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# Emergency appeal final report

## Pakistan: Floods

 International Federation  
of Red Cross and Red Crescent Societies

**Emergency appeal n° MDRPK006**  
**GLIDE n° FL-2010-000141-PAK**  
**2 November 2013**

**Period covered by this Final Report:** 2 August 2010 to 31 July 2013

**Appeal target (current):** CHF 87.8 million

**Appeal coverage:** 100 per cent; [<click here to go directly to the financial, or here to link to contact details >](#)

### Appeal history:

- Disaster Relief Emergency Fund (DREF): CHF 250,000 was allocated on 30 July 2010 to support the National Society's response to the emergency.
- A preliminary emergency appeal was launched on 2 August 2010 for CHF 17,008,050 for nine months to assist 175,000 beneficiaries.
- An emergency appeal was launched on 19 August 2010 for CHF 75,852,261 for 18 months to assist 130,000 flood-affected families (910,000 beneficiaries).
- A revised emergency appeal was launched on 15 November 2010 for CHF 130,673,677 to assist 130,000 families (910,000 people) for 24 months.
- A second revision of the emergency appeal was launched on 3 August 2012 seeking CHF 92.6 million to assist 130,000 families (910,000 people) for 36 months.
- A third revision of the emergency appeal was launched on 15 May 2013, with the budget revised down from CHF 92.6 million to CHF 87.8 million. The operation aims to assist 130,000 families (910,000 people) for 36 months.
- The operation was closed on 31 July 2013 with a balance brought forward of CHF 7,567,317. The balance fund will be transferred to [Pakistan's Long Term Planning Framework 2012-15](#) (LTPF). Partners and donors who have any queries about the reallocation of the balance fund are requested to contact IFRC within the next 30 days.

### Summary:

In 2010, Pakistan encountered the worst monsoon floods in the history of the country and the region, affecting all seven regions of the country: Baluchistan, Punjab, Khyber Pakhtunkhwa (KP), Gilgit Baltistan (GB) and Sindh provinces, the Federal Administered Tribal Areas (FATA), as well as Azad Jammu and Kashmir (AJK) State. The first spell of monsoon rains hit parts of the southern-western province of Baluchistan in the third week of July 2010, followed by a second spell of severe rains over (KP in the last week of July 2010 that continued until early August. These rains caused unprecedented flooding of major, secondary and tertiary rivers in KP, Punjab, Sindh and Baluchistan provinces. Within a period of one and a half months, 78 out of Pakistan's 141 districts were affected. Termed as a 'slow evolving tsunami' the magnitude of the



Children learning about hand washing and other hygiene practices in the water and sanitation program in Sindh. Safe drinking water was also provided in the program **Photo:** IFRC.

2010 floods was considerably higher both in scale and destruction in comparison to other major disasters around the world, affecting ten times more people than the Indian ocean Tsunami of 2004 and 6 times more people than the 2010 Haiti Earthquake. 1,985 deaths and 2,946 people injured by the floods were officially recorded by the authorities. More than 20 million people, representing 12 per cent of Pakistan's population of 170 million were affected by the floods. Substantial destruction affected over 2.1 million hectares of cultivated land with infrastructure severely damaged. Besides severe damage to the housing sector, livestock were affected too, impacting the existing livelihood patterns of already marginalized communities. The emergency reached its peak in September when the floodwater reached the ocean while inundating one fifth of the country (160.000km<sup>2</sup>)

The Pakistan Red Crescent Society (PRCS) reacted quickly to the emerging disaster with support from the International Federation of Red Cross and Red Crescent Societies (IFRC), the International Committee of the Red Cross (ICRC) and Red Cross Red Crescent Partner National Societies (PNS). The IFRC responded by launching a preliminary emergency appeal on 2 August 2010, focusing on responding to needs in the northern part of the country.

IFRC surge capacity was mobilised to support the operation. A Field Assessment Coordination Team (FACT) was deployed at the start of August followed by ten Emergency Response Units (ERU). Other surge capacity from IFRC Asia Pacific zone office and elsewhere was drawn upon to field a detailed assessment team and other functions. Regional Disaster Response Team (RDRT) were deployed to provide additional support in Sindh province.

While immediate needs persisted, the need for earlier planning in recovery actions and resources coordination were eminent. Three months after emergency interventions began and based on detailed assessments by PRCS and a Transitional Planning Assistance Team (TPAT), PNS donors met in Doha/ Qatar in October 2010 to harmonize support actions. A revised emergency appeal was launched on 15 November 2010, in which established a 24-month timeframe with comprehensive component for the floods affected families.

Relief activities were implemented in KP, Punjab, Sindh, and GB provinces, as well as AJK State, and ended around April 2011. Essential relief materials such as tarpaulins, tents, mosquito nets, blankets, kitchen sets and hygiene kits were provided to the communities. Safe drinking water was produced by some 20 water treatment plants operated by various ERUs together with hygiene promotion activities which were carried out as part of the water and sanitation programme. Health and care services including first aid, psychosocial support, curative and preventive care as well as health promotion, were provided to affected communities during both relief and early recovery phases of the operation. The early recovery phase included provision of healthcare, latrine constructions, water supply schemes and livelihood support. Early recovery efforts were conducted from late 2010 and throughout 2011.

In the first quarter of 2011, an implementation plan was developed for the recovery phase. In order to draft the outline, a Vulnerability and Capacity Assessment (VCA) was undertaken in December 2010 - January 2011, in 15 districts (seven in Sindh, four Punjab and four in KP). With the information of the VCA an Integrated Recovery Programme (IRP) was designed for 39 revenue villages of these six districts in three provinces. While the size and range of the IRP was based on the findings of the VCA, its design also taken into consideration of the committed and projected funds. The essence of the IRP was a programmatic shift from short-term immediate assistance to individual persons and families affected, towards building community resilience. The assistance to the flood affected population, in particular those who lost their houses and livelihoods continued, but the focus was on greater sustainability and community resilience building.

[The second revised emergency appeal](#) launched in August 2012 included an outline of the implementation framework for the recovery phase. The plan was based on extensive discussions with the PRCS headquarters and the provincial branches. The programme included areas new for the PRCS, for example, cash grants, owner driven shelter and livelihoods. It also included increase human resources in these branches to meet the activity targets. These targets were subsequently fine-tuned with re-verification of the beneficiaries eligibility against those estimated in the original VCA which was done between December 2010 and January 2011. The initial timeframe was reviewed and expanded, as more time was required for a community based approach coupled with given the complexities of the Pakistan environment (including the security situation) had an impact on the actual implementation rate. The operation was extended to the total timespan of 36 months.

Within the 2010 floods appeal operation period, two significant disasters (2011<sup>1</sup> and 2012 floods) occurred. Staffs and volunteers were mobilized concurrently for these operations which affected the implementation of planned activities in the 2010 floods.

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<sup>1</sup> Floods 2011 operation MDRPK007 from September 2011-March 2012). Details of this operation can be accessed on (<http://www.ifrc.org/docs/Appeals/11/MDRPK007FR.pdf>).

Subsequently, [the third revision of the emergency appeal](#) was launched in May 2013 (two months before the end of operation) which included the support to communities affected by floods in 2012 especially in areas where the IRP was being implemented, in the same time, this revised version presented a final modified plan to emphasize on components that could be achieved by end of July 2013 and informed on the projected balance funds to be channelled for Pakistan's LTPF 2012-15.

**Table 1: Summary of the appeal implementation**

<b>Appeal phase/ stage</b>	<b>Timeframe</b>	<b>No. of people reached</b>
Emergency/ Relief	August 2010 – April 2011	1.9 million
Early Recovery	November 2010 – March 2011	
IRP (including evaluations)	April 2011 – July 2013	514,072
2012 floods response	August 2012 – January 2013	237,999

PRCS/IFRC reached more than 2 million people across six of the most affected provinces with various interventions during the relief and early recovery<sup>2</sup>, and IRP phases, against an appeal target of 910,000 persons<sup>3</sup>:

The Appeal with scale of relief and recovery activities were unprecedented for the PRCS. The National Society, with support from the IFRC, the ICRC, PNS and others, reached far more than 4 million affected people. This is a milestone in the history of the National Society as well enhanced its recognition by the Pakistan authorities and the local population. The satisfaction of beneficiaries with PRCS interventions were well documented and shown in monitoring and surveys during and after the operation..

The number of challenges during the implementation were openly discussed during the joint evaluations, lessons learned workshops and regular meetings. It allowed both PRCS and IFRC to learn and improve. The lessons learned and the references to challenges in this report are therefore considered as important as the reporting of the outcome of the interventions as it will improve our Red Cross Red Crescent services to the community in the future.

**Table 2: Summary of key achievements by sector**

<b>Sector</b>		<b>No. of families/ persons targeted</b>	<b>Achievements</b>	
			<b>No. of families/ persons reached</b>	<b>Percentage</b>
<b>Food (relief)</b>	2010 Floods	180,000 families	181,227 families / 1,268,589 persons	101%
	2012 Floods	20,000 families	20,000 families / 140,000 persons	100%
<b>Non-food Items (relief)</b>	2010 Floods <sup>4</sup>	75,000 families	103,195 families / 722,365 persons	138%
	2012 Floods	7,500 families	6,943 families / 48,601 persons	93%
<b>Shelter</b>	Winterised Transitional Shelter (WTS) 2010 Floods early recovery	6,500 families	6,393 families / 44,751 persons	98%
	2010 Floods relief	75,000 families	83,209 families / 582,463 persons	111%
	2010 Floods IRP	5,000 families	2,522 families / 17,654 persons	50%
<b>Health and Care</b>	2010 Floods relief	130,000 families/ 910,000 persons	159,784 persons <sup>5</sup>	80%
	2010 Floods early recovery		137,703 persons <sup>6</sup>	
	2010 Floods IRP		429,566 persons <sup>7</sup>	
	2012 Floods relief	75,000 persons	97,999 people	

<sup>2</sup> More details of the relief and early recovery period activities is available in previous reports which can be accessed on the following link: <http://www.ifrc.org/docs/Appeals/>

<sup>3</sup> In order to avoid double counting of people who received assistance from more than one sector intervention, it is assumed that the minimum number of people reached by the operation components is based on the imprint of the programme with the largest reach. Note also that few figures have been updated from those previously reported after recent re-verification of reports.

<sup>4</sup> Combination from amongst the following NFIs: blankets; mosquito nets; hygiene parcels; jerry cans; kitchen sets; buckets; sleeping mats.

<sup>5</sup> Timeframe for emergency health is September – December 2010. Included 24,183 PSP session participants and 5,966 ERU BHC NORCROSS.

<sup>6</sup> Timeframe for early recovery health is from January – December 2011. OPD numbers 124,709 included plus 12,994 hygiene promotion participants.

<sup>7</sup> Timeframe for IRP health is January 2012 – March 2013. OPD 407,244 and 22,322 CBHFA beneficiaries only included.

<b>Water and Sanitation</b>	2010 Floods relief & early recovery	30,000 families	<ul style="list-style-type: none"> <li>- 31,300 families with safe drinking water</li> <li>- 4,005 families /28,035 persons with 1,402 latrines</li> <li>- 12,994 people with hygiene promotion</li> <li>- 45,148 people (6,449 families) with water supply schemes</li> </ul>	104%
	2010 Floods IRP	4,500 families (latrines)	5,214 latrines <sup>8</sup> / 28,737 persons	116%
	2012 Floods relief	72,000 persons	42,000 persons daily	56%
<b>Livelihoods</b>	2010 Floods winter vegetable relief	2,000 families	2,000 families / 14,000 persons	100%
	2010 Floods early recovery	31,232 families	31,172 families / 218,2014 persons	99.8%
	2010 Floods IRP	5,000 families	4,412 families/ 30,884 persons	88%

**Table 3: Summary of support for the appeal**

Movement partners	American Red Cross, Andorran Red Cross, Australian Red Cross/Australian government, Austrian Red Cross/Austrian government, Bahamas Red Cross Society, Bangladesh Red Crescent Society, Belarus Red Cross, Belgium Red Cross (Flanders), Belgium Red Cross (French), the Red Cross Society of Bosnia and Herzegovina, British Red Cross/British government, Bulgarian Red Cross, Canadian Red Cross Society/Canadian government, the Hong Kong branch of Red Cross Society of China, the Macao branch of Red Cross Society of China, Czech Red Cross, Danish Red Cross/Danish government, Fiji Red Cross Society, Finnish Red Cross, French Red Cross, German Red Cross, Icelandic Red Cross/Icelandic government, Red Crescent Society of Islamic Republic of Iran, Irish Red Cross Society, Japanese Red Cross, Lithuanian Red Cross Society, the Republic of Korea National Red Cross, Luxembourg Red Cross, Malta Red Cross Society, Mauritius Red Cross Society, Red Cross of Monaco, Moroccan Red Crescent, Nepal Red Cross Society, Netherlands Red Cross/Netherlands government, New Zealand Red Cross/ New Zealand government, Norwegian Red Cross/Norwegian government, Portuguese Red Cross, Singapore Red Cross Society, Slovenian Red Cross, Spanish Red Cross, Swedish Red Cross/Swedish government, Swiss Red Cross, Taiwan Red Cross Organisation, Red Crescent Society of United Arab Emirates
International organisations and others	European Commission's Aid Department (DG ECHO), OPEC Fund for International Development, US Agency for International Development (USAID), the Japanese government, the Italian government, Credit Suisse Foundation, Z Zurich Foundation, other private and corporate donors.

In addition, Red Cross and Red Crescent National Societies from Bangladesh, Indonesia, Malaysia, Sri Lanka and Solomon Islands deployed regional disaster response team (RDRT) members from their societies providing valuable human resources to support the operation.

On behalf of PRCS, IFRC would like to thank all partners and donors for their generous response to this appeal operations.

## **Floods 2010 Response**

### **The situation**

Torrential monsoon rains commenced in late July 2010, triggering the worst floods to hit Pakistan since 1929, sweeping through all the regions of Pakistan: Baluchistan, Punjab, KP, FATA, AJK, GB, and Sindh. Within a period of one and a half months, 78 districts out of Pakistan's 141 districts were affected<sup>9</sup>, and as of 24 October 2010, the government's National Disaster Management Authority (NDMA) reported that there had been 1,985 deaths and 2,946

<sup>8</sup> Includes 1,996 latrines under Shelter component + 3,218 under Watsan component.

<sup>9</sup> Source: NDMA annual report 2010: <http://www.ndma.gov.pk/Documents/Annualper cent20Report/NDMAper cent20Annualper cent20Reportper cent202010.pdf>

people injured by the floods. Out of the estimated 22.2 million hectares of agricultural land, almost two million hectares were destroyed in the floods, threatening severe food shortages in the coming months. It is estimated that more than 20 million people out of Pakistan's population of 170 million were affected by the floods<sup>10</sup>. More than 400 hospitals and health clinics were damaged or destroyed, as well as education facilities, power and transmission lines, telecommunication networks and industrial infrastructure.

**Table 4: Summary of damages and losses reported by NDMA update as of 5 November 2010**

<b>Summary of damages</b>	<b>Punjab</b>	<b>Sindh</b>	<b>KP*</b>	<b>Baluchistan</b>	<b>AJK</b>	<b>GB</b>	<b>Total</b>
Deaths	110	410	1,157	54	71	183	1,985
Injuries	262	1,235	1,198	104	87	60	2,946
Houses Damaged	497,700	876,249	284,990	75,596	7,106	2,830	1,744,471

\* Including FATA

The authorities announced an end to the relief phase by 31 January 2011, with some residual relief activities continuing in the districts of Jacobabad, Kamber Shahdadt, Dadu and Jamshoro in the province of Sindh, as well as in Jaffarabad district of Baluchistan province until the end of March 2011. The focus shifted to early recovery in September 2010 whilst implementation of residual relief interventions was completed. Loss of food stockpiles and increasing energy crises coupled with the clear indications of new flooding approaching with the 2011 monsoon rains were additional major concerns. This became a reality in August 2011 when Sindh province experienced the worst flooding in its history resulting in widespread destruction and displacement of hundreds of thousands of people with a total of over 4.8 million people affected of which approximately 72,000 people stayed in relief camps. The province remained crippled beyond 2011, as the government and affected communities came to terms with overstretched resources and huge economic losses.

In order to assist PRCS to start-up assistance to the floods affected population in Sindh, IFRC allocated CHF 500,000 from its Disaster Relief Emergency Funds (DREF). This was followed by an emergency appeal (MDRPK007) which was launched on 9 September 2011 for CHF 10.6 million to assist 105,000 people (15,000 families) for four months. The appeal was revised to CHF 5,304,193 on 31 January 2012 to assist 105,000 people (15,000 families) for six months. With this support and the support of other donors, PRCS reached 65,406 families (457,842 people) with food and non-food distributions, 140,112 people with emergency health services and 208,600 people with water and sanitation under the Floods 2011 Operation. This operation affected the implementation under MDRPK006 (Floods 2010) as the same staff and volunteers were working on both operations simultaneously. The 2011 floods response operation (MDRPK007) was closed in March 2012.

Starting late in August 2012 heavy monsoon rains were again experienced in the provinces of Sindh, KP, Punjab, Baluchistan and GB, affecting five million people, compounding effects in areas already affected during the 2010 and 2011 flooding. The seasonal monsoon rainfalls across Pakistan began in the third week of August 2012. A second spell of seasonal monsoon rainfalls started over the southern parts of the country from the end of the first week of September, peaking on the 9 and 10 of the month across Pakistan with flooding spanning over the provinces of Punjab, Sindh and Baluchistan. Moreover in Punjab and Sindh, heavy monsoon rains hampered the progress of the IRP interventions in early September 2012. The PRCS monitored the situation closely and initiated response to these floods according to its 2012 contingency plans, with funds from MDRPK006 (Floods 2010) made available to support assistance to those affected by the latest flooding.

## Coordination and partnerships

PRCS took the lead for the overall flood response and recovery operation, with the support of the IFRC, ICRC, PNS and other donors. Working as an auxiliary to the Pakistan government, the PRCS coordinates with the national and provincial disaster management authorities (NDMA/PDMA), mobilizing support in areas where gaps in assistance are identified.

There are several examples of good practice in cooperation and coordination among Red Cross Red Crescent Movement partners at the strategic level in the Pakistan flood response. Some of these included:

<sup>10</sup> Source: NDMA annual report 2010: <http://www.ndma.gov.pk/Documents/Annualper cent20Report/NDMAper cent20Annualper cent20Reportper cent202010.pdf>

- The Red Cross Red Crescent (RCRC) Movement Partners agreed early in the response to a coordination framework that placed PRCS as 'the lead' agency in the coordination of the RCRC movement response to the flooding.
- By September 2010, the PRCS, IFRC and the ICRC formalized a Movement Platform which sought to delineate the roles and areas of responsibility of the respective parties when carrying out operations in the field.
- All RCRC Movement Partners further agreed to the *Joint Statement on the Red Cross Red Crescent Movement in response to the flood crisis in Pakistan* on 27 September 2010.
- A donors' conference took place in Doha/ Qatar in October, where the IFRC Plan of Action (PoA) was shared and the issue of fundraising for the revised emergency appeal was discussed.
- At Islamabad level, the PRCS started to host daily operational update meetings and twice weekly RCRC Movement Partner coordination meetings to discuss and agree on a common approach to operational issues, including security. The frequency of the meetings reduced over time with the need, but continued on a regular basis.

At the operational level, the combined response and coverage rate of all of the RCRC Movement Partners has been consolidated by IFRC in three monthly reports during the relief phase as comprehensive as much as data were available, as there were some difficulties retrieving and reporting some data on bilateral PNS support in the earlier dates

The achievements above did not come in a always easy way as in any complex operations, the relationships between the IFRC and the ICRC were strained at times, with differences in policy and view on roles in the initial flood operation. However with the common goal in putting the needs of the beneficiaries on top of any agenda, dedicated staff from PRCS, ICRC and IFRC had achieved in establishing informal meetings between IFRC, ICRC and PNS to ensure improved cooperation and gradually achieving coordinated response in operational areas.

IFRC representatives regularly attend the humanitarian country team meetings - equivalent to the Inter-Agency Standing Committee (IASC) - which constitutes the highest level of coordination of the international humanitarian community in Pakistan and under which the cluster system works. The IFRC Secretariat has coordinated closely with the ICRC and the PRCS to identify ways of operating in the flood response that were sensitive to the complex programming environment within Pakistan. This was not an easy process but mutual understandings had been reached in a draft Movement Cooperation Agreement. Some key areas of importance were included in *the Joint Statement on the Movement Response*: a limited engagement with the UN 'one response' system, for example, separate reporting on assistance provided by the RC/RC Movement; and a decision not to lead the Shelter Cluster in this response (IOM has taken on this role, which it also did in the 2005 Pakistan earthquake response).

### **Overall Capacity Building**

The PRCS has considerable experience gained from previous major disasters including the earthquakes in 2005 and 2008 as well as the 2007 Cyclone Yemyin floods. When the 2011 flooding occurred in Sindh, it had been barely a year since the massive operation of the 2010 floods. Dubbed a "mega disaster" by governments and aid organizations, the 2010 floods affected a staggering eighth of Pakistan's 170 million people and touched every region in the country, it was an operation that severely tested the capacities of the PRCS, and left behind indelible experience and knowledge.

Since 2005, and with support from movement partners, the PRCS has extended its response capacity by developing Disaster Management (DM) cells across the country, along with a large pool of trained response team members at national, branch and district levels. The experience and capacity built over the years through PRCS's wide-reaching network of branches and trained volunteers have enabled timely mobilization of human resources within hours of the floods to set-up mobile health units and distribute relief items.

At the time of 2010 floods disaster, PRCS had 39 DM cells operational, which were later raised to 43 by 2011 (with IFRC supporting 32 of these). At the end of the IRP and as per the 2013 PRCS floods contingency plan, the DM cells were reduced to 38 across the country (each cell designed to have minimum disaster preparedness (DP) stock to provide initial support to 200 families at district level). Currently IFRC continues to support 13 DM cells under the Long Term Planning Framework for Pakistan (LTPF). This enabled the PRCS to respond quickly to all disasters in Pakistan through its network of branches and trained volunteers, and the impact could be seen in PRCS response in floods operations in 2011 and 2012. Especially in 2012, in addition to previous progress monitoring exercises, for the first time PRCS/ IFRC jointly deployed trained disaster response monitoring teams for operational support and monitoring of the distribution processes, beneficiary exit and post-distribution in Baluchistan, Sindh and Punjab.

The main activities of the Integrated Recovery Programme (IRP) under the 2010 floods appeal were implemented by the provincial branches, the human resource capacity was significantly extended in the provinces. In order to

strengthen the branch capacity to continue activities and to maintain contact with the villages and communities, the programme focused on strengthening the branch structure and sustainability of district branches and /or DM cells.

### ***National Society Capacity Building:***

One of the objectives of this intervention was to reinforce the capacities of the PRCS in terms of technical, financial and additional human resource to enable them to face the rapidly changing context in which they operate. This also reflected the IFRC's strong commitment to enhance the coherence and effectiveness of its humanitarian assistance; employing for the first time in Pakistan the integrated programming approach in an emergency appeal.

It is crucial to understand that the human resource structure of the PRCS was based on the implementation of emergency programmes where were largely due to sequential and simultaneous emergencies almost every year since 2005. The agenda of National Society capacity building had been always recognized as important, however, since the end of 2011, the governance and leadership of the PRCS have gone through major change. A new chairperson and secretary general were appointed in May 2012 after a series of personnel change and internal re-organisation within the National Society. In October 2012, the PRCS began focusing on the sustainability of the National Society, reviewing and re-prioritising the Strategic Plan.

### ***IFRC in country structure to support National Society capacity building:***

The IFRC has a well-established country office in Pakistan, with a Head of Delegation, a Programme Coordinator (since February 2012, in place of the Operations Coordinator), coordinators in disaster management, health, communications and shelter as well as finance, humanitarian diplomacy/ movement coordination, planning monitoring evaluation and reporting (PMER), and a security delegate in place. This team is supported by nationally recruited staff in various technical and administrative positions including finance, PMER, information technology, communications, security and administration.

In view of the above mentioned challenges and strategies, a branch development delegate was also recruited in April 2011 to strengthen the PRCS branches in developing self-sustainable mechanisms for the future after the winding up of the IRP. A national staff has taken over the portfolio of Branch Development mid-2013.

A logistics development delegate continued to assist the PRCS in strengthening its logistics capacity – an early result was the finalization of its stock positions across the entire country in June 2012, accounting for all IFRC partners. This has been a key piece of information as a foundation of the PRCS's floods contingency plan for 2012.

A humanitarian diplomacy delegate was also recruited in April 2011 and has been involved in advocating and disseminating messages from the PRCS and IFRC leadership and governance, including government authorities, RCRC Movement Partners and external actors. A continuing constraint is the lack of a 'status agreement' for the IFRC, with continuing dialogue with the national authorities.

## **Red Cross and Red Crescent Action**

Response activities were developed across four sectors (livelihoods, health, shelter and WatSan). They were intended to form a comprehensive, complementary package of inputs, to provide the means for the re-establishment of community life, locally owned and capable of delivering an equitable and sustainable future. Elements of recovery were introduced from the onset (TPAT and recovery delegates). The intention was to support an economic and social environment to help increase opportunities for all members of that community.

For the recovery phase, three distinctive topographical areas were identified with differing impacts experienced from the floods. In the highlands of KP, entire villages were washed away due to flash flooding. With community infrastructures, such as roads and bridges destroyed – reducing access to services and markets. In the lowlands of KP, Punjab and Sindh, assets were washed away and silt deposits destroyed vast areas of land. For Sindh and Punjab, flood waters were slow to recede, leaving villages under water and populations displaced. These three provinces were the major target areas for relief and recovery interventions under the IRP, while the health and care services were extended to GB and Baluchistan provinces.

There were a number of challenges during the implementation. For example, in Punjab, inclusion errors<sup>11</sup> were discovered through routine verification exercises of beneficiaries lists. Activities were hence suspended and full re-verification of beneficiaries within the specific region over the period April to June 2012. Also in order to ensure that

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<sup>11</sup> Inclusion Error: beneficiaries erroneously included in the programme who do not meet the selection/ assistance criteria.

the legal issues with the Punjab provincial branch did not hamper assistance to the flood affected, the PRCS national headquarters established a field office and team in Kot Adu to oversee implementation of the operation. This led to the decision to halt working with the village committees in Layyah and Muzaffargarh districts of Punjab province only. The re-verified beneficiaries were provided with owner-driven shelter and income generating livelihoods assistance through cash grants. Provision of latrines, water pumps and hygiene promotion were achieved through direct interaction between beneficiaries and the PRCS/IFRC field teams.

## 1. 2010 Floods: Food and non-food items

Relief Food Distributions	
Outcome: The basic food needs of 130,000 flood-affected families are met in KP, Punjab, Sindh and GB.	
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"> <li>• Conduct on-the-ground assessments, selection and social mobilization for the verification of 130,000 families.</li> <li>• Conduct capacity assessments on relief and logistics systems and suppliers.</li> <li>• Develop registration system to deliver intended assistance.</li> <li>• Engage communities' participation in planning and distribution of relief items.</li> <li>• Mobilize required food assistance through international mobilization, international and local procurement following IFRC standards.</li> <li>• Provide assistance to 130,000 families through the procurement, warehousing, transport, distribution of food parcels (wheat flour, rice, pulses, ghee, sugar, salt, and tea).</li> <li>• Conduct a second round of food distribution targeting the most vulnerable 50,000 families in the same provinces</li> <li>• Mobilize and train approximately 150 National Society/community volunteers in assessment, distribution, monitoring and evaluation.</li> <li>• Develop a monitoring and evaluation system for the continuous improvement of delivery system.</li> <li>• Develop an exit strategy (laying the basis for the early recovery phase).</li> </ul>

Over 1.2 million persons were reached with food distributions during the 2010 floods relief phase (181,227 families/ 1,268,589 persons). Distributions took place over the period from July 2010 - May 2011 in the four provinces of KP, Punjab, Sindh, GB, and in the State of AJK, commencing on 29 July in Shah Kot district (AJK) with the provision of food items to 28 families and completing in Larkana district (Sindh) on 20 May.

The majority of targeted beneficiaries had been reached with one round of food assistance by the end of December 2010. However in light of the immense needs identified in Sindh and Punjab province, it was decided to distribute to an additional 50,000 families rather than do a second distribution to a number of those already reached. The food basket distributed was for a family of seven persons for one month, containing: 50 Kg wheat flour, 20 kg rice, 15 kg ghee (cooking oil), 12 kg lentils, 12 kg chickpeas, 5 kg sugar, 1 kg iodised salt, and 1 kg tea, with a daily kilocalorie value of approximately 2,200 as per SPHERE recommendations.

IFRC ERUs in logistics and relief played an important role together with PRCS in coordinating procurement, delivery and distribution of the food parcels.



A beneficiary collecting emergency food rations (116 kgs) for his family in Kashmore district, Sindh province. **Photo:** IFRC.



## Relief Non-Food Items Distributions (NFIs)

<b>Outcome: The essential household needs<sup>12</sup> of 75,000 flood-affected families are met in KP, Punjab, Sindh and GB.</b>	
<b>Outputs (expected results)</b>	<b>Activities planned</b>
<b>The immediate needs of displaced families are met through the distribution of essential household items.</b>	<ul style="list-style-type: none"> <li>• Conduct on-the-ground assessments, selection and social mobilization for the verification of 75,000 families.</li> <li>• Conduct capacity assessments relief and logistics systems and suppliers.</li> <li>• Develop registration system to deliver intended assistance.</li> <li>• Engage communities' participation in planning and distribution of relief items.</li> <li>• Mobilize required relief items through international mobilization, international and local procurement following IFRC standards.</li> <li>• Provide assistance to 75,000 families through distribution of household items Mobilize and train approximately 150 National Society/community volunteers in assessment, distribution, monitoring and evaluation.</li> <li>• Develop a monitoring and evaluation system for the continuous improvement of delivery system.</li> <li>• Develop an exit strategy (setting up basis for the early recovery phase).</li> </ul>

The distribution of NFI's spanned over the period from August 2010 - April 2011 in the four provinces of KP, Punjab, Sindh, GB and in the State of AJK, assisting 103,195 families (722,365 persons) - not including assistance with emergency shelter items. Out of these families, 82,923 beneficiaries received a complete kit of NFI's, whilst the remainder were assisted with a partial set of items in line with the identified needs at the time<sup>13</sup>. SPHERE standards were considered in the composition and specifications of IFRC supported NFI's. Distributions commenced on 28 August in Nowshera district of KP province to 1000 families, and continued until 15 April, concluding in Jacobabad district of Sindh province. Majority of NFI distributions were completed by the end of 2011, with some partial kit items distributed in 2012 along with the food distributions.

The relief operation applied community mobilisation with a participatory approach with a significant number of local volunteers in the provinces involved. Furthermore, focus was given on maintaining in-country RCRC movement wide systematic relief distribution records by establishing a data management unit at the PRCS national headquarters and standardised formats were used for better information management system.

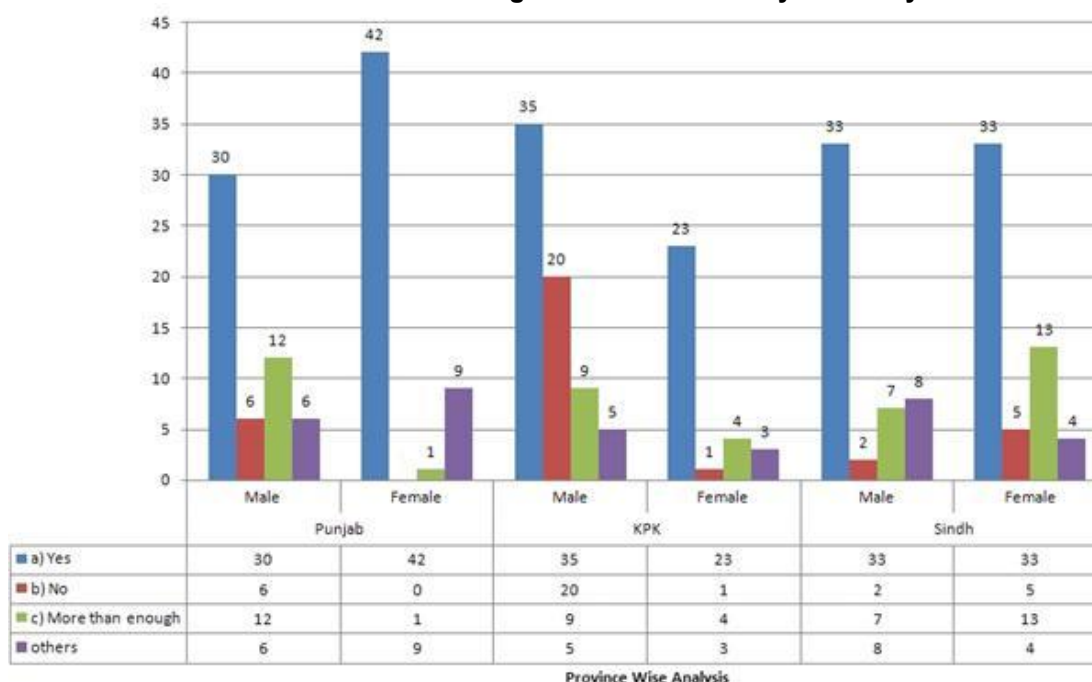
A joint PRCS/IFRC monitoring mission was conducted in March 2011, with the objective to measure the effectiveness and efficiency of the food and NFI relief interventions. The results indicated positive responses from beneficiaries in terms of quality, quantity and appropriateness of the support received. A total of 302 families were interviewed across a sample of the areas assisted in the provinces of Sindh, Punjab, and KP, key results are highlighted below:

- 99 per cent of the respondents in the interview sample stated they were directly affected by the recent floods and were in need of assistance, which indicates the targeting and beneficiary selection was relevant.
- Despite damaged infrastructure and water-logged areas hampering access of trucks, distribution points were located at reasonable travel distances from the targeted family homes: with 34 per cent stating half an hour travel time, 23 per cent one hour, and only 8 per cent more than 4 hours.
- Beneficiary communications and feedback mechanisms may not have received the attention required given the urgency and scale for completing distributions: with 75 per cent of the respondents stating not to know where to make a complaint if they had any concerns regarding the assistance received by PRCS, and 70 per cent that they did not know what items would be received prior to arrival at the distribution point. This lesson learned was to taken into account in future programming.

<sup>12</sup> Standard items guide for distribution to each household (based on seven members per household) were jerry cans, blankets, kitchen sets, hygiene parcels and mosquito nets. Other non-standard items distributed included buckets, stoves, sleeping mats and clothes.

<sup>13</sup> Including any combination from amongst: tent, tarpaulin, blankets, mosquito nets, hygiene parcel, jerry cans and jute bags

**Figure 1: Survey on provision of food items in the 3 districts -  
“Was the food received enough for one month for your family?”**



A real time evaluation (RTE) on the Regional Disaster Response Team (RDRT) deployments was completed in April 2011, some highlights:

- As a part of the coordinated IFRC actions, the Asia Pacific zone RDRT system was initiated and the first RDRT arrived in Pakistan on 6 October 2010. The pro-active request made by the PRCS Sindh Branch Secretary in early September 2010 was eventually endorsed by the national headquarters. The delay in the decision regarding the deployment, however, was due to the understanding and acceptance of RDRT as part of the support system which resulted in the National Society preferring self-funded teams such as FACT or ERU. After intensive discussions, the RDRT teams were welcomed as a much appreciated additional capacity to support the immense scale of the operation response with specific technical knowledge.
- The well integrated RDRT team provided effective support to the scale-up of the relief operations particularly in Sindh province, a higher number of beneficiaries were reached and the immediate intervention was run with better quality assessments, beneficiary selection and relief distributions. The tools proved to be effective and had added value to the emergency response activities and had overcome the staffing challenges faced at the beginning of this large operation. In addition, RDRT members built capacity by facilitating induction sessions on RCRC principles and values for newly recruited PRCS volunteers; providing on-the-job training and coaching; also running reporting workshops.
- The operation provided an showcase for further analysis in closer relations and possible integration between ERU and RDRT in joint deployments, especially ERU deployments would benefit from 'supports with human resources with proficient technical skillsets and local knowledge to complement the more 'heavily equipment oriented' ERUs.

An evaluation of the relief and early recovery phase was commissioned to an international external consultant in July 2011, which indicates:

- Bulk centralized purchases of food assistance resulted in reduced costs
- Toolkits provided as part of the NFIs were reported to be greatly appreciated by recipients as they were useful in repairing destroyed household and homes, but could also be used to support livelihoods activities.
- Hygiene promotion activities contributed to the prevention of water-borne diseases and increased relevant knowledge and practices of the targeted.
- The scale of the programme operations were significant which required a stable team to understand the context and provide continuous support; however these were not achieved as there was a high staff turn-over rate for both international and local team, and the staffs were employed with varying degree of expertise and experience which resulted in challenges in maintaining consistency of programming.
- Procurement procedures, in the same time ensured quality standards and prevent misuse of funds, may have been a cause for delay and required revisit to fit in future emergency responses, this was taken up in pre-disaster meetings 2013 and resolved in joint procurement for pre-positioned stocks prior to flood sessions.

- Participatory approaches and feedback mechanism with communities and staff could be enhanced during the relief operations (*both areas which the IRP included and aimed to enhance*).

### Challenges

- During the floods 2010 relief operation security concern was key in a number of response locations and had significant impact on movement of goods, national and international staff, volunteers, and arrangements to ensure beneficiaries to receive assistance. In January 2011, five IFRC trucks carrying relief goods were looted on the way to distributions in the district of Dadu of Sindh province. A substantial number of road traffic accidents, although fortunately not fatal happened. Indirect distribution methods via community elders were proposed by a number of RCRC movement partners, and tested on a small pilot basis as an alternative to manage the security challenges in certain areas in the early part of September 2010. However, the efficiency with this method as compared to the obvious benefits offered by direct methods were in question. Thus, all remaining relief distributions were again carried out directly by PRCS.
- Similarly, the damaged public infrastructure created difficulties for timely access and assistance to the flood affected people. Transfer of goods from primary supply points in larger trucks to smaller vehicles for onward secondary and tertiary transport (5 to 6 metric tonnes) to distribution points was used to manoeuvre the roads, these measures required more time and increased the costs.
- Bad weather and the slow evolving nature of the floods also hampered the relief operation in the early stages.
- Despite all these challenges, expert logisticians and a large team of dedicated staff and volunteers contributed to the achievements of the relief food and NFI assistance to the flood affected families.

## 2. 2010 Floods: Shelter

### Shelter – Relief & Early Recovery

**Outcome: Improved conditions for 75,000 most vulnerable flood-affected families through provision of emergency shelter and restoration activities in KP, Punjab, Sindh and Gilgit Baltistan.**

Outputs (expected results)	Activities planned
<p><b>Basic emergency shelter needs of affected families are met over the initial three to nine months.</b></p>	<ul style="list-style-type: none"> <li>• Conduct on-the-ground assessments, selection and social mobilization for the verification of 75,000 families.</li> <li>• Develop emergency shelter strategy through community participation.</li> <li>• Identify volunteers and staff to support the operation.</li> <li>• Mobilize required shelter items (tents, tarpaulins, shelter kits, etc) through international mobilization, international and local procurement following IFRC standards.</li> <li>• Distribute shelter kits, tarpaulins and tents (in coordination with the ERU teams).</li> <li>• Develop information, education and communication materials, booklets, posters and training programme.</li> <li>• Coordinate with Red Cross Red Crescent partners in-country and other actors/partners involved in shelter programmes.</li> <li>• Develop a monitoring and evaluation system for the continuous improvement of delivery system.</li> </ul>
<p><b>Selected flood-affected families are supported with winterized transitional shelter with washroom, providing proper residential conditions, through the provision of material, tools, training and technical support.</b></p>	<ul style="list-style-type: none"> <li>• Conduct detailed assessment and design for transitional (winterized) shelter needs through community participation and ownership, in identifying the most used or required local materials.</li> <li>• Conduct on the ground assessments, selection and social mobilization for the verification of 6,500 families.</li> <li>• Provide staff with training, guidelines and construction instruction for both core and transitional structures.</li> <li>• Develop mechanisms for the distribution of materials for winterized shelters (combined with distributions on non-food items).</li> <li>• Coordinate with the local authorities and other organizations to complement the activities planned.</li> <li>• Develop a monitoring and evaluation system for the continuous improvement of delivery system.</li> </ul>

As a part of relief programme and along with NFI and/or food distributions, 83,209 families (582,463 persons) were reached with emergency shelter items, in most cases along with NFI's. The items included 15,273 tents, 160,497 tarpaulins, and 37,498 shelter toolkits<sup>14</sup>.

**Table 5: Summary of WTS package**

<i>Items</i>	<i>Quantity</i>
Blanket, High Thermal	4 pcs
CGI sheet	12 pcs
Flat Galvanized sheet	1 pcs
Nail, galvanized steel	2 kg
Rope, cotton, 50 meter	1 roll
Rope, plastic, 50 meter	1 roll
Shelter tool kit	1 kit
Tarpaulin	4 pcs
Timber pole	28 pcs
Washer, Steel / Rubber	200 pcs

Additionally, with the fast approaching winter and temperatures falling below zero degree Celsius in the northern parts of Pakistan, the typical emergency shelter material - such as tents and tarpaulins - were considered insufficient to meet the shelter needs of the people living in high altitude areas of KP and GB. Considering these harsh weather conditions, a Winterised Transitional Shelter (WTS) programme was designed. The material included corrugated galvanized iron (CGI) sheets, wooden/bamboo poles, tarpaulins, high thermal blankets, shelter tool kits and fixing materials. The WTS component concluded in April 2011, reaching 6,393 families (44,751 persons). During distributions, PRCS volunteers and staff used print material and practical demonstrations to explain the design of the winterized transitional shelter. Where required, some teams also followed up the distribution with technical advice and assistance to the communities in the construction of these shelters. A review of the project took place in February 2011, and it was found that families utilized most of the materials provided in the winterized transitional shelter kit through improvisation based on individual needs.

**Challenges:**

- Attempts were made to bring the distribution points for the WTS as close as possible to the targeted communities, however due to the scattered population, damaged roads and infrastructure, and the difficult hilly terrains this was not always possible. In Swat district (KP province), the distribution of WTS presented great challenges. After a series of meetings between IFRC, PRCS NHQ, KP provincial branch, Swat district branch and the affected communities, it was decided and agreed to establish a joint PRCS/IFRC distribution point in Mingora, main city of the district. Selected beneficiaries travelled to the distribution point to collect their assistance packages. In the program design, transportation of the large bulky package back to their villages was the responsibility of the beneficiaries, which proved to be a challenge for some. Reports were received from a few instances where beneficiaries sold some of the timber poles in the local market, using the money to hire small vehicles, donkeys or labourers to transport and carry the remaining items back to their villages. This is a major lesson learned that would be taken into account for future program design.



Model of WTS in KP province. **Photo:** IFRC.

<sup>14</sup> Shelter tool kits (one bag per household containing shovel, rope, handsaw, nails, pole, shears, tie wire, claw hammer, and machete).

## Shelter - IRP

<b>Outcome: Improved permanent housing conditions for 5,000 most vulnerable flood-affected families in Sindh and Punjab provinces.</b>	
<b>Outputs (expected results)</b>	<b>Activities planned</b>
<b>Flood-affected families of Sindh and Punjab provinces have improved housing conditions.</b>	<ul style="list-style-type: none"> <li>• Conduct a pilot project in Thatta targeting 18 families to test the effectiveness of the proposed methodologies and implementation procedures.</li> <li>• Selecting beneficiaries for the cash grants for shelter construction based on village committees' recommendations, priorities and the availability of resources.</li> <li>• Transfer "conditional cash" to beneficiaries in agreed cash grant instalments.</li> <li>• Procure, store and distribute shelter tool kits to the families according to plans.</li> <li>• Shelter/latrines constructed for beneficiaries.</li> <li>• Issue Completion Certificates to completed houses.</li> <li>• Establishment of cash grant monitoring system.</li> </ul>
<b>The capacity to provide sustainable housing conditions by applying mitigation measure for the flood-affected families is enhanced.</b>	<ul style="list-style-type: none"> <li>• Active participation to national and shelter cluster to "build back safer".</li> <li>• Produce and distribute IEC materials (brochures, poster and video) on safe construction.</li> <li>• Conduct training for technical staff and field personnel on safe construction techniques and sustainable building material alternatives.</li> <li>• Organise shelter construction lesson learnt workshop to improve NS technical capacity in shelter sector.</li> <li>• Conduct training in target communities to improve understanding of quality of materials and best practice techniques for flood resistant shelter.</li> </ul>

In the flooded areas, over 1.9 million houses were partially or fully damaged. The majority of the fully damaged houses were kaccha<sup>15</sup> houses. The IRP programme focused on a longer-term recovery by providing owner-driven shelter assistance through cash-grants for the southern parts of the country, particularly in the provinces of Punjab and Sindh.

The owner-driven cash-grant support programme was introduced, aiming to ensure accountability to both beneficiaries and donors, and contribute to enhancing resilience of the targeted communities. The intervention aimed to assist flood affected families of the two provinces to restore their homes through receiving conditional cash grants, shelter tool kits, training and technical support, mobilising communities and beneficiaries to participate in the construction process.

As the owner-driven approach was new to the PRCS, sixteen sample shelters were constructed in Thatta district of Sindh (January–August 2011). The main objectives of this pilot were to test the use of cash if it would be an appropriate, effective and efficient means, as well to review the systems of monitoring and implementation for both the planned livelihoods and shelter cash programmes. This resulted in the development of SOPs for cash transfer mechanism and enhanced confidence of the NS on the approach, as well as improvements in the design of the shelters.

After the Thatta pilot project, the shelter programme started in Sindh and Punjab province, targeting families affected by the monsoon floods 2010 with completely destroyed houses and who had not been able to recover sufficiently to provide themselves with adequate durable shelter.

A second phase of the pilot was undertaken between October 2011 and May 2012, which produced eight improved sample shelters (four each in Sindh and Punjab), consideration were taken on the suitability of design specification, local context and price ; the implementation methodology and the grant levels were further tested. Following the first phase of the pilot, latrine was included as part of the program with an increased the amount and number of instalments.

Under the IRP, 2,534 eligible beneficiaries were identified, 1,890 in Sindh and 644 in Punjab. Identification and selection of beneficiaries for the shelter assistance were given a maximum number of beneficiaries to be (re)identified by the end of October 2012. The programme implementation timeframe were five months, keeping in mind the

<sup>15</sup> Mud-brick houses

deadlines with the upcoming closure of the appeal in 2013. The same identified beneficiaries were also provided with shelter tool kits<sup>16</sup>.

58 safe shelter techniques trainings in Sindh and 19 trainings in Punjab were conducted for the identified beneficiaries in target villages to allow them to use the materials provided to build back better. These trainings mainly included men with few beneficiary females accompanied by their male family members responsible for construction. Moreover, 1,051 safe shelter construction brochures in Sindh and 644 in Punjab were distributed for the same purpose. The PRCS shelter team, along with technical volunteers, conducted these trainings with technical support by IFRC. In Sindh, shelter brochures were developed in local Sindhi language. In Punjab Urdu was preferred by the community as school syllabus is in Urdu.



Distribution of tool kit after a safe-shelter awareness training session in Punjab province. **Photo:** IFRC.

Cash transfer was done through the Pakistan General Post Office which has the largest network and which was considered as cost effective, trust worthy and a commonly used traditional system. Beneficiary pledge agreements were also signed between PRCS/IFRC and beneficiaries, while money orders were processed by IFRC and submitted to the general post office in Islamabad for onward distribution to the provinces and districts.

The cash grant amount was increased for the shelter from the original PKR 75,000 to PKR 100,000, and an additional PKR 30,000 was provided for latrines where required. In Punjab, the remaining WatSan materials were provided for latrine construction along with shelters and only PKR 20,000 was provided instead of PKR 30,000, to procure cement, sand, crush, roof tiles, T-iron and bricks.

**Table 6: Summary of the owner-driven shelter cash grant instalment**

<b>1st</b>	Disbursed once agreement is signed, for the shelter foundation (PKR 40,000)
<b>2nd</b>	For super-structure construction, inclusive of roof construction (PKR 50,000)
<b>3rd</b>	Finalising of remaining shelter components (PKR 10,000)
<b>4th</b>	For first stage of latrine construction (PKR 20,000)
<b>5th</b>	For second phase of latrine construction for final finishing (PKR 10,000)

Though IRP activities were decided to be completed by March but an exception was made for the shelter programme to complete. All activities were subsequently ended by June 2013, with a total shelters completed were 2,522 including 1,878 in Sindh (KSK - 1,405 and Shikarpur - 473) and 644 in Punjab (Muzaffargarh - 642 and Layyah - 2), against 5,000 planned. The shelter assistance was not provided in district Layyah due to suspension of the programme due to irregularities beneficiary selection. Out of the total reached beneficiaries, 422 were female recipients .

Out of all of the identified beneficiaries in Sindh, 12 beneficiaries in district Shikarpur (Nasirabad village) could not complete the construction due to unresolved landlord issues. The beneficiaries had received shelter tool kits, two instalments and shelters were at varying levels of construction (window, lintel or roof stages). A letter was also sent by PRCS Sindh to NHQ informing that these shelters would not be able to be finished. Shelter completion certificate were also issued to all the beneficiaries at the completion of their shelters, except these 12 beneficiaries.

Along with shelters, 1,996 latrines were also constructed on need basis. The shelters built have an area of 20.72 square metres, suitable for occupancy of five to seven people. Some beneficiaries increased the size of their shelters as per their needs from their own contributions.

Instalments was slightly modified for the programme in Punjab, where additional materials were provided for the construction of latrines, as a result PKR 10,000 (approx. CHF 100) was reduced from the grant.

<sup>16</sup> Each kit contained rope, 30m, handsaw, nails for roof sheets, shovel, hoe, machete, shears, nails, tie -wire, claw hammer and packaging material materials including (polypropylene bag, carton). MacheteNote: Machetes were later removed from the tool kits as per beneficiaries suggestion in view of security concerns.

The IFRC shelter team actively participated in shelter cluster meetings to promote the “build back better” concept. The cost per shelter supported by IFRC exceeded the guidance provided by the shelter cluster, surpassing the structural quality and robustness of the structural design, whilst meeting the size dimensions recommended at 21 square meters<sup>17</sup>. The shelters sustained the impact of the floods in 2011 and 2012 in Sindh. Shelter cluster guidelines were also promoted to ensure achieving the objective of ‘building back better’:

- Able to resist normal floods
- Able to resist abnormal floods up to an agreed level
- If required - able to resist earthquake up to the required level
- Took into account the high temperatures in Sindh and Punjab
- Be culturally acceptable
- Be made of readily available materials
- Be constructed using simple techniques

And for the latrine:

- Septic tank to be constructed
- Soakage pit to be constructed

At the end of the programme a sectorial evaluation for the shelter component was undertaken as part of the exit strategy by a local external consultant. Field work for the IRP shelter programme review was completed in May-June 2013, few highlights:

- The shelters provided were robust, protecting and reducing vulnerability of beneficiaries against renewed flooding in 2011 and 2012 in areas of Sindh.
- Safe shelter techniques and IEC materials provided to beneficiaries were appropriate and useful for the owner-driven construction project. In addition the shelter tool kits were appreciated.
- The project was recommended to consider inclusion of assistance also to households with partial damage and requiring rehabilitation assistance, not only construction assistance to those meeting the targeting criteria with fully damaged households.
- Shelter design was recommended to take into account actual family member size when designing assistance package (rather than one standard only) and high weather temperature environments.
- The quality of the construction materials used was good, as beneficiaries had the freedom to personally choose and purchase quality materials for their own homes via the cash grants.

The IRP endline survey conducted in April 2013<sup>18</sup> amongst 442 respondents across the three IRP provinces indicated a significant increase from 20 per cent to 60 per cent of Pakka<sup>19</sup> shelter structures in the assisted communities compared to the baseline survey in September 2011. Of these, 45 per cent received assistance from the PRCS owner-driven shelter programme and 15 per cent from other sources.

### Challenges

- The use of owner driven and cash transfer approach for the shelter assistance was new to PRCS; however through the Thatta pilot project as well as with the support of IFRC, PRCS managed to carry out these activities within the timeframe of the operation. However, it is worth to note that the service provided by the post office for cash transfer mechanism, particularly in Sindh, were below the agreed standard delivery criteria. To solve the issue, besides frequent liaison with the post office management to seek solution, the 3<sup>rd</sup> and 4<sup>th</sup> instalments were combined to speed up the process.
- In Punjab, initially 4,900 beneficiaries were identified; however at the end of 2011, due to the allegations of irregularities in the selection process, activities were put on hold and an extensive re-verification exercise of all identified beneficiaries was undertaken and district Layyah was removed. The progress in Punjab was further slowed down due to the transfer of management responsibilities for the implementation of the IRP from the PRCS provincial branch to the PRCS NHQ and the associated need to establish a new operational team.



A completed shelter beautifully plastered by a beneficiary in Sindh province. **Photo:** IFRC.

<sup>17</sup> SPHERE standards recommendations were adjusted slightly, providing 3 square meters per person instead of 3.5.

<sup>18</sup> IRP Endline Survey: Confidence Interval 95 per cent. Margin Error 5 per cent. Population Sample Frame 19,867 families.

<sup>19</sup> Shelters with more robust structures, such as foundation and baked bricks.

- Land ownership remains a common barrier in beneficiary selection whereby beneficiaries were required to obtain a No Objection Certificate (NOC) to reconstruct their houses on the land which they previously occupied. Negotiation with landlords slowed the implementation. Furthermore, some affected families were considered ineligible for IRP shelter assistance as they have rebuilt their houses using their own resources or with the help of the government and other organisations and no longer fit the eligibility criteria.
- Insufficient availability of skilled labour for masonry support due to the many rehabilitation projects on-going in the area by different organisations, increased the need to use 'volunteers' instead and put more strain on the technical project staff to support the assisted beneficiaries. However, this did not affect the standards of the shelter.
- The quality of the local materials was a key factor. For instance, the soil quality in Punjab was better than in Sindh for bricks production.

### 3. 2010 Floods: Health & Care

#### Health & Care - Relief & Early Recovery

**Outcome: The vulnerability of 130,000 flood affected families to public health risks is reduced through the provision of curative and preventative health services over five months.**

Outputs (expected results)	Activities planned
<p><b>The immediate and medium risks to the health of flood affected families are reduced.</b></p>	<ul style="list-style-type: none"> <li>• Conduct emergency and recovery health needs assessments and analyze baseline data.</li> <li>• Establish 29 mobile medical health teams and two ERU basic health units to provide curative and referral health assistance for 130,000 families in coordination with local health authorities.</li> <li>• Distribute 35 basic Inter-agency Emergency Health Kits (IAEHK) to 24 PRCS medical health units (BHUs/MHUs) in order to cover medical treatment needs of beneficiaries.</li> <li>• Utilize PRCS existing medical procurement system to maintain adequate medical supplies for health clinics and supplies for referral to secondary health facilities.</li> <li>• Mobilize and provide refresher training to CBHFA staff and volunteers.<sup>20</sup></li> <li>• Implement community epidemic prevention and control activities such as supporting vaccination, distributing impregnated mosquito nets with malaria key messages.</li> <li>• Implement community-based psycho-social activities/intervention in priority affected areas for flood affected people and PRCS staff and volunteers.</li> <li>• Collaborate with nutrition cluster agencies for the referral and treatment of children suffering from severe acute malnutrition.</li> <li>• Conduct mother care to pregnant women and child care to children suffering from severe acute malnutrition.</li> <li>• Train and support community midwives/traditional birth attendants and female health workers.<sup>21</sup></li> <li>• Provide safe delivery kits to basic health units/maternal and child health clinics and train community midwives.</li> <li>• Establish planning, monitoring, supervision and evaluation system of activities for health programming.</li> </ul>

Realizing the magnitude of the 2010 flooding, PRCS immediately deployed mobile health units (MHU) to provide integrated basic health care services to severely affected population. Between the periods of August to December 2010, over 133,000 individuals were assisted with curative medical services, disease prevention and health promotion<sup>22</sup>. A total of 37 mobile health units (MHU) were deployed (18 supported through this appeal) across the five

<sup>20</sup> No refresher training was done during the emergency phase.

<sup>21</sup> These activities were carried over to recovery period (IRP).

<sup>22</sup> Medical Services include: diagnosis of diseases; advice regarding medicines/ treatments; and provision of free medicines, Preventive services include; Immunization of pregnant women, women of child bearing age, and children; provision of LLINs; antenatal and postnatal check-ups; family planning services. Health promotion services include: health education and promotion sessions; growth monitoring and provision of BP5.



provinces of Sindh, Punjab, GB, KP and Baluchistan, in addition to two basic health care emergency response units (ERU) – each designed to serve 40,000 people). Provision of health services by PRCS MHUs in the early days of the operation was considered the flagship services of the operation.

Assistance provided also included psychosocial support (PSS) and community health promotion activities which were incorporated in the BHU and ERU services, benefitting over 30,000 persons across five districts in Sindh province. In Sindh, ERU mobile health teams of the Norwegian Red Cross provided mosquito nets and BP-5<sup>23</sup> to pregnant women and children under the age of five years, in different camps of Larkana, Shikarpur and KSK districts, a basic health unit (BHU) was set up in the Tehsil Ghari Khairo of district Jacobabad (Sindh).

In winter, during December 2010 and January 2011, a slight increase of acute respiratory infections was detected, while in the worst-affected provinces of Punjab and Sindh, malaria and signs of malnutrition were on the rise particularly among populations who had been displaced for months. These observations prompted an increase in the amount of blankets and insecticide-impregnated mosquito nets (LLIN) purchased for use in the non-food distributions, while BP-5 compact food distribution among the malnourished formed part of health interventions in the IRP.



A Mobile Health Unit (MHU) team working in KP province.  
Photo: IFRC.

By the beginning of February 2011, PRCS mobile health operations had substantially scaled down as the majority of floods affected families had returned to their areas of origin. Therefore, only eight teams remained active in KP and Sindh provinces, with the teams in Baluchistan, Punjab and GB having formally ceased floods-specific mobile health activities. However several other components of the health programme under the early recovery phase were scaled up, particularly in areas of maternal, new born and child health (MNCH) services, family planning, health education for prevention of infectious diseases, as well as support in immunisation campaigns. A number of volunteers and coaches were trained on community-based health and first aid (CBHFA), and psychosocial support (in collaboration with Danish Red Cross). A total of 22 BHUs/MHUs (19 BHUs and three MHUs) were also set up for initial one year in districts where health facilities had been damaged by floods. By the end of December 2011, 137,703 persons were reached with health and care services.

A review of the relief and basic health care ERU deployments was undertaken in Feb 2011, below highlights of a few recommendations<sup>24</sup>:

- *Importance of Contingency Planning; Building capacity before, during and after disasters:*  
To make a contingency plan effective, signed individual memoranda of understanding are required to make the plan legitimate and enforceable.
- *Standard Operating Procedures:*  
To turn contingency planning and MOUs into an effective operational response, the PRCS will need to consider establishment of detailed standard operating procedures (SOP). While some procedures may already exist, the floods operation seems to indicate a need to update such SOPs, preferably at a level of detail that all volunteers, branches and provincial branches understand their role in an emergency and what resources can be expected and what procedures to follow.

## Challenges

- Considering the widespread geographical distribution of the communities needing health interventions, many levels and tiers of coordination and cooperation (national, provincial and district) were required, posed a challenge in the implementation of the different components of the health program.
- A human resource recruitment plan was agreed with the PRCS to implement the health response interventions, unfortunately vacancies remained at all levels, together with frequent turn-over of trained staff and volunteers. Strikes at the PRCS NHQ in 2012 resulted in resignation of most of the senior health staff and a managerial gap in the supervision of the program implementation, ..

<sup>23</sup> A high calorie, vitamin fortified food item, a nutrition supplement

<sup>24</sup> Both of these areas have seen much support and development over the life-span of this appeal. Refer to 'National Society Capacity Building' and 'Capacity Development and Organisation Strengthening' sections.

- The non-availability of a systematic reporting system and standardized reporting formats, with agreed reporting channels, plus timely monitoring impacted upon the effectiveness and efficiency of the health programme.
- In some regions, the PRCS/IFRC Health Facility was located far away from the communities where the PRCS/IFRC Community Based Health Interventions were operational, challenging the development of linkages between the community based and facility based services.
- Where the damaged infrastructure and network of roads and bridges not just hampered the movement of relief goods and relief distribution teams but also affected mobility of the health teams. After much efforts, the PRCS mobile health teams were able to conduct assessments and assistance to many of these areas. Access were not easy, the teams crossed on-foot where bridges may have been broken, using smaller local vehicles or other transport means if necessary for example. In addition to the regular Mobile Health Units, the Static Basic Health Units rendered out-reach services to the communities in their catchment areas once or twice a week. An alternative way was the selection of central points to which a number of nearby communities could reach the services within a reasonable travelling distance.

<b>Health &amp; Care - IRP</b>	
<b>Outcome: The immediate and medium-term health risks of targeted flood-affected communities are reduced.</b>	
<b>Outputs (expected results)</b>	<b>Activities planned</b>
<b>Increased capacity of PRCS to plan, respond and cope with health emergencies and challenges in times of recurrent disasters.</b>	<ul style="list-style-type: none"> <li>• Conduct health planning and review meetings with PRCS NHQ and branches.</li> <li>• Recruit and train field health staff on BHU standard operation procedures and management.</li> <li>• Train 25 CBHFA trainers, 156 coaches and 3,120 community volunteers and 25 PSS trainers, 156 coaches and 3,120 community volunteers in five PRCS branches.</li> <li>• Carry out PSS advocacy and Critical Incident Stress Management (CISM) workshops for PRCS core staff.</li> <li>• Provide capacity support to implement integrated health care activities.</li> <li>• Conduct coordination and field monitoring visits to project areas.</li> <li>• Carry out mid-term and end-term/impact evaluation at project level.</li> </ul>
<b>Communities have improved access to primary health services for the treatment of “minor” illnesses and injuries, essential maternal and child care services, referrals as well as psychosocial support.</b>	<ul style="list-style-type: none"> <li>• Set up BHU/MHU services.</li> <li>• Mobilise trained CBHFA and PSS volunteers to carry out community-based health promotion, first aid, epidemic control, nutrition and psychosocial support activities.</li> <li>• Form and train village health committee on first aid and engage them in community health/PS activities.</li> <li>• Provide delivery kits to priority district health facilities in target districts.</li> <li>• Train community midwives/traditional birth attendants on MNCH in collaboration with district health centres.</li> </ul>
<b>Increased awareness on health, MNCH, nutrition promotion, disease/epidemic prevention and control measures and including psychosocial support.</b>	<ul style="list-style-type: none"> <li>• Carry out household health survey on knowledge, attitudes and practices related to priority health risk in targeted districts.</li> <li>• Re-print, and distribute health and PSS communication materials.</li> <li>• Train volunteers on epidemic control and community-based nutrition.</li> <li>• Implement community awareness activities on PSS in five branches.</li> <li>• Conduct nutritional screening for pregnant and children under five and refer of malnutrition cases to district health/nutrition centres.</li> <li>• Distribute long-lasting insecticide treated bed nets and follow-up for hang-up activities.</li> </ul>

Five flood affected provinces of Pakistan were assisted with health and care services - GB and Baluchistan in addition to the three provinces targeted for IRP of Sindh, Punjab and KP) community health and – providing CBHFA and PSS activities integrated in priority villages through the training of community health volunteers and involvement of community members.

During the early recovery phase the support to 22 BHUs/MHUs was continued from January 2012 to June 2012 to ensure flood-affected communities have continued access to basic health services while permanent health facilities

were being repaired or rehabilitated. Later, support to five BHUs in Punjab and four in KP (district Charsada) were terminated with remaining 13 operational till the end of IRP in March 2013. The 22 BHUs/MHUs attended to a total of 407,244 consultations as outpatients with diagnosis and treatment of minor illnesses, immunization, antenatal and postnatal check-ups, family planning consultations and services, growth monitoring, health education, as well as provision of free medicines and referral to secondary and tertiary level care health facilities. Long Lasting Insecticide-Treated Mosquito Nets (LLINs) for the prevention of malaria and dengue, as well as BP-5 for the malnourished were also distributed.

**Table 7: Summary of trained staff and volunteers under CBHFA and PSS**

	<b>CBHFA</b>	<b>PSS</b>
<b>Master Trainers</b>	16	25
<b>Coaches</b>	150	157
<b>Volunteers</b>	1,575	959

A number of master trainers, coaches and volunteers were trained under CBHFA and PSS to conduct health awareness sessions and PSS activities in communities. In addition to the above, 89 volunteers were also trained on epidemic control using the epidemic control for volunteers (ECV) toolkit and training package, as well as community-based management which aims at building the resilience of acute malnutrition (CMAM) the communities against health epidemics.

By the end of March 2013, 95 village health committees (VHC) were formed, and 271 members of village health committees were trained in Basic First Aid with provision of which received VHC first aid training and 138 community first aid kits.

At provincial level, regular health meetings were held on a quarterly and monthly basis to review and plan progress and activities. CBHFA coaches and volunteers held weekly community and household health sessions and health promotion activities. The impact of these Health Education/ Promotion activities on learning and behavioural change of the communities is a long-term process with many other factors also influencing the knowledge, attitude and practices, Feedback during monitoring visits and evaluation surveys indicate an improvement in the knowledge, attitude and practices regarding the health issues covered through the Health Education/Promotion activities.

Strong collaboration of PRCS with district health authorities enhanced the immunisation coverage with supported vaccines and cold chain supplies for the targeted communities. In line with the MNCH care support, 66 delivery kits and 13,200 clean home delivery kits and birth attendants bags were procured in the second quarter of 2012 and were dispatched to recommended district health facilities in four provinces.

During late December 2012, there was a sudden rise of measles cases in a number of districts of Sindh which required immediate attention for all the children in the areas. The PRCS/IFRC Health staff responded and in coordination with the government health departments initiated immunization campaigns. A total of 17,068 children were vaccinated by five PRCS health teams under the measles campaign in four districts of Sindh (Larkana, Jacobabad, Shikarpur and KSK).

A total of 68,700 LLINs were procured and delivered through PRCS NHQ to provincial branches and from there to districts where they were distributed amongst the communities with priority given to pregnant ladies and children under 5 years of age. The distribution of these LLINs was linked with antenatal and postnatal check-ups for the pregnant ladies, and for children under 5 years of age was linked with the immunization programme.

One of the key finding of the 2010 floods was the alarming level of malnutrition among the people in the affected areas, especially in Sindh, Baluchistan and Punjab, although those in KP and GB were also affected with medical conditions associated with inappropriate nutrition. The WHO and UNICEF termed the prevalence of both 'acute' as well as 'chronic' malnutrition as 'equivalent to' or 'worse than' that in the sub-Saharan Africa and need for interventions aimed at targeting the malnutrition. In order to address this serious issue the health volunteers were trained to raise awareness among the communities and OPDs, encouraging those likely in need of nutritional supplements to visit the health facilities for proper screening. Priority was again given to pregnant women and children being the most vulnerable groups although others were also entertained if needed. The results were more than encouraging, with a great demand for more BP-5 as the effects and benefits were experienced. Procurement of 166,500 units of BP-5 for distribution to identified pregnant women and children (6,908 cartons) were undertaken, with 50 per cent of stocks (82,896 items) dispatched to 13 BHUs and MHUs for distribution under the MNCH component services in four branches by March 2013, and out of these, 52,301 had been distributed (Sindh - 34,131, KP - 3,627, Baluchistan - 14,431 and GB - 115).

Until February 2013, there were 13 PRCS health facilities supported by the IFRC under the IRP, with ten BHUs and three MHUs<sup>25</sup>. The majority of the BHUs catered for populations of more than 10,000 people, providing primary health care services free of charge for the whole duration of 2010 Floods operation timeframe, meeting SPHERE recommendations.

By end of February 2013, the support to BHU Goschali in Kohistan (KP) was stopped per directives of the EDO Health Officer Kohistan – one month earlier than the scheduled closure because the government authorities had no means to sustain the facility. It is also worth mentioning that no other organizations were allowed to provide health interventions at Goschali, other than then PRCS/IFRC BHU, the community reported to be extremely happy with the services provided to them. The PRCS/IFRC were trusted to the extent that despite the deep conservative society of the area, ladies frequently visited the BHU and even delivered children at the health facility. This was considered a direct result of the great dedication of the PRCS team.

The remaining 12 health facilities continued till the end of March 2013 when the field activities of the IRP were formally closed. At the end of IRP, all the three MHUs were closed, while five of the nine operational BHUs were proposed by the PRCS for continued support beyond March 2013 under the Long Term Planning Framework (LTPF) for Pakistan. These include Larkana (Sindh), Swat (KP), Gilgit and Skardu (GB) and Sibi (Baluchistan), all which had already been supported by IFRC before the IRP also. This allowed continuation of on-going health interventions with the targeted communities, and provide more time for the PRCS and health authorities to prepare for a gradual exit.

The BHU in Ghari Khairo (Sindh) was closed with equipment stored at the BHU building provided to the PRCS. BHU Thatta (Sindh) is continuing operations with PRCS support and will be handed back to district health authorities as the BHU facility is owned by the government.



Basic First Aid training for the Community Health Committee in Sharan Hamzazai, Loralai district, Baluchistan Province.  
Photo: PRCS.

An IRP endline survey amongst 424 families<sup>26</sup> across the three IRP provinces in April 2013 indicated the following impact of the health and care interventions:

- 62 per cent of respondents indicated that they had access to antenatal care for pregnant woman versus 47 per cent during the baseline in September 2011.
- 68 per cent of respondents reported possessing mosquito nets compared to 41 per cent in the baseline survey. Of these, 95 per cent received them from PRCS.
- Community respondents indicated that 42 per cent had access to health information and education versus 10 per cent during the baseline survey.

A health evaluation was conducted by an external international consultant in July 2013, with a few key findings highlighted:

- Almost half of the respondents stated a high level of satisfaction with the PRCS/IFRC medical consultations received through static and mobile health units (BHU/MHU), particularly appreciating the usefulness of PRCS/IFRC MHUs due to their easy accessibility, convenient timings, easy follow-up, free medicines, LLINs and BP5 provision.
- Half of the respondents valued highly the Community Based Health and First Aid (CBHFA), reported to be more important and useful than the medical consultations due to the long-term benefits and contribution towards positive change in the knowledge, attitude and practices of the individuals as well as the communities.
- The evaluation however also highlighted that opportunities were lost due to the PRCS horizontal management and implementation of the health interventions from other programme sectors.

<sup>25</sup> BHUs in Gilgit, Skardu, Goschali, Swat, Sibi, Jhal Magsi, Dera Murad Jamali, Larkana, Jacobabad and Thatta and MHUs in Larkana, Shikarpur and KSK

<sup>26</sup> IRP Endline Survey: Confidence Interval 95 per cent. Margin Error 5 per cent. Population Sample Frame 19,867 families.

## Challenges

- Medicine procurement process were long: after the revision of the MoU (between the PRCS and IFRC) regarding the procurement of medicines in February 2011, the process became more efficient and standardized. Previously the procured medicines were sent to the Drug Testing Laboratory at the National Institute of Health in Islamabad which delayed the whole process requiring about 8-10 months. With the MoU revision testing is done at another institute in Lahore which provides a turn-around time of 6 months for the complete process.
- Non-availability of appropriate storage facilities for medicines, and availability of medical equipment at the branches together with non-availability of technically sound medical warehouse personnel presented a challenge during the 2010 floods operation. The renovation of medical storage facilities, coupled with support for qualified personnel at the branches has been proposed under the LTPF, which is anticipated to continue to improve the management of the medicines supply chain.
- Security concerns impacted PRCS/IFRC programme schedules, monitoring and ability to provide support, due to the law and order situations, militancy, sectarian tensions in select areas, periodic demonstrations, increased requirements for No Objection Certificates (NOC) to travel into a number of sensitive areas (particularly for international staff), and attacks on polio health workers. Baluchistan and FATA are 'Red' no-go zones for all IFRC and PNS staff under the IFRC security umbrella.
- Delay in the transfer of funds from PRCS NHQ to branches to be able to implement activities coupled with irregular and non-standard progress reporting impacted health activities. The PRCS finance manuals and procedures have been updated, striving for greater uniformity and timeliness with continued development being made. Standardised programme progress and reporting formats for the majority of the PRCS health programmes have been put in place.
- Retention and motivation of trained CBHFA/PSP volunteers was another challenge. There was a great number of CBHFA and PSP Volunteers associated with the health program throughout the country. Due to insufficient coordination between the Health & Care department and the Youth & Volunteer department of PRCS these volunteers were at times not enlisted in the PRCS volunteers database and therefore missed incentives which would have encouraged their continued active participation.
- Need to conduct continual refresher sessions for new staff and volunteers (with different levels of experience and education), to ensure efficient and comprehensive understanding and delivery of the health interventions, which took additional efforts and time. Participation of women in CBHFA/PSP trainings was limited in KP where the socio-cultural norms hamper their participation in such activities, reducing access of women and consequently their households to health promotion and information.
- Irregular and incomplete progress reporting on health interventions from provinces to NHQ and thereafter receiving regularly consolidated and complete information from NHQ was a significant challenge to track the progress against set targets. An assistant data management officer was hired at IFRC in 2013 to consolidate all the reports over the three year life-span of this project, supporting the stretched human resources within the health department at PRCS NHQ to improve the completeness and accuracy of programme information.
- Community based nutrition activities (ECV and Nutrition) by CBHFA volunteers in the targeted villages were not able to be completed due to the departure of three provincial branch CBHFA Coordinators seeking other employment opportunities with the upcoming ending of the project. ECV trainings were completed, however nutrition trainings were unfortunately not able to be undertaken before the closure of the programme. CBHFA volunteers were however able to undertake awareness raising activities in their communities related to nutrition, identification of malnourished and referral to the health facilities for formal investigation, diagnosis and treatment.
- Similarly, in order to contribute to the achievement of the goal of reducing neonatal and maternal morbidity and mortality PRCS/IFRC planned training of community midwives/ Traditional Birth Attendants on MNCH in collaboration with district health centres complemented to the provision of Reproductive Health Kits and Clean Safe Delivery Kits. These trainings were planned in KP (Swat and Kohistan district) and Baluchistan (Jhal Magsi, Dera Murad Jamali, Sibi and Chaman districts). Two batches were trained in Swat but in Kohistan the training could not be conducted whilst the Executive District Officer Health of the district figured out how to best tackle the recent decision by community and religious leaders to disallow NGOs from working in Kohistan. Similarly. Likewise in Baluchistan efforts by the PRCS Baluchistan branch to coordinate with the government authorities to conduct these trainings initially indicated positive support, however were later de-prioritised due engagement of the concerned counterparts in the 2012 monsoon floods response operations.

## 4. 2010 Floods: Water and Sanitation (WatSan)

### Water & Sanitation - Relief & Early Recovery

<b>Outcome: Improve the health status and reduce the risk of water and sanitation related diseases for 30,000 families over four months, through access to safe water, appropriate sanitation and hygiene promotion.</b>	
<b>Outputs (expected results)</b>	<b>Activities planned</b>
The immediate risk of water and sanitation related diseases is reduced through provision of safe water, appropriate sanitation and hygiene.	<ul style="list-style-type: none"> <li>• Assess water and sanitation needs in flood affected areas with emphasis on women and children.</li> <li>• Provide safe drinking water to IDPs in schools and camps in Larkana, Shikapur, Khaipur, Thatta, Jacobabad (Sindh), Sanawan, Dadu and Rajanpur (Punjab) through emergency water treatment and distribution (through PRCS water and sanitation disaster response teams and ERUs).</li> <li>• Distribute water purifying tablets/sachets using trained volunteers in KP, Punjab and Sindh.</li> <li>• Construct emergency latrines for the displaced population in schools and camps in Larkana, Thata (Sindh) and Muzzafargah (Punjab) with consideration for gender requirements.</li> <li>• Implement solid waste management systems and clean up campaigns in targeted schools and camps.</li> <li>• Conduct training with locally recruited volunteers to continue hygiene promotion activities.</li> <li>• Conduct emergency hygiene promotion activities and clean-up campaigns in camps and schools in Sindh, KP and Punjab through PRCS trained volunteers.</li> <li>• Produce hygiene promotion materials based on existing materials.</li> <li>• Conduct lessons learnt workshop to feed into PRCS water and sanitation emergency response preparedness.</li> <li>• Monitor the correct use of water purifying tablets, hygiene kit items, handling of distributed water, latrines and vector reduction activities.</li> </ul>

The average production of safe drinking water went as high as 1,156,000 litres per day at the peak of operations reaching a total of 31,300 families (219,100 persons)

A total of 126,563 jerry cans (10-litre and 20-litre capacity) were distributed by PRCS for safe collection and storage of water. Through the construction of latrines in the displaced camps, 4,005 families had access to improved sanitation facilities which reduced the outbreak of disease. PRCS/IFRC hygiene promotion officers and volunteers complemented this with hygiene promotion activities conducted for 12,994 families. Through rehabilitation of 16 water supply schemes that were damaged, 45,148 persons (6,449 families) benefited during the early recovery phase.

The PRCS deployed their water and sanitation expertise to operate nine water and sanitation teams (of which five were IFRC supported and three received ERU technical assistance and support) in the most-affected provinces of Punjab and Sindh. This included one mass sanitation module in Sindh supported by IFRC and British Red Cross. This was the first time the PRCS deployed their WatSan national disaster response team (WSDRT) with minimal external support and received significant recognition from the Pakistan local and provincial government for their efforts. This deployment followed a number of WSDRT trainings supported by RCRC PNS.

A lessons learnt workshop conducted in June 2011 to summarise the lessons from the water and sanitation emergency response component and plans to improve preparedness for future disaster response, which was evident by an improved response in the 2011 and 2012 floods.

### Water & Sanitation – IRP

<b>Outcome Reduced risks from water and sanitation-related diseases in targeted floods-affected communities in KP, Punjab and Sindh provinces.</b>	
<b>Outputs (expected results)</b>	<b>Activities planned</b>
Increased access to safe	<ul style="list-style-type: none"> <li>• Rehabilitate 25 water supply schemes.</li> </ul>

<b>drinking water for up to 15,000 families.</b>	<ul style="list-style-type: none"> <li>• Provision of 10,000 household water filters.</li> <li>• Installation of 130 hand pumps.</li> <li>• Formation of 40 village construction committees.</li> <li>• Training 140 village maintenance care takers.</li> </ul>
<b>Increased access to appropriate and improved sanitation facilities for 4,500 affected families.</b>	<ul style="list-style-type: none"> <li>• Provide construction materials for 4,500 latrines including space for bathing.</li> <li>• Support the beneficiaries in the construction of latrines by provision of skilled labour, linking with the PHAST implementation.</li> <li>• Monitoring and supervision of the construction activities.</li> </ul>
<b>Safe hygiene, sanitation practises and knowledge are evident in the affected population through community-based hygiene promotion activities in conjunction with hardware for up to 15,000 flood affected families.</b>	<ul style="list-style-type: none"> <li>• Train 180 volunteers and 30 staff members to conduct PHAST in the communities.</li> <li>• Forming participatory hygiene and sanitation transformation (PHAST) and children hygiene and sanitation transformation (CHAST) groups covering all 39 communities targeted under IRP.</li> <li>• Distribute 15,000 solid waste containers to aid the necessary good behaviours among the communities.</li> <li>• Distribute 15,000 hand washing soap to promote proper hygiene behaviour.</li> <li>• Conduct PHAST sessions in the selected communities.</li> <li>• Trained volunteer teachers and staff to conduct CHAST in schools of the affected areas.</li> </ul>

WatSan was one of the sectors of the integrated programming approach under the IRP, together with shelter, livelihoods, health and DRR. Three components of the WatSan programme were implemented by the PRCS with support from the IFRC field offices, including water supply, sanitation and hygiene promotion, with the three components considered as complementary to each other.

In KP, 25 gravity water supply schemes (WSS) were identified for rehabilitation. After field surveys, hydraulic designs were prepared and based on these the required materials lists were prepared. Of the initial target of 25 only 12 WSS (eight in Shangla and four in Kohistan) could be completed due to time constraints and PRCS implementing capacity. Materials were first ordered/ tendered in bulk, and later additional orders were based on outstanding requirements. Implementation was done by the communities with technical support from PRCS technical officers. For each scheme care takers were trained, tools and spares provided. Local labours were engaged for construction which provided a source of income to the community members. Proper survey, including actual distances and altitudes together with a good hydraulic design was done for these WSS, ensuring an equal distribution of water within the system and that every tap stand would have sufficient water. It also ensures that the pressures within the pipes system remains within prescribed limits.

After assessing the needs for hand pumps in IRP areas of Punjab and Sindh, the beneficiaries together with PRCS technical staff selected the final location for the hand pumps. A tender for the installation of the hand pumps was called by IFRC Islamabad, and the contract for installation of 135 hand pumps awarded (Punjab-105; KP-34; and Sindh-30). Installation was monitored by PRCS technical staff. After completion of the hand pumps, biological and chemical testing was done to ensure that potable water is being provided. Care takers (100 in total) in each community were trained, and provided with necessary tools and spares for maintenance.

Pour flush toilets with septic tank were provided to those families without a proper toilet in the targeted communities. A total of 3,218 toilets were completed by the end of March 2013 with provision of construction materials and skilled labour support to 3,211 direct beneficiaries (KP - 1,965, Sindh - 504, Punjab - 742), and seven latrines in schools.

The shelter programme also provided toilets with a similar design. Beneficiaries were selected by the village committees and then verified by the PRCS WatSan team. The selected beneficiaries were provided with construction materials through the village committees.



Latrine and water hand-pump beneficiaries in Muzzaffargarh, Punjab province. Photo: IFRC.

Warehouses at hub levels supported the storage and delivery for distribution of materials to beneficiaries at a certain point in their villages where. One PRCS WatSan technician and one supervisor (water committee member) was in charge of these distributions for check and balance.

Skilled labour was paid for directly by the IFRC field office after successful completion of construction. PRCS technical staff and volunteers monitored the construction.

The participatory health and hygiene transformation (PHAST) tool box was adapted to the local situation and PRCS staff and volunteers were trained on its use. A total of 104 PHAST groups were formed in the communities assisted, with both male and female groups and a total of 2,540 participants registered.

**Table 8: Summary of PHAST and CHAST activities**

	<i>Sindh</i>		<i>KP</i>		<i>Punjab</i>		<i>Total</i>
<b>No. of PHAST group</b>	51		33		20		104
<b>No. of PHAST session</b>	857		340		577		1,774
<b>Total no. of participants for PHAST</b>	532 male	662 female	822 Male	-	256 male	268 female	2,540
<b>No. of CHAST group</b>	8		9		7		24
<b>No. of CHAST session</b>	96		108		84		288
<b>Total no. of participants for CHAST</b>	208		255		210		418
<b>No. of CHAST school kits distributed</b>	18		9		7		34
<b>No. of CHAST school bags distributed</b>	330		500		400		1,230
<b>No. of CHAST story books distributed</b>	500		500		500		1,500

Out of the planned total of 180 volunteers and 30 staff members, 108 volunteers and 25 staff members were trained under the PHAST programme. Hygiene promoters and PHAST trained staff conducted sessions covering 17 activities of seven steps - with main topics including domestic hygiene, personal hygiene, environmental hygiene and faecal disposal.

Under the Child health and hygiene transformation (CHAST) programme, a shorter adapted version of PHAST specific session for school children, CHAST groups were formed in 24 schools with 418 children participants, across all the original 39 targeted revenue communities. A total of 288 CHAST sessions were completed in all three IRP assisted provinces.

CHAST school bags (1,230) and hygiene story books (1,500) specially designed and printed by the PRCS/IFRC WatSan team in Urdu (national language) were distributed. The contents of one CHAST school kit under the IRP was as follows:

- Hygiene hopscotch game (pan flex) with dice.
- Hygiene cricket game, two bats, two balls, six wickets, ten wooden stands (five good behaviours and five bad behaviours pasted pictures).
- One pocket chart.
- Hygiene snakes and ladder game with dice.
- Blue colour bag for keeping all these items.

Beside awareness sessions, other activities were also conducted to encourage good hygiene behaviours that included distribution of soaps, buckets and dustbins. A total of 9,587 buckets and waste bins were distributed in IRP targeted areas. (KP - 3,981; Sindh - 1,830; Punjab - 3,776), and 224,476 soap bars were distributed: 74,148 in Sindh, 89,500 in KP and 60,828 in Punjab (on average 12 pieces per beneficiary). Hygiene promotion posters in Urdu and Sindhi languages (21,000 - 7,000 in each province) were distributed during community and school sessions designed with the Beneficiary Communications



Distribution of buckets, waste bins and soaps distribution, Punjab province, **Photo:** IFRC.



and Accountability (BA) teams. Community mobilisation and awareness events such as hand washing day and clean-up campaigns were also organised as per priority activity areas identified through the PHAST and CHAST participatory tool kits.

A technical review and post-KAP (Knowledge Attitudes and Practices) survey was completed in April 2013 amongst the targeted communities, a follow-up from the pre-KAP conducted in second quarter of 2011. Responses from amongst the 397 post-KAP respondents:<sup>27</sup>:

- The practice of cleaning latrines: 25 per cent in the pre-KAP versus 81 per cent in the post-KAP
- The practice of washing hands before eating: 55 per cent in the pre-KAP versus 90 per cent in the post-KAP
- The practice of using soap for hand washing: 62 per cent in the pre-KAP versus 73 per cent in the post-KAP
- Available latrines were clean in 81 per cent of the visited cases in the post-KAP versus 25 per cent in the pre-KAP

An IRP endline survey amongst 424 families<sup>28</sup> across the three IRP provinces in April 2013 indicated the following impact of the WatSan interventions:

- 84 per cent of respondent families had a latrine compared to 46 per cent during the baseline in September 2011. Of these, 74 per cent received latrine assistance from PRCS (shelter or WatSan components)
- 61 per cent families reported using soap when washing hands compared to 41 per cent as compared to the baseline
- 25 per cent of families stated they purify water before drinking versus 13 per cent during the baseline survey.

At the closure of the IRP a PHAST review was conducted in June 2013, a few key findings are highlighted below:

- Trainings on the PHAST tool kit and methodology was received with great interest by staff, volunteers and communities.
- Recommendation to review the complementarity between PHAST and CBHFA tool kits for community based hygiene promotion and behavioural change.
- Absence of a dedicated PRCS NHQ technical officer has resulted in suffered coordination between provinces and NHQ to the detriment of the smooth running of the programme at times.
- The hardware and software components were not formally aligned or working in perfect unison, with instances of hardware provided without the full training, or vice-versa.
- Limited involvement from women in the planning and implementation phases.
- There could have been a stronger bridging strategy for PRCS continuation of activities in the PHAST mobilised villages through longer-term engagement with supporting volunteers after floods 2010 operation.

## Challenges

- The staff and volunteers utilised and trained in the earthquake 2005 recovery program helped in developing Water and Sanitation to become a key strength for PRCS at the time of the monsoon floods in 2010, and later in the 2011 and 2012 floods responses. Despite some challenges and delays faced, the implementation of activities in the emergency phase was successful in providing much needed water and sanitation facilities assistance. Logistic constraints with marrying procurement procedure requirements and the rapid changing pace and large scale of the response operation were understandably strained at times.
- The onset of the harsh winter with heavy snow fall in the northern province of KP in the months of November-December 2011 cut access to the areas, delaying the construction process of latrines and water supply schemes in the first half of 2012.
- In Punjab, the difficult security situation and internal legal issues due to allegations of irregularities at the provincial branch lead to a lengthy suspension of all activities, which in turn impacted upon the implementation timeframe of activities in this region. The activities in Punjab were only resumed in April 2012, with latrine construction activities starting at the end of September after an extensive beneficiary re-verification exercise. This also had a significant impact upon procurement and logistic arrangements with purchase orders cancelled where possible, however with some items it was too late in the contractual process. A phased procurement and delivery system is recommended for future to allow for flexibility requirements with the nature of such an operation.
- In KP and Sindh issues of suspected irregularities were identified with respect to the management of construction materials and the provision of per diems to volunteers, resulting in the termination of contracts of a number of field staff where evidence was found.

<sup>27</sup> 95 per cent confidence level, 5 per cent margin of error. Population sample frame 16,301 families.

<sup>28</sup> IRP Endline Survey: Confidence Interval 95per cent. Margin Error 5per cent. Population Sample Frame 19,867 families.

- In KP, Gravity Water Supply Schemes were to be rehabilitated with an initial plan for 25 schemes. However, beginning of January 2012, no proposed designs were submitted yet. Surveys were undertaken with the use of GPS, upon which the design was to be completed; however this was not systematically applied as field teams struggled with the GPS equipment. A significant time was invested in several design version reviews and back and forth of clarifications, which resulted in the surveys in June 2012 conducted using two altimeters.
- The target villages under this programme were identified through a VCA exercise conducted in January 2011. However, the remoteness of the selected villages in KP proved to be a real challenge for the transport of construction materials, coupled with the existence and assistance by other aid agencies in Sindh (as per the data collected from pre-KAP survey July 2011 and IRP baseline survey September 2011) at the time of activation of the WatSan activities in the field by PRCS, which required the expansion of villages in order to identify additional eligible beneficiaries and meet targets.

## 5. 2010 Floods: Livelihoods (LLHs)

The 2010 monsoon rains caused devastating impact on the livelihoods of families living in rural Pakistan. Damage to farm land caused significant disruption to the livelihoods of families relying heavily on the agricultural economy. The floods also severely damaged or destroyed livestock, fisheries and forestry, and key rural infrastructure. Cash based programming was one of the assistance modalities employed by a number of actors in the response. The VCA findings, TPAT Livelihood Assessment and baseline survey indicated that communities were particularly vulnerable in the period following the floods.

Recommendations from the TPAT assessment for recovery interventions included cash based programming in the form of micro-enterprise support, which later became conditional cash grants for income generation activities'. Safety nets were included to ensure the most vulnerable benefited, with a recommendation to include community cash grants that would increase access to labour opportunities. These later became known as micro mitigation projects (MMP) intended to restore and protect community infrastructure.

PRCS/IFRC launched the livelihoods project covering three components including agricultural input support under early recovery, while cash grant support for other livelihoods options and community project grant support for micro mitigation projects under the integrated recovery programme. MMPs were later completed under the disaster management department due to the delay in the in initiation of the MMPs and internal staff re-organisation.

Livelihoods – Early Recovery	
<b>Outcome: Assist 50,000 flood-affected families to restore their economic security within 24 months and to ensure that livelihoods are sufficiently sustainable and resilient to withstand future disasters.</b>	
Outputs (expected results)	Activities planned
<b>Flood affected families re-establish their livelihoods and household economic security through the provision of agricultural inputs.</b>	<ul style="list-style-type: none"> <li>• Conduct detailed recovery assessment and baseline surveys in affected areas (in conjunction with other sectors) to identify target communities.</li> <li>• Conduct cash and market feasibility studies.</li> <li>• Develop eligibility criteria, selection processes and operational modalities for families who will receive agricultural assistance.</li> <li>• Distribution of agricultural inputs to farmers (seeds and fertiliser) for growing vegetables.</li> <li>• Develop a monitoring and evaluation system for the continuous improvement of delivery system.</li> </ul>

Agricultural input support started with winter vegetable seed support to the farmers cultivating vegetables for sale and own consumption, followed by a grains seed support (Kharif season) in combination with essential fertilizers.

2,000 farmers of District Larkana (Sindh province) were assisted with winter vegetable seeds that have land for vegetable cultivation for sale and own consumption and 31,172 families in KP, Sindh and Punjab provinces against 31,232 planned were reached with the provision of maize and rice seed in combination with essential fertilizers. One day training programme was also developed to train every beneficiary on basic agriculture production information.

After distributions were completed, a monitoring was undertaken covering nine per cent (2,934 recipients) of the recipients throughout the sowing to growing and harvest phases:

- Data showed that on average 94 per cent of the farmers produced a crop, with highest in KP (100 per cent) followed by Sindh (99 per cent). One per cent of farmers in Sindh reportedly did not produce seedbeds because of migrated and fear of new flooding and decided not to invest. A number of farmers in Punjab cultivated cotton and used the fertilizer in cotton fields whilst sold or gave the rice seed away, which was identified due to an error on the part of an untrained local staff at that time of beneficiary selection.
- An average of 95 per cent of the respondent farmers planted maize/transplanted rice, with the highest in KP (100 per cent) followed by Sindh (99 per cent). In comparison to the previous year, an increment of 11 per cent production in Sindh, 28 per cent in Punjab, and a 23 per cent rise in KP for rice and 27 per cent for maize. This increment can be attributed to the increased fertility of the land with organic silt due to flooding, quality of seeds received and the training provided.
- All farmers confirmed receipt of seed and fertilizer in good quality with 98 per cent reported that the timing of receipt of the package was appropriate (April to July).



A Livelihoods recipient of Seeds and Fertiliser Programme, Punjab province, Photo: IFRC.

### Challenges

- Initial plans for a large-scale distribution of wheat seeds in late 2010 did not come to fruition due to uncertainties that the lands would be able to be readied in time for planting within the planting window for the *Rabi* season. As flood-affected families returned to their homes, issues of lost land titles and unclear post-floods demarcations of land impacted the ability to support the returning families with livelihoods recovery activities. The seeds and fertilizer distribution component was new to the PRCS, requiring more time for implementation.

Livelihoods – IRP	
<b>Outcome: 5,000 flood affected families regain their economic and food security through livelihoods recovery initiatives provided by PRCS.</b>	
Outputs (expected results)	Activities planned
<b>Flood affected families re-establish their livelihoods and regain sustainable economic security through provision of cash grants.</b>	<ul style="list-style-type: none"> <li>• Village committees select potential beneficiaries for cash grant.</li> <li>• PRCS/IFRC assists potential beneficiaries to prepare business proposal based on the capacities and feasibility for household cash grant.</li> <li>• Training selected beneficiaries on developing IGAs.<sup>29</sup></li> <li>• Disburse first and second cash grants instalment to selected beneficiaries</li> <li>• Monitoring usage of cash grants on IGAs.</li> </ul>

Cash grants in income generation activities' was one of the components in the multi-sector IRP response. By March 2013, PRCS supported by IFRC distributed conditional cash grants to 4,412 families against 5,000 planned to support the recovery of livelihoods of flood affected families. Under the IRP framework, the programme activity was implemented by the PRCS with technical and financial support provided by IFRC. With cash-based programming being a relatively new intervention for the IFRC and PRCS in Pakistan, the framework and development of standard operating procedures (SOPs), guidelines and trainings were undertaken by a team of IFRC livelihood and cash programming experts in consultation with PRCS management and counterparts, with PRCS/IFRC field teams implementing activities jointly.

The main activities of the programme consisted of:

- Selection of potential beneficiaries
- Preparation of a business plan and final beneficiary selection

<sup>29</sup> Income Generation Activities

- Entrepreneurship Development Training (EDT)
- Signing of a business pledge agreement
- Disbursement of cash grant through post office
- Monitoring of cash grant utilisation as per the business pledge agreement
- Impact monitoring of income generation activities

Identification, planning and design of the cash modalities were primarily undertaken at national headquarters level and a tendering process to identify the cash transfer mechanism (CTM) was done. Concepts developed were reviewed in the field through the Thatta pilot project which allowed community feedback on their preference for CTM. The community identified their first choice was hand-to-hand payments, followed by the GPO money order system. IFRC took the responsibility for financial obligations of transferring cash and following the tender process and feedback from the Thatta pilot project.

The MoU with the GPO was signed in June 2011, and activity implementation started on the ground by late August with the beneficiary selection process commencing. Identified beneficiaries were then asked to present their small business enterprise proposal followed by a feasibility analysis to select the final beneficiaries. In November, final beneficiaries were assisted with EDT which was a prerequisite to receive cash instalment. This two-days training course facilitated by external service providers was designed to deliver basic business concepts, concepts of poverty and how to overcome adversity. The first cash grants were distributed in December 2011. The participatory approach ensured a high ownership and success rate as beneficiaries were supported to develop their own business plans.



Livelihoods cash-grant recipient with Donkey Cart Income Generation Project, Punjab province. **Photo:** IFRC.

After the initial disbursement of cash grant worth PKR 20,000 (CHF 200 CHF) in two instalments (each PKR 10,000), it was decided that the remaining batches were provided in one single instalment keeping in view the costs and logistic issues faced by the beneficiaries to collect the funds,

**Table 8: Summary of major livelihoods activities under IRP**

<i>Type of activities</i>	<i>KP</i>	<i>Punjab</i>	<i>Sindh</i>	<i>Total</i>
<b>Assistance provided to beneficiaries to prepare business proposals</b>	1,280	1,280	3,063	5,623
<b>Beneficiaries trained on IGA's</b>	1,274	1,268	2,334	4,876
<b>Complete cash grant disbursement to beneficiaries</b>	1,237	839	2,336	4,412
<b>Monitoring use of cash grants</b>	1,228	837	2,336	4,401

Out of total 4,412 beneficiaries reached with IGA cash grants, 11 beneficiaries from different provinces, could not be traced physically mainly due to seasonal migration. However, the monitoring data below shows a good percentage of cash grant utilisation.

Over 20 different types of income generation activities were carried on by the beneficiaries. Over 80 per cent utilising their cash grant in three main sectors: animal husbandry, retail grocery shops; and agriculture. There are indications of a diversification in the main sources of income as compared to the baseline where the main activities by far were livestock and agriculture.

A monitoring system was established through which each beneficiary was follow-up personally by Livelihoods field staff during the set-up of the enterprise as well as after the receipt of the whole cash grant. Out of a total of 4,412 beneficiaries reached with IGA cash grants, only 11 beneficiaries (0.25 per cent) could not be traced physically for post-distribution monitoring due to seasonal migration. An impact survey carried out in March 2013 amongst 191 households indicates<sup>30</sup>:

- 76 per cent of beneficiary respondents experienced a positive change in income as a result of the cash grants received.

<sup>30</sup> Confidence Level 95per cent. Margin of Error 8per cent. Population sample frame 4,444 recipients.

- 94 per cent of beneficiary respondents utilised their full cash grants solely on their businesses, as per the business pledge agreements prepared and signed.

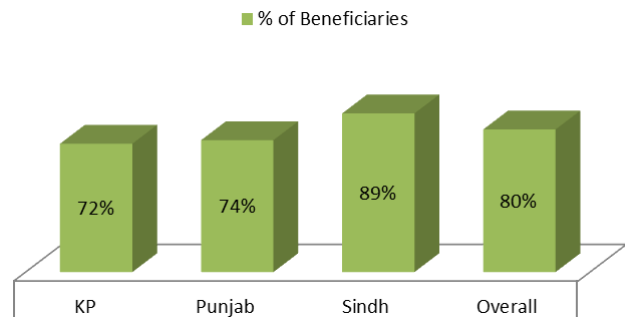
An IRP endline survey amongst 424 families<sup>31</sup> across the three IRP provinces in April 2013 indicated the following regarding livelihoods:

- 25 per cent of interviewed families reported to have enough income to buy food for their family compared to 13 per cent during the baseline in September 2011.
- 62 per cent of families informed they sold excess crops or livestock compared to 21 per cent in the baseline, of these 45 per cent for expenditure on basic needs.

### Challenges

- The achievements in this programme did not come without a number of challenges faced by the field teams. Difficulties were faced when the programme scaled-up from the initial small scale Thatta pilot project to implementation in three provincial branches. The availability of dedicated technical counterpart at PRCS NHQ post great challenges, especially when livelihoods programming was a relatively new intervention in PRCS.
- Whilst the programme monitoring and review reported good immediate impact for the income of the flood affected families, the achievement of sustainable economic security requires on-going behavioural change and investment spanning over a longer period of time. Feedback was received that the cash grant amount was insufficient for the context to provide for a long term and substantial impact to stimulate and grow the local economy.
- Beneficiary purchasing power to replace productive assets was limited due to the low value of the cash grant amount. The amount was set by the National Disaster Management Authority (NDMA) during the relief phase, however the time lapse before the initiation of the recovery programme contributed to the amount did not reflect market value at the time of implementation. There was a high inflation rate in the period immediately following the floods. This influenced the type of business selected and discouraged beneficiaries without means to propose a business that would have enabled more profitability and gain. The two instalment distribution system in the beginning also affected effective decision making of the beneficiaries on the types of livelihoods they would pursue.
- The Enterprise Development Training (EDT) required some adjustments to better meet their audience and needs of the beneficiaries of the IGA. The presentation methods and message modalities were not always optimally designed for the low literacy levels of the target population which reduced the effectiveness of the trainings and some key messages were lost and not implemented into the businesses. Although the trainings were beneficial and an important component of the success of the programme, greater local contextualisation and a slower pace of the content of the trainings was also recommended. Respondents identified a need for vocational training, particularly in agronomy and animal husbandry.
- While some of these are specific to the cash modality, it is important to note that the other challenges such as the beneficiary selection process or training component are independent of the decision to use cash over in-kind inputs. There is a perception that cash could have been a motivator for misconduct in the programme; however as the vast experience of RCRC programming can testify, personal motivation influences beneficiary selection regardless of what type of assistance is being offered.
- The primary cash transfer mechanism of the General Post Office (GPO) money order system was impractical for the speed required for efficient delivery of the cash grants, and prevented the programme from being implemented in a timely and cohesive manner. Design of this system did not achieve the expected outcome in the interior regions of Pakistan. The expected seven-day turnaround did not happen. On average KP experienced 40 days till distribution, Punjab 25 days, and Sindh 37 days. The GPO was not able to comply with the agreed conditions and the RCRC had no real leverage to hold the GPO accountable for the poor service and extensive delays. Nevertheless all transfers arrived as per planned. Alternative services such as banks were looked at but it was considered that changing the set-up of the system was a risk and could not guarantee better and speedier results.
- High turnover of human resources was detrimental to the programme, with staffing gaps, and loss of technical knowledge – adding to the delay in programme implementation. Volunteer retention has also been an issue,

**Figure 2: Utilisation of cash transfer (PKR 20,000)**



<sup>31</sup> IRP Endline Survey: Confidence Interval 95per cent. Margin Error 5per cent. Population Sample Frame 19,867 families.

with a high turnover evident. Volunteers at times were engaged on a daily labour bases, not necessarily in the spirit of volunteerism.

- Multiple layers of management and a vertical structure have impacted on the timely delivery of the programme. With a centralised approach in the National Society, information sharing, reporting and transfer of operating costs was consistently delayed. Requests from the field must go through multiple layers of approval before reaching its intended audience for action.

## 6. 2010 Floods: Disaster Preparedness (DP) and Disaster Risk Reduction (DRR) - IRP

<b>Outcome: Increased resilience of individuals and communities by reducing their vulnerability to recurrent disasters.</b>	
<b>Outputs (expected results)</b>	<b>Activities planned</b>
<b>PRCS's capacity increased to carry out disaster risk reduction (DRR) preparedness and response actions.</b>	<ul style="list-style-type: none"> <li>• Conduct integrated recovery programme orientation workshops in Sindh, Punjab and KP provinces.</li> <li>• Conduct social mobilization training for volunteers.</li> <li>• Conduct lessons learnt workshop for the floods operation.</li> <li>• Organize bi-annual programme review meeting at national headquarters level</li> </ul>
<b>Targeted floods affected communities in KP, Punjab and Sindh provinces are prepared to respond to prevalent disaster.</b>	<ul style="list-style-type: none"> <li>• Conduct Vulnerability capacity assessment (VCA) in targeted areas.</li> <li>• Identify vulnerable communities in floods affected areas of KP, Punjab and Sindh provinces.</li> <li>• Mobilise communities and establish village committees in the six districts.</li> <li>• Conduct recovery programme orientation (including beneficiary selection criteria), sessions for Village Committees</li> <li>• Conduct community based disaster risk reduction (CBDRR) trainings for village committees.</li> <li>• Develop consolidated community action plans in consultation with Village Committees.</li> <li>• Carry out DRR awareness campaign at school and community level (including IEC material).</li> <li>• Conduct simulations of risk reduction plans and ensure revision of these plans.</li> <li>• Develop village disaster risk management plans (VDRMPs) in consonance with local government plans.</li> </ul>
<b>Targeted floods-affected communities in KP, Punjab and Sindh Provinces have taken mitigation measures to lessen the adverse impact future disasters.</b>	<ul style="list-style-type: none"> <li>• Support the village organisations/village committees (VO/VC's) in 43 communities to identify Micro Mitigation Projects (MMP's).</li> <li>• Provide technical support for the feasibility study of identified MMP's.</li> <li>• Support VOs/VCs in Joint bank Account opening.</li> <li>• Support VO's/VC's in implementation of MMP's.</li> </ul>

According to the NDMA, approximately 50 per cent of the affected districts by the 2010 floods are exposed to regular monsoon flooding and will remain in all likelihood vulnerable to such flooding in the future. Keeping this in view, the strengthening of the existing and establishment of additional PRCS DM cells was the focus to meet the scale of the current and future disasters. Mainstreaming of DRR required support not just from IFRC, but all RCRC actors, with PNS also engaged to ensure common approaches to community-based programming and risk reduction, drawing upon on-going PRCS experiences and approaches, as well as South Asia Regional DRR programming and capacities.

An urgent need was identified for the reinforcement of the capacity of the PRCS DM cells in the districts which would support the implementation of standardized assessment, planning and mainstreaming of DRR into sectorial activities as also proposed by TPAT findings. The enhancement of the PRCS DM cell network was also in line with the overall needs related to the PRCS's disaster preparedness capacity building, and their capacity to support communities and families to better cope with future shocks.

**Table 9: Summary of Village Committees (VCs) in IRP**

<i>Type of activities</i>	<i>KP</i>	<i>Punjab</i>	<i>Sindh</i>	<i>Total</i>
<b>Total no. of VCs</b>	10	15	39	64
<b>No. of male VC members</b>	90	135	340	565
<b>No. of female VC members</b>	0	0	226	226
<b>Total no. of VC members</b>	90	135	566	791

DP-DRR on one side has a cross-cutting approach and objective to all other sectors under the IRP, while on the other side specific community level DRR interventions were implemented, designed to build the capacities and develop resilient communities.

**Table 10: Summary of MMP project in Shangla and Kohistan districts**

<i>District</i>	<i>MMP project name</i>	<i>No. of direct beneficiaries</i>
<b>Shangla</b>	Rehabilitation and pavement of Landi link road	1,200 households (8,400 persons)
	Rehabilitation of Borshat suspension bridge and pavement of bridge path	900 households (6,300 persons)
<b>Kohistan</b>	Rehabilitation of Aleel irrigation Channel	750 households (5,250 persons)
	Thothi Suspension bridge	4,000 households (28,000 persons)
	Rehabilitation of Kotgal irrigation channel	30 households (210 persons)

The planning stage started with a VCA conducted in December 2010, and subsequently the DRR unit organized joint IRP orientation sessions for the staff from June-July 2011 in the three IRP provinces of KP, Punjab and Sindh. Community mobilisation for the formation of Village Committees (VC) was conducted in August 2011 in all 39 revenue communities, with 22 to 25 members in each committee. Terms of Partnership (ToP) between PRCS district branches and VCs were signed in September-October 2011. Later with the expansion of villages in Sindh, an additional 25 VCs were formed. Community Mobilisation training for IRP team members was conducted in July-August 2011 for a total of 58 participants (43 male, 15 female).



A before and after view of a suspension bridge MMP, Thothi, Kohistan district, KP province. **Photo:** IFRC.

Beneficiary selection for the various sector interventions was done with the support of the Disaster Management Manager (DMM) - Disaster Management Officer (DMO) & Social mobilizers - and VC's from October 2011 to May 2012.

Three days of Community Based Disaster Risk Reduction (CBDRR) trainings were conducted for VCs by DMOs and social mobilisers in Sindh and KP only (March-April 2012) at Union Council (UC) level. As DP-DRR activities were cancelled in Punjab in February 2012 after decision to review the implementation modality of the programmes without VC's in response to identified irregularities and on-going investigations connected with the selection of beneficiaries.

In the first quarter of 2012, the micro-mitigation projects (MMP), with a main objective of the rehabilitation of damaged communal infrastructure such as irrigation channels, culverts, bricks pavement and suspension bridges, whilst creating

short-term labour and employment opportunities, as well as supporting access to markets or communal livelihoods initiatives.

Four Village Disaster Risk Management Plans (VDRMPs) were developed in KP only at 4 UC level, including the inputs from 10 villages through their VCs during April 2012, and technically supported by the field staff. The VDRMPs were a prerequisite for the identification of MMPs, after the formation of VCs and CBDRR trainings had been completed.

Against an initial 43 MMPs planned<sup>32</sup>, only 15 MMPs were identified in KP, with 10 of these completing the feasibility study due to time constraints associated with the required steps for opening of joint VC and PRCS district branch bank accounts envisaged initially to transfer money for project implementation. However, due to considerations with this envisaged process, a new agreed finance transfer mechanism was approved and implemented whereby IFRC dealt with the procurements instead of transferring funds to PRCS. Procurements were undertaken at the central level in Islamabad, for materials such as pipelines for irrigation channels and turbine pumps, whereas small scale procurements were carried out locally through the field offices with the support of IFRC procurement department.

**Table 11: Summary of beneficiaries reached through DRR campaigns**

Activities	Sindh						KP
	KSK			Shikarpur			Shangla
	Male	Female	Children	Male	Female	Children	Children
Tournament	208	82		255		275	
Community session	244	172		373	182	119	
School session			520			230	600
Evacuation drill	108	152	89	116	160	180	
<b>Total</b>	<b>560</b>	<b>406</b>	<b>609</b>	<b>744</b>	<b>342</b>	<b>804</b>	<b>600</b>

In October 2012, reviewing the progress against the remaining timeframe of the operation, it was agreed that the final achievable number of projects would only be six MMPs in KP. By the end of March 2013, a total of five MMPs were actually finally completed (three in Kohistan, two in Shangla). These projects include the construction and rehabilitation of two bridges, two irrigation channels and rehabilitation of a link road. The 6<sup>th</sup> MMP in Gushali (Kohistan) was withdrawn due to disagreement within the community regarding the site selection. The Hydral-generator procured for this project has been handed over to PRCS. Handover documentation for the five completed MMPs in KP to communities has been completed.

Sindh MMPs were cancelled all-together in November 2012 due to insufficient progress in order to complete implementation before IRP closure (planned 33, as the original Punjab target was added to Sindh).

Under DRR campaigns, materials were developed at the national level in consultation with provincial branches to ensure relevance and cultural context. This was followed by orientation sessions for volunteers in the districts of KSK and Shikarpur (Sindh) in January 2013, with DRR campaign launch ceremonies in the same month. In KP, an orientation session for volunteers was conducted in Shangla district for 18 volunteers along with a cricket tournament. The purpose of the session was to raise awareness amongst the volunteers and students on how to act and react during emergencies.

A total of 10 DRR community awareness sessions were conducted in KSK of Sindh covering four villages (416 participants) and 18 in Shikarpur covering nine villages (671 participants), together reaching a total of 1,087 participants. Three DRR awareness sessions were conducted in schools in KSK for 520 school students (ages between 6-12 years) with 344 school kits distributed. Two school sessions were also conducted in Shikarpur district for 230 students with 230



'Snakes & Ladders' DRR Campaign with school girls in Shikarpur district, Sindh province. Photo: IFRC.

<sup>32</sup> Initial plan was 10 KP, 15 Punjab and 18 in Sindh. After cancellation of DP-DRR component in Punjab, the target for Sindh was revised to 33.



school kits distributed. Also, 600 children (male and female) were reached in ten schools with such awareness sessions. Similarly, eight evacuation drills were conducted (four each in KSK and Shikarpur) reaching a total of 224 males, 312 females and 269 children.

An IRP endline survey amongst 424 families<sup>33</sup> across the three IRP provinces in April 2013 indicated the following regarding DRR:

- 58 per cent of respondent families reported to know how to protect their families from the next disaster compared to 47 per cent during the baseline in September 2011.
- 61 per cent of the respondents indicated to be prepared for the next floods compared to 59 per cent in the baseline.
- 83 per cent of families reported to have access to early warning systems compared 29 per cent in the baseline.

An evaluation was commissioned of the village committees mobilisation process under the IRP programme in March 2013, some key highlights included:

- The given community mobilization process was followed in Sindh, whereas some adjustments were made in KP, both functioning as support and link for the programmes with the assisted communities. However in Punjab issues arose with the committee formation which led to irregularities in the beneficiary registration process, resulting in the disbandment of the village committees and a full re-verification and re-registration exercise.
- The given community mobilization process was not sufficiently adaptive to adequately include the different social and cultural norms of the three very diverse provinces under the IRP, and recommended reviewing the guidelines.
- The gender representation in the community mobilization process could have been strengthened, despite the cultural norms of the regions assisted. Female community mobilizers were only recruited in Sindh, however were not active participants.
- The IRP was noted as having had a great impact upon building the PRCS experiences in terms of community mobilization processes. The communities reported a good rapport and relationship with the PRCS.

## Challenges

- Delays in disaster management engagement and support for the DRR component of the IRP (which included the critical establishment and orientation of village committees) accumulated from early 2011. Changes in PRCS senior management and internal re-organisation processes in late 2011-early 2012, as well as response operations for those affected by the floods 2011, affected the initiation of DRR activities under IRP. Similarly, later in 2012 the new monsoon floods impacted the implementation rate of DRR activities due to involvement of the DM unit at national and provincial levels with the response operation activities delaying DRR activities initiation, such as the recruitment, training and placement of community mobilisers.
- The VCA carried out in December 2010-January 2011 soon after the relief phase suffered due to insufficient and unskilled human resources including volunteers and staff, along with inundated areas resulted in inappropriate and missing information, having to rely on secondary data. The results impacted on the actual implementation of the IRP as planning were done based on these VCA data.
- The agreed staff structure for the planned activities were not fully filled at the field level, whilst filled positions did not always optimally meet the job description and requirements, with under experienced staff affecting and delaying programme activities.
- Ideally for community based projects a minimum period of six months are required for community mobilization, organisation and mobilization, but under the IRP mobilisation all took place within a period of one month.
- Development of Community Action Plans in consultation with VCs could not be completed. As soon after the hiring of IRP staff and their orientation, each sector commenced their own sectorial interventions independently as they were under pressure with the delayed timeframe to complete activities on time.
- Despite a well-intentioned concept, the way VCs were established was not fully transparent in all areas, with members abusing the power entrusted to them. This resulted in the need to undertake a beneficiary re-verification process in Punjab province which placed a burden on available resources and impacted upon the timely delivery of the programme, as well as the cancelling of projects in Layyah district in September 2012.
- Activities related to MMPs were also affected due to the delay in reaching consensus between NHQ and provincial branches on implementation modalities, which in turn delayed the CBDRR trainings component, and finally resulting in no MMPs undertaken in Sindh and only five completed in KP. The non-extension of the contract of the DM Manager in KP at a critical time (late 2012) had a great impact on the planned activities.

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<sup>33</sup> IRP Endline Survey: Confidence Interval 95 per cent. Margin Error 5 per cent. Population Sample Frame 19,867 families.

## 7. Beneficiary Communications and Accountability (BCA)

<b>Outcome: Improved lives of those affected by the floods through the provision of timely, relevant and accurate information.</b>	
<b>Outputs (expected results)</b>	<b>Activities planned</b>
<b>Developed mechanism and system that allow the IFRC/PRCS to effectively communicate with disaster-affected community members in Pakistan.</b>	<ul style="list-style-type: none"> <li>• Negotiate and process contract agreements with local telecommunication, Radio, TV and print providers in Pakistan. BCA field officers manage information received through SMS by assisting directly with facilitation, resolution and advocacy for both individual and community issues.</li> <li>• Develop IFRC/PRCS print materials to allow more efficient layout, distribution and expansion of readers for specific sector needs.</li> <li>• Develop radio shows to communicate to flood affected beneficiaries.</li> </ul>
<b>An environment for transparency and accountability between flood-affected communities and the PRCS/IFRC is in place.</b>	<ul style="list-style-type: none"> <li>• Establish and provide two-way communication services to allow feedback through radio broadcast.</li> <li>• Establish and provide two-way communication services to allow feedback through print material.</li> <li>• Carry out monitoring field visits to the affected communities.</li> </ul>
<b>Necessary infrastructure and guidelines to sustain the delivery of BCA interventions within the PRCS/IFRC structure is in place.</b>	<ul style="list-style-type: none"> <li>• Develop standardised job descriptions and SOPs.</li> <li>• Disseminate BCA tools and objectives to PRCS and other internal stakeholders via video documentary.</li> <li>• PRCS staff members and volunteers are trained on all aspects of BCA at provincial level.</li> <li>• Conduct a BCA mentorship programme for volunteer to improve their capacity.</li> <li>• BCA representatives attend meetings and build partnership with local, regional and international communication groups including the Communicating with Disaster Affected Communities (CDAC) working group, EIS, USAHIDI and local media outlets.</li> </ul>
<b>To increase the accountability of the PRCS at the national and provincial level in handling complaints on their humanitarian interventions.</b>	<ul style="list-style-type: none"> <li>• Facilitate the provision of guidelines to PRCS on dealing with complaints concerning quality, quantity and accountability of their work.</li> <li>• Provide technical support in the development of PRCS TOR for the complaints mechanism and defining the role of the complaints committee.</li> <li>• Support PRCS in developing IEC materials and complaints forms for use by communities so they understand the purpose of the CHC and how to use it.</li> <li>• Carry out community orientation/awareness sessions on how the feedback mechanism works.</li> <li>• Provide technical support in the production of radio programmes that include segments that increase understanding of accountability with in the RC/RC Movement and the community.</li> <li>• Develop and roll-out a database to PRCS NHQ that assists in the management of data on complaints.</li> </ul>

Beneficiary communication or two-way communication aims to integrate beneficiary feedback into the decision making process of programmes. With the provision of timely, relevant and accurate information and support, an environment of transparency and accountability is fostered.

Beneficiary communication and accountability (BCA) was launched for the first time in Pakistan in response to the floods 2010, initially with a team of volunteers headed by a BCA Delegate. A pilot of 15 radio shows on Pakistan Radio Station FM 101 and seven TV talk shows on Pakistan Television PTV named “Awaz-e-Agahi” (Voice of Awareness) were aired in 2010-11, covering topics related to health, shelter, livelihoods, WatSan and DM. Also a documentary on BCA activities in PRCS Pakistan was produced. The pilot was successfully concluded in March 2011.

A Comment Handling Cell (personal response) was established during the floods 2011 at PRCS NHQ level to ensure transparency in the provision of services to beneficiaries. Comments, complaints and suggestions raised by beneficiaries through different mediums were received and feedback was provided accordingly.

In 2012, the programme was extended to the provincial level with designated project based staff and volunteers to ensure efficient implementation of on ground BCA activities.

Among the different modalities employed for collecting feedback from beneficiaries, a pilot of distribution of 2,000 post-cards (1000 each in Sindh and KP) was launched, with 500 responses received throughout the lifespan of the operation. People valued face-to-face and oral communication most due to low literacy rates and lack of resources. Thus extensive face-to-face interactions through local volunteers and provincial BCA officers were also maintained with approximately 505 sessions and approximately 11,988 participants across the IRP assisted communities.

A total of 56 community notice boards (Punjab 15, Sindh 29, and KP 12), along with suggestion boxes, were placed in IRP assisted communities. IRP sectorial information posted on these notice boards were in local and national languages (Sindhi in Sindh and Urdu in Punjab and KP) including programme selection criteria, beneficiary and village committee member's lists, information posters and pamphlets on safe shelter construction awareness and process, WatSan PHAST topics, livelihoods income generation programme steps and cash instalments mechanisms, as well as beneficiary feedback channels. In total, 662 comments were received via suggestion boxes.



BCA officer posting hygiene promotion and safe shelter brochures on a community noticeboard (with feedback box), Punjab province. **Photo:** IFRC.

Another important feature of the programme was the development of programme information and education communications materials (IEC) for beneficiaries taking into consideration their concerns, needs, language preferences and literacy rates. These IEC materials utilising different graphics were produced at NHQ level by the BCA NHQ team with assistance of sectorial teams and field staff to ensure the inclusion of appropriate key messages and pictures. IEC material developed for different programme components included WatSan posters covering 11 different topics as part of the hygiene promotion activities; and brochures in local languages orienting on the shelter and livelihoods programme steps and regulations, which were received very well by the communities.



Two-way communication between BCA volunteers and an IRP shelter beneficiary, Sindh province. **Photo:** IFRC.

The BCA team also compiled seven success stories related to shelter, WatSan and BCA mediums and interventions at provincial levels.

An IRP endline survey amongst 424 families<sup>34</sup> across the three IRP provinces in April 2013 indicated the following regarding BCA:

- Approximately 40 per cent of respondents provided feedback on PRCS services
- Where Community Notice Boards and feedback boxes were placed, 77 per cent provided feedback on PRCS compared to 23 per cent where there were none installed.
- In the event of another disaster, the respondents stated a preference to receive information messages via the following mediums: 24 per cent mobile phone, 21 per cent face-to-face, 19 per cent loudspeakers, 15 per cent radio, 14 per cent TV, 4 per cent community notice boards, 2 per cent newspapers (*up to three answers permitted per respondent*).

A recent review of BCA in June 2013 indicates:

- A dedicated BCA team with shared values and a willingness to overcome challenges in order to deliver on the mandate, with support of the concept of BCA among the beneficiary communication, program and management staff.
- Good, professional IEC materials that seem to be very appreciated by communities. In communities in which notice boards were installed, the understanding of IEC material was almost twice as high as in communities without notice boards. This was corroborated by findings of the IRP end-line survey respondents stated that

<sup>34</sup> IRP Endline Survey: Confidence Interval 95per cent. Margin Error 5per cent. Population Sample Frame 19,867 families.

the sketches were understandable; however the use of Urdu in certain areas of KP for written communication may need to be revisited.

- High level of appreciation among community members for the communication efforts and feedback process, for the majority of which this was the first experience of its kind.

### Challenges

- The concept of BCA is complex and fairly new in PRCS and IFRC, requiring consistent technical assistance, management support and acceptance. Lack of common understanding and strategic direction of the programme lead to the suspension of the programme twice by PRCS. PRCS and IFRC continue to make efforts in the implementation and integration of BCA activities into regular programming as a cross-cutting area. The PRCS is in process of setting up a BCA unit in the PRCS NHQ core structure, taking over the up till now seconded staff from IFRC. The development of a longer-term BCA development and integration strategy for the PRCS would provide the framework, with the LTPF continuing to support the BCA activities in the PRCS.

## 8. Capacity Development and Organisational Strengthening

<b>Outcome: The capacity of PRCS to carry out recovery service-delivery through local branch structure is strengthened in line with IFRC standards CWFNS<sup>35</sup> and WPNS<sup>36</sup> and consistent with PRCS longer-term development strategies.</b>	
<b>Outputs (expected results)</b>	<b>Activities Planned</b>
<b>PRCS district branch structure is strengthened to carry out integrated recovery activities in target provinces.</b>	<ul style="list-style-type: none"> <li>• Renovate Shikarpur office in Sindh province and renting appropriate office space in three target districts. Recruit branch secretaries and support staff in two target districts in Sindh.</li> <li>• Secure, furnish and equip offices in four target districts.</li> <li>• District branch leadership coordinate and monitor service delivery and development activities.</li> <li>• District executive committee hold quarterly meetings</li> <li>• Scoping visits in three provinces by IFRC technical support and PRCS OD staff.</li> <li>• Conduct branch development orientation workshops in three targeted provinces.</li> <li>• Facilitate branch development needs assessment and development of BD plans in targeted districts.</li> <li>• PRCS PHQs in two provinces organise District Capacities mapping in every district, with IFRC technical support.</li> <li>• PRCS PHQs in two provinces complete provincial-level branch development needs assessment and draft branch development plans through a participatory process with all districts, with IFRC technical support.</li> <li>• Support visits and targeted capacity-development activities in districts.</li> </ul>
<b>PRCS national level OD support contributes to strengthened district and provincial branch structure.</b>	<ul style="list-style-type: none"> <li>• PRCS OD with IFRC support organises and facilitate branch development orientation workshop at national level.</li> <li>• PRCS convene two OD Working Group meetings with IFRC technical and coaching support.</li> <li>• PRCS OD with IFRC support organise lessons learned activity and document output.</li> <li>• Organise translation and publication of training and reference materials.</li> <li>• PRCS HR department organise and conduct HR training for staff at NHQ and PHQ level.</li> <li>• PRCS marketing and fundraising department organise and conduct training for provincial staff.</li> <li>• PRCS marketing and fundraising departments with provincial leadership</li> </ul>

<sup>35</sup> CWFNS = Characteristics of a Well-Functioning National Society

<sup>36</sup> WPNS = Well-Prepared National Society

	<p>facilitate exchange visits for resource mobilisation.</p> <ul style="list-style-type: none"> <li>• PRCS marketing and fundraising departments facilitate organisation of a skill share workshop.</li> <li>• PRCS communications department organise and facilitate training for PHQ in communications.</li> <li>• PRCS marketing and fundraising departments facilitate and provide coaching for branch fundraising events, with IFRC tech support.</li> </ul>
<p><b>Developed and sustainable motivated, organized and well-trained youth and volunteer corps of 500,000, representing all segments of society to effectively and efficiently participate in PRCS programmes and operations.</b></p>	<ul style="list-style-type: none"> <li>• PRCS recruit youth and volunteer (Y&amp;V) staff for district support.(Two in Sindh, two in Punjab, one in KP)</li> <li>• Y&amp;V department, provincial and district managers support district youth conventions in three provinces.</li> <li>• Y&amp;V staff members participate in international development activities.</li> <li>• PRCS Y&amp;V department manage volunteer database maintenance.</li> <li>• PRCS Y&amp;V with provincial managers organise and conduct volunteer induction training.</li> <li>• PRCS Y&amp;V department and NHQ secure volunteer insurance cover.</li> <li>• PRCS Y&amp;V provincial and ‘flying’ staff facilitates and coach setting-up youth and junior clubs in schools and colleges.</li> <li>• Y&amp;V department and provincial leadership coordinate interprovincial youth exchange visits.</li> <li>• Y&amp;V department carry out monitoring and evaluation of Y&amp;V activities.</li> </ul>

Efficient and effective service delivery is not possible without a sound on the ground structure, thus the importance of branch development (BD) can only be reiterated. The BD component of organizational development (OD) has been a focused area of IFRC’s support to the PRCS with the aim of supporting the sustainability of the PRCS

The initial focus of the BD support was on strengthening the existing infrastructure to support the implementation of IRP activities, through which for example the renovation of the office in Sindh as well as the furnishing and equipping of offices in IRP assisted districts was completed by the end of 2011.

IRP provided a significant window of opportunity for the PRCS to build the branch development component, with a particular focus on Sindh and KP provinces through the IRP support. The institutional strengthening was supported by a Branch Development delegate, assisting with the completion of needs and capacity assessments, orientation sessions and supporting the development of the PRCS core branch structures design. In the latter half of 2011, branch development orientation workshops for KP and Sindh were organised, with the completion of capacity mapping exercises focusing on the policies and procedures, minimum HR structure and capacities required for a district branch to deliver regular activities.

The KP province proposed a Branch Development (BD) model<sup>37</sup> that was approved by the KP managing body in September 2012. The model was also presented to the Secretary General of PRCS NHQ during the Strategic Review meeting held in October 2012, which was well received. This proposed model was also circulated to RCRC Movement partners for feedback.

Another accomplishment was the progress towards the strengthening of financial management at provincial and district levels in KP and Sindh, through the agreement on integrated, standardised and systematised financial procedures, also developing capacities to facilitate adhere to minimum financial management mechanisms and controls.

The Provincial branch of KP also managed to organise regular Executive Committee meetings on a quarterly basis, unlike other provinces on a less frequent basis, as an important structure with a longer-term organisational base.

Voluntarism remains the backbone of the RCRC Movement, as such the BD component also focused on strengthening the Youth and Volunteer department by supporting the establishment of a volunteer data base with PRCS, and also succeeded in finalising the active volunteers’ insurance policy in March 2012. Youth as Agents for Behavioural Change (YABC) peer education training initially planned for the third quarter of 2012 was completed in January 2013.

<sup>37</sup> Minimum branch structure i.e. area/ space, HR, equipment required etc.

An internal review of the Branch Development component of the IRP was conducted in June 2013, with the following recommendations:

- Organizational assessments to be undertaken at the beginning of all disasters or project interventions to identify structural requirements early and build upon the strengths and weaknesses within the systems, for both the NS and the IFRC Delegation.
- Prior to recruiting technical staff, there needs to be a clear strategic framework and implementation plan for the operation, from which specific job descriptions can be developed.
- Future BD support in large scale disasters need to focus on capacity building to meet immediate needs in providing timely interventions.

### Challenges

- With the top priority of the National Society on sustainability, per the Strategic Review meeting held of October 2012, the areas of marketing and fundraising, branch development, organisational development and Youth & Volunteers of National Society require a continued substantial support and development, building upon the experiences gained from the last few years of operations. Support for the PRCS development of these areas will be continued under the LTPF.
- Furthermore, creative ways need to be found to provide an environment to encourage active female participation and foster enhanced volunteerism, an essential pathway to providing access to women which in certain areas of the Pakistani society restricts, to ensure their access to services and inclusion of their feed-back in programme planning.



PRCS Volunteers from different regions of the country celebrating the annual Youth and Volunteer Camp of 2011 at NHQ. **Photo:** PRCS.

## 2. Floods 2012 Response

In August 2012 Pakistan experienced renewed flooding resulting from seasonal monsoon rainfall, affecting over 4.8 million people across the country, particularly in Punjab, Sindh, Baluchistan provinces and AJK State. Many of the affected districts, particularly in Baluchistan and Sindh, were already struggling to recover from the floods of 2010 and 2011.

The PRCS commenced local disaster response immediately after the first monsoon rains with assessment and relief distributions. PRCS branches identified the major needs to be food, NFIs, safe drinking water, and health and care services. The PRCS initially planned to assist 7,500 families (52,500 persons) across the three provinces of Sindh, Punjab and Baluchistan with food, NFIs including emergency shelter, safe drinking water, and health and care services. However in view of the continued critical needs and the large flood affected population, the food assistance component was raised first to 27,700 and subsequently to 30,218 families (211,526 persons).

The Government of Pakistan did not launch an international appeal, and agencies and organisations in-country had to find alternative solutions to provide necessary assistance. In view of the available funds under the on-going 2010 Floods Appeal (MDRPK006), a project agreement worth CHF 1,650,000 was signed between PRCS and IFRC to facilitate this support, USAID contributed to the operation with support for the costs of procurement, transportation and distribution of 20,000 food parcels as well as the costs for transportation and distribution of the NFI stocks. In addition, the running costs for operating five water treatment plants and six mobile health units were also supported by IFRC, as well as for the replenishment of emergency medicines stocks used for the operation.

The floods 2012 operation under MDRPK006 was closed on the 31st of January 2013. A total of seven information bulletins related to this operation were posted on IFRC public web.

Nearly 100 PRCS volunteers at any one time were involved in the floods response from an available pool of 1,137 active volunteers in the affected districts<sup>38</sup>. These were deployed on a rotation basis under the floods response operation for disaster management (DM), medical services, disease prevention and control, psycho-social support, and WatSan activities.

<b>Outcome:</b> Reduced adverse impacts upon food security, health and care, and basic household needs of 2012 flood affected families through Red Cross Red Crescent support.		
<b>Outputs (expected results)</b>	<b>Activities planned</b>	<b>Achieved</b>
<b>Food:</b>		
The immediate needs of flood affected families are met through the distribution of food.	Purchase, transportation and distribution of a two-week mixed food commodities package to 20,000 families (140,000 persons) in three provinces (4,500 Sindh, 10,500 Punjab and 5,000 Baluchistan).	20,000 food packets were distributed. (4,500 Punjab, 10,500 Sindh and 5,000 Baluchistan). Each of these 53kg food packs catered for a family of seven for two weeks and contained 20kg flour, 10kg rice, 5kg split chickpeas, 4kg lentils, 2kg dates, 3kg ghee, 6kg sugar, 1,5kg tea and 1,5kg of pasteurised milk.
The essential household needs of flood-affected families are met.	Transportation and distribution of non-food items (NFIs) to 7,500 families (52,500 persons) in three provinces (2,500 Sindh, 2,500 Punjab and 2,500 Baluchistan).	6,943 families were reached with a mixture of non-food items. (2,000 families in Punjab, 2,355 in Sindh, 2,400 in Baluchistan and 188 in AJK).
<b>Health and Care:</b>		
The immediate health and care needs of flood affected families are met.	Basic package of health and care services are provided through four mobile health units (MHUs) in flood affected areas (for two months) to 75,000 persons in three provinces (01 Sindh, 02 Punjab and 01 Baluchistan).	Four mobile health units were established across the three provinces worst affected by the floods, three in Sindh and one in Baluchistan. These MHUs facilitated 97,999 persons with basic health and care services and awareness promotion session. <ul style="list-style-type: none"> <li>- 75,110 in Sindh</li> <li>- 6,534 in Punjab</li> <li>- 16,355 in Baluchistan</li> </ul>
<b>Water and Sanitation:</b>		
Improved access of flood affected persons to adequate safe drinking water and basic hygiene awareness.	Provision of safe drinking water through six mobile water units (for one month) and hygiene promotion in Sindh and Punjab provinces, and (for three months) in Baluchistan, to reach 72,000 persons.	Six mobile water units were deployed (one in Sindh, two in Punjab and three in Baluchistan). The IFRC budget covered all installation and running costs including transportation of the water to the different locations/distribution points <sup>39</sup> . Overall the mobile water units produced 17,903,000 <sup>40</sup> litres of safe drinking water in three provinces and on average provided water to approximate 42,000 daily persons over a period of 42 days (assuming an average of 10 litres per person each day. By the end of December 2012 all units had ceased operations.

### Progress towards outcomes

The IFRC country office supported PRCS's floods response activities from resources available in-country and support from partners. Funds from the 2010 flood operation (MDRPK006) were utilised to cover the cost of this operation. A

<sup>38</sup> 105 in Punjab, 737 in Sindh and 295 in Balochistan province.

<sup>39</sup> It should be noted that other organisations were involved in providing for water needs. In some cases the water produced by the PRCS/IFRC units was transported by tankers provided by the government or other organisation

<sup>40</sup> This figure does not account for water lost due to leakage/ spillage or during distribution.

project agreement worth CHF 1,650,000 was signed between PRCS and IFRC to assist 20,000 families (140,000 people) out of a total of 30,218 families planned by PRCS. The support included the coverage of costs of procurement, transportation and distribution of food parcels and the costs for transportation and distribution for NFI stocks. In addition, the running costs for operating five water treatment plants and five mobile health units were also supported through IFRC, as well as the replenishment of emergency medicines stocks.

**Table 12: Summary of support provided to the PRCS<sup>41</sup> response through IFRC**

<i>Items</i> <sup>42</sup>	<i>Total</i>
<b>Food Packs (53kg)</b> <sup>43</sup>	30,218 families (211,526 persons)
<b>Non-food items (NFIs)</b>	6,943 families (48,601 persons)
<b>Health Units and Patients</b>	97,999 persons
<b>Water treatment plants deployed</b>	42,000 persons daily

A joint PRCS/IFRC monitoring mission was deployed from the NHQ to the provinces in October 2012, with teams visiting sampled sites from three floods affected provinces of Punjab, Sindh and Baluchistan where PRCS responded for the 2012 operation. The teams provided operational support to provincial response teams, monitored the distribution process and documented good practices, meeting beneficiaries and PRCS field staff and volunteers, Key findings include:

- Beneficiary feedback was positive overall on the PRCS activities during the floods 2012 operation; however, needs on the ground outweighed available resources at times.
- Some beneficiaries in Punjab and Baluchistan requested that PRCS increase the quantity of relief items according to the actual family size. (*A standard food parcel for a family of 7 for 2-weeks is given to each family irrespective of the family size which is a disadvantage for larger families and an advantage for smaller ones*)
- There were few or no national, international or government actors found working in the relief operational areas targeted by PRCS. In most cases, PRCS was the only organisation providing services at the time.
- NFI distributions were done in accordance to need and availability, not always following the full NFI kit guidance. This feedback has been taken into account in the preparation of the 2013 PRCS Monsoon Contingency Plan.

### 3. Humanitarian Diplomacy (HD)/ Communications – Advocacy and Public Information

#### **Humanitarian Diplomacy**

In line with the IFRC Humanitarian Diplomacy Policy, humanitarian diplomacy (HD) efforts in Pakistan have aimed at enhancing and further developing the work of the PRCS and the IFRC, when it comes to persuading decision makers and opinion leaders to act, at all times, in the interest of vulnerable people, and with full respect for fundamental humanitarian principles.

In reference to the 2010 Floods Operation, the following achievements and progress has been seen:

#### *Helping the landless*

As a result of humanitarian diplomacy efforts, a total of 943 landless farmers and their families were granted the right to occupy their newly-constructed shelters and to cultivate the land on which the shelters stand, for five years. This effort involved persuading landlords to enter into legal agreements with their tenants (the landless farmers who lived on and cultivated land which they had no claim to), allowing the latter to occupy the shelters built by PRCS, for five years.

The impact of this achievement is significant in that landless farmers represented a particularly vulnerable group of people in need, in view of the fact that their landlessness was linked to a situation of bonded labour which has trapped families for generations. The 2010 floods had destroyed or damaged the mud houses of landless farmers, had made these farmers and their families all the more vulnerable as some landowners had refused to allow the farmers to return, thus leaving them without shelter and livelihood.

<sup>41</sup> Assistance from other donors (PNS and Private) for Floods 2012 can be accessed through <http://www.ifrc.org/docs/Appeals/10/MDRPK006REA13.pdf>

<sup>42</sup> Standard NFI Set guide = one tent, one hygiene kit, two tarpaulin sheets, three blankets, one kitchen set, two jerry cans, two mosquito nets.

<sup>43</sup> Each standard food pack would contain 20kg flour, 12kg rice, 5kg chickpeas, 4kg lentils, 3kg oil/ghee, 6kg sugar, 1,5kg tea and 1,5kg of pasteurised milk. There may have been some variations depending on availability of commodities.



As such, the initiative by VCs and PRCS (with IFRC support) to persuade landowners to enter into legal agreements with their tenants (i.e. landless farmers), has served as a plausible solution to the dilemma faced as to how to assist landless communities. This solution has provided farmers with shelter for at least five years.

The 943 landless farmers and their families assisted comprise 37 per cent of the 2,534 families identified as eligible for shelter assistance. These families reside in the provinces of Sindh and Punjab. Of the 943 landless families assisted, 911 families (97 per cent) are in Sindh province where the incidence of landlessness was found to be greater, while the remaining 32 are in Punjab province.

#### *National Society's embrace of Humanitarian Diplomacy*

It has been heartening to note that the PRCS has acknowledged and indeed embraced the role and effectiveness of humanitarian diplomacy – one case in point being the considerable effort taken to assist landless farmers (described above).

In addition, the National Society has taken the initiative to mainstream Humanitarian Diplomacy in its work and in the mind sets of staff and volunteers, by including a mandatory session on HD in all programme workshops. Other efforts undertaken by PRCS in this connection include six sensitization sessions and two regional/ provincial workshops for PRCS and the media, as well as one national level workshop for PRCS/ IFRC/ ICRC/ RCRC PNS, all of which were held in 2012.



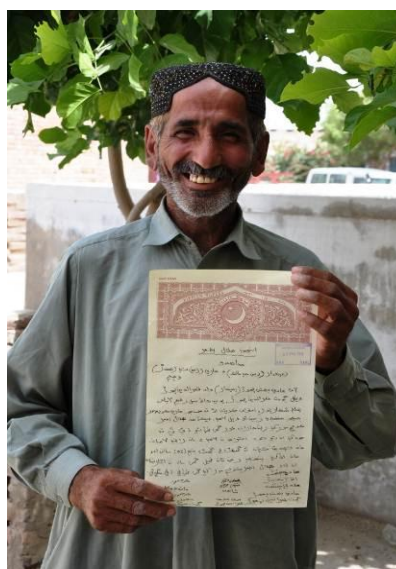
Beneficiary distribution exit monitoring on the quality of food and efficiency process of distribution in district Jaffarabad, Baluchistan Province. **Photo:** PRCS.

#### *International Disaster Response Law (IDRL) project*

It should also be noted that the International Disaster Response Law (IDRL) project, was initiated in November 2010, a few months after the launch of the 2010 floods Operation. The three-phased project seeks to investigate the need to strengthen existing domestic legislation and regulations on disaster response through the application of relevant aspects of IDRL or facilitate the introduction of new relevant legislation, for the purposes of enabling IFRC, RCRC Movement partners and other aid organizations to provide expedient international assistance in the aftermath of significant disasters. At the time of preparation of this final report, efforts are underway to conclude the first phase of the operation comprising the publication of the IDRL review and a meeting with stakeholders.

#### *Communications*

Strong communications support for the first year of the operation was provided in the form of several personnel deployed to the IFRC delegation in Pakistan. These included communications specialists from the Asia Pacific Zone Office, FACT and TPAT, in the first three months of the operation. This was followed by the deployment of a communications delegate who provided vision and guidance to the operation, between October 2010 and September 2011. The combined efforts of these specialists resulted in a significant number of initiatives undertaken in the first year of the operation, targeted at local and global audiences. Highlights of the initiatives comprise:



Abdul Sattar, a previously landless farmer from Sindh province, proudly holds a legal agreement allowing him to occupy a shelter constructed by PRCS for a period of five years. The agreement signed between Abdul Sattar and the landlord (of the land occupied by the former), was facilitated by PRCS with IFRC support, as a humanitarian diplomacy intervention aimed at providing shelter and livelihood security to landless communities affected by the 2010 floods. Photo: Mohammad Usman, **Photo:** IFRC.

- Interviews with a range of international media organizations such as *BBC*, *CNN*, *Al Jazeera*, *CNBC*, *Voice of America*, *The Washington Post*, *International Herald Tribune*, *Radio Berlin*, and *Abu Dhabi TV*.
- The production of nine videos and 20 b-rolls made available on the IFRC website.
- A photo exhibition for the general public, held at the Pakistan National Council of the Arts to commemorate the first year of the operation.
- Press conferences in conjunction with the visits of IFRC Secretary-General Bekele Geleta and IFRC President Tadateru Konoe in August 2010 and October 2010 respectively.
- Web stories featured on the IFRC and PRCS websites.

Communications initiatives conducted in conjunction with the commemoration of the first year of operations also received support from communications personnel from partners such as the British Red Cross and Nepal Red Cross who travelled to Pakistan to work with IFRC and PRCS communications colleagues.

Other initiatives conducted in the successive years of the operation included web stories, articles in IFRC publications such as *Partners in Change*, *AP Voices* and *Recovery Update*, and further videos and b-rolls highlighting the operation.

#### **4. Support Services: Finance, Logistics, HR, PMER & Security**

##### ***i. Finance***

The in-country financial management system of the IFRC delegation at the beginning of the 2010 floods operation was faced with the need for a rapid scaling up to manage the large volume of the operation. In some instances, at the beginning of the operation the programme suffered stoppages due to lack of available funds at the local level, such as timely delivery of key assistance to the affected populations with shutdown of the water and sanitation facilities in some Sindh IDP camps of Larkana district for up to two weeks.

The IFRC Secretariat channels programming funds to the PRCS NHQ, which in turn releases funds to the provincial branches and district operational staff. The process is intended to ensure fiscal control and accountability, a very responsible objective, but was found to be initially too cumbersome to respond to the needs of the emergency response operation. IFRC financial staff and PRCS have made commendable efforts to navigate these delays and blockages to the release of funds, this however has exposed individuals to personal liability issues which had to be corrected. The concern was the small size of the financial departments and the magnitude of the operation, with substantial funds movements. The situation improved with the arrival of a Grants Manager and – in due time – the strengthening of the financial teams.

At the beginning of the operation, the PRCS reporting on Working Advances (WA) was fast but not always of optimal quality. Since then, it has improved dramatically as a result of thorough accompaniment by IFRC with the creation of an in-house monitoring system and checklist for the purposes of establishing minimum requirements for reporting on WA. Another tool created was a monthly WA Reconciliation Sheet to be signed by both IFRC and PRCS budget holders, as well as IFRC and PRCS finance departments.

A significant part of the money flow concerned the cash grants directly for shelter and livelihood programs (4 million CHF). On request of the PRCS this was managed by the IFRC. Through a tender process the General Post Office (GPO) was selected as the service provider to deliver the grants in tranches to the beneficiaries. Although the GPO delivered significantly slower than expected, the financial controls were adequate and no losses occurred during the process.

In 2011 resource mobilisation, including donor liaison and budget/financial decision-making was centralised in-country. Proposals were generated at the country level, with stricter reviews from programmes, including PMER, logs and finance. The IFRC Grants Manager was the focal point in-country for all pledge management, coordinating with management, the relevant units and IFRC zone office, improving the viability of committed funds and streamlining funding support.

##### ***ii. Logistics***

The IFRC logistics department has provided support for the procurement, fleet management, warehousing and transportation throughout the floods 2010 operation. The IFRC fleet, together with security, provided much needed assistance with a large pool of skilled drivers to reach beneficiaries even in the most difficult terrains.

As part of support to PRCS capacity building, the IFRC country office, together with the support of the IFRC zone logistics unit (ZLU), facilitated the coordination and implementation of a two year logistics capacity development project (LCDP). To assess the gaps and needs of the PRCS logistics department, a team comprising of members from the Danish Red Cross (RC), Finnish RC and ZLU-KL visited Pakistan in early 2011. In line with the PRCS Strategy 2011-2015, a Memorandum of Understanding (MoU) was signed between PRCS and IFRC, for the LCDP funded by the Finnish RC. From the start of 2012, the focus shifted to the capacity development of national staff by providing trainings in every aspect of logistics. To strengthen the warehousing data management system, the logistics inventory control (LOGIC) system was introduced in PRCS Haripur warehouse, following the replication of the same system in PRCS PHQ Punjab-Multan warehouse. Well organised and updated information of warehousing, vehicle capacity and

existing disaster preparedness stocks played a vital role in finalising the PRCS monsoon Contingency Plans for floods 2011, 2012 and 2013.

The IFRC in-country logistics team, in coordination with PRCS and the ZLU-KL, worked together to determine the most appropriate, effective and cost-efficient sourcing and mobilization strategy for the required relief and recovery items. Activities carried out included:

- Rapid needs and capacity assessments.
- Establishment of logistics hubs to carry out all aspects of reception of air, sea and road freight of relief and recovery goods.
- Coordinated mobilization of relief and recovery items.
- Coordinated reception and warehousing of all incoming goods.
- Provision of standard vehicles as required.
- Coordinated and efficient dispatch of goods to the distribution points.

The in-country logistics operation comprised of various activities, managing IFRC warehouses in Islamabad and Karachi holding PRCS/IFRC emergency and IRP stocks with a value of CHF 8.96 million, and providing transport services for goods and personnel, in addition to management of VRP for RCRC Movement partners.

As a part of strengthening PRCS warehousing capacity, two warehouses for NFIs and food items (FIs) were established in Mardan/ KP, each warehouse with the storage area of 1200 m<sup>2</sup> and 800 m<sup>2</sup>, respectively, with the total storage capacity of NFIs and FIs for approximately 5,000 families. Furthermore, one warehouse in Multan/ Punjab (storage area 2400 m<sup>2</sup>) and two in Sukkur/ Sindh (storage area of 2100 m<sup>2</sup>) were established, with a total storage capacity for approximately 4,000 families.

To facilitate the transportation of goods to these warehouses, a fleet of 85 trucks were hired to support the distribution to all locations. The management of the logistics hubs were taken over in January 2011 by IFRC logistics department consisting of ten logistics delegates supported by 25 national staff. As the emergency phase of 2010 floods came to an end and the need of having three warehouses was no longer required, it was discussed and agreed with PRCS to close down the three regional logistics hubs/ warehouses of Mardan, Multan and Sukkur, and moved all the stocks to the central NHQ warehouses in Islamabad and Karachi.



NFI Disaster Preparedness stocks at warehouse in Karachi, Sindh province. **Photo:** IFRC.

**Table 13: Summary of IFRC VRP vehicles from 2010 to 2013**

	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
<b>IFRC</b>	25	37	37	36
<b>PNS</b>	19	20	20	22

In addition to general logistics, the unit supported procurement and fleet management. Before the flood 2010 there were only 18 Vehicle Rental Programme (VRP) vehicles in the country. Ten vehicles were in the use of IFRC country office while eight vehicles were operated by different PNS. At the peak, the fleet department facilitate one of the biggest operations in South Asia, consisting of 37 vehicle rental programme (VRP) vehicles supporting IFRC programmes and operations, and another 20 VRP vehicles leased out to PNS to support their bilateral operations in country. This was further complemented by rental vehicles, with more than 150 local rented vehicles rented during the period 2010 and first quarter of 2011. This was in addition to the PRCS vehicles and rentals support. There was however no clearly defined system in place regarding RCRC emblem visibility management for the different types of vehicles and organisation within the RCRC movement partners and support services. By 2012 the IFRC had almost eliminated the use of local rented vehicles, using (VRP) vehicles instead. This was in addition to the support for PRCS vehicles and rented transport.

Fleet technical support was extended to the PNSs and PRCS at different levels ranging from assessment of their fleet assets, procurement of vehicles and forklifts, and fleet capacity building to logistics, and all staff drivers on road safety and 4x4 off-road driving procedures trainings.

**Challenges:**

- A MoU was signed at end of 2011 between PRCS and IFRC regarding the handover of warehouse management to PRCS after completion of prepositioning of DP stocks to different PRCS branches & DM cell warehouses. Due to the lack of warehousing facilities at branches as well as DM cells the prepositioning of DP

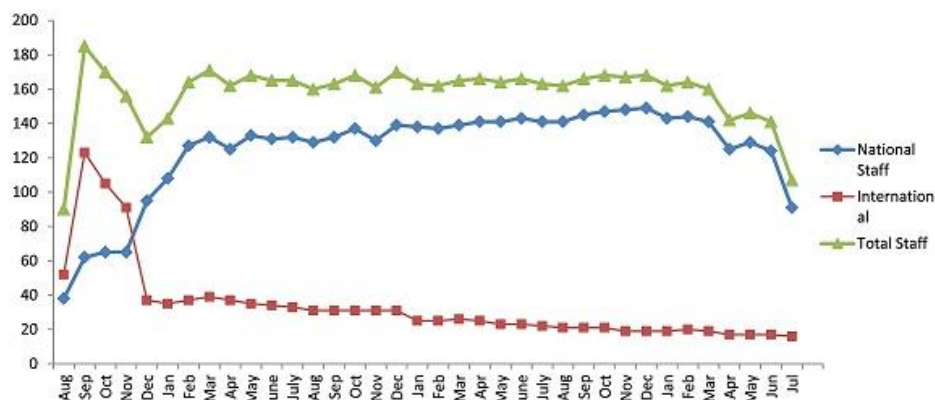
stocks was put on hold by the senior management of PRCS. This had implications on the implementation compliance of the MoU as PRCS NHQ was not in a position to take over the management of Islamabad and Karachi warehouses. IFRC continued to support the substantial rent, running costs and insurance for both these warehouses for another year whilst preparations were made for the management take-over. In mid-2013, PRCS took over the stocks stored in the two IFRC managed warehouses in Islamabad and Karachi, for which PRCS hired two new warehouses in Haripur and Karachi and the stocks were transferred and donated to the PRCS. Stocks<sup>44</sup> worth approx. CHF 7.2 million were transferred and completed by August 2013.

### iii. Administration, Human Resources and Information Technology

#### **Human Resources:**

From a delegation with 5 international staff in July 2010, the IFRC supported with an immense surge capacity to assist with the initial operation response, peaking at 123 delegates in September 2010. Since October 2010 there has been a steady decline in the number of delegates synchronised with a significant national staff recruitment process to taking over programme support activities. IFRC national staff grew from 38 in August 2010 to 149 in December 2012, after which a gradual reduction was experienced as part of the exit strategy with the closure of the operation. This does not include an additional 80 international short-term technical staff manning the various ERU's and 19 FACT members which would bring the number of international staff supporting the operation in September 2010 to 222. Ten RDRT members were also in position in October 2010 as the FACT teams withdrew.

**Figure 3: Overview of IFRC national and international staffing for 2010 floods between August 2010 and July 2013**



Up to 300 PRCS staff were supported under this operation in 2010 and 2011, reducing in 2012 to 281, to 219 in January 2013, and to 55 in the last quarter of the project life-span.

After the closure of the 2010 floods operation, the delegation has a staff complement of 10 delegates and 76 national staff for the second half of 2013, whilst supporting 205 PRCS staff to undertake activities under the Development Operational Plans for Pakistan.

#### **Administration:**

Supporting this human resources scale put a strain and high demands upon the administrative support services to ensure smooth running of the operations, supporting IFRC and PNS international and national staff, as well as visitors. Travel bookings during the life span of the 2010 floods operation increased five-fold in 2011 (1,290) and almost four-fold in 2012 (886) compared to 2010, stabilising again in 2013 (290). Similarly residences to house the IFRC delegates increased almost three-fold in 2011 (22) compared to 2010, stabilising in 2013 (9). Initially nine office spaces accommodating IFRC staff and a number of PNSs too were required during 2010-2011, gradually decreasing to 3 in the last half year of the 2010 floods operation. Also over 600 visas were processed for IFRC and PNS staff as well as visitors coming to Pakistan, as well as staff on duty travel abroad including PRCS staff.

<sup>44</sup> Stocks included: 154,548 blankets, 2,540 buckets, 12,834 Family tents, 716 GI sheets, 14,451 Hurricane Lamps, 15,288 Hygiene kits, 75,634 Jerry cans, 13,433 Kitchen sets, 4,898 Medical kits, 99 Mosquito nets, 82,798 Nutrition specialised products, 32,698 Health & Care items, 17,947 Shelter tool kits, 44,752 Tarpaulin sheets, 8,501 Water treatment equipment, 10,262 WatSan equipment, etc.

### **Information Technology:**

As part of the support systems for the offices established for the 2010 floods operation response in the provinces of Sindh (Larkana district), KP (Mardan and Mansehra districts) and Punjab (Multan districts), as well as at Islamabad NHQ Disaster Management and Logistics unit (DMLC), IT infrastructure was put in place, including internet and radio base installations. Continued IT and telecom support was also provided to the FACT, ERU, TPAT and RDRT team members along with the in-country delegates of IFRC as required over the three years life-span of the operation. Security systems including Closed Circuit Television (CCTV) camera systems were installed and maintained. As part of enhancing the communication and organisational information management system, a new operating system (windows 7) was installed on all the computer equipment and staff trained.

### **iv. Planning, Monitoring, Evaluation and Reporting (PMER) Systems**

In addition to regular programme progress monitoring, technical follow-up, and beneficiary communications and feedback, a significant number of assessments, reviews, surveys and evaluations were undertaken throughout the different phases under the 2010 floods response operation:

**Table 14: Summary of Assessments/Reviews/Evaluations**

S.No	Assessments/ Reviews/ Evaluations	Timeframe
1	FACT Needs Assessment	Aug 2010
2	TPAT Needs Assessment	Aug - Sept 2010
3	Real-Time Evaluation: efficiency and effectiveness of Management and Coordination	Jan 2011
4	IRP VCA	Dec 2010/ Jan 2011
5	Thatta Pilot Shelter and Livelihoods cash-grants	Jan 2011 – May 2011
6	Relief and basic health care ERU deployments review	Feb 2011
7	Joint PRCS/ IFRC Monitoring of Food and NFI Relief distribution	Mar 2011
8	Real-Time Evaluation: RDRT deployment process	Apr 2011
9	IRP WatSan pre-KAP	Jul-Aug 2011
10	Relief and early recovery evaluation	July 2011
11	IRP Baseline Survey	Sept 2011
12	Agricultural Seeds Livelihoods support Impact Monitoring	Dec 2011
13	Mid Term Review	April 2012
14	IRP WatSan post-KAP	Mar-Apr 2013
15	IRP End line Survey	April 2013
16	IRP Lessons Identification workshops: national and provincial level	Mar-Jun 2013
	<b>Sectoral reviews and evaluations</b>	
	• IGA Livelihoods Impact Monitoring	
	• IRP BCA Review	
17	• Branch Development Review	Mar – Jul 2013
	• IRP Village Committees Mobilisation DRR Evaluation	
	• Health & Care Evaluation	
	• IRP Shelter Evaluation	
18	2010 Floods Appeal Summative Evaluation	Jul-Aug 2013

Over 80 narrative standard and donor pledge based reports were produced with regular information updates for this 2010 floods operation only.

Support to the development of PRCS PMER systems through this operation, for example in the areas of standard relief, monitoring and reporting systems, continues into the Development Operational Plan. PRCS is establishing a PMER department and is in the process of elaborating a proposal for PMER development strategy for PRCS.

### **v. Security**

Pakistan is a moderate to high risk security and safety environment for humanitarian workers. The wide range of natural hazards such of landslides, earthquakes and floods continued to be a significant and country wide safety risk to the population and aid workers. Throughout the operation, the security in the country remained unstable and highly unpredictable.

The main security and safety concerns for Red Cross Red Crescent personnel in Pakistan can be summarised as:

- **Protests and Civil Unrest:** Protests and violent demonstrations were a primary threat all over Pakistan. They were frequent for many reasons including: lack of political and economic stability, law and order, religious motivated rallies, price hikes, electricity cuts etc. They usually started peacefully, but many ended in violence, road blocks, shooting, and strong police tactics.

- Health Issues: Diseases from food and water are the leading cause of illness in staff, and staff were frequent and sometimes serious. Within the appeal period three medical evacuations took place. The IFRC Health Advisor visited the delegation and recommended ways to minimize health risks.
- Road accidents: Road accidents are common and the delegation was involved in some minor incidents, with exception of one incident with deadly outcome of one of the passengers. Militancy and conflict related incidents:
- Militancy did increase considerably in recent years and has spread to settled areas of all provinces. Militants mostly target intelligence, military and police installations, but attacks local staff was sometimes indirectly affected when nearby. One ICRC staff member was abducted and killed in 2012, whilst a number of other foreign aid workers have been abducted and/or killed as well.
- Crime: Pakistan experiences a high rate of violent crime, especially in the large cities and towns but also in many rural areas. However the incidence with staff members could be kept considerably lower than for the general populations due to the risk prevention measures and rules put in place by the IFRC.
- Natural disasters: The effects of landslides, flooding, snow, etc and being stuck on the road could be minimized by the radio communication system.
- Programme related threats: Corruption cases are common in Pakistan and have contributed to some effect to the implementation of programmes. All cases evolved were reported and followed up with the management of the PRCS, both at National and Provincial level. Appropriate actions were taken and recorded.

IFRC not only provided security services to the IFRC supported operations, but also to the PNS working in Pakistan. These services include: security briefings to staff passing through IFRC operational areas, sharing security related information (such as alerts) related to IFRC operational areas, track vehicle movements in provinces where IFRC maintains radio rooms and sharing security regulations and contingency plans for IFRC operational areas

At the initial stages of the 2010 floods emergency the IFRC delegation had requested a Security Person to be part of the FACT to support in the initial security assessments of the flood affected areas and provide necessary recommendations on different security aspects, however this was not possible. The delegation security department was manned with only two people, a Security Delegate and Field Security Officer which faced great pressures to manage the security of the mass influx of international and national staff in the fast pace and vastly spread-out operation. The IFRC Security department was reinforced with additional human resources in late October 2010 when Security delegates arrived for Sindh and KP field offices.

A communications base was set-up in Larkana (Sindh) and Mardan (KP) to track the large volume of IFRC and PNS daily movements within these two provinces, while IFRC Islamabad Radio Room tracked all the movements in Punjab province.

With the mass influx of foreign aid workers into Pakistan to assist with the mega 2010 floods response, the imposition of armed police escorts upon international staff by the Punjab Government in particular presented a challenge for support and monitoring to response operations in the area by international staff. Sindh province did not impose armed escorts, however faced other security issues such as looting of trucks carrying relief goods, aid agencies offices and warehouse robbed, crowd control issues at relief distributions and a significant number of road traffic accidents. Cultural conservative communities in KP restricted the ability of female staff movements in districts such as Kohistan, and limited ability to access female beneficiaries. Finding safe and reasonable premises for office, warehouses and accommodation in the operational areas of KP, Punjab and Sindh proved to be a challenge, having to make arrangements from few and sometimes not optimal available options.

Moving from an emergency to recovery phase there was time to undertake extensive security assessments into the new operational areas, establish systems, procedures, SOP's and contacts to better manage everyday security aspects of the operations of the IFRC and the PNS under the IFRC security umbrella.

The volatile and complex security and working environment in Pakistan impacted upon movements and programme implementation, with delays and changes required in operational set-up and response modalities. For example, it was decided that no delegates would be based in the field office in Multan (Punjab) due to the recent abductions of foreigners from the area and the imposition of armed escorts on foreigners. Whilst the high rate of militancy in KP province, and especially in the main city of Peshawar, lead to the relocation of the IFRC Head of Office for KP to be relocated to from Islamabad, with travel into the area from there. Baluchistan and FATA areas are coded as 'Red zones' with no IFRC or PNS staff under the IFRC security umbrella travelling to the area due to the high level of insecurity in the regions.

## **Contributing to longer-term impact**

The experience gained from major disasters over the past decade along with initiatives taken throughout this operation in terms of training and capacity building at the PRCS NHQ and branches with the support from IFRC, ICRC and RCRC Movement partners continues to enable PRCS to build its capacity. The IRP also introduced new areas of intervention, like cash grants, beneficiaries communication, livelihood, community based interventions, owner-driven shelter, etc. The experience was further used to improve the Contingency Planning of the PRCS with a notable effect on the response to the 2011 and 2012 floods. The development of the Integrated Community Based Risk Reduction Program – with further steps to integrate the working methodology - is based on the lessons learned in the IRP.

## **Looking ahead**

The IRP was set up in a period when the community resilience building concepts were still in a developmental mode, as well as the concept of 'integrated community based approach'. Both the mid-term evaluation and the summative evaluation noted the insufficient integration of the different sectors and the inadequate structure to implement. Therefore a new program was developed in the second part of 2012 which could assist the PRCS to work more effectively with communities in building their resilience against further disasters which unfortunately are all too frequently experience in Pakistan.

With the finalization of most of the field activities in April 2013, the focus was directed to the IRP end-line assessments, sector specific impact assessments and lessons identification workshops as part of the evaluation and exit strategy of the 2010 floods appeal. This was a strain on the delegation, but also a rewarding task of documenting and ensuring the gained experience is accessible for the future. The main challenge at presence is to retain and use this experience and the capacity within PRCS, and IFRC, and to transfer this into a durable long-term development plan for the sustainability of the National Society and as sharing for other IFRC supported operations across the globe.

## 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.

[www.ifrc.org](http://www.ifrc.org)  
Saving lives, changing minds.



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.



## Disaster Response Financial Report

MDRPK006 - Pakistan - Monsoon Floods

Timeframe: 30 Jul 10 to 31 Jul 13

Appeal Launch Date: 02 Aug 10

Final Report

### Selected Parameters

Reporting Timeframe	2010/7-2013/7	Programme	MDRPK006
Budget Timeframe	2010/7-2013/7	Budget	APPROVED
Split by funding source	Y	Project	*

All figures are in Swiss Francs (CHF)

## I. Funding

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>A. Budget</b>		<b>65,212,085</b>	<b>13,210,349</b>		<b>9,405,031</b>	<b>87,827,465</b>	
<b>B. Opening Balance</b>		<b>0</b>	<b>0</b>		<b>0</b>	<b>0</b>	
<b>Income</b>							
<b>Cash contributions</b>							
American Red Cross		4,154,966				4,154,966	
Andorran Red Cross		12,579				12,579	
Argentina - Private Donors		124				124	
Australian Red Cross		491,628	461,775			953,403	
Australian Red Cross (from Australian Government*)		2,862,603	273,420			3,136,023	
Austrian Red Cross		1,172,811	229,549			1,402,361	
Austrian Red Cross (from Austrian Government*)			489,414			489,414	
Austrian Red Cross (from Austria - Private Donors*)			392,583			392,583	
Bangladesh Red Crescent Society		985				985	
Belarus Red Cross		2,017				2,017	
Belgian Red Cross (Flanders)		22,775				22,775	
Belgian Red Cross (Francophone)		39,688				39,688	
Belgium - Private Donors					563	563	
British Red Cross		2,427,964	132,981		92,743	2,653,688	
British Red Cross (from British Government*)					449,573	449,573	
British Red Cross (from DEC (Disasters Emergency Committee)*)		716,331	998,833			1,715,163	
British Red Cross (from DFID - British Government*)		2,152,762			388,916	2,541,678	
Bulgarian Red Cross		14,639				14,639	
China Red Cross, Hong Kong branch		11,353				11,353	
China Red Cross, Macau Branch		15,000				15,000	
Consolidated Contractors Co. (CCC)		102,743				102,743	
Credit Suisse Foundation		950,749	365,673		146,269	1,462,691	
Czech Red Cross					45,903	45,903	
Danish Red Cross		6,581				6,581	
Danish Red Cross (from Danish Government*)		74,684	1,144,474		983,262	2,202,420	
Egypt - Private Donors					1,474	1,474	
European Commission - DG ECHO		12,857,683				12,857,683	
Fiji Red Cross Society					1,028	1,028	
Fiji Red Cross Society (from Fiji Private Donors*)					2,598	2,598	
Finnish Red Cross		479,570				479,570	
France - Private Donors					1,000	1,000	
French Red Cross		405,598	6,702			412,300	
Garden International School		19,801				19,801	
German Red Cross		327,445				327,445	
Germany - Private Donors					2,659	2,659	
GlaxoSmithKline		23,145				23,145	
Great Britain - Private Donors					1,615	1,615	
Halai Sakina					10,544	10,544	
Icelandic Red Cross			70,000			70,000	
Icelandic Red Cross (from Icelandic Government*)			35,000			35,000	
Icelandic Red Cross (from Icelandic RC*)			15,000			15,000	
IFRC at the UN Inc (from Aecom Employees*)			460			460	
IFRC at the UN Inc (from Alcatel-Lucent Foundation*)			7,223			7,223	
IFRC at the UN Inc (from BP Foundation*)		948,579				948,579	
IFRC at the UN Inc (from EMC Corporation*)			92,928			92,928	
IFRC at the UN Inc (from Islamic Heritage*)			5,576			5,576	
IFRC at the UN Inc (from Kraft Foods Foundation*)		142,287				142,287	
IFRC at the UN Inc (from Latham & Watkins LLP*)			13,939			13,939	
IFRC at the UN Inc (from Marsh & McLennan Companies, Inc.*)			23,232			23,232	

## Disaster Response Financial Report

### MDRPK006 - Pakistan - Monsoon Floods

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#### Final Report

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Budget Timeframe	2010/7-2013/7	Budget	APPROVED
Split by funding source	Y	Project	*

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IFRC at the UN Inc (from Mellon Bank*)		176,762		176,762
IFRC at the UN Inc (from Old World Industries Inc.*)	23,714			23,714
IFRC at the UN Inc (from Oracle Corporation*)		181,172		181,172
IFRC at the UN Inc (from Riaz H. Waraich Charitable Foundation*)	23,714			23,714
IFRC at the UN Inc (from ThermoFisher Scientific*)		1,848		1,848
IFRC at the UN Inc (from United States - Private Donors*)	1,873	957		2,831
Indonesia - Private Donors	5,195		674	5,869
Ireland - Private Donors			7,387	7,387
Irish Red Cross Society	260,308	244,243		504,551
Italian Government Bilateral Emergency Fund		548,848		548,848
Italy - Private Donors			4,620	4,620
Japanese Government		1,416,163		1,416,163
Japanese Red Cross Society	811,258		14,538	825,796
KPMG Disaster Relief Fund			184	184
Lebara Foundation	126,037			126,037
Lithuanian Red Cross Society			500	500
Luxembourg - Private Donors			507	507
Luxembourg Red Cross	3,666			3,666
Malta Red Cross Society	13,246			13,246
Mauritius Red Cross Society	3,734			3,734
Microsoft	26,932			26,932
Moroccan Red Crescent	23,638			23,638
Nepal Red Cross Society			2,000	2,000
Netherlands - Private Donors			325	325
New Zealand Red Cross	52,080	286,200		338,280
New Zealand Red Cross (from New Zealand Government*)		366,750		366,750
Norwegian Red Cross	6,619			6,619
Norwegian Red Cross (from Norwegian Government*)	2,703,779	763,316	627,175	4,094,270
Oman - Private Donors			3,933	3,933
On Line donations			218,525	218,525
OPEC Fund For International Development	517,331			517,331
Other	-13,578			-13,578
Pakistan Private Donors			25,080	25,080
Portuguese Red Cross	32,921			32,921
Qatar Private Donors	328			328
Red Crescent Society of Islamic Republic of Iran	26,243		20,872	47,116
Red Crescent Society of the United Arab Emirates	17,719			17,719
Red Cross of Monaco	71,522			71,522
Saudi Arabia - Private Donors	10,392			10,392
Singapore Red Cross Society	222,046	105,152		327,198
Slovenian Red Cross	5,592			5,592
South Africa - Private Donors			1,414	1,414
Spanish Red Cross	113,964			113,964
Spanish Red Cross (from Spain - Private Donors*)	42,462			42,462
Swedish - Private Donors			3,444	3,444
Swedish Red Cross	2,765,060		41,744	2,806,804
Swedish Red Cross (from Swedish Government*)	4,075,230			4,075,230
Swiss Red Cross	3,559			3,559
Switzerland - Private Donors	1,000		2,907	3,907
Taiwan Red Cross Organisation	82,388	200,683		283,072
The Bahamas Red Cross Society	899			899
The Canadian Red Cross Society	1,869,830	446,888	770,301	3,087,019
The Canadian Red Cross Society (from Canadian Government*)	3,932,323	677,630	434,041	5,043,994
The Netherlands Red Cross	78,254			78,254
The Netherlands Red Cross (from Netherlands Government*)	1,051,529	324,170	335,616	1,711,314
The Red Cross Society of Bosnia and Herzegovina			66,985	66,985

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Budget Timeframe	2010/7-2013/	Budget	APPROVED	
Split by funding source	Y	Project	*	
All figures are in Swiss Francs (CHF)				
<i>The Republic of Korea National Red Cross</i>	67,507			67,507
<i>The Republic of Korea National Red Cross (from Republic of Korea - Private Donors*)</i>	3,307		1,204	4,511
<i>Thomson Reuters</i>			2,625	2,625
<i>United Arab Emirates - Private Donors</i>			7,775	7,775
<i>United States Government - USAID</i>	2,774,627	1,282,988		4,057,616
<i>United States - Private Donors</i>			6,074	6,074
<i>VERF/WHO Voluntary Emergency Relief</i>	7,700			7,700
<i>WIPO /OMPI staff</i>			6,050	6,050
<i>Wi-Tribe Limited</i>			20,224	20,224
<i>Yemen Private donors</i>			986	986
<i>Z Zurich Foundation</i>	62,000			62,000
<b>C1. Cash contributions</b>	<b>52,345,039</b>	<b>11,782,532</b>	<b>4,755,859</b>	<b>68,883,430</b>
<b>Inkind Goods &amp; Transport</b>				
<i>American Red Cross</i>	869,260			869,260
<i>Australian Red Cross</i>	443,968			443,968
<i>Austrian Red Cross</i>	1,605,953			1,605,953
<i>Belgian Red Cross (Flanders)</i>	367,550			367,550
<i>British Red Cross</i>	3,015,948			3,015,948
<i>China Red Cross, Hong Kong branch</i>	185,708			185,708
<i>Danish Red Cross</i>	102,127			102,127
<i>Finnish Red Cross</i>	1,090,787	265,687		1,356,474
<i>French Red Cross</i>	125,411			125,411
<i>German Red Cross</i>	630,988			630,988
<i>Japanese Red Cross Society</i>	397,578			397,578
<i>Luxembourg Red Cross</i>	56,890			56,890
<i>New Zealand Red Cross</i>	71,993			71,993
<i>Norwegian Red Cross</i>	106,157			106,157
<i>Red Crescent Society of Islamic Republic of Iran</i>	596,692			596,692
<i>Singapore Red Cross Society</i>	112,767			112,767
<i>Spanish Red Cross</i>	594,282			594,282
<i>Swiss Red Cross</i>	55,226			55,226
<i>The Canadian Red Cross Society</i>	3,459,641			3,459,641
<i>The Netherlands Red Cross</i>	6,623,892	498,368		7,122,260
<i>The Republic of Korea National Red Cross</i>	133,818			133,818
<b>C2. Inkind Goods &amp; Transport</b>	<b>20,646,638</b>	<b>764,055</b>		<b>21,410,693</b>
<b>Inkind Personnel</b>				
<i>Australian Red Cross</i>	39,597		51,590	91,187
<i>Danish Red Cross</i>	45,500		153,457	198,957
<i>Finnish Red Cross</i>	212,204		23,077	235,281
<i>Icelandic Red Cross</i>			47,190	47,190
<i>New Zealand Red Cross</i>		138,470		138,470
<i>Other</i>	1,467		54,903	56,370
<i>Swedish Red Cross</i>			169,803	169,803
<i>The Canadian Red Cross Society</i>			94,300	94,300
<b>C3. Inkind Personnel</b>	<b>298,768</b>	<b>138,470</b>	<b>594,320</b>	<b>1,031,558</b>
<b>Other Income</b>				
<i>Balance Reallocation</i>	-6,300,000	2,300,000	4,000,000	0
<i>Fundraising Fees</i>	-64,580	-18,284	-8,465	-91,329
<i>IFRC at the UN Inc allocations</i>	169,196			169,196
<i>Programme &amp; Services Support Recover</i>	539,380	42,396		581,777
<i>Sales</i>	0			0
<i>Services Fees</i>	-4		53,246	53,242
<i>Sundry Income</i>	297,991		2,374	300,365
<b>C4. Other Income</b>	<b>-5,358,018</b>	<b>2,324,113</b>	<b>4,047,155</b>	<b>1,013,250</b>
<b>C. Total Income = SUM(C1..C4)</b>	<b>67,932,428</b>	<b>15,009,168</b>	<b>9,397,333</b>	<b>92,338,929</b>
<b>D. Total Funding = B +C</b>	<b>67,932,428</b>	<b>15,009,168</b>	<b>9,397,333</b>	<b>92,338,929</b>

\* Funding source data based on information provided by the donor

**Disaster Response Financial Report**

MDRPK006 - Pakistan - Monsoon Floods

Timeframe: 30 Jul 10 to 31 Jul 13

Appeal Launch Date: 02 Aug 10

Final Report

**Selected Parameters**

Reporting Timeframe	2010/7-2013/7	Programme	MDRPK006
Budget Timeframe	2010/7-2013/7	Budget	APPROVED
Split by funding source	Y	Project	*

All figures are in Swiss Francs (CHF)

**II. Movement of Funds**

	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability	TOTAL	Deferred Income
<b>B. Opening Balance</b>		0	0		0	0	
<b>C. Income</b>		67,932,428	15,009,168		9,397,333	<b>92,338,929</b>	
<b>E. Expenditure</b>		-63,990,982	-11,676,235		-9,104,395	<b>-84,771,612</b>	
<b>F. Closing Balance = (B + C + E)</b>		3,941,446	3,332,933		292,938	<b>7,567,317</b>	

## Disaster Response Financial Report

MDRPK006 - Pakistan - Monsoon Floods

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### III. Expenditure

Account Groups	Expenditure						TOTAL	Variance
	Budget	Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
<b>BUDGET (C)</b>			<b>65,212,085</b>	<b>13,210,349</b>		<b>9,405,031</b>	<b>87,827,465</b>	
<b>Relief items, Construction, Supplies</b>								
Shelter - Relief	11,114,519		10,484,165	624,877		5,288	11,114,330	189
Shelter - Transitional	741,004		741,004				741,004	0
Construction - Housing	5,509		5,509				5,509	0
Construction - Facilities	59,727		19,727	28,682		52	48,461	11,266
Construction Materials						17	17	-17
Clothing & Textiles	3,635,041		3,376,896	258,145			3,635,041	0
Food	20,435,822		20,023,364	373,394			20,396,757	39,064
Seeds & Plants	2,252,808		2,252,808				2,252,808	0
Water, Sanitation & Hygiene	4,155,607		1,749,204	2,370,270		117,480	4,236,954	-81,347
Medical & First Aid	1,753,339		48,255	1,537,457			1,585,711	167,627
Teaching Materials	39,604			39,760			39,760	-156
Utensils & Tools	2,262,048		2,209,375	52,673			2,262,048	0
Other Supplies & Services	114,156		6,834	44,754		764	52,352	61,804
Cash Disbursement	4,002,309		3,995,728			190	3,995,917	6,391
<b>Total Relief items, Construction, Sup</b>	<b>50,571,493</b>		<b>44,912,868</b>	<b>5,330,011</b>		<b>123,791</b>	<b>50,366,670</b>	<b>204,822</b>
<b>Land, vehicles &amp; equipment</b>								
Vehicles	0		57,407				57,407	-57,407
Computers & Telecom	288,554		118,749	45,525		124,399	288,674	-119
Office & Household Equipment	181,131		72,056	3,044		87,030	162,131	19,000
Medical Equipment	103,242			103,242			103,242	0
Others Machinery & Equipment	20,524		20,524	1,807			22,331	-1,807
<b>Total Land, vehicles &amp; equipment</b>	<b>593,452</b>		<b>268,737</b>	<b>153,618</b>		<b>211,430</b>	<b>633,785</b>	<b>-40,333</b>
<b>Logistics, Transport &amp; Storage</b>								
Storage	1,883,424		1,281,889	78,568		231,687	1,592,144	291,280
Distribution & Monitoring	4,782,442		4,400,589	395,435		18,768	4,814,792	-32,350
Transport & Vehicles Costs	3,424,411		2,093,427	432,687		553,878	3,079,992	344,419
Logistics Services	299,908		232,660	66,005		1,296	299,961	-53
<b>Total Logistics, Transport &amp; Storage</b>	<b>10,390,185</b>		<b>8,008,564</b>	<b>972,695</b>		<b>805,629</b>	<b>9,786,889</b>	<b>603,297</b>
<b>Personnel</b>								
International Staff	7,259,191		2,590,324	828,058		3,695,103	7,113,486	145,705
National Staff	2,456,604		952,652	304,970		1,013,584	2,271,206	185,398
National Society Staff	3,713,283		926,543	1,188,321		374,523	2,489,388	1,223,895
Volunteers	207,913		142,536	120,780		30,649	293,965	-86,052
<b>Total Personnel</b>	<b>13,636,992</b>		<b>4,612,056</b>	<b>2,442,130</b>		<b>5,113,859</b>	<b>12,168,045</b>	<b>1,468,947</b>
<b>Consultants &amp; Professional Fees</b>								
Consultants	443,752		165,777	40,945		239,219	445,942	-2,190
Professional Fees	598,307		139,449	8,185		371,396	519,030	79,277
<b>Total Consultants &amp; Professional Fees</b>	<b>1,042,059</b>		<b>305,226</b>	<b>49,131</b>		<b>610,615</b>	<b>964,972</b>	<b>77,088</b>
<b>Workshops &amp; Training</b>								
Workshops & Training	855,209		168,545	309,554		268,019	746,118	109,092
<b>Total Workshops &amp; Training</b>	<b>855,209</b>		<b>168,545</b>	<b>309,554</b>		<b>268,019</b>	<b>746,118</b>	<b>109,092</b>
<b>General Expenditure</b>								
Travel	758,341		231,660	106,986		327,891	666,537	91,804
Information & Public Relations	533,641		47,153	193,868		185,364	426,385	107,256
Office Costs	1,346,443		188,573	152,550		952,855	1,293,977	52,465
Communications	188,723		36,826	22,554		127,509	186,890	1,833
Financial Charges	227,322		516,327	235,311		-465,335	286,304	-58,981

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## III. Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Raise humanitarian standards	Grow RC/RC services for vulnerable people	Strengthen RC/RC contribution to development	Heighten influence and support for RC/RC work	Joint working and accountability		
	A					B	A - B	
<b>BUDGET (C)</b>			<b>65,212,085</b>	<b>13,210,349</b>		<b>9,405,031</b>	<b>87,827,465</b>	
Other General Expenses	246,816		-910,053	947,984		77,587	115,518	131,299
Shared Office and Services Costs	567,088		318,178	55,669		222,880	596,727	-29,639
<b>Total General Expenditure</b>	<b>3,868,374</b>		<b>428,664</b>	<b>1,714,922</b>		<b>1,428,751</b>	<b>3,572,337</b>	<b>296,037</b>
<b>Depreciation</b>								
Depreciation and impairment			68,107			3,901	72,008	-72,008
<b>Total Depreciation</b>			<b>68,107</b>			<b>3,901</b>	<b>72,008</b>	<b>-72,008</b>
<b>Contributions &amp; Transfers</b>								
Cash Transfers National Societies	1,173,970		1,173,970				1,173,970	0
<b>Total Contributions &amp; Transfers</b>	<b>1,173,970</b>		<b>1,173,970</b>				<b>1,173,970</b>	<b>0</b>
<b>Operational Provisions</b>								
Operational Provisions	0							0
<b>Total Operational Provisions</b>	<b>0</b>							<b>0</b>
<b>Indirect Costs</b>								
Programme & Services Support Recover	5,338,563		3,780,484	636,592		518,159	4,935,235	403,329
<b>Total Indirect Costs</b>	<b>5,338,563</b>		<b>3,780,484</b>	<b>636,592</b>		<b>518,159</b>	<b>4,935,235</b>	<b>403,329</b>
<b>Pledge Specific Costs</b>								
Pledge Earmarking Fee	314,822		240,617	57,574		17,247	315,439	-616
Pledge Reporting Fees	42,347		23,143	10,009		2,994	36,147	6,200
<b>Total Pledge Specific Costs</b>	<b>357,169</b>		<b>263,761</b>	<b>67,583</b>		<b>20,241</b>	<b>351,585</b>	<b>5,584</b>
<b>TOTAL EXPENDITURE (D)</b>	<b>87,827,465</b>		<b>63,990,982</b>	<b>11,676,235</b>		<b>9,104,395</b>	<b>84,771,612</b>	<b>3,055,853</b>
<b>VARIANCE (C - D)</b>			<b>1,221,103</b>	<b>1,534,114</b>		<b>300,636</b>	<b>3,055,853</b>	