PROGRESS REPORT

CHILDREN IN PAKISTAN
One Year After the Floods — Turning Towards a Brighter Future

July 2011
I, like others, was shocked to see the devastation from the 2010 flooding and its impact on children in Pakistan. Over the past year, the global community, including UNICEF, has launched a massive response, reaching millions with clean water, critical nutrition, immunizations, education and other essential services to protect children and their families. Today, there is still much more to be done to address the underlying conditions that made these communities so vulnerable, and to help them build resilience. Together, we can turn the tide in the lives of children and families of Pakistan who have suffered so terribly.

Anthony Lake, UNICEF Executive Director
Executive Summary

The 2010 Pakistan floods represent one of the largest disasters ever recorded in terms of area and number of people affected. After massive displacement, millions have returned - some immediately, others after months - to critical conditions: no homes, no food, no livelihoods, no clean water or sanitation, damaged infrastructure and depleted health and social services. The poorest suffered the most losses, many without assets to help recover from the devastation. The floods heightened the vulnerabilities of millions of people, who, one year on, are still struggling to rebuild their lives in the face of extreme challenges.

Immediately after the floods and for months subsequently, ensuring the survival of millions of children was UNICEF’s imperative. Drawing on global resources and critical donor assistance, UNICEF Pakistan quickly set up three emergency hubs, more than doubled staff numbers and initiated massive supply procurement. For the year, huge results targets in many sectors were set, reached, and in some cases surpassed by UNICEF, working with government and partners. Guided by an Inter-Agency Survival Strategy comprising Health, Nutrition, WASH and Food clusters, responses were coordinated within and across sectors. Some interventions reached millions - numbers akin to the entire population of New Zealand (in WASH) and Greece (in Health) - and the following results reflect 93 per cent coverage or higher: partnering with the government and World Health Organization (WHO), UNICEF supplied measles and polio vaccines to 10.4 million and 11.7 million children respectively, in all flood-affected districts; UNICEF provided daily access to safe water for 5 million people through water trucking and water scheme rehabilitation; UNICEF established systems for sustained service delivery, benefiting more than 294,000 children with education through Temporary Learning Centres and 397,000 children with protective Child-Friendly Spaces; and UNICEF attempted a large-scale, complex nutrition response, reaching 95,000 children under five with severe acute malnutrition and 256,000 children with moderate acute malnutrition. Initial nutrition targets were surpassed but have been revised upwards as the floods exposed the critical malnutrition situation in Pakistan.

Ensuring early recovery efforts reached those most in need, UNICEF led the development of a Pakistan Integrated Nutrition Strategy and aided the government to launch scaled-up rural sanitation through the Pakistan Approach to Total Sanitation. Construction of Transitional School Structures, with teachers trained in child-friendly schooling and protection, is ensuring continued education access for children, and is providing an opportunity to increase enrolment rates for those previously out of school.

To date, UNICEF has deployed 73 dedicated staff at national and sub-national levels to meet its accountabilities for supporting strategic response coordination. From February 2011, the humanitarian clusters transitioned to Early Recovery Working Groups and UNICEF has led the Water and Sanitation, Health and Nutrition (with WHO), and Education (with Save the Children) ERWGs and the Child Protection Thematic Working Group, with the federal structures still mirrored at provincial level. Early recovery assessments and capacity gap analyses led to revised strategies for every sector, now being implemented; and contingency plans and emergency preparedness actions have been undertaken for the 2011 monsoon season. The timeframe for early recovery action was officially extended from July 2011 to December 2011, allowing for continued vital assistance.

A year on from the floods, hope and a sense of normalcy pervade for many; for others living on the margins, life-and-death urgency remains. Enabling new data collection and access to vulnerable populations, the floods exposed the full extent of inequity challenges in many areas, particularly for nutrition and sanitation, yet have also presented new opportunities to address these through evidence-based programming. UNICEF is committed to the poorest children and women of Pakistan and our ongoing focus will be on assisting them as well as advocating for increased resource commitment from the government and strengthening partner capacity at all levels. The organization still requires US$49.5 million to continue its essential flood response programmes and an additional US$6.2 million for nutrition where UNICEF’s flood funding ceiling is reached but critical humanitarian needs remain. With sustained support, UNICEF can continue to provide assistance, strengthen resilience, build capacities for social service delivery and cultivate an environment in which Pakistan’s women and children can thrive.
Overview

The unusually heavy monsoon rainfall in July and August 2010 caused flash floods in the north of Pakistan, with the floodwaters travelling downstream, swelling rivers, breaching embankments and sweeping over barrages in the south. The floods affected 78 out of 141 districts in four provinces, at the peak covering one fifth of Pakistan, an area the size of Austria, Switzerland and Belgium combined. More than 18 million people of a population of 187 million were affected by the floods which devastated rural areas, communities, health facilities and basic social services across the entire country, from the Himalayas to the Arabian Sea.

The urgent needs in the immediate flood aftermath were food, water, sanitation and shelter. Yet the continued evolution required multiple concurrent response strategies to address the varying needs in different areas: in Khyber Pakhtunkhwa (KP) and Punjab provinces the response quickly transitioned towards recovery and reconstruction, while in Sindh and Balochistan provinces the displacement and return patterns remained complex for months. One year on, 97 per cent of the flood displaced population have returned home, many to dire circumstances.

The impact of the floods will continue to be felt for years to come. The Disaster Needs Assessment estimated damages at US$9.7 billion. Around 50,000 square kilometres and 2.2 million hectares of standing crops were destroyed and half a million livestock were lost; 1.7 million homes and nearly 10,000 schools were damaged or destroyed and millions of livelihoods were destroyed. Families hosting displaced relatives for months exhausted their own savings and assets. Without sustained action to ensure recovery, there is a great risk of many people entering a downward spiral of increasing vulnerability.

In the 12 months after the floods, UNICEF mobilized national, regional, and global resources to reach children and women with supplies and services, mounting one of the largest emergency responses in its history in terms of human and financial resources. UNICEF has achieved many remarkable results, contributed to the coordination of the wider humanitarian response, and will continue to support the vital needs of women and children to reduce vulnerability to disaster and build a better future.

Fast Facts

Scale/Impact

- The floods affected 18 million people, severely affecting 1.4 million women and 3.9 million children.
- 53,000 flood-affected IDPs remain in camps. Around 97 per cent of flood-displaced people have returned home, facing a lack of facilities, infrastructure, safe drinking water, schools and health clinics.

UNICEF’s Response Achieved with Partners (July 2010 - July 2011)

- 5 million people have daily access to clean drinking water.
- 11.7 million children in the flood-affected districts have been vaccinated for polio and 10.4 million children for measles.
- UNICEF screened over 2 million children under five for malnutrition, providing treatment for 95,000 with severe acute malnutrition and 256,000 with moderate acute malnutrition.
- 294,000 children benefited from 4,250 Temporary Learning Centres.
- 397,000 children benefited from 1,200 Child-Friendly Spaces.
- Since July 2010, UNICEF ordered US$99.2 million worth of supplies, including over US$46.5 million from suppliers in Pakistan and US$52.7 million of offshore supplies.
- UNICEF transitioned from Cluster Lead Agency to lead the Water and Sanitation, Health and Nutrition (with WHO), and Education (with Save the Children) Early Recovery Working Groups and the Child Protection Thematic Working Group, over the year deploying 73 staff to support coordination efforts.

UNICEF’s funding requirement was US$251.1 million, with a remaining funding gap of US$49.5 million as of 6 July 2011.
Vulnerabilities of Women and Children

The pre-flood challenges facing Pakistan in achieving the Millennium Development Goals (MDGs) - widespread chronic malnutrition, inadequate sanitation practices and lagging school enrolment rates - were aggravated by the floods and a year on still affect millions.

- Access to improved water sources and toilet usage dropped and these remain critical issues.
- The incidence rate of diarrhoea and acute respiratory infections has increased while access to health facilities has fallen.
- The Flood Affected Nutrition Surveys revealed critical global acute malnutrition rates in Sindh and in Punjab.
- The primary school enrolment rate has been negatively affected.
- Protection issues remain, including trafficking and exploitation, child marriage and child labour.
- In north-western Pakistan, more than 1 million people (including flood-affected) remain displaced following the 2009-2010 militant action, with new operations in 2011 displacing more than 5,000 additional families.

The floods created new vulnerabilities while exacerbating existing ones. Debts incurred from lost crops and re-planting are high. Many communities lack services, infrastructure, safe drinking water, schools and health clinics. The poorest of the poor - many living in flood-risk zones - suffered the heaviest proportional losses, sinking even further into poverty. Displacement brought those from previously unreached rural areas into camps, revealing to responders the full extent of their vulnerabilities, particularly in nutrition, education and sanitation.

The comprehensive flooding also left fluvial structures damaged and vulnerable, elevating the risks of crisis that could occur from the regular monsoon season.

Challenges continue to affect service delivery and raise costs of early recovery efforts, including: the sheer size and geographical spread of the population affected and the logistical difficulties in delivering assistance; the limited number and capacity of partners and the negative impact of the floods on community service providers themselves; and lack of access to areas and security risks due to militant actions.

Coordinated Early Recovery Action

Seeds of hope continue to be sown through strategic,
coordinated early recovery action. To meet its accountabilities across the sectors it leads, UNICEF deployed 73 dedicated staff over the year to support response coordination. Transitioning from clusters to Early Recovery Working Groups (ERWGs) in February 2011, co-chaired with the National Disaster Management Authority (NDMA), UNICEF has led the Water and Sanitation, Health and Nutrition (with WHO), and Education (with Save the Children) ERWGS and the Child Protection Thematic Working Group (TWG), with the federal structures mirrored at the provincial level. The timeframe and funding window for early recovery activities under the Pakistan Flood Relief and Early Recovery Response Plan (PFRERRP) was officially extended from July 2011 through to December 2011. An accompanying national Strategic Early Recovery Plan, developed by UNDP with the government, is being finalized: this involves the reprioritization of the budgets, targets and locations of those original PFRERRP project sheets which are currently unfunded. This plan focuses on rebuilding rural livelihoods and restoring social services for the most vulnerable people in the 29 worst flood-affected districts.

The ERWGs have provided a critical platform for convening stakeholders to map activities, resources, needs and gaps and foster integrated decision making, linking early recovery and longer term reconstruction and developing government and partner capacities at national and provincial levels. ERWG partners have worked to overcome issues arising from the early recovery shift, including determining which relief phase activities can be taken forward for early recovery, while reconciling these to existing needs; balancing the many priorities among stakeholders, including within federal and provincial governments, to ensure geographically convergent, integrated response; and undertaking realistic planning and priority-setting, given capacity limitations on the ground. While challenges remain, early recovery assessments and capacity gap analyses have led to revised plans and strategies for every sector, which are now being implemented, and work is also ongoing to scale up integrated response.

Enabling new data collection and access to vulnerable populations, the crisis has presented a vital opportunity to address the major existing vulnerabilities exposed by the floods through early recovery initiatives. UNICEF led the development of the Pakistan Integrated Nutrition Strategy (PINS) and accompanying operational plan, a collaborative effort across nutrition, food, agriculture, water/sanitation/hygiene and health sectors, to address underlying chronic malnutrition, as well as humanitarian nutritional needs of the vulnerable populations. UNICEF is also supporting the government to scale up the Pakistan Approach to Total Sanitation (PATS), a strategic approach to reaching at-risk rural communities recovering from the floods. UNICEF’s support for the Transitional School Structures (TSS) will help vulnerable children access education, many for the first time.

Developing Capacity to Respond to Risks

The magnitude and complexity of the Pakistan flood crisis and other previous emergencies like the 2010 Haiti earthquake prompted a concerted effort by UNICEF to strengthen the scale, timeliness and effectiveness of its emergency response. A new Corporate Emergency Activation Procedure was issued in March 2011 to ensure immediate and effective organization-wide response to a Level Three (large-scale) Emergency. This activates a single chain of command and simple standard operating procedures to accelerate and expedite UNICEF’s humanitarian action. As part of the procedure, a pre-trained Immediate Response Team (IRT) of technical experts will be deployed along with the Regional Director within 48 hours in support of the Country Representative.

Strengthening capacity to respond to risks has also taken place at country level. In preparation for possible future monsoon flooding in Pakistan and applying lessons from 2010, contingency plans have been made and emergency preparedness action undertaken by UNICEF for each province. This serves to mitigate the possible severe impacts of flooding by enabling quick response to foreseeable humanitarian needs in each sector, with clear targets outlined. Contingency plans detail best and worst case scenarios, based on government data and aligned with inter-agency processes, and cover UNICEF’s Core Commitments for Children in Humanitarian Action. Contingency stocks have been pre-positioned and distribution plans mapped out, with an overall supply budget of US$11 million. Partnership agreements are now in place to activate swift emergency response. Within the ERWGs also, UNICEF has facilitated the development of sector-wide contingency plans and supported the strengthening of government capacity for emergency preparedness and response, and disaster risk reduction.
The 2010 floods affected an estimated 3 million children under five years of age (600,000 newborns) and 780,000 pregnant women. Extensive damage was caused to Pakistan’s rural health care infrastructure in all four provinces, damaging health facilities and displacing frontline staff, including community health workers and vaccinators. This elevated risks of high morbidity and mortality among newborns and children caused by diarrhoea, acute respiratory tract infections, measles and malaria. Underlying malnutrition has acted as an aggravating factor, with disease in turn worsening malnutrition.

Immunisation

The lack of a large-scale disease outbreak is a major achievement for the Health sector and for the Inter-Agency Survival Strategy. Guided by global experts, the decision was taken early to immunize all children in flood-affected districts to prevent disease spread and remarkable immunization efforts, achieved jointly, reached millions across Pakistan. Collaborating with WHO and the government, UNICEF, through its operational partners, provided all the vaccines for comprehensive, phased campaigns conducted in 70 flood-affected districts, reaching more than 93 per cent (10.5 million) of children 6-59 months of age with measles vaccination and 98 per cent (11.7 million) with polio drops. Nearly 12 million children 6-59 months of age also received Vitamin A supplementation during November National Immunization Days (88 per cent coverage). In the last few months, UNICEF has increasingly dovetailed its flood response into regular routine immunization work, including in flood-affected areas. UNICEF has played a huge role in the drive to eradicate polio, supporting vaccination of 30.5 million children under five (94.4 per cent coverage) across Pakistan in a national campaign in May 2011.

Maternal, Newborn and Child Health (MNCH)

To restore and maintain community based health services, UNICEF supported the Lady Health Worker (LHW) network, providing 47,800 LHWs in the flood-affected areas with cash incentives and essential month-long supply kits (set of basic maternal, newborn and child-care medicines, equipment and supplies) to continue delivering services. To address the risk of increasing mortality rates in childbirth caused by the floods, 24/7 Emergency Obstetric Care (EMOC) services have been
supported or established at health centres: in Sindh, UNICEF supported 35 existing EMOCs, as part of a wider MNCH package of care, reaching nearly 18,000 women with antenatal care (ANC) and obstetric services by December 2010; in Punjab, in 2011, UNICEF provided obstetric supplies and training for staff, benefiting 41,000 pregnant and lactating women and newborns through over 100 newly established EMOCs. This approach is now being taken forward by the provincial Departments of Health.

Over the year, approximately 939,000 long-lasting insecticide treated nets (LLITN) were distributed to protect mothers and children from malaria, reaching nearly 470,000 families in at risk areas (78 per cent coverage). Over 900,000 mothers of children under five, exceeding the target of 735,000, were provided with health education on major health and disease threats against children - diarrhoea, pneumonia, malaria and malnutrition. Antenatal care is a continuing focus in flood-affected areas up to December 2011: around 88,000 clean delivery kits and 92,000 newborn care supply kits were provided to beneficiaries. Challenges in disaggregating flood-specific results from the country wide data has resulted in low reported coverage of antenatal care interventions: so far only 59,000 pregnant women (of a target of 618,000) are reported to have benefited from health facilities. However, the number reached is likely to significantly increase once the data is clarified in the next month. Training is also being undertaken to strengthen results reporting in future emergencies.

The Mother and Child Health Week (MCW) is a large-scale campaign that reaches thousands of families with information and low-cost, high-impact interventions. In the September 2010 and April 2011 MCWs, in collaboration with the Department of Health, the LHWs and partners, 13.3 million children received de-worming medicine (92 per cent coverage) across the five provinces, and nearly 7.8 million beneficiaries attended health education sessions. The next MCW is planned for November 2011.

### Challenges and Looking Forward

The severe damage to rural health care infrastructure and displacement and shortage of (especially female) frontline health care personnel is still a massive challenge. Women’s limited access to health care due to the low health-seeking behaviours and socio-cultural barriers is also a significant issue. Looking forward, UNICEF will increasingly dovetail its flood response activities into regular programming, continuing to build federal and provincial government capacity for both campaigns and routine immunization as well as strengthening facility-based care of diarrhoea and respiratory infections in collaboration with partners. Another important element will be behaviour-change communication activities. UNICEF will also continue to strengthen Community Integrated Management of Neonatal and Childhood Illnesses services through training and equipping community health workers, and develop government and partner capacity for emergency preparedness and response.

### Health Funding (as of 6 July 2011)

<table>
<thead>
<tr>
<th>Required: US$50.8 million</th>
<th>Received: US$45.9 million</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Gap, $4,926,042</td>
<td>10%</td>
</tr>
<tr>
<td>Expenditure, $31,602,655</td>
<td>62%</td>
</tr>
<tr>
<td>Commitment, $5,622,939</td>
<td>11%</td>
</tr>
<tr>
<td>Allocated, $8,674,464</td>
<td>17%</td>
</tr>
</tbody>
</table>
Over many decades, poor feeding practices have been a contributing factor in chronic malnutrition. The floods forced millions from remote areas into camps, including many rural poor previously unreached, revealing to responders the extent of the malnutrition problem in Pakistan. The floods also increased household food insecurity, causing damage to properties, food stocks and standing crops, and delays in planting. The catastrophic malnutrition situation was confirmed by the Flood Affected Nutrition Surveys (FANS), carried out in late 2010 with government and partners. Data released by the Departments of Health revealed malnutrition levels at 22.9 and 21.9 per cent global acute malnutrition (GAM) in North and South Sindh respectively, significantly above emergency thresholds (15 per cent GAM). The GAM rate in affected areas of Punjab was 13.9 per cent, nearing the emergency threshold. An ongoing national nutrition survey is also showing alarming levels of micronutrient deficiencies.

Prevention of Malnutrition
UNICEF initially supported 292,500 children from 6-23 months of age and pregnant and lactating women (PLW) with preventive blanket distribution of nutrition supplementation, in partnership with the World Food Programme (WFP), including ready-to-use supplementary food, high-energy biscuits and micronutrient supplements. Around 2 million children and 600,000 PLWs have been screened for malnutrition; the PLWs were also counselled on nutrition, hygiene and sanitation behaviour change.

Community Based Management of Acute Malnutrition (CMAM)
UNICEF initially set CMAM response targets unparalleled by the organization elsewhere globally in 2010, aiming to reach 75,600 children under five with severe acute malnutrition (SAM) and 180,000 with moderate acute malnutrition (MAM) by July 2011. UNICEF and partners surpassed their original targets: around 256,000 children with MAM have been reached through Supplementary Feeding Programmes and nearly 95,000 children with SAM through 34 Stabilization Centres and over 800 Outpatient Therapeutic Feeding Programmes. The SAM cure rate of 81 per cent met international SPHERE standards, although challenges of population movement resulted in a 19 per cent default rate. Results and targets for cluster/ERWG partners collectively and UNICEF are the same since UNICEF has been the main provider of supplies and implementation costs for CMAM, as well as providing regular technical assistance and capacity building of partners and government, to date training 155 master...
trainers and 4,600 healthcare providers on CMAM.
UNICEF is also collaborating with WFP on a School Feeding Programme in temporary and transitional schools.
In May 2011, UNICEF scaled up its nutrition targets to be reached by December 2011 (see table), in view of the vast needs uncovered through the FANS.

**Infant and Young Child Feeding (IYCF)**
UNICEF has partnered with provincial Departments of Health, LHWs, Community Health Workers (CHWs) and volunteers to promote key messages on IYCF across the country. More than 300,000 mothers and caregivers have been sensitized on IYCF through more than 10,000 sessions in the affected areas. Around 2,750 health care providers have been trained on IYCF to ensure that children receive adequate nutrition, including exclusive breastfeeding, during their first six months of life.

**Nutrition Coordination**
Working to meet its nutrition coordination responsibilities, over the past year, UNICEF deployed staff at national and sub-national levels to identify gaps and formulate a strategy, support the implementation of the Inter-cluster Survival Strategy and develop the capacity of national and provincial government for addressing malnutrition. From February 2011, UNICEF has led the Nutrition subsector within the Health and Nutrition ERWG. A Nutrition Information System has been rolled out in KP, Punjab and Sindh, allowing monthly performance indicators to be collected from partners analyzed and used for decision-making. An evaluation is under way to review the cluster/ERWG collective response progress to date. To address the chronic and early recovery nutritional needs of vulnerable populations, UNICEF led the development of the Pakistan Integrated Nutrition Strategy and accompanying operational plan. This, based on FANS data, has been launched as a multi-sectoral effort across nutrition, food and agriculture, water/sanitation/hygiene, and health sectors.

**Challenges and Looking Forward**
Surveys and assessments clearly show high precedence of malnutrition and micronutrient deficiency; partner and government capacity to manage this is still limited. An exacerbating factor is the lack of dedicated leadership for nutrition programming within provincial governments. In light of the FANS data, UNICEF’s nutrition flood funding ceiling was underestimated; an additional US$6.2 million is required to address the vast remaining humanitarian needs. Looking forward, to be sustainable, malnutrition prevention, especially IYCF, must be focused upon, and malnutrition treatment integrated into primary health care. UNICEF’s focus will be to support the expansion of the LHWs network to reach uncovered areas and strengthen government capacity.

### Nutrition Funding (as of 6 July 2011)

<table>
<thead>
<tr>
<th>Description</th>
<th>Required</th>
<th>Received</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Commitment</strong></td>
<td>US$27.5 million</td>
<td>US$27.5 million</td>
</tr>
<tr>
<td><strong>Expenditure</strong></td>
<td>US$21,147,342</td>
<td>US$21,147,342</td>
</tr>
<tr>
<td><strong>Allocated</strong></td>
<td>US$5,155,126</td>
<td>US$5,155,126</td>
</tr>
<tr>
<td><strong>Funding Gap</strong></td>
<td>US$16,947</td>
<td>0%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>Commitment</th>
<th>Expenditure</th>
<th>Allocated</th>
<th>Funding Gap</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>%</strong></td>
<td>4%</td>
<td>77%</td>
<td>19%</td>
<td>0%</td>
</tr>
</tbody>
</table>
Post-floods, 14 million people urgently required safe drinking water and basic sanitation facilities. The floods devastated much of the water supply infrastructure and many water, sanitation and hygiene (WASH) facilities throughout the country. In affected provinces, the use of toilets dropped drastically from an average of 70 per cent to 12 per cent in KP, Sindh and Punjab, signifying widespread damage\(^2\). Access to improved water sources fell from 75 to 55 per cent in the affected areas. Water quality deterioration has rendered the affected populations vulnerable to water, sanitation and hygiene-related diseases.

**Water Supply**

Two months into the response, UNICEF was already reaching over 2.6 million people with clean water, including 1.2 million people with water tankering, which has now almost ceased. Sustainable early recovery interventions such as water supply scheme repair/restoration and promotion of household water treatment have been scaled up, with over 5 million people (100 per cent of target) currently accessing safe water daily across the flood-affected areas - equivalent to the total population of New Zealand, and constituting the majority of the collective response of the WASH ERWG partners. Mass chlorination of water sources to pre-empt disease outbreak as the weather gets warmer has been reinitiated and will benefit around 4 million people.

**Sanitation**

The crisis illuminated the pre-flood situation where 27 per cent of the population (48 million people) were practicing open defecation - a major challenge to implementing a sanitation response. Despite this, currently 2.9 million people (of the 5 million target) now benefit daily from improved sanitation. During displacement, UNICEF initiated the construction of emergency latrines, defecation trenches and the provision of bathing cubicles. For early recovery, UNICEF has supported the government to scale up the Pakistan Approach to Total Sanitation (PATS), focused on achieving an open defecation-free environment through support for toilet construction, hygiene promotion, social mobilization and improved household water treatment in vulnerable rural communities recovering from the floods.

**Hygiene Promotion**

Over the course of the year, almost 4.7 million people, mainly women and children, were reached with hygiene messages, of the targeted 5 million. Over 550,000 hygiene kits and 1.4 million bars of soap were distributed. UNICEF and partners supported the training of
over 3,000 hygiene promoters at the community level. Community feedback and the low rates of diarrhoeal diseases reported from health centres indicate positive behavior change, particularly on key areas of hand washing with soap and household water treatment.

**WASH in Schools**

Encouraging children to stay in school, UNICEF has provided an integrated water, sanitation and hygiene promotion package over the year since the floods to 140,000 flood-affected children in 1,530 permanent schools and Temporary Learning Centres, including through the rehabilitation and installation of WASH facilities and hygiene promotion messaging. Transitional School Structures are being equipped with water and sanitation facilities including hand pumps and sex segregated latrines.

**WASH Coordination**

For the past year, UNICEF has worked to meet its accountabilities by coordinating over 100 WASH partners across the country, supporting dedicated staff at national and sub-national levels, providing guidance on approaches and standards, leading in gaps identification and prioritization of response interventions, and participating in the Inter-Agency Survival Strategy. Shifting to early recovery, UNICEF leads the Water and Sanitation ERWG and continues to work closely with the WHO to respond to warnings from the Disease Early Warning System on outbreaks of acute watery diarrhoea, including in high-risk polio areas. UNICEF facilitated ERWG partners to conduct a gap analysis to identify early recovery needs, challenges, response to date and funding gaps, and developed the early recovery strategy for the sector, with priorities informed by identification of the most vulnerable people and areas. Two major components of the strategy are supporting the government-led PATS and integrating sanitation within other sectors - for instance within the Pakistan Integrated Nutrition Strategy and the polio eradication strategy.

**Challenges and Looking Forward**

Affected populations have largely returned home to dispersed and remote areas, encountering large-scale water source damage and insufficient safe water and minimal sanitation coverage, increasing risk of related diseases. The extent of inadequate pre-flood sanitation and hygiene facilities and practices is also a major challenge. Looking forward, UNICEF will continue to support flood-affected populations through ongoing restoration of water supply schemes for improved access to water; ensure sustainability of technologies and build community capacity for operation and maintenance; and utilize resources remaining to scale up rural sanitation through the PATS through to December 2011. UNICEF will also provide continued coordination of the ERWG, including for improved emergency preparedness, capacity building of partners and integration of disaster risk reduction activities in WASH related programming.

**WASH Funding (as of 6 July 2011)**

**Required:** US$128.8 million  
**Received:** US$87.6 million

### Indicators

<table>
<thead>
<tr>
<th>Indicators</th>
<th>WASH ERWG 2011 target (by December 2011)</th>
<th>WASH ERWG total progress to date (people reached)</th>
<th>UNICEF 2011 target (by December 2011)</th>
<th>UNICEF total progress to date (people reached)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of people accessing safe drinking water per day</td>
<td>13,300,000</td>
<td>6,588,000</td>
<td>5,000,000*</td>
<td>5,000,000*</td>
</tr>
<tr>
<td>Number of people benefiting from improved sanitation per day</td>
<td>13,300,000</td>
<td>4,105,000</td>
<td>5,000,000</td>
<td>2,877,000</td>
</tr>
<tr>
<td>Number of people reached with hygiene promotion messages</td>
<td>13,300,000</td>
<td>9,945,000</td>
<td>5,000,000</td>
<td>4,725,000</td>
</tr>
</tbody>
</table>

Targets were originally set for July 2011; unless otherwise indicated, the timeframe for reaching these is now December 2011, in line with the officially extended early recovery period. UNICEF, as lead agency, is responsible for information management of the ERWG and sharing overall results achieved by ERWG partners collectively. ERWG figures include UNICEF’s programme targets and results. Figures have been rounded.

*While there was achievement of the targets in some areas, in other areas water supply interventions are still needed and will continue until December 2011.*

### WASH Funding

- **Commitment:** $6,533,906  
  - **Funding Gap:** $36,267,178 (29%)
  - **2011**
    - **Allocated:** $28,183,099 (23%)
    - **Expenditure:** $52,833,040 (43%)

- **Received:** $87.6 million

One Year After the Floods — Turning Towards a Brighter Future • 13
Before the 2010 floods, almost 7 million (50 per cent) of children were out of school, putting Pakistan behind schedule on meeting the MDG. The floods immediately affected an estimated 1.8 million children (across severely and non-severely affected districts) both those displaced and those previously enrolled in schools that were either partially or fully damaged (8,618 schools) or used as internally displaced persons (IDPs) shelters (5,633 schools). The floods will likely negatively affect Pakistan’s net enrolment rate affecting MDG progress, and have also served to highlight the situation of many children, especially girls, who have never previously had access to education.

Restoring Access to Quality Education

Over the year, in the most severely affected districts, UNICEF, along with partners and government, established over 4,250 Temporary Learning Centers (TLCs) benefiting more than 294,000 children, including 112,000 girls, and surpassing its targets (248,000 children). In Sindh, initial school enrolment drives brought in 218,000 children (40 per cent girls) to the government school system. Overcoming issues of insufficient supply storage capacity of partners and lack of expertise in warehouse management, 761,000 children (76 per cent of target) benefited from essential school supplies such as School in a Box kits, Early Childhood Development (ECD) kits, tables and chairs and stationery, with UNICEF’s contribution constituting the majority of the ERWG partners’ results. In Punjab, UNICEF supported the introduction of Early Childhood Education Classes in 150 TLCs, reaching 12,000 children, including 6,400 girls.

Challenges around advocating for education as an immediate intervention and securing agreement on school designs delayed utilization of resources for restoring education access. However, with provincial government approval now obtained, mass construction of 500 Transitional School Structures (TSSs) by December 2011 is underway. These prefabricated structures can be constructed in a month, endure for up to ten years, and provide safe, flood and earthquake resistant classrooms to get children out of TLCs and back into formal learning, prior to permanent school construction. Beginning in May 2011, UNICEF has reached over 1,150 children through six TSSs. Data has revealed that double the amount of formerly registered children are now attending these schools (in one TSS in Punjab, enrolment increased from 121 to 314 children), indicating high demand and a remarkable opportunity for reaching the unreached.
### Indicators

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Education ERWG target (by December 2011)</th>
<th>Education ERWG total progress to date (people reached)</th>
<th>UNICEF target (by December 2011)</th>
<th>UNICEF total progress to date (people reached)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beneficiaries of TLCs</td>
<td>390,000*</td>
<td>350,000</td>
<td>248,000*</td>
<td>266,000</td>
</tr>
<tr>
<td>Beneficiaries of assorted school supplies</td>
<td>1,235,000</td>
<td>793,000</td>
<td>997,000</td>
<td>761,000</td>
</tr>
<tr>
<td>Teachers Trained</td>
<td>39,200</td>
<td>13,400</td>
<td>9,400</td>
<td>5,750</td>
</tr>
<tr>
<td>Beneficiaries of TSSs**</td>
<td>150,000</td>
<td>24,000</td>
<td>60,000</td>
<td>1,150</td>
</tr>
</tbody>
</table>

Targets were originally set for July 2011; unless otherwise indicated, the timeframe for reaching these targets is now December 2011, in line with the officially extended early recovery period. UNICEF, as co-lead agency, is responsible for information management of the ERWG and sharing overall results achieved by ERWG partners collectively. ERWG figures include UNICEF’s programme targets and results. Figures have been rounded.

* The timeframe for this target is July 2010 - July 2011; however, some TLCs are still being established as an interim measure while TSS are being constructed.

** This intervention began in May 2011; targets are set to be reached by December 2011.

### Capacity Strengthening

UNICEF trained 5,750 teachers, of a target of 9,400, (including 2,100 women) on psychosocial support, use of emergency supplies, school management, ‘School Safety and Learning Environment’, disaster risk reduction and emergency preparedness. Although challenging due to the vast and geographically spread needs, training for Parent-Teacher Committees (PTCs)/School Management Committees (SMCs) is ongoing in Balochistan and being initiated for the other flood-affected provinces. To date, 1,100 PTC/SMC members have been trained in school development plans and facilitating school enrolment.

### Challenges and Looking Forward

Limited partner capacity to implement and monitor education activities, access constraints to remote flood-affected areas, and difficulties in obtaining accurate data, including on damaged schools, have been challenges. Looking forward, UNICEF has prioritized its resources for construction of TSS and providing these with child-friendly school packages (including teacher/community training and equipment), especially aiming to increase equity by reaching children previously out of school. UNICEF will support capacity building for key government staff and partners for scaling up education response and promoting global education standards. Disaster mitigation will be a key component, including building capacity for contingency planning and continuing to incorporate disaster risk reduction in TSS and permanent school construction and in teacher training modules.

### Education Coordination

Transitioning from the Education cluster to the Education ERWG in February 2011, UNICEF (collaborating with Save the Children) continues to meet its coordination responsibilities with staff deployed at national and sub-national levels. In March, the ERWG coordination team facilitated a lessons learned exercise, commissioned by the Global Education Cluster, to review the cluster/ERWG collective response progress and inform ongoing response strategy. Based on this and comprehensive assessment of existing needs and capacities, an early recovery plan was formulated, which focuses on the restoration of formal and non-formal education in flood-affected areas, in line with government priorities, reaching the most vulnerable. A mapping of fund availability is also ongoing to inform strategic priority setting. The ERWG coordination team facilitated partner capacity building efforts, including orienting teachers, PTC/SMC members and education staff on their roles and responsibilities and training on topics such as disaster risk reduction, interactive teaching methods, psychosocial support and ECD.

### Education Funding (as of 6 July 2011)

- **Required**: US$36.4 million
- **Received**: US$28.3 million

**Funding Gap, $8,144,996**
- $2,291,195 (6%)
- $15,361,050 (42%)
- $10,597,759 (29%)
In Pakistan prior to the floods, an estimated 32 per cent of girls married before age 18 and 3.3 million children under age 14 were engaged in child labour. The floods caused insecurity in household food and income, elevating protection risks, and also increased children’s vulnerability to trafficking and exploitation, disrupted community protective networks, heightened psychosocial distress and risk of physical and sexual abuse, and reduced family and individual abilities to cope. In areas affected by militant action, flood-affected children also required protection from unexploded ordnance.

Safe Spaces and Support Services
After just one month, Child-Friendly Spaces (CFSs) were benefiting 13,000 children. Over the year coverage has expanded more than thirty-fold, at the peak reaching 397,000 children (including 186,000 girls) in 1,200 locations served by static and mobile CFSs, providing education, recreation and psychosocial support services. This is 120 per cent of the target, since maximum usage of mobile CFS was achieved, reaching many children in multiple, less accessible locations. Around 163 safe spaces specifically for women benefited 11,000 women in four provinces. UNICEF established 1,500 Child Protection Committees, reaching 54,000 children with support and service referral. Working with partners, 532,000 non-food items - such as blankets, shoes and utensils - were distributed to vulnerable children and families. UNICEF also supported the establishment of 14 Child Protection Units within Departments of Social Welfare, registering 17,000 children and providing 12,000 of those with services. From April up to December 2011, Child Protection Centres (CPCs) are being established either newly or from converted CFSs, to strengthen national institutions in their provision of sustainable protection for vulnerable children, through monitoring of child rights and supporting service mapping and referral.

Strengthening Child Protection Systems
UNICEF and partners have conducted training in child protection in emergencies for authorities and government staff in all affected provinces. In Balochistan, UNICEF facilitated the establishment of a Child Protection Transit Unit under the Social Welfare Department and two Child Abuse Care Units in district hospitals, training staff to identify and manage cases of child sexual and physical abuse; to date 32 children have been identified and referred to appropriate care. Within the Gender Based Violence (GBV) Working Group, UNICEF has supported the development of national level standard operating procedures (SOPs) and an information management system, supporting child
survivors. Training of 35 capacity promoters on GBV prevention and response took place in April 2011, with additional training of 30 government staff and partners planned for July 2011. To strengthen systems for supporting unaccompanied and separated children, UNICEF is developing SOPs, strengthening information management systems, and will conduct training for 60 provincial government staff in August 2011.

**Mine Risk Education (MRE)**

To address mine risk concerns - elevated as the floodwaters exposed previously hidden unexploded ordnance and landmines resulting in the injuries of 16 children - UNICEF continued to lead the coordination of the MRE Working Group, while supporting MRE in KP - so far reaching 238,000 people (of a target of 300,000), including 184,000 children with awareness messages.

**Child Protection Coordination**

Transitioning from the Child Protection sub-cluster to the Child Protection TWG in February 2011, staff continue to work at national and sub-national levels to meet UNICEF’s coordination responsibilities. A CPTWG strategy, standards and action plans have been developed, with an equitable focus on reaching the most vulnerable children. UNICEF developed a Child Protection Communication for Development in Emergency Guide that was disseminated amongst partners and used to deliver messages on child labour, birth registration and separated children to around 110,000 beneficiaries. The CPTWG has undertaken capacity development within the NDMA’s Gender and Child Cell and for CPTWG partners on leveraging child issues, achieving the integration of children’s needs into cash for work schemes and ERWGs’ projects across sectors. Services have been mapped at district level to inform strategic planning. UNICEF co-led GBV coordination from July to December 2010, then handing over to UNFPA, and continues to be a strong participant in the GBVTWG.

**Challenges and Looking Forward**

Supporting positive changes in social norms, attitudes and behaviour is human resource dependent and time intensive, and the number of capable partners is still limited. Original flood funding requirements (now met) proved inadequate given the scale and evolution of needs; additional funding is critical for supporting service delivery at scale. Looking forward, UNICEF will continue to strengthen local government and partner capacity to set up community-based social services, provide referral services, strengthen GBV/child protection case management and meet global standards. CFS will be transformed into community-based CPCs and the Child Protection Committees into Community Based Organizations, to ensure sustainability. UNICEF will also continue to strengthen government information management systems and child rights monitoring and reporting mechanisms.

### Child Protection Funding (as of 6 July 2011)

<table>
<thead>
<tr>
<th>Required: US$12.5 million</th>
<th>Received: US$12.4 million</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding Gap, $113,414</td>
<td>Commitment, $2,419,218</td>
</tr>
<tr>
<td>1%</td>
<td>19%</td>
</tr>
<tr>
<td>Allocated, $602,286</td>
<td>Expenditure, $9,378,782</td>
</tr>
<tr>
<td>5%</td>
<td>75%</td>
</tr>
</tbody>
</table>

UNICEF, as lead agency, is responsible for information management of the CPTWG and sharing overall results achieved by TWG partners collectively. CPTWG figures include UNICEF’s programme targets and results. Figures have been rounded.

* Initial CFS beneficiary targets as previously reported were revised, based on the situation on the ground. ** This early recovery intervention began in April 2011; targets are set to be reached by December 2011.

---
HIV and AIDS

The floods caused disruption to specialized health care such as Antiretroviral Therapy (ART), treatment of opportunistic infections and exacerbated under-nutrition, elevating the vulnerability of People Living with HIV (PLHIV) in Pakistan - around 97,400⁵ - most of whom are in the lower socio-economic bracket. In response, UNICEF, with UN partners and national/provincial AIDS control programmes conducted a rapid assessment to determine the number of PLHIV in flood-affected districts and their immediate needs. Based on this, a Treatment, Care and Support Package was developed that included food, non-food items, ARTs, multivitamins and condoms. Through national and provincial AIDS control programmes, 1,202 PLHIV were reached in 2010.

Since January 2011, two Family Health Days were conducted in flood-affected districts of Punjab and Voluntary Confidential Counseling and Testing services were provided to 124 families, with those testing HIV positive referred for HIV treatment and care. Capacity building of hospital staff in three affected districts of Punjab was also undertaken to improve awareness of HIV and strengthen Prevention of Parent to Child Transmission (PPTCT). Dissemination of HIV prevention messages as part of general health campaigns continued in 2011. UNICEF and UNAIDS supported an assessment of eight flood-affected districts in 2011 to identify issues for follow up by the Working Group on HIV in Humanitarian Concerns, in which UNICEF participates.

Stigmatization and cultural barriers hinder the efficacy of programmes promoting access to information on reproductive health and sexual well-being. UNICEF will continue to focus on scaling up the PPTCT continuum of care, as well as supporting the provincial AIDS control programmes in KP, Sindh and Punjab to ensure women at risk of or infected with HIV, and HIV-affected families, have access to prevention, treatment care and support services.

Gender Equality

The floods further exacerbated social and cultural factors that in some affected districts inhibit the mobility of women and girls and their ability to access public spaces or articulate their needs, even within IDP camps. Initial post-flood gender needs assessments found a shortage in female service providers and women and girls had limited access to information and aid distribution, due to the distance of services (and related security concerns). Committed to realizing positive humanitarian outcomes
during the flood response, UNICEF has ensured that its programmes promote the safety, protection and advancement of girls, boys and women by integrating gender equality considerations into project design and the response activities of government and partners. Continued efforts to strengthen awareness and understanding around gender equality programming are essential. Specific activities included:

- WASH projects were reviewed to ensure they addressed gender equality and protection concerns - including separate, well-lit latrines for girls and women and provision of sanitary materials and separate washing facilities for women. In KP for example, clear separation of washing areas resulted in increased use by women.

- Awareness sessions for education staff were conducted and based on disparity analysis, UNICEF education programmes actively promoted girls education through programmatic interventions, building schools and working with communities to promote girls’ attendance.

- UNICEF health programmes promoted the work of health sector female staff in remote flood-affected areas, including Lady Health Workers, to ensure availability and access to health services by women, and held an orientation and gender sensitivity session was held for government management staff of the Lady Health Workers programme.

- UNICEF provided targeted services to women and girls through safe spaces for women. UNICEF also promoted education, protection and access of information to women and girls on gender based violence (GBV) through Child-Friendly Spaces (CFSs) by raising community awareness, also supporting establishment of service referral mechanisms.

- UNICEF supported the establishment and capacity building of a gender and child cell within the National Disaster Management Authority in late 2010, throughout the response, promoting gender equality, supporting women and girls and leveraging gender in upstream policy work.

- As lead agency for multiple ERWGs and as part of the inter-agency Task Force on gender, UNICEF supported the application of gender markers to the PFRERRP and encouraged disaggregation of data by sex and age, which strengthened strategic gender equality practice.

Planning, Monitoring and Evaluation

In support of inter-agency assessment efforts, UNICEF financed staff for the Multi-cluster Rapid Assessment Mechanism (McRAM), which undertook the rapid assessment of the flood impact in September 2010, to inform response planning, fund raising and implementation. In March and April 2011, UNICEF led cluster partner capacity gap and needs assessments, in order to update the early recovery project sheets in the flood response appeal.

Strengthening monitoring and evaluation systems is critical to identifying gaps and informing ongoing programme response. UNICEF Pakistan improved monitoring of the humanitarian response, utilizing results-based monitoring approaches developed for the revised CCCs (UNICEF’s central policy to uphold the rights of children affected by humanitarian crisis). In addition to prioritizing indicators and strengthening partner reporting, programme monitoring - consisting of site visits by UNICEF staff, government and NGO partners - was strengthened using out-sourced third party field monitors, who conducted both quantitative and qualitative monitoring of UNICEF-funded interventions, in consultation with affected populations. Findings are shared with UNICEF’s provincial and hub offices on a weekly basis and with ERWGs where relevant. Periodic review of the monitoring and reporting tools has strengthened this system. The third party approach has proved successful for strengthening programme performance monitoring, including for remote monitoring in high security-risk areas in Pakistan.

Each financial and supply disbursement is carefully checked against the agreed implementation plan and budget. In 2011, UNICEF Pakistan began conducting financial capacity assessments of NGO partners - nearly 90 have been conducted to date - leading to a rating of risk, and in some cases, a risk mitigation plan. To ensure robust oversight, five quality assurance specialists were hired to provide strong additional support, and periodic on-site reviews of implementing partners’ financial records have been conducted, alongside programmatic monitoring of activities and supplies.

As well as undertaking an internal flood response timeline/history exercise to document key decisions, UNICEF Pakistan supported the OCHA-led Inter-Agency Real Time Evaluation of the flood response and cluster/ERWG evaluations of sector-wide response to ensure learning is documented and recommendations are implemented. UNICEF also participated in the Health evaluation and is leading the Nutrition and Child Protection sector evaluations also.
Stories from the floods

The floods affected millions of people and each survivor has a story to tell. Over the year, UNICEF and its partners have worked to reach women and children across vast areas affected by the floods with vital services. One year on, there are millions of individual perspectives and stories which are yet to be told. The following are two personal accounts of those whose lives have been affected, both by the floods and the subsequent response efforts.

Fiza Gul, One Year Old, Nowshera District, KP Province

Since the floods destroyed his crops, teacher and father-of-four Ibrahim (36), has been struggling to make ends meet for his family. Ibrahim’s two youngest children Fiza Gul and Sohaib were identified this year as having severe acute malnutrition.

When a UNICEF-supported community health worker came to Ibrahim’s home in Nowshera district in KP, she found that they were both in need of urgent help.

“I was wondering why they were getting weaker and weaker,” says Ibrahim. “I was very worried about them.”

Both children were admitted to a health centre supported by UNICEF and other agencies, and run by implementing partner People’s Empowerment and Consulting Enterprise (PEACE). They visited the health centre weekly for monitoring and to receive supplies of therapeutic food sachets containing a highly nutritious peanut-based paste. After about a month, the children had made good progress and were given supplementary food.

“I was so happy to get this help for my children,” says Ibrahim. “Fiza Gul and Sohaib are much happier now, have more energy, and are more interested in things. I’m just worried that it could happen again.”

Before the floods, the family income was supplemented from the sale of wheat grown on his land near the Kabul River. The flood waters inundated his fields and left behind a layer of mud, making the ground unusable. The family resources have since been severely stretched, and the quantity and quality of food for his children suffered.

Nutrition cluster Coordinator, Dr. Najeeb of UNICEF, says that chronic malnutrition existed prior to the floods and the impact of the disaster has exacerbated the situation for children. “Children living in low-income households were already vulnerable to malnutrition, but the effect of displacement, lack of adequate water and sanitation, loss of livelihoods, and inadequate primary health care has in many cases made them even more vulnerable.”

UNICEF and partners have screened almost 730,000 children, aged between six and 59 months, for malnutrition in flood-affected areas of KP and FATA. Of these, more than 62,000 children have received treatment either for severe or moderate acute malnutrition. With partners, UNICEF is continuing to scale up efforts to address the underlying causes of chronic malnutrition.

Ibrahim was interviewed on 28 June 2011 by David Youngmeyer
“The flood water took everything away from us, yet gave our children an opportunity for better education,” says Mukhtar Ahmad, head master of the Government Primary School (GPS), Mullanwala.

The unprecedented floods of 2010 devastated Mullanwala, a small village in Muzaffargarh district of Southern Punjab. When the flood water receded, not a single structure in the village was standing.

As people started to rebuild, UNICEF and its implementing partner, Jahandad Society for Community Development (JSCD), established a Temporary Learning Centre (TLC) in a tent to bring the village children back to school. The Education Department formalized the TLC by granting it the status of Government Primary School (GPS), Mullanwala.

As part of its initiative to provide improved education facilities to children affected by floods, UNICEF plans to construct 500 Transitional School Structures (TSSs) in three flood-affected provinces. A prototype was constructed in Mullanwala and students from the TLC moved into the new school structure. Many of these children had never been to a proper school before the floods. Shahbaz (11) is one of them.

“The mosque school was very small and we had to sit under a tree. Flood water destroyed everything in the village. When we returned, school restarted in a big tent but it would get very hot inside. Our new school is very nice. It is close to my house. I enjoy studying here and my parents are happy,” says Shahbaz.

Having received his early informal education in the village mosque school, Shahbaz’s first exposure to formal education was in the UNICEF-supported TLC Mullanwala. He is a grade 3 student and feels proud to be in his new school.

Hina Farooq, the Project Coordinator for UNICEF’s implementing partner JSCD, says, “With UNICEF support, we have introduced ‘Friendly Schooling’ methodology in GPS Mullanwala. There is no corporal punishment in the school, which has made the community realize that physical abuse is detrimental to a child’s growth. Early Childhood Education (ECE) for children up to five years of age prepares them for enrolment in grade 1. Youth groups which include boys and girls 13 to 18 years of age help us with management issues and motivate parents in Mullanwala and surrounding villages to send their primary age group children to school.”

The three-room school structure has all amenities, including safe drinking water, sanitation, adequate school supplies, learning material and a playground. It stands out in the village environment and is an attraction for children and parents alike. As a result, enrolment has increased to 361 as opposed to 217 in the TLC.

UNICEF’s Education Officer, Yasir Arafat says, “This school is an example to be replicated. It has motivated the entire community towards education. The rapid increase in enrolment has convinced us to build two more rooms in the school and the Education Department has also sent an additional teacher to support increased student numbers.”

Shahbaz was interviewed on 30 June 2011 by A. Sami Malik.
The floods prompted a massive operational response from UNICEF. Field presence was bolstered through the establishment of three new emergency field offices in Multan (Punjab province), Sukkur and Hyderabad (Sindh province), with staffing to cover programmes, administration, operations, security, finance, supply and logistics. These offices have been critical for extending UNICEF’s reach to the worst-affected children, and enabling rapid scale up of response. The Hyderabad office closed on 31 May 2011 with staff relocated to Karachi and Sukkur; the Sukkur and Multan offices will remain open through to December 2011, coinciding with the official extension of the early recovery period. Local operational capacity is particularly critical given the impending monsoon rains of 2011.

Security
UNICEF has successfully passed through this turbulent time without a single major incident involving staff. However, the last year has seen an average of 220 weekly security incidents - with about 40 per cent related to militant operations or terrorist activities. In May 2011, all UNICEF offices temporarily closed for a week due to security concerns. The safety and security of UNICEF staff has always been an important part of UNICEF’s programmatic implementation, but the challenge has been to extend programmes rapidly yet safely to new areas where UNICEF did not have a presence before the floods. Staff security is ensured through the provision of equipment, including radios and armoured transport, enhancements to rented office space to meet UN Minimum Operating Security Standards and introducing protocols to increase staff protection. The UN recently changed to the Security Level System where risk is managed through the Security Risk Assessment, with greater emphasis on assessing the critical nature of programmes, in insecure contexts. Since January 2011, this new system has brought much greater integration of security into planning and execution of programmes, to be strengthened further by the ongoing inter-agency programme criticality process.

Human Resources
To meet urgent response needs, human resource capacity was rapidly scaled up and largely maintained over the year. At the peak of the relief phase in October 2010, 247 new or surge staff were deployed across the country, in addition to the 291 existing pre-flood staff - a staffing increase of 85 per cent. To meet its Cluster Lead
Agency (CLA) commitments for ensuring response coordination across the clusters/ERWGs it leads, over the year UNICEF deployed large numbers of coordination, information management and support staff at provincial and federal levels; 73 staff were deployed in total, and of these, 80 per cent were deployed for six months or longer. Currently, 44 such staff are still in place to coordinate the UNICEF-led ERWGs. As of July 2011, there are currently 147 staff deployed for the flood response including 82 staff recruited and redeployed to the established emergency field offices in Multan and Sukkur; 76 new fixed-term positions have been requested. Through the year, additional staff were sourced from the recruitment of new staff; temporary deployment of UNICEF staff from other offices; ‘stand-by partners’ from INGOs and governments - critical at a time of serious funding constraints - and the Rapid Response Mechanism under the Global WASH Cluster. To support the well-being and efficiency of staff in a high stress environment, UN and UNICEF stress counsellors provided support to the offices. Human resource preparedness plans are in place for the upcoming monsoon season.

**Supply**

Supply procurement and distribution to the affected population through partners has been a crucial element of UNICEF’s response. UNICEF scaled up infrastructure and supply systems and established new supplier and distributor agreements and four new warehouses around the country. Logistics and warehouse specialists were deployed to warehouses and field offices to handle complex logistics operations, support quality assurance and facilitate local procurement. In September, at the height of the relief response, UNICEF was able to move supplies through its warehouses in a 48-hour period to be distributed to beneficiaries or UNICEF partners. Logistics challenges remained significant for the distribution of supplies to the dispersed, remote and often insecure flood-affected populations due to disruptions of communication and the transport network. Insufficient supply storage capacity of partners and lack of expertise in warehouse management was also a challenge. To address this, efforts were made to distribute supplies to pick-up and drop points, which aided in delivering a limited volume of supplies. Building on lessons learned, additional Long-Term Agreements with suppliers, warehousing and transport providers are being put in place for each UNICEF field office to speed up the transportation of supplies.

In total, UNICEF purchased supplies worth US$99.2 million including 41 per cent in local procurement, contributing to economic stimulus. In addition, in-kind assistance was received from Department for International Development (DFID), the French National Committee, OCHA, Office of U.S. Foreign Disaster Assistance (OFDA), Procter & Gamble, Lever, IKEA and the Governments of Luxembourg and Switzerland.

For supply monitoring, UNITRACK databases were installed in Islamabad, Karachi, Peshawar, Multan and Sukkur with recruitment of experienced logistics staff for smooth tracking and distribution of supplies to the partners/end-users. Following the 2010 floods, the Supply and Logistics unit was restructured to ensure that early recovery needs were met more quickly and emergency preparedness measures are now in place, working to enable pre-positioning and continued smooth distribution of emergency supplies.

---

**Table 1. Values of supplies distributed* by sector to date (in US$)**

<table>
<thead>
<tr>
<th>Sector</th>
<th>Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>HEALTH &amp; NUTRITION***†</td>
<td>27,508,824</td>
</tr>
<tr>
<td>WASH</td>
<td>16,529,857</td>
</tr>
<tr>
<td>CHILD PROTECTION</td>
<td>1,799,482</td>
</tr>
<tr>
<td>EDUCATION</td>
<td>7,187,107</td>
</tr>
<tr>
<td>TOTAL</td>
<td>53,025,270</td>
</tr>
</tbody>
</table>

* “Distributed” is defined as distributed to beneficiary, or to partner or government for onward distribution. ** The UNITRACK system has been set up to log these supplies together. † This figure does not include vaccinations of value US$1.57 million.
The massive scale of the 2010 floods resulted in a need for immediate, large-scale resource mobilization, which the government approved in the Pakistan Flood Emergency Response Plan on 11 August 2010. To ensure maximum visibility, in the first months of the response, UNICEF Executive Director Anthony Lake, UNICEF Regional Director Dan Toole, and UNICEF Emergency Operations Director Louis-Georges Arsenault visited flood-affected areas and reinforced the appeal for support. As the large-scale impact of the floods became clear, the appeal was revised and the Pakistan Flood Relief and Early Recovery Response Plan (PFRERRP) was launched in November, totaling US$1.93 billion - the largest-ever humanitarian appeal in response to a natural disaster. Within the PFRERRP, UNICEF requested US$251.1 million to support relief and early recovery activities through the end of July 2011. This timeframe has been extended to the end of December 2011 after a mid-year review, including capacity gap assessments and a project prioritization exercise undertaken by the Early Recovery Working Groups; however, the overall resource mobilization targets remain the same.

UNICEF sincerely thanks all public and private sector donors for the contributions and pledges that have been received so far. Without these timely contributions, the current response would not have been possible. Thanks to the generosity of governments, UNICEF National Committees, inter-organizational arrangements, inter-governmental organizations, non-governmental organizations and other UNICEF Country Offices, as of 6 July 2011, UNICEF had received US$201.6 million, with

### Top Ten Donors

<table>
<thead>
<tr>
<th>Donor</th>
<th>Amount in US$</th>
</tr>
</thead>
<tbody>
<tr>
<td>United States</td>
<td>21,203,152</td>
</tr>
<tr>
<td>Australia</td>
<td>15,111,570</td>
</tr>
<tr>
<td>United Kingdom</td>
<td>14,035,950</td>
</tr>
<tr>
<td>Japan</td>
<td>13,800,000</td>
</tr>
<tr>
<td>Norway</td>
<td>12,244,890</td>
</tr>
<tr>
<td>German Committee for UNICEF</td>
<td>10,843,471</td>
</tr>
<tr>
<td>UK Committee for UNICEF</td>
<td>9,710,752</td>
</tr>
<tr>
<td>Netherlands</td>
<td>9,230,768</td>
</tr>
<tr>
<td>US Fund for UNICEF</td>
<td>8,843,968</td>
</tr>
<tr>
<td>CERF</td>
<td>7,964,554</td>
</tr>
</tbody>
</table>
the funding gap remaining US$49.5 million. Out of the funding received so far, 55 per cent has been received from government donors, while UNICEF’s National Committees have provided 39 per cent of the funding. The remaining 6 per cent has been received from other funding sources including the United Nations Central Emergency Response Fund (CERF), the United Arab Emirates Red Crescent, Agfund, the OPEC Fund and country office fundraising from UNICEF country offices worldwide. UNICEF would especially like to acknowledge governments and National Committees that provided immediate and timely provision of funding for rapid early response, and donors who have contributed “unearmarked” humanitarian funding, affording essential flexibility to UNICEF to direct resources and rapidly ensure delivery of critical supplies and interventions where they are needed most, in an evolving situation.

Utilization of remaining resources in education and WASH will be concentrated on construction of 500 TSS and scaling up of sanitation coverage through the Pakistan Approach to Total Sanitation (PATS). However, a continuing concern is securing funding for early recovery. While donors generously funded initial life saving response activities, the strict demarcation of relief (now ended) and early recovery activities constitutes a challenge to advocating for donor funding for these: the issue is in communicating early recovery action as still addressing critical needs within the emergency response (PFRRERP), distinct from recovery or development action. Given the urgent needs identified in the extended early recovery phase up until December 2011, including those revealed by the Flood Affected Nutrition Surveys, continued donor support is essential to continue early recovery efforts. Without further funding, UNICEF will not be able to sustain its current response scale - not only to meet the immediate needs of women and children in nutrition, health, education, WASH and protection, but also to build systems and ensure the conditions in which they can thrive.
Looking Forward

A year on from the floods, a sense of life-and-death urgency remains. Millions of people are still struggling to rebuild their livelihoods, infrastructure remains dilapidated and most social services still require restoration. Enabling the survival of women and children and establishing an environment in which they can thrive has been the impetus of UNICEF’s work this past year and continues to be the focus moving forward. Substantial results have already been achieved and the NDMA has officially announced that the early recovery phase has been extended until December 2011, creating further opportunity to reach the affected population and turn tragedy into hope.

Looking forward, there are clear priorities that must be addressed to enhance the well-being of the most vulnerable children and women. Health, nutrition and WASH sectors require continued investment to ensure that children survive and that their long-term development is not stunted. For nutrition, sustaining the new Pakistan Integrated Nutrition Strategy is a critical element. Flood and militant action related displacement has facilitated polio spread in 2010 and 2011, yet eliminating polio from Pakistan is a huge step towards global polio eradication. Increasing education access - including for those previously unreached - is critical for children to reach their developmental potential. Protective systems must be strengthened to prevent permanent school dropout, child labour and child marriage, to ensure that child survival goals and the MDGs are met.

A vital opportunity exists for UNICEF, the government and partners to address the challenges illuminated by the disaster. In line with longer term planning,

Girls attend class in a village of Nowshera district, Khyber Pakhtunkhwa province, which was heavily affected by the floods. The school, which was also damaged, was rehabilitated with the support of UNICEF.
UNICEF’s strategy will be to strengthen community and local government capacities, including for disaster risk reduction, emergency preparedness and response. Contingency plans have been made and emergency preparedness actions taken for the 2011 monsoon season. The floods stretched existing community coping mechanisms to the breaking point, yet affected families were quick to access and capitalize on even a minimal package of care to strengthen their resilience against shock. UNICEF has worked to buttress community resilience: as UNICEF provided Lady Health Workers with supplies and helped establish 24/7 Emergency Obstetric Centres, people quickly gathered to access these services; similarly, as UNICEF has constructed Transitional School Structures, these have been quickly filled with more children than were attending school pre-flood. In addition to assistance provision, UNICEF will strengthen resilience through expanding access to new information and knowledge, including on simple disaster risk reduction methods, hygiene and sanitation education and nutrition and IYCF information.

Ensuring progression from recovery to longer-term national development and child rights goals, flood response programmes will be integrated into UNICEF’s regular country programme up to 2013 - as part of the One UN system to Deliver as One - as well as dovetailing with the ongoing IDP crisis response in the northwest. This will ensure continued humanitarian support for vulnerable women and children, linking to longer-term development through increased equity. Transitioning to stronger coordination by government ministries and departments is crucial, as the long-term duty-bearer for MDG achievement and child rights promotion. UNICEF is also well placed - through its multiple field offices, all with devolved authority - to capitalize on the Government’s decision to shift responsibility for social service delivery to the provincial governments as of July 2011; this will enable UNICEF to leverage partnerships and synergy to achieve more for children and women.

Funding remains a constraint and the organization still requires US$49.5 million to maintain its assistance to the affected population, as well as an additional US$6.2 million for nutrition interventions due to the continued humanitarian crisis. Yet UNICEF is committed to nurturing the seeds of hope already planted. With continued financial and human resource support, and cooperation, UNICEF can continue to provide assistance to those in need, reach the previously unreached, strengthen systems and capacities for the provision of basic social services and build a hopeful future for the women and children in Pakistan.

Some key lessons

Key lessons emerged from the humanitarian response to the floods in Pakistan - grounded in the context of the extraordinary magnitude of this disaster and its huge impact on national capacities.

An essential lesson is the importance of undertaking capacity analysis of partners - which actors can work, where - before an emergency and developing this capacity as necessary, to be able to respond rapidly at scale. Another important lesson has been the need to rapidly adjust operational targets and strategies to reach the affected population amidst complex patterns of displacement and return, including through the flexible use of partnerships, strong human resource and supply/logistics management; quick establishment of secure offices; and tight financial and supply oversight in a large-scale, high-risk environment. There were significant lessons for UNICEF on meeting its inter-agency and Cluster Lead Agency responsibilities:

- **Early challenges in determining coordination capacity and the enormous geographic scope of needs led to delays in getting staff on the ground, but over the year, the deployment of adequate numbers (73 staff) of dedicated staff for coordination and information management at national and local levels was critical to fulfilling UNICEFs accountability and achieving effective response coordination.**

- **Dan Toole, UNICEF Regional Director for South Asia, was appointed as Special Representative in September 2010 for the UNICEF flood response. This enabled the UNICEF Representative, Martin Mogwanja, already acting as Humanitarian Coordinator for Pakistan at the onset of the floods, to continue this in a dedicated role, strengthening both UNICEF and inter-agency strategic response.**

- **A consistent challenge in most emergencies is ensuring strategic multi-sectoral coordination. In Pakistan, the official ‘Inter-Agency Survival Strategy’ helped to formalize cross-cluster collaboration for synergistic, life-saving responses. Staff from the CLAs of Health (WHO), Food (WFP), and Nutrition and WASH (UNICEF) came together to develop and implement strategic inter-cluster plans, the success of which has been in reaching the most vulnerable in a massive emergency, saving lives and avoiding epidemics.**
UNICEF Partners and Counterparts

**Government**


**United Nations System**


**NGOs and Civil Society**


**Surge Capacity Standby Partners**

CANADEM, Danish Refugee Council, Icelandic Crisis Response Unit, IMMAP, Oxfam GB, Norwegian Refugee Council, RedR Australia.

**Donors**

**UNICEF National Committees**


**Governments**

Australia, Austria, Belgium, Canada, European Commission, Finland, Ireland, Italy, Japan, Kuwait, Liechtenstein, Luxembourg, Netherlands, New Zealand, Norway, Republic of Korea, Russia, Spain, South Africa, Sweden, United Kingdom, United States.

**Others**


UNICEF values all of its partnerships and works with a wide range of district authorities, community-based organisations, faith-based organisations, non-public actors and other groups and individuals, and recognizes that many of those could not be mentioned here.
Acronyms

<table>
<thead>
<tr>
<th>CCCs</th>
<th>Core Commitments to Children in Humanitarian Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>CERF</td>
<td>Central Emergency Response Fund</td>
</tr>
<tr>
<td>CFS</td>
<td>Child Friendly Spaces</td>
</tr>
<tr>
<td>CLA</td>
<td>Cluster Lead Agency</td>
</tr>
<tr>
<td>CMAM</td>
<td>Community Based Management of Acute Malnutrition</td>
</tr>
<tr>
<td>CPC</td>
<td>Child Protection Centre</td>
</tr>
<tr>
<td>ECD</td>
<td>Early Childhood Development</td>
</tr>
<tr>
<td>EPR</td>
<td>Early Recovery Plan</td>
</tr>
<tr>
<td>ERWG</td>
<td>Early Recovery Working Group</td>
</tr>
<tr>
<td>FANS</td>
<td>Flood Affected Nutrition Surveys</td>
</tr>
<tr>
<td>GAM</td>
<td>Global Acute Malnutrition</td>
</tr>
<tr>
<td>GBV</td>
<td>Gender Based Violence</td>
</tr>
<tr>
<td>IDPs</td>
<td>Internally Displaced Persons</td>
</tr>
<tr>
<td>IYCF</td>
<td>Infant and Young Child Feeding</td>
</tr>
<tr>
<td>LHWs</td>
<td>Lady Health Workers</td>
</tr>
<tr>
<td>McRAM</td>
<td>Multi-Cluster Rapid Assessment Mechanism</td>
</tr>
<tr>
<td>MDGs</td>
<td>Millennium Development Goals</td>
</tr>
<tr>
<td>MICS</td>
<td>Multiple Indicator Cluster Surveys</td>
</tr>
<tr>
<td>MNHC</td>
<td>Maternal and Newborn Health Care</td>
</tr>
<tr>
<td>MAM</td>
<td>Moderate Acute Malnutrition</td>
</tr>
<tr>
<td>MoE</td>
<td>Ministry of Education</td>
</tr>
<tr>
<td>MoH</td>
<td>Ministry of Health</td>
</tr>
<tr>
<td>NDMA</td>
<td>National Disaster Management Authority</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Governmental Organization</td>
</tr>
<tr>
<td>OCHA</td>
<td>Office for the Coordination of Humanitarian Affairs</td>
</tr>
<tr>
<td>PATS</td>
<td>Pakistan Approach to Total Sanitation</td>
</tr>
<tr>
<td>PFRERRP</td>
<td>Pakistan Flood Relief and Early Recovery Response Plan</td>
</tr>
<tr>
<td>PINS</td>
<td>Pakistan Integrated Nutrition Strategy</td>
</tr>
<tr>
<td>PLHIV</td>
<td>People Living with HIV</td>
</tr>
<tr>
<td>PLW</td>
<td>Pregnant and Lactating Women</td>
</tr>
<tr>
<td>PPTCT</td>
<td>Prevention of Parent to Child Transmission (of HIV)</td>
</tr>
<tr>
<td>SAM</td>
<td>Severe Acute Malnutrition</td>
</tr>
<tr>
<td>TLC</td>
<td>Temporary Learning Centre</td>
</tr>
<tr>
<td>TSS</td>
<td>Transitional School Structure</td>
</tr>
<tr>
<td>TWG</td>
<td>Thematic Working Group</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children's Fund</td>
</tr>
<tr>
<td>WFP</td>
<td>World Food Programme</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
</tbody>
</table>

References


For more information, please contact:

Dan Rohrmann, Representative, drohrmann@unicef.org
Karen Allen, Deputy Representative, kallen@unicef.org
Alhaji Bah, Chief of Field Operations, abah@unicef.org
Kristen Elsby, Chief of Advocacy and Communication, kelsby@unicef.org
Loa Magnusdottir, Resource Mobilisation Specialist, lmagnusdottir@unicef.org

United Nations Children’s Fund
Pakistan Country Office

Website: www.unicef.org/pakistan

© United Nations Children’s Fund
July 2011

Cover photo credit:
©UNICEF/PAK/2011/Noorani