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ENTERPRISES ROLE OF NGO'S REGARDING HEALTH STUDY OF MAKRAN DIVISION, BALOCHISTAN PROVINCE, PAKISTAN

Abstract

Much to the nation's chagrin, in the world the pace of globalization and advancement has registered progress beyond imagination but Balochistan as a whole and Makran Division in particular hardly meets the basic health needs. Growing child mortality rate, poor health of the post-pregnancy mothers and the malnutrition in Balochistan call into question the pledges and slogans of development and prosperity not only by the federal and provincial government, but by the NGO's as well that are operating freely in the country. The NGO's working in Balochistan in general and Makran Division in particular, are by no means hailed with good perception as reported by the local people as these organizations have failed to solve local problems of malnutrition, poor sanitation, child mortality.

Keywords: NGO's, health, development, Makran, Balochistan

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Introduction

The history of NGO's in the health sector is more or less one and a half century old. The first ever private organization or in other words the first health NGOs was created through an initiative of the then Swiss philanthropist Jean Henry Dunant who laid the foundations of Red Cross in 1864. With successful rendering of the services through the seven years wars and other European wars, it spread to other parts of the world becoming the first successful privately owned organization to look after individual and collective health. Red Cross presently holds an office in each major city of Balochistan including Gawadar, Turbat and Panjgor of Makran belt. Similarly, Médecins Sans Frontières or Doctors without Borders (MSF) was the next major initiative in this regard. It was the international humanitarian organization that provides medical assistance to victims of armed conflicts, famine, epidemics, and natural disasters. Starting it Europe, today it provides its services in more than 80 countries including Pakistan where health has been a seriously concerning issue, particularly, in Balochistan.

The year of 1970 marked the start of the steady growth of NGO's in Balochistan as in this year, it got the status of a province of Pakistan. From 1970 to 1985, there was not that much presence of NGO's in Balochistan in general and Makran in particular. During this period, the health department as a whole was controlled and owned by the government. The state could not generate satisfactory budget for the health department and hospitals ran out of medical devices and necessary instruments, then NGO's began to fill in the gap. Pakistan society is both homogenous and heterogeneous in character. It has similarities at national level but having divergent culture at

community level. Given the case of Makran, it is one of the most heterogeneous areas of the country (Mehmood, 2013). Operating for NGO's in this area has been quite arduous owing to a variety of reasons. The failure of the NGO's to deliver is to some extent the lack of security provided to them to operate in the conflicting zones and those rural areas that are disconnected with the rest of the population of the Division. Now there are approximately 12000 registered NGOs and unregistered are more than 60000. Though, some NGO's have been operating with the aim to family planning and population control, their existence has not really brought any significant change in the ground situation. The present poor health scenario in Makran calls for much doubt because today, every major international health NGO and IGO has its office in Makran whether that is UNICEF, WHO, Red Crescent and many more, yet child mortality rate does not diminish (Rehman, 2014). Yet child nutrition is present with staggering figures, yet the cases of breast cancer are increasing rather than diminishing, yet there is no awareness among the public with regards to family planning and use of the contraceptives in order to prevent the sexually transmitted diseases.

NGO's perform the role of horizontal and vertical chain of communication bringing the people closer, but in spite of their presence for decades, they still fail to facilitate even the most feasible networking areas of Makran with the health benefits. Children still die with a high mortality rate. NGO's bridge policy gaps through downward and upward communication, but the policy loopholes as far as health sector is concerned still persist. Pakistan NGO's Forum (PNF) was established in 1986 to strengthen NGO sector. Under the supervision of PNF, the Social Action Program (SAP) was launched. The Program launched in 1992-93 with the aim to provide population welfare services, primary

health care, and rural water supply and sanitation to the under-served population which extended to Makran as well. It encompassed the entire local as well as the international NGO's that were operating in Makran Division in the given above areas in order to monitor their activities and register performance improvement. However, due to lack of political attention and non-priority of the provincial government, it still remains dormant (Hussain, 2011).

Statement of the problem

Main concern of the present research was a poor performance of the various NGOs such as Save the Mother Fund Society, Maternity and Child Welfare Association & Marie Stopes Society of Balochistan and other relevant NGO's in providing standard maternal health, child nutrition and vaccination in districts of Kech, Gawadar and Panjgoor of Makran Division. This was a serious problem which needs the immediate attention of the state and it ought to be handled with caution and activism since it is a very delicate issue with much foreign involvement (Hayat, 2009).

Objectives

- To determine the demographic facts and figure of the respondents.
- To analyze the NGO's working pattern about health related facility in study areas.
- To find out the sources of information as perceived by the respondents.

Methodology

Present study was carried out in Makran division, Balochistan province so as to determine the respondents perceptions based on Likert scaling ranging from (strongly

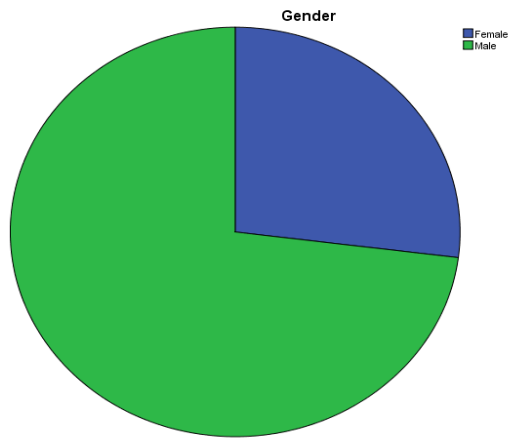
agree, agree, neutral, disagree and strongly). Two hundred (200) respondents were selected by using the simple random sampling procedure. Besides them, NGO's working on health in Turbat, Panjgur and Gawadar were also included in the sampling. Closed-ended questionnaire was designed and distributed among the respondents. Descriptive statistical method was incorporated based on the questionnaires collected from the respondents. The literatures gained from the views of the respondents were tested through the SPSS software.

Table.1. Education level of the respondents.

<i>Education Level</i>	<i>frequency</i>	<i>Percentage</i>
Illiterate	15	7.5
Primary	41	20.5
Middle	30	15.0
Secondary	45	22.5
Intermediate	24	12.0
Graduation	24	12.0
Masters	12	6.0

The results of the table-1, depict that the most (22.5%) of the respondents having a secondary school certificate followed by most (20.5%) of the respondents were received the primary level of education in this regard. However, the respondent who get lowest mean order about illiterate, master and other respectively.

Figure.1. Sample distribution of the respondent's regarding gender.



The outcome of the figure-1 shows that the majority (73%) of the respondents were female by gender and rest of (27%) of the respondents were male.

Table.2. Score of respondents about NGO's working pattern regarding the health facilities.

<i>Scale</i>	<i>frequency</i>	<i>Percentage</i>
Strongly Agree	44	22.0
Agree	80	40.0
Neutral	34	17.0
Disagree	31	15.5
Strongly Disagree	11	5.5

The table-2 results showed that the NGO's urban orientation was the main cause of their failure to deliver maternal health and child nutrition facilities in Balochistan on this statement most of the respondents are agreeing from the above mention results it was state that 40% respondents are agree, 22% disagree and on average 10% are disagreeing it means that the NGO's urban orientation was the main cause of their failure to deliver maternal health and child nutrition facilities in Balochistan. Throughout this questionnaire, a large ratio indicates the numbers of people who are neutral to the questions, in this question also 17 percent of the respondents are neutral staying silent on giving their opinion. The majority, however, believe that concentration of operations of the NGO's in the urban areas was pushed them toward the cities rather than the rural areas where they are most needed.

Table.3. Distribution of the respondent's perception about health issues.

<i>Scale</i>	<i>frequency</i>	<i>Percentage</i>
Strongly Agree	11	5.5
Agree	13	6.5
Neutral	21	10.5
Disagree	130	65.0
Strongly Disagree	25	12.5

NGO's provide more awareness regarding health issues and health problems than the government on this statement 65% respondents disagree and on average 5% agree so from here we can say that most of the people are disagreeing that NGO's does not provide more awareness

regarding health issues and health problems than the government as shown in table-3. The NGO's made a crucial step in the sector mostly Physical Medicine and Rehabilitation in Balochistan. Disability is also one great factor in health of the child; persons in disability are not powered in the society as a good character. The awareness campaigns of the NGO's as proved by the SPSS findings are abortive and are not bearing any affirmative fruits to rehabilitate the society.

Table.4. Distribution of the respondent's perception about surveys, seminars, funding, programs and initiatives taken by NGOs.

<i>Scale</i>	<i>frequency</i>	<i>Percentage</i>
Strongly Agree	6	3.0
Agree	37	18.5
Neutral	104	52.0
Disagree	31	15.5
Strongly Disagree	22	11.0

Table-4, results are describing that 52% of the respondents are neutral and among them almost 10% on average agreeing and 12% are disagreeing so we can say that on this point Makran in spite of hundreds of surveys, seminars, funding, programs and initiatives, this region continues to portray the worst health scenario in the country most of the respondents are neutral. The lofty presentations, seminars and campaigns are non-productive at the gross root level and confined to the lavish hotels and the programs never reach the people who actually need some guidance. The NGO's could get better results if they approached the needy people town

to town in the rural areas on large scale campaigns rather than spending days in the lavish hotel programs.

Conclusions

The NGO's are mostly urban oriented and their concentration in the cities while not endeavoring to access the rural areas where underdeveloped has badly ravaged health standard has diminished the value of NGO's in the eyes of public. Hence, the concluding remarks show that the NGO's working in Balochistan in general and Makran

Division in particular, are by no means hailed with good perception by the local people. Following were the main recommendations based on results. The NGO's working in

Balochistan, particularly, in Makran should be brought under the process of democratic accountability. It further turns to the issue of NGO accountability in providing international development assistance, and reveals a wide range of responses to these issues from NGOs themselves, many of which have been running for some years and illustrate how NGOs can and are grappling with this issue on their own terms. The NGO's working in Balochistan as well as in Makran should be brought under the auspices of the ministry of health of Balochistan and they should be made accountable to the provincial government for their activities so they can work in close coordination with each other promoting genuine health agendas rather than involving in activities for publicity.

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