







Rural Education & Economic Development Society (REEDS)

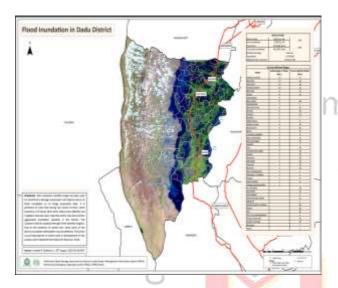
Canal Park, Street No.01, House No.01 Near Govt. Girls College Rahim Yar Khan

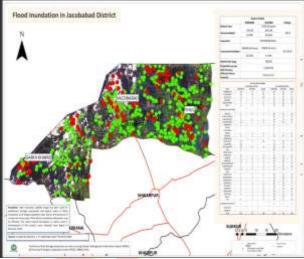
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1. Executive Summary

REEDS Pakistan with the support of Better Cotton-GIF, Tearfund-UK and Cordaid-Netherlands responding flood emergency 2022 in Sindh. The project districts, Dadu and Jacobabad, were hit hard by the flood. key interventions carried out under the project included distribution of food security & livelihood packages (Agrinputs for acre wheat crop) to 500 smallholder farmers, distributed 100 food hampers, Provision of cash grants through cross cheque to most affected REEDS staff (FF, PUM, Female FF), organized 28 mobile medical and 21 mobile veterinary camps, disbursement of Multi-Purpose Cash Assistance (MPCA) to 700 beneficiaries, 100 awareness raising sessions, distribution of 700 health, hygiene kits. The first phase is coming to an end. In order to assess the early recovery and rehabilitation needs of the flood affected people in first phase districts and union councils, need assessment was conducted in the first two weeks of the January 2023.





https://pdma.gos.pk/gis-maps/

The recovery needs are substantial and the pathway to housing recovery shall be informed by extensive experiences within Pakistan and with global good practices. Housing is largely a private good. The magnitude of losses in private investments in their homes accumulated over years (or decades) warrants strategic approaches to recovery and reconstruction. It is pivotal that the humanitarian actors play an enabling role in supporting families and communities to rebuild their houses and settlements according to disaster and climate-resistant standards.

REEDS Pakistan conducted the Detail Needs Assessment (DNA) in five union councils of district Jacobabad and district Dadu. Major sources of livelihood affected include the agriculture (76%), Livestock (52%), Labour (37%), Pvt. Jobs (29%) and shop-keeping (15%), fisheries (14%) and remittances (07%) respectively. Drinking water sources have been damaged on wider scale that include Hand Pumps (72%), HH water-bores (79%), open dug-wells (45%) and drinking water supply schemes (56%); moreover, the availability of safe/clean drinking water has been a major challenge. Water (100%) from drinking water sources in the affected areas of district Dadu and Dadu is found enormously contaminated with foul smell, odor and bad taste. Destruction and overflow of sanitation facilities (latrines), sanitation channels have caused contamination of drinking water sources and also added to environmental contamination. Hygiene and MHM are the critical issues. Water borne diseases include diarrhea (52%), Gastric Pain (59%), Skin diseases (67%), body-pain & malaria (68%) and Dengue (29%).

Restoration of minor but critical infrastructure such as link roads, irrigation channels, culverts, land and veterinary services is essential for social and economic recovery. For achieving better health water, sanitation and hygiene interventions are necessary. The restoration of critical infrastructure linked with

livelihoods such as irrigation systems, farm to market roads, agro-processing facilities and veterinary stations.

Facilitation of incomes is essential to enable people to rehabilitate their villages, starting campaigns for removing debris, mud and restoring social services including culverts, small bridges, water and sanitation, health and education services. The Cash for work can be the intervention to facilities the community for income.

Livestock plays a particularly important role in affected areas and contributing to nutrition through the provision of milk and meat, income through sales of milk and meat, transportation, animal traction and energy sources for ploughing, and fertilizer/manure for soil fertility. Livestock also represent a readily convertible asset for times of planned or exceptional need.

Agriculture including livestock rearing was the primary source of employment in rural areas of Sindh. In the affected districts of Sindh, agriculture accounted for 70 percent of total rural employment. Off farm incomes constitute approximately 30% of incomes. Particularly in Dadu, men migrate to cities for casual labour and low-level jobs. The remittances they send home constitute a vital part of the household income. Most service sector work is in the informal sector, without a social safety. Such jobs seldom provide opportunities for savings and only afford sufficient income for subsistence. The loss of employment and livelihoods, even for a short period of time, is likely to precipitate a fall into extreme poverty. Flash floods resulted in a large number of deaths to livestock. In more settled farming systems, buffalo, cattle, small livestock and poultry are often kept in locally-constructed housing or underneath human dwellings; many died as farmers had little time to take them out with them and all structures submerged and livestock killed underneath. In the affected areas of Jacobabad, and Dadu, agricultural structures were severely damaged. including 80 per cent of land, 50 per cent of irrigation diversions, 50 per cent of water channels/canals, 50 per cent of water lifting devices and 100 per cent of water ways

2. Methodology

REEDS used mix methodology in which both quantitative and qualitative data collection techniques were applied. In secondary data compilation, the updated situation reports of District administration/departments, community activists, members of local governments and offices of NGOs/INGOs were consulted. Comprehensive and smart data collection tools were developed for primary data collection that include the Focused Group discussion (FGDs) with affected communities, Key Informant interviews (KIIs) with government departments, focal persons of PDMA, NGOs, INGOs and community activists.

- 12 Focus group discussion (FGDs) with affected communities of the assessed districts were conducted
- 20 KIIs were conducted with social activists, community & political elites, representatives of local Govt., relief workers of NGOs, INGOs, focal person of departments and district administration
- 10 Open-ended interviews were conducted with Govt. departments (Livestock, PHED, Agriculture, Social welfare), focal persons of NGOs and INGOs
- 25 physical observations were recorded while visiting different flood affected areas in the mentioned districts.





2.1 Study Limitations

- Stringent timelines pushed towards very smart assessment exercise
- Primary data collection was not extensively made which could give the detail accounts of diverse sufferings of the communities
- The Secondary data was received from different line departments though being considerably authentic but somehow projected. It was thus having some margin of error

Name of District	Focus Group Discissions	•	nformant iews (KIIs)	Physical Observation	Secondary Data
	(FGDs)	Male	Female		
Jacobabad	8	5	5	20	Revised 2022 Flood Response Plan Pakistan,
Dadu	4	5	5	5	NDMA, PDMA Sindh https://reliefweb.int/report/pakistan/revised-pakistan-2022-floods-response-plan-01-sep-2022-31-may-2023-issued-04-oct-2022
Total	12	10	10	25 mio	

3. Findings

3.1 Shelter

3.1.1 HHs Damages

In district Dadu and Jacobabad, the flood water with debris flushed into HHs up to 4 meter (altitude-max) which wreaked multifaceted devastations to a huge population. In district Dadu and Jacobabad, the stagnant water for months turned houses into debris, apart from those directly hit in earlier water-fluxes. The rooms with cracks have high risks of demolition and thus unfit to live in. Most of affected/displaced communities are returned back to their original places and currently settled at their demolished households. Communities are not well off and facing issues in rebuilding their homes due to financial constraints. Recovery phase is a challenging due to stagnant water and without the significant external support, the situations are likely to persist, posing a challenge for the government.

In district Dadu, 133,295 HHs are Fully damaged (FD) and 34,714 HHs are Partially-damaged (PD) and the total-damaged HHs are thus 168,009. Three tehsils in district Dadu including Tehsil KN Shah, Johi and Maher have been worse affected. As reported, in district Jacobabad 89,784 HH are fully damaged (FD) and 24,073 HHs are partially damaged and the total damaged HHs are thus 113,857





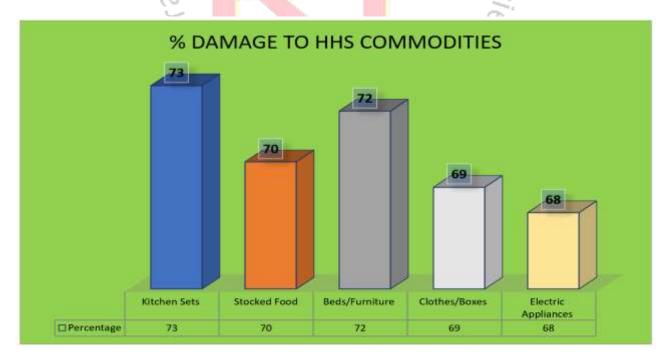
3.1.2 HHs Structures

In flood affected areas of the assessed districts, overall, 54% of the HHs structure is Kacha, (stones mixed with mud-clay), 33% are mixed-structure followed by 14% huts type of HHs structure. Ratio of Paka House hold is low in the assessed districts as compared to Kacha, Mix and Huts type of households which is only 14%. District wise statistics reflects the ratio of Kacha in Dadu (53%) and Jacobabad is 55%. Mix type of structure ratio in Dadu is (38%) and Jacobabad is 35%. Huts type of structure in 9% in Dadu and Jacobabad is 10%. The overall analysis reflects that 100% of HHs structures in the two flood affected districts is Kacha, Mix or huts type which shows communities are not well off and their living condition is worse due to harsh weather condition in Sindh Province.

3.1.3 Damages to HHs Commodities

In the assessed districts, flood-water rushed into the villages which caused large scale damages of house hold commodities. Some of the HHs tried to save their partial HHs commodities but due to high speed of water-flow and intensity, the complete displacement of commodities for such huge population could not be possible and nor the transportation could be available to such tremendous exodus. HHs commodities mainly include the HHs furniture, carpets, mats, matrices, boxes, clothes, stored-food, kitchen sets, and electric-appliances and likely all HHs commodities have been reportedly submerged into mud-mixed water resulting in spoilage and decay.

The water level got reduced, people moved towards villages. The damages to HHs commodities of the affected HHs include kitchen sets (73%), stocked food (70%), beds/furniture (72%), clothes/boxes (69%) and electric appliances (68%). During FGDs, it came to light that HHs furniture, beds, clothes and boxes have been destroyed on large scale but it is less reported. The situation in the districts stayed the same with minor fluctuations in responses. The fully damaged HHs (families) were observed as the most affected because of the extensive damages to HHs structure, kitchen sets, HHs commodities, Pit-latrines and all essential items were perished. Vulnerable households or households with member(s) from vulnerable groups (i.e. person with disabilities (PWDs), women-headed household and the elderly are still witnessed as the most marginalized and the proposed interventions should be preferably inclusive in its design of the rehabilitation and reconstruction activities.



Though Non-government organizations, philanthropists and government departments (Provincial disaster management authority/district disaster management authority) provided the NFIs but still it cannot be the replacement of HHs commodities.

3.1.4 Rehabilitation Needs For Shelter:

The occurrence of massive damages to shelter the floods affected and displaced families declared that their most immediate need was having safe and dignified shelter. The districts with higher proportions of people living without shelter are Dadu and Jacobabad. During physical observations it was observed that, shelters lacked space to accommodate everyone in flood affected districts. The affected population could not so far get started the activities of rehabilitation and reconstruction due to existence of extensive flood-water, still stagnant around the HHs premises. The communities have not so far been engaged in rehabilitation activities due to stagnant water and debris/mud. Provision of shelter kits will help expedite the rehabilitation activities once water level drops down or water recedes completely. In focus group discussions, major demand of the communities was to expend the provision of shelter assistance and distribution, with particular attention to the communities in Dadu and Jacobabd. Support the affected population repairing their housing and building shelters, such as through provision of construction materials, cash for shelter reconstruction, shelter kits and repair tools. Need to work with local authorities/DDMAs to ensure that communities' houses are rebuilt using construction materials that are flood resistant.

The assessment results indicate that the priority needs as shared by respondents in rehabilitation and recovery phase include Conditional cash-grant for HHs-rehabilitation (62%), construction material (70%), construction of damaged part (55%) and construction of HH is (67%) respectively.



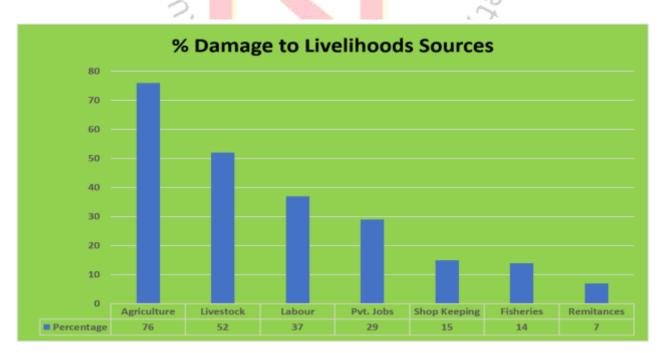




4. Food Security and Livelihood (FSL)

4.1 Damages to Livelihood Sources

The communities affected by the current flooding were already among the most vulnerable in the Sindh province. Heavily dependent on agriculture and livestock and to a lesser extent, small retail and temporary jobs, their livelihoods have now been upended. Participants from community groups mentioned that crops had been destroyed and cows and goats had died in the floods – and worryingly, since many families rented land from big landowners, they have now lost their land and tools, and entered to the cycle of debt. The major sources of livelihood affected include agriculture (76%), Livestock (52%), Labour (37%), Pvt. Jobs (29%) and shop-keeping (15%), fisheries (14%) and remittances (7%) respectively



Agriculture has been widely affected as main source of livelihood of most of the communities is agriculture and unskilled labor is also linked with this sector in the form of tenants; in district Dadu and Jacobabad, flood water of river Indus and Mancher Lake flooded completely the agri. fields. Livestock losses were remarkable but the displacement, issues in fodder management and contagious diseases including Lumpy Skin Disease (LSDs) affected this key source of livelihood in rural areas. Pvt. Jobs and labour (skilled/unskilled) are largely affected and the wage-earners have been engaged in confronting with the devastations of floods. Shops in the affected areas have been damaged. Affected areas in Dadu and Jacobabad were disconnected because roads were which has played a havoc with local business.

4.1.1 Agriculture

Agriculture has been the prime source of livelihood in Sindh as most of the unskilled labor is also relying on this sector and using as a major source of income. Like shelter, agriculture too has been worse affected in Sindh; 1,488,027 Acre agriculture-land including 14259 better cotton farmers having different seasonal crops including Maize (Makkai), Millet (Bajra), cotton crops, sunflower, Sugarcane and rice have been perished. Wheat sowing season was November and due to stagnant water, scattered on agriculture land, the impacts on wheat crops is expected in next season because the huge population have been solely relying on the Agri-crops as income sources. Sindh has already been declared a province while facing the crisis of malnutrition and the situation has exacerbated multiple-times which are adding to food crisis and further inflation in Pakistan.

Agri-land damages were widely occurred, either having Agri crops, vegetables or without, has been recorded in hectares (Acres) that Dadu (97330) and Jacobabad (255,678) respectively. The major crops affected during monsoon rains and floods include maize, rice, sugarcane, sunflower, millet and cotton crops. The crops of rice were fully affected in Dadu and Jacobabad where the Agri-fields were inundated and replaced by flood water with debris, mud and sand.





Below table indicates the type of crops affected by the flood water and " \checkmark " shows Yes, 0 shows "No" and "S" shows to some extent affected crops in these districts

District	Maiz	Millet	Cotton	Sunflower	Tobacco	Sugarcane	Rice	Wheat
	(Makai)	(Bajra)	Crop					
Dadu	✓	✓	✓	✓	0	✓	✓	0
Jacobabad	✓	✓	✓	✓	0	✓	✓	0

Vegetables were mostly affected and more than 80% vegetables plants were damaged in the affected areas. In these districts, the major reason of damages to vegetables was regarded as continuous

rains for more than two months. In assessed districts including the Dadu and Jacobabad, the excessive raining followed by the very high flow of flood water from river Indus and water flow from Balochistan regions in Dadu being stagnant for weeks, perished the vegetables. Vegetable production is one of the main source of income to the communities and Vegetables crops are cultivated in agri-fields.. Okra and Bitter Gourd (Karela) are affected by the flood water in Dadu and Jacobabad. Vegetable plants including Okra, Pumpkin, and Gourd have been damaged due to stagnant floods water in their agriculture land. The floods ultimately resulted in significant price hike in purchase of vegetables in the markets.

District	Tomato	Onion	Garlic (Lehsen)	Okra (Bhindi)	Pumpkin (Qadu)	Bitter Guord (Karela)	Chillin	Guord (Tinda)
Dadu	S	✓	S	✓	S	0	✓	✓
Jacobabad	S	✓	S	✓	S	0	✓	√

Better Cotton Farmers Affected:

District	Tehsil	UC	No. of BC farmers affected
Dadu	Dadu	Khudabad	370
Dadu	Dadu	Aminani	58
Dadu	Dadu	Yar Muhammad Kalahoro	1298
Dadu	Dadu	Pipree	29
Dadu	Dadu	Pir shahnawaz	813
Dadu	Dadu	Muradabad	24
Dadu	Dadu	Siyal	164
Dadu	Dadu	Bahawalpur	41
Dadu	Dadu	Makhdomm Bilawal	56
Dadu	Johi	Kamal Khan	1034
Dadu	Johi	Pir Mahaik <mark>h</mark>	644
Jamshoro	Manjhand	Shalmani Control Contr	1650
Jamshoro	Manjhand	sann	320
Jamshoro	Manjhand	Lakha	924
Jamshoro	Manjhand	Shah awais	240
Dadu	Johi	Johi 2	617
Jamshoro	Sehwan	Talti	180
Jamshoro	Sehwan	Bhumba	189
Jamshoro	Sehwan	Bhan Sheikh	1193
Jamshoro	Sehwan	Jaffarabad	883
Jamshoro	Sehwan	Channa	780
Jamshoro	Sehwan	Bobak	110
Jamshoro	Sehwan	Arazi	1402
Jamshoro	Sehwan	Wahur	1240
	Total		14259

4.1.2 Livestock Losses

Livestock is one of the core assets of the rural households and a major source of household food (dairy) consumption and livelihood/income. The Livestock has also been the victim of rains/floods disasters and 196,297 ruminants (livestock) have been killed as reported in the PDMA Sindh updates. The assessment data reveals that livestock losses in district Dadu (57,569) and Jacobabad (15,680) livestock losses have occurred respectively. Thus, the total livestock losses in the assessed districts is around 73,249 in number and in Dadu district high number reported because flood water entered into the villages at night time and people could not save their livestock





According to respondents, the animals' shades have been fragile in structure, are damaged due to high level (altitude) and intensity of flood water. On average 51% of the HHs sold their live-stock on nominal prices due to nonavailability of food-stock. The standing crops and fodder were mud mixed with smell and livestock usually refrain to eat it. As indicated, in affected districts Dadu (50%), and Jacobabad (65%) sold their livestock on nominal prices. In districts Dadu (65%) and Jacobabad (55%) of HH lost their livestock shelters. Fodder remains major challenge for remaining livestock as in Dadu (90%), and Jacobabad (55%) of HHs lost their fodder in flood water. Thirdly, diseases-outbreak has occurred, the lumpy skin disease (LSDs) in causing weakness and death of their livestock. The livestock losses in the assessed districts of Sindh has mounted to 73,249. Another major challenge found during focus group discussions regarding increase in prices of fodder and communities in Dadu and Jacobabad districts shared that one bundle of fodder price increased from 400 to 1300 which is now not affordable for them.

Due to crops and fodder losses, scarcity of fodder in over all affected districts (37%), exposure to severe weather being shelter-less (33%), Lumpy Skin Disease (LSDs) and animals' diseases are the key challenges ahead. The respondents expressed apprehensions about increased risk of livestock diseases. It is expected that in coming days, particularly in Dadu and Jacobabad, the severity of fodder' need for livestock will keep increasing and at moment it is recorded as one of the prime needs for livestock. Moreover, almost 30% HHs-rearing livestock, sold livestock due to livestock management issues and to meet the immediate HHs needs.

4.1.3 Labour/Daily Wage Earners

Labour in the form of daily wages, (skilled labour and un-skilled) as one of the major source of HHs income has been adversely affected. The main reason is that the people are widely engaged in confronting with rains and floods' devastations. The labor force and daily wage earners are linked with agriculture land and have been thus extremely affected in district Dadu and Jacobabad. In district Dadu and Jacobabad,

most of the agriculture land is still under flood water that affecting agriculture produce associated daily wage earnings. Due to HHs income being significantly affected, the families were found taking loans from relatives, friends and neighbors to meet the urgent needs. The respondents during FGDs and KI interviews shared that in assessed districts including Dadu (65%), and Jacobabad (35%), the respective %ages of affected families have taken loans for immediate needs.

4.1.4 Small Enterprises

Markets and access to banks have incurred extensive disruption. Shopkeepers have not been able to replenish their stocks, goods are scarce, and prices have spiked. On observation, Dadu and Jacobabad revealed to have inadequate availability of food items – milk, vegetables and fruits were the least available food items across the observed districts. The most readily available items were observed to be wheat/maize, nuts, rice, eggs, cooking oil, meat and lentils/beans. However, even when markets have stocks of goods available, they are usually far away from the villages affected by the flooding (observed to be 10-15 km away, on average). Community FGD respondents spoke about the long distance (from 4-6km up to 15-20km) that people need to walk to get to the markets and bring food back to their families. The extensive road damages, stagnant water and public transport being extremely expensive or unavailable makes the journey extremely challenging

Small enterprises too are affected because of the direct damages to markets, shops, small enterprises and due to disruption of whole fabric of life-sustaining activities. Accessibility to markets and supply-chain was mostly abolished which has disrupted the functioning of small enterprises as one of the key sources of livelihood. The damages to roads and bridges on large scale has impeded accessibility to main markets (mandis) and hubs of business. Small enterprises too, have been submerged into water, inflicting damages to shops and the stocks, which has thwarted the enterprise owners into a shocking mess. Main Indus high way in district Dadu remained disconnected from Karachi even after passing one and half month of the flood and supply of goods and services disrupted. Transporter used alternate routes which was long and costly for entrepreneurs. Village level access also disconnected in Dadu and Jacobabad and the food management and provision was a major challenge faced by local population. Due to inaccessibility, the food in local market was finished and food crisis was faced by the catchment population. Markets and shops have been washed in large number in affected districts including Dadu (30%), and Jacobabad (20%).

4.1.5 Food Stocks And Consumption

The existing Food-stocks have been damaged due to rain and flood water influx in rooms and stores. The food-stocks mainly include the wheat-reservoirs (cereals/flour), submerged into flood-water and inflicted damages are reported at high level. Apart from it, due to damages of HHs-kitchen set, the kitchen-stocks including flour, sugar, tea, pulses etc. have been spoiled as well. It is evident that the destruction to kitchens is equally associated to the spoilage of kitchen kits and utensils. During displacement and in the early days of return, there had been critical need and demand for food from affected communities but the demand has been diluted with passage of time as soon the families got returned. The far-flung communities where accessibility issues are still existing like maher, Johi and KN Shah of Dadu, have fallen victim to serious food crisis. However, it is a fact that being suffered from colossal devastations, the vulnerabilities are so tremendous that the affected communities have insufficient resources to manage needs for food.

In affected families, whose income sources had been scarce already, having dependency of daily wage earnings and labour, the food consumption has been lowered. Dadu and Jacobabad was disconnected from Karachi for a long period of time because no availability of food supplies and families

faced the issues of food shortages. The food crisis initially erupted and the food management and provision was a major challenge faced by local population. Due to inaccessibility, the food in local market was finished and food crisis have been faced by the catchment population. As indicated 34% of HH in Dadu, and 29% in Jacobabad reduced their meal or compensate for their children's or elderly peoples during the flood.





4.1.6 HHs Income/Savings/Remittances

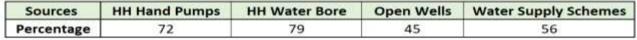
Having an account of the tremendous damages to food security and livelihood, the communities with low HHs income/savings are confronting with serious financial challenges. The existing amount and savings have been almost finished. So, Multipurpose cash-grant in lieu of the exacerbating situation may help the families with daily wages and low HHs income. The families have started selling some valuable assets on nominal prices in order to meet the immediate needs and as reflected the responses in district

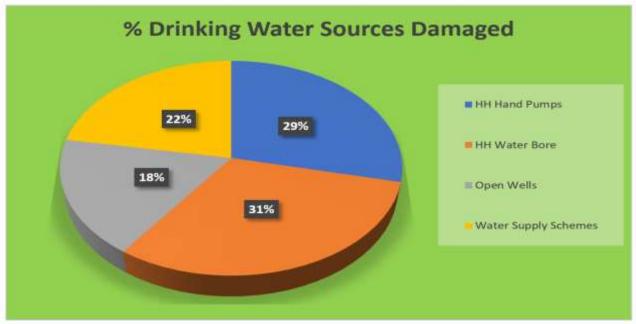
Dadu (28%), and Jacobabad (22%) of HH sold their house hold assets on nominal prices to meet their basic needs. During focus group discussions with community members, it was extracted that, HHs members sold their items such as gold and livestock etc.

5. Water Sanitation and Hygiene (WASH)

5.1 Access to Drinking Water:

Water from community-based hand pumps, drinking water supply schemes and open wells are the main sources of drinking water in assessed districts of Sindh province. Maximum damages to hand pumps and open well have been taken place due to high level of water in affected districts. In all districts, communities are fetching water from nearby available sources but quality of water is not appropriate/sufficient for drinking. 340 communal level hand pumps along with DWSS schemes in Dadu, and Jacobabad were reportedly completely damaged. Due to high level and intensity of flood water, 362 HH level water bore holes damaged. 268 open well completely damaged in Dadu and Jacobabad districts. 250 of DWSS have been damaged.





In Dadu and Jacobabad districts sources of drinking water badly affected by the flood water as indicated community level hand pumps for households (72%), HH water bore (79%), open well (45%) and water supply schemes (56%) reported completely damaged. All damaged and even partially damaged sources of drinking water completely contaminated, thus having foul smell, bad taste and turbidity. It is no way being used for drinking especially in areas, submerged into water. Water trucking was done with the support of different organizations including local level district administration. In district Dadu and Jacobabad, the water accessibility issues had been persisting and there are numerous challenges regarding the access to drinking water. It is obvious that water sources are damaged and the quality of water is contaminated having bad taste, turbidity and foul smell. The areas are facing a massive challenge the need for water. The communal tube-wells are common in some urban areas and the supply-schemes have been damaged due to damages incurred to pipeline (water supply lines). Reportedly, district Governments are working hard to keep the communal tube wells operational so that water is available to the community. Due to damages of Drinking Water Supply Schemes (DWSS), the community has to fetch water from

remotely located water-sources or to rely on water trucking so far. The need for clean drinking water in the affected communities is deepening day by day.

5.2 Water Quality

The communities have been struggling hard to pump-out the debris and flood water from water sources in those areas in which flood water level is now little bit reduced. However, the quality of water has not been substantially improved. In Dadu, and Jacobabad the quality of water is still contaminated and the need for rehabilitation, filtration and purification is massive. The responses indicate that water quality has a major issue in the assessed districts of Sindh Province. The water sources are almost 100% contaminated either chemically or micro-biologically

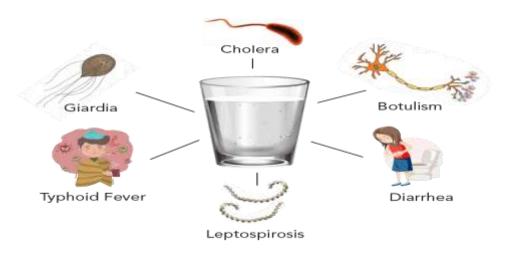




Annexure #.8 : Laboratory Test Report

5.3 Water-Borne Diseases

Water borne diseases have been widely reported by affected communities and health facilities; it includes diarrhea (52%), Gastric pain (59%), Skin diseases (67%) - due to still existence of water in their residences, body-pain and malaria (68%) and Dengue (29%). It is furthered that water-logging (stagnant water) has increased the production of mosquitoes, flies and insects. Exposure to mosquitoes during day and night time has tormented the floods-plagued communities. Therefore, the demand of the mosquito nets has been overwhelming. During focus group discussion the deaths of children were recorded in Dadu, and Jacobabad due to malaria.



Disease	DHO	PPHI	IMC	PRC	HANDS	INDUS	MSF	AKU	Grand Total
Diarrhea.	25525	22911	2997	406	2696	526	1006	1704	57771
Dysentery	3116				68		32	98	3314
Skin.	48464	25626	1733	416	3521	1179	2860	1498	85297
ARI (Acute respiratory infections)	54577	33526	2130	1384	6568	1139	4535	4781	108640
Mal Nutrition	6352					306	3116	115	9889
Deworming	4604								4604
Eye Inf:	4482				1106	464	148		6200
Pneumonia					1	351			352
Typhoid					32	24			56
Malaria Suspected	29867	15765			76	925	10733	1758	59124
Malaria Positive.	5898		332	475		521	4533		11759
Dengue Suspected			1		2		46		49
Total:	182885	97828	7193	2681	14070	5435	27009	9954	347055

Data Source: District Health Office-Dadu

5.4 Measure for Clean Drinking Water

Measures suggested by respondents include the rehabilitation of damaged water sources (68%), filtration/purification (29%) of water through installation of filtration plant or purification mechanism, continuation of water trucking (26%) as water rehabilitation is time-taking activity, provision of water storage pots (65%), provision of water-pumps (32%) and provision of solar panels (26%). Some organizations provided house hold level water purification kits and tabs, but there is a dire need of safe and clean drinking water to get rid of the diseases caused by contaminated water. During physical visits and FGDs with families and communities observed and found the lack access to sufficient safe drinking water and water supply, with most water sources being contaminated and far from camps/households. Quality of water was badly impacted by the floods. Children and females are usually responsible for water availability in households which expose them to security and health risks. Vector control is a big challenge as stagnant flood water has become a breeding site for mosquitoes and poses a high risk of outbreak of waterborne diseases such as diarrhea, skin/eye infections, malaria, and dengue fever.

5.5 Sanitation

5.5.1 Use Of Latrines Before Floods

In Sindh province, open defecation was reported before the onset of flood. Those HHs who were used latrines, completely perished in flood water Flood water inundated and also inflicted tremendous damages. HHs latrines are directly affected either due to the accumulation of debris (mud) in commodes, the demolition of latrines (structure), the overflow and the damages of the septic tanks. The overflow of septic tank and damages to sanitation channels in urban or semi-urban set-up, due to flood-water created the environmental pollution, contamination of water sources and water borne diseases. Before the onset of disaster, open-defecation is reported as 69% and use of latrines has been only 31%. But, after the onset of floods' disasters, damages inflicted to HHs latrines on wider scale and the communities are compelled to practice open defecation. While physical observation in camps it is also observed by the team to the practices of open defecation. Over all analysis reflects that, need to mass level awareness with the communities ensure the use of latrines.

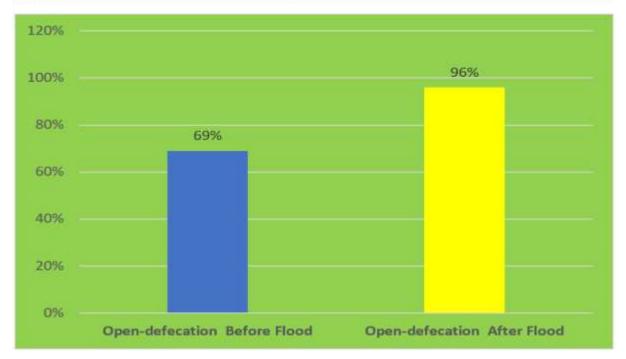
5.5.2 Use Of Latrines After Floods

After the rain floods, the open-defecation has thus been increased by 27% from 69% (overall) to 96% in assessed districts of Sindh Province, because the existing pit-latrines are mostly inundated. Being critical protection issue, the families are striving hard to rehab the minimum use of latrines. In initial days of displacement, the figures had been much higher but after the settlement in camps UNICEF provided pit latrines to minimize the open defecation. Water level is very near to under the land and dug of hole for pit latrines is difficult in this situation. There are a lot of work to be done to assume the previous status even much better than previous because higher percentage reported as open defecation before the onset of flood. Open defecation ratio is observed too much high and mass level awareness sessions with the communities to cope the situation and eradication of hygienic issues. Further to this provision of latrines during the settlement in villages should be on priority basis.





Open-defecation Before Flood	69%	
Open-defecation After Flood	96%	



5.5.2.1 Types Of Latrines

The latrines structures vary in different districts but overall, the different structures include as the pour-flush latrines (26%), Ventilated latrines (28%) and Pit-latrines (46%).

5.6 Hygiene

Hygiene practices like situation too, is nothing different rather highly uninviting, primarily due to unavailability of hygiene-items, damages to houses and washrooms. Water-logging due to stagnant water for weeks has worsened the overall situation. The overflow of pit latrines and damages to sanitation channels due to flood water logging have already added to environmental pollution. Open defecation has increased the risk of water-borne diseases including diarrhea, gastroenteritis, skin-diseases and eyes infection. So, in such situation unhygienic practices (personal hygiene) is obvious and found prevalent; use of soap, cutting nails, combing hair, brushing teeth, taking bath and wearing neat dresses is very uncommon. Primarily, due to huge want for other HHs needs and various incumbent challenges, the hygiene practices have got declined. Hand washing with soap is rare and personal hygiene practices like taking a bath, washing hands with soap after work and after defecation etc. are as rare as 55 %. Awareness, sensitization and provision of hygiene kits may help to improve the hygiene practices. The hygiene challenges include brushing mouth, lack of soap, safe places, scarcity of clean water and bathing facilities are the main challenges. However, the provision of respective facilities may not help until social mobilization is campaigned on large scale to sensitize the community about best hygiene practices in order to keep safe from diseases. During focus group discussions and physical visits, it is found that, hygienic challenges are still existed in flood affected areas. Need to prioritized to address these issues through provision of safer places by construction of latrines, provision of soaps and brushes/tooth paste.





5.7 Menstrual Hygiene Management (MHM)

Besides, the dignity kits for women and adult girls are highly needed in pursuit to the ongoing humanitarian crisis on urgent basis. It is worth mentioning that construction or rehabilitation of latrines to affected communities with special focus on women will add value to inclusive response. Due to lacking or improper functioning of sanitation facilities, the protection issues for women, adult girls, PWDs and children have been identified very high as based on the responses of 73% respondents. MHM is usually ineffectively recognized in the marginalized areas. Poor menstrual hygiene management can cause several complications and syndromes. Therefore, it was important to assess the situation and the challenges regarding MHM. In the existing situations, MHM is one of the bigger challenges for women and adult-girls. While having separate interviews REEDS-Female staff, the key informants shared that almost 53% women

and adult-girls are facing challenges regarding the availability of proper facilities including sufficient water, MHM material and privacy. This protection issue stands evenly overwhelming in the flood affected population. In all intervention regarding WASH, MHM related consideration must be taken into account. It was further probed in focus group discussions about the nature of key challenges and the findings indicate that 44% adult girls and women as per the KIIs, feel concerned about the adequate privacy, 49% facing the hygienic material for MHM, 20% about the sufficient availability of clean water and 31 % have about the safer places.

6. Protection And Inclusion

The affected population comprises of 29% women and 23% of girls (age 1-17 years). Approximately 4% of these women are currently pregnant and 6% are lactating. Key security concerns identified for women include:

- Women with marginalized family background including women-headed HHs, PWDs, elderly persons
 and extreme poverty are found traumatized. Having the psychological depression, worries and
 stresses as how to settle back with meagre resources. The families and women need to be provided
 with psychosocial support.
- Privacy has been a major concern of 31% women and lack of safe places is thus identified a major protection issue as their houses are either fully damaged or partially damaged.
- The ratio of displacement is very high, so are the risks of harassment accompanied with multiple vulnerabilities. In pursuit to local norms and cohesiveness, most of relatives provided spaces to displaced families to have protected and temporary settlements.
- Lacking of sanitation facilities (latrines) has put the women, girls, children, elderly persons and PWDs in serious protection issue and the demand of rehabilitation of latrines is thus very high.
- Remittances with poor families have been finished and women tend to force the husbands to go for labour and earnings. The opportunities have been shrinking and this has been the major cause of increasing conflicts at HH level. Several women highlighted the prevalence of stressful situation. Meanwhile, the stress has also made women more vulnerable and the risks of aggression, violence and conflicts has increased the vulnerabilities.
- There had been risks for harassment, sexual abuse and abuse for assistance on the part of women and children during displacement, however the return of families have diluted the intensity of identified risk.
- Increased risks of security situation, threats and thefts due to multiple social constraints have been increased the plight of marginalized families. Several house hold appliances have been looted on boats in flood affected districts of Sindh were reported.
- Women and child headed HHs might be having poorer situation that needs to be prioritized.
- Pregnant and lactating mothers have been more exposed to malnutrition supplements. There was an
 official call from administration of Dadu and Jacobabad confirmed that during floods, there was high
 demand for child/babies feeder and nutrition supplements. Nutritious foods and supplements are
 urged for pregnant and lactating mothers.
- Girls and boys are exposed to new physical risks and hazards as a result of the floods bringing a critical
 need to raise awareness and support mitigation measures to address these risks. REEDS is cognizant of
 such risks and has sensitized its staff through training
- Women-headed HHs and those with elderly persons were hard to have access the point of distribution. Further, remotely located families also faced the accessibility issue. It was found that professional beggars and lobbies were active and rushed to the assistance. The better strategy was to assess and identify the right holders and to provide the assistance safely and responsibly.
- Gender discrimination and societal norms might place vulnerable girls, women headed families, elderly persons and PWDs to be deprived of receiving rehabilitation assistance.

Recommendations

Theme/Area	Situation	Early Recovery & Rehabilitation Needs
Shelter	In Sindh Province 86% of HHs structure is Kacha, Mix or hurt type and damages of HH occurred including Fully and Partially. Millions of populations displaced due to this destruction.	 Along with safe shelter, construction material and tools, shelter kits, latrines and bed nets are also desperately needed. Winterization kits including blankets/quilts, mattress, cushion etc. are required as the harsh winter season has approached. Cash for work/food for work as a preferred modality for rehab/reconstruction.
	Mosquito production increased due to stagnant water. HHs commodities including furniture, beds, blankets etc. have been damaged. Mostly plastic sheet are used in rooms instead of Charpai and have been damaged due to influx of rain water, mud and sand in rooms Animal's shades are mostly damaged	Mosquito nets and Mosquito repellents. Provision of tarpaulin sheets and blankets to flood affected families to withstand in harsh weather of winter. • Provision of Charpai/Cots • On small scales, animal's shades can
WASH (Water)	water sources are damaged either partially or fully in most affected areas on large scale. HHPs, water bores (Pressure-Pumps), Open Wells are damaged and DWSS are widely damaged. Availability of safe and clean drinking water has been a significant problem	 be installed or assistance provided in construction of shelter for their livestock Provision or installation of water purification or filtration plants as communities have returned to their villages. Rehab of Communal based DWSS through provision of pipelines or repair of damaged parts like motor pumps, pipes or solar panels. Provision of water-storage kits to affected community and jerry cans for water storage at HHs level.
Sanitation and hygiene	Pour flush, Ventilated and Pit latrines were inundated. The structures are perished and septic areas filled with mud/rain water. It is also a critical protection issue for women, children and PWDs. Personal hygiene has been substantially poor	 Provide adequate sanitation services through rehabilitation/construction of toilets and pit latrines to avoid open defecation, especially for female and child headed households. Increase awareness for targeted communities regarding WASH practices, especially promotion of hygiene behavior changes and

		CALACIL
	Agricrons and vogetables were	 communication aspects of WASH. Provision of hygiene kits and soaps Distribution of dignity kits for adult girls and women as essential item for protection and inclusive needs.
	Agri-crops and vegetables were inundated and perished. Horticulture is substantially damaged. Savings of low-income and daily wages dependent HHs is lost. Labour and daily wage earners are affected	Prioritize urgent humanitarian assistance – particularly food, in-kind items, livelihoods and cash assistance. • Support for nutrition for highly vulnerable families, pregnant/ lactating mothers, the neonates and babies • Distribution of Seasonal Agri-seeds in particular seasons of growth • Removal of debris from Agri-land
Food Security and	Food stocks are badly affected Accessibility issues have increased Kitchens got damaged	
Livelihood	Small enterprises are reportedly damaged as evident in assessment findings	Support for rehabilitation of small enterprises
	Outbreak of diseases in animals caused their deaths. Scarcity of Livestock fodder	 Carpet vaccination Coordination with livestock department and diagnosis, medication in target areas Provision of fodder as per needs
	Irrigation channels and irrigation facilities have been damaged	 Rehab of irrigation channels Rehab and provision of damaged facilities for agriculture like tubewells.
Inclusion Protection, DRR and Psychosocial Support	Several people in community are found traumatized with the feelings of depression, stress and anxiety	 Provision of psychosocial counseling and support to affected communities as well the specific traumatized individuals and women especially Capacity building of the communities regarding Disaster Risk Reduction, establishment of Community Emergency Response Teams and their Capacity building with Provision of Emergency Kits including lifesaving kits like life jackets, ropes, tubes etc. Awareness about harassment, GBV issues and referral mechanism Risk of being neglected the stranded population in remote villages (more flood affected)
Coordination	Coordination needs to be strengthened with response and	Well-coordinated response is need of the hour. Coordination with the communities

	humanitarian agencies	and government line departments should be effectively.
Community Physical Infrastructure schemes	Road infrastructures and small bridges damages observed in flood affected districts. Damages of Drinking Water Schemes observed. Damages of walking tracks or pathways due to mud or derbies.	

7. Risks

- More marginalized families including women headed, child headed, PWDs and elderly people may get overlooked and the selection criteria must pay due heed to their multiple vulnerabilities
- Protection issues for women, girls and children are rampant with high risks
- Hygiene kits must include MHM kits to ease the life of adolescent girls and women
- In all need assessments and selection of right-holders, female enumerators must be included to minimize the risks of unannounced and special needs of women.

8. Lesson Learnt

- 1. The compliances with the government policies guarantees the successful execution of the project which will be further ensured where needed i.e. NOC should be granted from District Administration as well Provisional Disaster Management Authority
- 2. During construction/repair of the latrines/school buildings/handpumps aprons Disaster Risk Reduction should be considered to avoid any risk in future i.e. need to raise the toilet bed (2.5-3 feet high from the ground level) and also raise the apron of handpump (2.5-3 feet high from the ground level), in future it will be applied to all.
- 3. Strong coordination with the local key stakeholders like District Social Welfare Department, District Health Department, Public Health Engineering, organization implementing same type of the project activities etc. to avoid duplication
- **4.** The inclusion of the most vulnerable groups like women, persons with disabilities in the community-based relief and rehabilitation committee enhanced their confidence which will be further ensured for active participation
- **5.** Capacity of the local government officials on disaster preparedness and disaster risk reduction should be enhanced specific to Core Humanitarian Standards, SPHERE etc.
- **6.** Agriculture and livestock sector along with entrepreneurship should be more focused during the planning for early recovery and rehabilitation

1. NOC Received from the PDMA-Sindh

PDMA(S)/REED SOCIETY/NOC/133 GOVERNMENT OF SINDH REHABILITATION DEPARTMENT PROVINCIAL DISASTER MANAGEMENT AUTHORITY (SINDH) BUILDING NO.C-26, MAIN KHAYABAN-E-JAMI, DHA PHASE-VII, KARACHI.

PHONE: 99332883-5, FAX: 99332887, dated: \2.11.2022

To,

Mr. Shahid Saleem, Executive Director, REED Society,

RAHIM YAR KHAN.

Subject: -

REQUEST OF PERMISSION FLOOD RESPONSE ACTIVITIES 2022 IN DISTRICT DADU, JAMSHORO AND JACOBABAD.

I arm directed to refer to above cited subject and to state that Provincial Disaster Management Authority Sindh, has NO OBJECTION on Project activities in Dadu, Jamshoro and Jacobabad by Rural Education & Economic Development Society (REED Society).

The project activity shall be carried out strictly as per the Rule Policies of the Government of Pakistan/ Government of Sindh.

This is for information and necessary action please. 30

> (AJAY KUMAR SEWANI) Assistant Director (Operations) PDMA Sindh

CC to:

1. The P.S to Director General PDMA Sindh.

2. The P.S to Deputy Commissioner Dadu, Jamshoro and Jacobabad.

2. NOC Received from the District Administration Dadu



GOVERNMENT OF SINDH OFFICE OF THE DEPUTY COMMISSIONER JACOBABAD

No.DC/JCD/46/2022-23 Jacobabad dated 9th DEC, 2022

To,

Shahid Saleem, Executive Director, REED Society.

SUBJECT: NO OBJECTION CERTIFICATE (NOC) FOR IMPLEMENTATION OF FLOOD EMERGENCY RESPONSE ACTIVITIES IN DISTRICT JACOBABAD.

With reference to your letter No.Reeds/90/22 dated 20 October 20, 2022 regarding NO-OBJECTION CERTIFICATE for implementation of "flood emergency response activities" in district Jacobabad.

You are therefore allowed to intervene in said activity in the below mention prioritized

UCs.

S.No	Union Council Name	Taulka	
01	Tajo khoso	Thul	
02	Tunveri	Thul	
03	Kareemabad	Thul	
04	Bagapur	Jacobabad	
05	Bahadurpur	Thul	

You are also advised to share Progress and work plan on regular basis and implementing project activities with close coordination and guidance of District Authorities.

Flood Relief Operation

@Deputy Commissioner

Jacobabad

C.c

- 1. Assistant Commissioner Jacobabad .
- 2. Assistant Commissioner Thul
- 3. Office copy

3. NOC Received from the District Administration Jacobabad

Tel. 025-9200250-51 Fax, 025-9200252

NO.506/DC/JB/- 600 OF 2022 OFFICE OF THE DEPUTY COMMISSIONER/COLLECTOR DADU -9 - 2022 Dadu, dated

The Regional Manager & Project Coordinator, Rural Education & Economic Development Society (REEDS).

SUBJECT: ISSUANCE OF NOC TO WORK FOR IMPLEMENTATION OF FLOOD EMERGENCY RESPONSE PROJECT IN DISTRICT DADU.

Your application dated 6.9.2022 on the subject noted above.

With reference to your above referred application and reports received from the Reference:-Senior Superintendent of Police Dadu vide letter No: DIB/DU/10298 dated 8.9.2022 and the Deputy Director HQ Social Welfare Dadu under letter No:DD/HQ/SW/DU/NOC/ 160 dated 7.9.2022, your Organization is hereby allowed to work for implementation of flood emergency response project for providing relief, rescue and other support to the flood affected population in District Dadu subject to the adherence of all laws, rules, regulations, terms conditions and MOU signed between your organization and the Government. Besides you shall comply with following terms and conditions:

- Required codal formalities of the Project as per SOP / MOU shall be completed.
- 2. The activity report with photographs shall be submitted to this office regularly.
- 3. There shall be no contradiction of Law, Rules, Government Policies, SOP and MOU.
- 4. The Organization shall remain in close coordination with the Assistant Commissioners. Mukhtiarkars, DCCL (Focal Person Dr. Zahid Hussain Khahro 03003254849), Deputy Commissioner office Dadu and other concerned Departments at District / Taluka level
- 5. During the course of appointment/ recruitment of human resources, preference shall be given to the local people of District Dadu.
- 6. All the work shall be done by your NGO with the consultation and coordination of District Administration Dadu.
- 7. The NGO will not be involved in any unlawful, immoral, antisocial activities nor any other activities against the solidarity and safety of Pakistan.

FOR DEPUTY DADE

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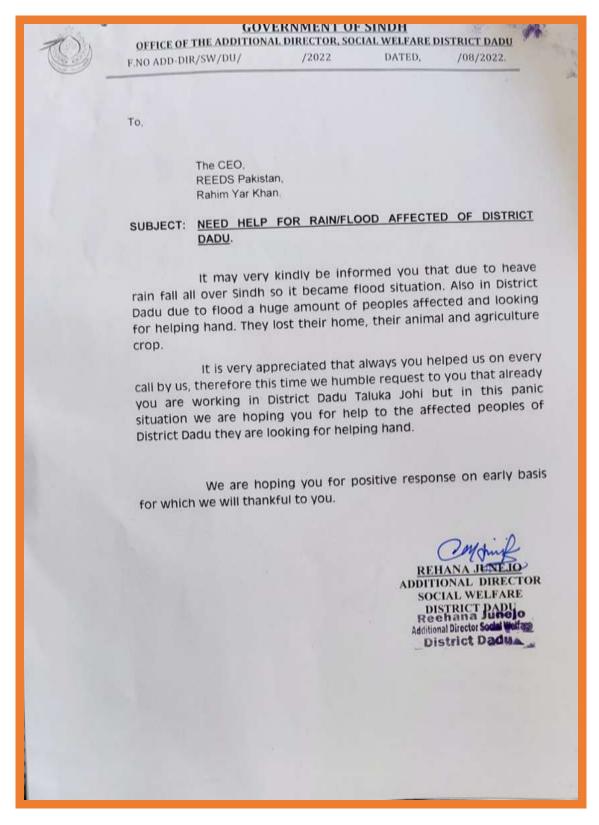
1. The Senior Superintendent of Police Dadu.

- 2. The Deputy Director, Social Welfare Department, District Dadu.
- 3. The Assistant Commissioner Dadu/ Johi/ Mehar/ KN Shah.
- 4. The Mukhtiarkar Dadu/ Johi/ Mehar/ KN Shah.
- The Focal Person DCCL Dadu Dr. Zahid Hussain Khahro.

The PS to Deputy Commissioner Dadu.

FOR DEPUTY COMMISSIONER, DADU

4. Request for support from District Social Welfare Department Dadu



5. REEDS nomination as Active Social Worker by Commissioner to be taken as non-official members in Sindh Social-Welfare Council



Tel: (025) 9200250-1

<u>Fax : (025) 9200252</u> Email : <u>dedadu i @gmail.com</u> No:DC/PA/- 124

OFFICE OF THE DEPUTY COMMISSIONER/ COLECTOR DADU

Dated: 28.06.2022

To

The Assistant Commissioner (General), Commissioner Office, Hyderabad Division,

Hyderabad.

SUBJECT:

NOMINATION OF ACTIVE SOCIAL WORKER BY COMMISSIONERS TO BE TAKEN AS NON-OFFICIAL MEMBERS

IN SINDH SOCIAL WELFARE COUNCIL.

REF'NCE:

Letter No.3041 - AC(G)/Commr/ 2022 - 3556 dated 28.06.2022, on the

subject noted above.

The following three names are hereby recommended for further re-constitution of Sindh Social Welfare Council:

S#	Full Name	Contact Number	Name of Organization.
01	Dr. Muhammad Abdullah Avais s/o Kamal Ahmed	03008118467	Rural Education & Economic Development Society (REEDS).
02	Madam Azra Memon d//o Ali Bux Memon	03443230529	Nari Development Organization (NDO)
03	Mr. Mashooque Birahmani	03003024563	Sujag Sansar Organization (SSO)

ADDITIONAL DENUTY COMMISSIONER-II FOR DEPUTY COMMISSIONER, DADU

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Tel. 025-9200250-51 Fax, 025-9200252 NO.462/DC/JB/-36 OF 2023
OFFICE OF THE
DEPUTY COMMISSIONER / COLLECTOR DADU
Dadu, dated 06 - 01 - 2023

To.

- 1. The Senior Superintendent of Police, Dadu.
- 2. The Incharge / District Officer, FIU, Dadu.
- 3. The Additional Director, Social Welfare, Dadu.
- 4. The District Officer, Labour Department, Dadu.
- 5. The Deputy Director, Women Development Department, Dadu @ Hyderabad.
- 6. The District Officer, Women Development Department, Dadu.
- 7. The Child Protection Officer, Child Protection Unit, Dadu.
- 8. Mr. Mashooque Ait Bulkanani, CEO Sujag Sansar Organization, Dadu/ Johi.
- 9. Mr. Imran Ali Bhand, Member District Human Rights Committee Dadu.
- 10. Ms. Azra Memon, Chief Executive Nari Development Organization Johi.
- Dr. Muhammad Abdullah Awais, Regional Manager & Project Coordinator Rural Education & Economic Development Society (REEDS) NGO Dadu.

SUBJECT:- MEETING OF DISTRICT ANTI-HUMAN TRAFFICKING AND ANTI BONDED LABOUR AND IMPLEMENTATION COMMITTEE.

The meeting of District Anti-Human Trafficking and Anti Bonded Labour and Implementation Committee Dadu has been scheduled to be held on 10-01-2023 (Tuesday) at 2-00 PM at Conference Room of Deputy Commissioner office Dadu.

The agenda points of the meeting are as under:

- 1. To review the implementation status of decisions taken in the last meeting dated 08-12-2022.
- 2. Ensure effective implementation of Anti-Human Trafficking Labour related laws.
- 3. Ensure effective action to combat Human Trafficking including Bonded Labour in District.
- 4. Keep close liaison with relevant stakeholders at Provincial level.
- Undertake necessary measures to increase continuous monitoring, vigilance and regular inspection to take prompt action against Human Trafficking and Bonded Labour.
- 6. Ensure collection and reporting of data relating to Human Trafficking & Bonded Labour.
- Develop and strengthen cooperation among all relevant bodies at District level to facilitate victims of the crime.
- 8. Keep record of Victims identified, referred and facilitated by local bodies/ administration.
- 9. Educate/enhance capacity of all concerned atakeholders on Bonded Labour & Human Trafficking
- 10. Make awareness regarding Human Trafficking and Bonded Labour in general public.
- Report monthly performance review and statistics on Human Trafficking and Bonded Labour to concerned Provincial Committee.

You are requested to please make it convenient to attend the said meeting on the above date, time and place positively.

ADDITIONAL DERUTY COMMISSIONER'-I

DADU

Copy fdd. to the PS to kind Deputy Commissioner Dadu.

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6. Acknowledgement/Recognition certificate awarded by District Administration Dadu in favor of REEDS Flood response to 2022 during relief phase





Tel. 025-9200250-51 Fax. 025-9200252 NO.DC/PA/-36 OF 2023

OFFICE OF THE

DEPUTY COMMISSIONER/ COLLECTOR, DADU Dadu, dated; 18 . 01 . 2023

To

Mr. Shahid Saleem, Executive Director

Rural Education & Economic Development Society

(REEDS)-Pakistan Rahim Yar Khan.

SUBJECT:

APPRECIATION FOR HELPING FLOOD AFFECTED COMMUNITIES

(SINDH FLOOD-2022) IN DADU-SINDH.

I express my appreciation for your support in responding, rescue, relief and rehabilitation activities during the supper / floods -2022 in Dadu with the collaboration of the office of "Deputy Commissioner Dadu".

Moreover, we thank DEC, DRA, Tearfund-UK, and UKaid for their financial support in reaching out of the most vulnerable flood-affected communities and managing the IDP camps.

Your experienced and professional team's commitment was incredibly outsanding and fulfilled the dire needs of flood-affected communities. In this regard, we request you to extend further support for rehabilitating the damaged government schools, especially girls' schools, health facilities, vocational training centers, and one-room shelters for flood affected families in different areas of district Dadu.

We wish you all success in your future endeavor & looking forward to more effective constant coordination.

Waram Regards.

(SYED MURTAZA ALI SHAH) DEPUTY COMMISSIONER / COLLECTOR DADU

CHAIRMAN

DISTRICT DISASTER MANAGEMENT AUTHORITY

7. Needs Assessment Key Informant Interviews (KIIs) Tool

Resilient Recovery, Rehabilitation and Reconstruction

Needs Assessment

Key Informant Interviews (KIIs) - Tool

Informed Consent:	
My name is (name of the Enumerator)	and I am working with
Rural Education and Economic Development Se	ociety (REEDS) Pakistan. This survey is being conducted
regarding the damages of monsoon rains and the	subsequent floods in order to inform the future planning.
Are you willing to be interviewed? Yes	_ No

2. Gender	1= Male		2= Female	
3. Position/Title/Designation			Name of Organization/Department	
Phone No.				
5. District			Tehsil	
List of affected union councils in the district				
Severely Affected UCs	Moderat	ely Affected UCs	Slightly affected UCs	Not affected UC
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. B. Damages Assessment Shelter # of Deaths in the district	1. 2, 3. 4. 5. 6. 7. 8. 9. 10.	√: C	1. 2. 3. 4. 5. 6. 7. 8. 9. 10. # of Injured district # Partially Damaged	1. 2. 3. 4. 5. 6. 7. 8. 9. 10.
# of Fully Damaged HHs (F.D) # of affected population			(P.D) # of displaced	
1. Disaggregated data of Affecte	d Papulati	on	population	
# of Men (18- 59)Y	1	nen (18- 59)Y	# of Pregnant Women	# of Lactating Women
# of Babies (Under age 5)	# of Chil	of Children (6-17) # of Elderly persons (Above 60)		# of PWDs
2. What number of displaced HI	ls is curre	ntly living in?		
Public Buildings	Camps	Relatives /Neighbours	Tents (Outside home)	Without Tents
3. What is the type of HHs shelte	r, the peo	ple have been living in	before the onset of floods	?
Pakka (Bricks with cement/mud)	Kacha (Mud Mixed stones/ Clay)	Mix (Pakka /Kacha)	Huts	Mention others: IF any with numbers

	TOTAL CONTRACTOR OF THE PARTY O		Tarpaulin	CGI	7-424-7-1, 90 Harrison 1 1 1 1 1 1
Cash Grant	Construction Material	Tents	Sheet (% HHs)	Sheets (% HHs	Plastic Sheet (% HHs)
5. What long-term developmen	t needs for HHs	-Shelter are there	(% HHs) ?	1	
Cash Grant (% HHs)	Constructio n Material (% HHs)	Construction of damaged part	Construction	on of HH	
6. What particular HHs-commo	udities have bee	n damaged during	flood? Cive	in HHe &	
o. what particular fifts-commo	Junies nave bee	n damaged during	Clothes/Bo		I
Kitchen-sets	Stocked- Food	Beds/Furnitures	xes/ Blankets	Applianc es	Mention others
Describe if something missing:					
Food Security and Livelihood (FSL)				
A	griculture Depa	rtment & other K	ey Informan	ts.	
1. What are the main sources o					
Agriculture (Farmers/T enants)	Livestock	Govt Jobs	Pvt Jobs	Skilled/ Unskilled Lbr	Shop-keeping/ Enterprises
Tourism	Fisheries	Remittances	Mention Others!		
2. What particular sources of li	velihood have b	een most affected	in this area?	Give in num	bers.
Agriculture (Acr) (Farmers/T enants)	Livestock in No. (Total)	Pvt Jobs (%)	Skilled/ Unskilled Lbr (%)	Shop- keeping/ Small Enterpris es in Numbers.	
Tourism	Fisheries	Remittances	Mention Others!		
3. What total Agri-land (Acres/ Agriculture Department)	Kanal) – cultiva	ible land has been	damaged? (As per Secon	dary data –
1:-Agre-Land (Acrs)	2:- Crops-Land	(Acrs)	3;- Vegeta	bles 41	Horticulture
4. What particular crops have l					
Maize (Makai)	Millet (Bajra)	Cotton Crops	Sunflow er-Crops	Tobacco	Sugarcane
Rice	Pea-Nuts	Mention Others:			

5. What particular vegetable-Pl (Acres)	lants have been	damaged by rains	and floods in	n your area?	Give in Hectares
Tomato	Onion	Garlic (Lehsin)	Okra (Bindi)	Pumpkin (Kadu)	Bitter Gourd (Karela)
Chilli (Mirch)	Guord (Tinda)	Mention others:			
6. What particular horticulture	/ Fruit Orchar	d have been dama	ged? Give in	Hectares (A	cres)!
Peach	Apple	Amlok (Red Persimmon)	Guauava	Pears (Nashpati)	Plumb (Alocha) Apricot (Khobani)
Wall-Nuts (Akhrot)					
7. What specific agricultural in Agriculture Department) Give		s been damaged ?	(Consult Pri	mary vs Seco	ndary data –
Irrigation Channels (Length in mtrs)	Tube Wells	Pressure Pumps #	Open- Wells #	Solar Panels #	
8. What particular and immedi	ate needs recar	ding Agriculture	are there?		
Cultivation / Debris excavation	Seasonal Seeds and tools	Rehab of Irrigation channels	Provision of Fruit plants	Support for fetilizer	Rehab of damaged water sources (Tube Wells/ Pressure Pump), Solar Panels
Livestock	1.01				
9. How many livestock has been	perished? (Co	onsult Primary & S	econdary dat	ta – Livestoc	k Department
Goats	Sheep	Cow	Buffaloes	Camel/Do nkeys	Poultry
10. In your opinion what % of l 11. What %age of HHs (familie 12. What %age of HHs (Familie 13. What type of specific livesto secondary sources! 1.	s) have lost live es) have lost live ock diseases out 2.	estock fodder (store estock shelter? break has been no 3.	ed/fodder cro ticed after flo	pps)? Also Gi	ve in acres.
Diagnosis & Treatment	Fodder	Shelter	Support for livestock to Most vulnerable HHs who lost		
Shops and Small Enterprises. 15. What specific number of shops are shown in the specific number of shops are shown in the shown	analomo II aut	nulsas kassa kassa l	omonada (2)	a mumb	
Shops 1. Shops	ops/smail enter	prises have been d		Small Enter	

16. What support/assista	Business	Marketable	Cash for	Food for	
Cash-Grant	startups	skills	work	work	
TO COMPANY TO THE STATE OF THE	- startups	SKIIIS	WOIK	WOIK	
Nutrition and Inclusion	(Also				
1. In your opinion what		d families face (d)	the acute shor	tage of prefe	erred food?
1-5%	6-10%	11-15%	16-20%	21-25%	26-30%
31-40%	41-50%	51-60%	61-70%	71-80%	81-100%
2. In your opinion what relative?	%age of flood affecte	d families Borrow	ed food, or reli	ed on help f	rom a friend or
1-5%	6-10%	11-15%	16-20%	21-25%	26-30%
31-40%	41-50%	51-60%	61-70%	71-80%	81-100%
3. What %age of flood a	iffected families reduc	ed the number of	meals eaten in	a day?	
1-5%	6-10%	11-15%	16-20%	21-25%	26-30%
31-40%	41-50%	51-60%	61-70%	71-80%	81-100%
4. What %age of flood a			7,347,447,747,767,67		1,100,000,000,000,000,000
1-5%	6-10%	11-15%	16-20%	21-25%	26-30%
31-40%	41-50%	51-60%	61-70%	71-80%	81-100%
5. What %age of flood a		1.00 01.10.00.00.00.			31.00 30.00 30.00
6. What %age of flood a					remittances)
7. What %age of flood a	ffected families have	cold their livector	to have mone		
		som men nvestoc	k to have mone	y:	
				y r	
8. What %age of flood a	iffected families have	Borrowed money		(2.1)	tive Reponses in
8. What %age of flood a 9. Do the Pregnant and	iffected families have	Borrowed money		(2.1)	tive Reponses in
8. What %age of flood a	ffected families have lactating mothers face	Borrowed money		Give respec	tive Reponses in
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%)	ffected families have lactating mothers face	Borrowed money e deficiency of pro	per nutrition? Don't Know	Give respec	120
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children unde	affected families have lactating mothers face No (9 er age five face deficie	Borrowed money e deficiency of pro	per nutrition? Don't Know	Give respec	
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children under Yes (%)	Affected families have lactating mothers face No (9 er age five face deficie No (9	Borrowed money e deficiency of pro ency of proper nut	Per nutrition? Don't Know rition? Give re Don't Know	Give respec	onses in %ages
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children unde	No (9 No (9 No (9 Per age five face deficients of the control of the contro	Borrowed money e deficiency of pro ency of proper nut	Per nutrition? Don't Know rition? Give re Don't Know	Give respect v (%) spective rep v (%) ency after flo	onses in %ages
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children undo Yes (%) 11. Whether the elderly Yes (%)	No (9 er age five face deficie No (9 persons have been aff	Borrowed money e deficiency of pro ency of proper nut e) fected with regard	Don't Know rition? Give re Don't Know to food deficie	Give respect v (%) spective rep v (%) ency after flo	onses in %ages
8. What %age of flood a 9. Do the Pregnant and wages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly yes (%) Water Sanitation and H	No (9 er age five face deficie No (9 ersons have been aff No (9 persons (WASH)	Borrowed money e deficiency of pro ency of proper nut e) fected with regard	Don't Knov Don't Knov rition? Give re Don't Knov to food deficie Don't Knov	Give respective report (%) (%) (%) (%) (%) (%) (%)	onses in %ages'
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children undo Yes (%) 11. Whether the elderly Yes (%)	No (9 er age five face deficie No (9 ersons have been aff No (9 persons (WASH)	Borrowed money e deficiency of pro ency of proper nut e) fected with regard	Don't Knov Don't Knov rition? Give re Don't Knov to food deficie Don't Knov	Give respective report (%) (%) (%) (%) (%) (%) (%)	onses in %ages'
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children under Yes (%) 11. Whether the elderly Yes (%) Water Sanitation and H 1. What was the main so number is available.	No (9 er age five face deficie No (9 ersons have been af No (9 persons (WASH) purce of drinking wate	Borrowed money e deficiency of pro ency of proper nut e) fected with regard e) er before flood in	Don't Know rition? Give re Don't Know to food deficie Don't Know	Give respective report (%) (%) (%) ency after flow (%) (%) areas? (%ag	onses in % ages oods? es) Also mentio
8. What %age of flood a 9. Do the Pregnant and wages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly yes (%) Water Sanitation and H 1. What was the main se	No (9 er age five face deficie No (9 ersons have been aff No (9 persons (WASH)	Borrowed money e deficiency of pro ency of proper nut e) fected with regard e) er before flood in	Don't Know rition? Give re Don't Know to food deficie Don't Know	Give respective report (%) (%) (%) (%) (%) (%) (%)	onses in %ages'
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children under Yes (%) 11. Whether the elderly Yes (%) Water Sanitation and H 1. What was the main so number is available.	No (9 er age five face deficie No (9 ersons have been af No (9 persons (WASH) purce of drinking wate	Borrowed money e deficiency of pro ency of proper nut e) fected with regard e) er before flood in	Don't Know rition? Give re Don't Know to food deficie Don't Know flood affected a	Give respective report (%) (%) ency after flow (%) areas? (%ag	onses in % ages oods? es) Also mentio
8. What %age of flood a 9. Do the Pregnant and wages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump	No (9 er age five face deficie No (9 er sons have been aff No (9 persons have been aff No (9 HH Water E	Borrowed money e deficiency of pro ency of proper nut e) fected with regard e) er before flood in Bore Open Wells	Don't Know rition? Give re Don't Know to food deficie Don't Know flood affected a Tube Wells	Give respective report (%) (%) (%) (%) (%) (%) (%) (%) (%) (%)	onses in %ages' oods? es) Also mentio
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly Yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump 2. What particular source.	No (9 er age five face deficie No (9 er age five face deficie No (9 persons have been aff No (9 purce of drinking water HH Water E	Borrowed money e deficiency of pro ency of proper nut e) fected with regard e) er before flood in Bore Open Wells	Don't Know rition? Give re Don't Know to food deficie Don't Know flood affected a Tube Wells	Give respective report (%) (%) (%) (%) (%) (%) (%) (%) (%) (%)	onses in %ages' oods? es) Also mentio
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly Yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump 2. What particular sour mention if number is available.	No (9 er age five face deficie No (9 er age five face deficie No (9 ersons have been af No (9 ersons have been af No (9 ersons have been af HH Water E	Borrowed money e deficiency of pro ency of proper nut b) fected with regard c) er before flood in Bore Open Wells have been damag	Don't Know I to food deficie Don't Know I to food affected a Tube Wells Tube	Give respective report (%) spective report (%) ency after flow (%) areas? (% age Spring-Water cted areas?	onses in %ages' oods? es) Also mentio DWSS scheme (%ages) Also
8. What %age of flood a 9. Do the Pregnant and wages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump	No (9 er age five face deficie No (9 er age five face deficie No (9 persons have been aff No (9 purce of drinking water HH Water E	Borrowed money e deficiency of pro ency of proper nut b) fected with regard c) er before flood in Bore Open Wells have been damag	Don't Know rition? Give re Don't Know to food deficie Don't Know flood affected a Tube Wells Tube Tube	Give respective report (%) (%) (%) (%) (%) (%) (%) (%) (%) (%)	onses in %ages' oods? es) Also mentio
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly Yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump 2. What particular sour mention if number is available.	No (9 er age five face deficie No (9 er age five face deficie No (9 ersons have been af No (9 ersons have been af No (9 ersons have been af HH Water E	Borrowed money e deficiency of pro ency of proper nut b) fected with regard c) er before flood in Bore Open Wells have been damag	Don't Know I to food deficie Don't Know I to food affected a Tube Wells Tube	Give respective report (%) spective report (%) ency after flow (%) areas? (% age Spring-Water cted areas?	onses in %ages' oods? es) Also mentio DWSS scheme (%ages) Also
8. What %age of flood a 9. Do the Pregnant and wages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump 2. What particular sourmention if number is available and H HH Hand pump	No (9 er age five face deficie No (9 er age five face deficie No (9 persons have been aff No (9 persons definition water HH Water E ces of drinking water ailable. HH Water E	Borrowed money e deficiency of pro ency of proper nut e) fected with regard e) er before flood in Bore Open Wells have been damag	Don't Know rition? Give re Don't Know to food deficie Don't Know flood affected a Tube Wells Tube Wells	Give respect (%) spective rep (%) ency after flo (%) areas? (%ag Spring- Water cted areas? Spring- Water	onses in %ages' oods? es) Also mentio DWSS scheme (%ages) Also DWSS scheme
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump 2. What particular sour mention if number is available available. HH Hand pump	No (9 er age five face deficie No (9 er age five face deficie No (9 persons have been aff No (9 persons definition water HH Water E ces of drinking water ailable. HH Water E milies face the issues of a	Borrowed money e deficiency of pro ency of proper nut for the proper n	Don't Know rition? Give re Don't Know to food deficie Don't Know flood affected a Tube Wells Tube Wells	Give respect (%) spective rep (%) ency after flo (%) areas? (%ag Spring- Water cted areas? Spring- Water	onses in %ages' oods? es) Also mentio DWSS scheme (%ages) Also DWSS scheme
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump 2. What particular sour mention if number is available available. HH Hand pump	No (9 er age five face deficie No (9 er age five face deficie No (9 persons have been aff No (9 persons definition water HH Water E ces of drinking water ailable. HH Water E	Borrowed money e deficiency of pro ency of proper nut e) fected with regard e) er before flood in Bore Open Wells have been damag	Don't Know rition? Give re Don't Know to food deficie Don't Know flood affected a Tube Wells Tube Wells	Give respect (%) spective rep (%) ency after flo (%) areas? (%ag Spring- Water cted areas? Spring- Water	onses in %ages oods? es) Also mentio DWSS scheme (%ages) Also DWSS scheme
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump 2. What particular sour mention if number is available available. HH Hand pump	No (9 er age five face deficie No (9 er age five face deficie No (9 persons have been aff No (9 persons have been aff No (9 ygiene (WASH) burce of drinking water ailable. HH Water E millies face the issues of a	Borrowed money e deficiency of pro ency of proper nut for the proper n	Don't Know rition? Give re Don't Know to food deficie Don't Know flood affected a Tube Wells Tube Wells	Give respect (%) spective rep (%) ency after flo (%) areas? (%ag Spring- Water cted areas? Spring- Water	onses in %ages' oods? es) Also mentio DWSS scheme (%ages) Also DWSS scheme
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump 2. What particular sour mention if number is available available. HH Hand pump	No (9 er age five face deficie No (9 er age five face deficie No (9 persons have been aff No (9 persons have been aff No (9 ygiene (WASH) burce of drinking water ailable. HH Water E millies face the issues of a	Borrowed money e deficiency of pro ency of proper nut for the proper n	Don't Know rition? Don't Know rition? Give re Don't Know to food deficie Don't Know flood affected a Tube Wells Tube Wells Tube Wells Tube Wells	Give respect (%) spective rep (%) ency after flow (%) areas? (%ag Spring- Water cted areas? Spring- Water Give percent	onses in %ages' oods? es) Also mentio DWSS scheme (%ages) Also DWSS scheme
8. What %age of flood a 9. Do the Pregnant and wages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump 2. What particular sourmention if number is available available. HH Hand pump 3. Do the flood affected far yes 4. What is the current so	No (9 er age five face deficie No (9 er age five face deficie No (9 persons have been aff No (9 persons definition of the second of the sec	Borrowed money e deficiency of pro ency of proper nut e) fected with regard e) er before flood in Bore Open Wells have been damag fore Open Wells access to safe/clean Some How er?	Don't Know rition? Give re Don't Know to food deficie Don't Know flood affected a Tube Wells drinking water? Fetching	Give respect (onses in %ages' oods? es) Also mentio DWSS scheme (%ages) Also DWSS scheme
8. What %age of flood a 9. Do the Pregnant and %ages? Yes (%) 10. Do the children under yes (%) 11. Whether the elderly yes (%) Water Sanitation and H 1. What was the main so number is available. HH Hand pump 2. What particular sour mention if number is available available. HH Hand pump	No (9 er age five face deficie No (9 er age five face deficie No (9 persons have been aff No (9 persons have been aff No (9 ygiene (WASH) burce of drinking water ailable. HH Water E millies face the issues of a	Borrowed money e deficiency of pro ency of proper nut e) fected with regard e) er before flood in Bore Open Wells have been damag fore Open Wells access to safe/clean Some How er?	Don't Know rition? Don't Know rition? Give re Don't Know to food deficie Don't Know flood affected a Tube Wells Tube Wells Tube Wells Tube Wells	Give respect (%) spective rep (%) ency after flow (%) areas? (%ag Spring- Water cted areas? Spring- Water Give percent	onses in %ages' oods? es) Also mentio DWSS scheme (%ages) Also DWSS scheme

Water tanks	Water drums	Water Coolers/ Jerry cans	Water pots			
6. Do you think, the quality of o	drinking water aff	ected in flood :	affected areas?	13		
7. What %age of water from w Fit for drinking% U	nfit for drinking	%	?			
8. What support is required for	clean/safe drinking	g water?				
WaterStoring pots / Coolers/Jerry cans	Water-Trucking	Rehab of damaged water sources & dewatering	Filtration Plants	Water treatment appliance s/practice s	Solar Panels	Solar/ Water Pumps
9. What %age of HHs having be				-		
Use of Latrine	Open defecation					
10. What %age of latrines have	been in-use in floo	d affected area	s before the or	set of floor	is?	
Pour-flush	Simple Ventilated latrines	Pit-latrines				
11. What %age of HHs-latrines numbers.	of affected HHs ha	s been damage	ed in flood affe	cted areas?	Also give	è
Pour-flush	Simple Ventilated latrines	Pit-latrines				
12. What are the particular sani	tation challenges, t	he affected po	pulation facing	g? %age		
Damaged latrine (Non Functional)	No-latrine	Insufficient for Crowded population	Damages to sanitation channels	Scarcity of water	No separat e latrines for women	NO PWDs or elderly persons friendly latrine
13. What are particular needs of	flood affected con	nmunities rega	rding Sanitati	on facilities	? %ages	
Latrine Construction	Repair of drainage channels	Separate latrines for women	Provision of water- supply	Safer places for personal hygiene	Provisi on of mobile / portabl e latrines	Remova I of debris from pathway s/ streets

women activists/ LHVs/MWs?	1	7	7	-	
Yes	No	Some How		-	
15. What MHM related challer	ges are faced by w	omen and adult	girls?	//	
MHM items	Safe-places (Privacy)	Adequate water			
16. What type of personal hygi	ene issues the famil	lies (population	are facing?	10 2	
No facility for taking bath	Scarcity of water	Lack of soap	Lack of Brush n Tooth paste	Safe Spaces for cleaning /washing / changin g dresses	
17. Whether there is any outbr	eak of water borne	and water-rela	ted diseases?		
Yes	No		ten moemour		
18. What particular Water bor	ne diseases have be	en noticed so fa	r?		
Diahorea	Cholera	Gastric Pain	Hepatitis	Skin disease	Eyes Infections
Malaria	-				
	Dengue				
19. What are the particular by	giene needs of flood	d affected comm	unities?		
Dignity kit for women/ MHM kits	Hygiene kits	Mosquito nets	Water- Storage tanks	Safe- places for Personal Hygiene	
	Protect	ion and Inclusio			
1. In your opinion, what are th					
Theft/Robb ery/ Looting	Killing/Murder	Physical assault	Extortion	Violence against children	Gender-based violence
Treatment by humanitarian workers					
2. Do women and girls in flood	affected areas have	e some specific s	security conce	rns?	
No safe places (Privacy)	Sexual violence/ abuse/ Harassment	Physical Violence	Insecure place for living	Unable to receive the assistanc e	Priority for aid distribution is given to men

Needs identification/ assessment is carried out with men only	Lack of information pertaining to assistance	Receiving aid by women is discouraged	Favors based prostitutio n / Trafficking		
3. Has there been an increase in	county concern	e facing wamen	and airle cine	the emere	omes?
Yes	No No	Do Not Know	inu giris sinci	the energ	circy.
4. Have some children shown ex	treme behaviora	I changes that are	e worrving pa	rents and c	aregivers?
Yes	No	Do Not Know	7.081		
5. Has there been any service pr	ovider for such a	hildren with exte	eme behavio	rs?	
Yes	No No	Do Not Know	Sinc Benario		
6. What are particular challeng	es to PWDs?	-			
Safer places/ Privacy	Food	Movement	Washing/ Personal hygiene	Sanitatio n facility	Drinking water
7. What are specific needs for el	derly person?	1		V	
Safer places/ Privacy	Food	Assistive appliances for Movement	Washing/ Personal hygiene	Friendly Sanitatio n facilities	Drinking water
		ioritized Needs			
In your opinion, what are the mos					
Agriculture	1.	2.	3.	4.	5.
Livestock	I.	2.	3.	4.	5.
Food/Nutrition Shelter	1.	2.	3.	4.	5.
WASH	1.		3.		5.
Miscellaneous accessories	I.	2.	3.	4.	5.

Shelter	Food Security and Livelihood	WASH
Nutrition	Protection and Inclusion	Miscellaneous Needs

8. Water Quality Test Report



PAKISTAN COUNCIL OF RESEARCH IN WATER RESOURCES

Government of Pakistan Ministry of Science & Technology Water Quality Laboratory, Opposite Laar Museum near DCO Chowk Agrovil Colony Badin 0297-870727

WATER OHALITY TEST DEPONT

****	WATER QUAL	ILL LEST KET	ORT		
Client Sample Code	Bore Water	Roceipt Date	19-12-2022	Lab. code	WQLab/Bdn/9
Client Name & Address		akar Bore		Reporting Date	20-12-2022

Sr. #	Water Quality Parameter	Reference Method	Permissible Limits	Results
1,	Color	Sensory evaluation	Colorless	Colorless
2.	Odor	Sensory evaluation	Un-objectionable	Un-objectionable
3.	Taste	Sensory evaluation	Un-objectionable	Un-objectionable
4.	Alkalinity (m.mol/1)	APHA	NGVS	- Oir objectionable
5.	Bicarbonate (mg/1)	APHA	NGVS	
6.	Calcium (mg/1)	APHA	NGVS	
7.	Carbonate (mg/1)	APHA	NGVS	
8.	Turbidity (NTU)	APHA	5 (WHO)	-
9.	Chloride (mg/1)	APHA	250 (WHO)	-
10.	Conductivity (micro-S/cm)	APHA	NGVS	1695
11.	Hardness as Ca CO ₃ (mg/1)	APHA	500 (WHO)	500
12.	Magnesium (mg/1)	APHA	150 (WHO)	
13.	pH (30.5 °C)	APHA	6.5-8.5 (WHO)	
14.	Potassium (mg/1)	APHA	12 (EC)	
15.	Sodium (mg/1)	APHA	200 (WHO)	-
16.	Fluoride (mg/1)	APHA	1.5 (WHO)	
17.	TDS (mg/1)	APHA	1000 (WHO)	2900
	Nitrate (mg/l)	APHA	10 (WHO)	2700
	Arsenic (ppb)	Kit Method	10 (WHO)	Nil
and the same of th	E. Coli	3M Petri film	0/ml	
to the second	Total Coliforms	3M Petri film	0/ml	-

NGVS No Guideline Value Set WHO World Health Organization APHA American Public Health Association EC European Community PSQCA Pakistan Standards and Quality Control Authority

Terms and Conditions

- The results of the laboratory analysis reported by PCRWR are verified as accurate and authentic only for the parameters tested.
- Analysis report is not valid for court use or business publicity. In case of any dispute in connection with authenticity of the report, the laboratory record of the analysis will be considered final.
- PCRWR does not accept any responsibility regarding accuracy of sample collection procedures if collected by the client.
- PCRWR will not be responsible for loss or damage to samples in its possession for reasons beyond its control. PCRWR reserves the rights to accept or reject samples for analysis without assigning any reason.
- Remarks: Found unsafe for drinking purpose for highlighted parameters under prescribed standards.

Research Officer/In charge (lab). Analyzed By:



PAKISTAN COUNCIL OF RESEARCH IN WATER RESOURCES

Government of Pakistan Ministry of Science & Technology

Water Quality Laboratory, Opposite Laar Museum near DCO Chowk Agrovil Colony Badin 0297-870727

WATER QUALITY TEST REPORT

Client Committee of the	The state of the state of	II IESI KEJ	CHCI		
Client Sample Code	Bore Water	Receipt Date	19-12-2022	Lab. code	WQLab/Bdn/0
Client Name & Address	Da	du Johi Bore		Reporting Date	20-12-2022

Sr. #	Water Quality Parameter	Reference Method	Permissible Limits	Results
1.	Color	Sensory evaluation	Colorless	
2.	Odor	Sensory evaluation	Un-objectionable	Colorless
3,	Taste	Sensory evaluation	Un-objectionable	Un-objectionable
4.	Alkalinity (m.mol/1)	APHA	NGVS	Un-objectionable
5.	Bicarbonate (mg/1)	APHA	NGVS	-
6.	Calcium (mg/1)	APHA	NGVS	
7.	Carbonate (mg/1)	APHA	NGVS	
8.	Turbidity (NTU)	APHA	5 (WHO)	-
9.	Chloride (mg/1)	APHA	250 (WHO)	-
10.	Conductivity (micro-S/cm)	APHA	NGVS	893
11.	Hardness as Ca CO ₃ (mg/1)	APHA	500 (WHO)	350
12.	Magnesium (mg/1)	APHA	150 (WHO)	330
13.	pH (30.5 °C)	APHA	6.5-8.5 (WHO)	
14.	Potassium (mg/1)	APHA	12 (EC)	1 :-
15.	Sodium (mg/1)	APHA	200 (WHO)	1 - 1 -
16.	Fluoride (mg/1)	APHA	1.5 (WHO)	-
17.	TDS (mg/1)	APHA	1000 (WHO)	2500
18.	Nitrate (mg/l)	APHA	10 (WHO)	2500
19.	Arsenic (ppb)	Kit Method	10 (WHO)	Nil
20.	E. Coli	3M Petri film	0/ml	
21.	Total Coliforms	3M Petri film	0/ml	-

NGVS No Guideline Value Set WHO World Health Organization APHA American Public Health Association EC European Community PSQCA Pakistan Standards and Quality Control Authority

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- Remarks: Found unsafe for drinking purpose for highlighted parameters under prescribed

Research Officer/In charge (lab).