

## BAHAAL

EMERGENCY RELIEF & EARLY RECOVERY FOR THE  
FLOOD AFFECTEES ACROSS PAKISTAN

2010-2012



### Phase 2: Emergency Response to Sindh Floods 2011 COMPLETION REPORT



COOPERATIVE AGREEMENT NO. 391-A-00-11-01204-00

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## Introduction

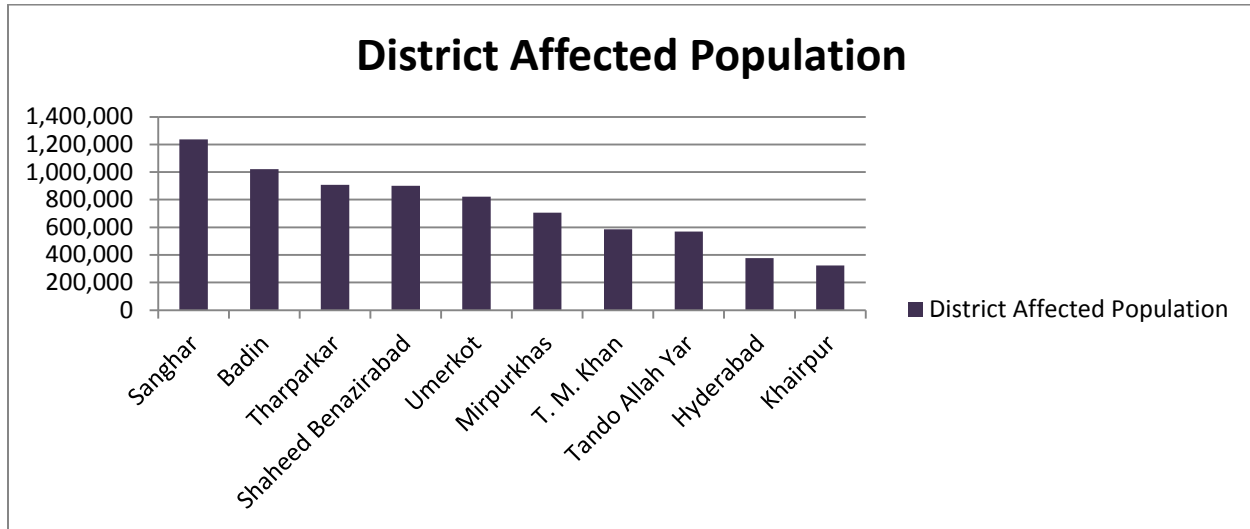
Sindh once again had been hit by the worst of floods. In 2010, the floods were caused by burgeoning river waters but this time torrential rains have struck the area itself causing calamitous damage to the lives of approximately 8.1 million in Sindh (according to the latest NDMA Statistics). Almost all the districts of the province have been affected with Badin, Ghotki, Hyderabad, Khairpur, MirpurKhas, N.Feroz, Sanghar, Shaheed Benazirabad (SB), Tando Allah Yar, Tando Mohammad Khan (TMK), Umerkot, Tharparkar and Khairpur being the most severely affected.

In these 12 districts alone the total affected population is almost 7.5 million. In the Districts of Badin, Mirpurkhas, Tando Mohammad Khan and Shaheed Benazirabad more than 3.2 million people have been affected. One of the reasons why RSPN chose these districts was because the number of un-served and underserved flood affected population was much greater than in other districts. Moreover, the UCs chosen in consultation with the local administration had witnessed little or no relief activity prior to Bahaal intervention.

**Table 1: Most affected districts of Sindh in 2011 Floods (Population –wise)**

S/no.	District	Villages Affected	Population Affected	Houses Damaged
1	Sanghar	5,182	1,237,432	213,928
2	Badin	6,395	1,021,301	382,562
3	Tharparkar	2,284	907,179	178,356
4	Shaheed Benazirabad	4,104	900,000	200,000
5	Umerkot	3,769	821,581	122,103
6	Mirpurkhas	3,178	705,151	118,110
7	T. M. Khan	2,835	585,411	72,935
8	Tando Allah Yar	1,609	569,829	70,163
9	Hyderabad	681	377,992	20,644
10	Khairpur	2,075	323,924	29,023
	<b>Total</b>	<b>32,112</b>	<b>7,449,800</b>	<b>1,407,824</b>

**Table 2 District-wise affected population**



The Sindh 2011 floods Emergency Response was carried out by RSPN in two phases. In the first phase, the worst affected residents of Mirpurkhas were provided relief in sectors of WASH and Shelters. In the second phase, the residents of four districts which included Badin, Mirpurkhas, Tando Mohammad Khan and Shaheed Benazirabad were provided with relief items in the WASH sector.

### **Situational Analysis**

In the first phase, the tehsil of Jhuddo in Mirpurkhas district had been chosen after consultation with the local administration for provision of relief activities under the banner of Bahaal Project. One of the biggest reasons for choosing this tehsil was that roads leading to it had been flooded and access to the tehsil was not possible for a good two months. Communities living in this Tehsil were not only underserved but a majority of them were un-served. Two UCs chosen for Bahaal Project Emergency Response to Sindh 2011 Rains activities in the District of Mirpurkhas were the two worst affected UC's of Roshanabad and Ahorhi. Access to these affected areas was limited and therefore, little or no relief activity in terms of shelter or WASH had been conducted in these areas.

For Bahaal Project Sindh Emergency Response Phase 2, four of the worst affected districts of the province had been selected. These districts included Badin, Mirpurkhas, Tando Mohammad Khan and Shaheed Benazirabad. A total of 8 UCs (2 from each district) had been chosen for the project's activities in the WASH sector. These UCs had been selected after consultation with the local administration and only those areas had been chosen for the project's activities which have received the least amount of assistance.

The districts chosen were on different stages of recovery at the time of initiation of Phase 2. While Badin and Mirpurkhas were still in their very early stage of recovery, Tando Mohammad Khan and Shaheed Benazirabad had stabilized to quite an extent. Inhabitants of the two latter districts had begun rebuilding their homes and started cultivating their arable lands. In Badin and Mirpurkhas there were still many areas where one to two feet of water was covering vast swaths of land and therefore people living in these areas were still living on road sides. These two districts are located towards the eastern side on a relatively lower scale above sea-level than the other precincts. Therefore, flood water accumulated in the other western districts drained through them. Nevertheless, the total cumulative loss in all the districts chosen was massive and there was still need for WASH activities in districts that had begun the journey to recovery.

## Summary of Activity

In the phase 1 and 2 of the Bahaal Sindh Emergency Response to 2011 floods, a total of 41,540 beneficiary households were targeted in the two sectors of WASH and Shelter and Settlements. In the WASH sector, needy households were provided relief through hygiene kits, water kits, hand pumps and hygiene session. Similarly in the Shelter and Settlements sector, shelters kits were provided to residents of the flood affected areas whose homes had been washed away by the floods. The breakdown of beneficiaries sector and sub-sector wise is given in the table below.

**Table 3 Summary of Activity, achievements and targets**

Sector	Sub Sector	Targeted Beneficiaries (HHs)	Beneficiaries Reached with duplication (HHs)	Beneficiaries Reached without duplication (HHs)	Actual Percent of Targeted Beneficiary HHs Achieved
WASH	Hygiene Kit*	18,270	18,270	18,270	<b>100%</b>
WASH	Hygiene Sessions**	36,540	36,540	30,980	<b>85%</b>
WASH	Water Kit	18,270	18,270	13,149	<b>72%</b>
WASH	Hand Pumps	4500	4500	4500	<b>100%</b>
Shelter & Settlements	Emergency Shelter***	500	960	920	<b>184%</b>
	<b>Total HHs</b>	<b>41,540</b>	<b>42,000</b>	<b>36,839</b>	<b>89%</b>

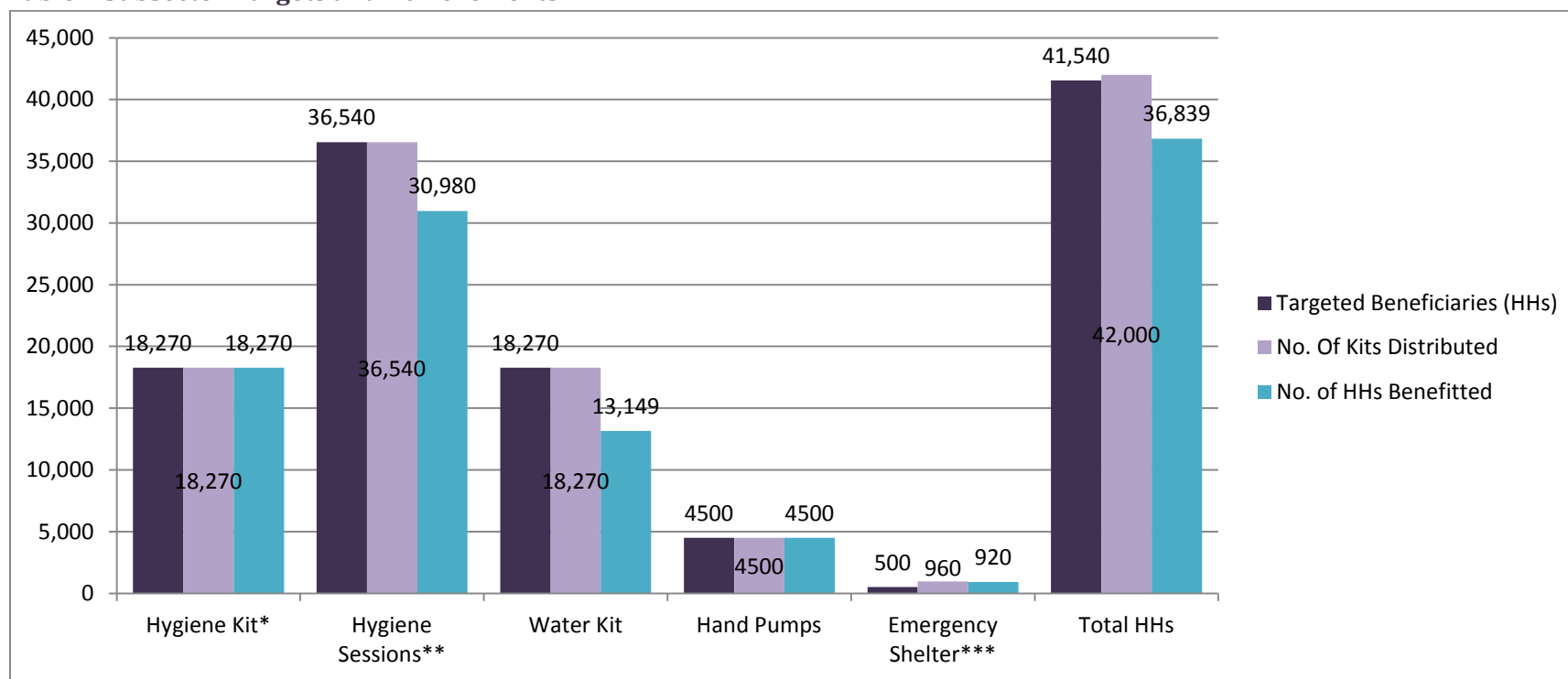
\*duplication of beneficiaries; includes HHs (total 5081) who were provided water kits and HHs (total 40) who were provided all the three kits

\*\*duplication of beneficiaries; beneficiary HHs of water and hygiene kits makeup this total

\*\*\*duplication of beneficiaries; 40 HHs were provided all 3 kits; each HH was provided one tarpaulin sheet instead of 2

In phase 1 and 2 the total targeted beneficiary households were 41,540. These households were targeted in 10 of the most severely affected UCs of four districts that were Badin, Mirpurkhas, SB and TMK. In the WASH sector the aim was to provide 18,270 HHs with hygiene kits, 18,270 with water kits, and 4500 HHs with hand pumps. They beneficiaries were also entitled to receive hygiene sessions. In the Shelter and Settlements sector, 500 emergency shelters were allocated for a minimum of 500 homeless HHs. The detail of hygiene, water and shelter kit items is attached in the annexure.

**Table 4 Subsector Targets and Achievements**



**Table 5 Final progress Table Phase 1**

S#	Activity	Measure of Unit	Units		Households		Population		Achievement %
			Target	Acht	Target	Acht	Target	Acht	
1	Procurement of Hygiene Kits	Kit	2,000	2,000	2,000	2,000	13,160	13,160	100%
2	Distribution of Hygiene Kits	Kit	2,000	2,000	2,000	2,000*	13,160	13,160*	100%
3	Organise Hygiene awareness sessions**	Sessions	80	80	4,000	2,000**	26,320**	26,320	50%
4	Procurement of Water Kit	Kit	2,000	2,000	2,000	2,000	13,160	13,160	100%
5	Distribution of Water Kit	Kit	2,000	2,000	2,000	2,000*	13,160	13,160*	100%
6	Procurement of Emergency Shelter Kits	Kit	1,000	1,000	500	960	3,290	6,317	192%
7	Distribution of Emergency Shelter Kits***	Kit	1,000	1,000	500	960***	3,290	6,317	100%
	<b>Total</b>				<b>4,500</b>	<b>4,960</b>			

\*duplication of beneficiaries; includes HHs (total 1,960) who were provided water kits and HHs (total 40) who were provided all the three kits

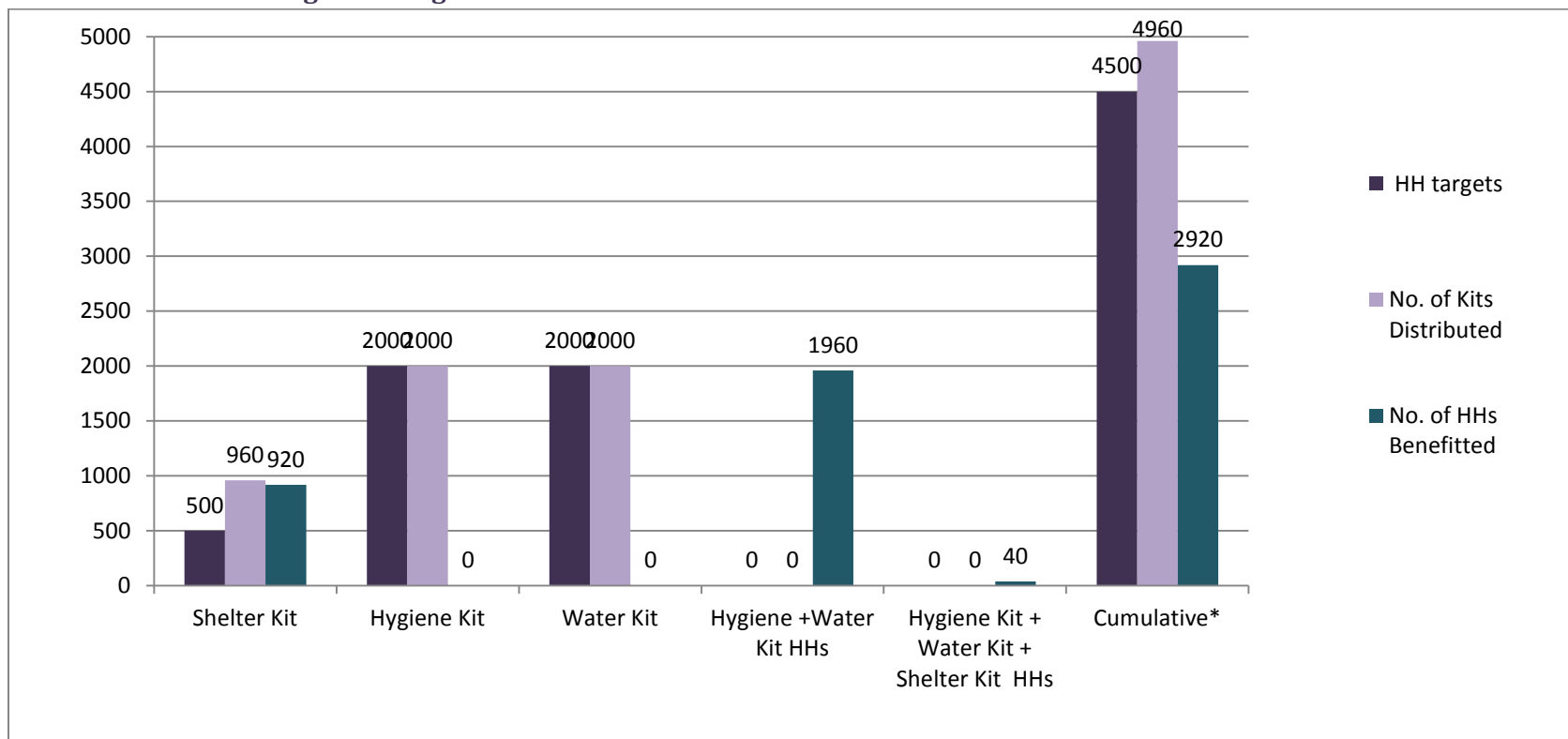
\*\*duplication of beneficiaries; beneficiary HHs of water and hygiene kits makeup this total

\*\*\*duplication of beneficiaries; 40 HHs were provided all 3 kits; each HH was provided one tarpaulin sheet instead of 2

All Phase 1 targets were achieved within allocated time. In Phase 1, 2000 hygiene kits and 2000 water kits were distributed to the affected population. Based on the need assessment of the affected populace, as many as 40 HHs received all three kits and 1,960 HHs received both hygiene and water kits. This reduced the total number of hygiene and water kit beneficiary households to 2,000. The number of HHs to be provided with emergency shelter kit was 500. However, 920 HHs were provided with emergency shelters which were more than the targeted number. This increase was seen as a consequence of change of strategy. Initially it was planned that each household will be given two tarpaulin

sheets. But then it was later decided that one tarpaulin sheet was enough for a single household. Therefore, the number of beneficiary household nearly doubled.

**Table 6 Achievements against Targets Phase 1**



**Table 7 Final progress Table Phase 2**

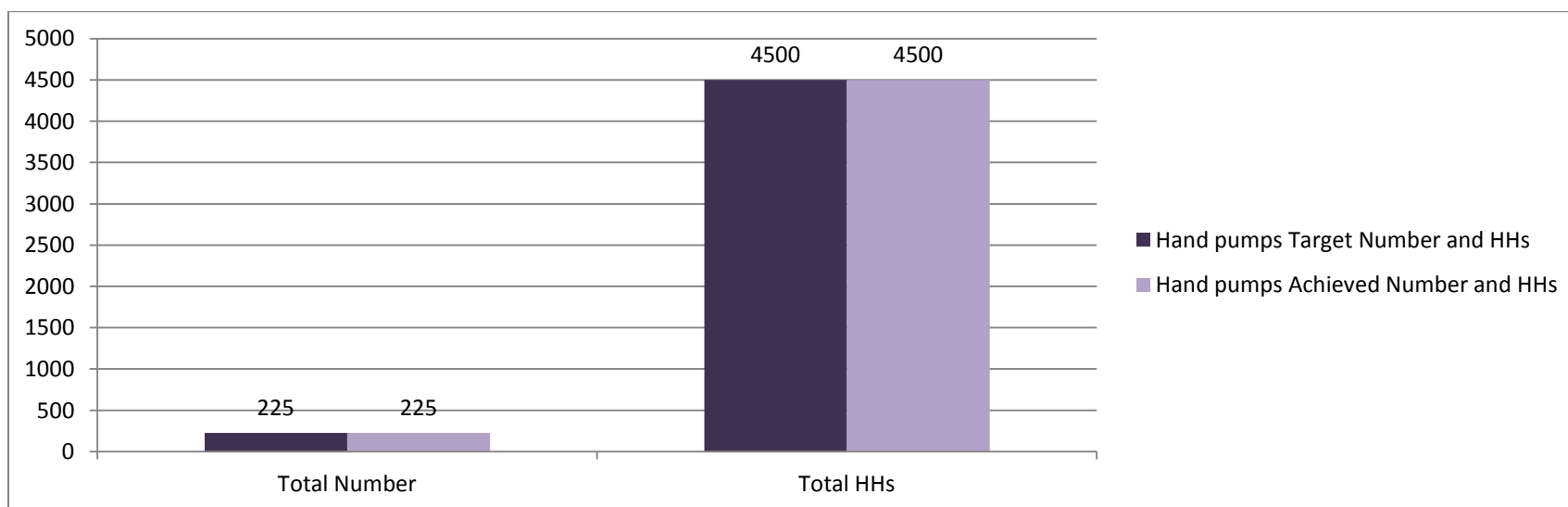
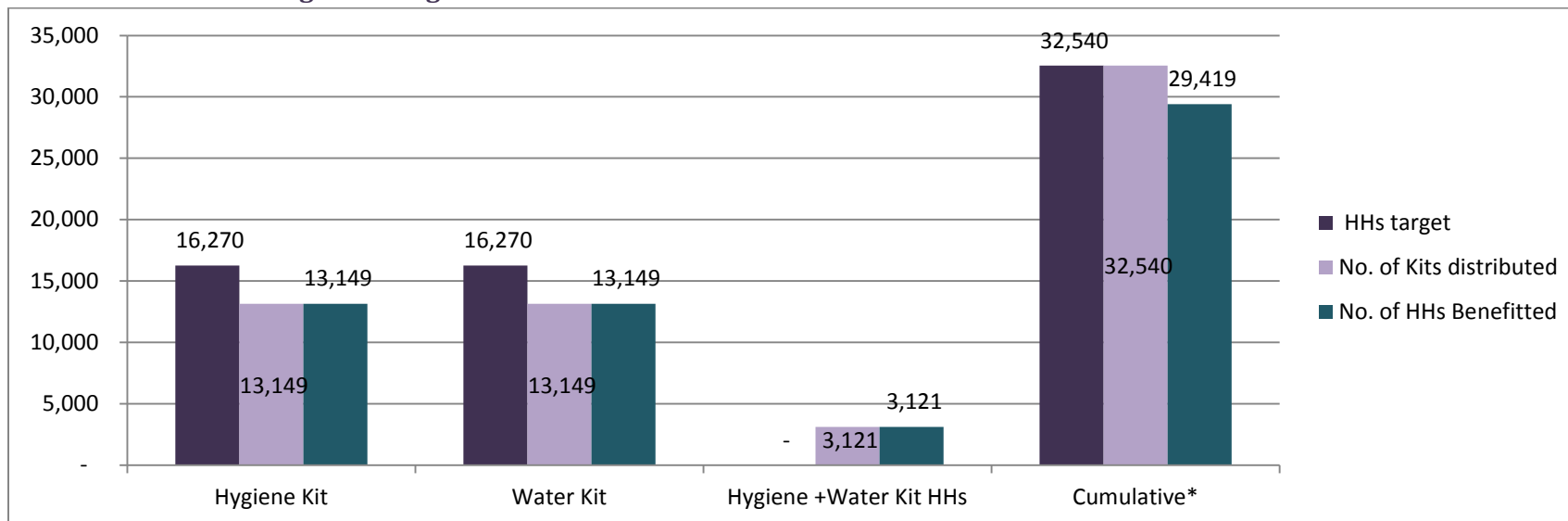
#	Activity	Measure of Unit	Units		Households		Population		%Achievement HHs
			Target	Acht	Target	Acht	Target	Acht	
1	Procurement of Hygiene Kits	Kit	16,270	16,270	16,270	16,270	107,057	107,057	100%
2	Distribution of Hygiene Kits*	Kit	16,270	16,270	16,270	16,270*	107,057	107,057	100%
3	Organize Hygiene awareness sessions **	Sessions	656	656	32,540	32,400	213,192	193,577	90%
4	Procurement of Water Kit	Kit	16,270	16,270	16,270	16,270	107,057	107,057	100%
5	Distribution of Water Kit*	Kit	16,270	16,270	16,270	16,270*	107,057	107,057	100%
6	Procurement of Hand Pumps	Kit	225	225	4,500	4,500	29,610	29,610	100%
7	Installation of Hand Pumps	Kit	225	225	4,500	4,500	29,610	29,610	100%
	<b>Total</b>				<b>37,040</b>	<b>37,040</b>			

\*duplication of beneficiaries; includes HHs (total 3,121) who were provided both hygiene and water kits

\*\*duplication of beneficiaries; beneficiary HHs of water and hygiene kits makeup this total;

For Phase 2 of ERS, emergency shelter kit was not included in the list of relief items to be provided under Bahaal Project. Instead only the WASH sector was focused on. A total of 16,270 hygiene kits and 16,270 water kits were distributed in this phase. Duplication of beneficiaries was avoided through choosing separate UCs for each item. However, in model villages both hygiene kit and water kits were handed out to the same beneficiary. 225 hand pumps were also rehabilitated in this stint of ERS. The number of actual HHs that received either only hygiene kit or water kit was 13,149. The numerical value for HHs receiving both kits was 3,121. Therefore a total of 29,419 HHs received either one or both the kits against the targeted number of 32,540. There was a two week delay in completion of activities due to a delay of supply of items on part of the supplier. A no-cost extension was requested for the completion of activities which was given by USAID-OFDA.

**Table 8 Achievements against Targets Phase 2**



## Impact Assessment – Result Based Monitoring Framework (RBMF)

The project comprised of different sectors and activities because there were multiple needs of the beneficiaries that needed to be addressed on an urgent basis. Hence, each item provided through an activity aimed at fulfilling a purpose that was different from the other items handed over. Consequently, each item had a different impact on the lives of the beneficiaries and each of them fared differently in the eyes of the recipient households. The following table analyzes activities from every sector in detail and shows the impression they were able to make on the lives of the beneficiaries.

Impact assessment was based on the following criteria:

- Quality of items: Good, Fair or Poor.
- Quantity of items: Adequate or Inadequate
- Usefulness of items: Essential, Useful or No use
- Standards and procedures followed or not. (Including Sphere Standard, Livestock Emergency Guidelines and Standards (LEGS), Field Operations Guide (FOG), procurement and distribution guidelines)
- Recommendations included are from beneficiaries, social mobilizers, communities and monitoring officers.

**Table 9 Activities, Indicator, Achievement and Impact of Bahaal Project activities in ERS**

Activities	Indicator	Achievement	Impact
<p><b>Results 1:</b> <b>Shelter and Settlements</b></p> <p>3290 Internally displaced persons (IDPs) have</p>	<p><b>Emergency Shelter:</b> Number and percentage of targeted households receiving tarpaulins, bamboo poles, and rope</p>	<p>6,239 HHs (100% of the targeted households) have access to emergency shelter</p>	<p>Emergency Shelter played an instrumental role in the rehabilitating the lives of those who benefitted from them. Emergency shelters were introduced at a time when the people of the region were desperate for any form of roof on their head because most of them were living at the mercy of nature. Thus, the emergency shelter helped in serving their immediate need of a roof that they could live under that would protect their family from the harsh weather conditions.</p> <p>The beneficiaries were mostly satisfied with the tarpaulin sheet that they were provided for the shelter as it was thick and waterproof and provided them with some degree of protection from the sun and rain.</p>

<p>immediate access to shelter (500 HHs)</p>			<p>The sheet and bamboos were also useful commodities once the beneficiaries had begun construction of their transitional homes. The sheets provided the new shelter roofs extra protection and the bamboos made the houses stronger. Some even used the sheets for live stock shelters.</p>
<p><b>Results 2:</b> <b>WASH Services and Health</b></p>	<p><b>Water:</b> Number and percentage of targeted households having access to potable water</p>	<p>4,500 HHs (<b>100%</b> of the targeted households) have access to hand pumped water</p>	<p>The utility of both WPSs and Buckets was very high due to the lack of availability of clean water and widespread prevalence of waterborne diseases. Neither were the each of the two items widely available in the areas nor did the beneficiaries possess the resources to buy them themselves.</p>
<p>270,043 individuals have immediate access to potable water and a healthy environment (41,040 HHs)</p>			<p>Hand pumps not only proved to be a source of clean water for the beneficiaries but also gave the community an opportunity to work as a unit. Villagers constructed the hand pump platforms and water disposals themselves through the community support. They even planted trees and initiated kitchen gardening in areas where the disposed water was being collected. However, there were some areas where people were not entirely happy with the hand pumps that were installed in their areas. They were not accustomed to using the kind of hand pump that was installed and therefore, it broke down very often.</p>
	<p><b>Hygiene Promotion: Number and percentage of targeted households having hygiene kits</b></p>	<p>18,270* HHs (100% of the targeted households) have hygiene kits</p>	<p>Beneficiaries were satisfied with both the quality and quantity of the items but the number was less of each item in the kit. It was enough to last two week to a month and help them during the early phases of recovery.</p> <p>Stagnant water and hot weather created ideal breeding conditions for insects. Exposure to this without any real line of defense resulted in depleting health conditions in the regions. Waterborne diseases, skin infections and similar ailments were common and therefore, the need for provision of hygiene kits and delivery of hygiene sessions was immense.</p>

	<b>Hygiene Promotion: Number and percentage of targeted households having Water kits</b>	18,270* HHs (100% of the targeted households) have water kits	Water Kits proved to be highly useful in these affected areas. Drinking water was scarce and people in these areas had no space to store this water in. Also people had very limited supply of clean water and water borne stomach diseases were common. Therefore, the WPSs helped immensely in improving the supply clean water.
	<b>Health and Hygiene Education: Number and percent of targeted households receiving hygiene kits receive hygiene and health education.</b>		Awareness of items in the hygiene kits and knowledge about their usage was very low. The beneficiaries first needed to be taught about how each item in the kit would benefit them. This was done through training of community resource persons by SOs. These SOs themselves received their training at a workshop conducted by RSPN in different areas. These SOs later trained a total of 524 CRPs in each of the 16 districts to deliver health and hygiene sessions to the locals.
		203,848 Beneficiaries (85% of the targeted beneficiaries) received hygiene and health education.	<p>To assist the beneficiaries and make them more responsive to the sessions health and hygiene charts were prepared in local languages. The sessions were also delivered to the individuals in their domestic language which augmented their understanding as well as responsiveness to these sittings. What interested the beneficiaries (especially the children) the most was the practical demonstration of different processes, like hand-washing, tooth brushing, face cleaning et cetera.</p> <p>The sessions not only focused on personal and family hygiene but also inculcated in the locals the importance of keeping their streets clean, having proper water and sanitation drainages, growing trees and the like.</p>

			<p>The different items in the kit targeted various aspects of hygiene of both genders. The kind of information disseminated in these sessions was truly a unique experience for the local populace. Especially the women learnt a great deal about how to keep their own and their family's hygiene in good shape. Most of the kit commodities were easily available in the local markets from where many beneficiaries bought them and continued usage of those items.</p> <p>One of the major impacts of hygiene kit was the reduction in waterborne diseases and infections. As people were taking more care of their hygiene by using items in the kit they resultantly were becoming less vulnerable to these diseases. Moreover, the WPSs also played their part in reducing diseases like diarrhea, cholera and the like. Availability of clean water through hand pumps also reduced prevalence of the aforementioned diseases.</p>
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## Recommendations and Lessons learnt

ERS 2011 was initiated at a time when most of the Eastern districts of Sindh were devastated by the floods. Most of the affected districts were inundated even months after the rains that had caused severe flooding had ceased. The inundated lands made retreat to homes impossible, availability of drinking water scarce and water-borne diseases rampant. Therefore, the relief items provided in this phase were critical in providing affected some degree of respite from the adverse situation.

Emergency shelter kit proved to be very useful it was provided to people who were living under tents made from pieces of cloth and sacks. The tarpaulin sheets, bamboo poles and ropes all strengthened the existing shelters by providing them with a stronger base and extra-covering. However, most HHs did not use the shelter kit for strengthening their existing shelters and not as independent shelters. This was because they did not see the items provided in the kit as adequate for a complete shelter. Therefore, proper tents could be provided next time to ensure that HHs can solely rely on items provided.

Hygiene and Water kits proved to be more than essential at this critical juncture. The water kit provided not only storage place for water but also clean drinkable water that could be used in a hygienic way. In

phase 2 glasses were provided that ensured people had little or no direct contact with water while drinking it. Similarly, hygiene kits were also very useful as they enabled the affected population to clean their hands, dishes and clothes before using them.

WPSs and sanitary pads were the only two items in the hygiene kit whose usage was not as high as the other items. This was because WPSs are not a very common item in these areas and they are not the cheapest item either. Most people find it impossible to afford these on their own. Therefore, the usage is only limited to during times of disasters and even then people only use them if they are provided to them as relief items. To make WPSs usage more common beneficiaries were taught of their usefulness in disaster scenarios. They were also informed about alternative cost-effective methods that they can use to filter water. It was observed that people showed greater preference towards these measures like boiling water, using cloth for water filtration et cetera. Sanitary pads also fall in a similar category. These are expensive and not the norm by any means. Cloth is preferred over them and for many women learning about their usage is not a very simple matter. People were taught of their advantage and usage during CRP sessions but still most were not using them on a frequent basis.

There was a two-week delay in distribution because procurement and delivery of items was not received on time in the second phase. The latter was due to the large quantity of items that had to be packaged and delivered in far-off areas. This delay was on part of the supplier. The former occurred as a result of the non-availability of good quality WPSs with the supplier. These were only available with a particular vendor in Karachi and a separate order had to be placed for these. Therefore, delay in their order as well as their requirement in large quantity delayed their delivery to the affected districts. Consequently, revised distribution plans were made to accommodate this late arrival of kits and ultimately the distribution of water and hygiene kits which was to be completed by 10<sup>th</sup> January 2012, was in fact completed on 28<sup>th</sup> January 2012.

## **Conclusion**

ERS 2011 phase of the Bahaal Project was initiated with the help of USAID-OFDA to provide relief to the flood affected inhabitants of Sindh. Four of the most severely affected districts were targeted under this phase and relief was provided to them in sectors of WASH and Shelter and Settlements. All project targets were achieved and some were even bettered. With the

exception of delay in the rehabilitation of hand pumps all other targets were met during the given project time. Only previously under-served and un-served areas were chosen for project activities which represented greatest need and ensured maximum impact.

Overall, beneficiaries were better off in terms of having better knowledge of how to tackle health and hygiene issues arising from stagnant water, poor cleaning habits, non-existent sanitation facilities et cetera. They were equipped with hygiene and water kits that not only enabled them to maintain a better hygiene but also increased their resources of provision and holding of drinkable water. Increased immunity to water borne diseases and faster recovery from them was also observed. Some of the recipients were provided items (like tooth brush and dettol) that they had never used before. After witnessing the item's usefulness they decided to make them a part of their routine life. Similarly, the shelter kits also provided the homeless with much needed shelter. The thick water-proof tarpaulin sheets protected beneficiaries from heat and rain and provided their families and livestock a reliable shade. Thus, achievement of all targets meant timely provision of much-needed relief to the affected. It also showed the ability of RSPN and its partners to meet their obligations on time.

This was accomplished on such a massive scale through exemplary support from the donor; a donor that was not only accommodating in its approach but also was very flexible in its operations. Many different activities were incorporated and removed from the project's initial design, based on ever varying needs of the affected populace. In addition, time extensions were provided within the project's framework. All of this was only possible through a very cordial and cooperative role of the donor.

## Pictures

### Sindh Floods 2011



Water on the roads leading to Jhuddo's tehsil of Roshanabad 15<sup>th</sup>-25<sup>th</sup>  
October 2011



District: Tando Mohammad Khan;  
Village: Abdullah Junejo;  
Date: 22<sup>nd</sup> November 2011



District: Nawabshah  
Village: Murad Khaskeli;  
Date: 23<sup>rd</sup> November 2011



District Badin: UC Bhagra Memon:  
Date: 21<sup>st</sup> November 2011

## Assessment



District: Tando Mohammad Khan;  
Village name: Abdullah Junejo  
Date: 22<sup>nd</sup> November 2011  
Village assessed for hygiene kit and hand pump



Above: District: Nawabshah  
Right: Village name: DoDo Khaskheli;  
Assessed for water kit and hand pump  
Date: 23<sup>rd</sup> November 2011



District: Mirpurkhas  
Villages selected for Bahaal Emergency Shelters  
Villages: Allah Ditto, Bux Ali Gsha Hore, Ghulam  
Mohammad, Umeed Ali Jamah;  
Date: 17<sup>th</sup> Oct 2011



District: Mirpurkhas  
Village Pehlaj Khoso selected for Bahaal  
Emergency Shelters villages;  
Date: 18<sup>th</sup> Oct 2011



District Badin: UC Bhagra Memon:  
Village assessed for hygiene kit and hand pump  
Date: 21<sup>st</sup> November 2011

## Procurement



Hygiene Kit and Water Kit Samples  
Pictures taken at NRSP Badin Regional Office on 13<sup>th</sup> Oct 2011



First batch of 1,004 hygiene kits  
received at Jhuddo Warehouse  
23<sup>rd</sup> Oct 2011



Sample checking conducted upon  
receiving project items 23<sup>rd</sup> Oct 2011



District: Tando Mohammad Khan  
Procurement delivery receipt and delivered items  
Date: 25<sup>th</sup> December 2011

## Distribution



District: Tando Mohammad Khan; Village: Faqeer Abdul Wahid  
Water Kit distribution  
Date: 25<sup>th</sup> January 2012



District: Badin Village: Beer Mallah  
Hygiene Kit Distribution  
Date: 23<sup>rd</sup> January 2012



Distribution setup: Bahaal Project items stacked on the right under the project banner. CRP on the right delivering hygiene session. Session attendees sitting with women in the front and men at the back .  
Village name: Allah Ditto; Revenue Village: 367  
Date of distribution 24<sup>th</sup> October 2011

## CRP Sessions



District: Mirpurkhas  
CRP delivering hygiene session outside Bahaal  
emergency shelter; 28<sup>th</sup> Oct 2011



Left; District: Shaheed Benazirabad; Village: Mehr Ali Jamali; CRP: Abu Bakr, Zeenat  
Right; District: Badin; Village: Belchak; CRP: Sana  
Date: 26<sup>th</sup>-27<sup>th</sup> December 2011



District: Tando Mohammad Khan  
Left; Village: Ali Mohammad Masgi; CRP: Gawar Mehri  
Right; Village: Naro Malkoli; CRP: Noor Hussain  
Date: 28<sup>th</sup> December 2011

## Beneficiaries with Bahaal Project items



District: Mirpurkhas

Bahaal Project emergency shelter village; village: 3 Water; 21<sup>st</sup> Nov 2011



District: Mirpurkhas

Left: Sabah sitting with her Bahaal Project Hygiene and Water Kits; village Izzat Khan; 24<sup>th</sup> Oct 2011  
Right: Sabah sitting with her healthy grandsons and granddaughters with Hygiene and Water kit bags: 21<sup>st</sup> Nov 2011



District: Tando Mohammad Khan  
Village: Faqeer Abdul Wahid  
Water Kit items and their beneficiaries



District: Tando Mohammad Khan  
Village: Haji Razi Khan Randir  
Hygiene Kit Beneficiaries



District: Badin  
Item: Rehabilitated hand pumps  
Left; Village: Mohammad Yousaf Mallah  
Right; Village: Mohammad Yousaf Mallah  
Center; Village: Fazal Jatt  
Date: 23<sup>rd</sup> January 2012

## Annexure

### ERS Phase 1 Hygiene Kit item list

Sr.#	Items	Quantity
1	Antibacterial Soap	2
2	Tooth paste	2
3	Tooth brush	2
4	Detergent soap	4
5	Dish washing soap	3
6	Towels	2
7	Comb	1
8	Dettol bottle	2
9	Sanitary cloth/pads/cotton wool	1 (Packet)

### ERS Phase 2 Hygiene Kit Item list

Hygiene kit/household					
S. No	Items	Quantity	Cost/unit	Total cost	Specification
1	Antibacterial Soap	2	40	80	Safeguard, 115 g
2	Tooth powder	2	35	70	Dentonic tooth powder 180 g Ala chemicals Karachi
3	Detergent soap	4	35	140	Sufi soap, 250 g
4	Dish washing soap	2	20	40	Max, 120 g
5	Towels	1	170	170	2ft*2.5ft, cotton
6	Comb	2	12	24	8 " large, good quality
7	Antiseptic Dettol bottle	2	50	100	Rekitt, 100 ml
8	Sanitary pads	1	120	120	Always (7pads) extra large and ultra thin
	Total Cost			<b>744</b>	

**ERS Phase 1 Water kit items**

Water Kit/household					
S. No	Items	Quantity	Cost/unit	Total cost	Specification
1	Jerry can with cap (20 litres)	1	220	220	food grade plastic, min weight 525 g
2	Water Purification Sachet (2 per day)	60	5	300	Proctor & Gamble, 1 sachet for 10 liters, Sachet 4 g

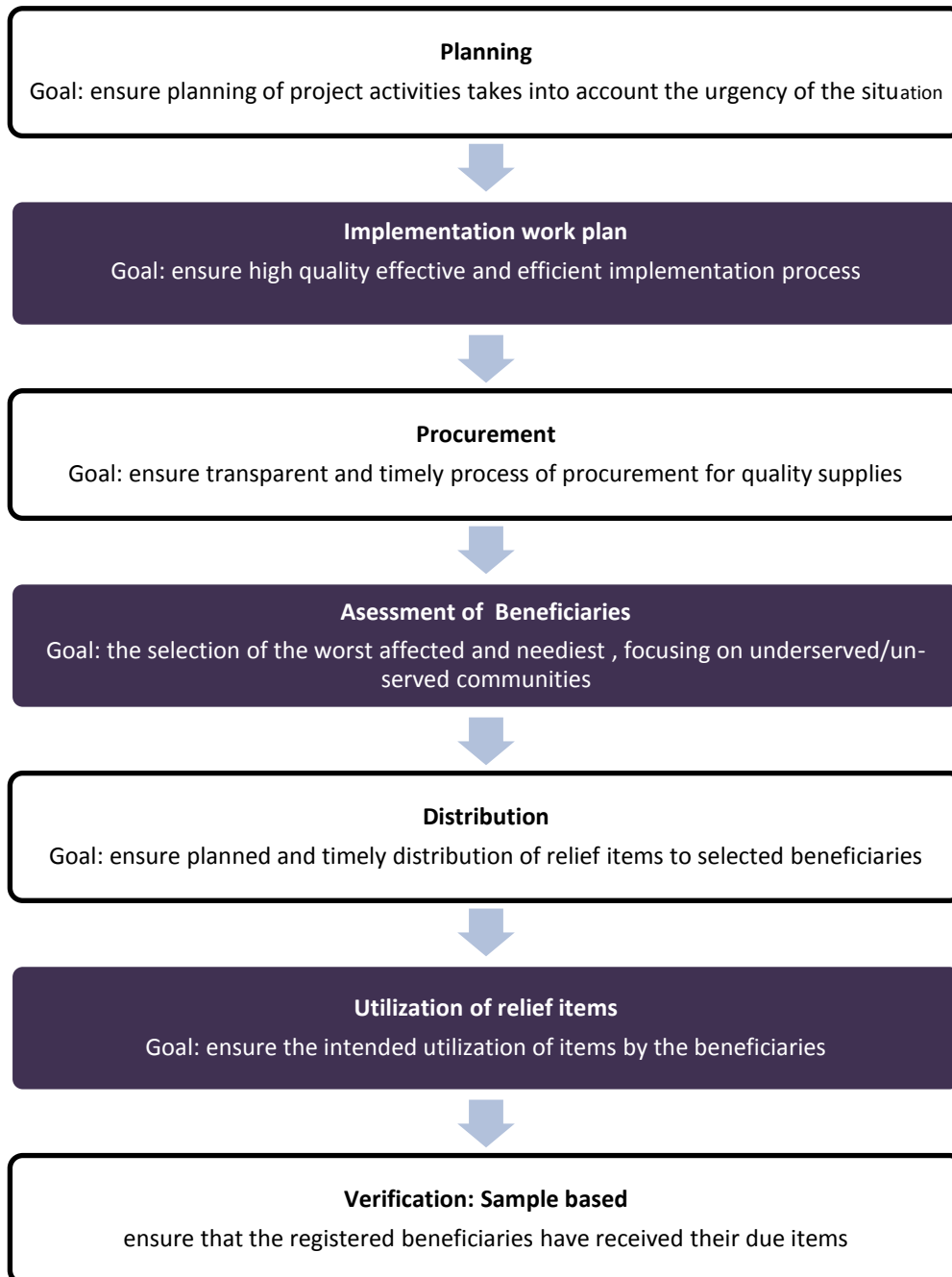
**ERS Phase 2 Water Kit Items**

Water Kit/household					
S. No	Items	Quantity	Cost/unit	Total cost	Specification
1	Jerry can with cap (20 liters)	1	220	220	food grade plastic, min weight 525 g
2	Water carrying bucket (20 liters) with lid	1	150	150	Food grade plastic, good quality
3	Plastic glass	6	15	90	Food grade plastic, good quality
4	Water Purification Sachet (2 per day)	60	5	300	Proctor & Gamble, 1 sachet for 10 liters, Sachet 4 g

**ERS Phase 1 Emergency Shelter Kit items**

Emergency Shelter					
S. No	Items	Quantity	Cost/unit	Total cost	Specification
1	Tumpline	2	2,300	4,600	Tumpline: 12ft*18ft, 12 oz.; water resistant
2	Bamboo poles	8	200	1,600	poles: 12ft*2"
3	Rope	2	275	550	rope 20 m*1/2"

## **MER SOPs**



## Field monitoring report observation

### Annex II: Field Monitoring Report

1. Name of Monitor / Observer:	Bashan Razi
2. Designation Monitor / Observer:	Monitoring officer
5. Visit Date:	23rd Jan 2012
6. Name of RSP	NRSP
7. Name of District:	Badin
8. Name of Tehsil:	Badin
9. Location of Distribution:	Leey Malah village Ul Bhugra Memon

#### Distribution Process – Observations

1. What is the process of Distribution?			
	Good = 1	Adequate (some problems) =2	Poor (major problems) =3
3. How effective is the registration process (does everyone have an equal chance of being registered)?			
4. Do enough registration points made for timely registration?			
5. Is the Registration Venue appropriate overall?			
6. How well the registration record is made?			
Proper date/time of distribution and place of distribution communicated to the registered beneficiary?			
7. Additional Information, issues/ problems (if any)			
8. Suggestions for improvement (if any)			

#### Distribution Venue and Environment – Observations

1. Where is the distribution being held?			
	Good = 1	Adequate (some problems) =2	Poor (major problems) =3
3. Is the Registration accessible to the beneficiaries?		2	
4. How the distribution is managed?	✓		
5. Is the distribution point appropriate for women and children?		✓	
6. Additional Information	Registration was done in villages. Distribution was managed very well but was at a distance from villages.		

**Beneficiaries**

1. How many household provided relief packages during your visit (Own observation)?	Total HHs: <u>30-40</u> . Male: ..... Female: .....			
2. How effective was the beneficiary selection process. Were the most deserving beneficiaries selected (own observation)?	All deserving=1, Some deserving =2, Non-deserving =3 <u>1</u>			
3. How transparent was the beneficiary selection process.	<u>Majority of people from village were selected</u>			
4. Did any registered member fail to turn up, or leave halfway through the distribution process? (check the number of registered members of the date and time and actual present or received)	<u>Not all members turned up. However distributors always lost two days because of this reason.</u>			
5. Details or Additional Information. (if any):				
6. Opinion of the beneficiary (ask randomly selected beneficiary about their satisfaction level):	All satisfied	Mostly satisfied	Few satisfied	None-satisfied
Overall distribution process	<input checked="" type="checkbox"/>			
Quality of the relief package	<input checked="" type="checkbox"/>			
Quantity of the relief package		<input checked="" type="checkbox"/>		
Accessibility of the relief package		<input checked="" type="checkbox"/>		
Any additional Information (if any)	<u>The beneficiaries usually have to wait for a few hours at distribution night because process of distribution takes considerable time</u>			

**Logistic**

	Yes = 1	No = 0
1. Do the District team have a safe place for the stock of relief items?	<u>1</u>	
2. Have they deployed proper logistic in terms of human resource and vehicles etc.	<u>1</u>	
3. Do they have clear distribution Sop <sup>o</sup> in place?	<u>1</u>	
4. Observation/comments	<u>From prior experience in distribution, systems were in place to allow process to run smoothly.</u>	

**Overall Assessment**

	Yes, good =1	Adequate =2	Less than adequate =3	Poor = 0
1. Overall do you think the distribution process was adequate according to the local needs?	<u>1</u>			

ANY OTHER OBSERVATIONS: exceptionally well handled distribution and community volunteers coming in very handy.

**Beneficiary Feedback Form** (To be asked randomly selected beneficiary household/monitoring day)

Beneficiary Name: Yashwanth Kumar UC: Bhogem Hiran Revenue Village: Wafcho  
 Village: Bogem Hiran

A	B	C	D	E	F	G
1. What relief items were provided	Beneficiary (Yes=1, No=2) if no ask about next item if yes ask C-F.	List received items	Quantity received	Usefulness: Essential=1, Useful=2, No Use=3	Quality: Good=1, Fair=2, Poor=3	Quantity: Adequate=1, inadequate=2
1. Clean water kit		1. Jerry can				
		2. Bucket				
		3. Plastic Glass				
		4. Water purification Sachets				
2. Hygiene Session						
3. Hygiene kit		1. Antibacterial Soap	2	1	1	1
		2. Dentonic powder	2	1	1	1
		3. Detergent soap	4	1	1	1
		4. Dish Washing soap	2	1	1	1
		5. Towels	1	1	1	2
		6. Comb	2	1	1	1
		7. Antiseptic Dettol Bottle	2	1	1	1
		8. Sanitary pads	1	2	1	1

**Annex II: Field Monitoring Report**

1. Name of Monitor / Observer:	M. Ali Anis
2. Designation Monitor / Observer:	PMO, Bahawal
5. Visit Date:	21 January 2012
6. Name of RSP	NRSP
7. Name of District:	TMLK
8. Name of Tehsil:	
9. Location of Distribution:	Haja Razi Khan

**Distribution Process – Observations**

1. What is the process of Distribution?	<p>- Beneficiaries stood in a line with their original NICs and tokens.                  - On their turn their token + NIC no. was verified with the beneficiary list with 50 on the distribution desk.                  - After verification thumb impressions of beneficiaries were taken on acknowledgment slips and beneficiary lists.</p>		
	Good = 1	Adequate (some problems) = 2	Poor (major problems) = 3
3. How effective is the registration process (does everyone have an equal chance of being registered)?	1		
4. Do enough registration points made for timely registration?	1		
5. Is the Registration Venue appropriate overall?	1		
6. How well the registration record is made?	1		
Proper date/time of distribution and place of distribution communicated to the registered beneficiary?	1		
7. Additional Information, issues/ problems (if any)			
8. Suggestions for improvement (if any)			

**Distribution Venue and Environment – Observations**

1. Where is the distribution being held?	Village School		
	Good = 1	Adequate (some problems) = 2	Poor (major problems) = 3
3. Is the Registration accessible to the beneficiaries?	1		
4. How the distribution is managed?	1		
5. Is the distribution point appropriate for women and children?	1		
6. Additional Information	<p>This was a relatively small distribution so one point chosen for it was adequate for it. People did not have to wait for long. 10 x 15</p>		

### Beneficiaries

1. How many household provided relief packages during your visit (Own observation)	Total HHs: <u>119</u> Male: <u>119</u> Female: .....			
2. How effective was the beneficiary selection process. Were the most deserving beneficiaries selected (own observation)?	All deserving=1, Some deserving =2, Non-deserving =3 <u>1</u>			
3. How transparent was the beneficiary selection process	<u>It was very transparent</u>			
4. Did any registered member fail to turn up, or leave halfway through the distribution process? (check the number of registered members of the date and time and actual present or received)	<u>No</u>			
5. Details or Additional Information. (if any):				
6. Opinion of the beneficiary (ask randomly selected beneficiary about their satisfaction level):	All satisfied	Mostly satisfied	Few satisfied	None-satisfied
Overall distribution process	<input checked="" type="checkbox"/>			
Quality of the relief package	<input checked="" type="checkbox"/>			
Quantity of the relief package		<input checked="" type="checkbox"/>		
Accessibility of the relief package	<input checked="" type="checkbox"/>			
Any additional Information (if any)				

### Logistic

	Yes = 1	No = 0
1. Do the District team have a safe place for the stock of relief items?	<u>1</u>	
2. Have they deployed proper logistic in terms of human resource and vehicles etc.	<u>1</u>	
3. Do they have clear distribution SOP in place?	<u>1</u>	
4. Observation/comments	<u>The SOs had a good setup but there was <del>ready</del> one issue with the distribution point. They had one <del>area</del> from where people entered &amp; exited crowding the area around the distribution desk.</u>	

### Overall Assessment

	Yes, good =1	Adequate =2	Less than adequate =3	Poor = 0
1. Overall do you think the distribution process was adequate according to the local needs?	<u>1</u>			

ANY OTHER OBSERVATIONS:  
They should setup a distribution point in such a way that where are separate entry & exit points for beneficiaries

**Beneficiary Feedback Form (To be asked randomly selected beneficiary household/monitoring day)**

Beneficiary Name: Ali Ghalam UC: Moya Revenue Village:  
Lali Village: Maji Razi John

A	B	C	D	E	F	G
1. What relief items were provided	Beneficiary (Yes=1, No=2) if no ask about next item if yes ask C-F.	List received items	Quantity received	Usefulness: Essential=1, Useful=2, No Use=3	Quality: Good=1, Fair=2, Poor=3	Quantity: Adequate=1, inadequate=2
1. Clean water kit		1. Jerry can				
		2. Bucket				
		3. Plastic Glass				
		4. Water purification Sachets				
2. Hygiene Session						
3. Hygiene kit		1. Antibacterial Soap	2	1	1	1
		2. Dentonic powder	2	1	1	1
		3. Detergent soap	4	1	1	1
		4. Dish Washing soap	2	1	1	1
		5. Towels	1	1	1	1
		6. Comb	2	1	1	1
		7. Antiseptic Dettol Bottle	2	1	1	1
		8. Sanitary pads	1	2	1	1