

Preliminary emergency appeal n° MDRPK007
GLIDE n° [FL-2011-000130-PAK](#)
Operation Update no. 3
30 September 2011

Period covered by this Ops Update: 22 to 28 September 2011.

Appeal target (current): CHF 10.6 million.

Appeal coverage: To date, the appeal is 11.6 per cent covered in cash and kind; and 26.5 per cent covered including contributions currently in the pipeline. Funds are still urgently needed to support the Pakistan Red Crescent Society in this operation to assist those affected by the floods. [<click here to go directly to the updated donor response report, or here to link to contact details >](#)

Appeal history:

- This Emergency Appeal was initially launched on a preliminary basis on 9 September 2011 for CHF 10.6 million to assist 105,000 people (15,000 families) for four months.
- **Disaster Relief Emergency Fund (DREF):** CHF 500,000 was initially allocated from the International Federation of Red Cross and Red Crescent Societies' Disaster Relief Emergency Fund (DREF) to support the National Society to respond to the flood in Sindh.



With health and sanitation facilities left crippled by the disaster, flood-affected families face a severe shortage of clean water. Three PRCS water and sanitation teams are providing about 90,000 litres of clean water daily.
Photo: PRCS

Summary: Close to 9 million people have been affected by the current floods in Sindh, southern Pakistan. More than 670,000 people are estimated to be living in relief camps¹. A full-scale relief operation is underway, led by Pakistan Red Crescent Society (PRCS), and supported by the International Federation of Red Cross and Red Crescent Societies (IFRC), reaching more than 147,000 people (approximately 21,000 families) in three weeks.

The situation

The latest flooding catastrophe to hit Pakistan has brought Sindh to a crisis, described by authorities as the worst floods to have hit the province in living memory. The floods have caused 431 deaths and 755 injuries, destroying over half a million houses across 6.7 million acres of land.

According to the National Disaster Management Authority (NDMA), some 3,200 relief camps have been established and registered with the authorities, providing shelter and relief to more than 600,000 displaced

¹ National Disaster Management Authority (NDMA) – 28 September 2011

people, though it is believed that there are hundreds of unregistered “spontaneous” camps hosting affected people across Sindh.

The water levels in inundated areas have not reduced significantly in the past week, as access continues to pose a major problem to organizations aiming to operate in the area. The strain of increasing demands from multiple parties on existing local suppliers is beginning to show, with the supply chain for many organizations expanding outside of Sindh as responding agencies seek to procure more aid items.

Coordination and partnerships

The IFRC country office continues a coordination role with in-country partner national societies². The latest partnership meeting took place in Islamabad on 28 September, as new partners enter into agreements with PRCS, filling gaps and addressing needs allowing partners to share plans and updates and possible support to the appeal. There are ongoing negotiations and contact with various in-country institutional donors and embassies.

The cluster system has been activated and PRCS/IFRC is participating in the shelter, water, sanitation and hygiene (WASH) and health and nutrition clusters.

The country office continues to coordinate its response with the support of the zone office in Kuala Lumpur, with the next teleconference due on 30 September.

Red Cross and Red Crescent action

Overview

PRCS continues to lead the current flood response operation, with the support of IFRC, partner national societies and in-country institutional donors. Well-recognized as an important partner, the provincial branch of PRCS in Sindh continues to coordinate with the provincial disaster management authority, mobilizing in areas where gaps are present, and providing technical resources to refine sectorial assessments.



Seven relief teams, supported by three national disaster response teams from PRCS national headquarters, continue to provide food and non-food items to thousands of flood-affected families. **Photo:** PRCS

There are now 28 PRCS teams working in relief, health, water and sanitation, and assessments, supported by 84 volunteers in the field. Three national disaster response teams (NDRT) have been deployed to Sindh from the PRCS national headquarters, where they are assisting with the relief activities. The team leaders have been requested to supply a summary of their observations and recommendations for follow-up activities in the upcoming plan of action.

PRCS has also mobilized its newly established complaints handling cell, giving out contact information to beneficiaries during relief distributions. Initial complaints on relief distributions have been received at the national headquarters and after a screening process, follow-up instructions have been issued to the related PRCS branches. It is expected that the first batch of complaint cases will be resolved by October.

PRCS/IFRC’s integrated recovery programme (IRP) for the 2010 monsoon flash floods in Sindh continues to progress, despite the demands of the current relief operation. Bolstered by personnel from the national headquarters, PRCS Sindh branch has managed the operation without the need to mobilize staff and volunteers dedicated to the IRP areas in districts Kambar Shahdad Kot and Shikarpur. The villages targeted for IRP, though located in districts affected by the current flooding, survived relatively unscathed, and have continued the implementation of recovery programmes.

² British Red Cross, Canadian Red Cross, Danish Red Cross, Iranian Red Crescent, Norwegian Red Cross, Swiss Red Cross, Qatar Red Crescent, Turkish Red Crescent, UAE Red Crescent

The IFRC zone and regional offices are also providing surge support, with the arrival in country of a communications delegate and an emergency health coordinator. The zone's operations coordinator is currently in Sindh to assist with management aspects of the operation from there. A recovery coordinator was recruited and arrived in-country on 28 September.

Progress towards outcomes

Relief distributions (food and basic non-food items)

Outcome: The basic food and essential household needs of 15,000 flood-affected families are met within four months in five districts (Badin, Mirpurkhas, Khairpur, Benazirabad, Dadu) of Sindh province.

| Outputs (expected results) | Activities planned |
|--|---|
| The immediate needs of flood affected families are met through the distribution of food. | <ul style="list-style-type: none"> • Conduct on-the-ground assessments, selection and verification of 15,000 families with communities' participation in planning and distribution of relief items. • Mobilize required food assistance through international mobilization, international and local procurement following IFRC standards. • Provide assistance to 15,000 families through the procurement, warehousing, transport and distribution of food parcels (including wheat flour, rice, pulses, ghee, sugar, salt, tea, etc.). • Mobilize and train approximately 100 National Society/community volunteers in assessment, distribution, monitoring and evaluation and Sphere minimum standards. • Establish a beneficiary complaints cells and a monitoring system for the continuous improvement of delivery system. |
| The immediate needs of displaced families are met through the distribution of essential household items. | <ul style="list-style-type: none"> • Conduct on-the-ground assessments, selection and verification of 15,000 families with communities' participation in planning and distribution of relief items. • Mobilize required relief items through international mobilization, international and local procurement following IFRC standards. • Provide assistance to 15,000 families through distribution of household items (including tents, tarpaulin sheets, jerry cans, blankets, kitchen sets, hygiene parcels, mosquito nets, as well as other non-standard items such as insect repellent). • Establish a beneficiary complaints cells and a monitoring system for the continuous improvement of delivery system. • Mobilize and train approximately 100 PRCS/community volunteers in assessment, distribution, monitoring and evaluation, and Sphere minimum standards. • Ensure the replenishment of the PRCS strategic stock of the items utilized for the immediate relief. |

Progress:

The first distributions of the 53.5 kg food parcels planned under this programme took place on 27 September, with 300 families receiving this parcel in Benazirabad. As of 27 September, food distributions have reached 21,389 families.

| Targeted Districts | Families reached with food ³⁴ |
|--------------------|--|
| Mirpurkhas | 5,248 |
| Badin | 6,500 |
| Dadu | 667 |
| Khairpur | 2,174 |

³ Families reached have been calculated on the basis of food initially distributed. Non-food items were distributed to some of the same families who also received food, on need basis.

⁴ According to the availability, two types of food parcels were distributed: a 27.5-kg food parcel and a 14.5-kg food parcel to meet the emergency food needs. A total of 292 people were also provided with a single 10-kg bag of flour.

| | |
|-----------------------------|---------------------------|
| Benazirabad | 4,300 |
| Additional districts | |
| Thatta | 1,000 |
| Tharparkar | 500 |
| Hyderabad | 500 |
| T. Muhammad Khan | 500 |
| Grand total | 21,389⁵ |

The relief distributions are being led in the field by seven relief teams and supported by three NDRT teams deployed from the national headquarters. The relief programme is expected to continue until the end of 2011. IFRC continues to support the transportation and administration costs for the relief distributions being carried out by PRCS.

As of 26 September, the following non-food items have been distributed:

| Targeted Districts | Tents | Tarpaulins | Blankets | Mosquito nets | Hygiene parcels | Jerry cans | Kitchen sets | Kerosene stove | Sleeping mat | Insect repellent |
|----------------------|--------------|--------------|--------------|---------------|-----------------|--------------------|--------------|----------------|--------------|------------------|
| Mirpurkhas | 1,069 | 1,531 | 1,330 | 1,545 | 586 | 1,390 ⁶ | 650 | 1,500 | 300 | 100 |
| Badin | 2,350 | 200 | 580 | - | 824 | - | 4,100 | 1,580 | 310 | 332 |
| Khairpur | 1,470 | 2,030 | 0 | 2,200 | 400 | 1,000 | - | - | - | 500 |
| Benazirabad | 1,668 | 2,414 | 1,635 | 2,700 | 1,208 | 985 | 882 | - | - | 301 ⁷ |
| Dadu | 0 | 0 | 464 | 185 | 0 | 20 | 0 | 0 | 0 | 0 |
| Additional districts | | | | | | | | | | |
| Thatta | 100 | 200 | 500 | 0 | 200 | - | | 200 | 300 | - |
| Hyderabad | 100 | 200 | 500 | | 200 | 0 | 0 | 200 | 300 | 0 |
| T.M.Khan | 100 | 200 | 500 | 0 | 200 | 0 | 0 | 200 | 300 | 0 |
| Tharparkar | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 6,857 | 6,775 | 5,509 | 6,630 | 3,618 | 3,395 | 5,632 | 3,680 | 1,510 | 1,233 |

Challenges:

Access to affected districts remains the continuing challenge for delivering much needed relief assistance. Current limitations in assessment data are being met through field reports being provided by PRCS branches and relief teams deployed and secondary data shared by humanitarian partners. So far, 28 NDRT members in three teams have been deployed to the flood-affected areas. The main focus of these teams is to assist with the relief distributions. Team leaders are being requested to assist with observational and situational reports to add to the on going needs assessment without taking away from their focus of providing life saving relief. Participation in the cluster is challenging while still maintaining focus on relief. Greater logistical support with vehicles, administration, reporting and finance is challenging and additional surge support is required.

Emergency health and care

Outcome: Immediate health risks of 15,000 flood-affected families are reduced through the provision of primary health care services for three months in five districts (Badin, Mirpurkhas, Khairpur, Benazirabad, Dadu) of Sindh province.

| Outputs (expected results) | Activities planned |
|---|---|
| Target population have improved access to basic preventive, curative and referral | <ul style="list-style-type: none"> Conduct rapid assessment to determine immediate public health needs of the population as well as gaps in health services. Deploy ten mobile medical health teams to provide basic health |

⁵ Along with these, 1,150 4-kg bags of wheat flour were also distributed in some locations

⁶ Revised down.

⁷ Revised down.

| | |
|------------------|--|
| health services. | <p>services in areas not covered/reached by health authorities and partners.</p> <ul style="list-style-type: none"> • Carry out communicable disease prevention and health promotion activities in relief camps through mobilisation of volunteers and communities. • Contribute to the implementation of active surveillance, disease early warning system as well as response to outbreaks. • Coordinate/collaborate implementation of emergency health services with health authorities and humanitarian partners. |
|------------------|--|

Progress:

PRCS is continuing with its ongoing emergency health response activities in the flood-affected districts. Its main activities, through its ten mobile health units (supported by IFRC and partner national societies) and basic health unit in Larkana, are the provision of preventive and curative health care. The PRCS director of health is visiting the flood-affected areas in Sindh to oversee field operations as well as assess evolving needs/priorities, while the emergency health coordinator from the zone office arrived in Islamabad on 28 September to provide technical surge capacity for this operation in Sindh where the bulk of the recovery programme for the 2010 floods is being implemented.

With standing water isolating communities from road access, and many existing health facilities submerged, the PRCS mobile health units are providing services at the door steps of affected communities, and in relief camps. There has been no noticeable change in disease trends on the basis of consultations made by the health units, as the majority of treatments continue to be for acute respiratory infections, gastro-intestinal diseases and skin infections. PRCS has also scaled up disease prevention efforts through the conduct of health awareness sessions by health educators of mobile health units in Badin, Benazirabad and Dadu, as well as the incorporation of expanded programme of immunization (EPI) activities by the units in Mirpurkhas and Nawabshah.

To ensure a continuous supply of medicines for the health units, PRCS is in the process of procuring medicines. This is expected to be completed by end of September, with delivery to the health units in October.

Summary of people reached by PRCS health services

| District ⁸ | Consultations | Health education |
|------------------------------------|---------------|------------------|
| Badin | 9,362 | 250 |
| Mirpurkhas | 7,055 | |
| Tharparkar | 210 | |
| Benazirabad | 4,697 | 11 |
| Dadu | 769 | 165 |
| Hyderabad | 47 | |
| Jacobabad | 871 | |
| Larkana (basic health unit) | 1,059 | |
| Total | 24,070 | 426 |

However, the risk of vector-borne diseases is increasing. Dengue and malaria cases are already reported to be increasing in Sindh, while an unprecedented dengue outbreak is happening in Lahore, the capital of the neighbouring province of Punjab. PRCS is expediting the implementation of epidemic prevention and control in targeted areas through mobilization of trained community volunteers for the communication of prevention messages, and conduct of clean up campaigns.

PRCS continues to conduct well-received psychosocial activities including sports, poetry, singing and dancing. They have completed 122 group sessions for 2,258 beneficiaries, of which about half are children in Mirpurkhas and Benazirabad.

⁸ IFRC is supporting 6 mobile health units and one BHU. The reporting from health is being refined, and the data shown is by district, rather than by health unit, and reflects overall health data from all supporting partners.

Water and Sanitation.

| Outcome: Water and sanitation related diseases are reduced for 15,000 flood affected families for four months by increased access to safe drinking water, sanitation and hygiene promotion. | |
|--|--|
| Outputs (expected results) | Activities planned |
| Target population have increased access to safe drinking water, appropriate sanitation facilities and practice good hygiene. | <ul style="list-style-type: none"> • Assess water and sanitation needs in flood affected areas, with emphasis on women and children. • Treat and distribute safe drinking water through three water treatment plants. • Distribute water purifying tablets or sachets together with jerry cans using trained volunteers for household water treatment. • Construction of up to 1,000 latrines in camps using PRCS community consultation approaches. • Conduct emergency hygiene promotion activities and clean up campaigns in camps. • Coordinate with government and other humanitarian partners. |

Progress:

Safe drinking water continues to be distributed through the three water treatment plants in Badin, Mirpurkhas and Benazirabad. Water purification tablets/sachets are also still being distributed to households that are not being reached by the water treatment plant distributions. The number of beneficiaries have been recalculated based on a catchment population, and the water and sanitation teams aim to distribute the minimum of 5 litres per person daily, the minimum standards during emergency set by the water, sanitation and hygiene (WASH) cluster. Together, the three treatment plants produce approximately 90,000 litres of water daily.

Additional water treatment equipment has been mobilised from warehouses across the country where it was prepositioned to expand the distribution of safe drinking water to a greater target population. Treatment equipment will be established in two new locations in Badin and Benazirabad and expand the production capacity at the same location in Mirpurkhas. The equipment is expected to be operational by 5 October. Additional trucks are in the process of being hired in order to be able to expand the distribution of water to a greater target population of the most vulnerable living along the roadside as well as in the PRCS camp in Mirpurkhas. The IFRC water and sanitation officer from Punjab has been deployed to Mirpurkhas as part of the PRCS NDRT to support the establishment and expansion of water distribution. An additional IFRC water and sanitation officer from KPK will also be deployed as part of the PRCS NDRT to support in water and sanitation by 5 October.

| Districts | Water produced (litres) | Water distributed (litres) | People reached with water | Water purification tablets/sachets distributed | People reached with water purification tablets/sachets |
|--------------|-------------------------|----------------------------|---------------------------|--|--|
| Badin | 678,700 | 567,700 | 7,200 | 21,924 | 5,481 |
| Mirpurkhas | 549,000 | 533,000 | 10,000 | 20,195 | 2,955 |
| Benazirabad | 229,000 | 201,000 | 11,200 | 0 | 0 |
| Total | 1,456,700 | 1,301,700 | 28,400 | 42,119 | 8,436 |

In addition, PRCS hygiene promotion staff have trained 14 local volunteers (seven men and seven women) in Mirpurkhas and Badin to conduct hygiene promotion activities. So far, 32 sessions have been conducted for 689 beneficiaries. The IFRC female hygiene promotion officer has been deployed from Islamabad to Badin to supervise the volunteer hygiene promotion activities and ensure appropriate techniques are used to target the illiterate population, particularly females. The volunteers are targeting their hygiene activities at the PRCS-run camp in Mirpurkhas, at the mobile health units during the distribution of soap and hygiene kits as well as with the distribution of household water treatment tablets.

Challenges:

Access to vehicles has been a challenge for the hygiene promotion volunteers to be able to conduct their activities.

A tragic car accident on 28 September seriously injured the IFRC water and sanitation officer, preventing him from continuing to work with the operation. All attention has been given to his recovery. An additional IFRC

water and sanitation officer from KPK will be deployed in the interrim to replace him and continue to support the operation.

Logistics

The first batch of food parcels planned under the appeal were successfully procured using PRCS procedures, and more than 5,000 of these have been delivered to distribution points. As of 27 September, 300 of these have been distributed. In addition, IFRC has requested more vehicles and hired four additional drivers this week to support the ongoing operations.

The mobilization table continues to receive positive responses and the mobilization for this operation will be a mix of local procurement, international mobilisation from the Kuala Lumpur and Dubai regional logistics unit (RLU) warehouses and direct from international suppliers.

Donors are requested to coordinate with the Kuala Lumpur RLU regarding outstanding needs. Shipping instructions will be provided to donors with a consignment tracking number to be issued before shipping any goods to the operation. Procurement of goods and transport can also be arranged through RLU. The logistics team stress that all Red Cross Red Crescent Movement partners wishing to donate goods to this operation should coordinate via the RLU in Kuala Lumpur.

Communications – Advocacy and Public Information

In the two months since the rains began in Sindh, media interest has waned dramatically. This lack of interest has coincided, and perhaps indirectly influenced, the slow response from donors to the IFRC's appeal and to the appeals of other actors on the ground.

The focus of the zone communications team has been on proactively generating new media interest in the crisis, explicitly emphasising the 'ominous silence of donors'. The Zone communications team, working closely with the IFRC's South Asia regional delegation and Pakistan country office, with support from the Geneva communications department, produced the following documents:

- An opinion piece signed by the IFRC secretary general and pitched by British Red Cross to *The Guardian*.
- An *Issues Brief*: a short report analyzing the needs of affected communities and the slow donor response.
- Key messages and reactive Q&A.
- New video b-roll.

This pack compliments other materials that have been produced and posted on the new 'Pakistan Floods 2011' page on www.ifrc.org. These include a news story focusing on water and sanitation, a blog by the zone water and sanitation coordinator, as well as photos and additional video resources.

All resources have been shared with National Society communicators and are available on ifrc.org or via the IFRC Newsroom.

Contact information

For further information specifically related to this operation please contact:

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How we work

All IFRC assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGOs\) in Disaster Relief](#) and the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.

The IFRC's vision is to inspire, encourage, facilitate and promote at all times all forms of humanitarian activities by National Societies, with a view to preventing and alleviating human suffering, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

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The IFRC's work is guided by [Strategy 2020](#) which puts forward three strategic aims:

1. Save lives, protect livelihoods, and strengthen recovery from disaster and crises.

2. Enable healthy and safe living.
 3. Promote social inclusion and a culture of non-violence and peace.
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