BIHAR FLOODS JRNA
August 2017
<table>
<thead>
<tr>
<th>Date</th>
<th>Situation</th>
</tr>
</thead>
<tbody>
<tr>
<td>12\textsuperscript{th} August</td>
<td>Heavy showers in the state, Water from Nepal released-all distributaries in spate- Araria and Kishanganj first to be hit by flash floods. Due to lack of early warning and preparedness measures, floods wrecked havoc in the districts.</td>
</tr>
<tr>
<td>13\textsuperscript{th} August</td>
<td>Heavy rainfalls continue, Purnea also affected by floods now. People displaced in all three districts. 80 member team from Bihar regiment sent for evacuation work in Araria and Kishanganj by CM’s order</td>
</tr>
<tr>
<td>14\textsuperscript{th} August</td>
<td>India’s Central Water Commission (CWC) reported that 21 river forecasting stations were at or above warning levels in the state. Conditions worsen. Thousands displaced, Roads, including NH,SH and village roads experienced heavy damages at multiple locations, Many blocks inundated by now within districts.</td>
</tr>
<tr>
<td>15\textsuperscript{th} August</td>
<td>Rainfalls continue. Death toll of 56 reported. Severe damages to infrastructure and more people displaced. Rescue work by government was still going on, with over 2000 trained personnel now deployed.</td>
</tr>
<tr>
<td>16\textsuperscript{th} August</td>
<td>District Administration trying to respond with food packets, halogen tablets and medicines through boats and air dropping. Medical camps and Community kitchens started sporadically were not enough to meet the constantly swelling demands. Most of the villages were still under water. People taking refuge in self settled camps on the roads and in village schools and awaiting assistance. They had now started to become agitated.</td>
</tr>
</tbody>
</table>
## Background – Flooding Impacts

<table>
<thead>
<tr>
<th>DATE</th>
<th>SITUATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>17th August</td>
<td>Water receding slowly. Rains also stopped since the 16th. Thousands in need of proper shelter, NFI and food. Health , one of the main priorities with threat of disease outbreaks. Lack of drinking water - one of the biggest challenge. Many places still inundated. All trains to the state from the rest of the country were cancelled till the 20th.</td>
</tr>
<tr>
<td>18th August</td>
<td>Started to rain heavily again in Araria and Katihar. Death toll at 153. The Chief Minister gave orders for intensive airdropping of food packets in Araria. Road Construction Department and Border Road Organization contacted for repairing damaged roads</td>
</tr>
<tr>
<td>19th August</td>
<td>Death toll reached 202. Heavy rains in Araria and Katihar and occasional showers at Kishanganj. The number of people affected by the floods in the state had crossed 1.22 crore. Immense damage to croplands as well. Over three million people rendered homeless. Koshi breached the Kusaha embankment near Nepal border on this day</td>
</tr>
<tr>
<td>20th August</td>
<td>The death toll crossed 253. Livestock damage had also been immense. A total of 1336 relief camps, housing 4.23 lakh people reported in the state by the state government. Threats of public agitation across affected districts. People awaiting relief measures. Water receding makes threats of disease outbreaks prominent.</td>
</tr>
</tbody>
</table>
## Affected Figures

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Figures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Districts Affected</td>
<td>18</td>
</tr>
<tr>
<td>Number of Blocks Affected</td>
<td>171</td>
</tr>
<tr>
<td>Number of GPs Affected</td>
<td>1965</td>
</tr>
<tr>
<td>Total Population Affected</td>
<td>126.87 Lakh</td>
</tr>
<tr>
<td>Total Population Displaced</td>
<td>721704 People</td>
</tr>
<tr>
<td>Total Deaths</td>
<td>253</td>
</tr>
</tbody>
</table>

*Source: BSDMA Press Release, 20.8.2017*
Assessment Coverage

- 24 Camps in 9 districts – Presented Separately

- 49 Villages in 9 districts.

- Most affected districts selected for assessment.

- Districts Selected: Kishanganj, Araria, Purnea, Katihar, Sitamarhi, Darbhanga, Madhubani, E.Champaran, W.Champaran

- Target 6 Villages and 3 Camps per District
# Assessment Coverage

<table>
<thead>
<tr>
<th>District</th>
<th>Blocks</th>
<th>GPs</th>
<th>Total Households in Villages Visited</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kishanganj</td>
<td>Thakurganj, Kochadhama</td>
<td>Batmore, Madho, Kutti, Himat Nagar</td>
<td>1223</td>
</tr>
<tr>
<td>Araria</td>
<td>Araria, Forbesganj, Narpatganj, Jokihat</td>
<td>Badhepara, Posdaha, Bharghi, Amhara, Bhaghkoliya, Majhuma</td>
<td>2016</td>
</tr>
<tr>
<td>Purnea</td>
<td>Baisa, Amour</td>
<td>Chopda</td>
<td>1200</td>
</tr>
<tr>
<td>Katihar</td>
<td>Azamnagar, Pranpur, Kadwa</td>
<td>Pehlagarh, Unasho Panchagani, Harnagar, Ariahan, Jhauwa Ward 7, Kurshal</td>
<td>2935</td>
</tr>
<tr>
<td>Sitamarhi</td>
<td>Runnisaidpur</td>
<td>Kharka, R. Madhya, Rainvishnu</td>
<td>2550</td>
</tr>
<tr>
<td>Darbhanga</td>
<td>Tardih, Ghanshyampur</td>
<td>Raja Kharbar Mahiya, Kurshomahiyata, Ghanshyampur, Budhe Inayatpur, Lagma</td>
<td>6312</td>
</tr>
<tr>
<td>Madhubani</td>
<td>Bisfi, Madhepura</td>
<td>Jagwan East and West, Bhairwa, Dwalak, Mahasingh Hasauli, Bakuwa</td>
<td>4058</td>
</tr>
<tr>
<td>E.Champaran</td>
<td>Dhanka, Sangrampur</td>
<td>Guraanwan, Karmawa, Izara</td>
<td>5150</td>
</tr>
<tr>
<td>W. Champaran</td>
<td>Chanpatia, Manjholia</td>
<td>Bankat Puraina, Barwan Semraghat, Bhitiharwa, Nagar Panchayat</td>
<td>1730</td>
</tr>
</tbody>
</table>
Summary Recommendations - Sectors

WATER, SANITATION AND HYGIENE (WASH)

- **Water Quality** is a critical issue and necessary measures to redress the same are urgent focusing on household treatment and source improvement.

- Sanitation is very poor and immediate action is necessary to prevent possible disease outbreak through communal and household *toilet interventions*. Resource mobilization should also be considered through SBM.

- **Targeted hygiene promotion** through mass campaigns and outreach.

- **Improved environmental sanitation** involving debris clearance and communal hygiene actions (Possible linkage of this and toilets with immediate livelihood work).

- Vector Control Measures focussing on mass scale interventions and complimentary household level measures and resources (eg. ITNs).

- **Family Hygiene Kits**
Summary Recommendations - Sectors

SHELTER and SETTLEMENT

• A detailed damage and loss assessment.
• Provision of temporary sheltering solutions for the most affected (tarpaulins, tents, sheets etc.)
• Early recovery through transitional shelters and/or repairs which could also be linked to livelihood interventions (MNREGA resources)
• Household NFI kits

EDUCATION

• Restoration (including repair) of schools and expedited re-opening
• Provision of learning and teaching material per need
• Establishment of temporary learning spaces where school opening will be delayed
Summary Recommendations - Sectors

FOOD SECURITY AND NUTRITION

• Sustained provision of food (dry and wet as needed) to overcome pressing risks of food insecurity

• Restocking/supplying food grains for government schemes and feeding programmes.

• Continuous monitoring to track nutritional status and provision targeted interventions.

• Livelihood interventions to be targeted to improve food security.

• Ensuring effectiveness of ongoing food and nutrition programmes of government.
Summary Recommendations - Sectors

**HEALTH ACTION**

- Restoration of health facilities and services
- **Health camps** to ensure reach to affected population in the interim.
- Targeted **health promotion and campaigns** for prevention of water and vector borne diseases.
- Increased preparedness for a **mass immunization campaign** if required. Scale up of ongoing immunization campaign with improved targeting and outreach.
- **Improved environmental health** through coordinated action with WASH sector.

**LIVELIHOODS**

- Detailed **loss and damage assessment** of assets and produce
- **Cash for Work** and/or **Food for Work** Interventions linked to sectorial work for relief, restoration and recovery.
List of Sectors

- WASH
- Food Security and Nutrition
- Health
- Shelter and Settlement
- Gender and Protection
- Education
- Child Protection
- Livelihoods
Source of drinking water

- Handpump: 82%
- Pond: 2%
- River: 6%
- Rainwater: 0%
- Tap Water: 0%
- INA: 10%
WASH Sector Situation - Water

**Percentage of HH with Contaminated Water Source**
- Yes: 96%
- No: 4%

**Availability of safe water storage at HH**
- Yes: 10%
- No: 90%
WASH Sector Situation - Sanitation

Excreta Disposal Practices

<table>
<thead>
<tr>
<th></th>
<th>Pre disaster</th>
<th>Post -disaster</th>
</tr>
</thead>
<tbody>
<tr>
<td>OD</td>
<td>98%</td>
<td>94%</td>
</tr>
<tr>
<td>USE OF HH TOILETS</td>
<td>6%</td>
<td>6%</td>
</tr>
<tr>
<td>COMMUNITY TOILETS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>INA</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
WASH Intervention Needs

Immediate Term

• Chlorination of HP and other water sources if available.
• Household level water treatment equipment - Water filters, Chlorine tablets along with water storage and handling items
• WaSH NFI kits including bucket, mug, ORS, soaps
• WaSH Sanitation facilities (including safe bathing space and washing) and Menstrual Hygiene Kits for Women and adolescent girls
• Construction of temporary latrines for safe disposal of excreta
• Distribution of bleaching powder for disinfecting local surroundings.
• Hygiene Promotion activities to control disease outbreak
• Environmental Health measures around debris clearance and community hygiene linked with livelihood options for cash and/or or food for work

Medium Term

• Repair, maintenance and disinfection of damaged hand pumps
• Pro-active Disease Surveillance through frontline workers and inter departmental coordination of SWD, WCD, PHED and Health.
• Recovery solutions moving from community to HH toilets through SBM focusing on incorporating hazard resistance features
Food and Nutrition SECTOR SITUATION

**Food Availability**
- Less than a week: 73%
- 1 month: 11%
- 1-3 weeks: 16%
- Food availability: 0%

**Patterns of Food Intake**
- Remained Same
  - Male: 3
  - Female: 1
  - Children: 5
- Decreased Intake Pattern
  - Male: 42
  - Female: 44
  - Children: 39
- INA
  - Male: 4
  - Female: 4
  - Children: 5

Legend:
- Food Availability: less than a week, 1-3 weeks, 1 month, more
- Intake Pattern: Male, Female, Children
Access to Government Food Programmes

No. of Villages with food prgs.

Types of Food Programmes

- AWC
- PDS
- MDM
- Com. Kitchens
- None
- INA
- Others
## Food and Nutrition Interventions

### Immediate Term
- The respective district administrations have been responding to the food needs through community kitchens, air dropping of dry food and distribution through mukhiyas and ward members but the **response needs to be scaled up** to reach a wider population. More than half affected population might have food insecurity.
- Available food stock with community is declining fast due to consumption and also decay. Food distribution needs to be prioritized.
- Targeted Distribution for children under 5 years, pregnant women and lactating mothers is required.

### Medium Term
- Continued support from regular government food distribution and feeding programs – Scale up and effectiveness are major gaps in normal situations.
- Sectoral Needs Assessment to be conducted for understanding food stock situation, nutritional status of the community members and the specific needs better.
- Subject to situation a rapid nutrition survey may be required too.
- Greater focus on the food quality in terms of nutrition (specific target group-wise) to be ensured.
Health Sector Interventions

Immediate Term

• Urgent requirement for operating Medical camps and health check-up camps in all flood affected areas. Mobilization of existing staff and personnel for proactive action.

• Surge deployment of medical teams and personnel particularly in marooned areas that are being accessed now.

• Provision of adequate medical supplies to prevent and control any potential communicable disease outbreak or incidence particularly for water borne and vector borne diseases.

• Health awareness campaigns for personal and environmental health will be priority. (also refer to Environmental risk and exposure in Shelter section)

• Health Kits and MISP at health facilities particularly PHCs. Immunisation roll out subject to baseline coverage status.
Shelter and Settlement Situation

No. of Houses Damaged in 49 Villages of 9 Districts

- Fully Damaged
- Partial Damaged
- No Damages

DISTRICT NAME

<table>
<thead>
<tr>
<th>District Name</th>
<th>Number of Houses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purnia</td>
<td>0 0 0</td>
</tr>
<tr>
<td>Kishanganj</td>
<td>15 235 299</td>
</tr>
<tr>
<td>Darbhanga</td>
<td>190 1461</td>
</tr>
<tr>
<td>Madhubani</td>
<td>10 899</td>
</tr>
<tr>
<td>Araria</td>
<td>0 1218</td>
</tr>
<tr>
<td>E. Champaran</td>
<td>0 1452</td>
</tr>
<tr>
<td>W. Champaran</td>
<td>0 756</td>
</tr>
<tr>
<td>Sitamarhi</td>
<td>0 1954</td>
</tr>
<tr>
<td>Katihar</td>
<td>0 1902</td>
</tr>
<tr>
<td>Total</td>
<td>0 1560</td>
</tr>
</tbody>
</table>

Number of HH's
Shelter and Settlement Situation

Shelter Environmental Risks and Exposure

- Rain: 44
- Cold: 2
- Heat: 38
- Darkness: 38
- Mosquitoes: 36
- Snakebites: 32
- Wild Animals: 11
- Others: 0
## Shelter and Settlement Situation - NFIs

<table>
<thead>
<tr>
<th>Item</th>
<th>Availability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Torch lights/Illumination</td>
<td>10</td>
</tr>
<tr>
<td>Bedsheets</td>
<td>12</td>
</tr>
<tr>
<td>Blankets</td>
<td>6</td>
</tr>
<tr>
<td>Fuel</td>
<td>5</td>
</tr>
<tr>
<td>Stove</td>
<td>11</td>
</tr>
<tr>
<td>Clothes</td>
<td>37</td>
</tr>
<tr>
<td>Hygiene Items</td>
<td>6</td>
</tr>
<tr>
<td>Kitchen Utensils</td>
<td>39</td>
</tr>
</tbody>
</table>
Sheltering Interventions

Immediate Term

• Provide immediate sheltering to the people who have either lost their homes or have homes that have been rendered uninhabitable.

• Provide NFIs (utensils, hygiene kits mosquito nets, torch lights) as emergency support to help families to get back to normal.

• Private spaces for catering to women and children’s needs (Exclusive/ Extended Breastfeeding Centers (ECBs), Child Friendly Spaces (CFS) for engaging children in constructive activities and ensure psychosocial well being, Temporary Learning Centers (TLCs)

• Undertake a detailed shelter damage and loss assessment

• Link sheltering proactively with Health, WASH and Food Services

Medium Term

• Decongest the settlements where adequate distance between shelters to minimize the risk of fire and spread of communicable diseases.

• Support the communities to move towards transitional shelters by coming with appropriate designs and provide construction support involving the available local human resources and further build their capacities on the same.

• Prepare for a long haul recovery and rehabilitation process.
Gender and Protection – WASH and Sheltering

- WASH Facilities and Personal Hygiene for Women

<table>
<thead>
<tr>
<th>WASH Facilities for Women (Bathing, Sanitation etc.)</th>
<th>Yes</th>
<th>No</th>
<th>INA</th>
</tr>
</thead>
<tbody>
<tr>
<td>WASH Facilities for Women</td>
<td>18%</td>
<td>73%</td>
<td>10%</td>
</tr>
</tbody>
</table>

- Access to safe drinking water for women

<table>
<thead>
<tr>
<th>Access to safe drinking water for women</th>
<th>Yes</th>
<th>No</th>
<th>INA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>41%</td>
<td>49%</td>
<td>10%</td>
</tr>
</tbody>
</table>

- Access to Sanitary Cloths or Sanitary Napkins for Menstrual hygiene

<table>
<thead>
<tr>
<th>Access to Sanitary Cloths or Sanitary Napkins for Menstrual hygiene</th>
<th>Yes</th>
<th>No</th>
<th>INA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>45%</td>
<td>53%</td>
<td>2%</td>
</tr>
</tbody>
</table>
### Major Protection Issues

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Abuse</td>
<td>16</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>11</td>
</tr>
<tr>
<td>Harmful Traditional Practices</td>
<td>5</td>
</tr>
<tr>
<td>Human Traficking</td>
<td>12</td>
</tr>
<tr>
<td>Child Abuse &amp; Exploitation</td>
<td>22</td>
</tr>
<tr>
<td>Discrimination</td>
<td>7</td>
</tr>
<tr>
<td>INA</td>
<td>12</td>
</tr>
</tbody>
</table>

Total: 16 + 11 + 5 + 12 + 22 + 7 + 12 = 75
Gender and Protection – Facilities and Programs

- Lack of access to sanitation facilities for women and children
- Inaccessibility to basic health facilities post disaster has made communities more vulnerable especially pregnant women and lactating mother.
- North Bihar has had chronic incidence of trafficking and abuse.
- Insufficient access to food and nutritional needs amongst elderly, infants, C/PwD, pregnant and lactating mothers would aggravate the conditions. Special target services and resources are not being provisioned
- Gender and protection considerations are not integrated in public health and WASH response plans.
- Strategic intervention like child friendly spaces for children, segregated facilities for women are missing and can potentially increase the risks.
- There are reported incidences of long standing discrimination based on caste persisting.
Gender and Protection – Children, Families and Community Groups

Unaccompanied Children

- Yes: 55%
- No: 39%
- INA: 6%

SPECIAL NEEDS GROUPS - RISK

- Yes: 27, 55%
- No: 15, 31%
- INA: 7, 14%
A striking two-thirds said that they had lost their documents. This could have a bearing on identification, compensation, access to aid, government schemes and, rehabilitation.

For a disaster prone geography this should be part of a basic culture or preparedness.

And probably indicates a lack of adequate warning too.
Gender and Protection Recommendations

1. Targeting of most vulnerable, particularly women, persons with disabilities and elderly especially from backward caste and minority communities.

2. Provision of facilities like toilets, raised platforms for existing tube wells, distribution of relief materials (including management) designed as per community needs and must include considerations like local custom, location, timings, access and safety of young girls and women.

3. Provisioning of sanitary napkins (locally made, if available) along with awareness on usage must be made available so as to ensure physical comfort and sense of dignity among young girls and women.

4. Ensuring that pregnant women, lactating mothers, particularly in cut off and remote villages have access to medical care and support and along with adequate food supplies.

5. A targeted inclusion/exclusion assessment in 3-4 weeks time probably combined with a Real Time Evaluation and/or Post Distribution Monitoring.
Child Protection Interventions

**Immediate Term**

- No pressing child protection needs are evident from the current assessment data. However, regular monitoring through ICPS should be stepped up in the coming weeks for the worst affected and high risk community groups.
- Tracing and family reunion for the limited cases of separation should be prioritized.
- Targeted interventions for protection and well being of adolescent girls across the sectors.

**Medium Term**

- Linkage with other sector programmes particularly education and IEC on risks to children will be a requirement.
- Provision of child friendly spaces, tracking and thrust on enrollment to school/education interventions.
- A more targeted child protection assessment and preventative campaign and intervention could be considered in the short to medium term.
Education Sector Situation

**Children Going to School post Disaster**
- Yes: 96%
- No: 4%

**Re-Opening of Schools**
- < 15 Days: 20
- < 30 days: 10
- > 30 days: 5
- INA: 0
# Education Sector – Disruption at Schools

### Reasons Children are Not in School

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO STUDENTS</td>
<td>9</td>
</tr>
<tr>
<td>NO MDM</td>
<td>3</td>
</tr>
<tr>
<td>DAMAGED INFRA.</td>
<td>8</td>
</tr>
<tr>
<td>SCHOOLS ARE SHELTERS</td>
<td>14</td>
</tr>
<tr>
<td>LACK OF ACCESSIBILITY</td>
<td>21</td>
</tr>
<tr>
<td>INA</td>
<td>4</td>
</tr>
</tbody>
</table>

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![Image showing children in a village setting]
Education Sector Interventions

Immediate Term
Considering that the area has chronic development deficits in the field of education, the situation has been further exacerbated by the floods, the possible interventions are:

• Establish temporary learning centres and child friendly spaces for at least 30% of the affected population.

• Provide learning and teaching material to students and teachers. (Nearly 100% loss is assumed currently)

• These spaces can also provide opportune avenues to undertake protection and nutrition interventions.

• A thorough damage assessment of school infrastructure for repair and rehabilitation

Medium Term

• Coordination for ensuring inter-sectoral linkages between WASH, food & nutrition, shelter & health at schools/learning spaces.

• Rehabilitation and/or repair of school infrastructure and material.

• Prioritization and proactive roll out of the recently launched School Safety Programme.
Livelihoods - Markets

### Markets Functional

- **Fully**: 30
- **Partially**: 25
- **Not Functional**: 10
- **INA**: 5

### Market Accessibility

- **Fully**: 15
- **Partially**: 20
- **Not Accessible**: 5
- **INA**: 2

<table>
<thead>
<tr>
<th>No. of villages</th>
<th>Fully</th>
<th>Partially</th>
<th>Not Functional</th>
<th>INA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Markets Functional</td>
<td>30</td>
<td>25</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>Market Accessibility</td>
<td>15</td>
<td>20</td>
<td>5</td>
<td>2</td>
</tr>
</tbody>
</table>
Livelihoods - Livestock

Fodder Availability for Livestock

- Less than 1 week: 35
- 1-3 weeks: 5
- 1 month: 0
- More than a month: 0
- INA: 0

% of Households whose Livestock is affected

- 0%: 0
- 1-25%: 1
- 26-50%: 5
- 50-100%: 2
- INA: 0
## Types of Livelihoods Lost

<table>
<thead>
<tr>
<th>District</th>
<th>Affected Livelihoods-Male</th>
<th>Affected Livelihoods-Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purnea (3 villages visited)</td>
<td>Daily wagers, out migrants, small vendors and agriculturalists.</td>
<td>Daily wagers</td>
</tr>
<tr>
<td>Kishanganj (5 villages visited)</td>
<td>Livestock, agriculture, daily wage, business (shop), labor</td>
<td>Labour, agriculture, daily wage</td>
</tr>
<tr>
<td>Darbhanga (6 villages visited)</td>
<td>Agriculture, daily labour, small scale businesses/small shops.</td>
<td>Kitchen gardening, small shops</td>
</tr>
<tr>
<td>Madhubani (6 villages visited)</td>
<td>Agricultural, Daily Labourers, Milk Sellers</td>
<td>Agricultural, Daily Labourers</td>
</tr>
<tr>
<td>Araria (8 villages visited)</td>
<td>Farming, Agriculture allied activities</td>
<td>Wage labor, Agriculture work &amp; Farming</td>
</tr>
<tr>
<td>E.Champaran (6 villages visited)</td>
<td>Agriculture, Daily Labourers, Petty business</td>
<td>Agricultural, Daily Labourers</td>
</tr>
<tr>
<td>W.Champaran (6 villages visited)</td>
<td>Agriculture, livestock, labour, shops</td>
<td>Livestock</td>
</tr>
<tr>
<td>Sitamarhi (3 villages visited)</td>
<td>Agricultural labourer, Daily labourer, Auto/tractor Drivers, Fishermen</td>
<td>Daily Wages, agricultural laborer</td>
</tr>
<tr>
<td>Katihar (6 villages visited)</td>
<td>Farming, Labour &amp; Fishermen</td>
<td>Farming, labour, Animal Husbandry</td>
</tr>
</tbody>
</table>
Livelihood Interventions

Immediate Term

- Unconditional Cash/ Kind transfer to trigger market access and procurement of essential food and household items
- Cash for Work/ Food For Work interventions – Extension of the scope of MNREGA in flood relief interventions
- Voucher Programmes linking livelihoods and other sectors
- Integrating Livelihoods through government schemes for other sectorial interventions particularly WASH and Shelter
- Damage and Loss Assessment

Medium Term

- Government to promote crop insurance and other risk reduction measures.
- Assessment of existing capacities for understanding possible livelihood interventions
- Civil Society to implement cash for work programs or cash transfer in coordination with the government to target the most vulnerable (landless, labourers etc.)
- Government to look into compensation of crop damage as majority of the farmers have lost the crop during flood
Assessment Conclusion

Overall, the assessment concludes an urgent need to respond to this humanitarian emergency since it is beyond the coping capacity of the affected people to withstand the impact of these unprecedented floods and will require extensive recovery and rehabilitation work in due course of time.

Short term and medium term needs should be prioritized in response.

The need for immediate relief is crucial and must be undertaken at a greater speed and scale.
Overall Recommendations - Programmatic

• **Livelihood, Markets and Food Insecurity:**

As markets are largely accessible and functional, creative food supply based solutions through the market complemented with livelihood programmes or voucher programmes could also be considered using existing registration and outreach mechanisms of the government. This could also involve partnership with civil society actors for rapid, effective and timely action at a large scale. This should not replace any targeted food distribution plans for the immediate term to counter emergent food insecurity.

• **Continuing Assessments:**

  • Damage Assessment for shelter, education and health infrastructure
  • Damage and Loss Assessment for Agriculture and Livelihoods
  • A more focused multi-sectorial needs assessment to inform early recovery, improved response and rehabilitation needs
Overall Recommendations - Programmatic

**Targeting and Inclusion:**

It is recommended that protection measures be integrated in all sectoral interventions as a cross cutting theme. As far as possible design the provisions as per community needs considering local customs, location, timings, access and safety of young girls, women and children.

Strategic locations and methods for distribution of relief materials especially to ensure coverage of socially excluded communities like Musahar, maha dalits, and tribals.

Targeting of most vulnerable, particularly women, children, persons with disabilities and elderly especially from backward caste and minority communities. As majority of North Bihar has history of human trafficking and is a matter of grave concern.
Overall Recommendations - Programmatic

Partnerships and Collaboration:
Given the scale of the disaster a multi stakeholder collaborative and partnership approach is necessary to ensure effective delivery of life sustaining services, rapid outreach, adequate coverage and importantly accountability. The response while led by the state will be best served if complemented by civil society and private sector partners with both monetary and non-monetary contributions which would be feasible only if the administration provides the space and scope to work.

• Inter Sectorial and Departmental Coordination:
The complex response, relief action and recovery work will only be effective if undertaken with adequate coordination across sectors and departments at the appropriate level of planning (district) and action (block and panchayats). Recovery planning at district level and with line departments will be key to reducing immediate risks and medium term risk reduction.
Assessment Credits

Special credit goes to the Disaster Management Department, Bihar for support through district officials during assessment.

Our filed partners:
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