

HIGHLIGHTS

- Each returning IDP family will receive a cash transfer of approximately US\$250.
- 1.6 million people affected by the monsoon floods in 2015.
- Government sends 54 million flood early warning SMS messages.
- Findings from Pakistan consultations to feed into 2016 World Humanitarian Summit.

FIGURES

Estimated IDPs in KP and FATA (UNHCR)	1.2 million
Expected returnees to FATA in 2015	1 million
Estimated returnees to FATA since 2008 (UNHCR; Government)	3.4 million

STRATEGIC PLAN 2015 FUNDING

\$434 million
requested

54% funded

\$234 million
received as of September



21 per cent of returning households are female-headed

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Empowering Women through the Electronic Cash Transfer Programme in FATA¹

The Federally Administered Tribal Areas (FATA) have historically been one of the most underdeveloped regions of Pakistan, with almost 60 per cent of the population living below the poverty line of US\$1.25 per day. Literacy rates are at 17.5 per cent, with female literacy at only 3 per cent. Under these circumstances, the widespread displacement of FATA residents to camps and spontaneous settlements in early 2014 created unprecedented challenges for both the displaced population and the Government response.

An estimated 75 per cent of the displaced population are women and children. The humanitarian community and the Government of Pakistan, through the FATA Disaster Management Authority (FDMA), support displaced people by providing Government assistance through electronic cash transfers.

Cash assistance is delivered through Automated Teller Machine (ATM) cards and mobile transfers to Subscription Identity Module (SIM) cards. The United Nations High Commission for Refugees (UNHCR) and FDMA jointly collect data on families passing through embarkations points, and distribute SIM and ATM cards to more than 300,000 registered families by the end of 2016. To date, more than 60,000 returning families have received these cash grants.

According to FDMA, around 21 per cent of these returning households were female-headed. Providing SIM and ATM cards to female-headed households is made more challenging due to several factors including: social norms that restrict the mobility of females and their interaction with men outside of immediate family; low rates of female literacy; and a lack of familiarization with mobile phone and ATM technology. Following effective advocacy by the Government with the support of the UN, all registered returning female-headed households now receive SIMs and ATM cards to access cash upon return.



Returning IDPs are provided with ATM and SIM cards to access the Government cash grant of US\$250. Credit: OCHA

¹ All the data used in this article was provided by FDMA, Government of Pakistan, and UNHCR.

Each returning family receives PKR25,000 (approximately US\$250) amounting to a total of PKR300 million for female-headed households alone.



A female head of household registers for the IDP cash transfer programme.
Credit: SSEWA PAK

Each returning family receives PKR25,000 (approximately US\$250). Of the total funds distributed, an estimated PKR300 million will be for female-headed households. Previously, many female-headed households were excluded from both IDP registration and cash compensation for various reasons including not having a national identity card; exacerbating their vulnerability. This effort empowers women to assume a more active role in the return

process. It has also helped reduce the use of negative coping mechanisms by female-headed households including reducing food intake, boys and girls leaving school to work, early marriages and assuming debt to finance agricultural activities.

Khan Auro, a recent returnee, states that the way the cash was dispersed was not an issue despite the lack of a bank in Khyber Agency. "We travelled to Peshawar to withdraw the funds, and to use the card at authorized EasyPaisa shops. I received the money in three installments." The money has enabled her to reconstruct her modest dwelling, putting a roof over the heads of her eleven children.

The Government and the World Bank are planning to use the same cash transfer mechanism for livelihood and housing grants. The World Bank has already committed to loaning the Government PKR7.8 billion (\$75 million) for IDPs returning to FATA.

This news will come as a relief to returnees like Jaan Bibi, who recently returned with her family to Bara, Khyber Agency. Jaan's house had been almost totally destroyed and the roof had collapsed. She used most of the money to reconstruct their home and purchase basic furnishings. While her four sons are financially independent, she is still responsible for her two daughters, both of whom are unmarried. "I used to work in the fields, but I cannot do that anymore because of the security situation and the curfew," she says. "This money has been a support for us. It allowed us to rebuild our home, but now it has run out. I am worried. I have daughters that still depend on me until they get married."

2015 monsoon flood overview

2015 flood in numbers

1.6 M people affected

238 reported fatalities

10,716 houses damaged

4,111 villages affected

0.35 M acres of crops destroyed

Starting in late July, Pakistan was hit by flash floods in the northern areas of Chitral and Gilgit Baltistan caused by heavy monsoon rains and the rapid melting of snow followed by flooding of the Indus River in Punjab and Sindh. The floods caused 238 deaths (115 men, 58 women and 65 children) and affected an estimated 1.6 million people. The floods also had a significant social and economic cost with more than 10,000 houses damaged, as well as large scale damage to crops and livestock in affected areas. While the Government has banned people from living on the river course and adjacent flood plains, an estimated 2.6 million people continue to do so due to poverty and to take advantage of the fertile soil.

Pakistan has seen recurrent monsoon floods since the mega floods of 2010, often with the same areas being affected year after year. In the past five years, only the floods in 2013 were less severe. Flooding of the Indus River in Punjab and Sindh in 2015 was confined to the river course. As one of the countries most affected by climate-related events, Pakistan is likely to continue experiencing monsoon floods in the coming years.

Response in numbers**835 relief camps established****232,384 people****accommodated in camps****1.2 M people evacuated****375 rescue boats used****2 helicopters deployed****133,221 tents provided****3.6 M aqua tabs****distributed****5,847 tons rations****distributed**

The capacity of the Government authorities and the Pakistan Army to respond has improved significantly since 2010. In 2015, the Government communicated early warnings including through 54 million SMS alerts and established 835 relief camps which were used to accommodate over 232,000 people affected by the floods. In addition, 133,221 tents were distributed along with 5,847 tons of food and over 3 million aqua tabs for the treatment of drinking water.

Much of this response was focused on Punjab and Sindh provinces where the most people were affected and Chitral, which suffered the most extensive damage. Two helicopters were also provided to assist with the relief effort in Chitral. Compared with the response in previous years, the Government was more proactive in undertaking preparedness measures including developing contingency plans, prepositioning emergency stocks and identifying at-risk areas.



The floods caused extensive damage to crops. Credit: SSEWA PAK



A young boy navigates the flood waters. Credit: Muslim Aid

While the Government did not officially request the humanitarian community for support, WFP, WHO, UNICEF and civil society organisations were asked to provide specific assistance bilaterally. WFP provided two boats, trained Government staff on warehouse management and continues to assist in restoring community infrastructure in affected areas. Meanwhile, WHO provided various medicines and anti-venom, and 100,000 aqua tabs, and UNICEF provided 600,000 aqua tabs and over 4,000 bars of soap. NGOs conducted an assessment of 12 flood affected districts of Sindh province. Finally, several national and international NGOs also provided a range of assistance at the request of the provincial and local authorities.

Responding to flash floods is made more challenging due to rapid onset and the often remote terrain in which they occur. Flash floods in Chitral, Gilgit Baltistan, and Rajanpur occurred with almost no warning, causing large scale destruction to primary transport routes including roads and bridges. Interviews with village elders in Gilgit Baltistan indicated that more than two months on, some affected villages including in the Haramosh valley of Dassau, Gilgit are still inaccessible by road.

Nationally, an estimated 58.1 per cent of households are food insecure while an estimated 11.6 per cent of children under 5 years old are severely underweight.

Improving the odds

Seven month old Ibrahim lives in Zangali Nehar village of the Mashogagar area of Peshawar District. Halima, Ibrahim's mother, gave birth to her first child when she was 17 years old. Since then, five of her seven children have died before they were 7 months old due to malnutrition. The odds were not in Ibrahim's favour, with multiple factors putting him at high risk of developing malnutrition. While there is a Basic Health Unit in the area, people of the village cannot access it due to the security situation. There have also been problems with sanitation in the village due to the lack of a proper drainage system. Ibrahim's situation is further compounded by his father being a daily labourer earning less than US\$3 per day.



Seven month old Ibrahim was suffering from severe acute malnourishment. Credit: Relief Pakistan

Ibrahim was born premature and underweight. His mother, Halima, suffered from poor nutrition exacerbated by tuberculosis both before and during her pregnancy. Immediately after birth, rather than being fed with breast milk, Ibrahim was fed with a few drops of honey according to the traditional practice of "Ghutti". The honey did not provide the nutrients that Ibrahim's premature and weak body desperately needed. Unaware of the benefits of starting him on a combination of semi-solid food and breastmilk (complementary feeding) after six months, Halima continued with just bottle feeding.



Ibrahim with his father after completing the OPT treatment. Credit: Relief Pakistan

Malnutrition risk factors	Ibrahim
Social factors	
Illness/unemployment of parents	X
Loss of parents (death, separation)	
Poorly educated caregivers	X
Many children in family	
Drug addiction in family	
More than 2 children under than 5	X
Bottle feeding	X
Early or delayed complementary	X
Medical factors	
Low weight at birth (premature, twins/multiple births)	X
Chronic recurrent diarrhoea	X
Measles, tuberculosis, whooping cough	
Incomplete vaccination against chronic diseases	X

Ibrahim's weight increased steadily, while the measure of his MUAC increased from 8.3 cm indicating severe acute malnutrition to 12.6 cm indicating normal nutrition status.

During an active screening session, Relief Pakistan staff identified Ibrahim as being severely acute malnourished. He was frail, sickly and irritable; his parents were eager for any assistance that might help save their son. Ibrahim was admitted to the Outpatient Therapeutic Programme (OTP) for children with severe acute malnutrition.

Under the programme, Ibrahim was fed with Ready to Use Therapeutic Food, while his mother was counselled about the importance of home cooked meals and proper hygiene practices. Special emphasis was placed on ensuring that all the water Ibrahim consumed was clean to minimize the risk of diarrhoea. Ibrahim's weight increased steadily, while the measure of his Mid-Upper Arm Circumference (MUAC) increased from 8.3 cm indicating severe acute malnutrition to 12.6 cm indicating normal nutrition status. His mother noted that while he was once lethargic, he is now able to sit up and play. She added, "I can never thank Relief Pakistan enough for what they have done for me and for my son. I had lost hope. I expected to lose another child, but now I have a ray of hope."

After completing the OTP treatment, Ibrahim was transferred to a Supplementary Feeding Programme for further care. The staff are keeping a close eye on him to make sure his progress continues.

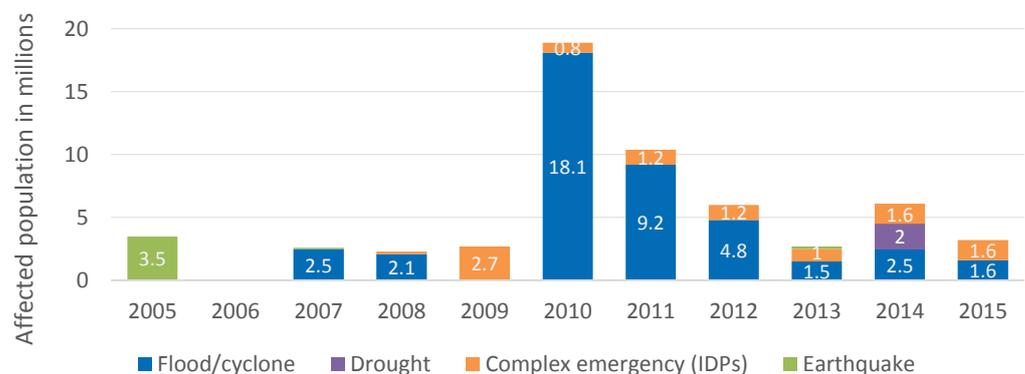
World Summit to transform humanitarian action

The number of people affected by humanitarian crises globally has doubled over the past decade, and it is expected to continue growing in coming years.² The rapidly increasing number of crisis-affected individuals has necessitated major reform of the humanitarian system and the development of innovative solutions to preparedness and response.

The World Humanitarian Summit is an initiative of the United Nations Secretary General that aims to promote a global commitment to humanitarian principles, and bring the international community together to new context-specific ways of collaborating to save lives. The Summit will be held in Istanbul on 23 and 24 May 2016, and will be the culmination of two years of consultations with humanitarian actors around the world.

More than 50 meetings and focus group discussions were held with humanitarian responders and affected communities across Pakistan. The views and ideas of those who participated will feed into the discussions at the World Humanitarian Summit next year.

Overview of emergencies in Pakistan - 2005 to 2015



² 80 per cent of the humanitarian crises globally in 2015 were man-made.

The key recommendations from the consultations in Pakistan centre on shifting from a donor-driven approach towards humanitarian action that is more localized with greater community involvement in all phases of preparedness and response.

The key recommendations from these consultations centre on shifting from humanitarian action that is donor-driven towards an approach that is more localized with greater community involvement in all phases of preparedness and response. Participants also recommended a greater emphasis on the adoption of indigenous knowledge and on resource mobilization at a regional level. The findings recommend increased capacity building at the community level to empower people to better deal with a crisis before outside support arrives. This includes identifying and training key focal points on basic first aid, and search and rescue, as well as strengthening early warning systems at the village level.



Participants, all of whom had either been affected by or had worked in responding to several humanitarian crises, highlighted the protection needs of vulnerable groups including women and children, the elderly, and persons with disabilities. They noted the importance of taking into account the specific needs of these groups, and recommended that all field staff be sensitised about these issues in advance. Including academics and the youth in researching and responding to crises was mentioned as a way to promote innovation in humanitarian action. Humanitarian responders recommended close coordination and joint resource mobilisation between Government and non-Government actors, as well as the development of emergency reserve funds at a provincial level to ensure those best placed to intervene after a crisis have direct access to the funds they require.



A man carries a child through the flood waters. Photo credit: Warrick Page. UNICEF.