے ایل ایس او

Q2. What is your status in Community Institution?

کمیونٹی ادارے میں آپ کی حیثیت کیا ہے؟

- General Body Member عام رکن
- Executive Body Member ایگزیکٹو رکن
- Manager منتظم
- President صدر
- Any other (Please mention): دیگر (وضاحت کریں)

Q3. Did you obtain any training regarding CI?

کیا آپ نے کمیونٹی ادارہ کے بارے میں کوئی تربیت حاصل کی ہے؟

- Yes ہاں
- No نہیں

Q3.1 If yes, in which area did the training belong to?

اگر ہاں، تو کس شعبہ میں؟

- Community Management Skills or leadership skills trainings (CMST and LMST) کمیونٹی مینجمنٹ مہارت یا قیادت کی مہارت کی (سی ایم ایس ٹی اور ایل ایم ایس ٹی) تربیت
- Financial Management فنانس مینجمنٹ
- Operation and Maintenance آپریشن اور دیکھ بھال
- Local Support Organization training as Apex Institution مقامی امدادی تنظیم کی تربیت ایکس انسٹی ٹیوٹ کے طور پر
- Disaster risk management آفات کے خطرہ کا انتظام
- Linkages development & resource mobilization رابطوں کی ترقی اور وسائل کی متحرک کاری
- Social mobilization and Record Keeping سماجی متحرک کاری اور ریکارڈ رکھنا
- Basic Civic and constitutional rights بنیادی شہری اور آئینی حقوق
- Value governance and management ویلیو گورننس اور انتظام
- Peace, pluralism and intern provincial harmony امن، اجتماعیت اور اندرونی صوبائی ہم آہنگی

Q4. In your opinion, was the focus of LACIP programme on enhancing capacity of community organizers through trainings in selected subjects was rightly placed?

آپ کی رائے میں، LACIP پروگرام کا مرکز ٹریننگ کے ذریعے کمیونٹی کے منتظمین کی صلاحیت کو بڑھانے کے بارے میں صحیح تھا؟

- Yes ہاں
- No نہیں

Q5. How did you find these trainings?

آپ نے ان تربیتوں کو کیسا پایا؟

- Useful مفید
- Not useful غیر مفید

Q6. If useful, have you adopted these learned skills in your everyday dealings with local communities?

اگر یہ مفید تھا، تو کیا آپ نے ان مہارتوں کو مقامی برادری کے ساتھ اپنے روزمرہ کے معاملات میں اپنایا ہے؟

- Yes ہاں
- No نہیں

k. Any other (Please mention): (دیگر وضاحت کریں):

Q7. If not useful, what was missing? What would you like to add in the training?

اگر مفید نہیں ہے، تو کیا کمی تھی؟ آپ تربیت میں کیا شامل کرنا چاہتے ہیں؟

Q8. Are you satisfied with the received training in terms of following components?

کیا آپ مندرجہ ذیل اجزاء کے لحاظ سے موصول شدہ تربیت سے مطمئن ہیں؟

Description تفصیل	Extremely satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Duration دورانیہ						
Venue مقام						
Trainer تربیت کنندہ						
Training contents تربیت کا اجراء						
Selection process انتخاب کا پراسس						

Q9. How the training has been helpful for you in terms of the following governance related dimensions?

آپ کے لئے تربیت مندرجہ ذیل سے کس طرح مددگار ثابت ہوئی ہے؟

Description تفصیل	Yes ہاں	No نہیں	Don't know معلوم نہیں
Attendance حاضری			
Accountability & transparency احتساب اور شفافیت			
Office bearer election عہدیداروں کا انتخاب			
Participatory decision making شراکتی فیصلہ سازی			
Frequency of meeting اجلاس کا تسلسل			
Any other (please mention) دیگر (مہربانی سے واضح کریں)			

Q 10. Did the training help to improve community management and leadership capacities of women CI members?

کیا تربیت نے کمیونٹی انسٹی ٹیوٹ کی خواتین اراکین کی کمیونٹی مینجمنٹ اور قیادت کی صلاحیت کو بہتر بنانے کے لئے مدد کی؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q 11. Did the training help to enhance women's role in community development?

کیا تربیت نے کمیونٹی کی ترقی میں خواتین کے کردار کو بڑھانے کے لئے مدد کی؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q 12. Did the training help to increase men's sensitization and awareness about importance of women's role in family decision making as well as community development?

کیا تربیت نے خاندان کی حساسیت اور کمیونٹی کی ترقی میں خواتین کے کردار کی اہمیت کے ساتھ ساتھ کمیونٹی کی ترقی میں مردوں کی حساسیت اور شعور کو بڑھانے کے لئے مدد کی؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q 13. Did the training help to improve record keeping?

کیا تربیت نے ریکارڈ رکھنے میں مدد کی؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q 14. Did the training help to develop linkages ensuring overall sustainability of CIs?

کیا تربیت نے کمیونٹی انسٹی ٹیوٹس کی مجموعی پائیداری کو یقینی بنانے کے سلسلے کو فروغ دینے میں مدد کی؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q 15. Did you create/develop any linkages in following areas?

کیا آپ نے مندرجہ ذیل شعبوں میں روابط تخلیق یا انہیں بڑھایا؟

Area	Yes ہاں	No نہیں
a. Municipal services میونسپل سروسز		
b. Local government لوکل گورنمنٹ		
c. District government ضلعی گورنمنٹ		
d. Government line agencies گورنمنٹ لائن ایجنسیز		
e. NGOs/Donors این جی اوز / ڈونرز		
f. Other دیگر		

Q 16. Do you think local communities have been empowered through formation/ strengthening of community institutes?

کیا آپ کو لگتا ہے کہ مقامی کمیونٹی کو کمیونٹی اداروں کے قیام / مضبوطی کے ذریعے بالاختیار بنایا گیا ہے؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q 17. How much successful are the interventions for local community empowerment?

مقامی برادری کو بالاختیار بنانے کے لئے مداخلت کتنی کامیاب ہے؟

- a. Extremely successful انتہائی کامیاب
b. Very successful بہت کامیاب
c. Somewhat successful کسی حد تک کامیاب
d. Somewhat unsuccessful کسی حد تک ناکام
e. Very unsuccessful بہت ناکام
f. Extremely unsuccessful انتہائی ناکام

Q 18. Do you think local women have been empowered through formation/ strengthening of community institutes?

کیا آپ کو لگتا ہے کہ مقامی خواتین کو کمیونٹی اداروں کے قیام / مضبوطی کے ذریعے بالاختیار بنایا گیا ہے؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q 19. How much successful were the project interventions for local women empowerment?

Q 20. How the interventions are useful for empowerment of local women?

مقامی خواتین کو باختیار بنانے کے لئے مداخلت کس طرح مفید ہیں؟

- l. Increased representation in the Executive Body of Village and Union Council Based Organization (LSO)
گاؤں اور یونین کونسل پر مبنی تنظیم (ایل ایس او) میں نما زندگی میں اضافہ
- m. Increased membership of women in community institutions .
کمیونٹی تنظیموں میں خواتین ارکان میں اضافہ
- n. Increased access to public services by women
خواتین کی فراہم کردہ عوامی خدمات
- o. Increased business/income generation activities by women.
خواتین کی کاروبار/ آمدن پیداوار کی سرگرمیوں میں اضافہ
- p. Increased value of women's work at family and community level
خاندان اور کمیونٹی کی سطح پر خواتین کے کام کی قدر میں اضافہ
- q. Improved decision making at household level
خانہ داری کے فیصلوں میں بہتری
- r. Improved decision-making community level Decrease in domestic and community level violence against women
کمیونٹی کی سطح پر خواتین کے خلاف تشدد میں کمی کے فیصلہ سازی میں بہتری

مقامی خواتین کو باختیار بنانے کے لئے منصوبے کی مداخلت کتنی کامیاب رہی؟

- a. Extremely successful انتہائی کامیاب
- b. Very successful بہت کامیاب
- c. Somewhat successful کسی حد تک کامیاب
- d. Somewhat unsuccessful کسی حد تک ناکام
- e. Very unsuccessful بہت ناکام
- f. Extremely unsuccessful انتہائی ناکام

Q 21. Do you actively participate/promote in community organization activities?

کیا آپ کمیونٹی تنظیم کی سرگرمیوں میں فعال طور پر شرکت یا انہیں فروغ دیتے ہیں؟

- a. Yes ہاں
- b. No نہیں

Q22. Do you help people in developing committees?

کیا آپ کمیٹیوں کو فروغ دینے میں لوگوں کی مدد کرتے ہیں؟

- a. Yes ہاں
- b. No نہیں
- c. Don't know معلوم نہیں

Q22.1. If yes, which area these committees belongs to?

اگر ہاں، تو کونسی کمیٹیوں سے ان کا تعلق ہے؟

- a. Health صحت
- b. Education تعلیم
- c. Disaster management آفات سے بچاؤ
- d. Infrastructure انفراسٹرکچر
- e. Livelihood support روزگار میں مدد
- f. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)

Q23. Please identify key challenges in social mobilization in your locality.

براہ کرم اپنے علاقے میں سماجی تحرک میں اہم مشکلات اور رکاوٹوں کی شناخت کریں

Q24. Please identify key challenges in mobilization and formation of women community organizations.

مہربانی فرما کر خواتین کمیونٹی تنظیموں کے قیام کو متحرک کرنے میں کلیدی چیلنجوں کی شناخت کریں۔

Q25. How many members of your households have NIC/CNIC?

آپ کے گھر والوں کے کتنے اراکین کے پاس قومی شناختی کارڈ ہیں

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

Q26. How many members of your households having NIC/CNIC are registered voters?

آپ کے گھر والوں کے قومی شناختی کارڈ کے کتنے ممبران رجسٹرڈ ووٹرز ہیں؟

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

Q27. How many registered voters of your households have casted vote in General Elections of 2018?

2018 کے عام انتخابات میں آپ کے خاندانوں کے کتنے رجسٹرڈ ووٹرز نے ووٹ ڈالا؟

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

Section B: Livelihood Enhancement and Protection

Q1. Did you receive training on vocational or technical skills?

کیا آپ نے پیشہ ورانہ یا تکنیکی مہارتوں پر تربیت حاصل کی ہے؟

- f. Yes ہاں
g. No نہیں

Q2. If yes, which vocational or technical skills training were provided to you/household and how satisfied you are? (Tick the relevant training only)

اگر ہاں، آپ / خاندان کو کون سی پیشہ ورانہ یا تکنیکی مہارت کی تربیت فراہم کی گئی تھی اور آپ کتنے مطمئن ہیں؟

	Extremely Satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Tailor made training for assets receipt اثاثوں کے وصولی کی تربیت						
Group Training گروپ ٹریننگ						
CIG/PC management سی آئی جی / پی سی مینجمنٹ						
CLF/Loan Center management training سی ایل ایف / لون سنٹر مینجمنٹ ٹریننگ						
Technical and Vocational skills training ٹیکنیکل اور ووکیشنل سکلز ٹریننگ						

Q2.1. How did you find these trainings? آپ نے ان تربیتوں کو کیسا پایا؟

- a. Useful مفید
b. Not useful غیر مفید

Q2.2. If useful, have you adopted these learned skills in your everyday dealings with local communities

اگر یہ مفید تھا، تو کیا آپ نے ان مہارتوں کو مقامی برادری کے ساتھ اپنے روزمرہ کے معاملات میں اپنایا ہے؟

- a. Yes ہاں
b. No نہیں

Q2.3. If not useful, what was missing? What would you like to add in the training syllabus?

اگر مفید نہیں ہے، تو کیا کمی تھی؟ آپ تربیت میں کیا شامل کرنا چاہتے ہیں؟

Q3. Are you satisfied with the received training under LEP in terms of following dimensions?

کیا آپ مندرجہ ذیل پہلو میں LEP کے تحت موصول شدہ تربیت سے مطمئن ہیں؟

Description تفصیل	Extremely Satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Duration دورانیہ						
Venue مقام						
Trainer تربیت کنندہ						
Training contents تربیت کے اجزا						
Selection process انتخاب کا طریقہ کار						

Q4. Does the training help in increasing your earnings?

کیا آپ کی آمدنی میں اضافہ میں تربیت نے مدد کی ہے؟

- d. Yes ہاں
e. No نہیں

Q4.1 If yes, by which percentage the monthly earnings increase?

اگر ہاں، کتنے فی صد سے ماہانہ آمدنی میں اضافہ ہوا ہے؟

- a. 0-5 پانچ
b. 5-10 پانچ سے دس
c. 10-15 دس سے پندرہ
d. 15-20 پندرہ سے بیس
e. 20% سے زیادہ More than 20%

Q5. Does the training help in increasing women empowerment?

کیا خواتین کو باختیار بنانے میں تربیت نے مدد کی ہے؟

- a. Yes ہاں
b. No نہیں

Q5.1. Are you utilizing the knowledge from your trainings in your daily work?

کیا آپ اپنے روزانہ کام میں تربیت کا علم استعمال کر رہے ہیں؟

- a. Yes ہاں
b. No نہیں

<p>Q4.2 Where the increased earnings were spent most? اضافی آمدنی زیادہ تر کہاں خرچ کی گئی؟</p> <p>a. Food خوراک b. Education تعلیم c. Health صحت d. Energy توانائی e. Any other (please mention): دیگر (مہربانی سے وضاحت کریں):</p> <p>Q4.3 Does the training help in establishing your own enterprise? کیا آپ کی اپنا کاروبار قائم کرنے میں تربیت نے مدد کی ہے؟</p>	<p>Q6. Has the training helped you start or improve on your business? کیا تربیت نے آپ کے کاروبار شروع یا بہتر بنانے میں مدد کی ہے؟</p> <p>a. Yes ہاں b. No نہیں</p> <p>Q7. Was your husband supportive of you receiving the training? کیا آپ کا شوہر آپ کے تربیت حاصل کرنے میں معاون تھا؟</p> <p>a. Yes ہاں b. No نہیں</p>
<p>Q8. After training does your husband or other family members involved in the business follow your advice? تربیت کے بعد کیا آپ کے شوہر یا خاندان کے دیگر ممبران جو کاروبار میں ملوث ہوتے ہیں وہ آپ کے مشورہ پر عمل کرتے ہیں؟</p> <p>d. Yes ہاں e. No نہیں</p>	<p>Q9. Does economic empowerment increase your decision-making power within the household? کیا اقتصادی استحکام آپ کے گھر میں آپ کے اندر فیصلہ کرنے کی طاقت میں اضافہ کرتا ہے؟</p> <p>a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں</p>
<p>Q10. Which training/s do you want to attain in future? مستقبل میں کونسی تربیت حاصل کرنا چاہتی ہیں؟</p> <p>a. b. c.</p>	
<p>Q12. Did you receive any asset under LEP? کیا آپ نے LEP کے تحت کوئی اثاثہ حاصل کیا؟</p> <p>a. Yes ہاں b. No نہیں</p> <p>Q12.1. If yes, which asset was provided to you/household? اگر ہاں، آپ کے گھر کو کونسا اثاثہ فراہم کیا گیا تھا؟</p> <p>a. Livestock (cow, goats, Sheep, bull, Buffalo etc.) مال مویشی، (گا گائے، بکریاں، بھیڑیں، بھینس، بھینس وغیرہ) b. Trading (grocery store, cloth shop, electric store etc.) تجارت (کریانہ، کپڑے کی دکان، الیکٹریک سٹور وغیرہ) c. Services (cycle repair, barber shop, tailoring shop, auto mechanic etc.) خدمات (سائیکل مرمت، حجام، درزی خانہ، آٹو مکینک وغیرہ)</p>	<p>Q11. Did you take loan for employment/enterprise purpose? کیا آپ نے روزگار / کاروبار کے مقصد کے لئے قرض لیا تھا؟</p> <p>a. Yes ہاں b. No نہیں</p> <p>Q11.1. If yes, how productive was the loan? اگر ہاں، قرض کس طرح مؤثر تھا؟</p> <p>a. Extremely productive انتہائی مؤثر b. Very productive بہت مؤثر c. Somewhat productive کسی حد تک مؤثر d. Somewhat unproductive کسی حد تک غیر مؤثر e. Very unproductive بہت غیر مؤثر f. Extremely unproductive انتہائی غیر مؤثر</p>

- d. Production (bakery, food items, sewing machines, cement for block making etc.) پیداوار (بیکری، خرد و نوش کی اشیاء، سلائی مشین، بلاک بنانے کے لئے سیمنٹ وغیرہ)
- e. Transport (motorcycle, auto/chingchi rickshaw, donkey/horse cart, hand cart etc.) ذرائع نقل و حمل (موٹر / آٹو/چنگچی ریکشا، گدھا / گھوڑا گاڑی، ہتھ رپڑا وغیرہ)

Q13. How satisfied are you with the provided asset in terms of following components?

مندرجہ ذیل اجزاء کے مطابق فراہم شدہ اثاثہ سے آپ کتنے مطمئن ہیں؟

Description تفصیل	Extremely Satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Type of asset اثاثہ کی اقسام						
Quality of asset اثاثہ کا معیار						
Usefulness of asset provided اثاثہ کی افادیت						
Involvement in procurement process خریداری کے عمل میں شراکت						
Any other دیگر						

Q14. Were you informed about status of vaccination in case livestock transferred by PPAF?

کیا آپ PPAF کے مویشیوں کے لئے منتقل ہونے والے ویکسین کی حیثیت کے بارے میں آگاہ تھے؟

- a. Yes ہاں
- b. No نہیں

Q15. Was the asset helpful in increasing income level of household?

کیا اثاثہ گھریلو آمدنی کی سطح میں اضافہ میں مددگار تھا؟

- a. Yes ہاں
- b. No نہیں

Q15.1. If yes, average approximate increase in HH income (Rs./month) due to asset transferred?

اگر ہاں، منتقل شدہ اثاثہ کی وجہ سے ماہانہ گھریلو آمدنی اوسط تخمینہ کتنی بڑھتی ہے۔

- a. 0-2000 دو ہزار
- b. 2001-4000 ایک سے چار ہزار
- c. 4001-6000 چھ ہزار ایک سے چھ
- d. 6001-8000 آٹھ ہزار ایک سے آٹھ
- e. 8001-10000 دس ہزار ایک سے دس
- f. More than 10000 دس ہزار سے زیادہ

Q16. Did any increase in asset base takes place due to provision of productive asset?

پیداواری اثاثے کی فراہمی کے باعث اثاثہ کی بنیاد میں کوئی اضافہ ہوا؟

- a. Yes ہاں
- b. No نہیں

Q18. Is child labor involved in any LEP activity? کیا بچوں سے مشقت لینا کسی بھی LEP سرگرمی میں شامل ہے؟ a. Yes ہاں b. No نہیں	Q17. Are you aware about expiry dates on eatable and non-eatable items being sold on supported by PPAF grocery shops? کیا آپ PPAF کی دکانوں پر فروخت ہونے والے کھانے اور غیر خردہ اشیاء پر ختم ہونے کی تاریخوں کے بارے میں آگاہ ہیں؟ a. Yes ہاں b. No نہیں c. Don't Know معلوم نہیں
Q19. Please identify key challenges and constraints still existing in provision of LEP facilities? براہ کرم LEP سہولیات کی فراہمی میں موجودہ مشکلات اور رکاوٹوں کی شناخت کریں۔	
Q20. What are the key areas that can be incorporated where you prefer PPAF to focus in future for livelihood enhancement and protection? Please explain مستقبل میں روزگار میں اضافے کے لئے PPAF کن کلیدی شعبوں پر اپنی توجہ مبذول کریں گے؟ وضاحت کریں	
Q21. Any comments/suggestions you want to give? کوئی سی بھی آراء / تجاویز جو آپ دینا چاہتے ہیں؟	

Section C (Community Physical Infrastructure)

Beneficiary Sampled for

Sampled for	CPI Components
	Drinking Water Supply Schemes
	Irrigation
	Roads and Bridges
	Drainage and Sanitation
	Delay Action Dam
	Flood Protection Wall
	Integrated Area Upgradation Projects

**Section C: Community Physical Infrastructure
Drinking Water Supply Schemes**

Q1. Which type of water scheme/s your household is currently being benefitted?

آپ کے گھرانے نے پانی کی کون سی سکیم سے فائدہ حاصل کیا ہے؟

- f. Drinking water supply scheme (tap) پینے کے پانی کی فراہمی سکیم
- g. Water storage tank واٹر سٹوریج ٹینک
- h. Solar drinking water supply scheme سولر پینے کے پانی کی سپلائی کی سکیم
- i. Hand Pump ہتھ نلکا
- j. Any Other (Please mention)-----دیگر (وضاحت کریں)

Q2. Do you have water tap in your house?

کیا آپ کے گھر میں پانی کا نلکا ہے؟

- a. Yes ہاں
- b. No (go to Q3) نہیں (سوال نمبر تین پر جائیں)

Q3. If no, then is there any water connection near your house?

اگر نہیں، تو کیا آپ کے گھر کے پاس پانی کا کوئی کنکشن ہے؟

- a. Yes ہاں
- b. No نہیں

Q4. Do you get regular water supply through tap?

کیا آپ کو نلکے کے ذریعے مسلسل پانی ملتا ہے؟

- a. Yes ہاں
- b. No نہیں

Q5. If water connection is not at home then who fetches water for family every day?

اگر گھر پر پانی کا کنکشن نہیں ہے تو خاندان میں سے کون روز پانی بھر کر لاتا ہے؟

- a. Women خواتین
- b. Girls لڑکیاں
- c. Boys لڑکے
- d. Children بچے
- e. Men مرد
- f. Both women and men مرد اور خواتین دونوں
- g. Both boys and girls لڑکے اور لڑکیاں دونوں

Q6. What was the main source of water prior to the LACIP provided scheme?

آپ (ایل اے سی آئی پی) سکیم سے پہلے پانی کس ذریعہ سے حاصل کرتے تھے؟

- a. Nearby lake قریبی جھیل
- b. Tube well ٹیوب ویل
- c. Hand pump (ہتھ نلکا) ہینڈ پمپ
- d. Water tanker پانی کا ٹینکر
- e. Water filtration plant واٹر فلٹریشن پلانٹ
- f. Any other (please mention): دیگر (وضاحت کریں)

Q7. How far was the previous water source?

پانی کتنی دور سے لانا پڑتا ہے؟

- a. Just next to house گھر کے بالکل قریب سے
- b. Less than 500 meter پانچ سو میٹر سے کم فاصلے سے
- c. More than 500 meter but less than 1 KM پانچ سو میٹر سے زیادہ اور 1 KM ایک کلو میٹر سے کم فاصلے سے
- d. 1-2 KM ایک سے دو کلو میٹر سے
- e. More than 2 KM دو کلو میٹر کے زائد فاصلے سے

Q8. How far is the current nearest water source to bring the water for household consumption?

گھریلو استعمال کے لئے موجودہ قریب ترین پانی کا ذریعہ کتنے فاصلے پر ہے؟

- a. Just next to house گھر کے بالکل قریب سے
- b. Less than 500 meter پانچ سو میٹر سے کم فاصلے سے
- c. More than 500 meter but less than 1 KM پانچ سو میٹر سے زائد اور 1 KM ایک کلو میٹر سے کم فاصلے سے
- d. 2 KM دو کلو میٹر سے
- e. More than 3 KM تین کلو میٹر سے زائد

Q9. Who spends more time in storing and fetching water for household consumption?

گھریلو استعمال کے لئے پانی لانے اور ذخیرہ کرنے پر کون زیادہ وقت صرف کرتا ہے؟

- a. Women خواتین
- b. Men مرد
- c. Girls لڑکیاں
- d. Boys لڑکے

Q10. Do you have water storage facility in your house?

کیا آپ کے گھر میں پانی ذخیرہ کرنے کی سہولت موجود ہے؟

- a. Yes ہاں
- b. No نہیں

Q10.1. If no, how do you ensure water storage (especially in summers)

اگر نہیں، تو آپ پانی کس طرح ذخیرہ کرتے ہیں؟ (خاص طور پر موسم گرما میں)

Q11. How drinking water schemes are benefiting you in following areas

پانی کی سکیمیں آپ کو مندرجہ ذیل میں سے کس طرح فائدہ پہنچا رہی ہیں؟

Description تفصیل	Yes ہاں	No نہیں	Don't know معلوم نہیں
Saving time in fetching water پانی لانے میں وقت کی بچت			
Reduced physical labor جسمانی مشقت میں کمی			
Income saving آمدن میں بچت			
Ensure water availability پانی کی یقینی فراہمی			
Availability of Clean drinking water پینے کے صاف پانی کی فراہمی			
Less Water borne diseases پانی سے لگنے والی بیماریوں میں کمی			
Less expenditures on health صحت پر اٹھنے والے کم اخراجات			
Any other دیگر			

Q12. How satisfied are you with the provided LACIP water facilities?

آپ ایل اے سی آئیپی کی فراہم کردہ پانی کی سہولیات سے کس حد تک مطمئن ہیں؟

Description تفصیل	Extremely Satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Quality of water پانی کا معیار						
Accessibility رسائی						
Regular supply of water پانی کی باقاعدہ فراہمی						
Distance to be covered فاصلے کی کمی						
Timing وقت کی بچت						
Operation & maintenance پانی کے حصول کے لئے عملی اقدام اور اس کی برقراری						
Any other دیگر						

Q13. If you are not satisfied then what are the key reasons behind your dis-satisfaction

اگر آپ مطمئن نہیں ہیں تو اس کے پیچھے کون سی وجوہات ہیں؟

Q14. Do you boil your water daily before drinking?

کیا آپ اپنے پینے کے پانی کو روزانہ استعمال سے پہلے ابالتے ہیں؟

- a. Yes ہاں
b. No نہیں

Q15. How much are you paying (in rupees per month) for LACIP provided water supply scheme facility?

آپ اہل اے سی آئی پی کی فراہم کردہ پانی کی سہولیات کے لئے کتنی رقم ادا کر رہے ہیں؟

- a. Rs. 0-100 ایک سو روپے
- b. Rs. 101-200 ایک سو ایک سے دو سو تک
- c. Rs. 201-300 دو سو ایک سے تین سو تک
- d. Rs. 301-400 تین سو ایک سے چار سو تک
- e. Rs. More than 400 چار سو سے زیادہ

Q16. Please identify key challenges and constraints still existing in provision of water supply scheme facility?

مہربانی فرما کر پانی کی سکیموں میں موجود مشکلات اور رکاوٹوں کی نشاندہی کریں؟

Q17. What are the key areas that can be incorporated where you prefer PPAF to focus in future for water? Please explain

آپ کے خیال میں پی پی اے ایف کو مستقبل میں پانی کے حوالے سے کن پہلوؤں پر زور دینا چاہئے؟

Q18. Any comments/suggestions you want to give

آپ کوئی بھی آراء / تجاویز دینا چاہتے ہیں؟

Section C: Community Physical Infrastructure Irrigation

<p>Q1. What type of irrigation schemes develop by PPAF in your area/village? آپ کے علاقے/گاؤں میں پی پی اے ایف نے آبپاشی کی کون سی سکیمیں بنائی ہیں؟</p> <p>c. Irrigation channel آبپاشی چینل d. Pipe Irrigation آبپاشی پائپ e. Water course Lining واٹر کورس لائننگ f. Pumps and water storage reservoir پمپ اور پانی کا ذخیرہ g. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں):</p>	<p>Q2. How many acres of agriculture land do you have? آپ کے پاس کتنے ایکڑ زرعی زمین ہے؟</p>
<p>Q3. Are you a tenant or land owner? کیا آپ مزارعہ ہیں یا زمین کے مالک؟</p> <p>c. land owner مالک d. tenant مزارعہ</p>	<p>Q4. Do you have legal entitlement (papers) of the land? کیا آپ کے پاس زمین کے قانونی کاغذات ہیں؟</p> <p>c. Yes ہاں d. No نہیں</p>
<p>Q5. Who owns the land in your house (Men, Women) آپ کے گھر میں زمین کس کی ملکیت ہے (مرد، خواتین)</p> <p>a. Men مرد b. Women خواتین</p>	<p>Q6. How much do you pay to the landlord (if tenant)? In cash or kind آپ زمین کے مالک کو کتنی رقم ادا کرتے ہیں؟</p> <p>a. Cash (PKR) نقد رقم (روپے) b. Kind قسم</p>
<p>Q7. Does the women of your household work in the agriculture fields? کیا آپ کے گھر کی خواتین کھیتوں میں کام کرتی ہیں؟</p> <p>a. Yes ہاں b. No نہیں</p>	<p>Q8. How water is directed towards your field? آپ کے کھیتوں میں پانی کس ذریعہ سے آتا ہے؟</p> <p>a. Lined water course پختہ پانی کا کھالا b. Unlined water course نا پختہ پانی کا کھالا c. Pipes پائپس d. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں):</p>
<p>Q9. Does any water wastage still take place in provided PPAF irrigation schemes? کیا پی پی اے ایف کی آبپاشی سکیموں میں ابھی بھی پانی کا زیاں ہوتا ہے؟</p> <p>a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں</p> <p>Q9.1. If yes, how this water wastage is affecting your field activities? اگر ہاں۔ تو پانی کا زیاں آپ کے کھیتوں کو کس طرح متاثر کرتا ہے؟</p> <p>a. Loss of water پانی کا نقصان b. Loss of time وقت کا نقصان c. Loss of irrigated area آبپاشی شدہ علاقے کا نقصان d. Loss in production پیداوار میں نقصان e. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں):</p>	<p>Q10. How much are you paying monthly fee for water facility? آپ پانی کی سہولت کے لئے ماہانہ کتنی رقم ادا کرتے ہیں؟</p> <p>Q10.1. If yes, what is the basis for the payment? اگر ہاں، تو رقم ادا کرنے کی نوعیت کیا ہے؟</p> <p>a. Per hour فی گھنٹہ b. Per acre فی ایکڑ c. Per crop فی فصل d. Per month ماہانہ</p>

Q11. Have irrigation schemes lowered the ground water table in your village?

کیا آبپاشی کی وجہ سے آپ کے گاؤں میں زیر زمین پانی کی سطح کم ہوئی ہے؟

- a. Yes ہاں
b. No نہیں

Q12. How satisfied are you with provided irrigation facilities in terms of following?

آپ آبپاشی کی فراہم کردہ سہولیات سے کس حد تک مطمئن ہیں؟

Description تفصیل	Extremely Satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Increase in crop yield فصل کی پیداوار میں اضافہ						
Increase in irrigation area آبپاشی کی زمین میں اضافہ						
Crops Diversification فصلوں کا تنوع						
Reduced water losses پانی کے زیاں میں کمی						
Economic benefits معاشی فائدے						
Any other دیگر						

Q13. If you are not satisfied then what are the key reasons behind your dis-satisfaction?

اگر آپ مطمئن نہیں ہیں تو اس کی بنیادی وجوہات کیا ہیں؟

Q14. What is your or your household role in maintenance of irrigation facility?

آپ یا آپ کے گھرانے کا آبپاشی سہولیات کی بحالی میں کیا کردار ہے؟

- a. No role کوئی کردار نہیں
b. Clearance of water channels پانی کے چینلوں کی صفائی
c. Operating the water facility پانی کی سہولت کا عمل
d. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)

Q15. What mechanism exists in your area/village regarding water distribution/rationing?

پانی کی تقسیم / ذخیرہ سے متعلق آپ کے گاؤں میں کوئی طریقہ کار ہے؟

Q16. If yes, what is the nature of water distribution mechanism?

اگر ہاں، تو پانی کی تقسیم کا کیا طریقہ کار ہے؟

Q17. What are the key reasons for non-cultivable land?

غیر استعمال شدہ زرعی زمین کی کیا وجوہات ہیں؟

Q18. Please identify key challenges and constraints still existing in provision of LACIP irrigation facilities?

مہربان فرما کر ایل اے سی آئی کی آبپاشی کی سہولیات میں پائی جانے والی مشکلات اور رکاوٹوں کی نشاندہی کریں؟

Q19. What are the key areas that can be incorporated where you prefer PPAF to focus in future for irrigation facilities?

Please explain

آپ کے خیال میں پی پی اے ایف کو مستقبل میں آبپاشی سہولیات میں کن پہلوؤں پر زور دینا چاہئے؟

Q20. Any comments/suggestions you want to give

آپ کوئی بھی آراء / تبصرہ دینا چاہتے ہیں؟

Section C: Community Physical Infrastructure
Roads and Bridges

Q1. What type of repair/maintenance work carried out in your locality?

- آپ کے علاقے میں مرمت/ بحالی کا کس قسم کا کام کیا گیا ہے؟
- e. Bridge پل
f. Link road رابطہ سڑک
g. Retaining wall سہارا دینے والی دیوار
h. Trail path/foot tracks پیادل چلنے کا راستہ
i. Culvert پلیاں
j. Causeway کازوے
k. Any other (please mention):----- دیگر (وضاحت کریں)

Q2. In which capacity you are utilizing the above-mentioned intervention?

- آپ کس حیثیت میں اس منصوبے سے فائدہ حاصل کر رہے ہیں؟
- a. Primary route بنیادی راستہ
b. Secondary route ثانوی راستہ

Q3. How you were assessing following services before construction/ maintenance of LACIP road/bridge?

آپ ایل اے سی آئی پی پروگرام کے سڑک/ پل بنانے سے پہلے مندرجہ ذیل خدمات کا کیسے رسانی کر رہے تھے؟

Services خدمات	On foot پیادل	Bicycle/animal با نیسکل/ جانور	Public transport عوامی ذرا ئع نقل و حمل	Motorcycle موٹر سا نیکل	4 public wheel بسیں و غیرہ	Not applicable غیر متعلقہ
Water پانی						
General store جنرل سٹور						
Assessing public transport عوامی ذرا ئع نقل و حمل تک رسانی						
School سکول						
Hospital ہسپتال						
Assessing government department گورنمنٹ محکموں تک رسانی						

Q4. How you are assessing following services after construction/ maintenance of LACIP provided road/bridge?

آپ ایل اے سی آئی پی پروگرام کے سڑک/ پل بنانے کے بعد مندرجہ ذیل خدمات تک کیسے رسانی کر رہے تھے؟

-Services خدمات	On foot پیادل	Bicycle/animal با نیسکل/ جانور	Public transport عوامی ذرا ئع نقل و حمل	Motorcycle موٹر سا نیکل	4 public wheel بسیں و غیرہ	Not applicable غیر متعلقہ
Water پانی						
General store جنرل سٹور						
Assessing public transport عوامی ذرا ئع نقل و حمل تک رسانی						
School سکول						
Hospital ہسپتال						
Assessing government department گورنمنٹ محکموں تک رسانی						

Q5. How much time (in minutes) required to access following services before and after LACIP provided road/bridge?

LACIP پروگرام کے تحت مندرجہ ذیل خدمات تک پہلے اور بعد رسائی میں کتنا وقت درکار ہوتا ہے (منٹوں میں)

Services	Before پہلے	After بعد	Change in time وقت میں تبدیلی
Water پانی			
General store جنرل سٹور			
Assessing public transport عوامی ذرائع نقل و حمل تک رسائی			
School سکول			
Hospital ہسپتال			
Assessing government department گورنمنٹ محکموں تک رسائی			

Q6. What impact scheme has created on following categories?

مندرجہ ذیل اقسام پر سکیم کے کیا اثر ڈالا؟

Services خدمات	Increase اضافہ	Decrease کمی	Remain same وہی
Income آمدن			
Farm output فارم کی پیداوار			
Access to education تعلیم تک رسائی			
Access to health صحت تک رسائی			
Leisure time فارغ وقت			
Timely access of services خدمات کی وقت پر رسائی			

Q7. Any comments/suggestions you want to give?

آپ کوئی بھی آراء / تبصرہ دینا چاہیں؟

**Section C: Community Physical Infrastructure
Drainage and Sanitation**

Q1. What type of sanitation facilities developed under CPI in your area?

آپ کے علاقے میں نکاسی آب کی کون سی سہولتیں موجود ہیں مندرجہ ذیل سے بتائیں؟

- c. Drainage نکاسی آب
d. Sewerage system زیر زمین نکاسی آب
e. Community latrines برادری کی سطح پر لیٹرین
f. Household latrines گھریلو لیٹرین
g. Any other دیگر

Q2. What is the nature of drains constructed by PPAF?

پی پی اے ایف نے کس قسم کے نکاسی آب تعمیر کئے ہیں؟

- a. Covered ڈھاکے ہوئے
b. Uncovered کھلے
c. Pakka پکا
d. Kacha کچا

Q3. If community latrines, what is the fee per visit (in rupees)?

اگر آپ کمیونٹی/برادری کی سطح پر لیٹرین استعمال کرتے ہیں تو ایک دفعہ جانے پر کتنی رقم دیتے ہیں؟

- a. 10 دس
b. 15 پندرہ
c. 20 بیس
d. 25 پچیس
e. 30 تیس
f. More than 30 تیس سے زیادہ
g. No fee at all بغیر رقم دینے کے

Q4. What is the satisfaction level with the community latrines in following components?

برادری کی سطح پر/کمیونٹی لیٹرین کے متعلق مندرجہ ذیل عناصر سے آپ کتنے مطمئن ہیں؟

Description تفصیل	Extremely satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک غیر مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Water پانی						
Cleanliness صفائی						
Maintenance بحالی						
Operational timing استعمال کا وقت						
Number of latrines لیٹرین کی تعداد						
Accessibility رسائی						
Safe Space محفوظ جگہ						
Any other دیگر						

Q5. Do you play any part in cleanliness/ maintenance of community latrines?

کیا آپ صفائی یا بحالی کے لئے کوئی کردار ادا کر رہے ہیں؟

- a. Yes ہاں
b. No نہیں

Q6. Do women regularly use these community latrines?

کیا خواتین کمیونٹی لیٹرین باقاعدگی سے استعمال کرتی ہیں؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q7. If No, then what are the reasons that women are not using these community latrines?

اگر نہیں، تو اس کی کیا وجوہات ہیں؟

Q8. Are you satisfied with the provided sanitation facilities?

کیا آپ ناکاسی آب کی فراہم کردہ سہولتوں سے مطمئن ہیں؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q9. What kind of change do you observe after provided sanitation facilities?

ناکاسی آب کی سہولتوں کی فراہمی کے بعد آپ مندرجہ ذیل عناصر میں کیا تبدیلی محسوس کرتے ہیں؟

Description تفصیل	Yes ہاں	No نہیں	Don't know معلوم نہیں
Cleanliness صفائی			
Disease control بیماری پر قابو			
Economic benefits معاشی فوائد			
Any other دیگر			

Q10. What kind of problems do you or community face due to poor sanitation?

خراب ناکاسی آب کی وجہ سے آپ کو یا علاقے کو کن رکاوٹوں اور مشکلات کا سامنا کرنا پڑتا ہے؟

Q11. What is the cleanliness mechanism of sanitation lines?

ناکاسی آب کی صفائی کا کیا انتظام ہے؟

- a. Personally ذاتی طور پر
b. Collectively مجموعی طور پر
c. Municipal authority کمیٹی اتھارٹی
d. Any other دیگر

Q12. Which method is adopted in your village for waste/garbage disposal?

آپ کے گاؤں میں کوڑا کرکٹ کو رفع کرنے کا کیا طریقہ کار ہے؟

- a. Garbage/waste collection by municipal authority میونسپل کمیٹی کوڑا کرکٹ اکٹھا کرتی ہے
b. Disposal at dumping point in the village گاؤں کے اندر کوڑا کرکٹ ڈالنے کی جگہ
c. Burning جلا کر
d. Openly dumped کھلا جگہ میں پھینکا
e. Any other دیگر

Q13. Please identify key challenges and constraints still existing in provision of drainage/sanitation/community latrines facilities?

آپ کو ناکاسی آب / کمیونٹی لیٹرین کی سہولیات میں کس قسم کی رکاوٹوں اور مشکلات کا سامنا کرنا پڑتا ہے؟

Q14. What are the key areas that can be incorporated where you prefer PPAF to focus in future for drainage/sanitation/community latrines? Please explain

آپ کے خیال میں پی پی اے ایف کو مستقبل میں ناکاسی آب / کمیونٹی لیٹرین کی سہولت کے لئے کن پہلوؤں پر غور کرنا چاہئے؟ مہربانی فرما کر وضاحت کریں

Q15. Any comments/suggestions you want to give

کوئی بھی آراء/ تجاویز آپ دینا چاہیں گے

Section C: Community Physical Infrastructure
Delay Action Dams

Q1. How many Delay Action Dams (DADs) are constructed in your locality?

آپ کے علاقے میں کتنے تاخیری ڈیمز بنائے گئے ہیں؟

- e. 1
- f. 2
- g. 3
- h. More than 3 تین سے زیادہ

Q2. How does the construction of DAD help you/your locality?

تاخیری ڈیم نے آپ/آپ کے علاقے کو کس طرح فائدہ پہنچا یا ہے؟

- a. Temporary water storage پانی کا عارضی ذخیرہ
- b. Slow water discharge پانی کی آہستہ نکاسی
- c. Recharge aquifers پانی کا دوبارہ حصول
- d. Protection from rapid flow of water پانی کے تیز بہاؤ سے بچاؤ
- e. Increase in irrigated area آبپاشی کے رقبے میں اضافہ
- f. Any other (please mention):

Q3. Does DAD help in protecting community from water related calamities?

کیا تاخیری ڈیمز نے علاقے کو پانی سے متعلق تکلیفوں سے بچاؤ میں مدد کی؟

- a. Yes ہاں
- b. No نہیں

Q4. Is there requirement of more delay action dams in the locality?

کیا آپ کے علاقے میں مزید تاخیری ڈیمز کی ضرورت ہے؟

- a. Yes ہاں
- b. No نہیں

Q5. Have delay action dams increased the ground water table in your village?

کیا تاخیری ڈیمز نے آپ کے علاقے میں زیر زمین پانی کی سطح میں اضافہ کیا؟

- a. Yes ہاں
- b. No نہیں

Q6. Are there any rainwater harvesting ponds in the locality?

کیا آپ کے علاقے میں بارشی پانی کے تالاب موجود ہیں؟

- a. Yes ہاں
- b. No نہیں

Q6.1. If yes, how does the pond help the locality?

اگر ہاں، تو تالاب نے علاقے کو کس طرح فائدہ پہنچا یا ہے؟

- a. Hold rainwater بارشی پانی کا ذخیرہ
- b. Provision of drinking water پینے کے پانی کی فراہمی
- c. Usage for livestock مال مویشی کے لئے استعمال
- d. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)

Q7. Are there any water efficient irrigation schemes in your locality?

کیا آپ کے علاقے میں آبپاشی کی مؤثر سکیمیں موجود ہیں؟

- a. Yes ہاں
- b. No نہیں

Q8. How does the irrigation schemes are contributing?

آبپاشی کی سکیمیں کس طرح فائدہ پہنچا رہی ہیں؟

- a. Ensuring water for agriculture usage زرعی استعمال کے لئے پانی کی یقینی فراہمی
- b. Reduce water wastages پانی کے زیاں میں کمی
- c. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)

<p>Q7.1. If yes, please explain which type of interventions exists? اگر ہاں، تو کس قسم کی سکیمیں پائی جاتی ہیں؟</p> <p>a. Sprinkler چھڑکاؤ b. Drip irrigation نالی کے ذریعے قطرہ قطرہ آبپاشی c. Bubbler irrigation ببلر آبپاشی d. Pipe irrigation نالی کے ذریعے آبپاشی e. Water course lining پانی کا کھالا</p>	
<p>Q9. What is your level of satisfaction due to this type of intervention in your area? اس سہولت میں آپ کس حد تک مطمئن ہیں؟</p> <p>a. Extremely satisfied انتہائی مطمئن b. Very satisfied بہت مطمئن c. Somewhat satisfied کسی حد تک مطمئن d. Somewhat dissatisfied کسی حد تک غیر مطمئن e. Very dissatisfied بہت غیر مطمئن f. Extremely dissatisfied انتہائی غیر مطمئن</p>	<p>Q10. If you are not satisfied, then what are key reasons behind your dis-satisfaction? اگر آپ مطمئن نہیں ہیں تو ان کی کیا بنیادی وجوہات ہیں؟</p>
<p>Q11. Any comments/suggestions you want to give کوئی آراء/تبصرہ دینا چاہیں</p>	

**Section C: Community Physical Infrastructure
Flood Protection Wall**

<p>Q1. How does the flood protection wall benefit you/ your locality? سیلاب سے حفاظتی دیوار نے آپ کے علاقے کو کس طرح فائدہ پہنچایا ہے؟</p> <p>a. Damage control to houses گھروں کے نقصان پر قابو b. Damage control to agriculture land زرعی اراضی کے نقصان پر قابو c. Clean drinking water supply پینے کے صاف پانی کی فراہمی d. Less disease spread بیماریوں کا کم پھیلاؤ e. Irrigation water for fertile lands زرخیز زمین کے لیے آبپاشی کا پانی f. Less injury/loss of livestock مال مویشیوں کا کم نقصان g. Any other (please mention) دیگر (مہربانی فرماکر وضاحت کریں)</p>	<p>Q2. In case of agriculture land, does the area under cultivation increased after flood protection wall? سیلاب سے حفاظتی دیوار بننے کے بعد کیا زیر کاشت رقبے میں اضافہ ہوا؟</p> <p>a. Yes ہاں b. No نہیں</p> <p>Q2.1. If yes, how much increase in cultivation land was observed? اگر ہاں تو زیر کاشت رقبہ میں کتنے فیصد اضافہ ہوا؟</p> <p>a. Less than 5% پانچ فیصد سے کم b. 5-10% پانچ سے دس فیصد c. 11-15% گیارہ سے پندرہ فی صد d. 15-20% پندرہ سے بیس فیصد e. More than 20% بیس فیصد سے زیادہ</p>
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<p>Q3. Are you growing more crops than before? کیا آپ پہلے سے زیادہ فصلیں کاشت کر رہے ہیں؟ a. Yes ہاں b. No نہیں</p>	<p>Q4. How much increase in earnings do you observe? آپ کی آمدن میں کتنے فیصد اضافہ ہوا؟ a. Less than 5% پانچ فیصد سے کم b. 5-10% پانچ سے دس فیصد c. 11-15% گیارہ سے پندرہ فی صد d. 15-20% پندرہ سے بیس فیصد e. More than 20% بیس فیصد سے زیادہ</p>
<p>Q5. Do you take part in operation and maintenance of protection work? کیا آپ نے حفاظتی کام کی تعمیر میں حصہ لیا؟ a. Yes ہاں b. No نہیں</p>	<p>Q6. Does flood ever affected you/ household? کیا سیلاب نے آپ / گھر والوں کو متاثر کیا؟ e. Yes ہاں f. No نہیں</p> <p>Q6.1. If yes, what was the damage occurred due to the calamity? اگر ہاں تو اس آفت سے کس قسم کا نقصان ہوا؟ a. Damage to household property گھریلو جائیداد کا نقصان b. Injury to human health انسانی صحت کا نقصان c. Loss of human life انسانی زندگی کا نقصان d. Wastage of agriculture land/crop زرعی رقبے اور فصلوں کا نقصان e. Injury to livestock مال مویشیوں کو زخم f. Loss of livestock مال مویشیوں کا نقصان g. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)</p>
<p>Q7. Are there any requirements of more flood protection walls in the locality? کیا آپ کے علاقے میں مزید سیلاب سے حفاظتی دیواروں کی ضرورت ہے؟ a. Yes ہاں b. No نہیں</p>	<p>Q8. Are there any requirements of more flood protection walls in the locality? کیا آپ کے علاقے میں مزید سیلاب سے حفاظتی دیواروں کی ضرورت ہے؟ a. Yes ہاں b. No نہیں</p>
<p>Q9. Any comments/suggestions you want to give کوئی آراء/ تبصرہ دینا چاہیں</p>	

**Section C: Community Physical Infrastructure
Integrated Area Upgradation Projects**

Q1. Which interventions under IAUP were made in your locality?

IAUP کے تحت کس قسم کی سکیمیں آپ کے علاقے بنائی گئی ہیں؟

- Drinking water supply scheme پینے کے پانی کی فراہمی کی سکیم
- Drainage & Sanitation نکاسی آب اور حفظان صحت
- Roads & bridges سڑکیں اور پل
- Irrigation آپ باشی
- Flood Protection wall سیلاب سے حفاظتی دیوار
- Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)

Q2. What impacts did it create on you/your locality?

ان سکیموں نے آپ کے علاقے میں کیا اثر ڈالا؟

- Access to health صحت تک رسائی
- Access to education تعلیم تک رسائی
- Infrastructure development انفراسٹرکچر کی ترقی
- Livelihood opportunities/enhancement مال مویشی میں اضافہ / مواقع
- Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)

Q3. Did your household receive any health services provided by PPAF?

کیا آپ کے گھرانے نے پی پی اے ایف کی صحت کی سہولیات سے فائدہ حاصل کیا؟

- Yes ہاں
- No نہیں

Q4. What is the satisfaction level with IAUP interventions?

IAUP کی سکیموں میں سے آپ کس حد تک مطمئن ہیں؟

Description تفصیل	Extremely satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Accessibility رسائی						
Economic benefits معاشی فائدے						
Maintenance مرمت						
Any other دیگر						

Q5. Are there any requirements of more interventions?

کیا مزید سکیموں کی ضرورت ہے ؟

- a. Yes ہاں
- b. No نہیں

Q5.1. If yes, which specific interventions are required further?

اگر ہاں ، تو کن مخصوص سکیموں کی مزید ضرورت ہے ؟

- a. Drinking water supply پینے کے صاف پانی کی فراہمی
- b. Sanitation حفظانِ صحت
- c. Roads & bridges سڑکیں اور پل
- d. Irrigation آب پاشی
- e. Flood Protection wall سیلاب سے حفاظتی دیوار
- f. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)

**Section C: Community Physical Infrastructure
General Questions All CPI Type**

Q1. Are you a member of any Operations and Maintenance Committees (operating under CO or VO of the area)?

کیا آپ انتظامی اور بحالی کی کمیٹی کے رکن ہیں؟

- a. Yes ہاں
- b. No نہیں

Q2. Do you pay any dues to O&M committees to ensure regular maintenance of the infrastructure provided under PPAF projects?

کیا آپ انفراسٹرکچر کی تعمیر و ترقی کے لئے کمیٹیوں کو باقاعدگی سے رقم ادا کرتے ہیں؟

- a. Yes ہاں
- b. No نہیں

Q3. How do you define the performance of project committees?

آپ منصوبے کی کمیٹیوں کی کارکردگی کو کس طرح بیان کریں گے؟

- a. Very good بہت اچھی
- b. Good اچھی
- c. Satisfactory اطمینان بخش
- d. Not satisfactory غیر اطمینان بخش
- e. Poor کمزور
- f. Very poor بہت کمزور

Q4. Are trees cutting done during construction work?

کیا تعمیراتی کام کے دوران کوئی درخت کاٹے گئے؟

- a. Yes ہاں
- b. No نہیں

Q5. Any mitigation measures taken against tree cutting?

کیا درختوں کی کٹائی کے بچاؤ کے لئے کوئی عمل کیا گیا؟

- a. Yes ہاں
- b. No نہیں

Q6. Which mitigation measures are taken against tree cutting?

درختوں کی کٹائی سے بچاؤ کے لئے کون سی تدابیر اختیار کیں؟

- a. New tree plantation شجر کاری
- b. Alteration in scheme design to avoid tree cutting درختوں کی کٹائی سے بچنے کے لئے متبادل سکیم کا اجراء
- c. Any other دیگر

Q7. What is the nature of land used for scheme / intervention?

سکیم کے تحت زمین کی استعمال کی نوعیت کیا ہے؟

- a. Donated عطیہ شدہ
- b. Rented کرائے پر
- c. Disputed متنازعہ
- d. Government سرکاری
- e. Any other دیگر

Q8. Is child labor involved in any construction activity?

کیا تعمیراتی کام میں بچوں سے مشقت لی جاتی ہے؟

- a. Yes ہاں
- b. No نہیں

Q9. Which issue of climatic change is facing by you or community?

ماحولیاتی تبدیلی کے کن مسائل کا آپ یا آپ کے علاقے کو سامنا کرنا پڑا؟

- a. Drought / less rain خشک سالی / کم بارشیں
- b. Floods سیلاب
- c. Earthquake زلزلہ
- d. Any other دیگر

Section D: Disaster Preparedness and Management (DPM)

Q1. What tools are provided to you/household as emergency response tool?

آپ / آپ کے گھرانے کو ہنگامی حالت سے نمٹنے کے لئے کون سے آلات دئیے گئے ہیں؟

- h. Excavation tools کھدائی کے آلات
- i. First aid kits فرسٹ ایڈ کٹ
- j. Basic search and rescue items بنیادی تلاش اور بچاؤ کا سامان
- k. Firefighting equipment آگ بجھانے کے آلات
- l. Life jackets زندگی بچانے والے کوٹ
- m. Stretchers اسٹریچرز
- n. Communication tools مواصلاتی آلات
- o. Any other (please mention): دیگر (وضاحت کریں)

Q2. Did you attend any training?

کیا آپ نے کوئی تربیت حاصل کی ہے؟

- a. Yes ہاں
- b. No نہیں

Q2.1. If yes, what was the training about?

اگر ہاں، تو تربیت کس بارے میں تھی؟

- a. Early warning training خبردار کرنے کی ابتدا کی تربیت
- b. Mock drills تریبی مشقیں
- c. Disaster management آفات سے بچاؤ کی انتظام کاری
- d. Any other (please mention): دیگر (وضاحت کریں)

Q3. Are you satisfied with the provided disaster training?

کیا آپ ہنگامی حالات کے بارے میں فراہم کی گئی تربیت سے مطمئن ہیں؟

- a. Extremely satisfied انتہائی مطمئن
- b. Very satisfied بہت مطمئن
- c. Somewhat satisfied کسی حد تک مطمئن
- d. Somewhat dissatisfied کسی حد تک غیر مطمئن
- e. Not very satisfied بہت زیادہ مطمئن نہیں
- f. Extremely dissatisfied انتہائی غیر مطمئن

Q4. Did trainings help in spreading awareness among general public?

کیا تربیت نے عام لوگوں میں آگاہی اُجاگر کرنے میں مدد کی؟

- c. Yes ہاں
- d. No نہیں
- e. Don't know معلوم نہیں

Q5. Is there any emergency response center in your locality?

کیا آپ کے علاقے میں ہنگامی حالات سے متعلق کوئی ادارہ موجود ہے؟

- a. Yes ہاں
- b. No نہیں
- c. Don't know معلوم نہیں

Q6. Were there any community meetings to identify vulnerability?

کیا خطرہ کی شناخت کے متعلق کوئی کمیونٹی میٹنگ/ برادری کی سطح پر کوئی اجلاس ہوا ہے؟

- a. Yes ہاں
- b. No نہیں
- c. Don't know معلوم نہیں

Q7. Are there any activities that provide inputs regarding post disaster rehabilitation plan?

کیا آفت کے بعد بحالی کے لئے کوئی سرگرمیاں کی گئیں؟

- a. Yes ہاں
- b. No نہیں
- c. Don't know معلوم نہیں

Q8. Are there any Drought Mitigation and Preparedness Project in your locality?

کیا قحط سے بچاؤ یا تیاری کے لئے کوئی منصوبہ اس علاقہ میں شروع کیا گیا؟

- a. Yes ہاں
- b. No نہیں
- c. Don't know معلوم نہیں

Q8.1. If yes, please explain the project

اگر ہاں، تو مہربانی فرما کر اس منصوبے کے بارے میں بیان کریں؟

- a. Flood Protection Wall سیلاب سے حفاظتی دیوار
- b. Culvert زمین دوز نالی

	<p>c. Check Dam/Channel چیک ڈیم / چینل</p> <p>d. Cause Way کام کا راستہ</p> <p>e. Link Road رابطے کی</p> <p>f. Retaining Wall حفاظتی دیوار</p> <p>g. Gabion Wall گیبین دیوار</p> <p>h. Any Other (please mention);----- دیگر (مہربانی فرما کر وضاحت کریں)</p>
<p>Q9. In which terms the project contributed more? اس منصوبے نے کن عوامل کو زیادہ فائدہ پہنچایا؟</p> <p>a. Availability of water پانی کی دستیابی</p> <p>b. Conservation of water پانی کا تحفظ</p> <p>c. Mitigate danger of flood water سیلابی پانی سے خطرے میں کمی</p> <p>d. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)</p>	<p>Q10. Please identify key challenges and constraints still existing in Disaster and preparedness Measures? مہربانی فرما کر ہنگامی حالات کی تیاری میں موجودہ رکاوٹوں اور مشکلات کی نشاندہی کریں؟</p>
<p>Q12. What are the key areas that can be incorporated where you prefer PPAF to focus in future for Disaster and preparedness Measures? Please explain PPAF کو مستقبل میں ہنگامی حالات سے بچاؤ کے کن پہلوؤں پر زور دینے کی ضرورت ہے؟</p>	<p>Q13. Any comments/ suggestions you want to give? آپ کوئی تبصرہ / تجاویز دینا چاہتے ہیں</p>

Section E: Health

Q1. Did your household receive any health services provided by PPAF?

کیا آپ کے گھرانے نے پی پی اے ایف کی صحت کی سہولیات سے فائدہ حاصل کیا؟

- c. Yes ہاں
d. No نہیں

Q1.1. If yes, from where did you/household get these facilities?

اگر ہاں، تو آپ / آپ کے گھرانے نے یہ سہولیات کہاں سے حاصل کیں؟

- a. Basic Health Units
یونٹ صحت بنیادی
b. Community Health Center (CHC)
سینٹر ہیلتھ کمیونٹی
c. Any other (Please Mention)
کریں وضاحت کر فرما مہربانی دیگر

Q2. What are the possible reasons of availing health facility provided by LACIP?

کی فراہم کردہ صحت کی سہولیات حاصل کرنے کی ممکنہ وجوہات LACIP کیا ہیں؟

- a. Only available facility in the area علاقے/گاؤں میں یہ واحد دستیاب سہولت ہے
b. Nearest to home گھر سے قریب ترین ہے
c. Easily accessible آسانی سے قابل رسائی ہے
d. Satisfaction with the services provided فراہم کردہ خدمات تسلی بخش ہیں
e. Family/friend referred to this facility خاندان/دوست اس سہولت کا حوالہ دیتے ہیں
f. Low cost/affordable services provision خدمات کی فراہمی کم قیمت / قابل برداشت
g. Other (please mention): دیگر (وضاحت کریں)

Q3. What type of medical services are required/accessed more often?

کس قسم کی صحت کی سہولیات زیادہ تر درکار / قابل رسائی ہیں؟

- a. Chronic illness دائمی مرض
b. Acute illness سنگین بیماری
c. Primary Health Care Services حفظان صحت کی بنیادی خدمات
d. Child health بچے کی صحت
e. Immunization حفاظتی ٹیکوں کا کورس
f. Maternal health زچہ کی صحت
g. Antenatal Care and Postnatal Care Nutrition – treatment for stunting, wasting, malnutrition, low birth weight babies, کم وزن پیدا ہونے والے بچوں کی غذائیت کا تحفظ
h. Any other (please mention): دیگر (وضاحت کریں)

Q4. Are the services provided by the PPAF supported health facilities appropriate for women?

کیا پی پی اے ایف کی فراہم کردہ صحت کی سہولیات خواتین کے لئے مناسب ہیں؟

- a. Yes ہاں
b. No نہیں
c. Don't Know نہیں معلوم

Q5. In community health facilities by PPAF, are the female staff sufficient to meet women's specific health needs?

کیا پی پی اے ایف کی کمیونٹی کی صحت کی سہولیات میں خواتین سے متعلق صحت کا عملہ خواتین کافی ہے؟

- d. Yes ہاں
e. No نہیں
f. Don't know معلوم نہیں

Q6. What type of female staff is available at PPAF health facilities?

پی پی اے ایف کی صحت کے مراکز میں کسی قسم کا عملہ خواتین موجود ہے؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

<p>Q7. Are the medicines and equipments sufficient in the community health facilities by PPAF? کیا پی پی اے ایف کی کمیونٹی صحت کی سہولیات میں دوائیاں اور آلات کافی ہیں؟</p> <p>d. Yes ہاں e. No نہیں f. Don't know معلوم نہیں</p>	<p>Q8. Are the services provided in the health facilities by PPAF appropriate for Children? کیا پی پی اے ایف کی فراہم کردہ صحت کی سہولیات میں بچوں کے لئے کافی ہیں؟</p> <p>a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں</p>
<p>Q9. How many visits you have made for the above-mentioned disease treatment in last one month? آپ نے پچھلے ایک ماہ میں اوپر بیان کردہ مرض کے علاج کے لئے کتنی بار کلینک کا رخ کیا؟</p> <p>a. 1 ایک b. 2 دو c. 3 تین d. More than 3 بار زیادہ سے تین</p>	<p>Q10. How many visits you have made (approximately) for the above-mentioned disease treatment during the last one year? آپ نے گزشتہ ایک سال میں اس مرض کے علاج کے لئے اوسطاً کتنی مرتبہ کلینک کا رخ کیا؟</p>
<p>Q11. How many of instances of diarrhea were experienced by household members in the past one year? آپ کے گھرانے میں گزشتہ ایک سال میں اسہال کے کتنے واقعات ہوئے؟</p>	<p>Q12. What do you think is the cause of this diarrhea? آپ کے خیال میں اسہال کی کیا وجوہات ہیں؟</p>
<p>Q13. Do you feel better after receiving treatment? کیا آپ علاج کے بعد بہتری محسوس کر رہے ہیں؟</p> <p>a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں</p>	<p>Q14. How much time does it require to reach to the nearest medical facility in health institute? نزدیک ترین صحت کے مرکز تک پہنچنے میں کتنا وقت لگتا ہے؟</p> <p>a. Less than 15 minutes پندرہ منٹ سے کم b. 15-30 minutes پندرہ سے تیس منٹ c. 31-60 minutes اکتیس سے ساٹھ منٹ d. More than 60 minutes ساٹھ منٹ سے زیادہ</p>
<p>Q15. How much you have to wait to attain medical facility in health institute? صحت کے مرکز میں علاج کرانے کے لئے کتنا انتظار کرنا پڑتا ہے؟</p> <p>a. Less than 15 minutes پندرہ منٹ سے کم b. 15-30 minutes پندرہ سے تیس منٹ c. 31-60 minutes اکتیس سے ساٹھ منٹ d. More than 60 minutes ساٹھ منٹ سے زیادہ</p>	<p>Q16. How much you have to pay (in rupees) on average per visit for treatment? اوسطاً علاج کے لئے کتنی رقم ادا کرنا پڑتی ہے؟</p> <p>a. Puchi fee پرچی فیس b. Medicines ادویات c. Medical tests میڈیکل ٹیسٹ d. Any other (please mention) دیگر (وضاحت کریں)</p>

Q17. Did you find these health services useful?

آپ نے صحت کی سہولیات کو کیسا پایا؟

- a. Useful مفید
b. Not Useful مفید غیر

Q18. How much satisfied are you with the following health services?

آپ صحت کی سہولیات سے کس حد تک مطمئن ہیں؟

Description تفصیل	Extremely satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Availability of health staff صحت کے عملے کی دستیابی						
Quality of services خدمات کا معیار						
Availability of medicines ادویات کی دستیابی						
Working hours of health facilities صحت کی سہولیات کے کتنے گھنٹے						
Affordability قابل برداشت مصارف						

Q18.1. If not useful/dis-satisfied, what was missing?

اگر آپ مطمئن نہیں ہیں تو کیا کمی موجود ہے؟

Q19. How do you define the behavior of following medical staff in PPAF supported health facilities?

پی پی اے ایف کی صحت کے مراکز میں موجود عملہ کے رویے کو آپ کس طرح بیان کریں گے؟

Description تفصیل	Excellent بہت اچھا	Good اچھا	Average اوسط درجہ	Poor کمزور	Very poor بہت کمزور
Doctor ڈاکٹر					
Mid-wife مڈ وائف					
LHVs لیڈی ہیلتھ ورکرز					
Medical technician طبی ٹیکنیشن					
Dispenser ڈسپنسر					
Any other (Please mention) دیگر (وضاحت کریں)					

<p>Q20. Did doctor/LHV in PPAF supported health facilities listen to your problem properly? کیا ڈاکٹر / لیڈی ہیلتھ وزیٹرنے پی پی اے ایف کے مرکز میں آپ کے مسئلہ کو صحیح طرح سنا؟</p> <p>a. Yes ہاں b. No نہیں c. Don't Know معلوم نہیں</p>	<p>Q21. How many household members received treatment at PPAF health facilities? آپ کے گھرانے کے کتنے افراد نے پی پی اے ایف کی صحت کی سہولیات سے علاج کروایا؟</p> <p>a. 1 ایک b. 2 دو c. 3 تین d. 4 چار e. 5 پانچ f. More than 5 زیادہ سے پانچ</p>
<p>Q22. Is water facility available in health facility? کیا صحت کے مراکز میں پانی موجود ہے؟</p> <p>a. Yes ہاں b. No نہیں c. Don't Know معلوم نہیں</p>	<p>Q23. Is toilet available in health facility? کیا لیٹرین کی سہولت صحت کے مرکز میں موجود ہے؟</p> <p>a. Yes ہاں b. No نہیں c. Don't Know معلوم نہیں</p>
<p>Q24. What is the waste disposal mechanism in health facility? صحت کے مرکز میں کوڑا کرکٹ کے ضائع کرنے کا کون سا طریقہ موجود ہے؟</p> <p>a. Burning in incinerator غلازت کی بھٹی میں جلانا b. Open burning in air کھلی ہوا میں جلانا c. Open dumping کھلی فضاء میں کوڑا پھینکنا d. Burrowing دفن کرنا e. Don't Know معلوم نہیں</p>	<p>Q25. Please identify key challenges and constraints still exist in provision of health facilities by PPAF? مہربانی فرما کر پی پی اے ایف کی فراہم کردہ صحت کی سہولیات میں موجود مشکلات اور رکاوٹوں کی نشاندہی کریں؟</p>
<p>Q26. What are the key areas that can be incorporated where you prefer PPAF to focus in future for health services? Please explain آپ کے خیال میں پی پی اے ایف کو مستقبل میں صحت کی کن سہولیات پر زور دینے کی ضرورت ہے؟</p>	<p>Q27. Any comments/suggestions you want to give آپ کوئی بھی تبصرہ/ تجاویز دینا چاہیں</p>

These questions to be asked from the parent/guardians and school children only and not from the teachers

Section F: Education

Q1. Are there any children in your household who are attending PPAF supported school?

کیا آپ کے گھر کے بچے پی ایف کے تعاون سے چلنے والے اسکول جاتے ہیں؟

e. Yes ہاں

f. No نہیں

Q1.1. If yes, what is the type of school supported by PPAF wherein your children going for education?

اگر ہاں، تو کس قسم کے اسکول جاتے ہیں؟

- a. Govt. Boys Primary School گورنمنٹ بوائز پرائمری سکول
- b. Govt. Girls Primary School گورنمنٹ گرلز پرائمری سکول
- c. Govt. Boys Middle School گورنمنٹ بوائز مڈل سکول
- d. Govt. Girls Middle School گورنمنٹ گرلز مڈل سکول
- e. Govt. Boys Secondary School گورنمنٹ بوائز سیکنڈری سکول
- f. Govt. Girls Secondary School گورنمنٹ گرلز سیکنڈری سکول
- g. PPAF Community School پی ایف کمیونٹی سکول
- h. Any Other کسی دوسرے

Q2. How many children from your household are attending the schools?

آپ کے گھر سے کتنے بچے سکول جاتے ہیں؟

Q3. Are all your school going children age (5-16 years) enrolled in schools? If not, why?

کیا پانچ سے سولہ سال والے سارے بچے آپ کے گھر سے سکول جاتے ہیں؟ اگر نہیں تو کیوں؟

- a. Yes ہاں
- b. No نہیں
- c. If not, why: وضاحت کریں؟

Q4. How far is the PPAF school from your house?

پی ایف کے تعاون سے چلنے والا سکول آپ کے گھر سے کتنے فاصلے پر ہے؟

- a. Less than 500 meter پانچ سو میٹر سے کم
- b. 1 km ایک کلو میٹر
- c. 2 km دو کلو میٹر
- d. 3 km تین کلو میٹر
- e. More than 3 km تین کلو میٹر سے زیادہ

Q5. In which class your child/children is currently enrolled?

آپ کے بچے کس جماعت میں پڑھتے ہیں؟

Child No. بچوں کی تعداد	Class جماعت	Child Gender (Boy or Girl) (لڑکا یا لڑکی)
1		
2		
3		
4		
5		

Q6. What is the education level attained by child/children in your house?

آپ کے گھر کے بچوں نے کتنی تعلیم حاصل کی ہے؟

Child No. بچوں کی تعداد	Level Attained درجہ حاصل کیا	Boy/Girl لڑکا / لڑکی
1		
2		
3		
4		
5		

Q7. How many levels of education do you expect your child to complete? Give for girls and boys?

آپ کیا امید کرتے ہیں کہ آپ کے بچے کتنا پڑھ لیں گے؟

Boys		Girls	
a. Primary پرائمری		a. Primary پرائمری	
b. Middle مڈل		b. Middle مڈل	
c. Secondary سیکنڈری		c. Secondary سیکنڈری	
d. Higher Secondary/College ہائیر سیکنڈری / کالج		d. Higher Secondary/College ہائیر سیکنڈری / کالج	
e. University یونیورسٹی		e. University یونیورسٹی	

Q8. Does your child enjoy going to school?

کیا آپ کا بچہ اسکول جانا پسند کرتا ہے؟

- a. Yes ہاں
b. No نہیں

Q8.1. If not then why?

اگر نہیں تو کیوں؟

Q9. Is there corporal punishment in schools?

کیا اسکول میں جسمانی سزا ملتی ہے؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q10. Do schools have separate functional toilet facilities for girls and boys?

کیا سکول میں لڑکے اور لڑکیوں کے علیحدہ لیٹرین ہیں؟ (قابل استعمال)

- d. Yes ہاں
e. No نہیں
f. Don't know معلوم نہیں

Q11. Does your child get breakfast at home before going to school?

آپ کا بچہ گھر پر سکول جانے سے پہلے صبح ناشتہ کرتا ہے؟

- a. Yes ہاں
b. No نہیں

Q11.1. If yes, what do they eat?

اگر ہاں، تو کیا کھاتا ہے؟

Q12. Are basic items (books, stationary, uniform) provided free of cost?

کیا ضروری اشیاء (کتابیں، اسٹیشنری اور یونیفارم) مفت ملتے ہیں؟

- d. Yes ہاں
e. No نہیں

Q12.1. If yes, then which items are provided free of cost?

اگر ہاں کون سی اشیاء مفت ملتی ہیں؟

- a. Books کتابیں
b. Stationary اسٹیشنری
c. Uniform یونیفارم
d. Water پانی
e. Any other (please mention): دیگر (وضاحت کریں)

Q12.2. If no, then how much you have to spend on following items per month?

اگر نہیں تو آپ کتنا ہر چیز پر خرچ کرتے ہیں؟

Description تفصیل	Expense (Montly) ماہانہ خرچ	Expense (Yearly) سالانہ خرچ
Books کتابیں		
Stationary اسٹیشنری		
Uniform یونیفارم		
Transport نقل و حمل کی سہولت		

Q13. Do you have the affordability to meet the expenditure mentioned above?

کیا آپ اوپر بتائے ہوئے اخراجات کو برداشت کر لیتے ہیں؟

- a. Yes ہاں
b. No نہیں

Q14. What is your level of satisfaction with available facilities in the school?

آپ سکول کی طرف سے مندرجہ ذیل دستیاب شدہ سہولیات سے کتنا مطمئن ہیں؟

Description تفصیل	Extremely satisfied انتہائی مطمئن	Very satisfied بہت مطمئن	Somewhat satisfied کسی حد تک مطمئن	Somewhat dissatisfied کسی حد تک غیر مطمئن	Very dissatisfied بہت غیر مطمئن	Extremely dissatisfied انتہائی غیر مطمئن
Accessibility رسائی						
Number of teachers اساتذہ کی تعداد						
Teacher performance اساتذہ کی کارکردگی						
Teacher attendance اساتذہ کی حاضری						
Availability of classrooms کمرہ جماعت کی دستیابی						
Availability of furniture in classrooms کمرہ جماعت میں فرنیچر کی دستیابی						
Availability of electricity بجلی کی دستیابی						
Classroom environment کمرہ جماعت کا ماحول						
Extracurricular activities غیر نصابی سرگرمیاں						
Provision of water پانی کی فراہمی						
Availability of latrines لیٹرین کی دستیابی						
Availability of play grounds کھیل کے میدان کی دستیابی						
Parent-teacher meeting والدین اور اساتذہ کی میٹنگ						
Any other دیگر						

Q14.1. If you are not satisfied, then what are key reasons behind your non-satisfaction?

اگر آپ مطمئن نہیں ہیں تو اس کے پیچھے اصل وجہ ہے؟

Q15. Are you a member of Parent Teacher School Committee?

کیا آپ اساتذہ اور والدین کی سکول کمیٹی کے رکن ہیں؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

Q15.1. If yes, then do you attend committee meetings regularly?

اگر ہاں، تو آپ کمیٹی کی میٹنگ میں باقاعدگی سے جاتے ہیں؟

Q16. Is there anyone from your household who is a member of Parent Teacher School Committee?

کیا آپ کے گھر سے کوئی اور فرد اساتذہ اور والدین کی کمیٹی کا رکن ہے؟

- a. Yes ہاں
b. No نہیں
c. Don't know معلوم نہیں

<p>Q17. Are students aware about hand washing practice before eating meals and after using toilet? کیا لیٹرین کے استعمال کے بعد اور کھانے سے پہلے طلبہ میں ہاتھ دھونے کی رجحان ہے؟</p> <p>a. Yes ہاں b. No نہیں</p>	<p>Q18. What is the waste disposal mechanism in school? سکول میں فضلات کو دفع کرنے کے لئے کیا طریقہ کار اپنایا جاتا ہے؟</p> <p>a. Open dumping کھلی فضا میں پھینکنا b. Kept in waste bins کوڑے دان میں رکھنا c. Burning جلا دینا</p>
<p>Q19. Is any plantation and cleanliness campaign conducted in school? کیا سکول میں شجر کاری اور صفائی کی مہم ہوئی؟</p> <p>a. Yes ہاں b. No نہیں c. Any other دیگر</p>	<p>Q20. Do you provide any feedback to improve quality of education? کیا آپ تعلیم کے معیار کو بلند کرنے کے لئے کوئی رائے دیتے ہیں؟</p> <p>a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں</p> <p>Q20.1. If yes, does your feedback bring forth positive results? اگر ہاں، کیا آپ کی رائے نے مثبت نتیجہ دیا؟</p> <p>a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں</p>
<p>Q21. Please identify key challenges and constraints still existing in provision of education facilities? مہربانی فرما کر سکول میں درپیش اہم مشکلات اور رکاوٹوں کی نشاندہی کریں جو اب بھی تعلیمی سہولیات درکار ہیں؟</p>	<p>Q22. What are the key areas that can be incorporated where you prefer PPAF to focus in future for education? Please explain وہ کون سے چیزیں ہیں جو پی پی اے اف تعلیم کے مستقبل کو بہتر بنانے کے لئے کر سکتا ہے؟</p>
<p>Q23. Any comments/suggestions you want to give</p> <p>آپ کچھ اور بتانا چاہیں</p>	

(Questions for Teachers)	
<p>Q24. Did you receive any training from PPAF? کیا آپ نے پی پی اے ایف سے کوئی ٹریننگ حاصل کی؟</p> <p>a. Yes ہاں b. No نہیں</p> <p>Q24.1. If yes, in which area the training was received? اگر ہاں، تو کس موضوع پر ٹریننگ حاصل کی؟</p> <p>a. School as enterprise سکول بطور ایک ادارہ b. Early childhood education بچے کی ابتدائی تعلیم c. School development plan سکول کا ترقیاتی پروگرام d. Science subjects سائنس مضامین e. Environment improvement ماحولیاتی بہتری f. Disaster preparedness آفات سے بچاؤ کی تیاری g. Inclusive education جامع تعلیم h. Pedagogy علم تدریس</p>	<p>Q25. In your opinion, was the focus of PPAF on enhancing teachers' capacity through trainings in selected subjects was rightly placed? کیا آپ کی رائے میں پی پی اے ایف کی توجہ اساتذہ کی صلاحیت بڑھانے کے لئے ٹریننگ ٹھیک تھی؟</p>
<p>Q26. How did you find these trainings? آپ نے ان ٹریننگز کو کیسا پایا؟</p> <p>a. Useful مفید b. Not useful غیر مفید</p> <p>Q26.1. If useful, have you adopted these learned skills in classrooms? اگر مفید ہیں تو کیا آپ نے کمرہ جماعت میں اس کو استعمال کیا؟</p> <p>a. Yes ہاں b. No نہیں</p>	

Questionnaire for Hydro Power & Renewable Energy (HRE)

Background: The HRE Project activities were initially planned to be implemented in 8 Districts of Khyber Pakhtunkhwa province, this has changed recently according to factual situation and now the project activities are focused on 07 districts. The districts have been selected on the basis of their, HDI, poverty ranking, and the potential for energy demand and renewable energy resources. The Mini & Micro Hydropower plants will be implemented in the northern districts of the KP province and the solar energy systems will be installed in the central and southern districts of the province.

The Mini / micro hydropower is one of the earliest known renewable energy sources existing since the beginning of the 20th century. Rural communities in Pakistan depend mainly upon fuel-wood, crops residue, kerosene and cattle dung for meeting the basic energy needs. Significance of small scale hydropower projects has increased manifold in northern districts of Pakistan, especially in Gilgit-Baltistan and in Khyber Pakhtunkhwa provinces. Implementation of MHPs in remote districts of Chitral, Dir and Buner will provide access to energy for poor communities. The produced electricity will not only be used for lighting purposes but small and mini enterprises will also be established. This will increase the household income, add value to the local products and transform lives of marginalized communities.

Solar energy has come into widespread use where other power supplies are absent, such as in remote off-grid locations. Solar energy is gaining popularity all over the world not only because it is clean but also in off-grid areas where so far solar is the only source of energy. Pakistan is blessed with huge solar energy potential which must be harnessed to benefit communities. Implementation of community- managed solar systems will not only provide lightening but will also be available for other productive uses. In addition, the satisfaction assessment will compile the accomplishments and lessons learned that will provide a basis for recommendations aimed at facilitating the design of the next phase of the program alongside further planning and implementation of current ongoing phases in parallel with related interventions.

پی پی اے ایف نے خیبر پختونخوا اور بلوچستان کی بہت سے اضلاع میں کچھ پروگرامز کیئے ہیں جیسا کہ غربت کو ختم کرنے کا پروگرام، قابل تجدید توانائی کی فراہمی، معاشی امداد اور چھوٹے پیمانے پر بنیادی ڈھانچے کا فروغ اور بغیر سود قرض کی فراہمی۔

اس سروے کا مقصد یہ ہے کہ لوگوں سے ان کا نقطہ نظر دریافت کیا جاسکے جن لوگوں نے ان پروگرامز سے فائدہ اٹھا یا ہے۔ اس سلسلے میں ایس ڈی پی آئی والے تحقیق کر رہے ہیں کہ فراہم کردہ سہولیات سے آپ کتنا مطمئن ہیں۔ اس سوال نامہ کے لئے مجھے آپ کے بیس سے پچیس منٹ درکار ہوں گے۔ کیا مجھے اجازت ہے کہ میں آپ سے یہ سوالنامہ پوچھ سکوں

IDENTIFICATION

A. Name of respondent/beneficiary جواب دہندہ/ مستفید کنندہ کا نام	B. CNIC Number شناختی کارڈ نمبر
C. Age عمر	D. Gender (Male/Female/Transgender) صنف (مرد/ عورت/ مخنث)
E. Contact Number (cell number preferable) رابطہ نمبر (سیل نمبر قابل ترجیح)	
F. Date of Survey (DD/MM/YY) سروے کی تاریخ (دن/ مہینہ / سال)	G. Province صوبہ
H. District ضلع	I. Tehsil تحصیل
J. Union Council یونین کونسل	K. Revenue Village مالیہ گاؤں
L. Settlement/Hamlet ڈیرہ/ ڈھوک	M. Interviewer Name انٹرویو دینے والے کا نام

Section I (General) (عمومی) پہلا سیکشن

1. What is your education status? (only tick a single choice)

آپ کی تعلیم کیا ہے؟ (صرف ایک پر نشان لگائیں)

a. Primary پرائمری	f. Master's ماسٹرز
b. Middle مڈل	g. Never went to school سکول کبھی نہیں گیا۔
c. Metric میٹرک	h. Religious education/Madrassa مذہبی تعلیم / مدرسہ/مدرسا
d. Intermediate انٹر میڈیٹ	i. Any Other ((please mention): دیگر (مہربانی فرما کر : (please mention):
e. Graduation گریجوئیٹ	وضاحت کریں)

2. What is your marital status (only tick a single choice)

آپ کی ازدواجی حیثیت کیا ہے؟ (کسی ایک پر نشان لگائیں)

a. Single غیر شادی شدہ	d. Widowed بیوہ
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b. Married شادی شدہ c. Divorced طلاق یافتہ	e. Separated علیحدگی یافتہ
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3. What is your occupation آپ کا پیشہ کیا ہے؟

a. Farming زراعت b. Livestock مال مویشی c. Fisheries ماہی گیری d. Agriculture (Wage Labour) (مزدور) زراعت e. Agriculture (self-employed/own land) (مالک/ اپنی زمین) زراعت f. Government servant سرکاری ملازم g. Private employee نجی ملازم h. Farm home help (paid) (با معاوضہ) فارم کے کام میں مدد i. Farm Home help (unpaid) (بلا معاوضہ) فارم کے کام میں مدد	j. Student طالب علم k. Looking for work کام کی تلاش l. Housewife گھریلو خاتون m. Retired ریٹائرڈ n. Small enterprise/grocery shop چھوٹا کاروبار / کرپانہ کی دکان o. Services (tailor, carpenter, beauty parlor, driver, etc. خدمات (درزی، ترکھان، بیوٹی پارلر، ڈرائیور وغیرہ) p. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)
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4. What is your household income level (including all sources) approximately (per month/in rupees)

آپ کی گھریلو ماہانہ آمدنی کیا ہے؟ (تمام ذرائع سے) تقریباً (ماہانہ/ روپوں میں)

a. 0-5,000 پانچ ہزار تک b. 5,001-10,000 پانچ ہزار ایک سے دس ہزار تک c. 10,001-15,000 دس ہزار ایک سے پندرہ ہزار تک d. 15,001-20,000 پندرہ ہزار ایک سے بیس ہزار تک	e. 20,001-25,000 بیس ہزار ایک سے پچیس ہزار تک f. 25,001-30,000 پچیس ہزار ایک سے تیس ہزار تک g. More than 30,000 تیس ہزار سے زیادہ
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5. What is your house ownership status?

گھر کی ملکیت کے بارے میں تفصیل فراہم کریں

h. Own House اپنا گھر i. Rented کرایہ کا مکان j. Subsidized رعایت یافتہ	k. Sharing حصہ داری l. Free مفت m. Any other (Please mention): دیگر (مہربانی فرما کر وضاحت کریں)
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6. What is your house structure?

آپ کے مکان کی نوعیت کیا ہے؟ گھر کی تعمیر کی نوعیت کیا ہے

a. Katcha کچا b. Pakka پکا c. Mixed ملا جلا

Beneficiary sampled for:

Through which of the following PPAF supported interventions your household is being/has been benefitted:

پی ای اے ایف کی معاونت سے کون سی ترقیاتی سکیم سے آپ کے گھروالے مستفید ہو رہے ہیں؟

G. Social Mobilization سماجی تحرک

H. MHP/SLS ایم ایچ پی / ایس ایل ایس

Section A: Renewable Energy (Solar)

1. Which is the prime source of energy in your area?

آپ کے علاقے میں توانائی کا کونسا بنیادی ذریعہ ہے؟

- a. Solar lightening system through SLS Mini Grids (شمسی توانائی سسٹم چھوٹے شمسی بجلی گھر)
- b. Solar lighting through **personal** solar systems (شمسی توانائی کا ذاتی شمسی سسٹم کے ذریعے)
- c. Other sources (دیگر ذرائع (وضاحت کریں))

2. Did you have access to energy before the program?

کیا آپ کو اس پروگرام سے پہلے بجلی حاصل کرنے کی رسائی تھی

- a. Yes ہاں
- b. No نہیں

3. If yes then what was the source?

اگر ہاں تو کون سا ذریعہ تھا؟

- a. Personal Solar System ذاتی شمسی سسٹم
- b. WAPDA Electricity واپڈا کی بجلی
- c. Micro-Hydel چھوٹا پن بجلی گھر
- d. Kerosene Oil مٹی کا تیل
- e. Deisel ڈیزل
- f. Wood لکڑی
- g. Gas گیس
- h. Cattle dung جانوروں کا گوبر
- i. Bio-gas بائیو گیس
- j. Other (Please specify) دیگر (وضاحت کریں)

4. Any mishap/accident occurred before due to the above-mentioned energy source?

مندرجہ بالا توانائی کے ذرائع کی استعمال کی وجہ سے کوئی واقعہ/حادثہ پیش آیا؟

- a. Yes ہاں
- b. No نہیں
- c. Don't know پتہ نہیں

5. If yes, then please explain the accident.

اگر ہاں، تو مہربانی فرما کر حادثے کی وضاحت کریں

- a. Damage to household item/s گھریلو اشیا کا نقصان
- b. Damage to property جائداد کا نقصان
- c. Damage to human health انسانی صحت کا نقصان
- d. Any other (please mention): دیگر (وضاحت بیان کریں)

6. Did you or your household suffer from any disease caused by previous energy supply practice?

کیا آپ یا آپ کے گھروالوں کو گزشتہ توانائی کے ذریعے کی استعمال کی وجہ سے کسی بیماری کا سامنا کرنا پڑا؟

- a. Yes ہاں
- b. No نہیں

7. If yes, then please explain the disease

اگر ہاں، تو مہربانی فرما کر بیماری کی وضاحت کریں

- a. Asthma سانس کی بیماری
- b. Eye infection آنکھوں میں انفیکشن
- c. Throat infection گلے کی خرابی
- d. Any other (please mention): دیگر (وضاحت بیان کریں)

8. Do you have more access to energy after the program?

کیا آپ کو اس پروگرام کے بعد توانائی تک زیادہ رسائی حاصل ہے؟

- a. Yes ہاں
- b. No نہیں

9. What is/are the benefit to you/household due to RE interventions?

پراجیکٹ کی وجہ سے آپ کو کون سے گھریلو فوائد حاصل ہوئے ہیں

- a. Reduced use of Kerosene oil مٹی کے تیل کے استعمال میں کمی
- b. Decrease in use of wood لکڑی کے استعمال میں کمی
- c. Less expenditure on energy بجلی کے اخراجات میں کمی
- d. Time saving وقت کی بچت
- e. Productive use of time saved وقت کی بچت کا پیداواری استعمال
- f. Reliable با اعتماد
- g. Safe energy supply محفوظ بجلی کی ترسیل
- h. Damage control to home appliances گھریلو اشیاء کے نقصان پر قابو
- i. Improve health and hygiene صحت اور حفظان صحت میں بہتری
- j. Better air quality within house گھر کے اندر ہوا کا بہتر معیار
- k. Improved awareness (especially due to TV) شعور میں بہتری (خاص کر ٹی وی کی بدولت)
- l. Any other (please mention): دیگر (وضاحت بیان کریں)

10. What is/are the benefit to the women of you/household?

آپ کے گھر کی خواتین کو کیا فائدہ ہوا ہے؟

- a. Increased access to information and entertainment activities معلومات اور تفریحی سرگرمیوں تک زیادہ رسائی
- b. Increased socialization سماجی روابط میں اضافہ
- c. Increased time spent within home گھر کے اندر وقت کا زیادہ استعمال
- d. Improved health صحت میں بہتری
- e. Use of time saved for income generating activities آمدنی میں اضافہ کے لئے وقت کی بچت
- f. Any other (Explain) دیگر (وضاحت کریں)

11. What is/are the benefit to the children of you/household?

آپ کو یا آپ کے گھر والوں کے بچوں کو کون سے فائدے حاصل ہوئے؟

- a. Improved studies پڑھائی میں بہتری
- b. Increased access to information and entertainment activities معلومات اور تفریحی سرگرمیوں تک زیادہ رسائی
- c. Increased socialization سماجی ورابطہ میں اضافہ
- d. Increased time spent within home گھر کے اندر وقت کا زیادہ استعمال
- e. Any other (Explain) دیگر (وضاحت کریں)

12. How reliable is the energy provision?

توانائی کی فراہمی کتنی قابل اعتماد ہے؟

- a. Very reliable بہت با اعتماد
- b. Slightly reliable تھوڑی سی با اعتماد
- c. Not reliable بے اعتماد
- d. Not very reliable بہت زیادہ بے اعتماد

13. Did the usage of electric appliances increase after the increase in energy supply?

کیا بجلی کی ترسیل میں اضافہ سے بجلی سے چلنے والی اشیا کا استعمال بڑھ گیا ہے؟

- a. Yes ہاں
- b. No نہیں
- c. Don't know معلوم نہیں

14. If yes, please explain type of appliance/s?

اگر ہاں، مہربانی فرما کر آلات کی اقسام کی وضاحت کریں؟

- a. Refrigerator ریفریجریٹر
- b. TV ٹی وی
- c. Laptop/computer لیپ ٹاپ / کمپیوٹر
- d. Mobile charging موبائل چارجنگ
- e. Washing machine واشنگ مشین
- f. Water lifting pumps پانی چڑھانے والا پمپ
- g. Any other (please mention): دیگر (وضاحت بیان کریں):

15. On average, how much expenditures were saved? (in one month) (Only for lightening).

اوسطاً کتنے اخراجات کی بچت ہوئی (ایک ماہ میں)

- a. 0-500 سو پانچ
- b. 501-1000 سو ایک سے ایک ہزار
- c. 1001-1500 سو ایک سے پندرہ سو
- d. 1501-2000 سو ایک سے دو ہزار
- e. More than 2000 دو ہزار سے زیادہ

16. On which items do you spend the saved income?

کن اشیاء پر آپ نے اپنی بچت کی رقم خرچ کی؟

- a. Food خوراک
- b. Health صحت
- c. Education تعلیم
- d. Entertainment تفریح

- e. توانائی Energy
f. دیگر (وضاحت بیان کریں): Any other (please mention)

17. Does the energy provision under the project is sufficient for you/the locality?

کیا پراجیکٹ کے توانا نی کی فراہمی آپ کے گھر کی ضروریات / آپ کے علاقے کی ضروریات کے لئے کافی ہے؟

- a. Yes ہاں
b. No نہیں

18. Do you get any end user training regarding usage of Solar System?

کیا آپ نے شمسی توانائی کے استعمال کی تربیت حاصل کی ہے؟

- a. Yes ہاں
b. No نہیں

19. If yes, does the training was useful?

اگر ہاں، کیا تربیت فائدہ مند تھی؟

- a. Useful فائدہ مند
b. Not useful بے کار

20. Do you get any Operating & Maintenance training?

کیا آپ نے کوئی استعمال اور بحالی کی تربیت حاصل کی ہے؟

- a. Yes ہاں
b. No نہیں

21. If yes, does the training was useful?

اگر ہاں، کیا تربیت فائدہ مند تھی؟

- a. Useful فائدہ مند
b. Not useful بے فائدہ

22. Did you/household member receive end user training?

کیا آپ یا آپ کے گھر کے افراد میں سے کسی نے نہ توانا نی پر کسی قسم کی تربیت حاصل کی ہے؟

- a. Yes ہاں
b. No نہیں

23. If yes, how do you rate the effectiveness of training?

اگر ہاں، آپ تربیت کی فائدہ مندی کو کیسے ترتیب دیتے ہیں؟

- a. Extremely effective بہت زیادہ فائدہ مند
b. Very effective بہت فائدہ مند
c. Somewhat effective کچھ فائدہ مند
d. Somewhat ineffective کچھ کم فائدہ مند
e. Very ineffective بہت بے فائدہ
f. Extremely ineffective بہت زیادہ بے فائدہ

24. Did the trainings help in spreading awareness among general public?

کیا تربیت سے عوام الناس میں جان کاری پھیلانے میں مدد ملی؟

- a. Yes ہاں

b. No نہیں

25. Has there been deforestation/tree cutting avoided during construction of MHP site?

26. کیا ایم ایچ پی کی تعمیر کے دوران اس جگہ سے جنگلات کی کٹائی / درختوں کی کٹائی سے پرہیز کیا گیا ہے؟

- a. Yes ہاں
b. No نہیں

27. If yes, then please explain

اگر ہاں، مہربانی فرما کر وضاحت کریں

28. Please identify key challenges and constraints still existing in energy provision?

مہربانی فرما کر توانائی کی فراہمی میں اہم رکاوٹیں اور چیلنجز جو ابھی تک موجود ہیں ان کی نشاندہی کریں؟

29. What are the key areas that can be incorporated where you prefer PPAF to focus in future for Energy provision? Please explain

وہ کون سے اہم پہلوں، (سیکٹر) ہیں جہاں آپ مستقبل میں پی پی اے ایف کو توانائی کی فراہمی پر توجہ مرکوز کرنے پر ترجیح دیں گے

30. Any comments/suggestions you want to give

آپ کسی قسم کے تبصرے / تجاویز دینا چاہیں گے۔

Section B: Micro Hydro Power Plants (MHP)

1. Which is the prime source of energy in your area?

آپ کے علاقے میں توانائی کا کونسا بنیادی ذریعہ ہے؟

- d. Micro and mini hydro power plants (پن بجلی کا چھوٹا پلانٹ)
e. Solar lighting through personal solar systems (شمسی توانائی کا ذاتی شمسی سسٹم)
f. Other sources (دیگر ذرائع (وضاحت کریں))

2. Did you have access to energy before the program?

کیا آپ کو اس پروگرام سے پہلے بجلی حاصل کرنے تک رسائی تھی؟

- b. Yes ہاں
c. No نہیں

3. If yes then what was the source?

اگر ہاں تو کون سا ذریعہ تھا؟

- k. Personal Solar System ذاتی شمسی سسٹم
l. WAPDA Electricity واپڈا کی بجلی
m. Micro-Hydel گھریلو پن بجلی
n. Kerosene Oil مٹی کا تیل
o. Deisel ڈیزل
p. Wood لکڑی
q. Gas گیس
r. Cattle dung جانوروں کا گوبر
s. Bio-gas بائیو گیس
t. Other (Please specify) دیگر (وضاحت کریں)

4. Any mishap/accident occurred before due to the above-mentioned energy source?

آپ کے گھر میں پہلے اوپر بیان کئے گئے توانائی کے ذریعوں کی وجہ سے کسی قسم کا حادثہ پیش آیا ہو؟

- d. Yes ہاں
e. No نہیں
f. Don't know پتہ نہیں

5. If yes, then please explain the accident.

اگر ہاں، تو مہربانی فرما کر حادثے کی وضاحت کریں

- e. Damage to household item/s گھریلو اشیاء کا نقصان
f. Damage to property جائداد کا نقصان
g. Damage to human health انسانی صحت کا نقصان
h. Any other (please mention): دیگر (وضاحت بیان کریں)

6. Did you or your household suffer from any disease caused by previous energy supply practice?

کیا آپ یا آپ کے گھر والوں کو گھر میں استعمال ہونے والے گزشتہ توانائی کے ذریعوں کے استعمال کی وجہ سے کسی بیماری کا سامنا تو نہیں کرنا پڑا؟

- c. Yes ہاں
d. No نہیں

7. If yes, then please explain the disease

اگر ہاں، تو مہربانی فرما کر بیماری کی وضاحت کریں

- e. Asthma سانس کی بیماری
f. Eye infection آنکھوں میں انفیکشن
g. Throat infection گلے کی خرابی
h. Any other (please mention): دیگر (وضاحت بیان کریں)

8. Do you have more access to energy after the program?

کیا آپ کو اس پروگرام کے بعد توانائی تک زیادہ رسائی حاصل ہے؟

- c. Yes ہاں
d. No نہیں

9. What is/are the benefit to you/household due to MHP interventions?

پن بجلی کی فراہمی کی وجہ سے آپ کو /آپ کے گھر والوں کو کیا فائدہ ہوا؟

- m. Reduced use of Kerosene oil مٹی کے تیل کے استعمال میں کمی
n. Decrease in use of wood لکڑی کے استعمال میں کمی
o. Less expenditure on energy بجلی کے اخراجات میں کمی
p. Time saving وقت کی بچت
q. Productive use of time saved وقت کی بچت کا پیداواری استعمال
r. Reliable با اعتماد
s. Safe energy supply محفوظ بجلی کی ترسیل
t. Damage control to home appliances گھریلو اشیاء کے نقصان پر قابو
u. Improve health and hygiene صحت اور حفظان صحت میں بہتری
v. Better air quality within house گھر کے اندر ہوا کا بہتر معیار ہوا
w. Improved awareness (especially due to TV) شعور میں بہتری (خاص کر ٹی وی کی بدولت)
x. Any other (please mention): دیگر (وضاحت بیان کریں)

10. What is/are the benefit to the women of you/household?

آپ کو /آپ کے گھر کی خواتین کو کیا فائدہ ہوا ہے؟

- g. Increased access to information and entertainment activities معلومات اور تفریحی پروگرامز تک رسائی
h. Increased socialization سماجی روابط میں اضافہ
i. Increased time spent within home گھر کے اندر وقت کا زیادہ استعمال
j. Improved health صحت میں بہتری
k. Use of time saved for income generating activities آمدنی میں اضافہ کے لئے وقت کی بچت
l. Any other (Explain) دیگر (وضاحت کریں)

11. What is/are the benefit to the children of your household?

آپ کے گھر کے بچوں کو کیا فائدہ ہوا؟

- f. Improved studies پڑھائی میں بہتری
g. Increased access to information and entertainment activities معلومات اور تفریحی سرگرمیوں تک زیادہ رسائی
h. Increased socialization سماجی روابط میں اضافہ
i. Increased time spent within home گھر کے اندر وقت کا زیادہ استعمال
j. Any other (Explain) دیگر (وضاحت کریں)

12. Did you face electricity shortage due to water shortage?

کیا آپ کو پانی کی کمی کی وجہ سے بجلی کی کمی کا سامنا ہوا؟

Summer	موسم گرما	a. Yes ہاں	b. No نہیں
Winter	موسم سرما	a. Yes ہاں	b. No نہیں

13. How reliable is the energy provision?

توانائی کی فراہمی کتنی قابل اعتماد ہے؟

- e. Very reliable بہت با اعتماد
- f. Slightly reliable تھوڑی سی با اعتماد
- g. Not reliable بے اعتماد
- h. Not very reliable بہت زیادہ بے اعتماد

14. Did the usage of electric appliances increase after the increase in energy supply?

کیا پن بجلی کی ترسیل میں اضافہ سے بجلی سے چلنے والی اشیا کا استعمال بڑھ گیا ہے؟

- d. Yes ہاں
- e. No نہیں
- f. Don't know معلوم نہیں

15. If yes, please explain type of appliance/s?

اگر ہاں، مہربانی فرما کر آلات کی اقسام کی وضاحت کریں؟

- h. Refrigerator ریفریجریٹر
- i. TV ٹی وی
- j. Laptop/computer لیپ ٹاپ / کمپیوٹر
- k. Mobile charging موبائل چارجنگ
- l. Washing machine واشنگ مشین
- m. Water lifting pumps پانی چڑھانے والا پمپ
- n. Any other (please mention): دیگر (وضاحت بیان کریں):

16. On average, how much expenditures were saved? (in one month) (Only for lightening)

اوسطاً کتنے اخراجات کی بچت کی (ایک ماہ میں) پن جلی کے استعمال سے ممکن ہوا ہے .

- f. 0-500 پانچ سو
- g. 501-1000 پانچ سو ایک سے ایک ہزار
- h. 1001-1500 ایک ہزار ایک سے پندرہ سو
- i. 1501-2000 پندرہ سو ایک سے دو ہزار
- j. More than 2000 دو ہزار سے زیادہ

17. On which items do you spend the saved income?

کن اشیاء پر آپ نے اپنی بچت خرچ کی؟

- g. Food خوراک
- h. Health صحت
- i. Education تعلیم
- j. Entertainment تفریح
- k. Energy توانائی
- l. Any other (please mention): دیگر (وضاحت بیان کریں):

18. On average, how much time (in hours) is saved (in one month)?

اوسطاً ، وقت کی کتنی بچت (گھنٹوں میں) ہوتی ہے (ایک ماہ کے دوران)

- a. Less than 10 10 سے کم
- b. 11-15 گیارہ سے پندرہ

- c. سولہ سے بیس 16-20
- d. اکیس سے پچیس 21-25
- e. چھبیس سے تیس 26-30
- f. 30 سے زیادہ More than 30

19. Does the energy provision help you in getting involved in economic activities?

کیا توانا ئی کی فراہمی آپ کی معاشی سرگرمیاں بڑھانے میں مددگار ثابت ہوئی ہیں

- a. Yes ہاں
- b. No نہیں

20. Does the energy provision under the project is sufficient for your household/the locality?

کیا پراجیکٹ کے توانا ئی کی فراہمی آپ کے گھریلو ضروریات اور علاقے کی ضروریات کے مطابق کافی ہے ؟

- c. Yes ہاں
- d. No نہیں

21. Do you get any end user training regarding usage of MHP usage?

کیا آپ نے پن بجلی کے استعمال کی تربیت حاصل کی ہے؟

- c. Yes ہاں
- d. No نہیں

22. If yes, does the training was useful?

اگر ہاں، کیا تربیت فائدہ مند تھی؟

- c. Useful فائدہ مند
- d. Not useful بے کار

23. Do you get any Operating & Maintenance training?

کیا آپ نے کوئی استعمال اور بحالی کی تربیت حاصل کی ہے؟

- c. Yes ہاں
- d. No نہیں

24. If yes, does the training was useful?

اگر ہاں، کیا تربیت فائدہ مند تھی؟

- c. Useful فائدہ مند
- d. Not useful بے فائدہ

25. Did you/household member receive any training on energy?

کیا آپ/ گھر کے فرد نے توانا ئی پر کسی قسم کی تربیت حاصل کی ہے؟

- c. Yes ہاں
- d. No نہیں

26. If yes, how do you rate the effectiveness of training?

اگر ہاں، آپ تربیت کی فائدہ مندی کو کیسے ترتیب دیتے ہیں؟

- g. Extremely effective بہت زیادہ فائدہ مند
- h. Very effective بہت فائدہ مند
- i. Somewhat effective کچھ فائدہ مند

- j. Somewhat ineffective کچھ کم فائدہ مند
k. Very ineffective بہت بے فائدہ
l. Extremely ineffective بہت زیادہ بے فائدہ

27. Did the trainings help in spreading awareness among general public?

کیا تربیت سے عوام الناس میں جان کاری پھیلانے میں مدد ملی؟

- c. Yes ہاں
d. No نہیں

31. Has there been deforestation/tree cutting avoided during construction of MHP site? کیا پن

بجلی کی تعمیر کے دوران اس جگہ سے جنگلات کی کٹائی / درختوں کی کٹائی سے پرہیز کیا گیا ہے؟

- a. Yes ہاں
b. No نہیں

31.1 If yes, then please explain

اگر ہاں، مہربانی فرما کر وضاحت کریں

32. Please identify key challenges and constraints still existing in energy provision?

مہربانی فرما کر توانائی کی فراہمی میں ابم رکاوٹیں اور چیلنجز جو ابھی تک موجود ہیں ان کی نشاندہی کریں؟

33. What are the key areas that can be incorporated where you prefer PPAF to focus in future for Energy provision? Please explain

وہ کون سے اہم سیکٹر (پہلوں) ہیں جہاں آپ مستقبل میں پی پی اے ایف کو توانائی کی فراہمی پر توجہ مرکوز کرنے پر ترجیح دیں گے

34. Any comments/suggestions you want to give

آپ کسی قسم کے تبصرے / تجاویز دینا چاہیں گے۔

Section C: Social Mobilization

1. What type of community institution you are part of?

آپ کون سے کمیونٹی ادارے کا حصہ ہیں؟

- j. Female CO خواتین سی او
- k. Male CO مرد سی او
- l. Mix/Combine CO مشترکہ / ملے جلے سی او
- m. Female VO خواتین وی او
- n. Male VO مرد وی او
- o. Mix/Combine VO مشترکہ / ملے جلے وی او
- p. Male LSO مرد ایل ایس او
- q. Female LSO خواتین ایل ایس او
- r. Mix/Combine LSO مشترکہ / ملے جلے ایل ایس او

2. What is your status in Community Institution?

کمیونٹی ادارے میں آپ کی حیثیت کیا ہے؟

- i. General Body Member عام رکن
- ii. Executive Body Member ایگزیکٹو رکن
- iii. Manager منتظم
- iv. President صدر
- v. Any other (Please mention): دیگر (وضاحت کریں):

I. Did you obtain any training regarding CI?

کیا آپ نے کمیونٹی ادارہ کے بارے میں کوئی تربیت حاصل کی ہے؟

- b. Yes ہاں
- b. No نہیں

3.2 If yes, in which area did the training belong to? اگر ہاں، تو کس شعبہ میں؟

a. Capacity building on community management or leadership skills training (CMST and LMST) کمیونٹی انتظامی امور میں استعداد کار بڑھانے یا رہنمائی کرنے کی تربیت	b. Sustainable Development Goals (SDGs) پائیدار ترقی کے اہداف	c. Community Resource Persons (CRP) کمیونٹی کے سرکردہ افراد	d. Peace Pluralism and Inter Provincial Harmony امن اجتماعیت اور بین الصوبائی ہم آہنگی	e. Community Livelihood Fund (CLF) کمیونٹی معیشت کا فنڈ (سی ایل ایف)
f. Physical Infrastructure development (e.g. Project Management, O & M) بنیادی تعمیرات کی ترقی (مثلاً پراجیکٹ اور انتظام)	g. Environmental and natural resource development ماحولیاتی اور قدرتی وسائل کی ترقی	h. Environmental and Social Monitoring ماحولیاتی اور سماجی نگرانی	i. Women leadership training/conference/seminar خواتین رہنما تربیت/ کانفرنس/ سیمینار	j. Any Other (Please mention) دیگر (مہربانی فرما کر وضاحت کریں)

4. In your opinion, was the focus of PPR/PPAF on enhancing capacity of local organizers through trainings in selected subjects was rightly placed?

آپ کی رائے میں، پروگرام کا مرکز ٹریننگ کے ذریعے کمیونٹی کے منتظمین کی صلاحیت کو بڑھانے میں صحیح تھا؟

- a. Yes ہاں
- b. No نہیں

5. How did you find these trainings?

آپ نے ان تربیتوں کو کیسا پایا؟

c. Useful مفید	d. Not useful غیر مفید
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5.1 If useful, have you adopted these learned skills in your everyday dealings with local communities?

- اگر یہ مفید تھا تو کیا آپ نے ان مہارتوں کو مقامی برادری کے ساتھ اپنے روزمرہ کے معاملات میں اپنایا ہے؟
 b. Yes ہاں b. No نہیں

5.2 If not useful, what was missing? What would you like to add in the training?

اگر مفید نہیں ہے، تو کیا کمی تھی؟ آپ تربیت میں اور کیا شامل کرنا چاہتے ہیں؟

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6. How the training has been helpful for you in terms of the following governance related dimensions?

کیا آپ مندرجہ ذیل اجزاء کے لحاظ سے موصول شدہ تربیت سے مطمئن ہیں؟

Description تفصیل	Yes ہاں	No نہیں	Don't know معلوم نہیں
Attendance حاضری			
Accountability & transparency احتساب اور شفافیت			
Office bearer election عہدیداروں کا انتخاب			
Participatory decision making شراکتی فیصلہ سازی			
Frequency of meeting اجلاس کا تسلسل			
Any other (please mention) دیگر (مہربانی سے واضح کریں)			

7. Did the training help to improve community management and leadership capacities of women CI members?

کیا تربیت نے کمیونٹی ادارہ کی خواتین اراکین کی انتظامی امور اور قیادت کی صلاحیت کو بہتر بنانے کے لئے مدد کی؟

- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

8. Did the training help to enhance women's role in community development?

کیا تربیت نے کمیونٹی کی ترقی میں خواتین کے کردار کو بڑھانے کے لئے مدد کی؟

- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

9. Did the training help to increase men's sensitization and awareness about importance of women's role in family decision making as well as community development?

کیا تربیت نے خواتین کے فیصلہ سازی اور کمیونٹی کی ترقی میں کردار کی اہمیت کے بارے میں مردوں میں حساسیت اور شعور کو اجاگر کیا؟

- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

10. Did the training help to improve record keeping?

کیا تربیت نے ریکارڈ رکھ کر بہتر بنانے میں مدد کی؟

- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

11. Did the training help to develop linkages ensuring overall sustainability of CIs?

کیا تربیت نے کمیونٹی انسٹی ٹیوٹس کی مجموعی پائیداری کو یقینی بنانے کے سلسلے کو فروغ دینے میں مدد کی؟

- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

12. Did you create/develop any linkages in following areas?

کیا آپ نے مندرجہ ذیل شعبوں میں روابط تخلیق یا انہیں بڑھایا؟

Area علاقہ	Yes ہاں	No نہیں
a. Municipal services میونسپل سروسز		
b. Local government لوکل گورنمنٹ		
c. District government ضلعی گورنمنٹ		
d. Government line agencies گورنمنٹ کے ذیلی ادارے		
e. NGOs/Donors این جی اوز / ڈونرز		
f. Other دیگر		

13. Do you think local communities have been empowered through formation/ strengthening of community institutes?

کیا آپ کو لگتا ہے کہ مقامی کمیونٹی کو کمیونٹی اداروں کے قیام / مضبوطی کے ذریعے باختیار بنایا گیا ہے؟

- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

14. How much successful are the interventions for local community empowerment?

مقامی برادری کو باختیار بنانے کے لئے مداخلت کتنی کامیاب ہے

- g. Extremely successful انتہائی کامیاب
h. Very successful بہت کامیاب
i. Somewhat successful کسی حد تک کامیاب
j. Somewhat unsuccessful کسی حد تک ناکام
k. Very unsuccessful بہت ناکام
l. Extremely unsuccessful انتہائی ناکام

15. Do you think local women have been empowered through formation/ strengthening of community institutes?

کیا آپ کو لگتا ہے کہ مقامی خواتین کو کمیونٹی اداروں کے قیام / مضبوطی کے ذریعے باختیار بنایا گیا ہے؟

- a. Yes ہاں b. No نہیں c. Don't know معلوم نہیں

16. How much successful were the project interventions for local women empowerment?

مقامی خواتین کو باختیار بنانے کے لئے منصوبے کی مداخلت کتنی کامیاب رہی؟

g. Extremely successful انتہائی کامیاب	h. Very successful بہت کامیاب
i. Somewhat successful کسی حد تک کامیاب	j. Somewhat unsuccessful کسی حد تک ناکام
k. Very unsuccessful بہت ناکام	l. Extremely unsuccessful انتہائی ناکام

17. How the interventions are useful for empowerment of local women?

مقامی خواتین کو باختیار بنانے کے لئے سرگرمیاں کس طرح مفید ہیں؟

- i. Increased representation in the Executive Body of Village and Union Council Based Organization (LSO) گاؤں اور یونین کونسل پر مبنی تنظیم (ایل ایس او) میں نما ندگی میں اضافہ
- j. Increased membership of women in community institutions . کمیونٹی تنظیموں میں خواتین ارکان میں اضافہ
- k. Increased access to public services by women خواتین کی فراہم کردہ عوامی خدمات
- l. Increased business/income generation activities by women. خواتین کی کاروبار / آمدن پیداوار کی سرگرمیوں میں اضافہ
- m. Increased value of women's work at family and community level. خاندان اور کمیونٹی کی سطح پر خواتین کے کام کی قدر میں اضافہ
- n. Improved decision making²¹ at household level خانہ داری کے فیصلوں میں بہتری
- o. Improved decision-making community level برادری کی سطح پر فیصلہ سازی میں بہتری
- p. Decrease in domestic and community level violence against women گھرانے اور برادری کی سطح پر خواتین کے خلاف تشدد میں کمی

18. Do you actively participate/promote in community organization activities?

کیا آپ کمیونٹی تنظیم کی سرگرمیوں میں فعال طور پر شرکت یا انہیں فروغ دیتے ہیں؟

Yes ہاں b. No نہیں

19. Do you help people in developing committees?

کیا آپ کمیٹیوں کو فروغ دینے میں لوگوں کی مدد کرتے ہیں؟

a. Yes ہاں	b. No نہیں	c. Don't know معلوم نہیں
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19.1 If yes, which area these committees belongs to?

اگر ہاں، تو کونسی کمیٹیوں سے ان کا تعلق ہے؟

g. Health صحت	h. Education تعلیم
i. Disaster management آفات سے بچاؤ	j. Infrastructure انفراسٹرکچر
k. Livelihood support روزگار میں مدد	l. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)

20. Please identify key challenges in social mobilization in your locality.

براہ کرم اپنے علاقے میں سماجی تحرک میں اہم چیلنجوں کی شناخت کریں

21. Please identify key challenges in mobilization and formation of women community organizations.

مہربانی فرما کر خواتین کمیونٹی تنظیموں کے قیام کو متحرک کرنے میں کلیدی چیلنجوں کی شناخت کریں

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22. How many members of your households have NIC/CNIC?

آپ کے خاندان کے کتنے ممبران کے پاس این آئی سی / سی این آئی سی ہیں؟

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

23. How many members of your households having NIC/CNIC are registered voters?

آپ کے گھر والوں میں کتنے ممبران رجسٹرڈ ووٹرز ہیں

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

24. How many registered voters of your households have casted vote in General Elections of 2018?

2018 کے عام انتخابات میں آپ کے خاندان کے کتنے رجسٹرڈ ووٹرز نے ووٹ ڈالے ہیں

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

Questionnaire for Prime Minister Interest Free Loan

Background

Poverty is widespread in Pakistan, particularly in the rural areas. There is high unemployment and generally lack of income earning opportunities, particularly for women youth and marginalized segments of society. To address the issue, the Government of Pakistan launched the Prime Minister's Interest Free Loan (PMIFL) Scheme on 26th June, 2014 to make poor to stand on their feet by offering them a chance to set up their own small enterprises productively. There is a strong cohesion between the Government's vision and the Pakistan Poverty Alleviation Fund (PPAF) to strengthen the capacity of civil society organizations to engage in the Government's mandate for poverty alleviation, and equipping them with capacity and resources to extend interest free loans to poor and marginalized households to accelerate socio-economic development. Based on its previous experience, PPAF has been mandated by the Government of Pakistan to design, mobilize, implement and monitor the PMIFL Scheme. The Scheme has been started in selected priority districts of Pakistan where the financial inclusion is limited or not available to the poorest of the poor.

پی پی اے ایف نے خیبر پختونخوا اور بلوچستان کی بہت سے اضلاع میں کچھ پروگرامز کیئے ہیں جیسا کہ غربت کو ختم کرنے کا پروگرام، قابل تجدید توانائی کی فراہمی، معاشی امداد اور چھوٹے پیمانے پر بنیادی ڈھانچے کا فروغ اور بغیر سود قرض کی فراہمی۔

اس سروے کا مقصد یہ ہے کہ لوگوں سے ان کا نقطہ نظر دریافت کیا جاسکے جن لوگوں نے ان پروگرامز سے فائدہ اٹھا یا ہے۔ اس سلسلے میں ایس ڈی پی آئی والے تحقیق کر رہے ہیں کہ فراہم کردہ سہولیات سے آپ کتنا مطمئن ہیں۔ اس سوال نامہ کے لئے مجھے آپ کے بیس سے پچیس منٹ درکار ہوں گے۔ کیا مجھے اجازت ہے کہ میں آپ سے یہ سوالنامہ پوچھ سکوں

شناخت IDENTIFICATION

Name of respondent/beneficiary نام جواب دہندہ/ کا نام	CNIC Number شناختی کارڈ نمبر
Gender (Male/Female/Transgender) صنف (مرد/ عورت/ مخنث)	Contact Number (cell number preferable) رابطہ نمبر (سیل نمبر قابل ترجیح)
Age عمر	
Date of Survey (DD/MM/YY) سروے کی تاریخ (دن/ ماہ/ سال)	Province صوبہ
District ضلع	Tehsil تحصیل
Union Council یونین کونسل	Revenue Village مالیہ کا گاؤں
Settlement/Hamlet ڈیرہ	Interviewer Name سوال کنندہ کا نام

Section I (General) پہلا سیکشن (عمومی)

Q1. What is your education status? (only tick a single choice) آپ کی تعلیم کیا ہے؟ (صرف ایک پر نشان لگائیں)

j. Primary پرائمیری	o. Master's ماسٹرز
k. Middle میڈل	p. Never went to school. سکول کبھی نہیں گیا۔
l. Metric میٹرک	q. Religious education/Madrassa/مدرسہ/مذہبی تعلیم
m. Intermediate انٹر میڈیٹ	r. Any Other ((please mention): دیگر (مہربانی فرما کر وضاحت کریں)
n. Graduation گریجوایشن	

Q2. What is your marital status (only tick a single choice) آپ کی ازدواجی حیثیت کیا ہے؟ (کسی ایک پر نشان لگائیں)

f. Single غیر شادی شدہ	i. Widowed بیوہ
g. Married شادی شدہ	j. Separated علیحدگی یافتہ
h. Divorced طلاق یافتہ	

Q3. What is your occupation آپ کا پیشہ کیا ہے؟

q. Farming زراعت	z. Student طالب علم
r. Livestock مال مویشی	aa. Looking for work کام کی تلاش
s. Fisheries مابی گیری	bb. Housewife گھریلو خاتون
t. Agriculture (Wage Labour) (مزدور) زراعت	cc. Retired ریٹائرڈ
u. Agriculture (self-employed/own land) (مالک/ اپنی زمین) زراعت	dd. Small enterprise/grocery shop چھوٹا کاروبار / کریانہ کی دکان
v. Government servant سرکاری ملازم	ee. Services (tailor, carpenter, beauty parlor, driver, etc. خدمات (درزی، ترکھان، بیوٹی پارلر، ڈرائیور وغیرہ)
w. Private employee نجی ملازم	ff. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں)
x. Farm home help (paid) فارم کے کام میں مدد (با معاوضہ)	
y. Farm Home help (unpaid) فارم کے کام میں مدد (بلا معاوضہ)	

Q4. What is your household income level (including all sources) approximately (per month/in rupees)

آپ کی ماہانہ آمدنی کیا ہے؟ (تمام ذرائع سے) تقریباً (ماہانہ/ روپیوں میں)

h. 0-5,000	l. 20,001-25,000
i. 5,001-10,000	m. 25,001-30,000
j. 10,001-15,000	n. More than 30,000
k. 15,001-20,000	

Q5. What is your house ownership status? آپ کے گھر کی ملکیت حیثیت کیا ہے؟

g. Own House اپنا گھر	j. Sharing حصہ داری
h. Rented کرایہ کا مکان	k. Free مفت
i. Subsidized رعایت یافتہ	l. Any other (Please mention): دیگر (مہربانی فرما کر وضاحت کریں)

Q6. What is your house structure? آپ کے گھر کا تعمیراتی ڈھانچہ کیا ہے؟

b. Katcha کچا	b. Pakka پکا	c. Mixed ملا جلا
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Section A: Prime Minister Interest Free Loan (PMIFL)

Q1. Which type of loan did you acquire?

آپ نے کس قسم کا قرض حاصل کیا ہے؟

- Agriculture/cropping / کاشتکاری
- Commodity/petty trading / اشیاء / چھوٹا کاروبار
- Livestock/poultry / مرغیائی / مویشی
- Manufacturing/light engineering/workshops / کارخانہ/ ادنیٰ انجینئرنگ / ورکشاپس
- Embroidery/stitching/handicrafts / کڑھائی / سلانی / دستکاری
- Services (Beauty parlor, Barber, Carts, Service station, etc.) / خدمات (بیوٹی پارلر، حجام، چھکڑا، سروس سٹیشن وغیرہ)
- Any other (please mention): (دیگر (مہربانی فرما کر وضاحت کریں)

Q2. How much was the amount?

قرض کی رقم کتنی تھی؟

- First Cycle.....PKR پاکستانی روپیہ پہلا دور
- Second Cycle.....PKR پاکستانی روپیہ دوسرا دور
- Repeat the above for other loan cycle / قرض کے اگلے دور کے لئے مذکورہ بالا کا اعادہ

Q3. How much are you satisfied with the amount of loan provided to you?

فراہم کردہ قرض کی رقم سے آپ کتنے مطمئن ہیں؟

- Extremely satisfied / انتہائی مطمئن
- Very satisfied / بہت مطمئن
- Somewhat satisfied / کسی حد تک مطمئن
- Somewhat dissatisfied / کسی حد تک غیر مطمئن
- Not very satisfied / بہت زیادہ مطمئن نہیں

Q4. Did you face any difficulty during loan processing?

قرض منظوری کے عمل کے دوران آپ کو کسی بھی مشکل کا سامنا کرنا پڑا؟

- Yes / ہاں
- No / نہیں

Q4.1 If yes, at which stage the problem was faced?

اگر ہاں، کس مرحلے پر مسئلہ کا سامنا کرنا پڑا؟

- Information/communication / معلومات / مواصلات
- Preparation of documents / دستاویزات کی تیاری
- Processing of application / درخواست کی پروسسنگ
- Training/capacity building / تربیت / صلاحیت کا بڑھانا
- Receiving of loan / قرض کا حصول
- Returning of installment / قسط کی واپسی
- Any other (please mention): (دیگر (مہربانی فرما کر وضاحت کریں)

Q5. How much are you satisfied with the processing of loan?

قرض منظوری کے عمل سے آپ کتنا مطمئن ہیں؟

- Extremely satisfied / انتہائی مطمئن
- Very satisfied / بہت مطمئن
- Somewhat satisfied / کسی حد تک مطمئن
- Somewhat dissatisfied / کسی حد تک غیر مطمئن
- Not very satisfied / بہت زیادہ مطمئن نہیں

Q6. In the loan centers are women loanees being dealt by male or female loan officer?

قرض کے مراکز میں قرضہ حاصل کرنے والی خواتین کو مرد یا خاتون آفیسر کے ساتھ واسطہ پڑا؟

- Male / مرد
- Female / خاتون

Q7. Are the women satisfied with male staff or female staff of Loan Centers and Pos?

قرض کے مراکز میں کیا خواتین مرد عملے یا خواتین عملے سے مطمئن ہیں؟

Level of Satisfaction	Male Staff	Female Staff
Extremely satisfied / انتہائی مطمئن		
Very satisfied / بہت مطمئن		
Somewhat satisfied / کسی حد تک مطمئن		
Somewhat dissatisfied / کسی حد تک غیر مطمئن		
Not very satisfied / بہت زیادہ مطمئن نہیں		

Q8. How much are you satisfied with the installment plan?

قرض کی اقساط کے پلان سے آپ کتنے مطمئن ہیں؟

- Extremely satisfied / انتہائی مطمئن
- Very satisfied / بہت مطمئن
- Somewhat satisfied / کسی حد تک مطمئن
- Somewhat dissatisfied / کسی حد تک غیر مطمئن
- Not very satisfied / بہت زیادہ مطمئن نہیں

Q9. How much are you satisfied with the information and communication provided to you regarding loan?

قرض کے حصول کے عمل کے دوران فراہم کردہ معلومات اور رکی گئی بات چیت سے آپ کتنے مطمئن ہیں؟

- Extremely satisfied / انتہائی مطمئن
- Very satisfied / بہت مطمئن
- Somewhat satisfied / کسی حد تک مطمئن
- Somewhat dissatisfied / کسی حد تک غیر مطمئن

Q10. How much are you satisfied with the services provided by partner organizations?

پارٹنر تنظیموں کی طرف سے فراہم کردہ خدمات سے آپ کتنے مطمئن ہیں؟

- Extremely satisfied / انتہائی مطمئن
- Very satisfied / بہت مطمئن
- Somewhat satisfied / کسی حد تک مطمئن
- Somewhat dissatisfied / کسی حد تک غیر مطمئن
- Not very satisfied / بہت زیادہ مطمئن نہیں

e. Not very satisfied بہت زیادہ مطمئن نہیں	f. Not at all satisfied بالکل مطمئن نہیں
--	--

Q11. How much you are satisfied with the following services provided in the PO/loan center staff?

پی او / قرض مرکز کے عملے کی طرف سے فراہم کی گئی مندرجہ ذیل خدمات سے آپ کتنے مطمئن ہیں؟

Description تفصیل	Extremely Satisfied انتہائی اطمینان بخش	Very Satisfied بہت اطمینان بخش	Somewhat Satisfied کسی حد تک اطمینان بخش	Somewhat Dissatisfied کسی حد تک عدم اطمینان بخش	Very Dissatisfied بہت عدم اطمینان بخش
Support to prepare documentation قرض کی دستاویزات کی تیاری میں مدد					
Orientation on eligibility criteria to apply loan قرض کی درخواست پر فراہم کردہ معلومات					
Development business of plans. کاروبار کی منصوبہ سازی					
Behavior of the Loan Officer قرض آفیسر کا رویہ					
Loan amount قرض کی رقم					
Loan Processing Time قرض منظوری کی مدت					
Loan installment plan قرض کی اقساط کا پلان					

Q12 If you are not satisfied, then what is/are the reason/s behind your dis-satisfaction?

اگر آپ مطمئن نہیں ہیں تو، آپ کے عدم اطمینان کے پیچھے کیا وجہ ہے / کیا وجوہات ہیں؟

Q13. Who utilized the loan within your household?

کس نے اپنے گھر کے اندر قرض کا استعمال کیا؟

- a. Self خود
b. Other Family Member کنبے کے کسی دوسرے فرد نے

Q14. If other family member utilized the loan then who have utilized it?

اگر کنبے کے کسی اور فرد نے قرض کا استعمال کیا، تو وہ کون ہے؟

- a. Spouse شریک حیات
b. Son/daughter بیٹا / بیٹی
c. Sister/brother بہن / بھائی
d. Mother/father ماں / باپ
e. Other (please specify) کوئی دوسرا فرد (وضاحت کریں)

Q15. What the key reasons behind that you didn't utilize loan on your own?

خود قرض استعمال نہ کرنے کی اہم وجوہات کیا ہیں؟

Q16. Did the loan was beneficial in increasing earnings prospects?

کیا آمدنی کے امکانات کو بڑھانے میں قرض فائدہ مند تھا؟

- a. Yes ہاں b. No نہیں

Q16.1 If yes, how much monthly earnings change after getting loan?

اگر ہاں، قرض حاصل کرنے کے بعد کتنی ماہانہ آمدنی میں تبدیلی آتی ہے؟

- a. Less than 10% دس فیصد سے کم
b. 11-15% گیارہ سے پندرہ فیصد

Q17. Did you add new products/services (in your enterprise) based on loan facility?

کیا آپ نے قرض کی سہولت سے اپنے کاروبار میں نئی مصنوعات / خدمات میں اضافہ کیا؟

- a. Yes ہاں b. No نہیں

Q18. Did you improve/expand your enterprise premises?

کیا آپ نے اپنے کاروبار کے مقام کو بہتر کیا یا اس کو بڑھایا؟

- a. Yes ہاں b. No نہیں

Q19. Did the loan was beneficial in increasing earnings prospects for household?

کیا گھر کے لئے آمدنی کے امکانات کو بڑھانے میں قرض فائدہ مند تھا؟

<p>c. 16-20% سولہ سے بیس فیصد</p> <p>d. 21-25% اکیس سے پچیس فیصد</p> <p>e. 25% سے زیادہ</p>	<p>a. Yes ہاں b. No نہیں</p> <p>Q20. Did the loan was beneficial in increasing earnings and saving prospects for women?</p> <p>کیا خواتین کی بچت اور کمائی میں اضافے کے لئے یہ قرض مفید ثابت ہوا؟</p> <p>a. Yes ہاں b. No نہیں</p>																																
<p>Q21. How credit facility and income generation impact the consumption/demand of following items?</p> <p>قرض کی سہولت اور آمدنی کی پیداوار نے مندرجہ ذیل اشیاء کی کھپت / طلب کو کس طرح متاثر کیا ہے؟</p> <table border="1" data-bbox="196 516 1471 774"> <thead> <tr> <th>Description تفصیل</th> <th>Increase اضافہ</th> <th>Decrease کمی</th> <th>No change کوئی کمی بیشی نہیں</th> </tr> </thead> <tbody> <tr> <td>Food خوراک</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Health صحت</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Education تعلیم</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Entertainment تفریح</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Traveling سفر</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Energy توانائی</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Any other (please mention) کوئی دیگر (وضاحت کریں)</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Description تفصیل	Increase اضافہ	Decrease کمی	No change کوئی کمی بیشی نہیں	Food خوراک				Health صحت				Education تعلیم				Entertainment تفریح				Traveling سفر				Energy توانائی				Any other (please mention) کوئی دیگر (وضاحت کریں)			
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<p>Q22. Did housing conditions improve after availing credit facility?</p> <p>کیا قرضہ کی سہولیات کے بعد گھریلو حالات بہتر بن گئے؟</p> <p>a. Yes ہاں</p> <p>b. No نہیں</p>	<p>Q23. Has women's role in household decision making increased after setting up micro-enterprises through interest free loan?</p> <p>کیا بلا سود قرضہ سکیم سے شروع کئے گئے چھوٹے کاروبار کی وجہ سے گھریلو فیصلے میں خواتین کے کردار میں اضافہ ہوا؟</p> <p>a. Yes ہاں</p> <p>b. No نہیں</p>																																
<p>Q24. Did loan facility help you to create any asset?</p> <p>کیا قرض کی سہولت نے اثاثے بنانے میں مدد دی؟</p> <p>a. Yes ہاں</p> <p>b. No نہیں</p> <p>Q24.1 If yes, please explain the type of asset</p> <p>اگر ہاں، تو مہربانی فرما کر اثاثے کی قسم کی وضاحت کریں</p> <p>a. Livestock مال مویشی</p> <p>b. Household items گھر کا سامان</p> <p>c. Cash نقد رقم</p> <p>d. Property جائیداد</p> <p>e. Tools/Equipment اوزار / آلات</p> <p>f. Land زمین</p> <p>g. Any other (please mention): دیگر (مہربانی فرما کر واضح کریں):</p>	<p>Q25. How loan facilities affect your saving pattern?</p> <p>قرض کی سہولت نے کس طرح آپ کے بچت کے طریقے پر اثر ڈالا؟</p> <p>a. Increase اضافہ</p> <p>b. Decrease کمی</p> <p>c. No change کوئی تبدیلی نہیں</p> <p>Q26. Did loan facility help in generating employment opportunities?</p> <p>کیا قرض کی سہولت کی وجہ سے روزگار کے مواقع پیدا کرنے میں مدد ملی؟</p> <p>a. Yes ہاں</p> <p>b. No نہیں</p>																																
<p>Q27. Did you take loan prior to PMIFL from any source?</p> <p>کیا آپ نے پی ایم ایف ایل سے پہلے کسی اور ذریعے سے قرض لیا؟</p> <p>a. Yes ہاں</p> <p>b. No نہیں</p> <p>Q27.1 If yes how was your experience?</p> <p>اگر ہاں، تو آپ کا تجربہ کیسا رہا؟</p> <p>a. Very good بہت اچھا</p> <p>b. Good اچھا</p>	<p>Q28. From whom did you borrow more frequently prior to PMIFL?</p> <p>PMIFL سے قبل آپ نے کس ذریعے سے بکثرت قرض لیا؟</p> <p>a. Family/friends خاندان / دوست احباب</p> <p>b. Formal lenders باقاعدہ قرض دینے والے</p> <p>c. Informal lenders غیر رسمی طور پر قرض دینے والے</p> <p>d. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں):</p>																																

- c. Bad خراب
d. Worse خراب زیادہ

Q27.2 If experience was not good, what were is/are the reason/s?

اگر تجربہ اچھا نہیں تھا ، تو تجربہ خراب ہونے کی کیا وجوہات تھیں؟

- a. Limited amount of loan قرض کی کم مقدار
b. Harsh conditions سخت شرائط
c. Extensive documentation دستاویزات کی بھرمار
d. Lack of information regarding process لا عمل سے لا قرضہ منظوری کے عمل سے لا علمی
e. Extensive processing time وسیع / لمبا قرضہ منظوری کا عمل
f. Limited time to return loan قرض کی واپسی کے لئے محدود مدت
g. Any other (please mention): دیگر (مہربانی فرما کر وضاحت کریں):

Q29. Please identify key challenges and constraints still existing in provision of Interest Free Loan?

براہ کرم بلا سود قرض کی فراہمی میں موجود چیلنجوں اور رکاوٹوں کی نشاندہی کریں؟

Q30. What are the key areas that can be incorporated where you prefer PPAF to focus in future for Interest Free Loan schemes? Please explain

آپ کی رائے میں مستقبل میں بلا سود قرضے کی سکیم کے حوالے سے پی پی اے ایف کو کن بنیادی مراحل کو بہتر کرنے کی ضرورت ہے؟ وضاحت کریں

Q31. Any comments/suggestions کوئی آرا / تجاویز

Q32. How many members of your households have NIC/CNIC?

آپ کے گھر والوں کے کتنے اراکین کے پاس قومی شناختی کارڈ ہیں

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

Q33. How many members of your households having NIC/CNIC are registered voters?

آپ کے گھر والوں کے قومی شناختی کارڈ کے کتنے ممبران رجسٹرڈ ووٹرز ہیں؟

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

Q34. How many registered voters of your households have casted vote in General Elections of 2018?

2018 کے عام انتخابات میں آپ کے خاندانوں کے کتنے رجسٹرڈ ووٹرز نے ووٹ ڈالا؟

No. of Men مردوں کی تعداد	No. of Women خواتین کی تعداد

Annex-II

		Primary	Middle	Metric	Intermediate	Graduation	Master	Never Went to School	Religious Education/Madrassa
Male	Swabi	18.9%	21.6%	21.6%	8.4%	2.0%	2.4%	23.6%	1.4%
	Buner	24.1%	13.8%	3.4%				58.6%	
	Upper Dir	15.8%	8.3%	19.0%	9.4%	9.7%	8.6%	28.7%	0.5%
	Chitral	17.3%	9.1%	26.4%	18.5%	13.1%	9.4%	6.0%	0.3%
	Dera Ismail Khan	12.8%	4.7%	8.1%	2.6%	2.1%	5.1%	63.4%	1.3%
	Killa Abdullah	12.6%	21.2%	24.9%	14.0%	4.8%	1.7%	20.1%	0.7%
	Zhob	18.0%	13.1%	11.0%	7.6%	4.6%	0.9%	37.6%	7.0%
	Lasbella	12.7%	5.8%	8.3%	1.7%	1.9%	0.6%	63.2%	5.8%
	Total	15.7%	11.8%	17.1%	9.0%	5.7%	4.1%	34.2%	2.5%
Female	Swabi	9.7%	10.8%	3.6%	2.2%		0.4%	69.5%	3.9%
	Buner		2.9%					94.1%	2.9%
	Upper Dir	9.0%	4.0%	3.2%	3.6%	2.5%	0.7%	76.5%	0.4%
	Chitral	3.5%	10.7%	11.4%	10.1%	7.3%	2.2%	53.3%	1.6%
	Dera Ismail Khan	7.0%	3.2%	3.2%	2.2%		0.5%	82.8%	1.1%
	Killa Abdullah	8.4%	7.0%	8.1%	3.9%	3.5%	0.4%	67.4%	1.4%
	Zhob	4.5%	1.2%	0.3%	0.9%	0.3%	0.3%	82.8%	9.6%
	Lasbella	1.9%	1.4%	1.4%	2.2%	0.3%	0.3%	90.4%	2.2%
	Total	5.9%	5.3%	4.3%	3.6%	2.0%	0.7%	75.1%	3.1%
Total	Swabi	14.4%	16.3%	12.9%	5.4%	1.0%	1.4%	45.9%	2.6%
	Buner	11.1%	7.9%	1.6%				77.8%	1.6%
	Upper Dir	12.9%	6.5%	12.3%	6.9%	6.6%	5.2%	49.1%	0.5%
	Chitral	10.8%	9.9%	19.3%	14.5%	10.3%	6.0%	28.4%	0.9%

	Dera Ismail Khan	10.2%	4.0%	5.9%	2.4%	1.2%	3.1%	72.0%	1.2%
	Killa Abdullah	10.6%	14.2%	16.6%	9.0%	4.2%	1.0%	43.4%	1.0%
	Zhob	11.2%	7.1%	5.6%	4.2%	2.4%	0.6%	60.4%	8.3%
	Lasbella	7.3%	3.6%	4.8%	1.9%	1.1%	0.4%	76.9%	4.0%
	Total	11.0%	8.7%	11.0%	6.4%	3.9%	2.5%	53.7%	2.8%

Annex-III

Satisfaction with increasing crop yield				
	Extremely satisfied	Very satisfied	Somewhat satisfied	Somewhat dissatisfied
Chitral	68.60%	25.70%	2.90%	2.90%
Pishin	69.50%	28.00%	2.40%	-
Zhob	40.00%	40.00%	20.00%	-
Lasbella	70.30%	24.30%	5.40%	-
Total	65.90%	28.00%	5.10%	0.90%
Satisfaction in terms of increase in irrigation area				
	Extremely satisfied	Very satisfied	Somewhat satisfied	Somewhat dissatisfied
Chitral	61.40%	31.40%	7.10%	-
Pishin	68.30%	24.40%	7.30%	-
Zhob	40.00%	36.00%	20.00%	4.00%
Lasbella	70.30%	21.60%	8.10%	-
Total	63.10%	27.60%	8.90%	0.50%
Satisfaction in terms of crops diversification				
	Extremely satisfied	Very satisfied	Somewhat satisfied	Somewhat dissatisfied
Chitral	64.30%	32.90%	2.90%	-
Pishin	64.60%	25.60%	9.80%	-
Zhob	48.00%	24.00%	24.00%	4.00%
Lasbella	73.00%	18.90%	8.10%	-
Total	64.00%	26.60%	8.90%	0.50%

	Upper Dir	%age	11.1%	88.9%	0.0%	0.0%	100.0%
	Pishin	%age	77.8%	11.1%	11.1%	0.0%	100.0%
	Zhob	%age	50.0%	22.7%	22.7%	4.5%	100.0%
	Lasbella	%age	39.6%	37.5%	22.9%	0.0%	100.0%
CLF/Loan Center Management							
			Extremely Satisfied	Very Satisfied	Somewhat Satisfied	Extremely Dissatisfied	Total
	Upper Dir	%age	100.0%	0.0%	0.0%	0.0%	100.0%
	Pishin	%age	77.8%	11.1%	11.1%	0.0%	100.0%
	Zhob	%age	21.1%	42.1%	31.6%	5.3%	100.0%
	Lasbella	%age	36.7%	40.8%	22.4%	0.0%	100.0%
Technical and Vocational Skill Training							
			Extremely Satisfied	Very Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Total
	Upper Dir	%age	29.2%	45.8%	20.8%	4.2%	100.0%
	Chitral	%age	96.7%	3.3%	0.0%	0.0%	100.0%
	Pishin	%age	90.0%	0.0%	10.0%	0.0%	100.0%
	Zhob	%age	55.3%	23.7%	21.1%	0.0%	100.0%
	Lasbella	%age	50.9%	26.4%	22.6%	0.0%	100.0%

Annex-V

Accessing services before construction/ maintenance of LACIP road/bridge

Chitral

Services	On foot	Bicycle/animal	Public transport	Motorcycle	4 public wheel	Not applicable
Water	57.1%					42.9%
General store	100%					
Assessing public	96.4%			3.6%		
School	92.9%		3.6%			3.6%
Hospital	82.1%		17.9%			
Assessing government department	85.7%		14.3%			

D I Khan

Services	On foot	Bicycle/animal	Public transport	Motorcycle	4 public wheel	Not applicable
Water	11.1%					88.9%
General store	97.2%					2.8%
Assessing public	80.6%	8.3%	5.6%	2.8%	2.8%	
School	88.9%	2.8%	2.8%	2.8%	2.8%	
Hospital	61.1%	5.6%	5.6%	27.8%		
Assessing government department	8.3%	5.6%	8.3%	47.2%	30.6%	

Accessing services after construction/ maintenance of LACIP road/bridge

Chitral

Services	On foot	Bicycle/animal	Public transport	Motorcycle	4 public wheel	Not applicable
Water	50%					50%
General store	71.4%		14.3%	10.7%		3.6%
Assessing public	28.6%	7.1%	50%	7.1%	7.1%	
School	71.4%		14.3%	10.7%		3.6%
Hospital	21.4%	3.6%	57.1%	10.7%	7.1%	
Assessing government department	28.6%	7.1%	46.4%	10.7%	7.1%	

D I Khan

Services	On foot	Bicycle/animal	Public transport	Motorcycle	4 public wheel	Not applicable
Water	8.3%			2.8%		88.9%
General store	86.1%	11.1%		2.8%		
Assessing public	47.2%	16.7%	2.8%	33.3%		
School	19.4%	38.9%	11.1%	30.6%		
Hospital	5.6%	38.9%	13.9%	38.9%	2.8%	

Assessing government department	2.8%	2.8%	8.3%	41.7%	41.7%	2.8%
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