

Strengthen Microplanning in High-Risk Union Councils

DISTRICT LAKKI MARWAT

Khyber Pakhtunkhwa Province Pakistan

Acronyms

BHU Basic Health Unit

CD Civil Dispensaries

GHD Global Health Development

EMPHNET Eastern Mediterranean Public Health Network

EPI Expanded Programme on Immunization

EPIMIS Expanded Programme on Immunization Management Information System

LHS Lady Health Supervisors

LHW Lady Health Workers

RC Rural Health Center

SD/FR Sub-Division / Frontier Region

Contents

Lakki Marwat District	4
District profile	4
PHC Facilities and human resource in district Lakki Marwat	5
Union Councils with less than 80% PENTA III Coverage	5
Union Council wise Pentavalent III Coverage in district Lakki Marwat	6
LHWs Involvement in Routine EPI	8

Lakki Marwat District

Lakki Marwat district is in Khyber Pakhtunkhwa province and is part of Bannu division. It has an area of 3,164 sq.km. It was administratively declared as a district in 1992. Almost 90.4% of the population are rural dwellers.

Currently, Lakki Marwat district has two tehsils:

- 1. Lakki Marwat Tehsil
- 2. Sarai Naurang Tehsil

The 3 tehsils are further sub-divided into 33 union councils, 157 mauzas, 1 municipal committee and 1 town committee.



District profile¹

Population - 2017	876,182
Population density	154.9 / sq.km
Rural population	786,762
Urban population	89,420
Households	98,051
Average Household Size	9.2
Female	434,357
Male	441,816
Transgender	9
Literacy Ratio (10 +) - 1998 ²	29.7
Average Annual Growth Rate (1998 - 2017)	3.10

¹ Ipbs.gov.pk/content/district-glance-Lakki Marwat

PHC Facilities and human resource in district Lakki Marwat

Rural health center (RHC)	4
Basic health unit (BHU)	27
Civil dispensaries (CD)	9
Total No. of PHC facilities (EPI Sites EPIMIS)	54
Doctors at all PHC facilities in RHC, BHUs, CDs	138
Average No. of paramedics at all PHC facilities in RHC, BHUs, CDs	492
No. of vaccinators at all PHC facilities RHC, BHUs, CDs	99
Lady Health Workers (LHWs)	617
Lady Health Supervisors (LHSs)	26
Lady Health Workers (LHWs) trained in Routine EPI	350
Lady Health Workers (LHWs) un-trained in Routine EPI	267

Union Councils with less than 80% PENTA III Coverage

(Jan - Dec 2021)

S.No	Name of Union Council	PENTA III Coverage Less than 80%
1	Samandi	31
2	Daratang	36
3	Landiwah	49
4	Sulemankhel	49
5	Tittir Khel	50
6	Marmandi Azim	50
7	Ahmed Khel	51
8	Mamakhel	54
9	City 2	57
10	Paharkhel Thal	58
11	Begu Khel	59
12	Behramkhel	59
13	Sarai Naurang	61
14	Tajazai	62
15	Takhti Khel	62
16	Masha Mansoor	64
17	Shah Quli Khan	64
18	Nar Abu Samand	68

District Profile: Lakki Marwat March 2022

19	Gandi	72
20	Kot Kashmir	73
21	Kaka Khel	74
22	Ghaznikhel	76
23	Abdul Khel	77
24	Bakhmal Ahmedzai	77
25	Essa Khel	79

There are 25/33 union councils in Lakki Marwat district in which PENTA III coverage was below 80%.

Union Council wise Pentavalent III Coverage in district Lakki Marwat³

(Jan-Dec 2021)

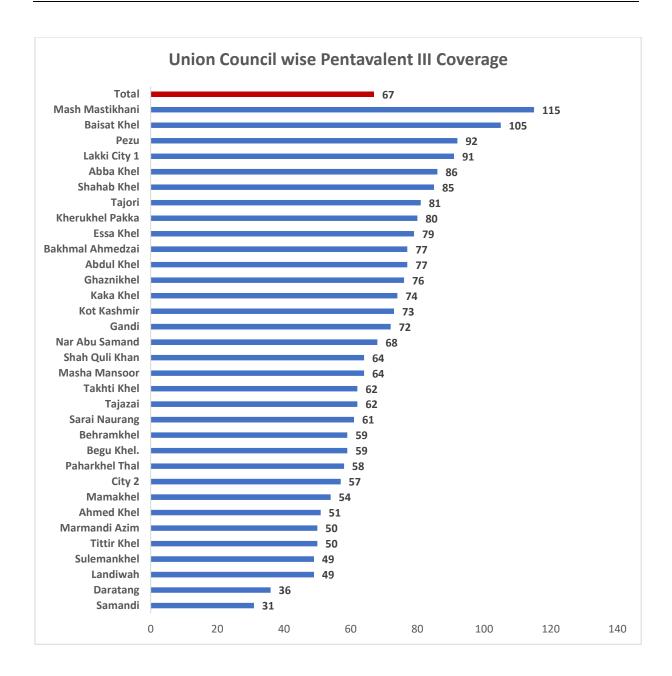
S. No.		Target		Pentavalent III	
	Union Council	Newborns	Surviving Infants	Total	%
1	Abba Khel	1068	1006	862	86
2	Abdul Khel	947	892	690	77
3	Ahmed Khel	859	809	416	51
4	Baisat Khel	1314	1238	1303	105
5	Bakhmal Ahmedzai	1449	1365	1056	77
6	Begu Khel	710	669	395	59
7	Behramkhel	935	881	522	59
8	City 2	1232	1161	664	57
9	Daratang	955	900	326	36
10	Essa Khel	1053	992	780	79
11	Gandi	784	739	532	72
12	Ghaznikhel	935	881	671	76
13	Kaka Khel	721	679	500	74
14	Kherukhel Pakka	686	646	516	80
15	Kot Kashmir	1370	1291	938	73
16	Lakki City 1	962	906	824	91
17	Landiwah	970	914	447	49
18	Mamakhel	1116	1051	568	54
19	Marmandi Azim	1470	1385	690	50

³ EPMIS KP Dec 2021

20	Masha Mansoor	707	666	427	64
21	Mash Mastikhani	730	688	794	115
22	Nar Abu Samand	719	677	460	68
23	Paharkhel Thal	1419	1337	772	58
24	Pezu	1260	1187	1088	92
25	Samandi	871	820	252	31
26	Sarai Naurang	1614	1520	934	61
27	Shahab Khel	417	393	335	85
28	Shah Quli Khan	795	749	480	64
29	Sulemankhel	1223	1152	565	49
30	Tajazai	1629	1535	958	62
31	Tajori	861	811	657	81
32	Takhti Khel	1152	1085	671	62
33	Tittir Khel	999	941	467	50
	Total Coverage	33,932	31,966	21,560	67

According to the EPMIS Khyber Pakhtunkhwa, in district Lakki Marwat there are 33 union councils. The data reveals that the overall coverage of Pentavalent III in district Lakki Marwat is 67%. However, there are 25 union councils with less than 80% Pentavalent III coverage. The lowest coverage is reported as 31% in Samandi.

The data in the above-mentioned table is presented in descending order of the PENTA III coverage in Lakki Marwat district, in the graph as follows:



LHWs Involvement in Routine EPI

S. No	Name of Health Facility	Total Attached LHWs	Total Attached LHSs
1	Aba khel	20	2
2	Adam zai	15	1
3	Ahmad Khel	4	0
4	Bachakan Ahmed Zai	4	0
5	Begu Khel	12	1

District Profile: Lakki Marwat March 2022

6	Ghazni Khel	25	3
7	Jabu Khel	8	1
8	Langer Khel Hati Khan	14	0
9	Masha Mansoor	17	1
10	Nawar Khel	11	0
11	Pezu	15	1
12	Shabaz Khel	15	1
13	Taja Zai	9	1
14	DalloKhel	19	1
15	Mch center Lakki marwat	24	1
16	Landiwah	14	1
17	CH Tajori	15	1
18	Titter Khel	22	1
19	City Hospital Lakki	22	1
20	abdul Khel	9	1
21	CH Lakki-II	17	1
22	RHC Titter Khel-II	33	1
23	CD Kheru Khel	12	0
24	RHC Landiwah-II	23	1
25	CH Tajori-II	24	1
26	Behram Khel	0	1
27	Sulaiman Khel	13	1
28	Gandi khan khel	25	1
29	Kot Kashmir	17	1
30	Mama Khel	22	1
31	Manji Wala	26	1
32	Nar Muzaffar	20	1
33	Shatora Takhti Khel	17	1
34	CH Serai Naurang	18	1
35	MCH center Serai Naurang	28	0
36	Serai Gambila	27	1
	Total =	616	33

The LHW MIS data reveals that there are only 36/54 health facilities in which LHWs are attached. Therefore, the LHW coverage in the district Lakki Marwat is only limited to 67%.

The sub-optimal level of PENTA III coverage may be attributed to lack of LHWs attachment with the respective health facilities and lack of training in routine EPI. Moreover, lack of and delayed refresher courses in EPI are also noted as one of the contributing factors for updating the knowledge of LHWs in routine EPI.

District Profile: Lakki Marwat March 2022

The monitoring and supervisory role and capacity of Lady Health Supervisors is pertinent for effective service delivery by the LHWs. Therefore, lack of LHSs and lack of their capacity building in monitoring and supervision for routine EPI adds to the overall improved or poor EPI performance of the Haripur district.