

PAKISTAN FLOODS 2010

The DEC Real-Time Evaluation Report



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TABLE OF CONTENTS

Executive Summary.....	3
Introduction.....	5
Findings.....	7
Objective 1.....	7
Khyber-Pakhtunkhwa.....	7
Punjab.....	13
Sindh.....	20
Balochistan.....	25
Objective 2.....	26
Recommendations (Objective 3)	29
Appendix.....	32
- Methodology and limitations	
-List of attendees for the initial agency briefing session	
-List of attendees for the debrief session	
-List of UN and government officials interviewed	
-The Evaluation team	
-Case studies, photos and quotations	
-Maps of partner interventions	

Executive Summary

Overall context

- The Pakistan floods crisis began in July 2010 following heavy monsoon rains throughout Pakistan. Over 2000 people have been killed, over a million homes have been destroyed and more than 21 million people have been seriously affected, exceeding the combined total of individuals affected by the 2004 Indian Ocean tsunami, the 2005 Kashmir earthquake and the 2010 Haiti earthquake.
- Outbreaks of diseases, such as gastroenteritis, diarrhoea, and skin diseases, due to lack of clean drinking water and sanitation, unexploded ordinances, the lack of adequate aid, the difficult logistical terrain and the security situation pose serious and continued risk to flood victims.
- The DEC appeal has so far raised GBP 64 million, with GBP 37 million raised directly by the DEC and £27m raised by the member agencies. Of the GBP 37 million, GBP 13 million is being spent by all 13 agencies for the relief phase over six months, with shelter, food, NFI, WASH and health constituting almost 90% of the proposal budgets.
- The Real-Time Evaluation was based on meetings with UN and government agencies, agency and partner staff and field visits to almost 20 projects of eleven of the thirteen agencies in Khyber-Pakhtunkhwa, Punjab and Sindh provinces during November 22-December 3, 2010.

Findings and recommendations

- Objective 1-Priority 1: Agencies were able to start the response almost immediately in KPK due to their on-going presence related to the IDP crisis. However, there were delays of up to 4 weeks in responding in Punjab and Sindh due to the lack of capacity and pre-occupation with the KPK conflict and flood emergencies. Agencies have generally focused on the most important needs and most vulnerable groups in camps but not so in dealing with returnees in villages. Cost-efficiency and effectiveness could be increased by greater utilization of local capacities.
- Objective 1-Priority 2: Beyond the initial delay in moving from KPK to the southern provinces, agencies have responded to changing contexts well, e.g., in developing sufficient capacity in Sindh, following people back to villages and making intermediate-level changes in program details based on people's priorities.
- Objective 1-Priority 3: While there have been few cases of joint assessments, overall coordination has improved with time, leading to concrete benefits in identifying priority areas, avoiding duplication and developing joint technical standards. However, some duplication is still present and the wider benefits of coordination, such as joint assessments/programming, fund-raising and advocacy, are still not evident. Agencies have involved women in project implementation, but there is a need to give them an enhanced role in project decision-making process. Cultural issues have been well handled by almost all agencies in project service delivery. However, there is a need to enhance the use of and build local capacity through greater reliance on local partners, staff and village committees and through local purchases.

- Objective 1-Priority 4: Agencies have involved and consulted communities in project implementation and to some extent in intermediate-level decisions. However, there is a need to give them greater role in decision-making and building agency programs on community perspectives in the recovery phase. Transparency and complaints mechanisms have been weak in KPK and Punjab and stronger in Sindh. However, even in Sindh, there is little communication about agency mandates, future plans and exit strategies. There is also a need to go beyond basic measures, such as complaint boxes and giving cell phone numbers of staff, to adopt more meaningful and culturally appropriate transparency and complaint handling mechanisms. Agencies have generally used gender disaggregated data well and developed programs designed to address women's special needs.
- Objective 1-Priority 5: Agencies have emphasized the recruitment and secondment of experienced staff nationally and internationally so that previous lessons learnt can be incorporated in programs. However, lessons learnt are only embedded within staff in most cases and formal processes and documents to capture previous learning and to document and disseminate current learning are generally missing. The emphasis on livelihoods work has been limited to-date, as reflected by the 7% allocated to it in project proposals for the first phase. [Editor's note, March 2011: as early as January 2011 the proportion of livelihoods work had increased to 16% as more families returned to their home areas].
- Objective 2--Risk management: Agencies had correctly identified the most important risks and developed appropriate mitigation strategies for them in an overall sense, although they did overlook some important details related to several risks. With regard to the most important risk identified at the proposal stage, 'Scale of disaster in relation to appeal income means response fails to meet expectations of beneficiaries and/ or donors', agencies had correctly identified it and had appropriately emphasized donor diversification as a mitigation strategy. However, agencies have yet not been able to raise adequate funds for Balochistan and to some extent Sindh. The second highest threat in terms of impact and likelihood was, 'Target population is inaccessible'. Agencies had mainly interpreted it in terms of physical barriers and adopted suitable mitigation strategies for overcoming them. However, less attention was paid to cultural and political barriers that may reduce access to highly marginalized groups, such as women in KPK, elderly and minorities.
- Recommendations (Objective 3): 1) Provide winter clothing/return packages in Sindh, 2) Enhance the use of and build local capacity strategically, 3) Develop clearer criteria for targeting of affected groups and villages, 4) Develop interventions in villages based on people's priorities/needs, 5) Enhance coordination with other stakeholders, 6) Engage more proactively with women and other vulnerable groups to enhance the protection of their rights, 7) Develop clearer communication strategies to enhance transparency and awareness among communities, 8) Undertake advocacy on critical issues, 9) Facilitate DRR/preparedness at local and regional levels, 10) Enhance incorporation, documentation and dissemination of lessons learnt.

Introduction

The Pakistan floods crisis 2010 began in July 2010 following heavy monsoon rains in the Khyber Pakhtunkhwa, Sindh, Punjab and Balochistan provinces of Pakistan. Best estimates indicate that over 2000 people have been killed, over a million homes have been destroyed and more than 21 million people have been seriously affected, exceeding the combined total of individuals affected by the 2004 Indian Ocean tsunami, the 2005 Kashmir earthquake and the 2010 Haiti earthquake. At the worst point, approximately 20% of Pakistan's total area was underwater, an area bigger than England.

The country suffered extensive damage to health, educational, transportation and communication infrastructure and crops. The total economic impact is estimated to be as much as 10 billion USD. Floods submerged 17 million acres (69,000 km²) of Pakistan's most fertile crop land, killed 200,000 heads of livestock and washed away massive amounts of grain. Flood waters have receded from the north enabling livelihoods & reconstruction etc to take place, whereas large areas of the south are still submerged under flood waters, which are likely to take several more weeks to recede fully. Therefore, many farmers will be unable to meet the autumn deadline for planting new seeds in 2010, which implies a massive loss of food production in 2011, potential long term food shortages and price increases in staple goods.

Aid agencies have warned that outbreaks of diseases, such as gastroenteritis, diarrhoea, and skin diseases, due to lack of clean drinking water and sanitation can pose a serious new risk to flood victims. The elderly, disabled, women and children have especially been made vulnerable due to a lack of aid and the threat of exploitation by traffickers. Relief work is also hampered by the difficult logistical terrain, the destruction of infrastructure and the threat of terrorist attacks against aid agencies. All these factors make this emergency response one of the most difficult ones in recent times. The needs cover almost all immediate relief sectors while the narrow timeframe to the next harvesting season means that agencies have to double up delivery of immediate relief with simultaneous rehabilitation and recovery work to allow people to attain self-reliance during the winter crop season. All emergency work has to be done in an insecure and challenging operating environment. The Pakistani government was blamed for sluggish and disorganized response to the flood which led to instances of riots, with attacks and looting of aid convoys by hunger-stricken people. The United Nations initially appealed for \$460 million to provide immediate help, including food, shelter and clean water and later increased it to \$2billion for longer-term work.

Given the massive destruction, the UK based Disasters Emergency Committee (DEC) launched an appeal for the flood response in early August. As of December 6, 2010, its flood relief appeal had raised £64 million, with £37 million raised directly by the DEC and £27 million raised by the member agencies. All DEC 13 Member Agencies are responding in this appeal, 12 of which had existing programmes in Pakistan. Approximately £13.4 million of the £37 million DEC funds will be used in the first 6 months of the response from 1st August 2010 until 31st January 2011. The balance will be used over the subsequent 18 months. As of 14 September, DEC member agencies and their partners had helped nearly three million people. In October 2010, the DEC awarded a contract to the UK-based ThinkAhead consultancy firm to undertake a Real-Time Evaluation (RTE) of the DEC-funded response with the following objectives:

Objective 1. To review Member Agencies' response to the crisis using the DEC accountability priorities as the basis of the RTE framework:

Priority 1: We use funds as stated

- How well have DEC member agencies scaled up to respond in the most urgent sectors and to the needs of the most vulnerable?
- To what extent have agencies demonstrated the efficient and effective use of resources?

Priority 2: We achieve intended programme objectives

- Have agencies taken account of rapid changes in identified needs and revised programmes to meet these?

Priority 3: We are committed to agreed humanitarian principles, standards and behaviours

- To what degree have agencies engaged in joint assessment procedures / cluster approaches?
- What steps have agencies taken to ensure the participation of women in their flood response programmes?
- Are all Food and NFI packages, including hygiene kits, culturally appropriate and delivered in good time?
- What evidence is there that agencies have been able to draw in and build on local capacity?

Priority 4: We are accountable to communities

- To what extent have communities been engaged at each stage of the intervention, in terms of input and feedback, and how has this informed planning?
- How successful have agencies been in communicating and explaining their plans to disaster affected populations
- Have agencies' assessments enabled disaggregation by gender and how has this influenced programme delivery?

Priority 5: We learn from experience

- To what extent have agencies building on and drawn from lessons learnt from similar humanitarian responses, in particular previous flood responses
- How effectively have agencies taken account of the need to restore livelihoods as quickly as possible?

Objective 2. To review the extent to which agencies correctly identified the key risks to a quality disaster response and implemented suitable mitigating actions.

Objective 3. To advise on any programme adjustments or modification and highlight any unmet needs or unnecessary overlap that should be addressed in Phase 2.

Findings

Given the wide differences in the stage of the emergency, the socio-economic situation, government policies and the type of programming across the three provinces, the findings from the three provinces were sufficiently different to merit separate presentation under the first objective.

OBJECTIVE 1: TO REVIEW MEMBER AGENCIES' RESPONSE TO THE CRISIS USING THE DEC ACCOUNTABILITY PRIORITIES AS THE BASIS OF THE RTE FRAMEWORK:

I. KHYBER-PAKHTUNKHWA (KPK)

KPK has been repeatedly hit by natural / man-made disasters in recent years, e.g., the 2005 Earthquake and the 2009 IDP crisis. It was also the first province to be hit by the flood, at the end of July 2010, as heavy rainfall caused flash and riverine floods. The mountainous northern parts of KPK were hit by concentrated and highly destructive flash floods. This is where the largest number of fatalities occurred, and where infrastructure was heavily damaged. It is also where the proportion of land cultivated was relatively low, and where reliance on irrigation was limited. The northern areas remained isolated due to infrastructure collapse, and access to these districts was also compounded by security issues. The Charsadda and Nowshera southern districts were also heavily damaged by the flood, but water started to recede in early August, facilitating the delivery of humanitarian assistance. As illustrated in the map, five agencies are operating with DEC funding in KPK: Age UK/HelpAge, British Red Cross (through the Pakistan Red Crescent - PRC), Islamic Relief (IR), Merlin, and Oxfam (supported by local partners). The findings contained in this report are derived from field visits in the Nowshera and Charshadda districts.

Priority 1. We use funds as stated

How well have DEC member agencies' scaled up to respond in the most urgent sectors and to the needs of the most vulnerable?

Speed: KPK was the first district to be hit by the flood, and relief started promptly. DEC organizations already had an established presence in the province and had gained considerable expertise in previous disaster responses. Some organizations managed to mobilize and start response within hours of the floods. Availability and expertise of local staff allowed immediate access to areas which would not have been open to international teams, due to security issues and travel restrictions imposed by the government. Some partnerships were already in place, increasing the speed of the response. Oxfam resumed collaboration with former local partners. Merlin and Age UK/HelpAge capitalized from a strategic partnership tested in the earthquake response, which allows them to make health interventions more responsive to the needs of older people. These partnerships created linkages between organizations beyond coordination in clusters, and allowed the implementation of complementary / integrated approaches.

Focus on the most vulnerable: Initially, blanket coverage was provided. Self-selected village committees provided beneficiary lists to organizations, which they then verified. In some cases, different agencies used slightly different criteria to deliver goods to households, and had not always harmonized / spelled them out clearly to beneficiaries, creating frictions. In the village of Agra Mansura, for example, one DEC agency went for "one door, one food token", whilst another granted more food packages to large extended families living in the same compound. As the response progressively moves to targeted interventions, the

development and communication of clear criteria for selection of the most vulnerable will be crucial. More involvement of local committees will also be required, while taking care that they can adequately represent the needs of the most vulnerable and not only the concerns of the local (male) elites. In addition, there is a need for targeting displaced vulnerable groups. The committees interviewed explained that they now inform displaced families when there is a distribution, but it is unclear if this support will continue as assistance narrows down. Some agencies are already encountering difficulties in getting funding for the displaced in camps, but the exit strategy is yet not defined. The targeting of the landless should also be a priority. Some of them are dispersed and hosted by relatives, while others are in camps. Targeting landless people in rehabilitation programmes - in particular livelihoods and shelter- will require tackling entrenched issues. As a DEC staff member put it, “*The flood was a stroke of luck for some landlords. They could get rid of the encroachments which they could not clear up in court cases*”. There is now resistance to allow landless to get back to the places they occupied before. The PRC recently opened a new camp to host the landless people – identified as most vulnerable by the government and earmarked to receive land. Working groups on land are now being established at the national level by some NGOs, though the land issue required swifter action from the start.

Focus on priority needs: In the immediate aftermath of the crisis, agencies engaged in distribution of Food / Non-Food items, and health and WatSan interventions. The beneficiaries felt that the interventions were relevant and responded to their needs. Provision of relief items – e.g. latrines – were complemented by awareness sessions – e.g. example hygiene promotion. In some cases – however, such session seemed to respond to the commitment to provide a pre-established package rather than to a real need / interest of beneficiaries to acquire the information: more flexibility should be brought in designing such packages.

To what extent have agencies demonstrated the efficient and effective use of resources?

Cost effectiveness across agencies is hard to judge as the price tag of the packages was not known to beneficiaries, local partners or even organizations’ field workers. Even when the content of packages was discussed in clusters, pricing was not disclosed: a missed opportunity for transparency and to improve a healthy competition on the value for money of early relief interventions. Overall distributions organized by DEC agencies seemed to have been properly managed, with good crowd management, transparent procedures, acceptable waiting time and delivery points close to the beneficiaries.

Priority 2. We achieve intended programme objectives

Have agencies taken account of rapid changes in identified needs and revised programmes to meet these?

Organizations oriented to integrated approaches (e.g. IR) had more latitude for reorienting interventions towards emerging priorities (shelter / livelihoods). Agencies which tend to be sector / target population specific operated within their mandate and adapted their intervention within it, based on their assessments or on the priorities defined by the government. Merlin focused on health, and progressed from interventions through mobile clinics towards rural health points, following directives from clusters/health departments. Oxfam operated mainly in the WatSan sector, and sought to adapt interventions to emerging challenges. It designed a new model of trench latrine to respond to the need for privacy and enhanced hygiene in home compounds, at a time where water table was high. It was possible to stick to one sector because multiple agencies operated in the same villages, serving different needs. However it is unclear to what extent agencies would have had the capacity to cover priority needs beyond their mandate if this was not the case. There was also little evidence of agencies linking up their efforts at the village level: space

for synergies and collaboration is little explored. Some inertia in shifting approaches has been caused by centralization of strategic decisions and the use of phasing / funding models that separated “relief” from “recovery”. For example, an assessment of one agency identified the need for livelihoods intervention but the shift is on hold, pending approval centrally. Another agency’s field staff, in conjunction with national advocacy coordinators, highlighted areas for advocacy. However action on these issues had not started yet, pending approval of a country strategy and deployment of advocacy capacity in field offices. Further decentralization of decision-making and more flexible funding arrangements appear to be the key to ensuring a swift and adaptable response.

Priority 3. We are committed to agreed humanitarian principles, standards, behaviours

To what degree have agencies engaged in joint assessment procedures / cluster approaches?

At the beginning of the crisis, coordination was challenging, and there were cases of overlapping – e.g. in food distributions - also amongst DEC agencies. Some duplication was probably inevitable, as the affected people received assistance not only from international agencies / government, but also from a plethora of local NGOs and uncoordinated private citizen initiatives. Coordination had since improved. Operational coordination has increased through data sharing (in particular in the health cluster) and information on “who is doing what”. Most DEC agencies are active participants, and in some case also have a leading role in working groups (e.g. Oxfam, IR).

Assessments were mostly done independently by organizations, in particular at the beginning of the emergency. This resulted in some duplication in the earliest response. Data sharing has since improved, through coordination amongst government and NGOs in the clusters. However selection of most affected areas remains a loaded political issue, and led to instances of confrontation amongst DEC NGOs and the government. Assessments are still going on, and several DEC agencies are employing social mobilizers for door-to-door household surveys. Some women mentioned that “*many organizations are coming to our houses always asking the same questions*”, and concurrent assessments were taking place in some villages. Potential for joint household-level assessment should be evaluated. As household assessment are costly and time consuming, more consideration should also be given on maximizing the use of data - e.g. through proactive sharing in clusters, but also with committees. Even when surveys took place in villages where committees were set, no arrangement was made to involve them in design / data collection (e.g. by employing participatory tools) or to share information - to improve the quality of their decision-making.

What steps have agencies taken to ensure the participation of women in their flood response programmes?

In KPK a strong *Purdah* is imposed on women. Circumventing this can be challenging and requires positive action by organizations (e.g. recruiting staff, creating practices and processes for women involvement), which can be resisted locally. Overall, especially at the beginning of the crisis, women and their needs have been tackled, but they rarely have been put openly at the center of the response. Most urgent needs were covered (e.g. provision of hygiene kits), but more settled ones (e.g. need of screened spaces, opportunities for consultation) have been addressed to a lesser extent. Women were, in general, satisfied with the items they received, but often pointed that the needs of pregnant women were not adequately addressed. One organization responded that this was a conscious choice, to discourage home delivery. However, many women, who did not have easy access to medical facilities, eventually experienced discomfort due to the lack of pregnancy kits. Widows and female-headed households tended

to be recognized by village committee as priority groups, and some committees made arrangements to assist them (e.g. by nominating volunteers to dig latrines). The presence of Age UK/HelpAge and the partnership with Merlin helped to put the needs of the old people on the agenda, with activities and lobbying in clusters at the district and national level. However, the disabled were not proactively targeted, and – paradoxically – we met a young woman unable to get walking aids, as these were only for the elderly.

Are all Food and NFI packages, including hygiene kits, culturally appropriate and delivered in good time?

Cultural norms were respected in assisting women, but sometime this led to conservative attitudes vis-à-vis their role. The work done by some agencies showed that a crisis can open interesting spaces for challenging rather than accepting existing roles (e.g. creation of women committee by Age UK/HelpAge), which should be capitalized on in the next phase of the response. Staffing of organization also sometimes reflected conservative perceptions. Whilst some agencies promoted a 50%-50% staff policy, elsewhere only a minority of staff are women, and recruited later in the response.

What evidence is there that agencies have been able to draw in and build on local capacity?

DEC agencies rely on committees (in particular male ones). At the inception of the emergency, self-appointed committees provided beneficiary lists. DEC organizations then further invested in committee formation for awareness-raising. Some are planning to create local institutions with a pivotal role in rehabilitation phase. (e.g. the Older People Association by Age UK/HelpAge). De facto such committees are already playing a bigger role, because they are, as one member explained “*the arms and feet of the jirga*”. They maintain linkages with multiple agencies, they engage in conflict resolution. DEC agencies seem to have invested too much in such committees for them to have only an awareness building-role, and yet too little to capitalize on their potential and their willingness to become dynamic agents for action and change. For example, whilst committees are asked to provide beneficiary lists, they are then not supported in improving record keeping. And yet, as each village visited had a different mix of agencies, the need to improve village level coordination on needs assessment and response as well as capacity of local institution to keep track of assistance was evident. Committees are not yet equipped with decision-making / organizing skills, and yet we encountered committees that were ahead of organizations in thinking of rehabilitation strategy, evaluating for example how to start saving schemes. Investment in supporting local committees and incentives for them to involve women and vulnerable should be prioritized in the rehabilitation phase. As rehabilitation work starts and staff stabilizes, DEC agencies will also need to invest in building the capacity of their field workers to accompany communities. Whilst most agencies chose to self-implement programmes, Oxfam – the only DEC agency working through partnerships in KPK with DEC money (though other DEC agencies are working with partners with non-DEC money), is investing in strengthening capacity of the partners. It runs weekly planning sessions which provide space for shared learning and training on humanitarian issues (e.g. awareness of international standards / codes).

Priority 4. We are accountable to beneficiaries

To what extent have beneficiaries been engaged at each stage of the intervention, in terms of input and feedback, and how has this informed planning?

In the course of the evaluation we found examples of interactions with beneficiaries, but mostly oriented towards extract of information (e.g. through data assessment / preparation of households lists); awareness raising (sensitization, hygiene and health campaigns); appointment of village groups / task forces in camps for specific actions (e.g. hygiene awareness, garbage removal, cleaning campaigns). We did not find examples of processes leading to redefine priorities or course of actions, nor examples of active engagement of flood affected communities in decision-making. To obtain information, agencies tended to rely on local committees – where women are not represented, so potential for participation is curtailed. Women, however, are reached by information, as most DEC organizations (e.g. Age UK/HelpAge, Merlin, Oxfam, IR) employ social workers to this purpose.

How successful have agencies been in communicating and explaining their plans to disaster affected populations?

Overall, people are informed rather than consulted, and information relates to individual activities rather than to the mission / plans of the agency. Communication and accountability on organizational mandate is needed, as beneficiaries are often very confused about what to expect from organizations. Also frontline staff did not know sufficiently what can or cannot be provided. When they promise to these placing demands on them that “*they will convey this need to the management*” (rather than being able to immediately explain the agency focus) they risk raising expectations. Clarity on mandate could also become a foundation block for community-based advocacy. It would help beneficiaries to understand who is accountable for doing what, and to understand when they should hold the government accountable for service delivery, and when the local or international organizations.

Transparent sharing of future plans also needs to be improved. For example:

- Even when organizations had already established a rehabilitation strategy and earmarked funding for committees, these were not promptly informed, and could not start planning accordingly.
- Exit strategies were not clearly formulated / shared. Clients of emergency services were not warned when they ceased to function. Mobile clinic just stopped showing up in camps, and former beneficiaries were not informed of alternative options.
- The sustainability / long-term implications of some initiatives was not adequately considered. DEC organization had set committees in villages where they are not going to operate long term. They created expectations but without considering how to equip such committees to sustain action.
- Organizations had established MOUs with government agencies for running services, but failed to provide a clear timeframe about the extent of their future engagement

An area where DEC organizations had invested considerably was the provision of information on deliverables and of basic information for complaints. This certainly increased transparency. During distributions banners provided contact information. The content of the packages distributed were publicly shown, or list of the items displayed. The committees supporting the delivery of latrines / water points knew who received them (but did not know the cost if the items: financial information had never been shared, with the exception of water filters). Transparency mechanisms could be improved by using local languages rather than English, as well as pictures. Information for complaints should be more persistent, rather than displayed only on the distribution days. Some organization mentioned that they had tried to display their phones on accountability boards, but stopped, as their received too many calls and often unrelated to their own activities. Records about activities / distributions (e.g. beneficiary lists) should also

be given to representatives of targeted communities. Only one partner of Oxfam shared back its distribution list – when verified - with the committees, and invited villagers to share it with other organizations. Merlin put complaint boxes by the main door of its clinics. Other agencies had relied on more informal mechanisms, sharing contact information – often the mobile phone of fieldworkers - with community members, who have been keen to make use of them when needed. One committee member told that “*the agency left materials with us but delayed starting the work, so we called them to action*”. But access to information from agencies is not evenly spread / guaranteed to all communities members, and uneven access might risk to further increase the personal power of the local leaders. Other improvements to complain mechanisms could include: clearer modalities for feedback / complaints and reassurances about confidentiality / modalities of response.

A linked issue is the need to invest in strategies for improving communication to beneficiaries and local audiences. Communication expertise seems to have been mostly directed – so far - in targeting international / UK audience. Some DEC organizations are starting to consider how to integrate media work in public awareness campaigns for affected population, and accountability and transparency mechanisms could also benefit from innovative communication modalities.

Have agencies’ assessments enabled disaggregation by gender and how has this influenced programme delivery?

Data on households was usually disaggregated by gender, but there is no specific example where gender disaggregation had changed priorities. Age UK/HelpAge did substantial work to ensure disaggregation by age, and this had started bringing more attention on the need of the elderly. When providing services, organization made considerable efforts to address women’s needs adequately. Clinics, for example had separate visiting rooms and female doctors, but sometimes waiting spaces were not sufficiently sheltered. A few protection issues remains: in camps tent disposition – often in rows, did not enable clustering of spaces and screening for protection, and no alternative spaces were provided (a few enclosures across tents were autonomously put up by households). Some families chose to separate from their young girls and host them with relatives rather than keeping them in camps. Women felt sometimes unsafe to reach latrines, even when they were only at short distance from tents and well lit.

Priority 5. We learn from experience

To what extent have agencies built on and drawn from lessons learnt from similar humanitarian responses, in particular previous flood responses

There have been some examples of “learning in” and “out” of this crisis. DEC agencies benefitted from the capacity built in previous emergencies in the province (in terms staff experience in responding and to use organization systems). It seemed, however, that agencies broadly relied on “learning by doing” by individuals rather than solid and institutionalized processes of shared learning. Equally, the modalities through which lessons learned from this crisis will be distilled and shared are not clear. Age UK/HelpAge is in the process of establishing Older People Association based on the practice developed in Bangladesh. It brought in an expert to train and coach staff. Oxfam developed a new model of trench latrines, which has been already documented and shared with other offices of the organization and will be presented to the clusters. The above mentioned partnership amongst Merlin and Age UK/HelpAge is also an interesting example of strategic engagement of two agencies for mutual organizational learning. Whilst there is evidence of learning at the individual level and of sharing of practices, learning at the strategic

level might probably be enhanced. Gender and land are two examples of issues already confronted by DEC agencies in previous crisis in KPK, and for which the humanitarian community has not yet defined structures and processes which can help to unblock ingrained resistance to change, and to bring them on the agenda at the earliest stages of response.

How effectively have agencies taken account of the need to restore livelihoods as quickly as possible?

Some efforts were made to do livelihood work in the early stages of the emergency, but overall livelihood interventions had a slow start. In the relief phase procurement was mostly done through Islamabad, but some impact on the local economy was achieved by making use of local transport when possible.

II. PUNJAB

The evaluation team visited two flood affected districts in southern Punjab: Muzaffargarh and Rajanpur. Muzaffargarh district is lined with rivers on its eastern and western borders (the Indus river to the west and the Chenab river to the east). Flood waters were detected moving south, mainly along the Indus river from KPK province on 5th August, which caused flooding initially in the western part of the district. However, by 27th August, the banks of the Chenab river had also been broken, leading to flooding down the entire eastern side of Muzaffargarh district, to mirror the flooding seen along the Indus. Five rivers merge into the Indus within Rajanpur district, which, subsequently, suffered extensive flood damage. Flood waters within Rajanpur reached over 3 metres high, washing away roads, wiping out houses and damaging agricultural land. The flood-affected IDPs mostly sought refuge in schools, hospitals, government buildings or were hosted by relatives and friends in the cities across Punjab rather than in IDP camps. The displacement and return cycle lasted only 3-4 weeks in Punjab province, mainly because the provincial government had pushed for ‘camps’ to be closed (as people were residing in government buildings) encouraging people to return to their villages in late September/ early October.

At the macro level, Muzaffargarh and Rajanpur districts have received the largest amount of funding from the humanitarian community (mainly due to the extent of damage). However, according to UN OCHA the funding gaps (needs) still remain the largest in these two districts in comparison to the rest of the country. Five DEC member agencies (BRC, Age UK/HelpAge, Islamic Relief, Merlin and SCUK) are operating here. During the 7 days of field research, the evaluation team was able to visit all five agencies and 7 villages where DEC members are working, one distribution point, one basic health unit and one child friendly space.

Priority 1: We use funds as stated

How well have DEC member agencies’ scaled up to respond in the most urgent sectors and to the needs of the most vulnerable?

Speed: The majority of agencies responded after the water receded and the IDPs had returned to their villages in late September/ early October. Only Islamic Relief responded when people were first displaced, and was even engaged in rescue missions with the army in August as they had a boat. Beneficiaries were pleased with the speed of agencies’ response (except in Basti Pir Haji Ishaq in Kot Addu which had only started receiving relief supplies from 30 Nov onwards). For example, core shelters were already being built by Islamic Relief in Basti Saron Wala & Basti Mashori, and older persons in Basti Darri Wadhoo were grateful for the winterisation kits received from Age UK/HelpAge in early November.

Focus on the most vulnerable: There is a higher concentration of agencies in Muzaffargarh district. However, the numbers of affected people and extent of flood damage are larger in Rajanpur district, where there are fewer DEC member agencies working. Furthermore, the pre-flood poverty levels (and subsequent lack of access to rights-especially for women and girls) within Rajanpur were higher than those in Muzaffargarh district. Similarly, the post-flood malnourishment level for children within Rajanpur district is 48% compared with around 20% in Muzaffargarh. This imbalance is due to the relative remoteness of some villages within the district, the security concerns (Rajoan Tehsil in Rajanpur district is a red zone, and it is difficult to operate around Kot Addu), and the need for internationals to work with an armed police escort. In three sites visited in Muzaffargarh district (Basti Saron Wala, Basti Pir Haji Ishaq, & Bast Mashori), the beneficiaries were flood affected but their poverty levels were relatively low. Given that the local government officials had assigned agencies to particular villages, schools and health posts, agencies may have fallen victim to political interference/ nepotism to the detriment of villages that were equally flood affected but had much higher poverty levels (and hence vulnerability). One Education officer in Rajanpur district stated that his village had been left off the flood affected villages list by the government. When he complained to the DCO's office, he was told to pay 200,000 rupees to have his village put back on the list. Agencies that had adopted a holistic or integrated emergency response programme (Islamic Relief and Save the Children) were at an increased advantage to those agencies working per sector, as the Punjab government has assigned villages to agencies. Thus, it was very rare to see two agencies operating in the same village, except where there was collaboration between Age UK/HelpAge and Merlin. Population oriented agencies (Save the Children, Age UK/HelpAge) have narrowed their targeting to the most vulnerable within villages in Basti Darri Wadhoo, Basti Jhandeer and Jampur town, whereas other agencies had adopted a blanket approach to distribution (British Red Cross in Basti Pir Haji Ishaq, Kot Addu) in an attempt to meet all villager's relief needs. Detailed vulnerability and capacity assessments were scheduled for December by agencies.

To what extent have agencies demonstrated the efficient and effective use of resources?

In the relief phase, agencies procured relief items from Islamabad, as opposed to provincially or locally, which increased transport costs and logistical support (including security), which thus made the unit cost per item more expensive. Materials were available in local markets in the affected areas (such as blankets, shawls, scarves for winterisation kits, and jerry cans and kitchen utensils for NFI kits) soon after the flood. None of the field staff that we spoke to was involved in the procurement of items, as this was handled centrally in Islamabad, or in some cases from abroad through a partner organisation (British Red Cross/ Pakistan Red Crescent Society-PCRS). Save the Children had recently set up a district level procurement committee, which will begin procuring items locally to restock the child friendly spaces (budget: 500,000 rupees) during December. Agency policy prevented them from procuring locally until this system was in place. In the recovery phase, many agencies (e.g., Islamic Relief) have begun procuring locally, particularly for core shelter items (concrete, bricks etc). It is unclear whether Age UK/HelpAge and Merlin will be procuring more technical & individual items (such as hearing aids, medication, glasses etc.) locally or in Islamabad during the recovery phase. Logistics coordinators have hired vehicles locally. Age UK/HelpAge and Merlin have reduced operating costs by sharing office space, vehicles, storage areas, and by operating within the same Basic Health Unit (Basti Darri Wadhoo). Relief items have been tracked securely from where they were bought to the place of distribution, and we only came across one case of looting of a truck.

All agencies (except British Red Cross) are directly implementing programmes. Two agencies are operating 100% with local staff, whereas Save the Children has between 5-10% internationals, which are more expensive and their movement requires the mandatory use of police escorts in Rajanpur. Agencies have used local labour to rehabilitate structures (school at Basti Jhandeer, Muzaffargarh, and the basic health unit in Basti Darri wadhoo, Muzaffargarh,) through a 'cash for work' scheme but unskilled labourers do not receive any cash. In other locations community members volunteered their services. However, cost effectiveness comparisons were difficult as organisations had widely different budgets for the same activity e.g., rehabilitation of schools was budgeted at between 200,000-500,000 rupees/ school. Community members were happy to have received relief items (food, NFI items etc.) during the relief phase rather than cash, as the markets are 2-3km away from their houses, making it difficult for them to buy goods and food during the relief phase. Beneficiaries had received kitchen utensils, pots, pans etc., (part of NFI kits) via a blanket distribution system, and yet in some cases community members had managed to save their own items from the flood, so some items were not needed or used.

Priority 2: We achieve intended programme objectives

Have agencies taken account of rapid changes in identified needs and revised programmes to meet these?

It should be noted that only British Red Cross/ Pakistan Red Crescent Society had offices in Punjab prior to the flood. Thus, agencies faced the initial task of having to establish offices rapidly after the flood. Save the Children and Islamic Relief were able to shift or recruit experienced staff (through internal recruitment procedures) from KPK to Punjab province to set up offices in Muzaffargarh and Rajanpur districts. Subsequently, beneficiary needs did not change rapidly, as agencies only began responding after people had returned to their villages/ houses, and thus were in a more stable context. Some agencies (Save the Children) had to change their plans to renovate assessed schools, as the army had already renovated these target schools in between assessment and implementation.

Priority 3: We are committed to agreed humanitarian principles, standards and behaviours

Armed escorts are required for agencies operating with internationals in Rajanpur district, and for all agencies operating west of the Indus in Baluchistan. This has created tensions across the humanitarian community regarding the application of humanitarian principles, with some non-DEC agencies (IFRC national societies, MSF) pulling out. DEC agencies seem to have managed this risk by reducing the presence of internationals working within these districts (we only came across 2 internationals) and by liaising with the local police escorts on a bilateral basis.

Sphere standards were met in terms of quality of relief items, numbers/ household and in the rehabilitation or construction of facilities (schools, WASH facilities and shelter). However, Sphere standards were not met (due to understandable reasons) in the maintenance of the WASH facilities at the Save the Children school in Basti Jhandeer, and the basic health unit - Basti Darri Wadhoo run by Merlin and Age UK/HelpAge, or in the mechanism for distribution by British Red Cross/ PRCS in Kot Addu tehsil given the high number of people affected and limited funds. For example, BRC/ PCRS distributed material 10-12km away from village locations, so the beneficiaries had to travel to collect their relief items.

To what degree have agencies engaged in joint assessment procedures / cluster approaches?

Since the cluster system was a new approach in Muzaffargarh and Rajanpur district, UNICEF conducted trainings with district government officials to enable them to better coordinate the response. Attendance at cluster meetings in Multan and sectoral working group meetings in both districts has been strong, with agencies sharing their progress reports and operating areas with the district coordination office. However, organisations have not shared their budgets, future plans or phase-out strategies at these meetings, making clusters reactive rather than proactive strategic forums. The sharing of future plans is particularly important for agencies involved in service delivery (e.g., agencies working in government basic health units such as Merlin and Age UK/HelpAge). Although co-ordination has been adequate, many agencies voiced their frustration with the UN's obscure, poorly managed and coordinated consolidated appeals process.

The benefits accruing from cluster meetings to agencies included prevention of overlap, and forums to advocate for the inclusion of vulnerable groups (older persons, women, landless, children and the disabled) in flood response work. DFID was also present in provincial level cluster meetings in Multan, easing donor liaison for those agencies working through consortia with DFID funds. Some agencies have also managed to source suitably qualified local staff through the cluster system, as CVs were shared within the clusters. For example, organisations attending the Education cluster have been able to access staff trained in psychosocial support and basic hygiene practices to provide trainings in different parts of Muzaffargarh district. Age UK/HelpAge and Merlin have successfully engaged in joint assessments, while other agencies had carried out assessments individually or alongside corresponding line departments e.g., with district Education officers to assess schools.

What steps have agencies taken to ensure the participation of women in their flood response programmes?

Where committees were in place, women and girls were consulted and informed about activities (although not budgets). Save the Children and Islamic Relief had strong community mobilisation processes (child protection/ village committees and social mobilisers drawn from the affected population) and were better placed to incorporate the needs of women and children into their emergency response work. For example, some village committees (Basti Saron Wala and Mashori) prioritised widowed women & female headed households to receive core shelters first. Similarly, each Save the Children's child protection committee (CPC) in Rajanpur district consisted of four forums: males, females, girls and boys, with 5 persons in each forum. Each forum met as a group to monitor the child friendly space and to discuss at risk children within the community. Each forum held equal weight within the overall CPC. Some agencies had indicated that it was too difficult to include women in response work, in the relief phase, given the cultural context. Committees provide a mechanism/ forum for women and girls to participate in relief work, and to be viewed as positive agents of change. It is recommended that other agencies establish separate committees for women and girls, to better include them in the recovery phase.

Are all Food and NFI packages, including hygiene kits, culturally appropriate and delivered in good time?

Food and NFI kits were distributed in a timely manner (except Pir Haji Ishaq village, who first received food 30 November). In Basti Saron wala and Mashori male & female community members had not received winterisation kits (blankets, shawls, scarfs and quilts) although they had received mattresses and comprehensive NFI kits, i.e., kitchen utensils, mosquito nets and bed sheets. The social mobilisers in two

communities explained how to use items that were unfamiliar to some community members such as mosquito nets. Food was familiar to communities and provided in a semi-processed manner enabling them to use it according to their needs. Some households in Basti Saron wala had received unpalatable flour (soaked & lumpy), which was fed to the animals, whereas in Basti Mashori, the women stated that the flour was the best quality they had ever seen in their life! Materials inside the child friendly space kit in Jampur town were delivered in October and were familiar to the supervisors; they also addressed the key developmental needs of children, and were in line with INEE guidelines. All items distributed appeared to be culturally appropriate.

What evidence is there that agencies have been able to draw in and build on local capacity?

Only the BRC was working through local partners (Pakistani Red Crescent), as most agencies had chosen to implement directly. For the first month (Sept), Islamic Relief worked through a LNGO- Sanj to gain access to the area and context. Local field staff did not know if local organisations or CBOs would be used in the recovery & rehabilitation phases. Many organisations have complained about the lack of suitable local partners in Muzaffargarh and Rajanpur districts, and the lack of trust between local NGOs and beneficiaries, with flood affected communities, also apparently, suspicious of the integrity of LNGOs. However, one Department of Social Welfare official complained that international organisations working in Rajanpur district should make more effort to work with local NGOs, to build their capacity and knowledge of emergency response work, as the “LNGOs will remain after the INGOs have left”.

Local Government doctors were used in Merlin’s basic health units and agencies working in the education sector used School Councils in the rehabilitation of facilities. Save the Children also helped the district education office in Muzaffargarh to produce a budget and inventory of its needs that it could show to other donors (such as DFID). Local skilled labour was used in the rehabilitation of facilities (schools) on a cash for work basis, but payment was not offered for unskilled labour. Save the Children’s CPCs in Rajanpur district appeared to work very well within the communities, as it ensured the inclusion of women, girls and boys in the child friendly space (CFS). The women within the committee in Jampur town, knew the cost of running the CFS, the activities the children were involved in and the agency’s phase out plan. This CPC was planning to fundraise to keep the CFS running after the agency had left.

Age UK/HelpAge and Merlin were planning to provide a 4-day training for local staff working with older person associations and Save the Children had invested time in the capacity building of local staff and community members, on child protection issues and child rights in Rajanpur. However, new local staff working some agencies in Muzaffargarh district had received little training and the investment in staff appeared to be quite low, especially as some were on emergency 3-4 month contracts. Building the capacity of staff should be a priority in the next phase of emergency response.

Priority 4: We are accountable to beneficiaries

To what extent have beneficiaries been engaged at each stage of the intervention, in terms of input and feedback, and how has this informed planning?

How successful have agencies been in communicating and explaining their plans to disaster affected populations?

The security situation in Punjab province, and Ranjanpur district, in particular, have guided agencies towards a blanket no-branding policy to reduce their visibility in an attempt to increase their security

(British Red Cross/ Pakistan Red Crescent are the exception). Unfortunately, this policy has led to very weak downward accountability to beneficiaries, with few even knowing organisation's names or mandates (please see the table below). If visibility boards cannot be used for security purposes, then agencies must find more creative ways to proactively inform, consult and engage with beneficiaries on means (budgets), future plans and priorities for action. Similarly, agencies must share their telephone numbers and contact details with beneficiaries and inform them on how and where to make a complaint/ provide feedback. Complaints boxes (and their corresponding feedback) in local languages must be available at all villages, renovated schools, health units and child friendly spaces (CFSs).

	In general	With leaders	With women	With vulnerable
Accounting for actions done (info on activities, org mandate, mission)	Very little evidence of downward accountability or transparency. Communities were informed rather than consulted on activities. Only one community knew agencies' future plans or exit strategies.	In only two locations were (male) community members aware of the organisation responding in their village. Light consultations were held with men on future activities and during assessments.	Women were mainly informed of activities (e.g., distributions) and not consulted. No evidence that women knew agency names, mission, mandates or future plans.	No woman, boy, girl, elderly person or a person with disabilities could say the mandate of any organisation, the sector they were working in or future agency plans.
Accounting for means used (info on budgets)	Accountability boards were not in place in any location we visited, although Islamic Relief's visibility boards indicating donor and agency name (in English & Urdu) were visible in Basti Darri Wadhoo, Saron Wala & Mashori.	School teachers and the school council in Basti Jhandeer knew the renovation costs and the amount of money they should receive from the government, but no evidence at other sites or agencies visited.	Women on the CPCs knew running costs, as they were hoping to fundraise to keep the space open after Feb 2011. However, no other evidence at other sites visited.	No evidence at any sites visited.

	In general	With leaders	With women	With vulnerable
Feedback/complaints	No evidence of a complaints mechanism in place at any site or agency visited. No evidence that communities knew how, where or to whom to make a complaint.	In Basti Pir Haji Ishaq, 40% of the male villages had the telephone number of the org field officer, but they did know how to make a complaint. The DCO shut down 10 complaint helplines in Muzaffargarh in Oct because of too many calls.	Where female committees exist a feedback mechanism could be in place, although no agency is currently using committees for this purpose.	No evidence of vulnerable groups being proactively asked to provide feedback, or any evidence on how to make a complaint

Have agencies' assessments enabled disaggregation by gender and how has this influenced programme delivery?

Throughout the relief phase, only two organisations used female assessors or recruited female social mobilisers to interview women within the community; other organisations used all male assessment teams. In Basti Pir Haji Ishaq, one agency had not spoken to women at all during assessments in the relief phase but were still able to collect gender disaggregated data during the relief phase from male community leaders. Age UK/HelpAge had conducted household surveys to assess the needs of elderly women and men, and were beginning more detailed assessments (with both male and female assessors) through their cooperation with Merlin at the basic health units in the recovery phase. Agencies that had collected numbers of women and men/ household were able to alter winterisation kits (part of the NFIs) according to gender, with shawls for women and scarves for men.

Priority 5: We learn from experience

To what extent have agencies built on and drawn from lessons learnt from similar humanitarian responses, in particular previous flood responses

Lessons learnt and best practice from previous emergencies has been incorporated into this flood response, but this is only due to the initiative of individual staff members. Experience and knowledge has tended to be 'carried' by individual staff, rather than being institutionalised or documented within organisations. However, Islamic Relief had recently developed an online system whereby staff across Pakistan could document their lessons learnt from this flood through their intranet. Lessons arising from this emergency include the importance of capacity building the local population, local NGOs and local government officials on disaster preparedness and disaster risk reduction. Similarly agencies have reported the need to adopt an integrated or holistic approach to programming when working with affected communities and not to focus only upon one sector.

How effectively have agencies taken account of the need to restore livelihoods as quickly as possible?

Agencies that have adopted an integrated approach (Islamic Relief & Save the Children) have been able to take livelihoods into account early on in the relief efforts. For example, in Mashori village, Islamic Relief had distributed sewing machines to women and farmers had received seeds - however farmers (in Basti Saron Wala) complained that the effectiveness of distributing seeds was limited without tractor and fertiliser inputs. Agricultural land is still underwater in some parts of southern Punjab, and the remaining land is covered with a thick layer of sand and silt - prohibiting the planting of the usual crops (wheat, cotton, rice etc.). Farmers either need to change to crops that are able to grow in such environments, or clear the top layer of sand and silt before planting. Organisations working in Rajanpur district and Kot Addu tehsil in Muzaffargarh were intending to start livelihood programming from January 2011 onwards when the water will have receded from agricultural lands. Similarly, Age UK/HelpAge were planning livelihood interventions once the Older Persons Associations had been formed in late December, but at the time of the report had not finalized their strategy. Women's livelihoods have been disproportionately affected during the flood, as many were involved in tending animals - goats, sheep and chickens, which were washed away. Women in Basti Saron Wala, Mashori and Pir Haji Ishaq complained that they were now idle, as they did not have the capital to replace livestock or poultry. We did not come across any organisation that had specifically targeted or was planning to address the livelihood needs of women.

III. SINDH

Sindh was the last of the three provinces visited to be affected by the floods. The flooding in Sindh started in the first week of August with the breach of the Tori Bund. It is still not clear whether this breach happened naturally or intentionally as many people claim that it was intentionally breached by influential people to safeguard their own property from the floods. The government has appointed a judicial commission to investigate the matter. As a result of the Tori bund, a number of districts in Sindh at considerable distance from Indus River were also massively affected by the floods, including Kashmore, Jacobabad, Qambar Shahdadkot and Northern Shikarpur. These districts normally do not experience floods. In addition, the riverine areas along the Indus River were also secondarily affected. These areas are generally affected by the floods every year to some extent but were spared massive floods due to the Tori Bund breach. A total of 7 million people were affected by the floods in Sindh, most of them in the districts affected by the Tori bund breach. Around 650,000 houses were destroyed and 1.8 million people were living in camps at the peak of the flood. There are still 460,000 people living in camps while those returning to their villages are almost all living in tents set up on the ruins of their houses. Interior Sindh is much more backward than Punjab and KPK and its government has much lower capacity. Thus, in many ways, Sindh is the most vulnerable and least resilient province as a consequence of the floods. The team visited 4 districts (Kashmore, Qambar Shahdadkot, Sukkur and Shikarpur) and 8 agencies (ActionAid, BRC, CARE, Christian Aid, Concern, Oxfam, SCUK and World Vision) in Northern Sindh.

Priority 1: We use funds as stated

How well have DEC member agencies' scaled up to respond in the most urgent sectors and to the needs of the most vulnerable?

Most agencies were 2-4 weeks late in responding to the floods in Sindh due to the on-going work in KPK related to the conflict and the subsequent floods. Thus, agencies did not have sufficient capacity in Sindh to immediately launch operations. Those agencies that had partners in Sindh, such as Christian Aid, Concern and Oxfam, were able to start work more quickly. For example, Concern had standing MOUs

with several partners in Sindh to work through them in case of a disaster as part of its disaster preparedness plan for Pakistan. Given the lack of precedence of such a country-wide flood in Pakistan, some delay in starting in Sindh was to be expected and the delay could only have been reduced through proactive disaster preparedness, as with Concern.

Agencies did respond to the most important sectors during the displacement phase, i.e., food, NFI, shelter, WASH and health, which together accounted for almost 90% of the DEC proposal budgets for the first phase. The only significant omission was the absence of return packages, which is making it difficult for some families to leave camps and return to their villages. Since most displaced people had returned to their villages by the time of the evaluation, it is difficult to evaluate whether the most vulnerable IDPs were targeted by agencies. Agencies are now moving to villages in North/West districts and riverine areas---the two most affected areas respectively-- so there is good overall targeting at macro-level. However, in choosing specific villages in these districts, the focus on the most vulnerable and the most priority sectors has not been maintained by many agencies. For example, out of the 5 villages visited, one (Mohammed Taib Khwar, Shikarpur/SCUK) looked distinctly more vulnerable than the other four villages. In terms of sectors, the top priority for communities back in their villages is shelter and livelihoods, though many agencies are focusing on a variety of other sectors, including WASH and health, which are lower on people's priority list and looked less important than shelter and livelihoods to the evaluation team within the context of villages.

To what extent have agencies demonstrated the efficient and effective use of resources?

Given the widely different services and the distance of different project locations, it was difficult to compare the costs of services across agencies. Agencies providing multi-sectoral services were in a better position to spread overheads over a greater array of services and thus reduce costs. Some agencies also reported getting free access to buildings and other facilities. However, one area where costs differ widely relates to the use of local partners vs. self-implementation and local staff members vs. expatriate staff.

The level of operationality and the use of own local and expatriate staff, and consequent operational costs, seem less based on a careful analysis of the situation on the ground and more based on internal policies and inclinations. However, in most cases there did not seem to be huge differences in the quality of processes across the agencies even though the costs of structures, especially those involving large numbers of expatriates, will vary significantly. Of course, this being an RTE, it was not possible to look at the differences in impact across agencies with different structures. However, in looking at the ground situation, especially with respect to availability of quality local NGOs and the level of corruption in Pakistan, the evaluation team feels that CARE - which has a small team with a limited number of expatriates - represents something close to the ideal organizational structure for Sindh for agencies working with large budgets. The team came across several quality local NGOs even in remote districts, such as Indus Resource Center (Concern), Takhliq Foundation (CARE), Sachal Sarmast (ActionAid) and PVDP (Christian Aid). While these agencies may not have all the skills and capacities required to deliver large emergency programs, they did seem to have adequate capacity to be able to do so with some support from the INGO. Thus, several agencies had adopted the practice of embedding their own staff with the local NGO.

The overall quality of the programs delivered in IDP camps was high in 2 out of 3 cases. For example, CARE and World Vision were supporting camps in Khairpur and Qambar Shahdadkot where the public health situation was good despite the fact that sphere standards were (understandably) not met, the camp population seemed happy with the quality of life and mobilization of the community in project implementation was high. Agencies such as World Vision and CARE were successful in improving hygiene practices among camp residents. It is too early to judge the effectiveness of programs in villages.

Priority 2: We achieve intended programme objectives

Have agencies taken account of rapid changes in identified needs and revised programmes to meet these?

Agencies have generally been good at responding swiftly to rapid changes in the external environment. Even though the move from KPK to Sindh was delayed, it was still faster than the speed at which the UN had been able to make the same move. Within Sindh, the major change that has occurred has been the return of IDPs back to their villages as the water has receded. Agencies have been quick to follow people back to their villages and start programs there. More intermediate-level changes in programs are also evident across several agencies. For example, World Vision has added birthing services at the local levels after noticing that women were unable to travel to far-away locations and were getting confined to unsafe home deliveries. It has also adjusted the size of the hand pumps being used in camps in line with local preferences. However, in some cases (as with WVI camp), agencies have not been flexible enough to provide return packages to IDPs eager to go back to their villages to cultivate their lands but unable to do so due to lack of resources. Helping them with NFIs, cash, seeds, tools and food rations will greatly enhance their self-reliance and reduce the number of families still living in camps. The need for winter clothes is well recognized but very few agencies have immediate plans to provide them. The failure to meet this need could cause mortality and morbidity, especially among vulnerable groups.

Priority 3: We are committed to agreed humanitarian principles, standards and behaviours

To what degree have agencies engaged in joint assessment procedures / cluster approaches?

There were no cases of joint assessments in Sindh. However, overall coordination has improved gradually with time, leading to concrete benefits in identifying priority areas, avoiding duplication and developing joint technical standards. The UNOCHA holds cluster meetings with the government disaster management agency (PDMA) in Sukkur city for Northern Sindh and, also, arranges more consolidated meetings within each district. Language barriers and the domination of UN agencies were mentioned as problems with the cluster system. Almost all DEC agencies participate in these meetings. However, some duplication is still present and the wider benefits of coordination, such as joint assessments/programming, fund-raising, sharing future plans and advocacy, are still not evident (ActionAid got a water purifier through clusters). In one case, two agencies were seen providing latrines in the same village. While the same family is unlikely to be served by both agencies with such a visible product involved, duplicate services to the same family are possible in case of less visible services, such as food and cash distribution. Thus, beyond the coordination in clusters, there is a need for agencies to coordinate one a one-to-one basis to sort out duplication at the village levels and to share plans about future services to be provided.

What steps have agencies taken to ensure the participation of women in their flood response programmes?

Women were mostly happy that they were consulted but where needs were too high, not everything could be given. Most agencies, e.g., Christian Aid, included women mobilizers in their staff or partners to

enhance access to women. Women were generally included in committees formed to manage project implementation in camps. There were also instances where agencies changed intermediate-level aspects of their programming to better serve women. For example, World Vision has added birthing services at the local levels after noticing that women were unable to travel to far-away locations and were getting confined to unsafe home deliveries. Female-headed households were also given higher priority in camp registration by the CARE partner in Qambar Shahdadkot. Agencies have also aimed to ensure that the NFI packages include items of value for women. However, as agencies move to villages and women go back to their traditional roles, it would be crucial for agencies to continue to maintain close rapport for them and develop their recovery strategies based on the perspectives of not only men but also women. Oxfam has already taken the initiative in this regard by starting a livelihoods program focused on getting women to produce traditional quilts.

Are all Food and NFI packages, including hygiene kits, culturally appropriate and delivered in good time?

Agencies have generally strived to provide services that meet cultural norms. Thus, where cultural norms forbid open interaction among men and women, agencies have formed separate committees in camps. The same consideration has been applied where hostile tribes live in the same camps. Agencies working through local partners, Christian Aid, CARE and Concern, have found it easier to understand and take into consideration local norms in delivering services. Agencies have also placed emphasis on respecting beneficiaries and maintaining their dignity. Thus, Oxfam fired a senior staff member of a partner embedded within its structure since he had behaved rudely with communities on more than one occasion. Christian Aid partners had hired both men and women as staff members to enhance access to women and also dealt well with local tribal tensions.

What evidence is there that agencies have been able to draw in and build on local capacity?

As shown by the table under Priority 1, more than half the agencies are implementing programs through local NGO partners. Agencies working in camps, e.g., WV and CARE, also formed committees for facilitating project implementation and also engaged in enhancing their capacity to some extent. However, given that it was the relief phase, attention to capacity-building has understandably been limited. However, most agencies have plans to enhance the capacity of local committees, staff and partners in the next phase. Even agencies implementing programs directly, such as World Vision, have plans to work through partners in the next phase. Several agencies have also attempted to maximize local purchases, e.g., Christian Aid and Concern, although in some cases such attempts have been thwarted by shortage of quality inputs locally. Oxfam's quilt-making program also provides an innovative example of using local materials to meet the winterization needs.

Priority 4: We are accountable to beneficiaries

To what extent have beneficiaries been engaged at each stage of the intervention, in terms of input and feedback, and how has this informed planning?

The participation of people in the early stages of relief in camps was not in terms of identifying sectors- understandably due to the need to respond fast and self-evident nature of speed. Their participation in camps was mainly about intermediate-level decisions (e.g., location of facilities) and in project implementation. Most agencies working in camps had helped set up people's committees to mobilize people to participate in the project implementation, e.g., in keeping camp facilities clean, as in CARE and

World Vision camps in Khairpur and Qambar Shahdadkot respectively. As people return to villages and agencies embark on recovery work, it is crucial to genuinely involve people in the decision-making aspects of programming and to base programs primarily on their priorities. While agencies are placing greater emphasis on such participation, there are cases of where some agencies are providing services which are not top community priorities (e.g., water and latrines while people want shelter and livelihoods). It would be important for agencies to set up or work with existing village committees after ensuring that they are genuinely representative of all sections of the community. Almost all agencies have also instituted some mechanism to receive complaints and feedback from communities, including giving cell phone numbers of staff, placing complaint boxes or having separate monitoring staff collect feedback regularly. However, there is some degree of tokenism in some of these measures. A genuine feedback mechanism would require providing awareness-raising and training to communities about their rights and the types of issues that constitute violation of agency charters given the low self-efficacy of people in the region and their inclination to accept violation of human rights at the hands of government officials and local elites.

How successful have agencies been in communicating and explaining their plans to disaster affected populations?

The security situation in Pakistan has meant that most agencies are following a policy of non-branding their programs. As such, in many project sites, people did not know the name of the INGO, knowing it by either the name of staff members, partner NGOs or even just as “Company”. While overt branding may not be feasible, agencies must find more low-key means of communicating their identity, e.g., through verbal communication and hand bills, as well as their mandates, philosophy, future plans and exit strategy. Some degree of transparency mechanisms were in place in most projects being implemented by DEC agencies. These consisted of transparency boards or stickers on goods being delivered that explained the amount of goods or services to be received by people. In other cases, some agencies held briefing sessions on distribution plans before actually delivering their services. However, information about future plans, overall budgets and exit strategies are generally missing. For people in Sindh used to being treated shabbily by government officials and local elites, this significant exposure to international NGOs is a unique opportunity to be exposed to the principles of transparency, equity, fairness and dignity. By communicating effectively with communities, agencies can help enhance the standards and expectations among communities from other stakeholders.

Have agencies' assessments enabled disaggregation by gender and how has this influenced programme delivery?

Almost all agencies had data on the number of female-headed households and women in camps and gave them higher priority in the provision of services. Most agencies also formed separate committees for women for social mobilization purposes. Separate assessments were normally conducted with women to understand their special needs, and special services were provided by some agencies, e.g., the local birthing facilities by World Vision. Several agencies also provided women and child friendly spaces. Separate bathing areas and latrines for women were also common in camps. However, there is little evidence so far of the same focus on women in the recovery programs back in villages. Christian Aid has emphasized the hiring of women staff by partners to enhance access to women. Oxfam has also conducted assessments on livelihoods options for women and started a quilt-making program for women.

Priority 5: We learn from experience

To what extent have agencies built on and drawn from lessons learnt from similar humanitarian responses, in particular previous flood responses

Agencies deployed experienced staff to ensure incorporation of lessons learnt from past emergencies nationally and internationally. Examples of specific lessons incorporated by different agencies include greater financial diligence in cash programs in light of the experience from the tsunami, greater use of local capacity, sticking to sectors with sufficient capacity and greater emphasis on early recovery. However, the lessons learnt and their applications were generally embedded within staff members. There were relatively few examples of the use of formal agency-driven processes and documents being used to incorporate lessons from past emergencies. There were exceptions though, e.g., Oxfam was utilizing the lessons learnt document from the Cash Learning Project. There were also no clear mechanisms for capturing lessons from the current emergency and disseminating them within the agency or externally.

How effectively have agencies taken account of the need to restore livelihoods as quickly as possible?

There has been little emphasis so far on livelihoods activities as evident from the 7% of proposal budget assigned to them for the first round of DEC funding. [Editor's note, June 2011: as early as January 2011 the proportion of livelihoods work had increased to 16% as more families returned to their home areas]. However, almost all agencies have plans to engage in livelihoods work for the next phase. Some agencies have already started limited amount of livelihoods work. Oxfam's quilt-making program for women is an example of a very innovative program that provides income for women, addresses winter needs and is based almost completely on local labour and material purchases. CARE is investigating the possibility of supporting sunflower cultivation since it can be started as late as January by which time more of the land will be available for cultivation after the evaporation of flood water. World Vision has done limited amounts of seeds and tools distribution. Given the limited amount of funding and massive amounts of needs in almost all sectors, livelihoods work provides an avenue for leveraging the value of available funds and encouraging self-reliance among people. As such, livelihoods activities should be the largest area of work for the next phase, with a special focus on women's activities, such as quilt-making, goat-rearing, chicken-rearing and vegetable gardening.

IV BALOCHISTAN

Balochistan was the least-affected province though vulnerability may still have been high as it is the most under-developed province of Pakistan. Only three agencies are working there with DEC money- ActionAid, Concern and CAFOD. Other agencies (e.g., Christian Aid) were working in Balochistan, through local partners and with non-DEC funding. Unfortunately, the team could not visit Balochistan due to time and budget constraints. However, the team was able to interview CAFOD team members in Islamabad, who highlighted some innovative techniques that they and their partner CRS have used to enhance accountability to illiterate beneficiaries in Balochistan. Drop boxes have been placed in communities, similar to other agencies. However, given the low level of literacy, these boxes have been located in schools or in places where literate members of the community can write and communicate the complaints. In order to be more inclusive of illiterate beneficiaries, CRS is in the process of developing leaflets that contain pictorial hygiene promotion messages along with telephone numbers that can be used for suggestions and complaints.

OBJECTIVE 2. IDENTIFICATION OF KEY RISKS AND IMPLEMENTATION OF SUITABLE MITIGATING ACTIONS.

Member agencies' emergency response plans illustrated that the highest risk, in terms of impact and likelihood, was: '*Scale of disaster in relation to appeal income means response fails to meet expectations of beneficiaries and/ or donors*'. Planned and current controls to minimise this threat included working in coordination with other humanitarian actors, increased fundraising and diversification of donors to reduce sole dependence upon DEC funds, and tailoring response work to key target groups, whether by sector or according to vulnerability. The scale of this emergency, in terms of geographical spread and the high numbers of flood-affected people, has placed a huge constraint on the availability of financial, human and logistical resources available to meet beneficiaries' needs. Some agencies were also responding to the conflict-induced IDPs in KPK province, placing a strain upon the availability of staff and organisational capacity to manage funds from different donors for multiple areas with differing needs. Agencies were correct to identify this risk as high in their emergency response plans. However, few agencies foresaw the need to coordinate funding streams to ensure that the money reached the most vulnerable districts across the four provinces and not to only focus upon KPK province, in which many agencies had a prior presence. Punjab and Sindh province appear to be receiving DEC member agencies' attention, despite the lack of prior presence for some agencies; however, Balochistan province has been neglected even though it one of the worst affected provinces with pre-flood high poverty levels. As yet the humanitarian community has not received any (political/ security) backlash from provinces that may have been sidelined from the response (Balochistan and Southern Sindh), although this threat remains.

The second highest threat in terms of impact and likelihood was, '*Target population is inaccessible*'. Mitigating factors included liaising with other agencies attending clusters and searching for alternative transport options (helicopters, boats) to reach beneficiaries. Agencies had chosen to interpret this risk in terms of logistical problems created by the flood-waters, and not in relation to reaching marginalised or vulnerable groups, such as women in *purdah*, landless, persons with disabilities or ethnic/ religious minorities. Whilst, logistically, it was difficult to reach beneficiaries during August and much of September in Sindh and Punjab province (particularly for assessments), agencies have managed to overcome this problem, despite the rapid movement of IDPs. However, agencies have not been as successful in planning mitigating strategies to reach out to marginalised groups (particularly women in *purdah*), as this was not within their original risk registers. The need to reach vulnerable groups will continue to be a problem through the recovery and reconstruction phases, particularly in more conservative Balochistan and KPK.

According to agency plans, the third highest risk was, '*The physical and mental health, security or safety of staff is unacceptably threatened by their work*'. Mitigating strategies included R&R for (international) staff, the appointment of staff welfare and security officers, updated security procedures (SOPs) and plans, and the monitoring of community acceptance towards agencies. The security risks across the country vary considerably, and these risks differ depending upon an organisation's mandate and the nationality of agency staff. Pakistani nationals are freer to move across the country, although their risk of kidnapping is higher in Balochistan than the kidnapping of internationals. Alternatively, internationals are restricted in their movements in KPK, Baluchistan and southern Punjab province. Christian faith-based organisations are at a higher risk from militant forces or mobilised (disgruntled) beneficiaries and

yet these agencies rated this risk as 'low', in comparison to other DEC members (notably Islamic Relief) who rated it as 'medium' or 'high'. No agency had disaggregated this risk or corresponding controls according to national or international staff, which possibly negated their effectiveness.

'Corruption/ fraud at partner or agency level means funds not used as planned (including risk diverted to terrorism' was classified as the fourth highest risk. DEC agencies have listed the following as mitigating factors: embedding staff within partner organisations, in-depth partner appraisals (for new local partners), strict financial procedures, procurement by main agency, development and inclusion of fraud and code of conduct policies into partner MoUs. Corruption and mismanagement of funds is a serious and widespread problem within Pakistan; with KPK and Balochistan provinces possibly the most affected due to their porous border with Afghanistan. Unfortunately, the evaluation mission was unable to visit Balochistan province so we cannot comment on the mitigating strategies adopted by agencies working in this province. However, the evaluation team did come across cases of corruption in KPK province although these did not involve DEC agencies. Beneficiaries had filmed these acts of fraud or corruption in relief distributions on their mobile phones. Agencies working within KPK province have correctly identified this risk as high (both in terms of likelihood and impact), although corruption, from Government actors, has arisen as a problem in all flood affected provinces. Whilst some agencies had mentioned the application of fraud policies and strong financial management as planned controls, very few agencies had beneficiary complaint or feedback mechanisms in place to report cases of abuse, fraud or corruption, or had used advocacy to highlight the problem. Transparency and downward accountability limits the opportunity for corruption or fraud to take place, and yet these were found to be lacking in Punjab and KPK province, and were not mentioned as mitigating strategies. Given the risk of corruption and fraud within Pakistan and the large amount of funds and relief supplies flowing through the country, it may be wiser for DEC agencies to increase their risk rating to 'high' and to list more creative mitigating strategies.

'Lack of inter-agency coordination leads to overlap (or unanticipated gaps) in agency programmes' was listed as the fifth highest risk according to DEC agencies emergency response plans. Mitigating strategies adopted are, engagement in IASC cluster meetings, coordination with district and provincial level coordination offices and disaster management agencies, and advocacy for greater coordination within Pakistan Humanitarian Forum (PHF). The scale of this emergency, in terms of geographical spread and the high numbers of flood affected people, has minimised any risks associated with agencies overlapping in their areas or sectors of operation. In Punjab province, the Government has allocated agencies to work in certain villages to meet beneficiary needs, thus it is rare to find two agencies in the same village in this province (the collaboration between Age UK/HelpAge UK and Merlin is the exception). In Sindh province, agencies have mainly been working through sectors in camp environments, although as beneficiaries move to their villages unanticipated gaps may arise. In KPK, unanticipated gaps have arisen regarding the targeting of vulnerable groups, such as the landless poor, and Balochistan province has been marginalised overall in the response. Agencies operating in Sindh and KPK province could, as a mitigating strategy, advocate for a greater coordination role played by the respective provincial governments. In addition, agencies within the PHF must advocate for resources to be (re)directed to marginalised groups and areas of the country.

Six agencies had classified *'limited agency and/or partner capacity in country constrains ability to deliver effective programmes'* as 'low' whilst two agencies had labelled this risk as 'high'. Mitigating strategies listed are, capacity building (trainings and on-the-job mentoring of partner staff, seconding staff from partner organisations within DEC member agencies, or embedding DEC agency staff within local partner's organisations). Very few agencies are working through local partners in KPK and Punjab province, British Red Cross/ Pakistan Red Crescent are the exception. There are approximately 200 LNGOs in Punjab province, however they have a very poor reputation with the Government, beneficiaries and other agencies, making it difficult for DEC members to seek a partnership with them. Agencies operating in Sindh, however, used a mixture of direct implementation, working through long-term partners (Concern, Christian Aid and CARE) and establishing new partnerships. LNGO capacity appeared to be very weak in some areas, with few partners having prior experience or training on emergency response work. Similarly, the geographical scale of the disaster has meant agencies have shifted staff between provinces with KPK province being a net exporter of human capital, due to their prior experience of emergencies. All agencies have been involved in recruitment drives for both national and international staff, with agencies complaining that it has been harder to fill national positions with suitably qualified persons. In light of the above, it may be wiser for agencies to increase the (likelihood) rating for this risk, although the mitigating strategies are likely to remain the same as the agencies have stated in their plans.

The penultimate risk listed is, *'Government pressure or intervention undermines ability to satisfy humanitarian imperative'*, with a 'medium' risk rating. Agencies stated this as a problem common to all provinces. For example, there was political interference in the identification of flood affected villages by the provincial Punjab government, and interference from feudal lords or tribal leaders in Sindh and KPK province. Mitigating strategies involved, clear beneficiary selection criteria, commitment to Code of Conduct, HAP and Sphere standards, coordination and information sharing with the Government and Disaster Management Authorities. The Government has challenged humanitarian principles by forcing international humanitarian workers to operate with a police escort in some parts of the country (KPK, Balochistan and southern Punjab provinces). Some agencies have regarded this as an unacceptable breach of the Humanitarian Charter and they have subsequently pulled out, or reduced/ prevented international staff from working in these areas. Unfortunately, many of the 'red security areas' are the same areas as those extensively affected by the floods (KPK, southern Punjab and Balochistan provinces). No agency had highlighted this risk specifically within their risk registers, and thus there were no mitigating factors (other than possibly advocacy listed by Oxfam). It is advisable for agencies to increase this risk rating and to develop corresponding but practical mitigating strategies in an attempt to minimise the erosion of humanitarian principles in aid delivery.

The lowest risk rated was *'terrorist groups active within Pakistan gain access to DEC funds intended for relief efforts'*. Corresponding mitigating strategies listed are: vetting vendors and partners against terrorist/ black company lists, working through established partners and incorporation of UN Resolution 1373 into partner MOUs. The evaluation team came across no incidences of terrorist/ militant groups gaining access to humanitarian funds, and thus this risk and corresponding strategies are correctly rated and listed by agencies. Some agencies had listed additional risks and controls within their registers to supplement the basic risks that are applicable across all emergencies. Other DEC members had listed additional risks specific to their sector of work (Oxfam-WASH, Merlin-health care), whilst others had

highlighted the difficulty in procuring quality relief supplies (tents and tarpaulin), inflation leading to high prices and/ or lack of acceptance from beneficiaries. ActionAid and Tearfund had the most comprehensive risk registers that were particularly contextualised to this flood emergency in Pakistan, equipping these two agencies to better manage future problems.

OBJECTIVE 3—10 KEY RECOMMENDATIONS

1) Provide winter clothing and return packages in Sindh

Winter is rapidly approaching throughout Pakistan and will drastically affect flood-affected people, as most of them are still living in makeshift housing. While winter kits have been provided in Punjab and KPK, they are severely lacking in Sindh. To avoid significant mortality and morbidity, it is crucial for agencies working in Sindh to provide flood-affected people with winter kits, preferably by using local materials and labor as done by Oxfam through its quilt production program with women. In some cases, people are unable to go back to their villages due to lack of funds. Instead of spending money keeping such people in camps, agencies should look to provide them with return packages.

2) Enhance the use of and build local capacity strategically

The use of local staff, local partners, and village committees, and strengthening their capacity is crucial to augment cost-effectiveness, immediate program quality, and long-term sustainability. Given the negative image of local NGOs in some areas, it is crucial to pick local NGO partners carefully and help them develop rapport and trust with communities. The capacity of local staff, partners and village communities must be enhanced in delivering transparent, high-quality, equitable and participatory recovery and disaster-preparedness and risk reduction programs. There is also a need to decentralize more authority to the local level to amplify the speed and quality of interventions. Finally, agencies must also actively seek to utilize local materials and labour in their interventions to pump more money into the local economy.

3) Develop clearer criteria for targeting of affected groups and villages

Targeting was identified as being weak in all three provinces. Given the large number of affected people and limited funds, it is critical for agencies to develop clear and transparent criteria for identifying communities for the recovery phase. A three-tiered process is recommended. Agencies must identify the districts and Union Councils based on coordination with other agencies through the cluster systems. Within these identified geographical areas, agencies must narrow their remit first on the basis of vulnerability, the clearest and most objective criterion in this regard being the destruction of houses due to flood. Finally, since the number of eligible people may still be high, the final cut must be premised on resilience levels, e.g., access to land; current cultivation status and pre-flood housing condition. Resilience, in general, will be higher than in many other cases in disaster-prone countries where communities experience major disasters every few years and in many cases are unable to meet their needs fully even in disaster-free years. In most parts of Pakistan, resilience will be higher as this was the first major disaster in several decades and pre-disaster ability to meet survival needs was adequate. However, resilience varies significantly from village to village and group to group. Thus, careful analysis of the resilience of different groups and villages is crucial as a means of better targeting.

4) Develop interventions in villages based on people's priorities/needs

Flood-affected communities currently have diverse needs, including food, shelter, health, education, protection and livelihoods. Among these, shelter is the top-most priority for people, followed by

livelihoods. Given limited funding, it is critical to focus on sectors identified as priority by communities and which will have the highest impact. Agencies have to adopt strategies that stretch the value of available funds. The best strategy for doing so is by focusing heavily on livelihoods activities in the recovery phase, which are also seen as the top priority by people along with core shelter. In the absence of adequate money for core shelter and other sectors, livelihoods activities, especially for women, can serve as the best avenue for helping people meet all these needs on their own over time. Such livelihoods activities could include major crops, minor crops, livestock, poultry, vegetable gardening, quilt-making and cash for work activities to clean and repair village infrastructure. All this will require extensive consultations with communities to allow them to influence strategic decisions for the next phase. Any food within the pipeline could be diverted to ‘food for work’ programmes rather than used as relief.

5) Enhance coordination with other stakeholders

Coordination has improved considerably since the beginning and yielded concrete benefits to agencies in identifying priority areas, securing donor contracts (particularly through DFID consortium) reducing duplication and developing common standards. The HAP network has worked well. However, some duplication is still evident while several other benefits of coordination, such as joint assessments and programming, fund-raising and advocacy are yet not apparent. Thus, agencies must enhance coordination to overcome these gaps. There is also a need for one-to-one coordination for more specific and bilateral issues based on initial coordination through the clusters. There is also a need for agencies to share information with each other on not just current programming but also future plans and exit strategies.

6) Engage more proactively with women and other vulnerable groups to enhance protection

While agencies have generally given adequate attention to the needs of women, there is a need to engage with women more strategically and use them as agents of positive change. Whilst addressing needs, programmes missed opportunities to integrate cross cutting issues with the potential of augmenting the impact of the interventions beyond immediate recovery. Gender mainstreaming, is one such issue. In some cases it was postponed as “*too challenging in the relief phase in KPK*” – even if concurrent experience of other DEC agencies showed that there is a space to start bringing women together for action in the earlier response. There is a need to enhance the capacity and empowerment of women by increasing their knowledge, awareness, ability to work jointly and access to livelihoods activities. This can be done by enhancing the number and quality of female staff in agency and partner teams. Other ways to reach out to women include: a) using female telephone operators on complaints/ feedback lines and giving the females in the households the phone numbers; b) undertaking integrated programming to access women in health centres, maternity centers/ groups, nutritional feeding centers, child friendly spaces and through livelihoods; c) setting up separate committees for women & girls (e.g., as by SCUK around CFSs). Other key groups include the landless, children, minorities, elderly and people with disabilities. The focus should be on enhancing their status and providing them access to economic and political opportunities.

7) Develop clearer communication strategies to enhance transparency and awareness

There is a need to enhance transparency and awareness among communities not only about current programs but also overall agency mandates, future plans and exit strategies. Where the security situation makes it difficult to have high visibility and dictates a no-branding policy, it is important for agencies to employ more low-key strategies to fully communicate these aspects to communities, e.g., through verbal communication and hand-outs. For people in Sindh and southern Punjab who are used to being treated

shabbily by government officials and local elites, this significant exposure to international NGOs is a unique opportunity to be exposed to the principles of transparency, equity, fairness and dignity. By communicating effectively with communities, agencies can help enhance the standards of expectations among communities from other stakeholders.

8) Undertake advocacy on critical issues

While agencies were not able to undertake much advocacy during relief, it is critical to enhance their advocacy work during the recovery phase. Some of the critical issues requiring advocacy include the transparent distribution of the government Watan card cash programs, land issues and increasing equity and transparency and reducing politicisation of aid and corruption in the overall flood response. The Pakistan Humanitarian Forum has already started addressing some of these issues. So the focus in the future must be on consolidating work at the national level and carrying it forward at the ground level.

9) Facilitate DRR/preparedness at local and regional levels

Integration of Disaster Risk Reduction is talked about in HQs, but awareness of staff in the field is low, and practical guidelines to embed it in programmes are lacking. Given the increased likelihood of major floods in Pakistan in the future due to climate change, it is crucial for agencies to focus on disaster risk reduction and preparedness issues during the next phase of their work. A coordinated approach through the cluster system will enhance the effectiveness of DRR programming. It is also critical for agencies to incorporate DRR issues in all construction work that they undertake during the recovery phase. This could include building houses on higher ground, identifying possible community shelter locations, using schools as a DRR medium, developing spaces near the ceiling for storing goods before evacuating in case of a flood and building more sturdy buildings (government and civil).

10) Enhance the incorporation, documentation and dissemination of lessons learnt

Agencies have generally recruited and seconded experienced staff nationally and internationally. However, with a few exceptions, there was little evidence of more formal processes undertaken to incorporate learning from previous emergencies or to have processes in place to capture and disseminate learning from the current response. Thus, agencies must enhance the formal processes for the incorporation, documentation and dissemination of lessons learnt. Clusters provide an immediate opportunity to disseminate such learning and good practices.

Appendix

1) Methodology

ThinkAhead employed a six-member gender-balanced team of consultants to undertake the evaluation, including three international and three national consultants. The team undertook a field mission in Pakistan from November 22-December 3, 2010, which included field visits to partner projects in Khyber-Pakhtunkhwa, Punjab and Sindh provinces, and utilized the following data collection tools to evaluate the performance of the agencies:

Literature review: The team reviewed the key planning and reporting documents of the agencies and DEC related to the emergency as well as previous lessons learnt reports from large emergencies, especially DEC reports.

Initial briefing workshop: The team held an initial briefing workshop with DEC partners in Islamabad, Pakistan on November 24, 2010 to understand the perspectives of the key staff of the member agencies at national level on progress-to-date and the key external and internal factors affecting their ability to meet the DEC accountability priorities.

Individual interviews with agency and partner staff: The team held individual interviews with senior agency and partner staff in Islamabad and field levels to collect information on progress to-date.

Stakeholder interviews: Interviews were held with the senior officials from the government of Pakistan and UN agencies at the Islamabad and field levels. A list of such persons is included in the appendix.

Participatory exercise with communities: The main sources of information for the team were participatory exercises with affected communities in around 20 project sites in the three provinces. The exercise included: a) focus group discussion to generate collective analysis, b) individual interview to collect personal experiences and c) key informant interview. Various social and vulnerability categories of the communities such as gender, generation (elderly, adolescents and children), religion, occupation, ability, mobility and wealth were equitably included in the exercises. Care was taken to ensure that the mission outreach is as wide and deep as possible given the timeframe of the mission. Three teams were deployed—one team for each province. Each team visited regions where a large number of DEC agencies were operational. Within these regions, the mission covered all types of sites--communities living in camps, original villages or with other (host) communities. The teams were able to visit the projects of 11 of the 13 agencies. The two remaining agencies—CAFOD and Tearfund—were not present in the regions covered by the evaluation team. The team was unable to cover Balochistan due to shortage of time and budget.

Direct observation: Transect walks were undertaken in each field site by team members to evaluate physical layout, condition of communities and nature of services provided.

Debriefing workshop: A half day debrief event was held at the end of the field visits on December 3, 2010 in Islamabad to present the initial findings and to collectively reflect not only on the lessons and findings but also on its implications for future policy, operational and programme priorities. A subsequent debrief workshop will be held in London, UK on December 16, 2010.

Limitations

- We faced difficulties in verifying Who Works Where & When (WWWW) at the beginning of the consultancy to select provinces & sites, as agencies changed their operating areas between proposal to actual implementation due to scale of the disaster & needs.
- Insufficient time, money and the security situation made it difficult to cover all provinces (especially northern KP, lower Sindh & Balochistan) and agencies (Cafod & Tearfund).
- There were significant fluctuations in the level of people interviewed across provinces as Punjab & KPK teams met mainly with field workers rather than regional programme managers or co-ordinators, which explains why they did not receive so much strategic information (on future programming) in comparison to the Sindh team.
- The timing of the RTE was inconvenient for some agencies given the simultaneous visit of Mike Walsh, which meant many agencies in KPK were torn between 2 DEC visits. In addition, it would have been better to hold the RTE earlier or later by about 10 days so that the evaluation team either could feed into the interim reports or evaluate the reports once they had been handed in.
- It was difficult to separate out DEC funds from other funds at the field level

2) INGOs' participation in Orientation Session-24-11-2010, Oxfam GB Office

Name	Organization
Rich Moseanko	World Vision
Steffen Horstmeier	World Vision
Sophie Arcedeckne Butler	CAFOD
Syed Moez ud Din	HelpAge
Iftikhar Ahmad Shaheen	Merlin
Haroon Altaf	Islamic Relief
Samuel Monet	Save the Children
Siddiq Ahmed Khan	Save the Children
John English	British Red Cross
Waheed Shah	ActionAid
Marleen Schepers	ActionAid UK
Suresh Thapa	ActionAid Nepal
Neill Garvie	Christian Aid
Ginny Robins	Christian Aid
Francis Hakas	Oxfam GB
AAllan Calma	CWS-P/A Christian Aid
Mubashir Ahmed	Concern Worldwide
Dorothy Blane	Concern Worldwide
Betty Kweyv	CARE
Karen Moore	CARE

3) INGOs' participation in Debrief Session--03-12-2010, Oxfam GB Office

Name	Organization
Ben Tshin	World Vision
Anees ur Rehman	World Vision
Mahmood Ahmed	Help Age International
Iftikhar Ahmad Shaheen	Merlin
John English	British Red Cross
Neill Garvie	Christian Aid
Francis Lacasse	Oxfam GB
Neva Khan	Oxfam GB
Dorothy Blane	Concern Worldwide
Karen Moore	CARE
M. Fazal	CWS/Christian Aid
Farid Alam	ActionAid Pakistan
Shashanka Saadi	ActionAid Pakistan
Paras Mani Tamang	ActionAid Pakistan
Anna Walton	Merlin
Serena Zanella	SC- UK

4) List of UN and government officials interviewed

Victor Lahai	UNOCHA, Northern Sindh
Dr. Aijaz Ahmed	Director Provincial Disaster Management Agency, Northern Sindh
Martin Mogwanja	Humanitarian Coordinator, UNOCHA, Islamabad
General Nadeem Ahmed	Director, National Disaster Management Agency, Islamabad
Abdul Ghaffar Khan	District Education Officer Muzaffargarh
M.Masul Nadeem	Education District Officer Muzaffargarh
Tariq Mahmood	District Monitoring Officer Muzaffargarh
Ayaz Khan Aswan	Deputy District Social Welfare Officer Ranjanpur
Dr. Sabz Ali	EDO Nowshera, KPK

5) The Evaluation Team

ThinkAhead, the official contractor for the evaluation, is a UK-based international development consultancy, committed to promoting actions that make real and sustained differences to people living in poverty and to the organisations that seek to bring about such changes. ThinkAhead has direct design, implementation and evaluation experience in all key development sectors, especially in disaster risk reduction, climate change adaptation, enterprise development, microfinance, voice and accountability,

education and cultural development, and HIV/AIDS. The distinctiveness of ThinkAhead is in its southern character, high quality expertise and its diverse operational and policy experience. Some of its clients are: ActionAid International, Adam Smith International, Concern Worldwide, DFID, Disasters Emergency Committee (DEC), Harewelle International, IFRC, University of Sussex, British Red Cross, InterAction, Merlin, Oxfam GB, Plan International and UNDP. It has provided technical assistance to several governments including in Bangladesh, Ghana, Malawi, Tanzania, Uganda, Vietnam, and Zimbabwe.

The team was led by Dr. Niaz Murtaza (USA-based and originally from Pakistan) who has more than 15 years of experience in emergency response, DRR activities and implementation of international technical standards in more than 40 countries in Asia, Africa and Americas with reputed agencies such as IRC, Oxfam, CHF and ActionAid. In his recent job as International Program Manager, Emergencies for ActionAid, Niaz was the agency's international lead person for the implementation of all emergency response work, including the DEC-funded Pakistan Earthquake, tsunami, Myanmar, Bangladesh, and DRC appeals and other emergency programs. Niaz has a Ph.D. from the University of California at Berkeley in community-level sustainable development issues among disaster-prone communities and is currently working there with a research focus on accountability and impact assessment issues.

Niaz was supported by several other team members. Sarah Harrison (Sweden-based and originally from the UK) has several years experience in designing, managing, implementing and evaluating emergency response programmes in complex emergencies. Sarah has worked across Asia, Africa, Americas and the Middle East, advising multiple agencies (International Organisation for Migration, ActionAid International, CARE, War Child UK, Mapendo International, Danish Church Aid, Lutheran World Federation, USAID and ACT Alliance members) on humanitarian response - specifically protection, psychosocial support and gender programming. Sarah chairs the IASC Mental Health and Psychosocial Support reference group and has been part of the committee incorporating psychosocial support into the Sphere standards revision, as well as the dissemination and application of IASC guidelines and Sphere standards. Sarah holds two masters degrees in Psychology, and Peace and Conflict studies and an international diploma in human rights.

Silva Ferretti (based in Italy) has a PhD from Oxford Brookes University. She works on issues of impact assessment / accountability through practical engagement in evaluation work; setting up strategies / monitoring frameworks; training / facilitation and coaching; research. She is exploring the use of multimedia for improving shared learning practices around humanitarian and development work. She has also undertaken work (i.e. evaluation, documentation, development of methodologies) on DRR in many Asian and African countries. All this was done by collaborating with a large number of organizations (including - recently- ActionAid, IASC, HAP/SPHERE, NRC, UNICEF, Save the Children, WorldVision). She was involved in agency-level evaluations of the DEC response in Myanmar and Gaza, and she is the leader for the ongoing process of evaluation/learning of AGIRE (the Italian equivalent of the DEC) response in Haiti.

Mr. Sajjad Akhtar (Pakistan-based) is a Development expert with a 15-year hands-on experience of managing, conducting and providing leadership to emergency and development research and policy analysis, through situation and stakeholder analysis, monitoring and evaluation of emergency, social and economic programs and analysis of qualitative and quantitative data/information. These qualifications

span areas of Emergency Management, Agriculture, Poverty measurement and livelihood assessment, Education, Labor, and Household Studies. Short-term economic consultant to a number of national and international organizations, including World Bank, DFID, GTZ, ILO, FAO, UNDP, and WFP. Intellectual and organizational leadership to national publications (i.e., MDGs Reports, Economic Surveys and Social Development Reviews) was also extended in advocating policy options and interventions.

Ms. Sahar Gul Bhatti (Pakistan-based) has 10-years of experience in working as a development practitioner with national and international organizations in Pakistan with Oxfam GB, National Commission for Human Development (NCHD), Aga Khan Development Network, World Wide Fund (WWF), National Commission on the Status of Women (NCSW) and Regional Academy for Research and Renaissance (RARRe). She was engaged in relief activities in the current floods of 2010 in Pakistan; she has monitored coverage of flood-affected areas with local organizations and media in Sindh. Ms. Bhatti also worked as a Project Officer in Oxfam GB in the disaster of 2003—her role was to monitor the overall project activities related to relief, rehabilitation and disaster mitigation processes. Her expertises include trainings, conducting evaluations, research (on socio-political issues), and report writing. Sahar is twice Masters, one in Philosophy from Pakistan and another in Anthropology of Development from the UK.

Noor Mohammad, a Pakistani, has years of development experience especially in monitoring and evaluation of projects. He has just completed a monitoring mission in Afghanistan for Oxfam Novib and conducted similar assignments in the past with many local and international NGOs. He has significant understanding about flooding context in Pakistan as well as context of local NGOs. He has experience in international humanitarian standards and principles.