



Center for  
Communication  
Programs  
Pakistan

**CENTER FOR  
COMMUNICATION  
PROGRAMS PAKISTAN**

*Annual Report 2014*

**“USING COMMUNICATION**  
**TO SAVE AND IMPROVE**  
**LIVES IN PAKISTAN.”**

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## **OUR MESSAGE**

Resiliency. This word is what comes to mind when I think of the Pakistani people. Since I first visited Pakistan more than 30 years ago, the country has experienced severe earthquakes, floods, political instability and social conflicts. Each time, the people of Pakistan rose back to their feet, unshaken in their conviction that they will persevere. Not only have they persevered but continued on to the path to development, making real the wisdom of the words – “Seven times down, eight times up!”

The Center for Communication Programs Pakistan started with a simple idea that the lives of people can be made better through communication, to help them weather all the challenges that may come their way. Communication helps nurture an environment for people to make the right choices and take the right actions, and to learn from honest errors made. Communication is therefore essential to national development. It is the vital glue that holds people together. If done in a strategic way, its impact spreads fast and is far-reaching. Since 2011, the year we started, we have seen this very simple idea work over and over again.

The year 2014 was an important year for us. It was a year when it felt that the seeds of our idea have finally started to bear fruit in Pakistan. The critical importance of communication has now been heard, seen, experienced, felt, discussed, argued, replicated, modified, adapted, applied in many communities across the country.

The year saw two national efforts being entrusted to us. The largest international donors active in the country, Department for International Development and United States Agency for International Development, gave us the opportunity to help improve maternal and child health in three provinces of the country. This effort helped open doors for us to apply our ideas not just across Pakistan but also in neighbouring Afghanistan. We are now partners with United Nations Children’s Fund in the challenging task of improving maternal and child health within the context of a conflict zone.

Fellow travellers from Johns Hopkins Center for Communication Programs, the world’s leader in health communication for over 40 years now, share our journey in the use of communication to help carve the path to social justice and sustainable development. Without their unrelenting belief and support, Center for Communication Programs Pakistan would not have become a reality. Our contributions modest as they are, uphold the extraordinary agency of communication, that it can improve people’s lives. We are therefore proud to share what we have achieved in 2014.

It was an important year for a simple idea.

*Benjamin Lozare (PhD)  
Governor,  
Center for Communication  
Programs Pakistan*

*Associate Director and Chief  
Training and Performance  
Improvement Division,  
Johns Hopkins Center for  
Communication Programs*

## WHO WE ARE

Center for Communication Programs Pakistan (hereafter Center) is a sister organisation of Johns Hopkins Center for Communication Programs (CCP) based in Baltimore, United States, and is dedicated exclusively to the study and practice of development communication. The Center seeks to use communication to save and improve lives in Pakistan.

### Our History

A non-governmental organisation, it has a rich heritage of over 30 years of dedicated experience in providing technical leadership in strategic social and behaviour change communication design, programming, research, and capacity strengthening. The Center was locally registered in 2011 under the Societies Act XXI of 1860 after the conclusion of a pioneering USAID-funded health project, Pakistan Initiative for Mothers and Newborns (PAIMAN), by the team of professionals from CCP that had implemented PAIMAN. PAIMAN aimed to improve maternal, newborn and child health as well as family planning in Pakistan. The Center's founding team managed implementation of behaviour change communication activities of approximately US\$ 10 million, including strategy formulation and implementation of all forms of media and communication activities.



### Specialising in Development Communication

An independent local organization now, Center draws on CCP's global resources through a Memorandum of Understanding (MoU) that allows it to work jointly on mutually agreed projects.

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The advisory board of the Center has a strong mix of national and international communication experts. Center, therefore, offers a unique opportunity to donors and partner organizations to work with a local NGO with global roots and expertise, but without paying international overheads.

The Center and its founding team have worked with leading public and private sector organisations, including the Ministry of Population Welfare, United Nations Fund for Population, World Health Organization, the David and Lucile Packard Foundation, Population Council, and more recently with the United Nations Children's Fund, Johns Hopkins Bloomberg School of Public Health, International Foundation for Electoral Systems, Oxfam GB and Palladium International.

***The Center for  
Communication  
Programs Pakistan  
is the only dedicated  
organisation in  
Pakistan specialising  
in development  
communication.***



The Center focuses on the creation of tailor-made interventions that variously use interpersonal, group and community-based channels of communication to strategically employ traditional, modern and mainstream media vehicles to reach large and diverse groups of people. The Center has expertise in design, implementation, and evaluation of strategic communication, including development of campaigns, materials, and special events. It also has unparalleled experience in advocacy and community mobilisation campaigns in Pakistan, and an extensive outreach across the country, with nationwide reach through well-entrenched and community-based networks of religious leaders, journalists, communication activists and community-based workers.

# > 1500

*strong network of religious scholars all across Pakistan*



The Center specialises in the use of indigenous communication channels and existing community-based networks. In Pakistan, the Center maintains one of the largest networks of religious scholars in the country, with more than 1,500 active members of all sects, covering all provinces as well as the Federally Administered Tribal Areas (FATA). This network is an essential asset to the Center, and contributes to improving knowledge and changing perceptions about gender roles, health-seeking behaviours, and maternal and child health issues. The Center is also managing a nationwide network of more than 400 journalists, reporters and anchorpersons from print and broadcast media. Journalists from the network have been capacitated to report on health and development issues, and are the key element of the Center's strategic media advocacy efforts.

# > 400

*strong nationwide network of journalists, reporters and anchorpersons from print and broadcast media*



## **WHAT WE DO**

As an organisation that seeks to use communication for saving and improving lives in Pakistan, the Center for Communication Programs Pakistan (hereafter Center) specialises in social and behaviour change communication (SBCC), capacity strengthening, advocacy and media relations, research and evaluation, and knowledge management.

### **Social and Behaviour Change Communication**

Building upon Johns Hopkins Center for Communication Programs (CPP)'s pioneering work, the Center uses theory and evidence to design and implement interventions, campaigns, content, and tools to inspire healthy behaviours. This work focuses on addressing the sources and barriers to behaviour change at individual, household, community and environmental levels.





## **Our SBCC work has been developed for digital media, broadcast media, community media, interpersonal communication, advocacy, and capacity building.**

### **Capacity Strengthening**

The Center specialises in implementing capacity strengthening to build a critical mass of communicators, such as faith-based leaders and journalists, who can bring about positive change in people's lives. Drawing upon its international approaches and resources, the Center focuses on offering stakeholders 'learning experiences' that transform them into effective communicators: formal training is combined with on-the-ground experience, to provide effective and sustainable capacity. This process of capacity strengthening is accompanied by robust institutionalisation of the new learning and communicators. This entails building extensive and rich networks of communicators, and developing training courses in educational institutions.

The Center's work primarily focuses on social change, and emphasises cultural relevance and creativity. The Center's SBCC work has been developed for digital media, broadcast media, community media, interpersonal communication, advocacy, and capacity building. A key expertise of the Center has been the use of entertainment-education as a strategy for SBCC. The Center's founding team has produced and aired a number of critically and commercially successful pieces of entertainment-education in Pakistan, including the drama serials *Aahat* (Approaching Sound) in 1991 and *Nijat* (Deliverance) in 1993, and more recently the feature film *Bol* (Speak Up) in 2011.



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#### **Advocacy and Media Relations**

One of the central pillars of the Center's work is geared towards advancing public policies and supporting communities for provision of improved services, and mobilisation of essential resources. The Center works closely with policymakers and civil society organisations to bring critical development topics to the top of the political agenda and to garner consensus for high-impact initiatives. The Center's initiatives aims at empowering communities and creating institutionalised avenues for citizens to be heard and exercise influence over policy environment. The Center also fosters partnerships and better linkages between communities, and journalists and media houses for developing opportunities for interaction and to inspire discussion around social issues.

#### **Research and Evaluation**

Constantly informing its work with theory and evidence based approaches, the Center specialises in communication research and evaluation, using a range of qualitative and quantitative methodologies. It uses research and evaluation to design communication interventions and to provide appropriate research support to such interventions at every stage of the process. While ensuring that the selection of methods fits the communication needs, the Center variously conducts quality pre-testing, formative researches, and impact evaluations of communication-related interventions. The Center's research and evaluation work particularly focuses on mass media products such as soap operas, television commercials, and music videos. Its emphasis on theory helps it to identify the underlying causal mechanisms and the contextual programmatic elements that generate the observed effects, rather than simply quantifying change.



### **Knowledge Management**

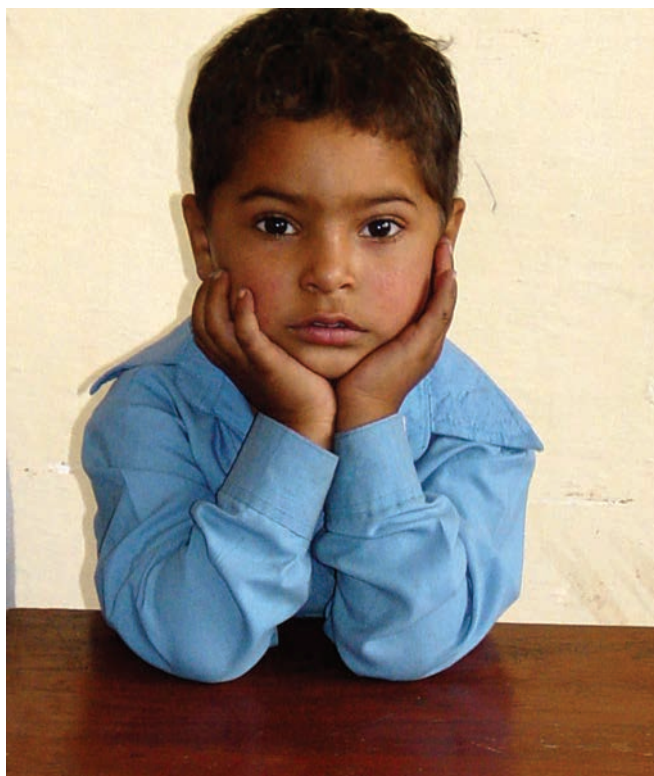
The Center works to manage knowledge for improved effectiveness and institutional learning. This knowledge helps to develop better communication interventions and also fosters research and evaluation around identified knowledge gaps. The Center specifically develops digital mechanisms that store and make accessible knowledge. The Center's work addresses many barriers to accessing information and exchanging knowledge. It also builds knowledge sharing partnerships around these mechanisms, in order to ensure social knowledge management whereby stakeholders are connected to each other and to the knowledge and expertise they require. The Center is currently maintaining a knowledge portal for health and development, and also has access to the expertise and resources of CCP, which has been a leader in knowledge management in the health and development field for over 40 years.

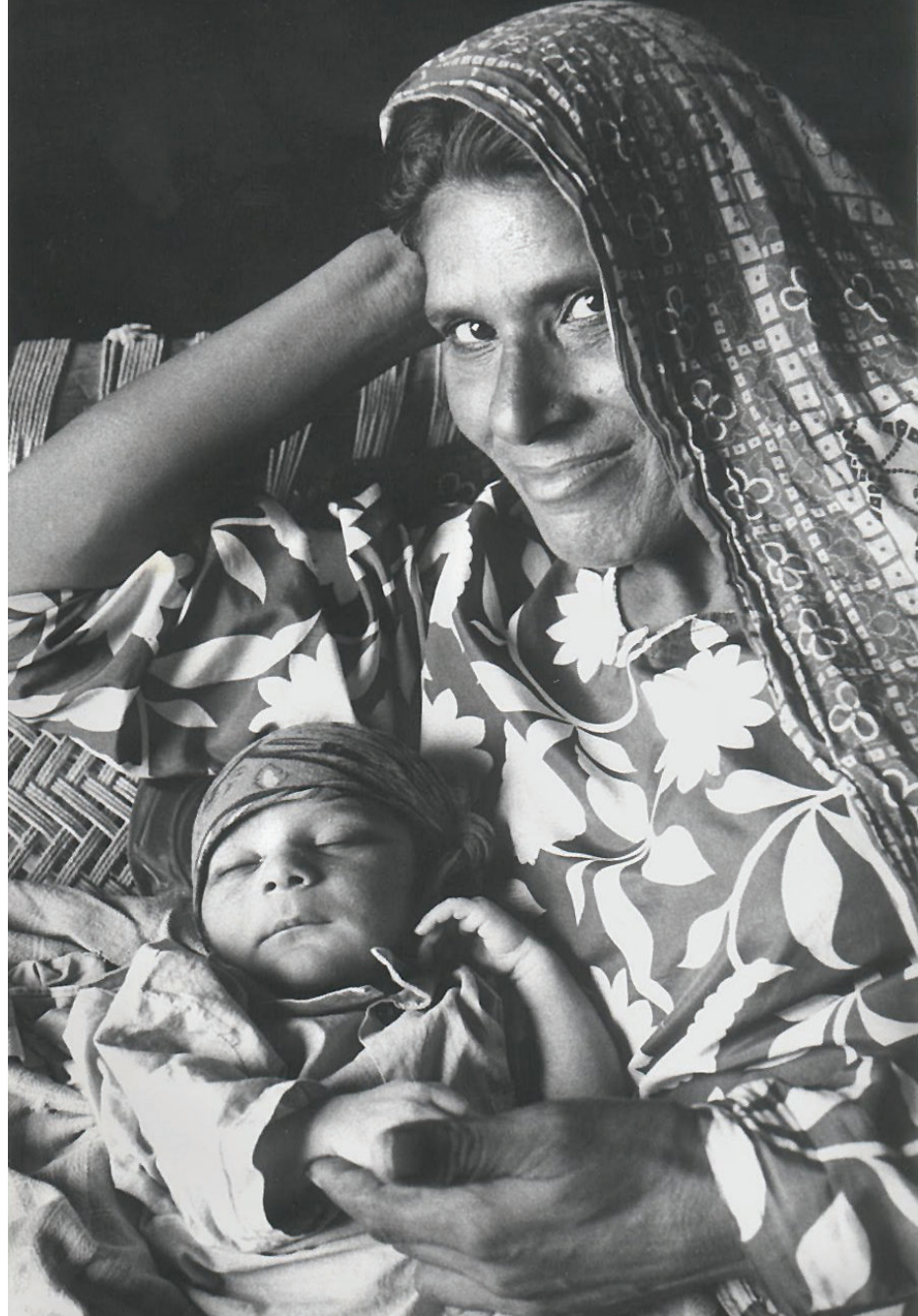
## PAST WORK

Prior to 2014, the Center for Communication Programs Pakistan (hereafter Center) had been active in a range of development communication efforts. The following is the Center's past work at a glance:

**With funding** from the International Federation for Electoral Systems, the Center carried out a national campaign to support the Election Commission of Pakistan in its objective of increasing voters' turnout in 2013 general elections, especially among women. The campaign succeeded in improving knowledge of democratic rights and responsibilities among women, and also increased their participation in political activities, especially during elections. An expected outcome of this campaign is gender equality for women in terms of exercising their political and democratic rights as well as a greater recognition among men of the need for women to have civic and electoral participation.

**Funded by** United Nations Population Fund and led by Contech International, Pakistan Advocacy for Population and National Advancement was an advocacy project that aimed to generate sustained political will and commitment within the current and future governments for universal coverage of family planning services to manage population growth in Pakistan. As part of this project, the Center undertook strategic social and behaviour change communication (SBCC) to improve the national uptake of family planning. It specifically worked to improve knowledge among policymakers, implementers, civil society, donors and families about the benefits of low population growth, for both Pakistanis and their country as a whole.





**The Center**, in partnership with the Johns Hopkins Bloomberg School of Public Health, conducted a research study to explore young children's awareness of, and attitudes towards, tobacco brands. The study was part of a larger research project aimed at acquiring important information on the tobacco industry's reach, especially towards the next generation of smokers. The study provided a thorough review of modern marketing strategies, a compilation of current regulatory approaches, and new and raw data from actual children. These were used to generate recommendations for global policies on tobacco marketing.

**With support** from United Nations Children's Fund, the Center implemented a social mobilisation initiative using *Meena* storybooks and films for introducing, promoting and integrating an in-service teachers' development programme. Developed on conceptions of 'joyful learning', child-centred gender sensitive teaching, and child-friendly schooling methodologies, the programme had a countrywide outreach. The Center developed detailed guidelines on using *Meena* storybooks and films, and a training manual for schoolteachers on using *Meena* communication material. The Center subsequently conducted Training of Trainers (ToTs) in all the regions of Pakistan, and developed monitoring and evaluation mechanisms for the trickledown trainings.

## **YEAR 2014 – A SIMPLE IDEA TAKES FIRM ROOTS**

### **Empowerment, Voice and Accountability for Better Health and Nutrition (EVA-BHN)**

Empowerment and voice of women, girls and marginalised social groups is vital for a stable and prosperous Pakistan.

Enabling them to articulate their needs and influence legislation, policies and practices that affect them are at the heart of achieving this goal. Better access to reproductive, maternal, newborn and child health and nutrition is an important entry point to achieve this objective.

United Kingdom's Department for International Development is focussing on reproductive, maternal, newborn and child health including nutrition to support effective implementation of health sector strategies.

Together with Palladium (formerly known as GRM Futures), the Center is implementing a £12.5 health sector initiative known as the Empowerment, Voice and Accountability for Better Health and Nutrition (EVA-BHN). Under the Provincial Health and Nutrition Programme, funded by Department for International Development, EVA-BHN is helping achieve better reproductive, maternal, newborn and child health services and nutrition results in Punjab and Khyber Pakhtunkhwa provinces over four years (2014 to 2018).

Working with Palladium, the Center is responsible for designing and managing all media and communication activities. These activities are specifically using communication to increase demand and strengthen mechanisms for greater and effective citizen participation and monitoring of health services. Particularly looking to prioritise women, girls and children from underserved backgrounds, the Center's key activities so far include innovative development of entertainment-education content, faith-inspired social and behaviour change communication (SBCC), and media advocacy.



**USAID's Health Communication Component (HCC)**

Pakistan's maternal and neonatal mortality rates are among the highest in the world: nearly 12,000 women die during childbirth every year, and one in every eleven children in Pakistan dies before reaching his or her fifth birthday, with more than half of these deaths occurring during the first month of life. Sindh's maternal and neonatal mortality indicators are even poorer than these national averages: 314 mothers die during every 100,000 live births (national: 272/100,000 live births) and 81 neonates die during every 1,000 live births (national: 54/1,000 live births). These poor maternal and neonatal health outcomes are because of a range of both direct and indirect contributors, which critically include many non-obstetric factors also.

The Center, with Johns Hopkins Center for Communication Programs (CCP), Mercy Corps and Rural Support Programmes Network as partners, is implementing the Health Communication Component (HCC), a \$24.5 million project part of the United States Agency for International Development (USAID)'s flagship Maternal and Child Health Program (MCHP). HCC is seeking to improve family planning, and maternal and child health in the Sindh province of Pakistan.

The Center is developing an array of evidence-based SBCC interventions that will ultimately enable individuals, families and communities to advocate for their own health, practice positive health behaviours, and engage with a responsive health care system. These interventions specifically include mass media campaigns and entertainment-education for knowledge creation, social mobilisation of faith and community actors, citizen journalism and other forms of media advocacy, engagement of the private sector on maternal and child health, the promotion of health journalism, and the capacity strengthening of various key provincial and national educational institutions.

During the formative period of HCC, the Center has implemented a number of activities to build a solid foundation for subsequent implementation. Most notably, the Center conducted a series of consultations in order to develop a 360° media analysis on the most effective media for reaching out to the communities in Sindh, particularly married women of reproductive age. Unlike past health sector initiatives, from the very start the Center is developing comprehensive strategies for engaging private sector, mainstreaming gender and social inclusion in program implementation, and institutionalising news media's interaction with communities for sustained impact.

**Comprehensive Social Mobilization and Communication Strategic Plan for Reproductive, Maternal, Newborn and Child Health, Afghanistan**

In order to improve reproductive, maternal, newborn and child health in the conflict-affected context of Afghanistan, the Center is working with UNICEF Afghanistan to develop a national social mobilisation and communication strategic plan for the country as well as five provincial communication action plans, for Kandahar, Uruzgan, Helmand, Bamyán and Badghis.

Decades of armed conflict and political uncertainty in Afghanistan have aggravated public health challenges to formidable levels, as every year a large number of deaths occur due to mostly preventable and curable causes. The Global Burden of Disease Study conducted in 2010 found that the largest share (almost 50%) of disease in Afghanistan is due to maternal, neonatal and nutritional causes of death. Afghanistan has the worst maternal, newborn and child health indicators in the world, with maternal mortality of 1,800 per 100,000 live births, under-five mortality of 238 deaths per 1,000 live births, and infant mortality of 152 deaths by 1,000 births. This picture is further aggravated by the extremely poor reproductive health status of women in Afghanistan. The country has one of the youngest populations in the world. With only one-fifth of married women using family planning, and a birth rate of more than six children per woman, the population of children and youth continues to grow while having adverse impact on both the overall status of health and socioeconomic situation of the country.

Afghanistan's National Reproductive Health Strategy for 2012- 2016 has therefore flagged reducing maternal and newborn deaths, and improving the quality of reproductive health as an urgent priority. In response to this priority, the Center is using innovative tools and methodologies, and a participatory approach to design a need-based communication strategy and corresponding provincial plans. The strategy and provincial plans will use behaviour change communication to influence individual- and community-level health practices and social norms, and educate the country's programme managers, and transform the country's health policy agenda.







## OUR LEADERSHIP

The Center for Communication Programs Pakistan (hereafter Center) has a seven-member Executive Council, which is headed by a President. Other members of the Executive Council include a Vice President, Secretary General, Joint Secretary, Treasurer, Legal Secretary and Media Secretary. Additionally, the Executive Director heads the regular staff. In addition to the Executive Council, the Center has a five-member Board of Governors, which is assisted by the President as its Secretary. The Board provides oversight on all strategic issues including review of annual budgets and audit reports, for which its advice is binding on the Executive Council. Members of the Board of Governors are distinguished national and international professionals, whose names command respect in their respective fields.

### Board of Governors

Dr Benjamin Lozare has 25 years of experience in teaching, research and practice in international and development communication. For the past 20 years, he has served as the Director of Johns Hopkins Center for Communication Programs (CPP)'s Capacity Building Unit. He holds a PhD in Mass Communication from the University of Wisconsin. Besides his vast international experience, Dr Lozare has advised various key Pakistani partner organizations on health communication issues, including the Ministries of Population Welfare and Health, the United Nations Population Fund and the United States Agency for International Development (USAID).

Shoaib Mansoor is one of the most influential and renowned figures in Pakistani film and arts circles. He is the director of the critically acclaimed feature film *Khuda Kay Liya* and *Bol*, which has largely helped revived cinema industry in Pakistan. His film *Bol* was produced in collaboration with the PAIMAN project, in which Center was a key member of the consortium.

Basil Safi has nearly 15 years of international and domestic experience designing and implementing public health and integrated communication programs. His areas of communication expertise include strategic communication design, mass media and community mobilisation planning, crisis/risk communication, advocacy, harmonisation of diverse working groups, ICT implementation, developing public-private alliances and local behaviour change communication capacity building. Mr Safi is currently leading the *Engaged Cornell* initiative of Cornell University as the Executive Director and tasked with promoting innovation in community-engaged and real-world learning, and making those practices the hallmark of the Cornell undergraduate experience.

Sidney B. Westley has over 40 years of experience in the field of communication. She has also worked as a writer, editor, and publications director, with 22 years in East Africa. Ms Westley was conferred with The Population Institute's Annual Global Media Award for Excellence in Population Reporting for Best Periodical in 1998 and the East-West Center's Makana Award for Outstanding Achievement in 1995. She is currently working as a Communication Specialist at the East-West Center Honolulu, Hawaii, USA.

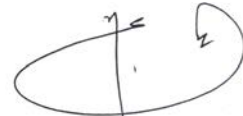
## OUR FINANCES

### BALANCE SHEET, as at 31 December 2014

	NOTES	2014 (Rupees)	2013 (Rupees)
<b>ASSETS</b>			
<b>Non-Current Assets</b>			
Fixed Assets	4	1,504,560	158,260
<b>Current Assets</b>			
Account receivables	5	7,885,692	1,267,902
Advances, deposits and prepayments	6	1,370,567	23,001
Cash and bank balances	7	3,174,353	1,614,358
		<u>12,430,612</u>	<u>2,905,261</u>
		<u>13,935,172</u>	<u>3,063,521</u>
<b>FUNDS AND LIABILITIES</b>			
<b>Accumulated Surplus</b>			
	8	11,619,341	2,691,035
<b>Deferred Grants</b>			
	9	-	57,015
<b>Current Liabilities</b>			
Accrued and other liabilities	10	2,315,831	315,471
<b>Contingencies and Commitments</b>			
	11	-	-
		<u>13,935,172</u>	<u>3,063,521</u>

The annexed notes from 1 to 18 form an integral part of these financial statements

  
President


  
General Secretary

**INCOME AND EXPENDITURE STATEMENT,  
for the year ended 31 December 2014**

	NOTES	2014 (Rupees)	2013 (Rupees)
<b>Income</b>	12	34,173,361	16,555,545
<b>Expenses</b>			
Project personnel cost	13	(14,469,863)	(3,517,273)
Project cost	14	(4,888,442)	(7,059,122)
Administrative cost	15	(5,963,950)	(7,945,753)
		(25,322,255)	(18,522,148)
Other income	16	77,200	46,500
<b>Surplus/(deficit) for the year</b>		8,928,306	(1,920,053)
<b>Transferred from restricted funds</b>		-	1,828,895
<b>Net surplus/(deficit) for the year</b>		8,928,306	(91,158)

The annexed notes from 1 to 18 form an integral part of these financial statements

  
President

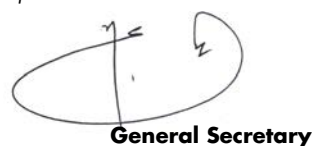
  
General Secretary

**STATEMENT OF CASH FLOWS,  
for the year ended 31 December 2014**

	<b>2014</b> <b>(Rupees)</b>	<b>2013</b> <b>(Rupees)</b>
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Net surplus/(deficit) before taxation	8,928,306	(1,920,053)
Adjustment for:		
Amortization of grants	(57,015)	(64,790)
Depreciation	661,425	152,585
<b>Operating profit before working capital changes</b>	<b>9,532,716</b>	<b>(1,832,258)</b>
<b>Changes in working capital:</b>		
<b>(Increase)/decrease in current assets</b>		
Advances, deposits, prepayments & other receivables	(7,965,356)	49,149
<b>Increase/(decrease) in current liabilities</b>		
Accrued and other liabilities	2,000,360	235,131
<b>Cash generated from/(used) in operating activities</b>	<b>3,567,720</b>	<b>(1,547,978)</b>
<b>Net cash generated from/(used) in operating activities</b>	<b>3,567,720</b>	<b>(1,547,978)</b>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Purchase of property, plant and equipment	(2,007,725)	(129,007)
<b>Net cash used in investing activities</b>	<b>(2,007,725)</b>	<b>(129,007)</b>
<b>CASH FLOWS FROM FINANCIAL ACTIVITIES</b>		
<b>Net cash generated from financing activities</b>	-	-
<b>Net increase in cash and cash equivalents</b>	1,559,995	(1,676,985)
<b>Cash and cash equivalents at the beginning of the year</b>	1,614,358	3,291,343
<b>Cash and cash equivalents at the end of the year</b>	<b>3,174,353</b>	<b>1,614,358</b>

The annexed notes from 1 to 18 form an integral part of these financial statements

  
President

  
General Secretary





