

Community-Driven Development with Multisectoral Approach: A Case Study from Pakistan

Maqbool Ahmed Rahu¹, Shahida Perveen²

¹HANDS Welfare Foundation, Gadap Road, Karachi-75340, Pakistan; ²HANDS Welfare Foundation / HANDS Institute of Development Studies, Gadap Road, Karachi-75340, Pakistan

Corresponding Author: Dr. Shahida Perveen, HANDS Welfare Foundation / HANDS Institute of Development Studies, Gadap Road, Karachi-75340, Pakistan Email: shahida.perveen@hands.org.pk

Abstract

Background: NGOs are non-profit organizations that complement government efforts to address service-delivery gaps through counselling and implementation of community-driven programs in low-resource settings.

Objective: The present case study evaluates the HANDS Welfare Foundation's evolution as a leading organization and how organizational strategies and policy outcomes become a model of integrated, community-driven development.

Methodology: The current study employed a descriptive qualitative methodology using a document-based approach. Data were extracted from existing literature, official websites, media, and HANDS' organizational reports (1979–2024). Thematic analysis was carried out to build programmatic domains, including education, health, WASH, livelihoods, and disaster management services.

Results: The findings showed a 46-year journey of an organization that evolved from a single-room office to 59 districts across the country. Analysis explored that HANDS strategically set its goals with a basic to multisectoral approach to attain long-term sustainability, with ever-increasing progress year after year.

Conclusion: The 46-year journey of HANDS serves as a replicable model of a multisectoral approach for community-driven development.

Keywords: Community development, SDGs, NGOs, HANDS, WASH, Multisector, Rural Sindh

Received: 26-03-2026

Revision: 16-06-2026

Accepted: 17-07-2026

How to cite: Rahu MA, Perveen S. Community-Driven Development with Multisectoral Approach: A Case Study from Pakistan. Avicenna J Health Sci. 2026;03(02): 70-78

Introduction

Non-governmental Organizations (NGOs) play an important role in advancing the well-being of underserved populations by delivering community-centered programs, mobilizing resources, and implementing sustainable interventions that complement government efforts, thereby accelerating progress toward equitable development. Furthermore, NGOs develop their international linkages, secure direct aid, promote and implement their specific causes, and implement public policies by considering ethical and technical concerns.¹⁻² Earlier findings suggest that NGOs often play a more effective and better role than the government in delivering essential services such as quality education and healthcare in resource-limited communities.³ Pakistan, the 5th most populous country worldwide, faces systemic inequality, poor infrastructure, and limited access to basic needs that continue to affect the lives of millions of people, especially in rural and low-resource urban settings.⁴ The government, in partnership with NGOs is working diligently to address these challenges and

achieve the SDGs by 2030. National challenges such as poverty, hunger, low literacy rate, and poor quality of education, health, and gender equity can be addressed by ensuring that underprivileged populations have access to income-generating opportunities, quality education, and affordable healthcare services.^{5,6} Pakistan has a diverse nonprofit sector comprising charitable organizations, foundations, and civil society organizations. Prominent organizations include the Edhi Foundation, Akhuwat, The Citizens Foundation (TCF), and Alkhidmat Foundation.⁷ According to literature, many renowned NGOs across the globe often focus on a single SDG at a time. For example, the Gates Foundation mainly focused on achieving SDG 3 (Good Health and Well-being); in contrast, the Malala Fund focuses mainly on SDG 4 (Quality Education). In contrast, some welfare organizations adopt a more holistic, multisectoral approach by addressing multiple SDGs simultaneously to generate broader, more sustainable impact on communities. In Pakistan, the gap left by single-

sector approaches has been more challenging due to tenacious socioeconomic disparities, an inadequate healthcare system, and uneven access to education and basic services. To address the social and health challenges of the underprivileged population, a highly renowned pediatrician, Prof. Dr. Abdul Ghaffar Billoo (*Sitara-e-Imtiaz*), together with his dedicated medical students, started community-based health programs in 1979 in Malir district, Karachi.

Driven by his vision to uncover the root causes of poor health and social issues, he gradually converted his efforts into a well-organized development movement. In 1993, Prof. Dr. Abdul Ghaffar Billoo and Dr. Saeed Ismail co-founded the Health and Nutrition Development Society (HANDS) in 1993, which subsequently expanded its scope and developed into the present-day HANDS Welfare Foundation, hereafter referred to as HANDS. Over the years, HANDS has emerged as one of Pakistan's leading NGOs, adopting an integrated and multisectoral approach to promote sustainable community development and improve public health outcomes. Currently, it operates with the vision of "Quality of Life for All" in an equitable, humane, peaceful, and sustainable world.

Initially founded in a single-room office in Malir, Karachi, the HANDS has since grown into one of Pakistan's largest NGOs, as summarized in Table 1. With an annual budget of roughly PKR 6-7 billion, the HANDS provides advanced community-based services primarily in rural and underserved urban areas across Pakistan.⁸ Despite the growing number of NGOs in Pakistan, there is limited practical documentation of long-term, multi-sectoral development models. Using the 46-year experience of HANDS as a case study, this study assesses the extent to which an integrated, community-driven approach can promote sustainable development in low-resource settings in Pakistan. It is worth mentioning that HANDS was previously concerned mainly about the health and nutrition of mothers and children, thus named Health and Nutrition Development Society (HANDS), but over time, it grew far beyond this sector, "health," into other critical sectors such as education, livelihoods, WASH, infrastructure development, and allied facilities.⁹⁻¹⁰ Building on its successful experience in Sindh, HANDS has progressively expanded its operations beyond provincial boundaries to address the needs of underserved and

vulnerable populations across the country. Currently, HANDS is active in all provinces of Pakistan and continues to strengthen and broaden its network to reach previously unreached communities. The geographical outreach of HANDS is illustrated in Figure 1.

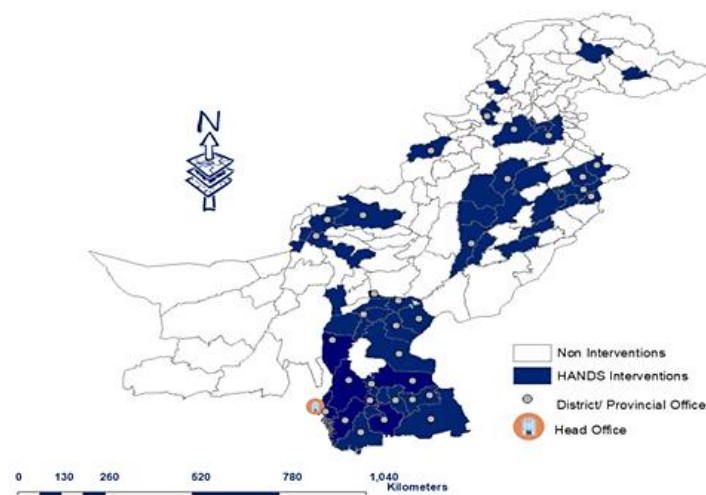


Figure 1: Geographical outreach of HANDS Welfare Foundation across Pakistan (2024).

In addition to community-based services, this Foundation achieved a milestone in education by establishing a degree-awarding institution named "HANDS Institute of Development Studies (HANDS-IDS)" in 2023. As a multidisciplinary institute, HANDS-IDS currently offers degree and diploma programs in business management, developmental studies, and nursing, which are aimed at expanding further to enrich the academic landscape. HANDS-IDS is providing scholarship-based higher education to deserving students who will contribute to the socio-economic development of the country. Collectively, HANDS is working in six major domains that are aligned with 17 UN (United Nations)-defined SDGs, including health, education, food security and livelihood, WASH, physical infrastructure and technology, inclusive development, and humanitarian services, as summarized in Figure 2.

This case study explores the key contributions of HANDS in enhancing the quality of life among underserved populations across Pakistan. It provides an evidence-based overview of HANDS' multi-sectoral approach, highlighting its role in advancing sustainable, community-driven development over the past 46 years. Key organizational characteristics,

including its institutional history, operational scale, geographic coverage, and guiding vision, are summarized in Table 1.



Figure 2: Snapshot of a multisectoral approach

Table 1: Key Characteristics of HANDS Welfare Foundation (1979–2024).

Characteristic	Description
Established	1979 (registered in 1993)
Headquarters	Karachi, Pakistan
Geographic Coverage	59 districts across Pakistan
Human Resources	9,602 staff members
Beneficiaries Reached	More than 7.2 million individuals
Vision	Quality of Life – For All in a Sustainable World

Figures reflect HANDS' operational data as of 2024, as reported in its organizational records; geographic coverage, staffing, and beneficiary numbers are updated annually and may vary in subsequent years.

Methods

The current case study employed a descriptive analytical design to evaluate the evolution, sustainability, and contributions of an NGO in Pakistan, as a model of a multisectoral approach. Research covered the period from 1979 to 2024, covering 46 years of institutional experience. The data were drawn from peer-reviewed literature indexed in PubMed, Scopus,

Google Scholar, organizational reports, media coverage relevant to the case study, and governmental reports and policy documents. Documents available for the period of 1979–2024 and published in English were included. The organizational statistics, including staff members, geographic coverage, and beneficiaries, are updated annually. Therefore, the figure should be interpreted as a snapshot rather than a static measure. Moreover, the data were systematically organized in themes such as education, health, WASH, livelihood, infrastructure development, and disaster management. Through this systematic approach, the role of HANDS was assessed in achieving SDGs in Pakistan.

Results

Based on the analytical framework and available data, the study assessed the multisectoral approach of an organization and its contribution to the uplift of marginalized communities. Taken together, the thematic analysis highlights the interrelated nature of HANDS efforts to foster sustainable and resilient communities. The analysis first focuses on education and literacy, as we believe that education is the foundation of community development in the long-term perspective.

Education and Literacy

Lack of education is the root cause of many national issues. Primary education is one of the core responsibilities of government, which must be offered free of cost to the entire population. Unfortunately, this task has not been achieved yet. Therefore, for decades, NGOs have been playing a critical role in promoting education in the areas where government efforts are limited or insufficient.¹¹ They provide accessible and affordable education and resources to underprivileged communities, especially in rural settings. Earlier studies have reported that the quality of education in government schools is not as good as in schools administered by NGOs and private schools.¹¹ In education, with the support of government, HANDS has been entrusted for the management of public schools through the Education Management Organization (EMO) model, representing an innovative public-private partnership approach. Furthermore, adult literacy programs and technical and professional skills (e.g., masonry training, beautician courses, vegetable gardening) for persons with

limited education are a major contribution of HANDS in promoting community development. HANDS currently operates 7,364 primary and secondary schools, with 46,647 trained teachers and 684,454 enrolled students all over Pakistan. Government of Sindh has entrusted HANDS with the management of several schools under the EMO model in Karachi, Larkana, Dadu, Sukkur, and Khairpur. In addition to primary and secondary education, HANDS is actively engaged in providing technical and professional education and training opportunities for young girls and women.⁸ The Community Midwifery Training School, accredited by the Pakistan Nursing Council (PNC), in Jam Kanda, Karachi, is one such initiative. The school has trained and graduated numerous young girls as well-trained midwives, who in turn contribute to improved maternal and child healthcare services in underserved and low-resource communities across Sindh and Balochistan. Most recently, HANDS-IDS has been established as an impactful degree-awarding institution of higher education under the umbrella of HANDS, which provides scholarship-based higher education to deserving students. Jointly, these initiatives are playing a vital role in reducing illiteracy and empowering youth who can't afford higher education. The true impact of these educational interventions is evident in the improved opportunities and transformed lives of individuals and thus the community. The comprehensive futuristic approach of HANDS covers early childhood education, technical training for youth and non-skilled persons, adult literacy, and a remarkable contribution in higher education in the form of HANDS-IDS, research, and capacity development, exhibiting a powerful model for sustainable community development.

Health

Healthcare always remains a core pillar of HANDS interventions. Initially, from 1979-1992, the organization pioneered community-based primary healthcare models, particularly for maternal, neonatal, and child health (MNCH), initially voluntarily before receiving formal project funding. However, after 1993, HANDS started working as a formally registered organization. Over the years, it expanded its services to include family planning counseling and practical healthcare support.¹² HANDS has the distinction of introducing a cadre of community-based

outreach health workers in the remote districts of Sindh, where there were no Lady Health Workers (LHWs) between 1999 and 2003. The women are trained to serve their community as Marvi (HANDS-deployed lady health worker in Sindh), Misali/Noor workers (HANDS-deployed lady health worker in Punjab), providing essential health services in underserved areas that are not covered by the governmental LHW program.¹³ HANDS interventions have also significantly improved health outcomes (reduced morbidity and mortality rates) in areas where little to no formal healthcare infrastructure is available through the telehealth digital app "Asan Sehat". This platform fills the gap by offering remote consultations via mobile technology on all health-related issues, especially during emergencies. The "Asan Sehat" digital app will have a lasting impact on rural communities where transport and resources are not always accessible.

Livelihoods and Economic Empowerment

To enhance economic resilience and reduce poverty (SDG1), HANDS has implemented a range of livelihood and income-generation initiatives aimed at promoting financial inclusion and household self-sufficiency. Business in a Box" (BiB) model, interest-free microfinance, and the Marvi worker network and its sustainability are several successful models of livelihood, in particular for women's empowerment. Through the BiB initiative, small grants are provided to establish microenterprises, particularly those led by women. The Marvi worker model combines income generation with health promotion and social mobilization, expanding from 300 workers in one district to 3,950 workers across 15 districts and reaching more than four million people, including approximately 850,000 women and adolescent girls. In addition, the Interest-Free Loan (IFL) program, implemented in collaboration with the Pakistan Poverty Alleviation Fund (PPAF), distributed PKR 212 million among 6,703 borrowers in 2024⁸. Collectively, these initiatives have contributed to improved livelihoods and economic empowerment in underserved communities.¹ Through these keen efforts, HANDS is contributing significantly to the alleviation of poverty and in enhancing Pakistan's broader socioeconomic development, particularly SDG 1.

WASH

Access to clean water is a fundamental human need that is strongly associated with the prevention of

almost all waterborne diseases, such as stomach and gastrointestinal complaints which are more common, especially in children.^{14,15} Millions of people across the country do not have access to clean drinking water, and rural women have to travel long distances to fetch water from wells, requiring considerable time and physical effort. These challenges not only affect health but also hinder education, livelihoods, and overall quality of life, especially for women and children. HANDS has made extensive efforts to provide safe and clean drinking water to the underprivileged population across Pakistan through its several WASH projects. As of 2024, 65 PAUL filter plants (Germany) have been installed across several rural districts of Pakistan with the cooperation of partners.⁸ HANDS interventions have improved the lives of local communities and prevented them from recurrent ailments. The services have also extended to sanitation and hygiene improvements. Notable achievements include open defecation-free villages through the construction of community toilets, which have significantly improved overall sanitation systems. These approaches lead to healthier communities with a low spread of infectious diseases.

Physical Infrastructure and Technology Services

HANDS's services related to the provision of Housing and Affiliated Facilities are committed to strengthening infrastructure in underserved regions and successfully developing model villages. Most rural communities in Pakistan, especially in interior Sindh, lack access to even essential utilities and adequate housing infrastructure. In 2022-23, HANDS implemented nine projects across 33 districts (12,363 villages/towns) with 1.07 million beneficiaries, aimed at delivering low-cost shelter, improving community physical infrastructure, enhancing communication systems, and implementing alternative energy schemes with support from the government. Moreover, it provides energy solutions to low-income communities, such as the distribution of solar panels. Notably, most of the HANDS offices across Pakistan are powered entirely by solar systems. One of the upcoming milestones is the transformation of entire villages to solar energy, which is among several objectives of HANDS.

Inclusive Development and Humanitarian

The global climate is changing rapidly due to harmful human activities. Global warming is alarming and is leading to a higher frequency of natural

disasters, including floods, heavy rain, droughts, storms, hurricanes, and wildfires.¹⁶ Inclusive Development and Humanitarian Services (ID&H) is a core department of HANDS that supports marginalized and vulnerable communities through integrated development initiatives and timely humanitarian assistance. It supports the populations affected by climate change, natural disasters, and social exclusion. ID&H ensures that no one is left behind in the journey towards the development of sustainable communities. In addition to this, HANDS regularly organizes seminars, events, and community discussions on national disaster management and planning in partnership with other stakeholders, including the Provincial Disaster Management Authority (PDMA) and academia (universities).

Model Villages

A renowned national English newspaper reported on the HANDS contribution to building 25,000 model villages with all necessities in rural areas of Sindh, undertaken with the support and trust of the Government of Sindh.¹⁷ This achievement reflects the organization's long-standing commitment to community empowerment and its vast experience in planning, implementing, and sustaining integrated, people-centered development at scale. One such example is the integrated MISALI (Model) Village in Essa Rajero Union Council, Gharo, district Thatta, a coastal settlement 5 km from Gharo city with 90 households and a population of 700-800. Before the heavy rains of 2022, livelihoods in the village were relatively diversified, with 50% households dependent on fishing, 40% on agriculture, and 10% on private jobs and daily-wage labor; several women also earned income through embroidery and sewing. The floods altered this balance sharply: nearly 95% of households lost their agricultural land to seawater intrusion, leaving more than 90% of the village now reliant on fishing and daily-wage labor. The Misali Model Village project was designed in response to this shift, aiming to help the flood-affected community sustain itself within available resources, return to normal life, and address the interlinked burdens of poverty, illiteracy, and illness.¹⁶

Independent Living Centers

The term "disability" is very broad. Every country defines it differently. There is no single universally accepted definition. Disability is a part of human life, and around the world, many people live with disabili-

lities. Estimates suggest that over one billion people have some form of disability, with 80% residing in developing countries.^{18,19} HANDS has been a strong advocate for persons with disabilities (PWDs) and operates several Independent Living Centers (ILCs) in Pakistan. Currently, HANDS manages 10 ILCs serving 9452 PWDs in partnership with other organizations.

Discussion

NGOs have emerged as important players in addressing economic, environmental, and social development challenges worldwide.²⁰ Their capacity to mobilize communities, implement targeted interventions, and complement government efforts makes them significant partners in attaining sustainable development goals. In Pakistan, NGOs have been playing a vital role for a long time in bridging service delivery gaps in remote and underserved regions where public resources are limited. A multisectoral approach, defined as deliberate collaboration among stakeholders across sectors to achieve common development objectives, provides an appropriate framework for addressing the complex and interconnected determinants of poverty and social inequity.²¹

In this context, HANDS represents an illustrative case of an indigenous, community-based organization that can evolve into a national development institution through sustained community engagement and integrated programming. Pakistan's most prominent organizations, including Edhi Foundation, Akhuwat Foundation, The Citizens Foundation, and Al-Khidmat Foundation, are each anchored in a comparatively narrower service mandate, including emergency and welfare services, interest-free lending, formal education, and relief work, respectively. Whereas globally, organizations such as the Gates Foundation and the Malala Fund similarly concentrate on a single SDG. In contrast, HANDS' evolution from a single-sector maternal and child health initiative in 1979 into a six-domain institution illustrates an alternative pathway, rather than scaling a single intervention, this organization expanded its mandate incrementally, in response to needs identified through its own community presence. Thus, the findings of the present case study demonstrate that multisectoral and integrated capacity of an NGO may be less a matter of initial design than of organiza-

tional maturation. An institution earns the trust and infrastructure needed to expand into adjacent sectors only after establishing credibility in one. The 46-years of seamless efforts highlight how sustained investment in community development can contribute to improving healthcare access, WASH, education and literacy, and income-generating opportunities (livelihood). Furthermore, initiatives such as the Marvi worker model and BiB exemplify context-specific and gender-responsive approaches that contribute to women's empowerment and socioeconomic resilience. These interventions are closely aligned with the SDGs, particularly SDG 1 (No Poverty), SDG 3 (Good Health and Well-being), SDG 4 (Quality Education), and SDG 5 (Gender Equality).

Moreover, the study explored the significance of strict policies and adaptive capacities in enhancing development impacts. Advancement of technologies is also incorporated, such as Asan Sehat telehealth App, solar powered model villages. These practices are well aligned with internationally renowned development organizations, namely UNICEF, WHO, and UNDP.²²

Earlier literature also demonstrated that inter-sector integration improves resilience and scalability of development sector, especially in regions where poverty, lack of education, and poor healthcare are deeply rooted.²⁰ Moreover, the organization invests exclusively in human resource development and continuous capacity-building of staff, community members, and mobilizers.²⁴ Overall, the findings suggest that integrated, community-driven, and adaptive development models offer an effective framework for addressing multidimensional poverty in resource-limited settings. The HANDS' experience /services underline the importance of long-term institutional presence, community ownership, gender-inclusive programming, and innovation in promoting sustainable development. However, even after substantial contributions to community development, several challenges are still need to be addressed, which may influence the long-term sustainability and scalability of the HANDS integrated model, including dependency on donor funding, limited longitudinal data, and limited reach in conflict-affected areas. Future efforts should be focused on strengthening monitoring and evaluation frameworks, generating robust longitudinal

evidence, and exploring innovative approaches, including digital health technologies, renewable energy solutions, and locally driven financing mechanisms. In conclusion, HANDS-Pakistan is an exemplary case study that serves as a true catalyst for positive societal change. Additionally, it serves as an excellent model for social sciences students interested in understanding how to build and grow an NGO. Starting from just a few villages, it expanded to more than 30,000 villages, developed from a single-sector effort to a multisectoral organization, and grew from one city to more than 59 districts across the country.

Conclusion

This case study determines HANDS as a model NGO that serves as an integrated, multisectoral, and scalable development model capable of transforming underprivileged communities through sustained, multisectoral engagement. Its evolution offers several impactful lessons: the power of community-ownership, gender-inclusive programming, adaptive service delivery, and the value of long-term institutional commitment.

Conflict of Interest / Disclosure: Nil.

Funding Source: Nil.

Authors' Contribution:

MAR: Final approval of the version to be published

SP: Acquisition of data, Conception and design, drafting of article, analysis and interpretation of data, critical revisions for important intellectual content

References

1. Abiddin NZ, Ibrahim I, Aziz SAA. Non-governmental organisations (NGOs) and their part towards sustainable community development. *Sustainability*. 2022;14(8):4386. Doi: <https://doi.org/10.3390/su14084386>.
2. Murphy DF, Stott L. Partnerships for the sustainable development goals (SDGs). *Sustainability*. 2021;13(2):658. Doi: <https://doi.org/10.3390/su13020658>.
3. Saud M, Ashfaq A. NGOs schools are promoting education for sustainable development in rural areas. *Glob Soc Educ*. 2022;20(5):682–694. Doi: <https://doi.org/10.1080/14767724.2021.1993796>.
4. Ahmed SH, Zahid M, Waseem S, Zafar A, Shaikh TG, Sabri T, et al. The current state of primary healthcare in Pakistan: a way forward for low-to-middle income countries. *Prim Health Care Res Dev*. 2024;25:e59. Doi: 10.1017/S1463423624000549.
5. Koshy P. The role of NGOs in attaining the SDGs. *UN Today*. Available from: <https://untoday.org/the-role-of-ngos-in-attaining-the-sdgs/>. Accessed August 21, 2025.
6. The role of NGOs in promoting sustainable development through tree planting. One More Tree Foundation. Available from: <https://one-more-tree.org/blog/2023/11/01/the-role-of-ngos-in-promoting-sustainable-development-through-tree-planting/>.
7. Khan MSM, Harvey C, Price MJ. Philanthropy and socio-economic development: the role of large indigenous voluntary organizations in bridging social divides in Pakistan. *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations*. 2023;34:1335–1346. doi:10.1007/s11266-022-00554-8
8. HANDS Welfare Foundation. HANDS Profile 2024. Karachi: HANDS Welfare Foundation; 2024. Available from: <https://hands.org.pk/wp-content/uploads/2025/08/Profile%202024.pdf>.
9. HANDS Welfare Foundation. Our journey. Karachi: HANDS Welfare Foundation; [cited 2026 March 20]. Available from: <https://hands.org.pk/our-journey/>
10. Ali M, David MK, Khoso PA, Iqra SK. Communication and Community Participation: Focus on the Role of NGOs in Pakistan. *J media commun*. 2020; 1(2): Doi: 10.46745/ilma.jmc.2020.01.02.12
11. Lemma BB. The role of local NGOs in promoting primary education: Evidence from six local NGOs in Sidama zone, SNNPRS, Ethiopia. (2019). *Journal of Economics and Sustainable Development*. Doi: 10.7176/JESD/12-17-04
12. HANDS Welfare Foundation. Health service department: health facilities in Karachi. HANDS Welfare Foundation. Available from: <https://hands.org.pk/health/>
13. Rahu MA, Shaikh Q, Baloch N, Sario Z, Perveen S, Malhi P. Assessment of Sexual and Reproductive Health Interventions in Rural Sindh: A Community-Based Cross-Sectional Study. *Avicenna J Health Sci*. 2025;02(04):174-181
14. Pal M, Ayele Y, Hadush M, Panigrahi S, Jadhav VJ. Public health hazards due to unsafe drinking water. *Air Water Borne Dis*. 2018;7:1000138. doi: 10.4172/2167-7719.1000138
15. Rahu MA, Baloch N, Perveen S. Drinking Water Contamination as a Consequence of Environmental Pollution and Its Implications for Public Health. *Clean Water and Sanitation*. 2026; 1 (1): 2.
16. U.S. Geological Survey. How can climate change affect natural disasters? Reston (VA): U.S. Geological Survey. Available from: <https://www.usgs.gov/faqs/how-can-climate-change-affect-natural-disasters>.

17. Dawn. HANDS is all set to develop 25,000 model communities by 2030. Dawn. 2022 Apr 13. Available from: <https://www.dawn.com/news/1684497>.
18. Hussain S, Alam A, Ullah S. Challenges to persons with disabilities in Pakistan: a review of literature. *J Soc Sci Rev.* 2022;2(3):35–42. Doi: <https://doi.org/10.54183/jssr.v2i3.46>
19. Hussain S, Alam A, Ullah S. Persons with disabilities and the profession of social work in Pakistan: a review of literature. *Pak J Soc Educ Lang.* 2023;10(1):282–290.
20. Brown LD, Khagram S, Moore MH, Frumkin P. Globalization, NGOs and multi-sectoral relations. Rochester (NY): Social Science Research Network; 2000. Doi:10.2139/ssrn.253110.
21. Multisectoral approach for promoting public health. *Indian J Public Health.* 2017;61(3):163-168. Doi: 10.4103/ijph.IJPH_220_17.
22. Lehot L. Investigation of the use of multi-sectoral integration by NGOs: a case study with Intermon Oxfam [dissertation on the Internet]. Loughborough: Loughborough University; 2020. <https://doi.org/10.17028/rd.lboro.13072127>
23. Yan X, Lin H, Clarke A. Cross-sector social partnerships for social change: the roles of non-governmental organizations. *Sustainability.* 2018;10(2):558. Doi: <https://doi.org/10.3390/su10020558>.
24. Memon, M., Mithani, S. (2003). Enhancing institutional capacity building of non-governmental organizations (NGOs) and community based organizations (CBOs): Impact of an innovative initiative. *Impact: Making a difference*, 265-277. https://ecommons.aku.edu/book_chapters/46



This open-access article distributed under the terms of the Creative Commons Attribution License (CC BY 4.0). To view a copy of this license, visit <https://creativecommons.org/licenses/by/4.0/>