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Pakistan Floods

Response Plan
September 5th, 2022

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for every child

Situation Overview and Humanitarian Needs

Pakistan has been impacted by severe monsoon weather since mid-June. Since then, the situation deteriorated significantly due to rainfall that has been equivalent to nearly 3 times the national 30-year average. This has caused widespread flooding and landslides, with severe repercussions for human lives, property and infrastructure. To date, 80 districts have been declared 'calamity hit' by the Government of Pakistan. Some of these districts also host over 400,000 Afghan refugees, who have fled to Pakistan over the past four decades.

More than 6.4 million people, of whom an estimated 3.4 million children, are in need of humanitarian assistance. To date, 1,325 people have lost their lives, including 466 children¹. Southern and central Pakistan have been most affected, particularly in Balochistan and Sindh provinces, with Punjab and Khyber Pakhtunkhwa (KP) also severely affected. Over 560,000 houses have been destroyed and over 1.13 million houses damaged.




Public health facilities that provide essential health and nutrition services are significantly damaged with loss of essential medicines, including 1,460 health facilities damaged (543 fully and 1,028 partially damaged)². Vaccine cold rooms have been destroyed with vaccines washed out in floods.

Preliminary data from the provinces indicate major damage to WASH infrastructure. Estimates range from 20 per cent of water supply systems to be damaged in Khyber Pakhtunkhwa, 30 per cent in Balochistan and up to 50 per cent in the hardest hit areas of Sindh and Punjab provinces. A recent rapid assessment in Balochistan indicated 63 per cent of respondents consider lack of access to drinking water as a primary concern. For displaced persons, many who will be unable to return home for weeks, access to drinking water, sanitation and hygiene promotion is critical. There is significant risk of disease outbreaks with people resorting to open defecation and drinking unsafe water.

Flood-affected areas are among the parts of Pakistan where children already suffered some of the highest rates of chronic and acute malnutrition as per NNS³ 2018, and various MICS reports. Increases in diarrhoea and decreased access to food, on top of pre-existing poor nutrition, is a critical threat to some

Funding Needs
US\$ 39.16* million

Situation in Numbers

-  **33 million**
People affected by heavy rains and floods
-  **3,400,000**
Children in need of assistance
-  **6,400,000**
People in need of assistance
-  **5,200,000**
People targeted for assistance

(OCHA, Flood Response Plan, 2022)

People in Camps	637 K
Deaths	1.3 K
Injured	12.7 K
Crops Affected (in acres)	3.6M
Houses Destroyed/Damaged	1.69 M
Houses Destroyed	560 K
Houses Damaged	1.13 M
Livestock Lost	750 K
Roads Damaged (in km)	5.7 K
Bridges damaged	246

*OCHA Snapshot, 5th Sept, 2022

¹ NDMA Situation Report as of 5th Sept, 2022. [Here](#)

² WHO Situation Report, Issue 2, 3rd Sept, 2022 [Here](#)

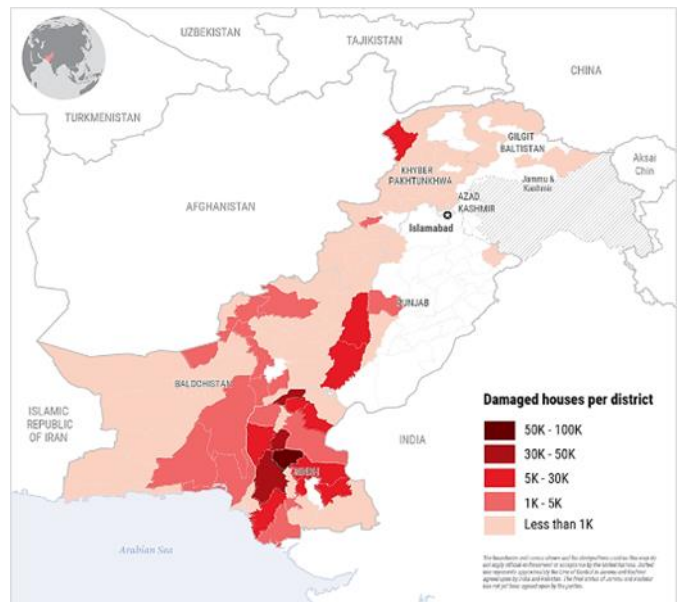
³ National Nutrition Survey, 2018.

*Flash Appeal (US\$ 37.16) with an additional US\$2m for emergency preparedness.

682,000 people (children, women and men) in flood-affected areas. The significant loss of livestock and crops are also having a negative impact on livelihoods as well as on the overall food security at a time when the economic situation in Pakistan is also worsening with rising prices of basic food commodities.

Education was hard hit by the flood emergency. Provisional data from the provincial Education Departments indicate that at least 21,336 schools (17,455 schools in Sindh, 1,677 in Balochistan, 1,180 in Punjab and 1,024 in KP) have been damaged or destroyed with infrastructure assessments still ongoing, disrupting the education of at least 3.7 million children. Also, more than 5,500 schools in flood-affected areas are being used as shelters for displaced families, further limiting access to learning opportunities.

The floods are undermining the resilience and psychosocial wellbeing of children and their caregivers, leaving many experiencing distress, with limited or strained support systems. In a recent UN Rapid Needs Assessment 43 per cent of girls, 45 per cent of boys and 55 per cent of caregivers were reported to be showing signs of stress. Girls and boys are exposed to a range of new flood-related physical risks and hazards, including from damaged buildings, drowning in flood waters and being bitten by snakes. Marginalized children, such as those with disabilities, are experiencing increased vulnerability due to disrupted access to essential services. Existing referral pathways for child protection services have limited capacity to respond to the increased needs that have emerged. Gender discrimination and societal norms may place women and girls, particularly adolescent girls, at additional risk not limited to child marriage and forms of sexual abuse and exploitation (rape, harassment, trafficking). According to the findings of the RNA, some families report to be resorting to negative coping mechanisms such as child marriage in response to the flood.



Summary of Programme Response

UNICEF Pakistan has field offices in all four affected provinces and has been working with the government, other UN agencies and NGO partners to respond by repurposing existing resources and drawing on lifesaving stockpiles of supplies. While mounting an initial response, UNICEF has participated in rapid needs assessments and is leading sectoral coordination in the Education, Nutrition and WASH sectors and Child Protection Sub-sector. An inter-agency UN Flash Appeal to respond to the flood was launched on 30th August 2022 requesting US\$ 160 million. UNICEF is part of this appeal and requires US\$ 37.16 million to provide immediate lifesaving support to address the urgent needs of 3.4 million children in the most affected areas and US\$ 2m to prepare for the upcoming extreme cold weather-related winterization support in Balochistan and KP provinces.

WASH

It is estimated that 2.2 million people are in need of WASH services across four provinces. In response, UNICEF has initiated WASH interventions in all four provinces and has activated partnerships with counterparts, CSOs and the private sector, mobilizing over US\$ 700,000 worth of supplies. Initial supplies have been distributed and a full range of WASH activities initiated in five districts in Sindh, two hard hit districts in Balochistan, two districts of Punjab and one district of KP. This includes water tankering to displaced populations, quick restoration of water systems, installation of water filtration plants, installation of temporary gender sensitive latrines and washing facilities and distribution of WASH hygiene kits for hygiene promotion and menstrual health coupled with dissemination of risk reduction gender sensitive WASH messages.

Thus far, approximately 85,000 people have been reached with access to safe drinking water through water tankering, installation of water filtration plants, and restoration of water systems. Over 20,000 people have been reached with

messages on safe hygiene practice and 2,436 people have been reached with access to temporary toilets. In coordination with WASH government counterparts, UNICEF has initiated emergency WASH coordination in Sindh and Balochistan, KP and in Punjab provinces. To meet the WASH needs of prioritized populations, rapid scale up in the four provinces is urgently required, including increasing water supply, sanitation for displaced persons, hygiene education, supplies and restoration of damaged infrastructure.

Nutrition

An estimated 1.4 million people, mainly children, adolescent girls and Pregnant and Lactating Women (PLW), need preventive and curative lifesaving nutrition interventions. UNICEF reinforced its ongoing nutrition programmes in the four provinces affected by the flooding, as well as initiated new responses in the badly affected districts of Balochistan and Sindh. In Balochistan, eight new OTPs⁴ have been established with 3,340 children and over 1,000 PLWs reached with nutrition services and supplies. The nutrition response is prioritized in 11 badly affected districts of Sindh, both through static and mobile services, with 53 new OTP sites established in KP. While building on existing functional OTPs in Punjab, over 37,500 caregivers have been reached with Maternal and Infant young child nutrition (MIYCN) messages in four districts badly affected by the flooding. Cluster Coordination and Information Management, both at national and provincial level, are being strengthened. To protect, support and promote infant and young child feeding in emergency (IYCF-E), a notification from the Ministry of Health was issued and circulated against the inappropriate donation, procurement, and distribution of Breast-milk Substitutes (BMS).



Health

With the damage to public health facilities, provision of healthcare is currently constrained. The risk of waterborne diseases is high, including cholera. In response to the affected population's health needs, UNICEF is providing lifesaving medical equipment, essential medicines and vaccines. Across the four provinces, 50 mobile health clinics are operational; 14 in Balochistan, 18 in Sindh, and 18 in Khyber Pakhtunkhwa, with more to be established. The cold chain system is being assessed and vaccines to prevent Cholera and Polio have already been administered to over 4000 children and measles vaccine to 27,250 children. Ante Natal care and postnatal care services have been given to 1,112 women. Behaviour change messages to prevent acute watery diarrhoea, cholera, measles, respiratory diseases, and other illnesses have been delivered via outreach sessions and other platforms. Additional quantities of lifesaving medical supplies, essential drugs, and vaccines will be needed, as well as further support to health outreach services, to deliver lifesaving treatment and disseminate behaviour change messages to prevent some of the most common diseases that affect displaced populations following floods. Recruitment of additional health staff to support the activities will be required, with special focus on women healthcare workers.



Education

UNICEF and partners are supporting provincial and district education departments to resume educational and recreational activities in flood affected areas. To date, around US\$ 250,000 of prepositioned supplies have been mobilized, including tents, school in a box (SIB⁵), recreational kits, blackboards, school bags, tarpaulins, face masks, etc. for distribution in Balochistan and Sindh to around 50,000 children. UNICEF has established four Temporary Learning Centres (TLCs) in Balochistan province for 308 children with education services and supplies, with plans to open 50 TLCs in the most affected districts. Similarly, one Temporary Learning Centre has been established in Sindh for 300 children, with a plan to scale up to 500 TLCs for 20,000 students, with the other two provinces to follow. The experience of past disasters and of the COVID-19 pandemic shows that absence from school not only results in learning losses but also can lead to psycho-social problems and child protection issues. There is a need to establish more TLCs in relief camps as well as in communities, provide supplies, dewater/clean affected schools, provide psychosocial

⁴ Outpatient Therapeutic Feeding Program

⁵ School in a Box

support to children through training and support to teachers, conduct health screenings, and organize back-to-school and enrolment activities for cleaned/cleared schools once they reopen.

Child Protection

UNICEF and partners are providing children and families with interventions to prevent and respond to violence, abuse, neglect and exploitation, this includes establishing a stronghold in the community to provide information on child protection and how and where to access available child protection services, supporting community-based mental health and psychosocial support (MHPSS) interventions, updating referral mechanisms, providing specialized child protection and conducting awareness raising on GBV and training on PSEA. To date, UNICEF has activated five partnerships with civil society organisations to bring CP services to flood-affected children and families, initially covering six districts (Umerkot and Larkana in Sindh; Lasbella, Pishin, Killa Saifullah and Quetta in Balochistan; and Rajanpur and DG Khan in Punjab). Additional partnerships are being agreed upon to further increase this coverage. UNICEF is also working in partnership with Social Welfare Departments to replicate or expand the government’s district Child Protection Unit (CPUs) to support children at risk and survivors of protection violations this includes the deployment of case workers and psychologists, to date, fourteen district CPUs are engaged in Baluchistan, Sindh and KP. UNICEF has also developed a comprehensive communications kit with key messages, brochures and recorded audios on key child protection kits for outreach activities with affected children and families, as well as disseminated a new family PSS wellbeing kit for self-direct PSS. Stocks are being prepositioned to support 40,000 children, including sports and wellbeing kits, as well as tents, mats and tarps for PSS spaces.



UNICEF’s Emergency Response Strategy (6 months)

The proposed Flash Appeal focuses on the lifesaving humanitarian response for the first 6 months (September 2022 to February 2023). This emergency response aims to alleviate the immediate needs and will consist of interventions in WASH, nutrition, health, education and Child Protection. Response, targets and funding requirements per sector are as follows:

UNICEF Priorities to Meet Immediate Needs

UNICEF urgently requires additional funding to continue supporting affected populations and prepare for potential additional floods and storms. All UNICEF sectors are responding, and additional resources will allow UNICEF, with the Government and partners, to continue supporting essential life-saving services. The needs indicated below are UNICEF’s targets and planned activities (funds permitting).

Indicators with Targets	Key Activities
WASH	
<ul style="list-style-type: none"> • 750,000 people (218,745 men, 227,188 women, 149,125 boys and 155,213 girls) have access to sufficient and safe quantities of drinking water • 225,000 (including 65,543 men, 68,156 women, 44,738 boys and 46,564 girls) have access to toilets and washing facilities • 1.5 million people (including 436,950 men, 454,375 women, 298,250 boys, 310,425 girls) have access to critical WASH related information and WASH NFIs⁶ 	<ul style="list-style-type: none"> - Improve access to water of appropriate quality and quantity, with a focus on displaced populations and including needs in places of learning and health centers. Specific interventions may include: <ul style="list-style-type: none"> - temporary support for water tankering - water treatment and water quality monitoring and surveillance - restoration of damaged water systems (both public and community-operated) - household POU (point of use) water treatment solutions - Improve access to toilets and washing facilities that are culturally appropriate, secure, sanitary, user-friendly and gender-appropriate, with a focus on displaced populations and including places of learning and health centers - Improve access to critical WASH-related information to promote safe hygiene practices and distribution of WASH

⁶ non-food items

	<p>NFIs, including hygiene kits that cater to the specific needs of adolescent girls and women.</p> <ul style="list-style-type: none"> - Support coordination of the WASH sector response.
Nutrition	
<ul style="list-style-type: none"> • 104,530 children screened for malnutrition (disaggregated by gender) • 31,990 children aged 6 to 59 months (disaggregated by gender) with severe wasting admitted for treatment • 72,540 children aged 6 to 59 months (disaggregated by gender) receiving multiple micronutrient powders • 96,720 primary caregivers of children aged 0 to 23 months receiving counseling on infant and young child feeding, and maternal nutrition 	<ul style="list-style-type: none"> - Promotion, protection, and support of IYCF, through community volunteers, media and other communication channels. - Conduct MUAC and oedema screening of children 6-59 months, as well as MUAC screening of PLW and counseling on maternal nutrition - Management of children with severe wasting - Provision of micronutrient supplements for children, adolescent girls and PLW - Train community volunteers and health workers on MUAC screening, oedema detection, wasting management, defaulter tracing and IYCF promotion and counseling - Cluster Coordination, Information Management (including SMART surveys) and Nutrition Commodities Management, including procurement, quality assurance and distribution.
Health	
<ul style="list-style-type: none"> • 70 functional Mobile Health Units providing community-based outreach primary healthcare services • 500,000 children, women, and adolescents equitably access essential health services with sustained coverage of high impact preventive and curative interventions • 96,000 children (6 to 59 months) vaccinated against measles • 25,600 pregnant women provided antenatal care services (ANC) 	<ul style="list-style-type: none"> - Health outreach activities to be organized by establishing health camps and mobile health units in districts where health facilities are damaged - Provision of life saving medicines through the mobile camps and vans and through existing health facilities - Provision of HR support to districts with affected human resources - Provision of Immunization services for children 6-59 months against measles. - Provision of ANC and postnatal care services and distribution of Newborn Kits and Clean Delivery Kits - Establishment of specialized ORT treatment services for children with diarrhea
Education	
<ul style="list-style-type: none"> • 1,275 TLCs established for 3-16 years old children in flood affected districts to provide a safe and secure learning environment • 153,000 children enrolled in TLCs/schools from ECE up to secondary school level • 153,000 children receive education supplies including SIB and SLK • 3,825 teachers trained on MHPSS and multigrade teaching methodologies 	<ul style="list-style-type: none"> - Support education sector coordination and information management - Establishment of TLCs / schools in flood affected districts for children age 3-16 years in relief camps and in communities - Conduct enrolment drives/campaigns to enroll and retain children in the TLCs/schools - Provide education supplies to children including School in a Box (SIB) and Student Learning Kits (SLK) IB and SLK. - Train teachers (men and women) on MHPSS and multigrade teaching methodologies.
Child Protection/GBV/PSEA	
<ul style="list-style-type: none"> • 134,000 girls, boys and caregivers access mental health and psychosocial support • 8,200 girls and boys receiving individual case management and specialized services • 1.9 million boys, girls, women and men reached through awareness activities and UNICEF-supported community mobilization interventions on key child protection risks and available services • 2.5 million people with access to safe channels to report sexual exploitation and abuse (PSEA) 	<ul style="list-style-type: none"> - MHPSS activities for children and caregivers are linked with referral mechanisms for more specialized services, and distribution of recreation and family PSS kits - Provision of case management for children at risk and survivors of child protection violations - Community engagement and social mobilization on key child protection risks and available services - Training of frontline workers on PSS and child protection. - Conduct awareness raising and training on PSEA targeting affected communities and humanitarian workers across all sectors - Distribution of hygiene/dignity kits - Integrate key messages on GBV (including available response services) into mother support groups, IYCF activities etc.

- 700,000 women, girls and boys accessing GBV risk mitigation, prevention or response interventions.

**Cross Cutting: Gender and disability in their multiple intersections incorporated in every phase of the response, with a human rights-based approach*

***Considering the evolving humanitarian situation, UNICEF will continue to update this response plan. UNICEF's interventions will fully integrate components to ensure UNICEF and partners accountabilities on PSEA are met.*

Funding Requirements:

UNICEF urgently appeals for US\$ 39.16 million to sustain provision of life-saving services for flood affected women and children in Pakistan. UNICEF expresses its sincere gratitude to all public and private donors for the contributions that have supported flood relief. Without sufficient funding, people affected will not have access to adequate health, nutrition, WASH, education, and protections needs. UNICEF further requires support for winterisation as some parts of the country will soon be faced with cold temperatures. To meet the immediate flood response needs, UNICEF has received US\$ 1.1m under CERF, repurposed US\$ 2 million from regular resources and has delivered US\$1.3 million in prepositioned supplies, with an additional US\$ 1 million of supplies to be urgently delivered to worst affected districts.

UNICEF Sectors	Requirements in US\$
WASH	17,300,000
Nutrition	3,980,000
Health	6,500,000
Child Protection	3,260,000
Education	6,120,000
Total Response Requirement	37,160,000
Emergency Preparedness	2,000,000
Total	39,160,000

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