

This report is produced by the OCHA Humanitarian Advisory Team (HAT) in Pakistan in collaboration with humanitarian partners. It covers the period from 24-30 September 2022. The next report will be issued on or around 7 October 2022.

HIGHLIGHTS

- Prevalence of water-borne and vector-borne diseases is a growing concern especially in Sindh and Balochistan, where many districts remain inundated.
- Around 1.6 million women of reproductive age, including nearly 130,000 pregnant women, need urgent health services.
- 8.62 million people in 28 assessed districts estimated to be in crisis and emergency phases of food security between September and November 2022, according to preliminary findings from Balochistan, Sindh and Khyber Pakhtunkhwa – including some 5.74 million people in flood-affected districts covered by the assessment.
- Government-led multi-sectoral rapid needs assessments completed in Sindh, Punjab and Khyber Pakhtunkhwa with the support of NGOs and the UN.

767K

houses destroyed

1.3M

houses damaged

13K

kilometres of roads damaged

1.7K

people killed

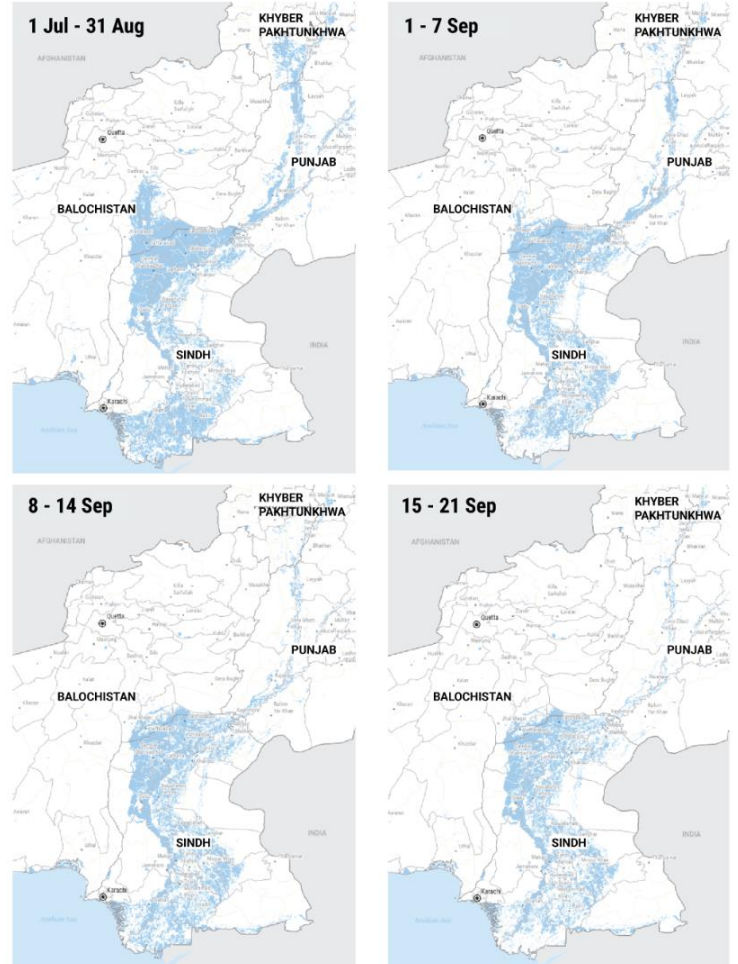
12.9K

people injured

1.2M

livestock lost

EVOLUTION OF FLOODWATER EXTENT (UNOSAT)



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. The Dotted line represents approximately the Line of Control in Jammu and Kashmir agreed upon by India and Pakistan.

SITUATION OVERVIEW

Rainfall in Balochistan and Sindh reduced substantially over the past week, as temperatures start to decrease towards the winter. Normal conditions are prevailing in most districts of Balochistan, while in Sindh, the Indus River is flowing normally at Guddu, Sukkur and Kotri Barrages, with reduced water levels along its margins. Overall, water levels are receding in the upper areas of Taluka Qubo Saeed Khan, Shahdadt, Kambar, Warah, and Nasirabad. As of 20 September, in 18 out of 22 districts of Sindh, floodwater levels had receded at least 34 per cent, and in some districts up to 78 per cent.

Large parts of Sindh remain flooded, with access continuing to be a challenge in inundated areas. Increasing cases of water-borne and vector diseases are a major concern, particularly in the most affected areas of Sindh, Balochistan and Khyber Pakhtunkhwa. On 20 September alone, the National Institute of Health reportedly recorded 1,900 cases of acute watery diarrhea, 200 cases of malaria and 50 cases of dengue fever across Balochistan, Khyber Pakhtunkhwa, Punjab and Sindh. Many people live in unsanitary conditions in temporary shelters, often with limited access to basic services, compounding the risk of a major public health crisis. When possible, pregnant women are being treated in temporary camps, and nearly 130,000 pregnant women need urgent health services. Already before the floods, Pakistan had one of the highest maternal mortality rates in Asia, with the situation likely to deteriorate.

Government-led multi-sector rapid needs assessments (RNA) conducted in Balochistan, Sindh and Khyber Pakhtunkhwa in September indicate that unsanitary practices are rising due to damaged water infrastructure, with open defecation in the assessed areas increasing from 21 per cent before the floods to 35 per cent after. Some 950,000 households' latrines were damaged or not accessible, with an estimated 6.3 million affected. An additional 14 per cent of affected persons (4.7 million) do not practice handwashing with soap at critical times due to a lack of facilities and limited awareness.

Malnutrition in flood-affected communities is a further concern. Prevalence of Global Acute Malnutrition (GAM) was already high in Balochistan, Khyber Pakhtunkhwa, Punjab, and Sindh prior to the floods; 96 per cent of children under 2 were not consuming a minimum acceptable diet, and at least 40 per cent of children under 5 were chronically malnourished (stunted). The current floods are expected to exacerbate food insecurity. Before the floods, an Integrated Food Security Phase Classification (IPC) analysis of 28 vulnerable districts in Balochistan, Khyber Pakhtunkhwa, and Sindh estimated 5.96 million people in the assessed districts to be in IPC Phase 3 (crisis) and 4 (emergency) between July and November 2022 – a figure that was expected to increase to 7.2 million people from December 2022 to March 2023. More recent analyses of these districts indicate preliminarily that 8.62 million people in the assessed districts are estimated to be in crisis and emergency phases between September and November 2022, including some 5.74 million people in flood-affected districts covered by the assessment – 3.82 million people in IPC Phase 3 and 1.92 million in IPC Phase 4.

As of 30 September, the National Disaster Management Authority (NDMA) has recorded nearly 1,700 deaths and more than 12,800 injuries since mid-June. The highest death rates were recorded in Sindh (747), Balochistan (325) and Khyber Pakhtunkhwa (307). More than 2 million houses have been damaged or destroyed and around 7.9 million people are reportedly displaced, including some 598,000 people living in relief camps, according to reports by the Provincial Disaster Management Authorities (PDMA) of the affected provinces. Estimates indicate that more than 7,000 schools are currently being used to host displaced populations, while an estimated 25,100 schools have been damaged.

HUMANITARIAN RESPONSE

The humanitarian response is ongoing under the leadership of the Government of Pakistan. Alongside the Government's aid distribution, as of 30 September, the Benazir Income Support Programme (BISP) has reached over 2.3 million flood-affected households with flood relief cash assistance of PKR 25,000 (US\$ 110) per household.

National and international NGOs are continuing their assistance for affected people through activities including food, health, non-food items (NFI), and water, sanitation and hygiene (WASH) support. Sixty-three members of the National Humanitarian Network (NHN) are responding in 76 affected districts, as are 37 members of the Pakistan Humanitarian Forum (PHF). The Pakistan Red Crescent (PRCS), with the support of the International Federation of Red Cross and Red Crescent Societies (IFRC) and its movement partners, continues to expand its coverage by providing emergency lifesaving assistance in Sindh, Balochistan, Khyber Pakhtunkhwa, Punjab and Gilgit Baltistan. This includes the provision of basic healthcare, clean water tents, household hygiene kits, mosquito nets and other household items, and food distribution. Humanitarian partners including the UN have distributed conditional and unconditional cash grants to benefit more than 52,100 people in Balochistan, some 532 people in Khyber Pakhtunkhwa and some 120 people in Sindh.

The UN and its partners have established humanitarian hubs to improve field coordination and information sharing between the provincial and the district level. One is in Quetta, Balochistan; another is in Peshawar in Khyber

Pakhtunkhwa; and a third is in Multan in Punjab. Three hubs are in Sindh: the Karachi hub supports logistics through Karachi port and airport as well as engagement and coordination with provincial authorities, including the Sindh PDMA; the Hyderabad hub provides support to 15 districts in its area of operations; and the Sukkur hub covers eight districts. These hubs provide platforms for humanitarian partners to closely coordinate their response efforts and are operated in collaboration with the relevant local authorities, including the PDMAs and DDMA. National NGOs present at the district level will support coordination.

The Government-led multi-sector rapid needs assessments (RNA) in Sindh, Khyber Pakhtunkhwa and Punjab have been completed. A summary report consolidating findings from all three provinces is due for release in the coming days, followed by detailed provincial reports. Displacement Tracking Matrix (DTM) assessments are also in process in Sindh and Balochistan to estimate the number of displaced people at union council level and identify their multisectoral needs. The districts with the highest displacement will be prioritized.

Humanitarian partners have continued to scale up assistance to people in the most affected areas, and more funding is urgently needed to cover the growing humanitarian needs. The Pakistan Floods Response Plan (FRP) was launched on 30 August, appealing for US\$160.3 million to cover the most urgent needs of 5.2 million people in need. To account for severe deteriorations in the humanitarian situation and consequent increased needs since the development of the FRP, a revision is currently in process.

For an overview of partner presence and activities: www.response.reliefweb.int/pakistan/2022-monsoon-5w-dashboard

Education

Needs:

- Setting up safe spaces to hold classes for girls and boys.
- Repairing damaged classes.
- Establishing learning spaces in close proximity to communities for safe access.
- Other important needs identified include securing water and sanitation facilities at learning sites, repairing/replacing damaged school furniture, replacing school equipment, and replacing children's school supplies.

Response:

- Dewatering, cleaning and disinfection of schools to facilitate the resumption of educational activities in a safe and healthy learning environment, benefitting nearly 40,000 people: nearly 25,800 people in Balochistan, over 12,600 people in Khyber Pakhtunkhwa and some 1,120 people in Sindh.
- Distribution of Education teaching and learning materials, reaching 260 people in Khyber Pakhtunkhwa, 1,193 people in Punjab and 400 people in Sindh.
- Temporary Learning Centres (TLC) and alternative learning modalities, including second shift schooling and distance learning, benefitting over 34,000 people: over 9,100 people in Balochistan, over 19,700 people in Sindh, over 1,700 people in Khyber Pakhtunkhwa and some 250 people in Punjab.
- Back-to-school activities to enrol children in cleaned and cleared schools and TLCs, benefitting 353 people in Sindh.
- Training and mobilization of School Management Committee (SMC) members on psychosocial support, safe reopening and functioning of schools for 2,000 people in Sindh.

Gaps and challenges:

- Funding gap to meet the education and learning needs of flood-affected children.
- Use of schools to host displaced populations prevents their use for education and learning.
- High need of tents, educational kits, fans and solar panels.
- Delay in the validation of fully/damaged schools due to access issues.
- The capacity of the Government and partners to respond at scale.
- Mitigation of continued learning losses due to flood emergency and previously COVID-19.

Food Security and Agriculture

Needs:

- Scale up food assistance to hard-to-reach areas to provide relief to communities.
- Targeted unconditional food assistance for the most vulnerable households.
- Conditional food/cash assistance to rehabilitate or create the infrastructure necessary for specific livelihood activities (e.g., irrigation channels, fishing boats, rural roads) or community services (e.g., health facilities).
- Cash and voucher assistance (CVA) for restoration of livelihood opportunities, including livelihood diversification activities (training on alternative income-generating activities).
- Protection of remaining livestock through provision of feed and vaccinations against Peste des petits ruminants (PPR), foot-and-mouth disease (FMD) and haemorrhagic septicaemia (HS).
- Provision of seeds and fertilizers for cultivation of important vegetable crops and support for the restoration of affected cropped areas and livelihoods ahead of the upcoming agriculture cropping season.
- Rehabilitation of damaged animal shelters and rehabilitation and desilting of critical sections of irrigation channels.

Response:

- Conditional cash has been distributed to nearly 138,000 people in Balochistan and some 36,550 people in Khyber Pakhtunkhwa, while unconditional cash has been distributed to 1,910 people in Khyber Pakhtunkhwa, 1,910 people in Sindh and 3,820 people in Punjab.
- Crop inputs such as seeds and fertilizers have been distributed to some 150 people in Sindh, 150 people in Punjab and over 10,200 people in Khyber Pakhtunkhwa.
- In-kind relief food distributions have reached some 297,650 people in Balochistan, over 237,600 people in Khyber Pakhtunkhwa, nearly 306,500 people in Sindh and over 46,100 people in Punjab.
- Training and capacity-building activities have been conducted for nearly 12,000 people across Punjab, Khyber Pakhtunkhwa and Sindh.
- Livestock vaccination and deworming activities, benefiting over 2,500 people in Sindh and nearly 2,900 people in Punjab. Food supplements for livestock has benefited 2,100 people in Khyber Pakhtunkhwa.

Gaps and challenges:

- Duplication at the provincial and district level, requiring improved coordination to address.
- Funding constraints limit the response provision required to meet increased widespread needs.
- Scaling up livestock response to avoid diseases and protect community food sources and income.
- Scaling up food assistance support in districts with needs but not declared worst-hit districts.

Health

Needs:

- Early recovery and resilient restoration of health services.
- Essential medicines and equipment to set up emergency triage, including medical tents, mosquito nets, beds, facemasks and hand sanitizers outside health facilities.
- Mitigation of the risk of outbreaks of communicable/infectious diseases, particularly in camps and where WASH facilities have been damaged.
- Increase coordination with the WASH sector on preventing transmission of diseases in camps and communities through risk communication, community engagement and hygiene campaigns.

Response:

- Medical camps have benefited over 30,100 people in Sindh, over 18,000 people in Balochistan, nearly 18,100 people in Khyber Pakhtunkhwa and over 3,700 people in Punjab.

- Provision of mosquito spray to combat dengue, malaria and other diseases to 4,717 people in Sindh.
- Provision of medicines and medical supplies to over 131,000 people, including over 87,700 people in Balochistan, over 20,700 people in Sindh, over 21,700 people in Khyber Pakhtunkhwa and some 790 people in Punjab.
- Strengthening disease surveillance in flood-affected areas and responding to disease outbreaks in Khyber Pakhtunkhwa and Sindh, benefitting over 3,800 people.
- Support to outreach activities or temporary health facilities, benefitting over 25,600 people in Balochistan, over 19,700 people in Sindh and some 150 people in Punjab.
- Distribution of inter-agency reproductive health (IARH) kits, clean delivery kits, newborn baby kits and dignity kits to some 2,000 people in Sindh and nearly 500 people in Khyber Pakhtunkhwa.
- Integrated SRH and gender-based violence (GBV) information and service delivery in health facilities, mobile health units and makeshift hospitals, benefitting 2,700 people in Sindh and 150 people in Balochistan.
- Provision of Sexual and Reproductive Health (SRH) services, benefitting over 7,000 people in Balochistan and over 1,500 people in Sindh.

Gaps and challenges:

- Increasing prevalence of water-borne and vector-borne diseases.
- Responding to the acute needs of the flood-affected population while ensuring the continuation of regular Health services, including prevention and treatment of measles, COVID-19 and polio.

Nutrition

Response:

- Provision of Blanket Supplementary Feeding Programmes (BSFP) for over 7,600 children and mothers in Sindh.
- Counselling on Maternal, Infant and Young Child feeding practices for over 246,000 mothers and caregivers: over 200,600 in Sindh, over 27,700 in Balochistan and nearly 17,800 in Khyber Pakhtunkhwa.
- Provision of Iron/Folate (IFA) and multiple micronutrient tablets (MMT) to some 8,000 pregnant and lactating women (PLW) in Balochistan and some 327 PLW in Khyber Pakhtunkhwa.
- Provision of multiple micronutrient powder (MNP) for over 9,500 children in Balochistan, 4,920 in Khyber Pakhtunkhwa, and over 3,400 in Sindh.
- Outpatient Therapeutic Feeding Programme (OTP) treatment for Severe Acute Malnutrition (SAM), benefitting 2,372 children in Balochistan, 1,761 in Khyber Pakhtunkhwa, and 4,507 in Sindh.
- Screening of children for malnutrition, benefitting nearly 71,000 children: some 41,100 in Sindh, some 14,300 children in Balochistan and over 15,500 children in Khyber Pakhtunkhwa.

Gaps and challenges:

- Inadequate funding to meet programming needs.
- Reliable information flow from field to district and national levels.

Protection

Needs:

- Provision of mental health and psychosocial support to the children and caregivers.
- Support for separated children and addressing the loss of documentation (birth certificates) are needed to ensure that children are reunified with their families and have easy access to social services.
- Provision of specialized services to survivors of child protection violations and availability of information on physical risks and safety.
- The separation of children from their primary caregivers is also a concern.
- Further dissemination of Child Protection, GBV and PSEA messaging through community consultations, targeted outreach, social media, radio broadcasts and public announcements.

Response:

- Community engagement in PSEA awareness raising reached some 10,000 people in Khyber Pakhtunkhwa and 1,000 people in Sindh. Similar activities for Gender-Based Violence (GBV) awareness raising reached over 3,200 people in Khyber Pakhtunkhwa and some 244 people in Balochistan.
- Emergency cash assistance to benefit over 7,100 people in Punjab, some 153 people in Balochistan and nearly 200 people in Khyber Pakhtunkhwa.
- Recreation and safe spaces, benefitting over 6,700 people in Punjab.
- Group-based psychosocial support (PSS) activities have benefited some 9,500 people in Balochistan and 383 people in Khyber Pakhtunkhwa.
- Individual counselling and mental health and psychosocial support (MHPSS) services, benefitting 371 people in Balochistan, 149 people in Punjab and over 6,300 people in Khyber Pakhtunkhwa.
- Child protection case management for 35 children in Balochistan.
- Provision of information on Child Protection risks and services through direct/face-to-face methods have reached some 5,100 people in Balochistan, over 5,100 people in Khyber Pakhtunkhwa, over 12,300 people in Punjab and some 3,200 people in Sindh. Nearly 625,000 people reportedly reached through indirect means such as radio, TV and social media.
- Psychological First Aid (PFA), benefitting over 2,500 people in Punjab, some 1,200 people in Sindh and some 35 people in Balochistan.
- Community awareness raising and sensitization on GBV and PSEA, as well as available services, benefited 300 people in Balochistan and 221 people in Khyber Pakhtunkhwa.
- Provision of Dignity Kits, benefitting over 3,900 people in Balochistan, over 8,500 people in Khyber Pakhtunkhwa and over 2,000 people in Sindh.
- GBV case management (legal assistance, PSS, medical, safety and security) was provided for nearly 30,000 people in Sindh and over 1,800 people in Balochistan.
- Women and Girls Safe Spaces (WGSS), benefitting some 262 people in Balochistan and some 363 people in Khyber Pakhtunkhwa.
- Women Protection and PSS, benefitting some 500 people in Balochistan.

Gaps and challenges:

- Due to the funding situation and the limited coverage of child protection services, most children are deprived of access to essential child protection services.
- Psychosocial support programmes are a first-line response and can assist in identifying and referring vulnerable children (including survivors of gender-based violence, children with no access to basic services and those requiring special protection measures). Where no programmes are in place, serious child protection issues will not be identified, and these children are at significantly higher risk of death or serious injury.
- Hotlines remain available for GBV referrals and remote service provision, but staffing and capacity building need to be increased to meet the higher caseloads resulting from the emergency.
- Service mappings and referral mechanisms must be updated through coordination mechanisms and re-circulated to operational partners.
- GBV risk mitigation measures must be put in place across all sectors of humanitarian response, with urgent gaps in the provision of safe latrines, bathing areas, and lighting in areas of displacement.


Shelter and Non-Food Items
Needs:

- Emergency relief items, including tents, tarpaulins, sleeping mats, blankets, and mattresses, are needed to support flood-affected communities.
- Tool kits are needed for debris removal and to restore Kucha houses.
- Shelter kits and materials are needed for the rehabilitation of damaged houses.
- Establishment of planned settlements/camps for the displaced population.

Response:

- Awareness raising and information dissemination, reaching 780 people in Khyber Pakhtunkhwa.
- Provision of one-room shelters, benefitting some 26,250 people in Khyber Pakhtunkhwa.
- Provision of basic NFIs, including blankets, bedding, and kitchen sets, benefitting over 407,700 people: some 232,900 people in Sindh, around 58,600 people in Khyber Pakhtunkhwa, over 90,700 people in Balochistan and nearly 25,500 people in Punjab.
- Provision of emergency shelter for over 185,400 people: over 123,700 people in Sindh, over 30,100 people in Balochistan, some 10,150 people in Punjab and nearly 21,500 people in Khyber Pakhtunkhwa.

Gaps and challenges:

- Given the enormous need combined with extremely limited resources, the Shelter Sector has been forced to reduce shelter assistance to include just one tarpaulin per household, halving normal international standards for a response. This is to improve coverage and avoid evictions from overcrowded embankments and roadsides. Material assistance will be increased to align with normal humanitarian standards for a response as more resources become available.
- Insufficient funds and the scale of damages to houses are major constraints.
- Concurrent relief and recovery activities in certain areas of Khyber Pakhtunkhwa and Balochistan.


Water, Sanitation and Hygiene (WASH)
Needs:

- Provision of quality and safe drinking water to most affected areas.
- Need urgent construction of sanitation facilities, including latrines in the affected communities.
- Delivery of awareness sessions on hygiene promotion and best practices, including soaps and other materials for handwashing.

Response:

- Provision of messages on safe and hygienic practices, reaching over 55,500 people in Sindh, over 19,700 people in Punjab, over 11,900 people in Khyber Pakhtunkhwa and some 5,600 people in Balochistan.
- Provision of safe sanitation facilities through the installation of latrines, bathing cubicles and washing stations, benefitting over 3,200 people in Balochistan, over 2,100 people in Khyber Pakhtunkhwa, over 5,000 people in Punjab and over 23,700 people in Sindh.
- Rehabilitation or improvement of hand pumps, benefitting over 37,947 people, including 5,000 people in Balochistan, over 6,800 people in Khyber Pakhtunkhwa, some 5,000 people in Punjab and over 21,000 people in Sindh.
- Water trucking, benefitting over 21,300 people in Balochistan, over 10,000 people in Khyber Pakhtunkhwa, some 18,600 people in Punjab and over 17,700 people in Sindh.
- Provision of WASH infrastructure at schools and health facilities, benefitting some 140 people in Balochistan, some 350 people in Punjab and over 1,700 people in Sindh.
- Provision of WASH NFIs, benefitting over 27,500 people in Balochistan, over 84,300 people in Khyber Pakhtunkhwa, nearly 63,500 people in Punjab and nearly 100,000 people in Sindh.

Gaps and challenges:

- The practice of open defecation is increasing, posing significant concerns for public health.
- Lack of funding remains a concern due to limited operational capability.

Logistics

Needs:

- Increased coordination and information sharing to support logistics operations, avoid duplication and overcome logistics gaps to ensure a timely and uninterrupted supply of lifesaving relief items to affected people.

Response:

- Two mobile storage units were provided to NDMA on a loan basis and will be installed in Dalbandin. This additional storage capacity will bolster NDMA's storage capacity in response to the influx of trains carrying relief cargo from Türkiye.

GENERAL COORDINATION

A National Flood Response and Coordination Centre (NFRCC) comprising representatives of Federal stakeholders, Provincial Governments, and the Pakistan Armed Forces oversees the national response to the monsoon rains and floods. In the provinces, the Provincial Disaster Management Authorities (PDMA) have established sector coordination mechanisms to ensure better response coordination in partnership with the humanitarian community.

The Humanitarian Country Team (HCT) meets weekly for strategic decisions, and additional ad hoc meetings are convened as needed. At the technical level, the Inter-Sector Coordination Group (ISCG), Information Management Working Group (IMWG) and Assessment Working Group (AWG) hold regular meetings at the national level, and sectoral and working group meetings take place at both national and provincial levels. Sector meetings are occurring to discuss priorities, needs, gaps and information sharing to strengthen coordination at the sectoral level. To facilitate coordination at the district and provincial levels, OCHA has established presences in Karachi, Sukkur and Hyderabad in Sindh, Multan in Punjab, Peshawar in Khyber Pakhtunkhwa, and Quetta in Balochistan.

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