



# EARLY NEEDS IDENTIFICATION FLOOD DISASTER

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## ACRONYMS

<b>BHU</b>	Basic Health Unit
<b>DHQ</b>	District Head Quarter Hospital
<b>ENI</b>	Early Need Identification
<b>IRC</b>	International Rescue Committee
<b>KII</b>	Key Informant Interviews
<b>LHW</b>	Lady Health Worker
<b>MERF</b>	Medical Emergency Resilience Foundation
<b>MHM</b>	Menstrual Hygiene Management
<b>MHPSS</b>	Mental Health Psychosocial Support
<b>MIRA</b>	Multi-Cluster/Sector Initial Rapid Assessment
<b>MoU</b>	Memorandum of Understanding
<b>NDMA</b>	National Disaster Management Authority
<b>NGOs</b>	Non-Government Organizations
<b>OOSC</b>	Out of school children
<b>OPD</b>	Outdoor Patient Department
<b>PDMA</b>	Provincial Disaster Management Authority
<b>PHC</b>	Primary Health Care
<b>PLW</b>	Pregnant and Lactating Women
<b>PWD</b>	People With Disability
<b>RHCs</b>	Rural Health Centers
<b>THQ</b>	Tehsil Head Quarter
<b>UNHCR</b>	United Nations Human Rights Commission for Refugees
<b>UNICEF</b>	United Nations International Children Emergency Fund
<b>WASH</b>	Water, Sanitation and Hygiene

## 1. EXECUTIVE SUMMARY

This Early Needs Identification (ENI) exercise was jointly conducted by the International Rescue Committee (IRC), Sukaar Foundation and Research and Development Foundation (RDF) in four districts, i.e., Sanghar, Mirpur Khas, Khairpur, and Dadu of Sindh province. In the ENI both the primary and secondary data was collected with a purpose to provide a quick overview of the humanitarian situation by identifying the immediate and evolving basic needs of vulnerable population dwelling in the flood affected areas of Sindh. The ENI provides a base for developing a response plan for addressing the needs identified on the ground. For primary data collection 68 Key Informant Interviews (KIIs) were conducted with the local key informants (both men and women), representatives of NGOs/INGOs/UN agencies and government departments. The secondary data was collected from the national and provincial disaster management authorities and other humanitarian agencies. The data thus generated from the primary and secondary sources was triangulated to identify priority needs, availability, and access to basic needs of target population.

The current monsoon spell that started in the second week of July 2022 has caused widespread flooding and has led to extensive human and infrastructure damage across many parts of Pakistan. According to the National Disaster Management Authority (NDMA)' Monsoon [Situation Report](#) on August 30, 2022, 1,162 people have died and 3554 are injured in the country. Around 1,057,388 houses were damaged (including 324,386 fully and 733,002 partially damaged). In addition to this, around 5063 KM roads have been washed away, 243 bridges have collapsed, many shops have been destroyed and 730,483 animals have died. Sindh province is affected most adversely by heavy rainfall and resultant flooding in Pakistan. The Provincial Disaster Management Authority (PDMA) Sindh reported 405 deaths and 1074 severe injuries. Around, 896,084 houses have been damaged. Moreover, 2328 KM roads and infrastructure has vanished, bridges have collapsed, and 15,435 livestock perished in the province.

The IRC Pakistan through its local partners has been responding to the emergency needs of the people at the ground level since the onset of the emergency, and this ENI will help to inform IRC's flood emergency response plan. Key findings of this ENI are as follows:

**Access to Information:** Overall 71% of the population does not have access to information. The situation was more critical in Khairpur district, followed by Sanghar, Mirpur Khas and Dadu. People like to receive information about weather/flood, followed by information related to relief assistance, safe spaces/camp establishment, access to main market to resume business activities and information about service providers working in their communities.

**Safety:** Around 38% of the sampled respondents reported that in current situation members of community are not at all feeling safe, 47% report that it not so safe whereas 15% were of the view that community is feeling relatively safe.

**Availability of Basic Services:** Overall very low percentage of the population reported having access to basic services due to flood situation. On average, only 17% population have access to health services, 14% to food and livelihood, 11% to mobile networks while WASH services, education, shelter, information services, legal assistance, hygiene supplies, women, and child protection services and MHPSS were least accessible services to population.

**Priority Needs:** Shelter and food were reported as the top-most priority needs, followed by potable water and sanitation services, Non-food items including Menstrual Hygiene Management items for women, health services and livelihood opportunities.

**Vulnerable Groups:** Pregnant and lactating women are highly vulnerable as reported by 97% of respondents, followed by women and adolescent girls (88%), persons having disabilities (78%), children of age 5 to 17 years (47%), persons with chronic illness (41%), mental health illness (25%) and minority groups with 13% response.

**Shelter:** In district Dadu, top two reported shelter types were tents and improvised shelter made from salvaged construction materials. In district Khairpur, majority of people are living in tents or in damaged houses. In Mirpur Khas damaged houses and tents were mostly reported as available shelter type. In district Sanghar, people were reported living in damaged houses, or they have no shelters but living in a building as collective accommodation. Main concerns related to shelter needs included inhabitable houses, unavailability of shelters, overcrowded shelter, unavailability of repair/construction material and land issues.

**Food and Livelihood:** Overall, 32% of the respondents (highest in Khairpur) reported accessibility of the markets. Similarly, 48% respondents from communities reported that markets are functional. Respondents who reported malfunctioning of the markets were further probed for the reasons of those 52% respondents among them shared that markets are submerged under water, while remaining 48% reported disconnect with main market as the main reason for inaccessibility.

In total, 52% respondents reported that markets have sufficient supplies of basic commodities. Beside this, overall, 94% of the respondents shared that food items are not affordable due to flood related price increase.

Overall, 90% of the respondents (highest in all districts) reported that the flood affected people face problems in providing sufficient food for their families.

**Immediate Needs:** Overall 72% of the respondents highlighted tent/shelter as their immediate need at this time, 50% stated cash as an immediate need, followed by food, NFIs and others as depicted in graph 13 below.

**Health:** Around 155 HFs are damaged in four districts mentioned above (90 in Mirpur Khas, 50 in Sanghar, 10 in Dadu and 5 in Kharipur). Around 30% to 40% of HFs are without basic medical supplies in these districts. The majority of people visit DHQ hospitals, followed by THQ, BHUs and then Medical Camps. Regarding availability of services at facilities, the community based KIIs revealed that in 63% facilities the required services are lacking while the KIIs with government revealed that in 56% health facilities these are not available. The respondents reported significant increase in patient caseload particularly in Diarrhea, Malaria, Skin infections, Cough and Fever, and other diseases. Overall, 97% of community Key Informants and 67% of government and NGOs respondents reported that availability of health staff and services are inadequate, while only 3% from community key informants and 22% from government key informants shared that these are at basic levels.

Regarding the availability of pregnancy and childbirth-related services, overall, only 6% of community and government/NGOs key informants reported that these services are available while around 94% mentioned unavailability of these services. The community key informants reported the below immediate support they needed w.r.t health in their areas to meet their health-related needs. These include adequate supplies of medicines, followed by 24/7 services, transportation, and trained staff.

**WASH:** Overall people don't have access to clean drinking water in their communities. Around 70% people don't have access to basic hygiene supplies, and 55% don't have access to sufficient water. Similarly, 78% of women and girls face difficulties to access latrine facilities while overall 66% of the population do not have access to toilet facilities. 100% of community Key Informants from all 04 districts reported that there is no access of women and girls to any menstrual hygiene supplies in the current disastrous situation.

Overall, 68% respondents reported that people in their community are feeling distressed due to current crises in their area due to lack of access to basic services, loss of property, livelihood sources and assets/ valuables and lack of information

**Protection:** Among these the top and mostly reported issues are no access to health services, psychological trauma, stress and anxiety, no access to information due to communication barriers, no access to other essential services, and other issues including violence, harassment, insecurity, isolation from families, economic exploitation, and loss of necessary documents during floods. Likewise, women and girls, children are also a marginalized group and are exposed to protection related issues. These include no access to education, child labour, psychological trauma, violence against children. Child abuse and child/forced marriages were also reported as protection issues. Overall, 19% respondents were of the view that protection concerns increased very significantly in current situation in the area. Safe spaces for women, adolescent girls and children, shelters, access to information, provision of dignity kits or hygiene items and referrals to service providers were identified as priority needs.

**Education:** Around 44% reported unavailability of education facilities in their respective areas. After floods the schools are closed and currently the children are not going to schools. According to Govt. officials and key informants from organizations, on around 35 schools in district Dadu, 127 schools in Khairpur, 54 in Mirpur khas while 98 education facilities in Sanghar are being used as evacuation centers and/or shelters for displaced population due to floods. Only 13% of the respondents (in district Dadu only) reported access of children to education facilities while remaining 87% reported no access of children to education facilities due to floods. Key barriers in accessing education facilities or not sending their children to schools included damaged school buildings, debris in school, children engagement in income generation activities, far/distant schools, prevalence of protection issues/risk in the way to school and unavailability of WASH services in the school. Overall, 53% respondents reported school building repair/rehabilitation as their most immediate need, 56% mentioned removal of flood water from school premises, followed by establishment of new learning spaces (53%), school kits provision (38%), cash assistance (22%) and provision of mats mentioned by 3% respondents.

## **2. BACKGROUND AND CONTEXT**

- Pakistan has received rainfall 2.87 times higher than the national 30 years average. While Sindh and Balochistan received around five times more rains than the normal monsoon rainfall. Heavy rains have resulted in urban and flash floods, landslides, and Glacial Lake Outburst Floods (GLOF) across Pakistan, particularly affecting Balochistan, Khyber Pakhtunkhwa, and Sindh Provinces.
- As of 30<sup>th</sup> August, the National Disaster Management Authority (NDMA) reported that the floods have resulted in 1,162 deaths and 3554 people have been injured.
- August 30, 2022, around 1,057,388 houses were damaged (including 324,386 fully and 733,002 partially damaged).
- As per NDMA updated report 1,057,388 houses has been damaged (including 324,386 fully and 733,002 partially damaged), moreover, 5,063 KM roads infrastructures have vanished, 243 Bridges are collapsed, and 730,483 animals also perished.
- As per PDMA Sindh reports 405 Deaths and 1074 persons has been severely injured. Meanwhile, 896,084 houses have been damaged (including 262296 fully and 633788 partially damaged), moreover, 2,328 KM roads infrastructures have vanished, and 60 Bridges and 15435 livestock perished.
- The Provincial Disaster Management Authority had declared 23 districts in Sindh as calamity-hit areas. ([NDMA Report](#)). The actual number of damages and losses are not exactly known due to the absence of proper assessment and lack of functional communication with affected areas. According to the active

humanitarian actors present on ground and local activists, the losses and damages might be much more than reported by Disaster Management Authorities.

The Early Needs Identification (ENI) exercise was conducted in four districts of Sindh province, including Sanghar, Kharipur, Mirpur Khas and Dadu. Primary data was collected from the key informants from the affected population. In these four highly affected districts of Sindh, the severity of damages was high and based on this these districts were chosen for the assessment.

The purpose of this ENI is to provide a quick overview of the situation to identify the immediate and basic evolving needs of flood and heavy rainfall affected population. Therefore, the multisector assessment approach was adopted to identify the sector-wise needs and proprietaries of the target population. The ENI exercise was jointly conducted by Sukaar Foundation and RDF and IRC having strong footing in the province of Sindh. Furthermore, IRC's ENI report findings help to understand the impact of floods on vulnerable groups including but not limited to women, adolescent girls, children, and persons with disabilities. It also helps to identify health, protection, WASH, shelter/NFI and other basic needs of affected population in targeted districts / province. Specific objectives of the need assessment were.

1. To assess the basic needs and priorities of affected communities in four districts of Sindh at current point of time
2. To build a comprehensive response plan of action for affected populations through ENI and subsequent evolving and detailed assessments

## **2.1. Demographic profile of districts**

As per 2017 census, Sanghar district had a population of 2,049,873, of which 1,059,051 were males and 990,578 females. The rural population was 1,478,154 (72.11%) and urban 571,719 (27.89%). The literacy rate is 41.40%: 52.72% for males and 29.32% for females.

As per 2017 census, Mirpur Khas district had a population of 1,504,440, of which 776,146 were males and 728,071 females. The rural population was 1,070,359 (71.15%) and urban 434,081 (28.85%). The literacy rate is 42.41%: 52.94% for males and 31.22% for females.

At the time of the 2017 census, Khairpur district had a population of 2,405,190, of which 1,240,254 were males and 1,164,826 females. The rural population was 1,628,184 (67.69%) and urban 777,006 (32.31%). The literacy rate is 49.15%: 62.08% for males and 35.49% for females.

As per 2017 census, Dadu district had a population of 1,550,390, of which 795,700 were males and 754,480 females. The rural population was 1,166,984 (75.27%) and urban 383,406 (24.72%). The literacy rate is 47.26%: 57.92% for males and 36.02% for females.

## **3. ASSESSMENT METHODOLOGY**

For primary information, the community were taken as unit of measurement instead of the household or individual. A mixed data collection approach was adopted, which is generally the preferred option in such rapid assessments. Nature of the study design was exploratory and participatory supported by qualitative and quantitative data gathered from primary and secondary sources. The data thus generated from the various sources was triangulated to identify the priority needs of target population.

The primary data was collected through key informant interviews. Purposive sampling approach was adopted for the site's selection in the four districts of Sindh. The Sukaar Foundation and RDF teams collected data from the key community respondents in the field; some of the interviews with the INGOs and government representatives were telephonically conducted.

**Tool:** In this exercise certain questions were adapted from the Multi-Cluster/Sector Initial Rapid Assessment (MIRA)<sup>1</sup> tool, RNI tool and RNA-HST tool. A KII tool was developed and executed with the following categories of respondents.

1. Desk Review of secondary sources: All related information collected by the IRC, UN agencies, INGOs, NGOs and government departments (NDMA, PDMA) were reviewed, and related information was triangulated and added in the report.
2. KIIs with the staff of stakeholders: This includes officials from INGO, NGOs, UN, and concerned government authorities who have been engaged in the flood related interventions in these targeted districts of Sindh province.
3. KIIs at the community level: KIIs conducted with key informants in the affected areas.

Districts	<i>Table-1</i> Key Informant interviews with			Total
	Community elders	Government staff	INGO, NGOs, UN staff	
Sangar	8	5	4	17
Mirpur Khas	8	5	4	17
Khairpur	8	5	4	17
Dadu	8	5	4	17
<b>Total</b>	<b>32</b>	<b>20</b>	<b>16</b>	<b>68</b>

Data collection team: In total 68 KIIs were conducted with different stakeholders including women and men key informants from communities. The data collection team was gender balanced, trained in data collection with ethical considerations, and aware about the local culture. The KIIs tool for the stakeholders was administered by a senior level staff.

Data Collection and Analysis: The informed consent was taken from the respondents, and they were explained about purpose of information collection and that this participation is voluntary and no assistance is guaranteed in return. Both remote and in-person data collection approaches were followed. The data was cleaned, analyzed with respect to district wise and thematic wise by using Excel PIVOT. Summary tables, graphs and charts were produced with interpretation where required in the report.

### Secondary Data review:

Various secondary data was also reviewed received from different sources to inform the ENI. These reports provide a quick overview of the on-ground situation; mostly these reports highlighted damages and needs in general, however the ENI exercise tried to further explore the sectoral situation. The following reports were consulted during secondary data review and based on those the following main damages and needs were summarized.

1. *Situation Report on Flood by NDMA*
2. *Situation Report on Floods by PDMA*

<sup>1</sup> MIRA is standard tool developed by Inter-Agency Standing Committee (IASC) to assess the humanitarian needs



3. *Situation Report-Pak Mission Society*
4. *Emergency Appeal-Pak Mission Society*
5. *Updates from Reliefweb*

### Limitations:

The first challenges was that in some of the areas access was a greater issue therefore, some of the interviews were conducted telephonically. Similarly, due to the evolving situation on ground, some figures might change because at this stage respondents were reluctant to provide exact figures rather provided estimated figures. Also, it was found that government institutions are still trying to gather data from the field on the exact damages of public and private infrastructure and services. Therefore, in coming days the situation will be clearer in terms of field level information.

## 4. STUDY FINDINGS

### 4.1. Damages Information

According to the National Disaster Management Authority (NDMA)' Monsoon [Situation Report](#) on August 30, 2022, 1,162 people were died and 3554 got injured in the country. Around 1,057,388 houses were damaged (including 324,386 fully and 733,002 partially damaged) in the country across the provinces. In addition to this around 5063 KM roads infrastructures were vanished, 243 Bridges were collapsed, many shops have been destructed and 730483 animals were died.

**Table-2: Damages Information**

Province/ Region	Calamity Hid Notified Districts	Affected Population	Rescued Population	Population in Camps
AJ&K	0	53,700	300	0
Balochistan	31	9,182,616	600	7,000
GB	6	51,500	50	180
Khyber Pakhtunkhwa	9	4,350,490	45,362	61,543
Punjab	3	4,844,253	71,935	15,592
Sindh	23	14,563,770	0	377,930
<b>Total</b>	<b>72</b>	<b>33,046,329</b>	<b>118,247</b>	<b>462,236</b>

The Sindh has been most adversely affected by the heavy rainfall in Pakistan. The Provincial Disaster Management Authority (PDMA) Sindh reported 405 Deaths and 1074 severely injured. Around, 896,084 houses have been damaged. Moreover, 2328 KM roads infrastructures vanished, and 60 Bridges collapsed, and 15435 livestock perished in the province.

Damages in Sindh	Quantities
Deaths	405
Injured People	1074
Houses Damaged	896,084
Road Damaged (KM)	2328
Bridges collapsed	60
Livestock Died	15,435

In Addition to this, according to Community KIIs with Government Stakeholders, below is the overall summary of damages in these four districts. Around 212 main water supply schemes/sources are damaged, 357 government schools are damaged, around 174 health facilities are damaged, 58% of houses are without electricity supply, 66%

of public transport is not functional and around 360 markets/shops are affected, and around 907900 acres of agriculture crops are damaged.

**Table-3: Damages in the focused 04 Districts**

Parameters	Dadu	Khairpur	Mirpur Khas	Sanghar	Total
# of water supply sources/schemes damaged		2	200	10	212
# of schools partially damaged		70	108	33	211
# of schools fully damaged	30	15	85	16	146
# of Health unit (RHC, THQ, DHQ, CD) partially damaged	0	70	22	7	99
# of Health unit (RHC, THQ, DHQ, CD) fully damaged	7	50	7	11	75
% of houses are without electricity supply due to flood	54%	91%	41%	46%	58%
% of public transport functional	50%	11%	22%	53%	34%
# of markets /shops damaged	0	222	16	122	360
# of acres of crops damaged	97,330	331,500	169,031	310,039	907,900

## 4.2. Assistance received

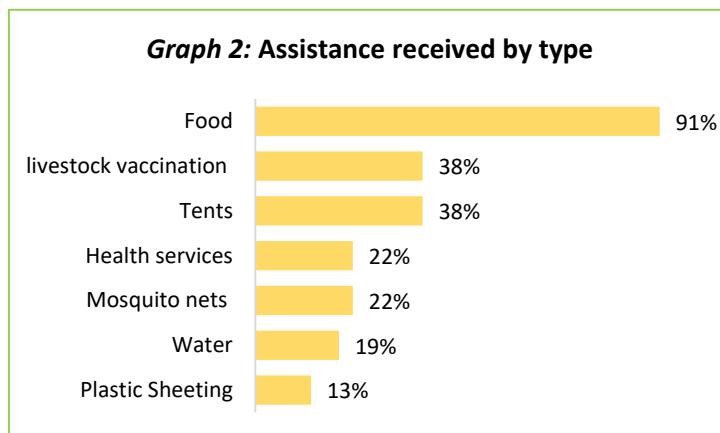
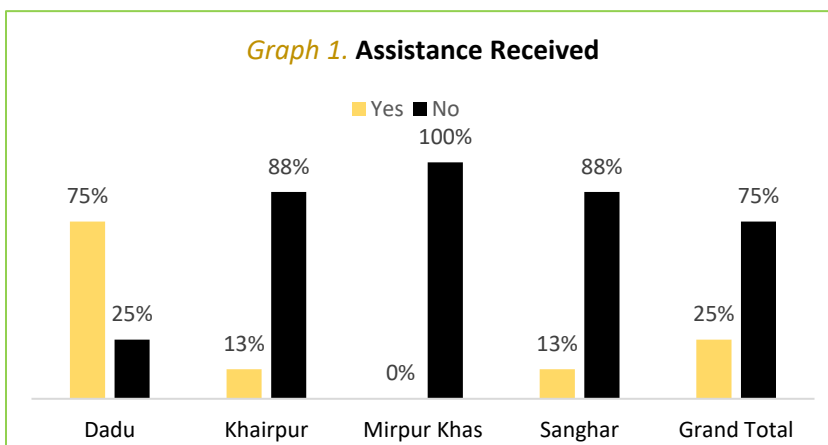
Overall, 25% of the respondents reported that communities received assistance in flood situation from different service providers including Government departments, local NGOs, and other humanitarian organizations.

*Graph 1 depicts district wise results.*

Those who reported community receiving relief assistance were further probed what type of relief assistance they have received, results indicated

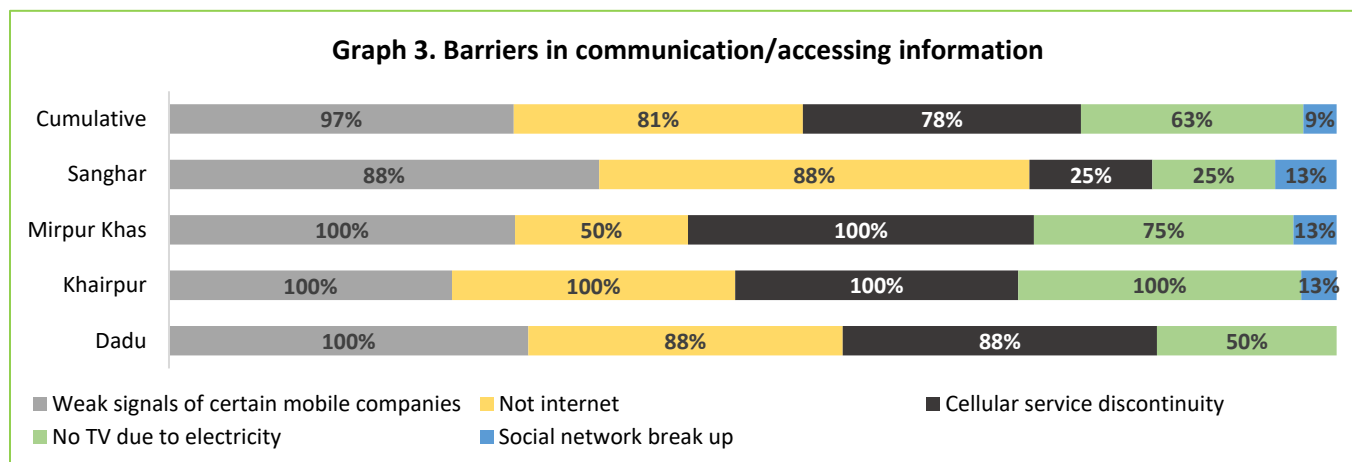
food as the top-most reported from 2 districts i.e., Sanghar and Dadu. In district Khairpur respondents reported health services/medical camps, while in district Sanghar, community received plastic sheeting and clean drinking water.

Overall, 91% of the interviewed service providers including Government and other organizations reported that flood affecties in surveyed districts received Food assistance, 38% reported livestock vaccination and Tents followed by health services (22%), Mosquito nets (22%), water mentioned by 19% respondents. Other relief assistance also reported including cooking utensils, voucher cash, hygiene kits clothes, hygiene kits, vaccination, and plastic sheeting etc. by less than 10% responses for each.



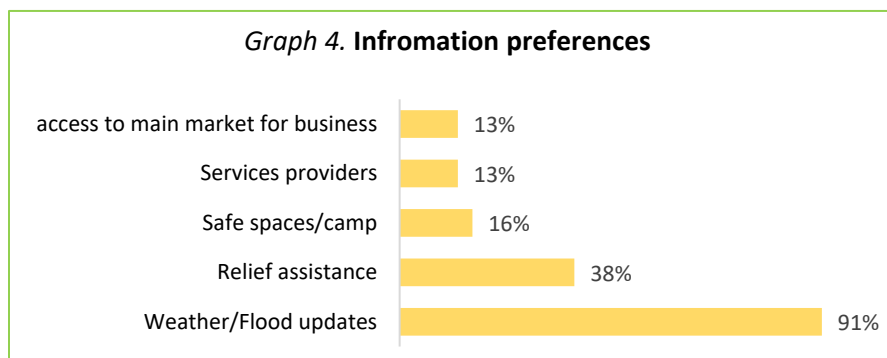
### 4.3. Access to information

According to community key informants, Overall, 71% of the population (74% in Dadu, 85% in Khairpur, 64% Mirpur Khas and 63% Sanghar) does not have access to information due to multiple reasons detailed in graph 3 given below.



Similarly, as per the Key Informants from government and other stakeholders, overall, 69% of the people don't have access to information in current situation. The situation was report more critical in Khairpur district with 91% of people having no access to information, followed by Sanghar with 67%, Mirpur Khas 64% and Dadu 56%.

Graph 4 indicates people like to receive information about weather/flood, followed by information related to relief assistance, safe spaces/camp establishment, access to main market to resume business activities and information about service providers working in their communities. s



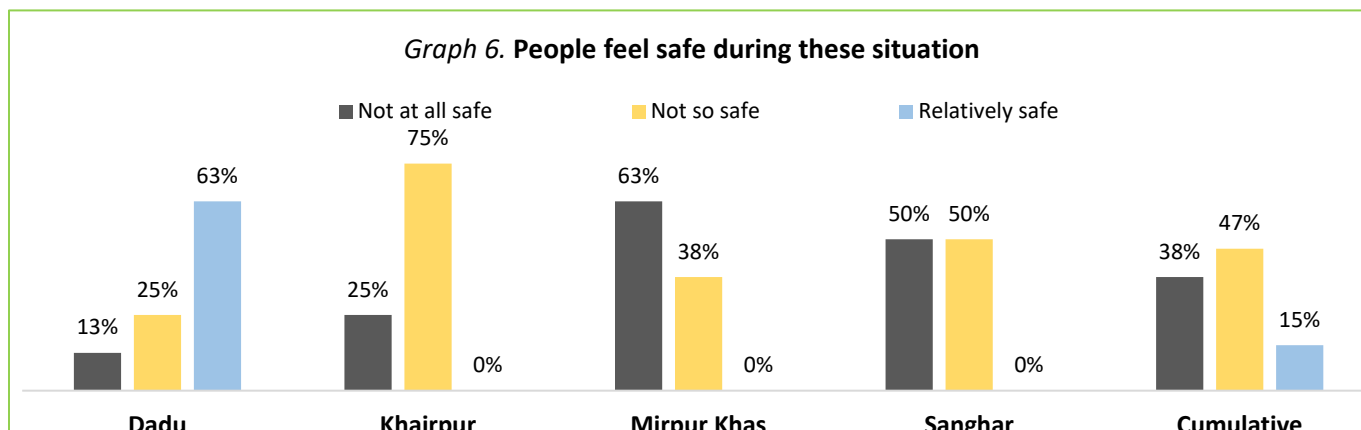
Mobile was topmost preferred source of information in the target districts with 75% responses from community key informants. People also preferred to receive information from NGO representatives, social workers, neighbors, and community members. Top-least preferred channels were TV and radio. Detailed results are depicted in table 5.

**Table 4. What are the preferred sources of information?**

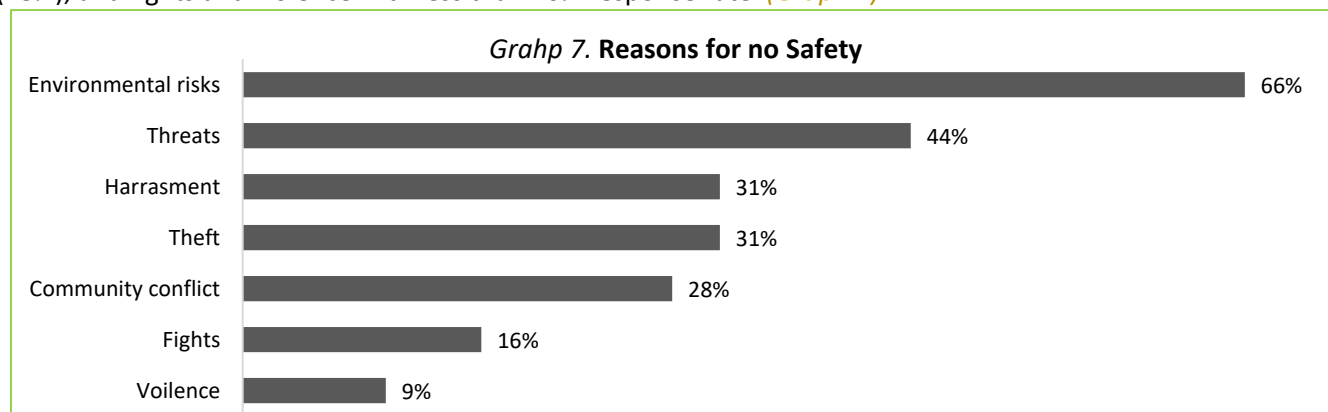
Source of information	Dadu	Khairpur	Mirpur Khas	Sanghar	Overall
Mobile	100%	88%	25%	88%	75%
NGO Rep	75%	38%	100%	25%	59%
Social Worker	63%	63%	25%	75%	56%
Neighbors	0%	38%	100%	13%	38%
Community meeting	13%	38%	63%	13%	31%
Govt. Department	63%	13%	0%	0%	19%
TV	13%	25%	0%	13%	13%
Radio	0%	13%	0%	25%	9%

#### 4.4. Safety during current situation

With regards to safety, the majority 38% of the sampled respondents reported that in current situation members of community are not at all feeling safe, 47% ranked it not so safe, 15% were of the view that community is feeling relatively safe. (shown in graph 6 below).



Respondents who reported not safe were further probed for the reason, 66% reported that they are feeling not safe because of environmental risks or dangers including heavy rainfall, debris and standing water everywhere, 44% life threats, followed by risk theft and harassment with 31% response rate for each, community conflicts (28%), and fights and violence with less than 20% response rate. (Graph 7).



#### 4.5. Availability of basic services

Overall, very low percentage of population reported having access to basic services due to flood situation. On average only 17% population have access to health services, 14% to food and livelihood, 11% to mobile networks while WASH services, education, shelter, information services, legal assistance, hygiene supplies, women, and child protection services and MHPSS were least accessible services to population as indicated in below table 6.

**Table 6. % of population have access to basic services**

Basic services	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Health	32%	11%	17%	14%	17%
Food and livelihoods	51%	4%	1%	13%	14%
Mobile Networks	42%	2%	10%	0%	11%
Water and sanitation	42%	5%	5%	0%	10%
Education	44%	1%	2%	0%	8%

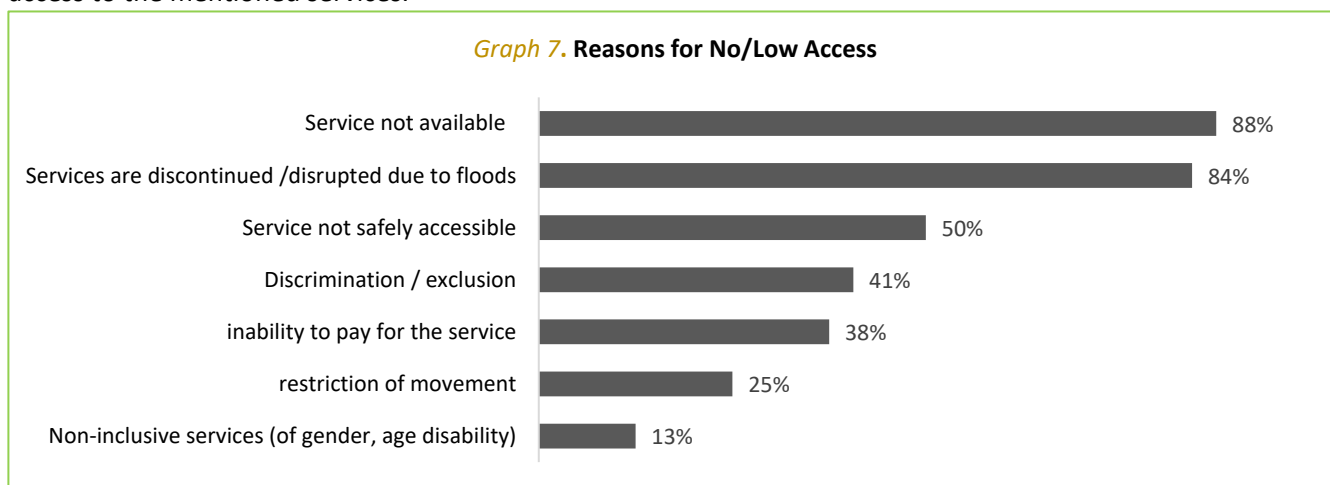
Shelter / housing	35%	4%	0%	0%	7%
Information services	29%	6%	0%	0%	7%
legal assistance	34%	0%	0%	0%	6%
Hygiene supplies	27%	4%	0%	0%	6%
women protection	24%	6%	0%	0%	6%
Child protection	15%	6%	0%	0%	4%
Mental health and psychosocial support	18%	0%	0%	0%	3%

According to key informants from government and NGOs staff, overall, 24% of population have access to food and livelihoods, 22% to basic health, 19% to education, 18% to Water and Sanitation, 16% to Mobile Networks, 14% to Shelters, 12% to child protection and so on. The summary and district wise analysis is given below.

**Table-7 % of population have access to basic services:**

Values	Dadu	Khairpur	Mirpur Khas	Sanghar	Grand Total
Food and livelihoods	50%	13%	17%	22%	24%
Health	39%	12%	25%	15%	22%
Education	49%	0%	23%	3%	19%
Water and sanitation	36%	10%	18%	9%	18%
Mobile Networks	50%	9%	11%	2%	16%
Shelter / housing	56%	7%	2%	0%	14%
Child protection	40%	13%	1%	0%	12%
Information services	25%	8%	12%	0%	10%
women protection	26%	10%	3%	0%	9%
Hygiene supplies	26%	8%	2%	0%	8%
legal assistance	11%	1%	3%	0%	3%
Mental health and psychosocial support	8%	0%	1%	0%	2%

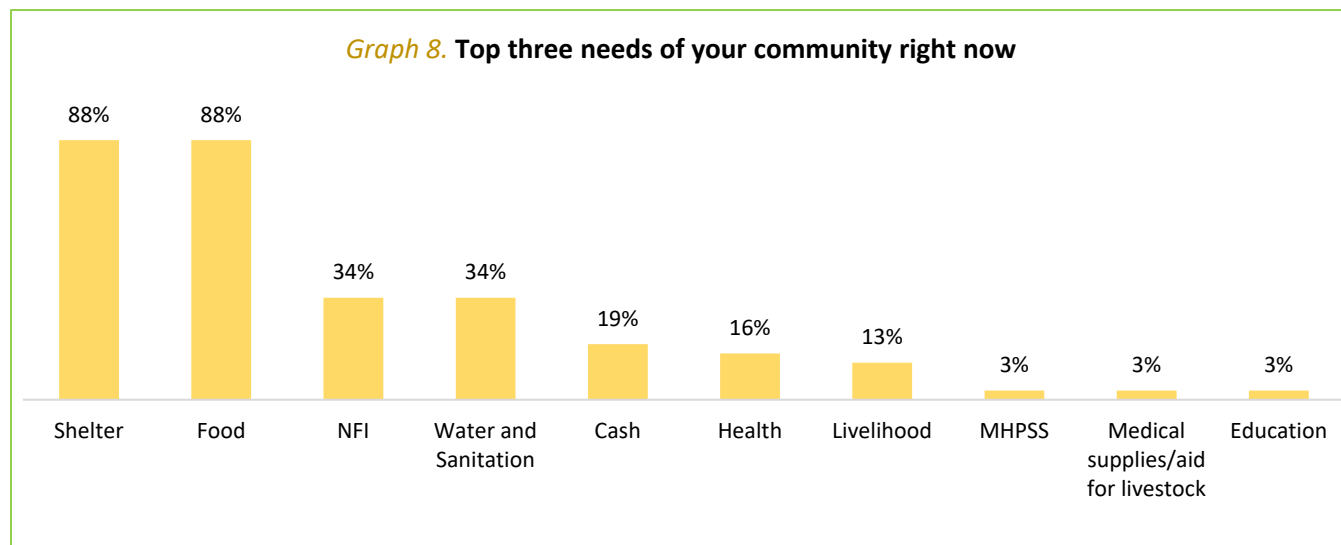
Services unavailability in the area, dis-connectivity due to flood, no safe access, low affordability, services non-inclusiveness, restrictions on movements and discrimination were the main reasons being report for low or no access to the mentioned services.



#### 4.6. Priority Needs

The shelter and food were reported as the top-most priority needs, followed by water and sanitation services, Nonfood items including Menstrual Hygiene Management items, health services and livelihood.

Graph 9 depicts ranking of the current priority needs reported by the key informants from community



District-wise analysis of priority needs is given in below table:

**Table-8: What are the top three needs of your community right now?**

Priority Needs	Dadu	Khairpur	Mirpur Khas	Sanghar	Overall
Shelter	100%	100%	50%	100%	88%
Food	75%	88%	100%	88%	88%
NFIs	25%	38%	38%	38%	34%
Water and Sanitation	88%	13%	13%	25%	34%
Cash	13%	0%	63%	0%	19%
Health	13%	25%	0%	25%	16%
Livelihood	0%	38%	13%	0%	13%
MHPSS	0%	0%	13%	0%	3%
Medical supplies and aid for livestock	0%	0%	13%	0%	3%
Education	0%	0%	0%	13%	3%

The needs were also identified by the key informants from government and NOGs staff. The summary is given in below table.

**Table-9: What are the top three needs of your community right now?**

Priority Needs	Dadu	Khairpur	Mirpur Khas	Sanghar	Overall
Shelter	89%	89%	89%	89%	89%
Food	56%	89%	67%	78%	72%
Water and Sanitation	44%	0%	67%	22%	33%
NFIs	11%	56%	11%	44%	31%
Livelihood	44%	22%	33%	0%	25%
Health	11%	11%	22%	56%	25%

#### 4.7. Vulnerable Groups

According to the ENI data, pregnant and lactating women are highly vulnerable as reported by 97% of respondents, followed by women and adolescent girls (88%), person having disabilities (78%), children of age 5 to 17 years (47%), persons with chronic illness (41%), mental health illness (25%) and minority groups with 13% response.

#### 4.8. Shelter

The respondents from the target districts were probed about main types of shelter being used in their communities by the people to live in during the current situation. They opted multiple options in each district.

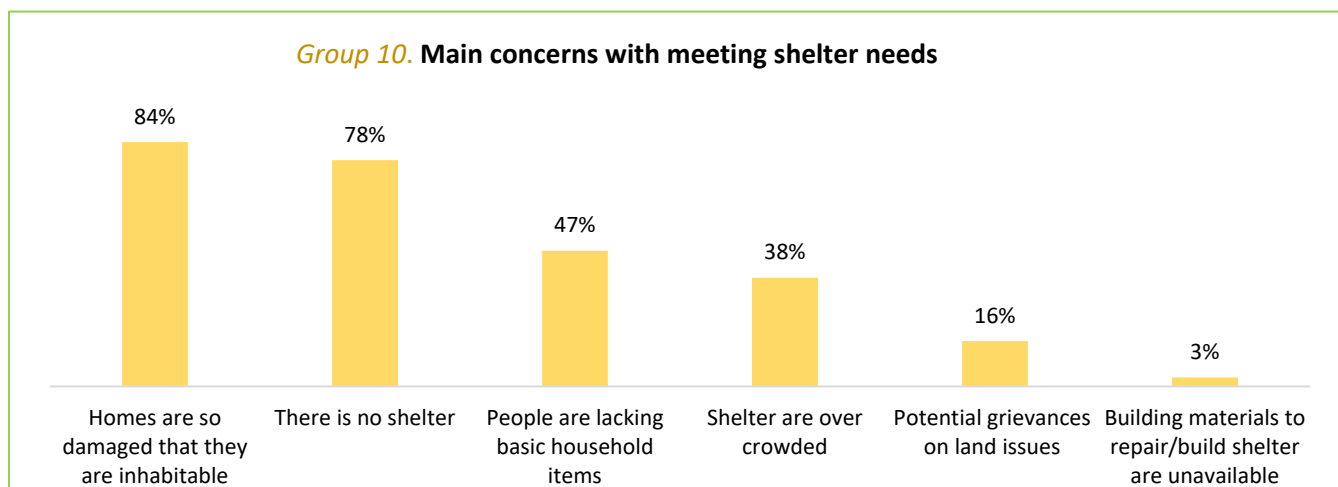
In district Dadu, top two reported shelter types were tents and improvised shelter made from salvaged construction materials. In district Khairpur, majority of people living in tents or in damaged houses. In Mirpur Khas damaged houses and tents were mostly reported shelter type. In district Sanghar, people were reported living in damaged houses, or they have no shelters but living in a building as collective accommodation.

**Table 10. What are the main types of shelter people from your community live in**

Types of Shelter under use	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Tents	88%	100%	63%	38%	72%
Living in damaged houses	50%	75%	100%	50%	69%
Planned temporary or transitional	0%	50%	50%	25%	31%
No shelter	0%	0%	50%	50%	25%
Improvised shelter	63%	25%	0%	13%	25%
Buildings used as collective accommodation	0%	38%	0%	50%	22%
Other buildings e.g. relatives	50%	0%	0%	38%	22%
House	50%	0%	0%	0%	13%

Main concerns related to shelter needs included inhabitable houses, unavailability of shelters, overcrowded shelters, unavailability of repair/construction material and land issues.

**Group 10. Main concerns with meeting shelter needs**



Key informants from community were asked about their most immediate needs prevailing in their community related to shelter, Tents were highlighted by overall 29% of the key informants followed by cash assistance counted for 20% response rate, plastic sheeting (19%), GI sheet (17%) and Tarpaulin and Shelter repair highlighted by 14% of the key informants. *Table 4 depicts district-wise results.*

**Table 11. Based on current situation, please identify your most immediate need on shelter**

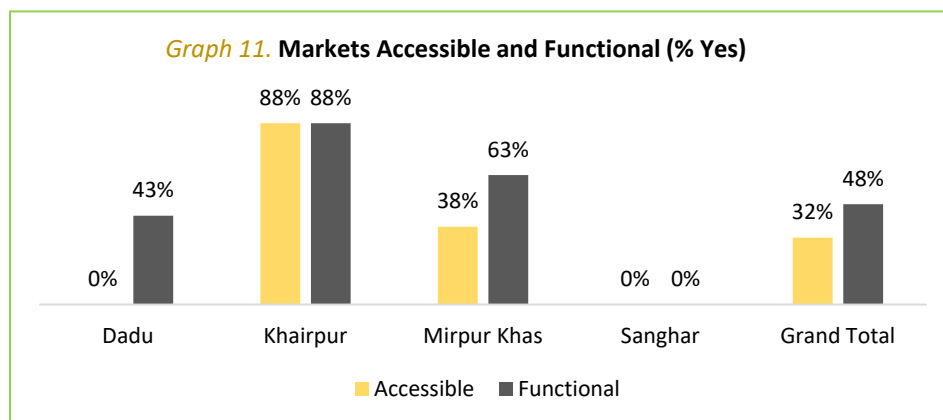
Immediate need	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Tents	75%	75%	75%	88%	84%
Cash	75%	75%	50%	88%	72%
Plastic sheeting	25%	25%	75%	25%	56%
GI sheet	25%	25%	0%	88%	53%

Tarpaulin	25%	25%	50%	25%	50%
Shelter repair	63%	63%	100%	13%	44%

#### 4.9. Food and Livelihood

Overall, 32% of the respondents (highest in Khairpur) reported the accessibility of the markets. Similarly, 48% respondents from communities reported that markets are functional.

Respondents who reported disfunction of the markets were further probed for the reasons, 52% respondents among them shared that markets are submerged under water, while remaining 48% reported its disconnection with main market.



According to key informants from government and NGOs staff, overall, 44% of markets are accessible while remaining 56% are not accessible in the given context.

In total 52% respondents reported that markets have sufficient supplies of basic commodities. Beside this, overall, 94% of the respondents shared that food items are not affordable.

**Table 12. Accessibility of markets and food items affordability**

Districts	% of markets with sufficient supplies of basic commodities	% of people with no affordability
Dadu	64%	100%
Khairpur	90%	88%
Mirpur Khas	38%	100%
Sanghar	28%	88%
Cumulative	52%	94%

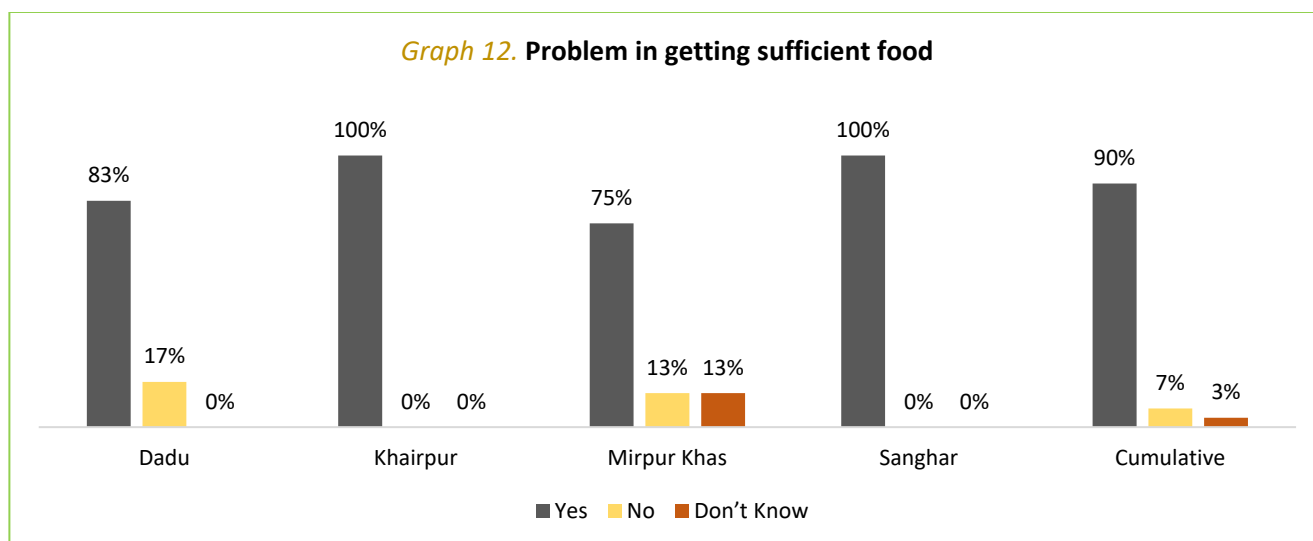
Below table 6 indicates concerns about accessing the local markets. Overall, 91% key informant of local communities reported the prices in the market very high, 41% reported unavailability of commodities in the market, 34% reported that people don't have sufficient money to buy the required items followed by theft and snatching in the markets (13%) and remaining 9% reported that majority of the shops are damaged.

**Table 13. Concerns about accessing the local market**

Key Concerns	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Very highly priced	88%	88%	100%	88%	91%
Commodities not available	63%	38%	38%	25%	41%
Don't have money	50%	0%	88%	0%	34%
Theft / snatching in market	13%	38%	0%	0%	13%
Shops damaged	13%	13%	0%	13%	9%

Overall, 90% respondents (highest in all districts) reported that the affected people face problems in getting sufficient food for their families. Below graph 12 shows detailed district-wise results.





*The field finding indicates regarding changes in total amount of food consumption since flood disaster, overall, 68% reported that it has decreased.*

Regarding the main sources of food in the current situation the respondents opted local markets as major source. 19% reported subsistence production as their source of food. The district wise details are given in below table.

**Table 15. Main sources of food in community**

Sources	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Local market	100%	50%	100%	100%	88%
Subsistence production	75%	0%	0%	0%	19%
Humanitarian assistance	0%	0%	0%	0%	0%

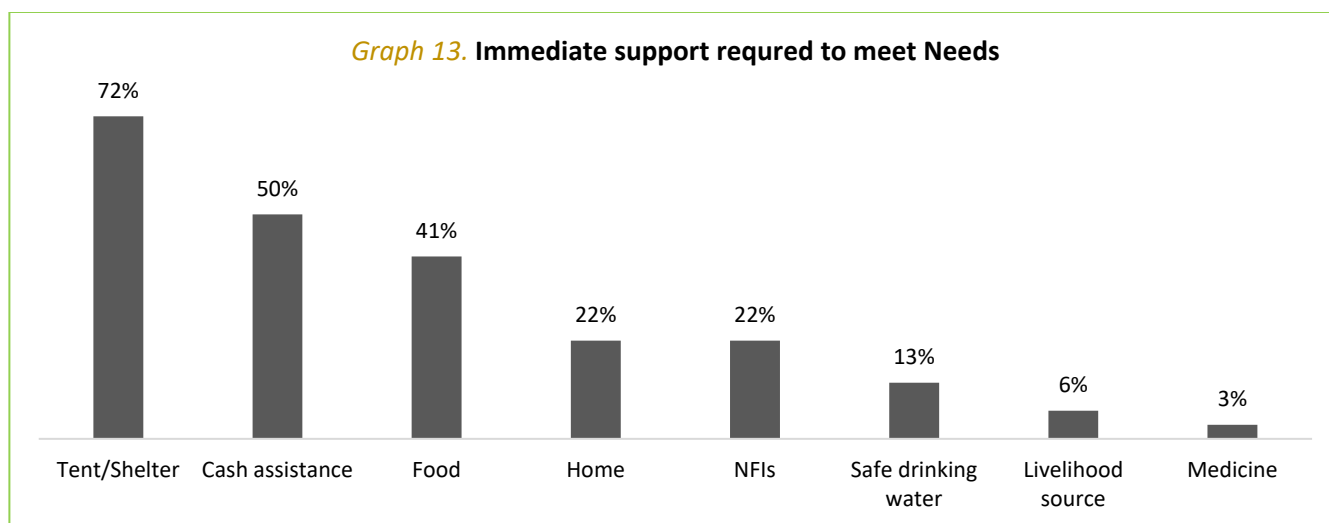
Majority of the respondents across the districts reported that there are serious problems in their communities because people don't have enough income, money, and resources to live in the current situation.

Regarding traditional main sources of income by majority of the communities, the respondents reported agriculture, Livestock, Small businesses, daily waging, and skill to repair/build as main sources.

**Table 16. Traditional main sources of income**

Sources	Dadu	Khairpur	Mirpur Khas	Sanghar	Grand Total
Agriculture	88%	100%	100%	100%	97%
Livestock	88%	100%	88%	100%	94%
Small business/Trading	13%	38%	50%	50%	38%
Daily work	13%	63%	38%	38%	38%
Skills to repair/build	0%	0%	25%	13%	9%

Overall, 72% of the respondents highlighted tent/shelter as their immediate need at time, 50% went with cash, followed by food, Home NFIs and others as depicted in graph 13 below.



Similarly, community key informants were of the view that their communities need livelihood sources, shelter reconstruction, cash assistance and food assistance to recover from the devastating situation of current crises.

**Table 17. Support needed to recover**

Support Needed	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Livelihood source	100%	38%	88%	13%	59%
Shelter reconstruction	88%	25%	13%	88%	53%
Cash assistance	25%	0%	13%	38%	19%
Food	25%	0%	0%	38%	16%
Don't know	0%	13%	0%	0%	3%

#### 4.10. Health

According to KIIs with government stakeholders, around 155 HFs are damaged in the mentioned four districts (90 in Mirpur Khas, 50 in Sanghar, 10 in Dadu and 5 in Khairpur). Around 30% to 40% of HFs are without basic medical supplies in these districts.

Overall, the majority of people visit DHQ hospitals, followed by THQ, BHUs and then Medical Camps. In Dadu district, DHQ and THQ were on top and then followed by Medical Camps. In Sanghar, more people visit BHUs then DHQs and THQs. In Mirpur Khas, THQs, BHUs and DHQs are mostly visited while Khairpur, DHQs, THQs and Medical camps are mostly visited to seek health services.

Regarding the availability of services at facilities, 63% of respondents stated that the existing health facilities do not have the required

**Table-18: Facilities have No Required Services**

Key Informants	Dadu	Khairpur	Mirpur Khas	Sanghar	Overall
<b>Communities</b>	86%	57%	50%	63%	63%
<b>Govt/NGOs/INGOs</b>	63%	75%	35%	44%	44%

services. The KIIs with government staff informed that 56% health facilities do not have the required services. According to communities and health officials the health services situation is worst in Dadu and Khairpur districts.

## Health Concerns

According to KIIs with communities and government and NGOs stakeholders, Diarrhea is the major health concern followed by Malaria/Dengue, Skin Infection, mother, and child health issues, and so on. The below table show the district wise status of health concerns in current scenario in these districts.

**Table-19: Main health concerns**

Health Concerns	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Diarrhea	88%	100%	100%	100%	97%
Malaria/dengue	38%	100%	100%	75%	78%
Skin infections (scabies)	88%	88%	88%	38%	75%
Maternal and child health issues	50%	88%	100%	0%	59%
Other gastro-intestinal illnesses	50%	88%	75%	13%	56%
Hypertension	0%	88%	13%	13%	28%
Respiratory infection	25%	0%	25%	13%	16%

To assess the severity and rise in different health concerns due to flood situation, both communities and govt respondents reported significant increase in various diseases, particularly Diarrhea, Malaria, Skin infection, Cough and Fever, and other

**Table-20: Increase in disease prevalence compared to past.**

Health Concerns	Community KIIs	Govt/NGOs/ INGOs KIIs
Diarrhea	97%	89%
Malaria	88%	81%
Skin infections (scabies)	78%	78%
Very high fever (cold fever)	41%	58%
Cough or difficulty breathing	22%	39%
Worms observed in stool/faeces	22%	25%
Injuries	22%	19%
Dengue	19%	19%
Eye infection	19%	11%

waterborne diseases. The table show the percent of respondents who reported increase in these diseases. The below table shows the district wise analysis of diseases prevalence in comparison with before the crisis.

**Table-21: Increase in disease prevalence compared to past.**

Health Concerns	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Diarrhea	88%	100%	100%	100%	97%
Malaria	75%	88%	88%	100%	88%
Skin infections (scabies)	88%	100%	75%	50%	78%
Very high fever (cold fever)	50%	38%	63%	13%	41%
Cough or difficulty breathing	13%	0%	38%	38%	22%
Worms observed in stool/faeces	0%	50%	25%	13%	22%
Injuries	0%	50%	38%	0%	22%
Dengue	13%	25%	38%	0%	19%
Eye infection	25%	25%	25%	0%	19%

Regarding the availability of staff and medicines at health facilities, overall, 97% of community Key Informants and 67% of government and NGOs respondents reported that these are inadequate. Only 3% from community key informants and 22% from government key informants shared that only basic level facilities are available. The district wise analysis and comparison is given in below tables:

**Table-22: Availability of staff and medicines in health facilities by Community Key Informants**

Level	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Basic	13%	13%	0%	0%	3%
Inadequate	88%	88%	100%	100%	97%

**Table-23: Availability of staff and medicines in health facilities by Govt/ NGOs Key Informants**

Level	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Adequate	0%	0%	22%	22%	11%
Basic	11%	11%	33%	33%	22%
Inadequate	89%	89%	44%	44%	67%

### Problems regarding general physical health:

Both groups of key informants reported the poor physical health of the communities. 77% of community and 88% of government key informants reported problems in communities regarding general physical health. The district wise details are given in below table.

**Table-24: Problems within your community regarding physical health**

Key Informants	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Community Key Informants	43%	100%	38%	100%	71%
Govt/ NGOs/ INGOs Key Informants	50%	100%	100%	100%	88%

Around 97% of community key informants and 94% of government and NGOs staff reported that there are problems in the communities due to lack of adequate healthcare services at community level. The district-wise analysis is given below table:

**Table-25: Problem in your community because people are not able to get adequate healthcare**

Key Informants	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Community Key Informants	86%	100%	100%	100%	97%
Govt/ NGOs/ INGOs Key Informants	100%	100%	89%	89%	94%

Regarding the availability of pregnancy and childbirth related services availability, overall, 6% of community and government/NGOs key informants reported that these services are available while around 94% mentioned unavailability of these services. The district-wise comparison is given in below table:

**Table-26: Pregnancy and Childbirth related Services Availability**

Key Informants	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Community Key Informants	0%	0%	25%	0%	6%
Govt/ NGOs/ INGOs Key Informants	0%	0%	11%	13%	6%

The community key informants reported the below immediate support they needed w.r.t health in their areas to meet their health needs. These include adequate supplies of medicines, followed by 24/7 services, transportation, and trained staff. The district wise analysis is given in below table.

**Table-27: Immediate support Needed**

Needs	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Adequate medicines and supplies	88%	50%	100%	100%	84%
24/7 service	88%	75%	0%	0%	41%
Transport	88%	25%	38%	0%	38%

<b>Trained Staff</b>	50%	0%	0%	0%	13%
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The Key informants from government stakeholders, NGOs/INGOs staff also identified the same needs as mentioned by the community key informants. The below table is depicting the district wise analysis of needs identified by community key informants.

<b>Table-28: Immediate Support needed</b>					
<b>Needs</b>	<b>Dadu</b>	<b>Khairpur</b>	<b>Mirpur Khas</b>	<b>Sanghar</b>	<b>Cumulative</b>
<b>Adequate medicines and supplies</b>	89%	78%	22%	56%	61%
<b>24/7 service</b>	56%	78%	56%	33%	56%
<b>Transport</b>	56%	22%	11%	33%	31%
<b>Trained Staff</b>	89%	0%	11%	0%	25%
<b>Others</b>	11%	0%	0%	0%	3%

#### **Flood crises impact on health services**

Regarding the impact of flood disaster on quality of health services, 66% of community key informants reported that services has become inaccessible due to increased patient load, 53% reported that quality of services deteriorated, 6% shared that frequent stockouts of essential medicines and supplies. Below table shows the district-wise analysis.

<b>Table-29: Impact on the quality of health services since crisis</b>					
<b>Impacts on Health Services</b>	<b>Dadu</b>	<b>Khairpur</b>	<b>Mirpur Khas</b>	<b>Sanghar</b>	<b>Cumulative</b>
<b>Health services have become inaccessible due to increase patient loads in hospitals</b>	25%	50%	88%	100%	66%
<b>Quality of services has deteriorated</b>	75%	25%	88%	25%	53%
<b>Frequent stock out of essential medicines and commodities at health facilities</b>	0%	0%	13%	13%	6%

The Government and NGOs/INGOs key informants shared the same impact as mentioned by the community key informants. The district wise comparison is given in below table.

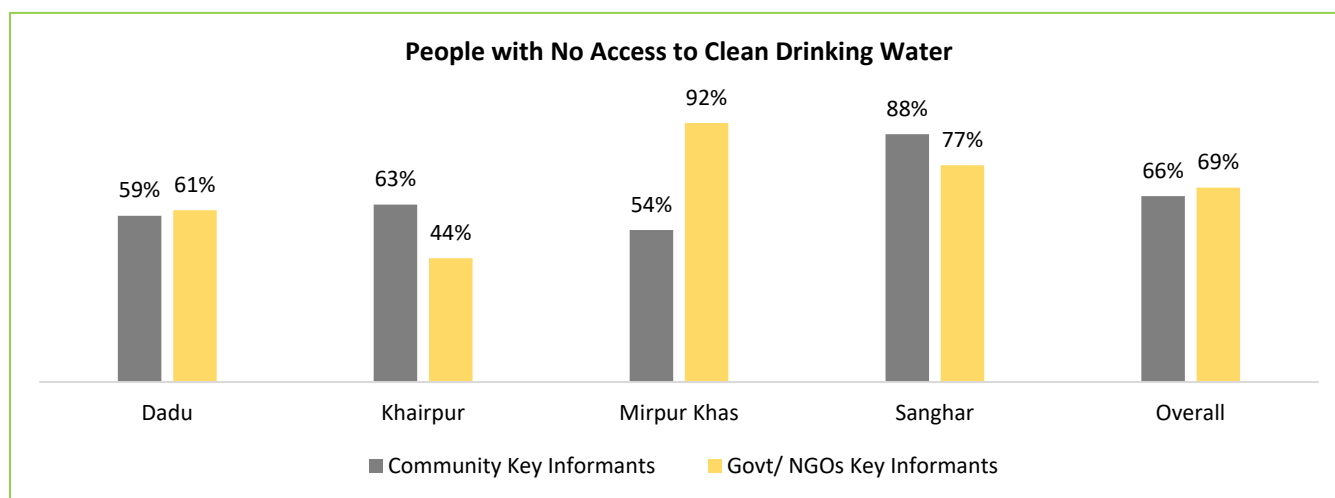
<b>Table-30: Has there been any impact on the quality of health services since crisis?</b>					
<b>Impact on Health Services</b>	<b>Dadu</b>	<b>Khairpur</b>	<b>Mirpur Khas</b>	<b>Sanghar</b>	<b>Cumulative</b>
<b>Health services have become inaccessible due to increase patient loads in hospitals</b>	44%	89%	56%	78%	67%
<b>Quality of services has deteriorated</b>	44%	0%	89%	33%	42%
<b>Frequent stock out of essential medicines and commodities at health facilities</b>	11%	11%	44%	33%	22%

#### **4.11. WASH**

According to the community key informants, overall people don't have access to clean drinking water in their communities. The situation was worst in Sanghar and Khairpur. The government and NGOs key informants reported that situation is worst in Mirpur Khas, Sanghar and Dadu. The below table shows the average percentage of people reported having no access to clean drinking water.

<b>Table-31: Key Informants Reported No Access to Clean Drinking Water</b>		
<b>Districts</b>	<b>Community Key Informants</b>	<b>Govt/ NGOs Key Informants</b>
<b>Dadu</b>	59%	61%

<b>Khairpur</b>	63%	44%
<b>Mirpur Khas</b>	54%	92%
<b>Sanghar</b>	88%	77%
<b>Overall</b>	66%	69%



### Access to Basic Hygiene Facilities

The community key informants were further probed about percentage of population in their areas who do not have access to sufficient water, basic hygiene supplies, difficulties to women and girls in accessing toilets, and people who don't have access to toilet facilities. The data shows that overall, 70% people don't have access to basic hygiene supplies, and 55% don't have access to sufficient water. Similarly, 78% of women and girls face difficulties to access latrine facilities while overall 66% of the population do not have access to toilet facilities. The analysis of community based KIIs is summarized in below table.

Indicators	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
% of people do not have access to sufficient water	57%	61%	35%	68%	55%
% of people without basic hygiene supplies	70%	96%	30%	88%	70%
% of women and girls face difficulties in safely accessing toilets (especially when houses are damaged and if people are displaced)	89%	89%	35%	100%	78%
% of people do not have access to toilet facility	81%	69%	43%	74%	66%

If we see the analysis of KIIs with government and NGOs staff, almost the same picture is depicted by the data (as per below table).

Indicators	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Average of % of people do not have access to sufficient water	43%	51%	86%	75%	65%
Average of % of people without basic hygiene supplies	66%	85%	92%	75%	79%
Average of % of women and girls face difficulties in safely accessing toilets	54%	84%	84%	84%	77%

(especially when houses are damaged and if people are displaced)					
Average of % of people do not have access to toilet facility	59%	81%	80%	69%	72%

### Women and Girls Access to Menstrual Hygiene Management Supplies

Regarding women and girls dignified access to menstrual hygiene related supplies, 100% of community Key Informants from all 04 districts reported that there is no access for women and girls to any menstrual hygiene supplies in the current disastrous situation. While the Key informants from government and NGOs staff reported from Sanghar and Mirpur Khas reported some access.

**Table-32: % of women and girls have dignified access to hygiene supplies**

Key Informants	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Community Key Informants	0%	0%	0%	0%	0%
Key Informants from Govt./ NGOs	0%	0%	44%	22%	18%

### Problems due to difficulties in hygiene maintenance

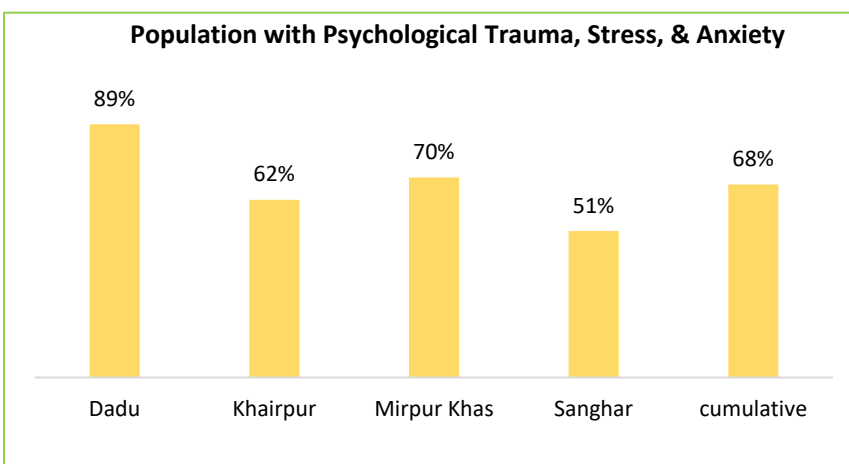
The Key Informants from communities were probed about that is there a serious problem in their community because it is difficult for people to keep clean; for example, because there is not enough soap, water, hygiene / dignity items or suitable place to wash. Overall, 94% Key Informants from communities and 97% from Govt./NGOs staff reported that yes there is problem due to unavailability of mentioned facilities.

Key Informants	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Community Key Informants	100%	100%	75%	100%	94%
Key Informants from Govt./ NGOs	100%	100%	100%	88%	97%

### 4.12. Mental Health and Psychosocial Support:

Overall, 68% respondents reported that people in their community are feeling distressed due to current crises in their area.

Further, respondents were asked to share the reasons of distress. Majority of them (91%) reported lack of access to basic services, 88% reported property loss as the basic reason of distress among the community, followed by loss of livelihood sources (84%), loss of valuables (66%), lack of information (38%), the prevalence of violence (34%) and other reasons including safety issues, and harassment etc.



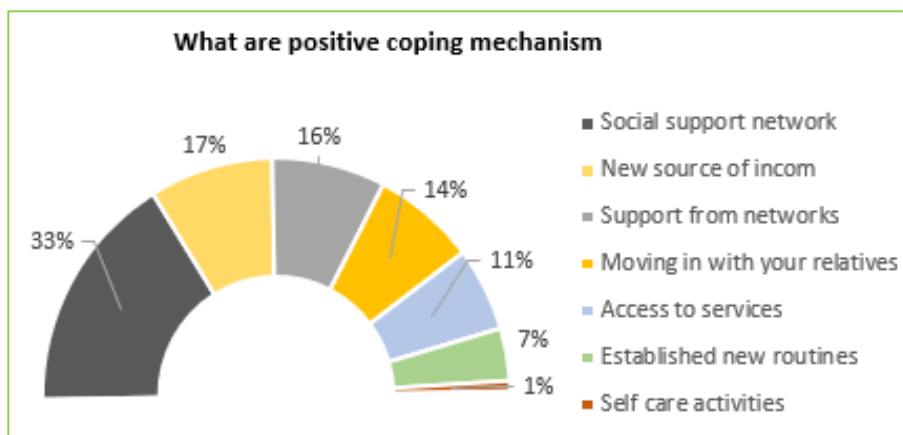
**Table-33: What are the common reasons for stress?**

Reasons	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Lack of access to basic services such as health, education, livelihoods, shelter etc.	88%	100%	100%	75%	91%

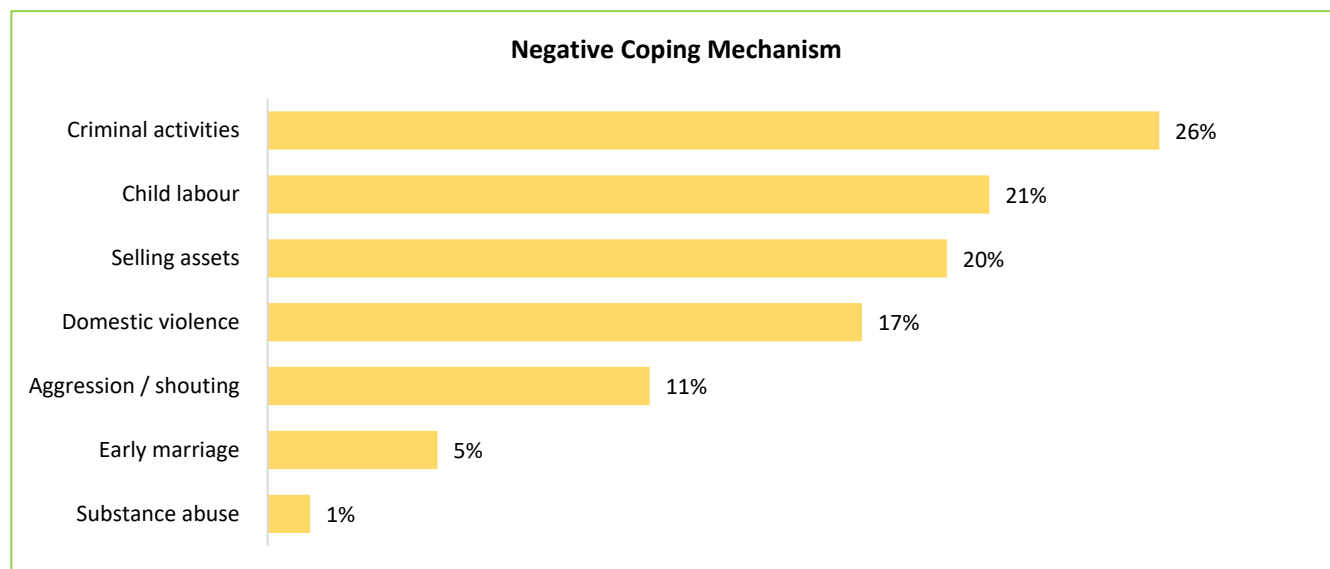
Property loss	88%	88%	100%	75%	88%
Loss of livelihood sources (crops, shops, livestock etc.)	88%	100%	100%	50%	84%
Loss of valuables	88%	100%	38%	38%	66%
Lack of information	25%	50%	50%	25%	38%
Violence	25%	25%	75%	13%	34%
Safety issue	13%	13%	100%	0%	31%
Harassment / security issues	0%	13%	50%	13%	19%

#### 4.13. Positive and Negative Coping Mechanism Adopted by Affected Population

Social support network (family and/or friends) was reported as the top-most positive coping mechanism or positive aspect of the current crises on community includes strengthening of social support networks (family and/or friends) reported by 33% respondents) followed by more focus on generating new sources of income (17%), support from networks (16%), and moving in with relatives (14%). While other positive mechanisms were also reported included efforts to increase access to services, establishments of new routines, and self-care activities.



Negative coping mechanism included criminal activities (reported by 26% respondents) followed by child labouring (21%), selling assets (20%) and increase in domestic violence (17%). Some other negative aspects were also reported including increase in aggression among people, early marriages, and substance abuse. Detailed results are shown in graph --.





#### 4.14. Protection

The ENI found that the respondents identified several protection issues in the communities. Among these the top mostly reported issues are No access to health services, psychological trauma, stress and anxiety, no access to information due to communication barriers, no access to other essential services, and other issues including violence, harassment, insecurity, isolation from families, economic exploitation, and loss of necessary documents during floods. The details with district-wise prevalence of these issues are given in below table:

**Table-34: What are the main protection issues people in your community are facing**

Protection Issues	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
No access to health services	88%	75%	100%	88%	88%
Psychological trauma, stress, and anxiety	50%	100%	100%	50%	75%
No access to information due to communication barriers	63%	63%	50%	75%	63%
No access to other essential services	63%	50%	38%	38%	47%
Violence, harassment, or abuse in the family/household	0%	13%	88%	75%	44%
marginalization and discrimination	75%	0%	0%	88%	41%
Insecurity due to crime	38%	75%	38%	0%	38%
Separation/isolation from their families/homes	38%	0%	63%	38%	34%
Labour force / economic exploitation	13%	13%	0%	13%	9%
No documents / loss of documents during floods	0%	13%	0%	0%	3%

Respondents were further asked to enlist the protection issues which affect women and girls in the community. Major protection issues reported included no access to information due to associated communication barriers to women reported by 69% of the community key informants, restricted access to health services (63% responses), psychological trauma, stress, and anxiety (56%), and separation/isolation from families reported by half (50%) respondents. Other issues also reported including lack of security in area, prevalence of violence, sexual abuse, and early/forced marriages. District-wise details are given in below table.

**Table-35: Main protection issues affecting women and girls in your community**

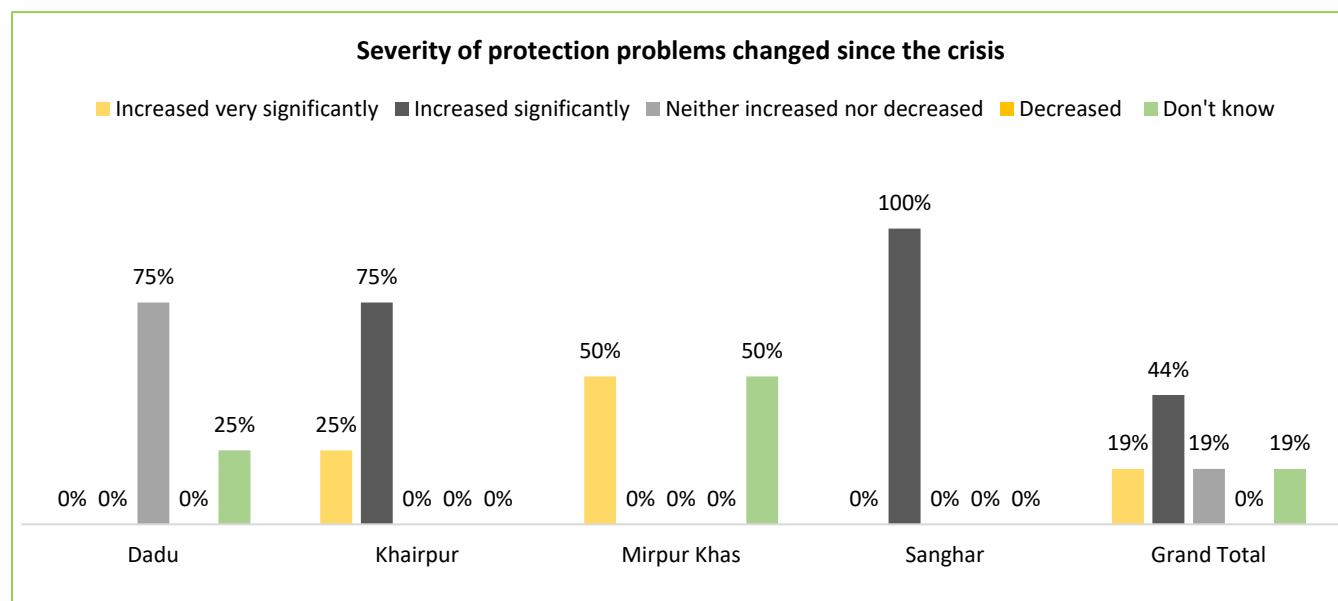
Protection issues	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
No access to information due to communication barriers	50%	75%	63%	88%	69%
Restricted access to health services	88%	13%	50%	100%	63%
Psychosocial trauma, stress, and anxiety	25%	100%	38%	63%	56%
Separation/isolation of family members/household	63%	13%	50%	75%	50%
Lack of security in the area	13%	13%	100%	13%	34%
Violence or abuse in the family/household/community	0%	13%	63%	25%	25%
Sexual exploitation	13%	0%	38%	13%	16%
Early/forced marriage	50%	0%	0%	0%	13%

Likewise, women and girls, children are also a marginalized group and are exposed to protection related issues. Respondents also shared protection issues relevant to children as below. These included no access to education accounted for 84% responses, followed by child labouring (53%), Psychological trauma (44%), and violence against children with 22% response rate. Child abuse and child/forced marriages were also reported by less than 20% key informants for each. Below table shows district wise results.

**Table-36: What are the main protection issues affecting children in your community**

Protection issues	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
No access to education	88%	100%	88%	63%	84%
Child labour	0%	25%	100%	88%	53%
Psychological trauma, stress, anxiety	75%	13%	38%	50%	44%
Violence against children	13%	0%	50%	25%	22%
Child abuse	13%	0%	0%	63%	19%
Child / forced marriages	25%	0%	38%	0%	16%

Overall, 19% respondents were of the view that protection concerns increased very significantly in current situation in the area, 44% reported significant increase while 19% said that protection-related concerns neither increased nor decreased but remained same in current situation. Remaining 19% were not aware of that. Chart below shows district wise detailed results.



Respondents were further probed to identify their most immediate needs related to protection, 78% of key informants highlighted safe spaces for women, adolescent girls, and children and 69% shelters. As due to communication barriers due to floods, people in community have low or no access to information hence information about and safe access to basic services was also reported as immediate need by 41% of the respondents. Other identified needs included provision of dignity kits or hygiene items and referrals to service providers.

**Table-37: Based on current situation, please identify your most immediate need on protection**

Needs	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
Safe space for women, girls, and children	88%	50%	75%	100%	78%
Shelter	50%	100%	63%	63%	69%
Information about and safe access to basic services	75%	88%	0%	0%	41%
Dignity kits / hygiene kits	50%	88%	13%	0%	38%
Referral	13%	0%	0%	13%	6%

## 4.15. Education

50% respondents reported that government schools are available, followed by private schools (13%) and NGO managed schools

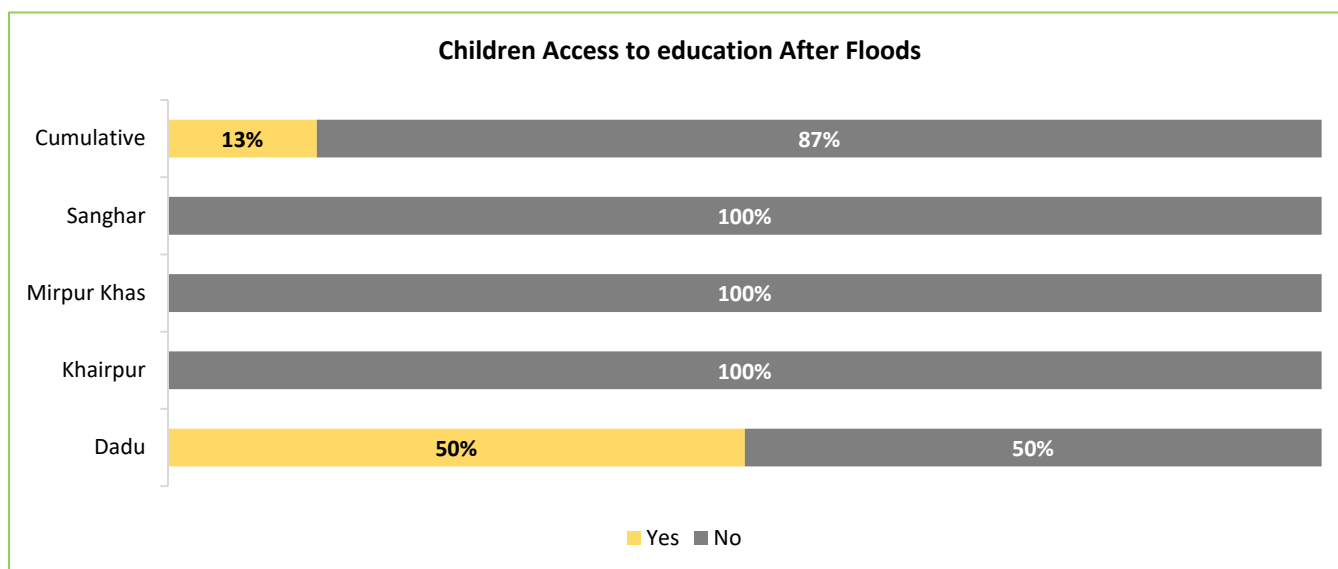
**Table-38: What options of accessing education are present in your area?**

Education facilities	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
<b>Government school</b>	88%	38%	13%	63%	50%
<b>No Education Facility Exist</b>	0%	13%	88%	75%	44%
<b>Private school</b>	38%	13%	0%	0%	13%
<b>NGO managed schools</b>	38%	13%	0%	0%	13%

(13%). While remaining 44% reported unavailability of education facilities in their respective areas. After floods the schools are closed and currently the children are not going to schools.

According to Govt. officials and key informants from organizations, on around 35 schools in district Dadu, 127 schools in Khairpur, 54 in Mirpur Khas while 98 education facilities in Sanghar are being used as evacuation centers and/or shelters for displaced population due to floods.

Graph below indicates that only 13% of the respondents (in district Dadu only) reported access of children to education facilities while remaining 87% reported no access of children to education facilities or they were reported not going to schools due to floods.



Furthermore, those who reported no or limited access of children to school highlighted key barriers in accessing education facilities or not sending their children to schools included damaged school buildings, debris in school, children engagement in income generation activities, far/distant schools, prevalence of protection issues/risk in the way to school and unavailability of WASH services in the school. Below table depicts detailed results.

**Table-39: key barriers for not sending your children in a school? (for girls and for boys)**

Barriers/Reasons	Dadu	Khairpur	Mirpur Khas	Sanghar	Cumulative
<b>School building damages</b>	29%	100%	25%	26%	35%
<b>Debris in school building</b>	29%	0%	15%	16%	17%
<b>Children are engaged income generation activities</b>	7%	0%	0%	16%	7%
<b>School is too far away</b>	29%	0%	15%	11%	15%

<b>Protection risks on the way to school</b>	0%	0%	20%	11%	10%
<b>No WASH facilities</b>	7%	0%	25%	21%	17%

Overall, 53% respondents reported school building repair/rehabilitation as their most immediate need, 56% mentioned removal of flood water from school premises, followed by establishment of new learning spaces (53%), school kits provision (38%), cash assistance (22%) and provision of mats mentioned by 3% respondents.

**Table-40: Most immediate needs of education**

<b>Needs</b>	<b>Dadu</b>	<b>Khairpur</b>	<b>Mirpur Khas</b>	<b>Sanghar</b>	<b>Cumulative</b>
<b>Repair schools</b>	100%	25%	100%	75%	75%
<b>Flood water removal from school/classes</b>	88%	50%	38%	50%	56%
<b>Establish Learning spaces</b>	88%	38%	50%	38%	53%
<b>School kits</b>	38%	0%	63%	50%	38%
<b>Cash</b>	50%	0%	0%	38%	22%
<b>Provide mats</b>	13%	0%	0%	0%	3%