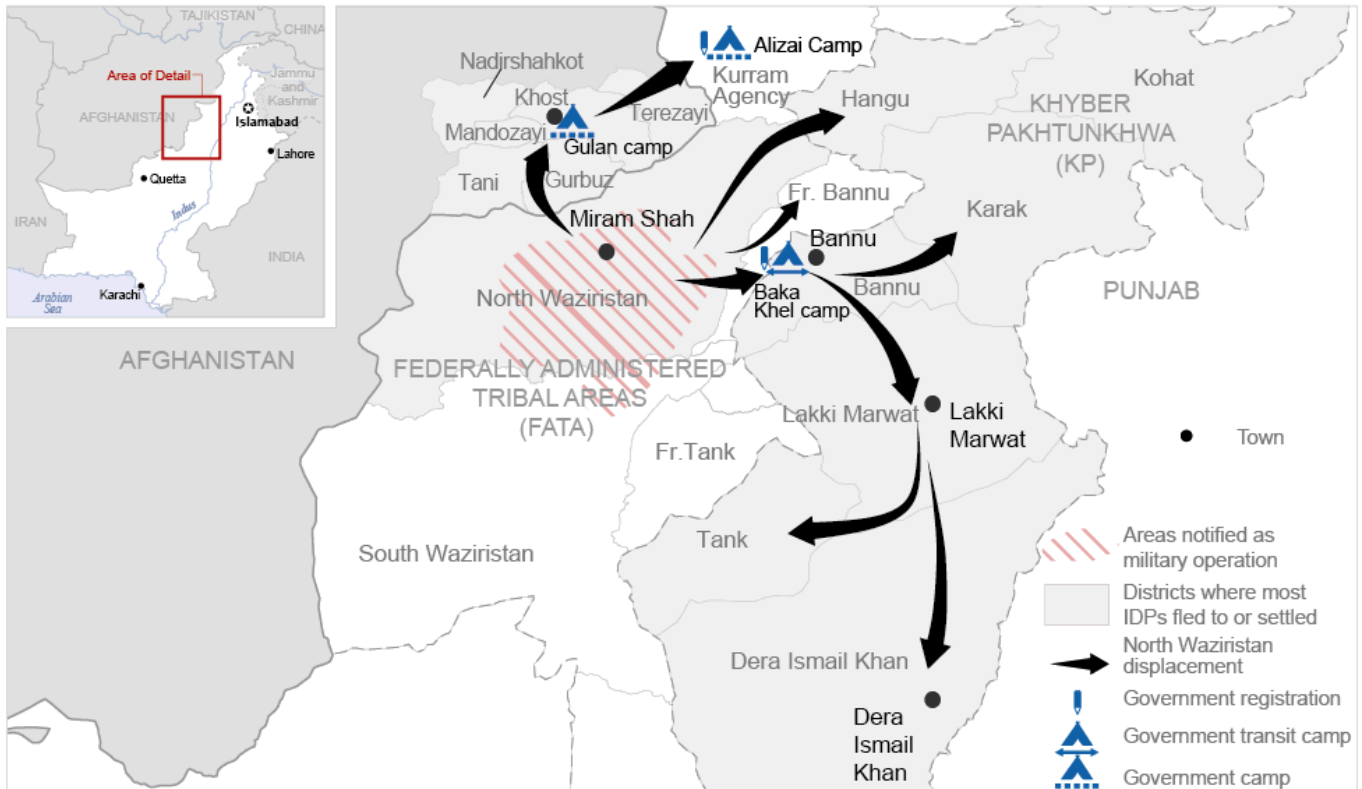




This report is produced by OCHA Pakistan in collaboration with humanitarian partners. It was issued by OCHA Pakistan. It covers the period from 25 to 27 June 2014. The next report will be issued on or around 30 June.

Highlights



Source: OCHA Pakistan

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

- With almost no new displacements since 24 June the number of people displaced from North Waziristan Agency (NWA) remains at over 457,000 people, with more than 74 per cent of them women and children.
- Over 90,000 people went from NWA to Khost province of Afghanistan. Unverified reports indicate that another approximately 10,000 people are in Paktika province.
- Humanitarian partners are supporting the Government in provision of life-saving assistance to the IDPs.
- Humanitarian response is scaling up as partners are increasing presence in the hosting districts.
- Blanket polio vaccination is being carried out to stop spread of polio to other regions. NWA is considered reservoir of polio as vaccination was banned in the area.
- The main priority needs are food, health, protection activities as well as water, sanitation and hygiene (WASH). Urgent funding resources are needed to scale up the humanitarian response.

457,000+ Displaced from NWA to other parts of Pakistan as of 26 June	90,000+ Displaced from NWA to Afghanistan as of 26 June	74 % Of the NWA IDPs are women and children	930,000 Pre-existing displaced people in KP and FATA in need of humanitarian assistance	1.6 m Registered Afghan Refugees	US\$18 m Pledged or contributed by donors
--	---	---	---	--	---

+ For more information, see “background on the crisis” at the end of the report

Source: OCHA Pakistan

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

Situation Overview

As of 27 June, the Federally Administered Tribal Areas (FATA) Disaster Management Authority (FDMA) has registered 457,048 IDPs (36,904 families). Very few registrations have taken place after the re-imposition of curfew from 24 June. Reports from the field suggest that a potentially significant number of families who arrived through unfrequented routes remain un-registered.

The majority of the displaced families are residing in Bannu district, with others moving to Hangu, Lakki Marwat, Karak, Dera Ismail Khan, Charsadda, Tank and Kohat districts in Khyber Pakhtunkhwa province, as well as to other parts of the country.

Over 90,000 people have reached Khost province of Afghanistan, where they are receiving assistance from humanitarian partners and the Government. Unverified reports indicate that another approximately 10,000 people are in Paktika province who have not been assessed yet.

Pakistan's National Database Registration Authority (NADRA) has started verifying the registered families and so far 17,000 families have been verified according to FDMA. Another 13,500 have been rejected on the basis of Computerised National Identity Cards (CNIC) issues, such as invalid or expired CNICs or invalid family trees. As such, these cases need to be addressed to reconcile their data. UNHCR is working with FDMA on issues related to registration.

The people who moved to Bannu are facing hardships due to overwhelmed facilities. Most IDPs are living with friends and relatives or in public buildings and rented houses. Due to high demand, house rents have gone up and the displaced families are finding it hard to cope with the situation. A large number of people have to share small rooms in scorching heat. The Government's established camp in the Frontier Region of Bannu has attracted only 28 families.

On 27 June, the Prime Minister along with the Governor and Chief Minister KP and the Army Chief visited Bannu to meet with IDPs and review the response efforts. He announced PKR 20,000 (US\$200) for each family as *Ramadan* Package. In addition, the Government is providing cash assistance of \$200 to each registered family. Thereafter, each family will receive a monthly allowance of \$150. This new allowance aims to enable families afford the rent required. The Government has distributed 8,000 SIM cards for the distribution of those cash grants. Over 7,085 of these cards have been activated already.

Also, the Pakistan Army has commenced distribution of food rations, as provided by the United Arab Emirates. The food security cluster ensures there is information exchange to prevent duplication. The Khyber Pakhtunkhwa Government has directed all the Health Departments in hosting districts to establish special counters in all the health facilities for the IDPs with visible banners.

The humanitarian community, both UN and NGOs, is supporting the Government in provision of life-saving assistance in the affected areas by providing emergency health kits, non-food items and food packages. Response is scaling up as the partners are establishing presence in the hosting areas. The UN Department for Safety and Security (UN DSS) conducted an assessment of the hosting districts on 24 and 25 June to identify possible locations for offices and distribution points. WFP's food distribution is ongoing in Bannu, while the local health authorities are being supported with essential medical supplies. Distribution of Non-Food Items (NFI) for shelter support has started while water, sanitation and hygiene support is also in progress. Information campaigns have been initiated to inform the IDPs about registration and assistance being provided.

The authorities have established an emergency room in Peshawar which will provide information and liaise with the partners on various issues. The authorities informed the partners that a daily situation report will be prepared and disseminated to inform about the latest figures on registration and response.

Funding

To date, donors have committed or contributed over US\$18 million. The Government of Pakistan has provided in-kind assistance of 25,000 metric tons of wheat to WFP. To fast track the response, partners are preparing to apply for Central Emergency Response Fund (CERF).

Humanitarian Response



Food Security

Needs:

- To cover the current case load of over 36,800 families, 3,670 tons of food per month are needed.

Response:

- The Food Security Cluster plans to assist a projected caseload of 500,000 people with general food distribution and nutrition ration. In addition, it also plans to provide vaccination for livestock, spray for Congo disease and feed for livestock.
- WFP has distributed 594 tons of food rations to 6,465 families. Each WFP food basket contains food items enough for 12 people for 15 days and is worth PKR 4,500 (\$45).
- Distributions are ongoing from a hub in Bannu, while they have been completed in Lakki Marwat. The establishment of two more hubs, in Bannu and Dera Ismail Khan, is in progress while one each in Tank and Kohat is planned.
- Cluster partners are mobilizing resources and are identifying potential partners.
- The UAE has provided food assistance worth \$2.5 million for the NWA IDPs. The cluster is working to avoid duplications and ensure adequate food rations for all IDPs.
- The Government has provided WFP with an in-kind contribution of 25,000 tons of wheat.
- Government departments especially, Livestock and Dairy Development Department has provided assistance to livestock in terms of vaccinations (22,817 small and large animals) and treatment (9,383 small and large animals) at different check points.
- Pakistan Red Crescent Society (PRCS) will provide food to 4,000 families for three months.

**6,465
families**

Received food rations
from WFP

Gaps & Constraints:

- Trucks carrying supplies face delays due to stringent security checks.



Health

Needs:

- There is a need to gather information on the location of IDPs in hosting areas so that resources may be allocated to relevant health facilities.
- District Health Offices (DHO) requested WHO to provide 8 Emergency Health Kits (EHK) and 10 Diarrhoea Disease Kits (DDK).
- Refresher trainings are needed for Lady Health Workers, Lady Health Visitors and Midwives. Partner organizations need to join in to provide mother and child health care services. There are only four female medical officers in Bannu. There is need for more female medical staff.
- In the wake of upcoming Malaria and Dengue season mosquito nets and other measures for mosquito control must be ensured.
- Partners should start nutrition projects with a prime focus on IDP children in Bannu.
- Mental and psychological health issues need to be addressed.

72,000

People to benefit from
12 EHKs sent to
Bannu

Response:

- WHO has provided 12 EHK (enough for 6,000 population per month), one DDK (enough for 9,000 population per month) and 50,000 Oral Rehydration Solutions for Bannu. DDK are already prepositioned in Dera Ismail Khan.
- WHO Environmental Health Engineers have started baseline survey of water quality in Bannu. Out of overall 395 tube wells in the district, selected water sources are being assessed. WHO will guide chlorination and other measures for safe drinking water. WHO will provide hygiene kits and will conduct community health and hygiene sessions. Moreover, WHO will conduct training sessions for the staff of Public Health Engineering Department to strengthen capacity for water testing and chlorination. WHO intends to install auto regulated chlorinators at need based high priority sites.

- All the health facilities' in-charges are trained on Disease Early Warning Systems (DEWS) and health care providers are able to diagnose, investigate and manage alerts of communicable diseases. DEWS allows for timely action before a disease spreads. DEWS is functional in Dera Ismail Khan and Tank. WHO has also trained district rapid emergency response teams.
- Oral Rehydration points are established in major hospitals and the points.
- Five Ambulances have been donated to Dera Ismail Khan, which may be utilized in Bannu on need basis
- DHO Bannu has deployed free mobile medical team at the camp site with doctors, paramedical staff and ambulance services.
- Women and Children hospital, District Head Quarters Teaching hospital and Khalifa Gul Nawaz Teaching hospital in Bannu are providing health services to patients all day long while other IDP patients benefit from the relevant health facilities of the UCs where they reside.
- Dera Ismail Khan health department has arranged free medical camps at three health facilities which have also been declared as IDPs health centers. IDPs can receive health services from any other health facility in general.
- A three day polio immunization campaign in district Bannu and Dera Ismail Khan concluded on 26 June. Both Bannu and Dera Ismail Khan Expanded Programme on Immunization departments have prepositioned vaccines as per projected demand. People are already being vaccinated at the registration and camp sites.
- PRCS has deployed six mobile health units in the affected districts, which will be converted into static basic health units in due course.

Gaps & Constraints:

- There is a need to improve access to the IDPs in the affected districts.
- DEWS needs to be further strengthened in terms of refresher trainings for the staff and timely reporting from the facilities.
- DHOs need to devise a plan for routine vaccination of children because vaccination coverage in FATA is generally poor and the risk of these diseases increases significantly, not only among the displaced population, but also for the host community.



Needs:

- With nearly 74 per cent of the IDPs being women and children, the protection needs are high. Efforts need to be made to ensure all IDPs, wherever they are displaced, have their rights respected and have access to all services offered by the Government to all its citizens. The goal of the Protection Cluster is to assure that vulnerable IDPs are supported to access protection, registration, assistance and services.
- Need to provide information to the IDPs about registration, assistance, grievance desks, and special registration desks for women.
- Need to establish psychosocial support for children and women.

74 %
Of the IDPs are
women and children

Response:

- Child protection welfare commission has initiated the district protection working group for Bannu district, bringing together all relevant partners working on protection, child protection and gender based violence. The co-lead will be the NGO Kwendo Kor.
- Protection Cluster raised the issue of some 150 individuals with PDMA who were not being allowed to stay in a school in Charsadda. PDMA highlighted that the IDPs were citizens of Pakistan and as such were allowed to move anywhere in the country.
- Protection Cluster raised with FDMA the necessity to advocate with NADRA to start issuing tokens to persons without CNIC, so as to be registered and eligible to receive assistance.
- PRCS will commence a project on restoring family links for wider population and is also planning on psychosocial support.



Needs:

- Only a small percentage of the estimated 500,000 displaced population is expected to seek shelter assistance in camps. The rest will be assisted in various forms while they live with host communities. The in-camp IDPs will be assisted through the CCCM mechanisms.

76,923

NFI kits the Cluster plans to distribute

Response:

- The Shelter Cluster will facilitate the following services to the off-camp IDPs and the host communities: NFI provision to all IDPs, cash rental subsidies to 10 per cent of the off camp IDPs, temporary shelter construction assistance in overcrowded host communities, repair cash assistance to host communities hosting most vulnerable IDPs with houses requiring basic repair.
- The Shelter Cluster plans to provide 38,462 families with 76,923 NFI kits (NFI kit designed for family of 6).
- The Shelter Cluster plans to assist 20 per cent of the off-camp IDP families (6,923 vulnerable families) with rental subsidy of PKR5,000 (\$51 per month) for three months.
- The Shelter Cluster plans to provide the 10 per cent most vulnerable of the rental subsidy recipients with overcrowded living conditions with five tarpaulin sheets, 100sqft galvanized iron pipes of 2.5” diameter (can be re-used later) and 2mm iron back wire to build temporary shelter to ease overcrowded living condition.
- The Shelter Cluster plans to provide with repair cash five per cent of the homes of the IDP host communities that require some sort of repair to accommodate IDPs.
- In Bannu, NRC has distributed NFIs to **6,043** families to date.
- PRCS is preparing to distribute NFIs.

Gaps & Constraints:

- Security continues to be a constraint and it is hoped the two government entities, PDMA and FDMA will facilitate smooth travel of implementing partners to displacement areas.



Water, Sanitation and Hygiene

Needs:

- According to the initial WASH assessments conducted by local partners and available secondary data, water and sanitation facilities are immediately needed in formal and informal camps, particularly in schools and hosting communities where IDPs have taken refuge.
- The general hygiene condition in the displaced population is also very poor and the possibility of any WASH related disease outbreak cannot be ruled out.

2

Generators providing uninterrupted water supply

Response:

- Tehsil Management Administration and Fire Brigade are jointly distributing drinking water through water tankering. On 27 June, they have distributed 96,000 litres of drinking water to IDPs in Bannu City.
- UNICEF is ready to start WASH response in Bannu for the IDPs residing in formal and informal camps including schools through their implementing partners.
- Baka Khel Camp is receiving water from a tube well. Quality of the water needs to be tested. Government has provided 10 storage tanks, while only one water tanker is providing water. Some 12 latrines have been installed.
- NGO SABAWON has distributed 205 hygiene kits (one per family) along with conducting hygiene awareness sessions in 42 schools where IDPs are residing. Two water tankers are providing safe drinking water to IDPs hosting locations. So far, 80,000 litres (6 trips) of chlorinated water have been distributed. The number of tankers will be further increased.
- According to the information shared by the local government authorities, the drinking water situation in Bannu city is generally satisfactory. There are 20 operational tube wells available in the city that can cater to the caseload, provided the power shortage is not interrupted.
- PRCS WASH activities are due to commence shortly.

Gaps & Constraints:

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



Logistics

Response:

- One out of the four Mobile Storage Units (MSUs) that were moved to Dera Ismail Khan is being erected on the former WFP compound.
- Four prefabricated offices have reached Bannu and are awaiting confirmation on location of WFP compound prior to installation.
- Two MSUs have been erected in Bannu for the WFP partner BEST.
- One MSU each has been handed over to SAFRON and FDMA.
- Four more MSUs are being dispatched from Peshawar to Bannu (Three for SAFRON and one for the Logistics cluster).

General Coordination

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

The Emergency Telecommunications Working Group met in Islamabad on 25 June to activate coordination among partners to support a response. The group agreed that satellite communication is necessary in Bannu and Dera Ismail Khan due to unreliability of GSM. UN DSS is planning to open a radio room in Bannu to provide security related information to partners, however, obtaining permission from the authorities could be challenging.

The HRT met in Peshawar on 26 June to prioritize activities for a CERF allocation. It was agreed that Health, Food Security, WASH and Protection activities should be prioritized. Nutrition activities will fall under health and food security activities. The HCT met on 27 June and endorsed the CERF submission.

UN partners requested from the Ministry of States and Frontier Regions (SAFRON) to identify a suitable place in Bannu that can serve as humanitarian hub.

Background on the crisis

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

For further information, please contact:

For further information, please contact: ochapakistan@un.org
 OCHA situation reports are available at: www.pakresponse.info | www.unocha.org/pakistan | www.reliefweb.int

To be added or deleted from this situation report mailing list, please e-mail: nazir1@un.org