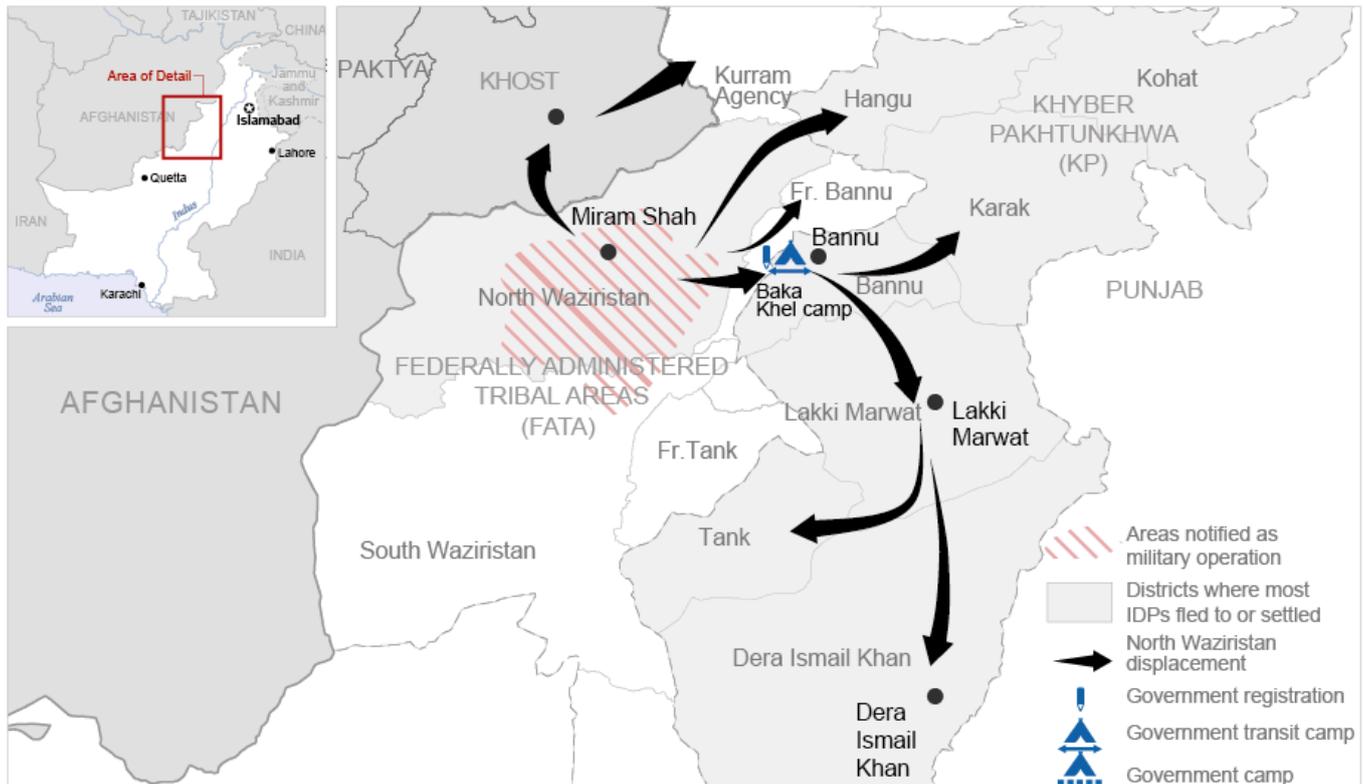




This report is produced by OCHA Pakistan in collaboration with humanitarian partners. It was issued by OCHA Pakistan. It covers the period from 4 to 9 July 2014. The next report will be issued on or around 16 July.

Highlights



The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations. Source: OCHA Pakistan

- Registration has re-opened for those families who could not register earlier for a variety of reasons. Grievance desks have been established to facilitate families with documentation issues.
- As of 8 July, the Federally Administered Tribal Areas (FATA) Disaster Management Authority (FDMA) reported the registration of some 833,000 individuals. The verification process expects to remove any registration errors, such as duplications, and provide a more accurate number of those now in displacement.
- Humanitarian partners plan to support some 500,000 people for six months and will need US\$99 million for vital humanitarian needs of the displaced families.
- The Government of Pakistan has committed in-kind assistance of 60,000 metric tons of wheat to WFP, in addition to their ongoing assistance programme.
- The priority needs remain food, health, protection, and water, sanitation and hygiene (WASH) activities. Urgent funding resources are needed to continue scaling up the humanitarian response.

833,000* Displaced from NWA to other parts of Pakistan as of 8 July *pending NADRA verifications	112,000+ Estimated displaced from NWA to Afghanistan as of 7 July	73% Of the NWA IDPs are women and children	930,000 Pre-existing displaced people in KP and FATA in need of humanitarian assistance	1.6 m Registered Afghan refugees in all over Pakistan	US\$22.5 m Pledged or contributed by donors
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+ For more information, see “background on the crisis” at the end of the report

Situation Overview

On 7 July, the authorities re-opened registration for IDPs who could not register earlier due to various reasons, with support from the Protection cluster. Reasons for non-registration included lack of documents, displacement prior to the start of the security operation or movement through less frequented routes. Registration started for the first time in Peshawar district and will continue till 14 July.

Over the past days there has been a huge increase in IDP numbers, and as of 8 July, the FDMA reported registering 833,274 IDPs (66,726 families). This includes 248,633 women (30 per cent) and 361,459 children (43 per cent). This shows an increase of over 350,000 people within a span of seven days. The final numbers, however, will only be available after the National Database Registration Authority (NADRA) has verified the figures for duplications and other errors, upon which the numbers are expected to reduce. UNHCR has established grievance desks to facilitate people with documentation issues.

Bannu remains the main hosting district for IDPs with others moving to Hangu, Lakki Marwat, Karak, Dera Ismail Khan, Charsadda, Tank, Peshawar and Kohat districts in Khyber Pakhtunkhwa (KP) province, as well as to other parts of the country.

According to UNHCR Afghanistan, an estimated 13,600 families (estimated over 112,000 individuals) left NWA to Khost (10,000 families) and Paktika (3,600 families) provinces of Afghanistan. Relief efforts by the government and humanitarian partners are ongoing.

Nearly 73 per cent of the IDPs are women and children. Some of the female-headed households face mobility and access issues due to purdah (privacy) and cultural practices. There is a need for mechanisms to provide assistance to female-headed households; women without effective male support, and women without a Computerized National Identity Card (CNIC), which is required for registration and access to assistance.

The Government has allocated over PKR4.5 billion (US\$45 million) as financial support to IDP families. According to FDMA, 28,624 families have received PKR343 million (\$3.43 million) to date. All those registered by FDMA receive a one-time Government cash assistance of PKR12,000 (\$120). Following the NADRA verifications, the families will receive a Ramadan package of PKR40,000 (\$400). The Government has also committed in-kind assistance of 60,000 metric tons of wheat to WFP.

Following a request by the Government to extend assistance to the newly displaced NWA IDPs, the Humanitarian Country Team (HCT) has developed an internal planning document detailing cluster responses to support the Government efforts. According to this plan, some US\$99 million are needed to provide essential humanitarian assistance to some 500,000 people over a six-month period. Donors have contributed US\$9 million and pledged more than US\$13 million.

Planning for a multi-sector initial rapid assessment in the affected districts is complete. The teams are awaiting a No Objection Certificate (NOC) from the authorities to begin the field assessment. The assessment has been planned in close collaboration with PDMA and FDMA. Many of the enumerators underwent previous training in the approach, and a dedicated training was held on 5 July. While information on needs and gaps is available from various sources, the assessment is vital to collect structured and credible information on the priority needs, IDP locations, and assist humanitarian partners plan accordingly.

Funding

To date, donors have committed or contributed over US\$22.5 million. The Government has committed in-kind assistance of 60,000 metric tons of wheat to WFP.

Humanitarian Response



Community Restoration

Needs:

- Capacity building support to FDMA, PDMA and district authorities for IDP management.
- Improve capacity of public services in host communities to cope with additional demands.
- Employable skills and job support for both IDPs and host communities.

Response:

- The Cluster provides support to establish a call centre for grievance redress and information dissemination at the KP PDMA.
- The Cluster is providing staff to FDMA for Information management and monitoring.
- The Cluster will augment human resources and provide equipment to Bannu district disaster management unit.
- The Cluster will map public services and gaps, and conduct a needs assessment.

Gaps & Constraints:

- Public services are strained and need immediate support to meet needs of both IDPs and local communities.



Education

Needs:

- The Cluster aims to reach some 82,000 children, which is 40 per cent of the total displaced children.
- The Cluster plans to provide educational supplies such as school tents, school-in-a-box, recreational kits, tents, seating mats, tarpaulin, and teaching and learning material to schools in the camp and in the IDP hosting areas.
- Building capacity of Government teachers, Parent-Teacher Committees and School Management Committees on various topics including teaching in an emergency, psychosocial support and life-skills-based education.

82,000

Children will be covered by the Cluster

Response:

- The Cluster has pre-positioned educational supplies including 65 school tents, 185 recreation kits, 210 school-in-a-box kits and 1,925 plastic mats.
- The Cluster is gathering information on schools being used as IDP shelters in hosting areas. Displaced families have taken shelter in 1,209 government schools: 1,131 schools in Bannu, 20 schools in Karak and 58 schools in Lakki Marwat. These include 50 per cent each of boys' and girls' schools. The Provincial Government has issued a notification to district administrations and education officials in southern districts to allow the IDPs to take shelter in government schools. Schools in KP are closed for summer vacation until the end of August.
- Educational department staff is engaged in IDP relief activities in schools and communities.

Gaps & Constraints:

- Schools being used as IDP shelters will affect the school infrastructure and facilities, school furniture, teaching and learning material besides the liability of high electricity bills for schools.



Food Security

Needs:

- The Cluster's prioritized needs are: food assistance to all IDPs, preventive nutrition rations, livestock vaccination, sprays for Congo Crimeia disease, and livestock feed.
- The number of IDPs in need of assistance exceeds the worst case scenario made during the preparedness/contingency planning stage.

396,000

People received food rations from WFP

Response:

- WFP distributed 2,564 tons of food rations to 28,352 families (396,000 people). Each WFP food basket, worth PKR 4,500 (\$45), contains enough food items for 12 people for 15 days.
- Distributions are ongoing from seven distribution hubs: three in Bannu and one each in Frontier Region of Bannu, Lakki Marwat, Tank, and Dera Ismail Khan. WFP will start distribution in Karak and Hangu.

- WFP has a grievance desk at each hub. The Beneficiary Feedback Desk (BFD) in Islamabad has started receiving queries from the NWA IDPs. Posters with contact details of the BFD are displayed at each distribution hub. The number of women presenting to receive food rations increased from 2 to 4 per cent.
- FAO is supporting the KP Livestock Department with 100,000 vaccines for small ruminants which provide a lifelong immunity; greatly helping protect the small animals.
- Pakistan Red Crescent Society (PRCS) distributed cooked food among 3,500 families in Bannu during the first week of displacement. PRCS is also entering into a partnership with WFP to provide relief food assistance to approximately 4,000 families in Bannu.

Gaps & Constraints:

- There is a continued need for funding to enable the Cluster to cover people's needs.
- Trucks carrying supplies face delays due to stringent security checks.



Health

Needs:

- Life-saving medicines and medical supplies are needed in the IDP hosting districts including Mother and Child Health (MnCH) and Reproductive Health (RH) services.
- Health promotion: health and hygiene awareness, water quality monitoring and control.
- Vaccination for vaccine-preventable diseases and health education sessions in displacement areas.
- Disease surveillance for outbreak control and response.
- Malaria is prevalent in all southern districts (highly endemic).

324,000

People will benefit from medicine made available in hosting districts

Response:

- WHO has provided 36 Emergency Health Kits to cover 324,000 people till 30 July. WHO has also provided five Diarrhoeal Disease Kits (1,000 moderate to 100 severe diarrheal interventions) to health departments in the hosting districts.
- UNFPA has pre-positioned MnCH and RH stocks, sufficient to cover 5 per cent caseload of displaced population.
- As of 7 July, WHO has supported the Government in vaccinating approximately 375,000 IDPs including 200,233 children under 5 with polio drops. A series of Supplementary Immunization Activities (SIAs) targeting children under five among IDPs and the host communities is ongoing.
- Those in charge of health facilities are trained in Disease Early Warning Systems and healthcare providers are able to diagnose, investigate and manage alerts of communicable diseases. WHO has also trained district rapid emergency response teams. On 7 July WHO received and responded to a measles alert. Total number of reported measles cases is now four. WHO has coordinated with the Expanded Programme for Immunization Coordinator and Health department for the response.
- Manual chlorination of drinking water sources has started. Cluster partners are conducting random sampling for water quality testing from various water sources. WHO has provided auto chlorinators to be installed at water sources. The aim is to ensure safe drinking water to eliminate the chances for the emergence of water-borne diseases.

Gaps & Constraints:

- Resource constraints for procurement of medicines and Primary Health Care service delivery through implementing partners.
- Reproductive Health Kits, trained human resource (gynaecologist, anaesthetists and Women Medical Officer and supplies. Serious gaps exist in RH and basic obstetric care in the health facilities.
- Due to a high consultation of Acute Watery Diarrhoea (40 per cent), more Diarrheal Disease Kits are required for Diarrheal treatment centres.
- A campaign is being planned to address the high risk of vaccine-preventable diseases, i.e. measles, etc., and skin diseases.
- Health facilities are overburdened and have low capacity to care for the extra burden of IDPs.
- EPI technicians and vaccinators need support in terms of logistics and developing a comprehensive plan for IDPs vaccination.
- Bed nets and mosquito repellents are urgently needed.



Needs:

- Initial findings from the Rapid Protection Assessment conducted between 28 and 30 June indicate that 64 per cent of the population has lost or lack identity documents; 44 per cent of the respondents believed the families have split during displacement; 30 per cent female respondents reported psychosocial stress; 70 per cent women lack access to health facilities in the areas of displacement; 75 per cent reported lack of appropriate healthcare for pregnant and lactating mothers; 60 per cent respondents indicated family separation on the rise during displacement. The main concerns for elderly include lack of general assistance (25 per cent), followed by no specialized services (21 per cent), lack of assistive devices (7 per cent) and lack of psychosocial support (4 per cent); and for persons with disabilities, major concerns include no specialized services (37 per cent), lack of psychosocial support (27 per cent), lack of general assistance (13 per cent) and lack of assistive devices (4 per cent).
- IDP lack of information on government and humanitarian assistance remains a concern.
- KP Child Protection and Welfare Commission and Child Protection partner organizations reported cases of missing children in Bannu. UNHCR has noted an absence of male children in the age group of 10 to 15 years old, and has raised its concerns with relevant authorities and the child protection cluster.
- IDPs without CNICs are facing problems in obtaining new CNICs due to NADRA's lack of additional capacity at the registration centres.
- IDPs with only current address from North Waziristan are not registered.
- IDPs face problems accessing wash facilities in schools.

73 %
Of the IDPs are women and children

Response:

- Through partner organizations the Cluster provided support to UNHCR for the registration process to ensure that displaced families are not at risk of exclusion from receiving protection and assistance.
- IOM Information Campaigns for IDPs regarding food distribution and cash compensation being aired
- The Humanitarian Communication team, implemented by IOM, is airing information campaigns for IDPs regarding food distribution and cash compensation and will also develop public service announcement messages on registration in support of UNHCR and FDMA.
- The KP Child Protection and Welfare Commission established two helpdesks in the Bannu at Women Vocational Training Centre and in Bannu Sports Complex. The Commission also allocated a dedicated phone number for reporting cases of missing, unaccompanied, separated or at-risk children. As of 8 July, a total of 400 orphans, 51 separated children, 28 children with disabilities, 10 cases of child labour, three cases of apparent malnutrition and two missing children were recorded by the Bannu helpdesks.
- UNHCR's protection partner, EHSAR Foundation, established three grievance desks at the registration points in Bannu to record and address grievances. So far 182 grievances have been recorded. Issues included lost registration forms, cases of dual address, cases of form B (birth registration) and cases of domicile issue. EHSAR Foundation has also established a social services desk.
- The Cluster will support the PDMA rapid need assessment in district Bannu, which was postponed due to issuance of NOC to the enumerators.

Gaps & Constraints:

- 73 per cent of the displaced population from NWA comprises women and children, which would require urgent protection response. The aim of the Cluster is to ensure that vulnerable IDPs are supported in accessing protection, registration, assistance and services.
- The Cluster critical funding gaps includes \$1,097,520 for registration, legal assistance/grievance desk, protection monitoring and humanitarian communication; \$1,582,800 for child protection activities including establishing and managing child-friendly spaces, monitoring, identification, response and referral, mine risk education, etc; \$246,480 for establishing and monitoring women-friendly spaces, Gender Based Violence identification, response, monitoring and referral, pre-positioning of PEP kits, etc.; and \$1,500,000 to identify and support people with disabilities and elderly including provision of basic assistive devices and basic advices on independent living and access to information.
- NOC requirements are impacting partners' capacity to respond.
- Humanitarian assistance remains restricted only to Bannu resulting in increased pressure within Bannu while depriving NWA families displaced to other parts of KP from receiving assistance.



Nutrition

Needs:

- Considering the existing high rate of acute malnutrition (GAM rate of 10 per cent and SAM of 5.6 per cent) in FATA (according to National Nutrition Survey of 2011) the displacement is expected to further aggravate the nutrition situation of children under 5 years old and pregnant and lactating women.
- The Cluster will target the malnourished within the 500,000 NWA IDPs.

Response:

- A Memorandum of Understanding with the KP Department of Health (DOH) was signed to provide emergency nutrition services including community-based management of acute malnutrition, infant young child feeding and multi-micronutrient supplementation among 6-59 month-old children and pregnant and lactating women.
- Twenty health facilities in Bannu were identified in consultation with DOH to set up a supplementary feeding programme and an outpatient therapeutic programme. Training is being conducted in Bannu for 40 participants including 2 facility-based staff from each public health facility identified for emergency nutrition services in union councils with an expected higher influx of IDPs.
- Supplies including anthropometric equipment, 1,000 cartons ready-to-use therapeutic food, 10,000 multi-micronutrient sachets and 1,000 MM tablets have been dispatched to the Bannu District Health Office.

Gaps & Constraints:

- There was no ongoing nutrition program in Bannu, resulting in a shortage of skilled staff.
- Some local partners faced access issues during the rapid assessment.
- Delay in training facility-based health care providers (government staff) due to involvement of district health care providers in other emergency tasks.



Shelter & NFIs

Needs:

- Displaced families are requesting additional NFIs, such as electric fans, hand fans and beds.

314,184

People benefit from
NFI distributions

Response:

- UNHCR, through the Sarhad Rural Support Programme, has distributed 11,440 NFI kits benefiting 148,720 individuals.
- The Norwegian Refugee Council (NRC) distributed 12,728 NFI kits benefitting 165,464 individuals in Bannu, and 2,211 NFI kits in Dera Ismail Khan and Tank.
- In total, 24,168 NFI kits were distributed among 24,168 families benefiting 314,184 individuals.

Gaps & Constraints:

- Security continues to be a constraint and PDMA and FDMA are liaising to facilitate smooth travel of implementing partners to displacement areas.
- Services appropriate for people's needs given the high number of children and women, and inclusion for all vulnerable groups.



Water, Sanitation and Hygiene

Needs:

- Water and sanitation facilities are immediately needed in formal and informal camps, particularly in schools and hosting communities where IDPs have taken refuge. FDMA has asked for WASH support in Frontier Region Bannu.

70,000

Litres clean water daily
distributed to IDPs in
Bannu

Response:

- UNICEF and Tehsil Management Authority are providing safe drinking water by trucking water to areas with high IDP concentration. A total of 70,000 litres of chlorinated drinking water is provided daily for 14,000 IDPs.
- SABAWON, a Cluster member, has distributed 1,298 hygiene kits (one per family). Hygiene awareness sessions were conducted on critical WASH-related information benefiting 3,436 IDP families residing in schools

in Bannu. Two power generators were installed at water tankers filling points to ensure uninterrupted water supply for water trucks.

- SABAWON also completed minor repairs for water and sanitation facilities in seven schools in Bannu. This includes replacement of pipes, removal of latrine blockage, tap replacement and repair, and cleaning of water storage tanks, benefiting 99 IDP families.

Gaps & Constraints:

- Access is a major issue for all the humanitarian agencies to respond to the emergency needs of IDPs.



Logistics

Needs:

- Logistics support is required to augment existing infrastructure in order to receive life-saving supplies.
- Temporary warehousing remains a necessity, particularly in Bannu, where the majority of the logistics efforts will be concentrated.
- Storage capacity in Bannu and Dera Ismail Khan is limited and likely to become a constraint as more organizations will be forwarding their cargo. WFP teams are on the ground assessing potential locations in coordination with relevant local authorities to augment storage capacity in both locations and to establish Logistics Cluster hubs.

Response:

- WFP, Cluster lead agency, immediately provided storage space in key locations of Bannu and Dera Ismail Khan for all humanitarian organizations working in the area.
- Support was provided to FDMA, SAFFRON and NRC by lending Mobile Storage Units to augment the organizations' storage capacity.
- The Cluster facilitated transport of over 740 metric cube of relief items on behalf of NRC, FMDA and SAFFRON from Peshawar to Bannu.
- A dedicated Logistics Cluster coordination cell was established in Peshawar and Logistics Cluster focal points positioned in Dera Ismail Khan and Bannu.

Gaps & Constraints:

- Access to the areas where the displaced are arriving remains a key challenge for organizations responding and could hamper humanitarian operations.

General Coordination

Clusters are active in KP province responding to the ongoing needs of the IDPs and returnees. The clusters are guided by the Humanitarian Regional Team. Humanitarian partners discuss important humanitarian issues in bilateral meetings with the civilian and military authorities. Important policy matters are discussed in the Policy and Strategy Meetings, co-chaired by the Humanitarian Coordinator and the KP Chief Secretary. The HCT provides overall leadership to the humanitarian response in the country.

A donors briefing was held on 9 July to brief the donors on the ongoing response and future plans.

Background on the crisis

Security operations are ongoing in FATA since 2008, resulting in simultaneous displacements and returns. North Waziristan Agency is considered the last stronghold of non-state armed actors of different nationalities. The security forces carried out targeted bombing of the suspected militant hideouts in late May 2014, resulting in displacement of over 60,000 people. Since the announcement of a full scale military operation in the Agency on 15 June some 400,000 people were displaced in just over a week. The fleeing families faced hardships in movement to neighbouring districts due to imposition of curfew, traffic congestion and security checks. The displacements are expected to continue as operations are extended to other parts of the Agency. Humanitarian partners expect a caseload of 500,000 IDPs for response planning. On 24 June, the Government asked the humanitarian partners to extend the existing humanitarian response to the newly displaced IDPs.

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