Pakistan Hunza Lake

Immediate Needs for Women and Children affected by landslides and floods

Al-Azhar temporary camp for internally displaced persons.

4 June 2010
1. CRITICAL ISSUES FOR CHILDREN AND WOMEN

UNICEF is gearing up its emergency response activities generated by the eventual breach of Atta Abad Dam, which has so far resulted in the preventive relocation by the Government of Pakistan of close to 30,000 persons to avert the humanitarian consequences of a major flash-flood downstream, the Hunza River.

On 4 January 2010, a massive mountain landslide blocked the natural course of the Hunza River and created a natural dam of almost a kilometre width. The landslide blocked the south stream of the river, flooded a large area creating a natural lake that submerged three villages affecting 312 households as well as the 16 km of the Karakoram highway (KK Highway), the only land route towards the north of Gilgit-Baltistan thus isolating 25,000 persons. The actual landslide resulted in the destruction of two villages and required 141 household to be evacuated to a safer location. Water from the Hunza Lake started flowing over the spill way on May 29 and the current discharge of water from the lake is 1050 cusecs. The apprehension is that the dam would eventually burst and heavy outflow of water would cause flash-floods in the downstream areas. National Disaster Management Authority (NDMA) is constantly monitoring the situation and has, together with relevant authorities of Gilgit-Baltistan, coordinated the relocation of nearly 30,000 persons to safer grounds in over 30 temporary camps in three districts. Moreover, the NDMA and local partners have established a dam monitoring committee and an early warning alert system to ensure the alert to the population rapidly in case of a flash-flood.

The key humanitarian needs for the 30,000 person relocated to temporary camps are the provision of safe drinking water, sanitation facilities and hygiene promotion services; provision of emergency medical and nutritional supplies; immunization against vaccine preventable diseases and educational and recreational activities.

UNICEF, along with its partners, is currently supporting the Government of Pakistan with the immediate provision of water, sanitation and hygiene promotion services for up to 40,000 persons relocated downstream and cut off upstream with the provision of emergency medical and nutritional supplies. UNICEF is further supporting a measles campaign targeting 15,000 children under five and structuring educational and recreational activities in over 30 camps. UNICEF is currently drawing up plans to support the people isolated by the submersion of the Karakoram Highway in upper Hunza. To support these activities, UNICEF has deployed an emergency team on the ground to work closely with the local authorities to avert the humanitarian consequences of this impending natural disaster.

In line with the Core Commitments for Children (CCC), UNICEF will focus its initial response on Health and Nutrition, WASH, Education and Child Protection. UNICEF requires **US$7,147,600** to respond to the immediate needs of women and children temporarily relocated in camps downstream and those isolated in upper Hunza by the submersion of the Karakoram Highway.

2. UNICEF’S EMERGENCY RESPONSE: ISSUES & RESULTS

HEALTH

Issues

Through active coordination with the Department of Health, NDMA/GBDMA, INGOs and local NGO sectoral partners, UNICEF has been identifying needs to support the national emergency response and provide medical services to communities in camps and population stranded in upper Hunza.

The impact of the landslide has limited the capacity of the health infrastructure in upper Hunza to provide obstetrics and midwifery services, monitor and react to disease outbreaks. The temporary
relocation of population at risk to camps requires urgent provision of basic health care, disease outbreak preventive measures and the deployment of emergency medical teams to prepare for any large scale emergency response.

**Urgent Actions**

- UNICEF is supporting measles mop up in the affected union councils through Department of Health Gilgit Baltistan which started on 20 May. To date coverage is over 14,000 children out of a total target of 15,000.
- UNICEF has provided two Improved Emergency Health Kits to the Director Health Services on 18 May, now being used. Each kit is sufficient for a population of 10,000 for three months.
- UNICEF has further provided cash assistance to support transportation and mobilization of Health Care Providers to service delivery points.
- UNICEF will provide medical equipment such as midwifery kits, trauma kits and cholera kits to avoid epidemics and support obstetric and midwifery services.

In collaboration with partners and authorities UNICEF aim to vaccinate 15,000 children aged between 9 months and 5 years against measles. In addition UNICEF aims to support the government’s health facilities of the areas hosting displaced persons to ensure provision of basic primary health care services, including maternal, newborn and child health services and health education to prevent diarrhoea and respiratory diseases. This will include about 9,000 children under five years of age, 1,300 infants and 2,600 pregnant and lactating women.

**NUTRITION**

**Issues**

In addition to the loss of food at household level, the distress caused by the natural disasters negatively affects the feeding pattern of young children. Although information on the feeding practices and nutrition status of the affected population is scarce at the moment, UNICEF plans to ensure the provision of high energy food and multi-micronutrients supplementation for children aged between 6 and 59 months, pregnant and lactating women, to ensure the nutritional status of children does not deteriorate as a consequence of the impending emergency downstream and the cut off of communication upstream.

**Urgent Actions**

- UNICEF is planning to put in place emergency nutrition intervention to cover 7,500 children aged between 6 and 59 months and 4,000 pregnant and lactating women to ensure that malnutrition rate is maintained below the 10 per cent emergency threshold.
- UNICEF is planning to procure and organize the distribution of emergency food rations (BP-5 biscuits) to all affected children aged between 6 and 59 months, pregnant and lactating women for two initial weeks, and fortified blended food for another two weeks as blanket feeding.
- UNICEF will provide multi micronutrient supplementation to all children aged between 6 and 24 months, pregnant and lactating women for the first three months.
- UNICEF will promote and support optimal infant and young child feeding (IYCF) practices, and monitoring of any donations of breast milk substitutes.
- As an immediate measure, UNICEF is deploying 800 cartoons of emergency food rations from its contingency stock to benefit 4,570 children for one week.

**WATER AND ENVIRONMENTAL SANITATION**

**Issues**

Based on the establishment of over 30 camps, there is an urgent need to provide WASH facilities including clean drinking water, sanitation facilities and hygiene promotion along with the provision of hygiene kits and soap.
Besides the estimated 30,000 Internally Displaced Persons (IDPs), downstream, about 25,000 persons are cut off upstream of the lake in the villages of Gulmit, Passu, Sost, Shimshal, Chapurson and Misgar in Tehsil Gojal, Hunza District. The lake hazard has not only impoverished the region but curtailed access to basic services. The water sources have been severely affected following the flooding of the area. The sanitation systems are also damaged, leaving the population without access to safe water supply and adequate sanitation facilities and therefore susceptible to water borne diseases, particularly dangerous for children. In view of the current situation, the water and sanitation infrastructure needs rehabilitation.

**Urgent Actions**

- UNICEF and partners are providing WASH services i.e. safe drinking water, sanitation facilities and hygiene materials to 25,000 people, both in IDP camps and communities to avert the spread of infectious disease and reduce the incidence of water borne diseases, particularly among young children. Basic hygiene messages will be provided through Lady Health Workers, school teachers and volunteer organization i.e. Boys Scouts and Girl Guides to sensitize the population and avoid health hazards.
- So far, UNICEF has provided 800 latrine slabs, tarpaulin sheet rolls and superstructure; 5,000 hygiene kits and 8,000 soaps; and 4,000 jerry cans as well as Aquatabs and PUR Sachets to facilitate the provision of water supply, sanitation facilities and hygiene promotion materials benefitting 20,000 people, mostly in IDP camps.
- Through collaboration with Public Works Department (PWD) and WASH implementing partners, the water quality is assessed and monitored in the IDP camps.
- Effective WASH coordination mechanism is established, ensuring that critical WASH needs and vulnerabilities are identified and critical gaps filled.

UNICEF, as the cluster lead agency for WASH, is working closely with partners including the PWD (which has overall responsibility for WASH), the Agha Khan Building and Planning Services Pakistan (AGPBSP) and the Disaster Management Authority to identify needs and support the emergency response.

**EDUCATION & CHILD PROTECTION**

**Issues**

Due to the lake formation, 6 schools have sunk causing 782 children (335 boys and 447 girls) to move to nearby schools, leading to overcrowding of these host schools. Additionally, 12 schools with 1,167 students could be affected should a flash wave occur. Furthermore, out of 22 camps established in Gilgit and Hunza Districts, 20 are currently used as temporary IDP shelters.

Additionally, parents of children attending NGO schools in Upper Hunza are unable to pay the school fees due the loss of livelihoods incurred as a result of the submersion of the Karakoram Highway, the only communication means which allowed commerce. This is affecting children by either forcing them to drop out or reenrol already overcrowded schools.

Communities are also suffering from the uncertainty caused by their temporary relocation downstream and loss of livelihoods upstream. Children and teachers are therefore at risks of suffering from anxiety and distress, placing the provision of psychosocial support as a priority.

**Urgent Actions**

The proposed response plan in the first three months aims to reach approximately 50 per cent of the total affected population of children, (5,000 children aged between 3 and 5 and 8,000 primary school-aged children and 4,000 children above 12 years of age) through one or more of the following activities:
• In partnership with the DoE, AKDN and local partners, establish safe learning spaces and temporary learning centres for primary school-aged children.
• Supply early childhood kits, school-in-a-box, recreational box, tarpaulin and plastic sheets to establish safe learning spaces and temporary learning centres. Provide Tin Trunk libraries to the learning centres.
• Integrate psychosocial counselling, nutrition feeding, health and hygiene education to children in the safe learning spaces and temporary learning centres.
• Work in partnership with Government health services/health sector to provide medical treatment and facilitate deliveries to children and teachers.
• Establish learning centres to resume teaching learning activities in the IDP in the Camps covering primary school aged children.
• Support formation of children’s clubs in the IDP camps and provide peer mobilisation training.
• Identification of full-trained volunteer teachers and capacity building to fill the gap of primary teacher.
• Monitoring of any grave violations against children and other child protection concerns.

UNICEF and partners are working to provide children with a safe and stimulating environment for their development; in collaboration with communities and government, restore education activities; provide psychosocial care to all children with special attention to the most vulnerable children; provide education materials; and identify community members to act as para-teachers to reinforce education temporarily. UNICEF is also supporting the establishment of a cluster mechanism led jointly by the Department of Education and a local NGO to coordinate education and recreational activities in camps for all children aged between 3 and 8 years. Additionally, UNICEF is supporting the identification and training of teachers and facilitators to provide early activities in camps.

3. FUNDING REQUIREMENTS (June to August 2010)

Timely funding is needed to meet the immediate needs of children and women affected by the landslides and floods. UNICEF is urgently requesting an initial US $7,147,600.

Table 1. Estimated funding requirements from June to August 2010

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<thead>
<tr>
<th>Sector</th>
<th>US$</th>
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<tbody>
<tr>
<td>Health</td>
<td>321,000</td>
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<tr>
<td>Nutrition</td>
<td>513,600</td>
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<td>Water and Environmental Sanitation</td>
<td>5,350,000</td>
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<tr>
<td>Education and Child Protection</td>
<td>963,000</td>
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<td><strong>Total</strong></td>
<td><strong>7,147,600</strong></td>
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*The total includes a maximum recovery rate of 7%. The actual recovery rate on contributions will be calculated in accordance with UNICEF’s Executive Board Decision 2006/7 dated 9 June 2006.

Further information on the UNICEF emergency programme in Pakistan can be obtained from:

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