

Hearing their Voices:

The Women and Children in the Earthquake
Affected Areas of Pakistan



The World Conservation Union

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1. Introduction

In Pakistan, the October 8 earthquake left widespread destruction in the AJK and eastern NWFP. Many people especially women and children were killed, thousands were handicapped and millions became homeless. It hit hard the already fragile economy of the area with the social service delivery and communication infrastructure being badly affected. Vulnerable groups, mainly women and children living in inaccessible mountain areas with low levels of income and service provision, bore the brunt of the earthquake.

The government of Pakistan and national and international organisations have established camps in the earthquake-affected areas and nearby districts where the affectees have been given tents, food and other relief goods. Other people have chosen to stay in tents near their collapsed houses.

Various assessment reports have been prepared by agencies and organizations involved in the earthquake relief/reconstruction effort but they lack the gender perspective. They are quiet about the hardships, feelings and sentiments of the women and children in these affected areas.

This report provides an insight, through interviews and observations, into the issues faced by women and children. It assesses the relief efforts to highlight the extent to which issues specific to women and children are being addressed in the camps and provide recommendations for their redress. Recommendations for gender-responsive reconstruction and rehabilitation activities will be provided subsequently.

IUCN is the world's largest environmental knowledge network and has helped over 75 countries to prepare and implement national conservation and biodiversity strategies. It is actively involved in natural disaster management, particularly in Asia, and is developing strategies for ecosystem rehabilitation in the earthquake affected areas in Pakistan. It has already commissioned several assessments concerning the affects of the earthquake on humans and nature. IUCN Pakistan initiated this study to get deeper understanding of the issues faced by women and children in the earthquake affected areas so that the organization's future strategies are informed and sensitive to their needs.

Khwendo Kor—a Pushto term meaning 'Sisters Home'—was established with the objective of disseminating and promoting female education in the rugged and dry plains and mountains of NWFP where no developmental work of a similar nature had ever been undertaken. KK undertook this study as a woman's organization practically working in the earthquake area.

2. Methodology

Data was collected from both primary and secondary sources. These include reports and websites of national and international organizations.

An initial visit was made to the earthquake-affected areas in the NWFP and AJK to identify sample areas which were representative of the affected areas. The areas sampled in the NWFP and AJK are mentioned in Annexure A: Areas Sampled.

Extensive detailed semi-structured interviews with women and children to gain an in-depth knowledge of the issues being faced and observations in the field were then carried out (Annexure B: Interview Guidelines for Earthquake Affectees). Interviews with 40 women and 40 children from both the areas i.e. from the NWFP and AJK, were held. Interviewees' were purposely selected to represent different circumstances (i.e. disabled, female-headed families and orphans) and were interviewed in camps, hospitals, schools and tents near collapsed houses.

The facilities available to women and children in the camps were assessed through a simple Camp Assessment Form (Annexure C: Camp Assessment Form).

In order to obtain the most open and honest answers from the interviewees, given the cultural constraints, the survey team comprised of one male and two female members. In the circumstances in which the interviews took place there remained some contextual influences on the way in which the interviewees responded, such as the expectation that we would provide relief goods and the presence, at times, of camp administrators. In order to minimize this effect, efforts were made to interview people in the absence of the administrators and to make observations to check the validity of their claims.

The primary data was then analyzed and the findings illustrated with testimonies representing the real situations and issues faced by women and children in the affected areas.

3. Findings

This section summarises the findings of our research and illustrates them with heart breaking testimonies from the earthquake victims, the women and children.

3.1 Homelessness

After the earthquake millions of people became homeless. In the cultural context of Pakistan and in the earthquake area, it is only the home where women, young girls and children are considered to be safe and secure. The earthquake left them without home and shelter.



Although the government and other organizations responded by providing

tent villages for these people, many families and women felt highly insecure in moving away from their ancestral homes and the familiar environment in which they have spent all their lives (Annexure H: Tent Villages in the NWFP and AJK). They were very reluctant to move to the camps. In Battagram one woman living near her destroyed home told us:

“Tents are something we feel very insecure about, we feel like we are uprooted, we feel like we are without defence, the tent cloth can be ripped through easily, they cannot be locked. I am referring to our young women and girls, particularly during the night. They tell us to move to tent camps for security, what do they mean by security? Also who will ensure that someone else will not take over our houses? They might allocate these to some other people assuming we have all died.”

The women living in camps remain the whole day in their small tents. Their mobility is more limited than when they were living in their villages because the people living in the camps do not belong to one village or area. One of our female respondents said:

“In our villages, we were free to move everywhere. To collect wood, to work in the field, to cut fodder for the animals and to visit our relatives also. In the camps we are restricted to the tents. We cannot move outside the camp

because of the different cultures and also because we are afraid of theft as the tent door can't be locked."

A child expressed the fear he felt during the night when sleeping. He said:

"I fear insects at night while sleeping lying on the earth in the tent because the other day in our camp, an insect entered the ear of a child."

One of our respondents, living in Maidan P 1 and 2 camp in Battagram, originally from Alai told us:

"We are lying on the earth in tents during the night. These are cold days so there is no fear of scorpions and snakes. But when the season changes, we will be at great risk as the area has poisonous scorpions and snakes during the hot season."

We observed that almost no one is giving attention to the women and children's need to feel secure. This insecurity inhibits females from accessing help in all aspects of life.

During our interviews all of the respondents expressed that building a house in their own locality/village is their top priority in the rehabilitation and reconstruction period. One of our respondents at Mansehra in Kashmir Colony camp said:

"In the camps, it is like we are in exile. Building our own houses will mean finding a place to belong to and then one can look for a source of income."

3.2 Environment

3.2.1 Scarcity of Fuel

The temperature in the earthquake-affected areas usually goes below the freezing point and there was a dire need for firewood, coal and heaters to cope with the extremely cold weather. Besides this it was observed that the majority of the people, who have no alternative facilities, usually cut wood from the nearby mountains or use wood from their damaged houses for cooking food.



During the interviews, all of our respondents asked for gas heaters in order to warm water and warm their tents in the severe cold.

Children at Kashmir Colony camp, Mansehra said:

"We are shivering at night due to the severe cold; we need gas or electric heaters, or wood stoves to keep us warm. We feel sick and often have to eat cold food. We are not used to all this and our parents get angry when we ask for things. We cannot bath and even clean our mouths with the cold water available. We miss our warm water and cosy rooms."

Due to the unavailability of gas and electric heating, people have been burning wood, which results in air pollution and may cause dangerous fires. People need low cost stoves with chimneys for smoke emission, not only for cooking but also for heating purposes.

In all areas we surveyed it was observed and also from the interviews it was confirmed, that very little attention is being given to the conservation of fuel aspect.

3.2.2 Scarcity of Water

Scarcity of water was the most common problem seen in all earthquake-affected areas. Everywhere people were demanding water for drinking, bathing and other purposes. Our observation was that the water systems had collapsed, landslides have contaminated rural water sources and the water has become polluted and muddy. Clean water for drinking and sanitation is increasingly becoming the most crucial need. The unhygienic water is causing many epidemics and diseases.

Almost all of our respondents when asked about water and its supply expressed their worries. One of the respondents belonging to Garlot, living in a village tent near their damaged house told us:

“There is a scarcity of water because the earthquake destroyed and dispersed all previous indigenous sources. Beside that there is only one common water supply source, established by some European organisation, from where all the people bring their water.”

One of our respondents in Battagram, village Bata Mori living near their damaged house told us:

“We have a lot of problems while getting water, it is very insecure to go long distances. There are so many strangers roaming around. The already established sources have been damaged due to the earthquake. We do not have even water for drinking and receive water from water tanks but the water is unhygienic. We also lack water for bathroom use.”

Another respondent belonging to Leepa and living in Al Fajir Camp, Gari Dupatta, AJK told us:

“There is no proper and clean water supply. Although Oxfam has established a water tank in this camp and the camp administration has managed to set-up a pipeline, this water is very dirty.”

Scarcity of water coupled with poor or no latrine and drainage systems has made the living conditions of the earthquake affectees very bad. The children are living in very unhygienic environments and are prone to various diseases. In the tents and camps there is no system of warming water for bathing and many women complained that they had been unable to bath for months:

“Due to a lack of privacy and the proximity of the bathrooms to the male bathrooms and a lack of proper covering and protection and due to a lack of proper water supply, most of the women and especially children can't take a bath. There are women who haven't had a bath for the last two months especially the old ones who are much more vulnerable to the cold weather than the young ones.”

3.2.3 Increased Workload for Women and Children

Almost all the respondents, both women and children, said their workload had greatly increased. Men often go to their destroyed houses in order to look after their animals

and to protect the remaining assets. The absence or death of male members of the family means that women are left to cope alone in difficult circumstances.

Small children also share this pressure. A young female child at Al Fajir Camp, Gari Dupatta, AJK told us:

"I bring water from the water supply tank in the camp. I also bring wood and do any relevant work as my mother and elder sisters can not go outside the tent due to purdah (veil) and the unfamiliar environment."

3.3 Loss of Livelihood

Most of the people in the earthquake area depend on agriculture and forestry for their livelihood. Women work long hours in the fields, sowing, weeding, harvesting, kitchen gardening, poultry farming, collecting fuel wood and water, making handicrafts and husbanding livestock. The earthquake has destroyed all these sources of livelihood. In nearly all the earthquake-affected areas we visited, economic life has come to almost a complete standstill. The loss of employment and livelihoods, even for a short period of time, is likely to precipitate a fall into extreme poverty.

3.3.1 Loss of Agricultural Land

Most of the jobs in the affected provinces are in the agriculture and service sector. Landslides and rockslides caused by the earthquake resulted in a large number of deaths and injuries to farmers, their families and their livestock. In the camps we were told:

"We are not able to go back to cultivate the damaged lands. Even the areas where agricultural land is not much affected there is an urgent need to obtain seeds, tools and fertilizers for the upcoming Rabi season; and to restore critical infrastructure such as irrigation systems, farm to market roads, and agro-processing facilities. Due to the earthquake big holes and gulfs have occurred in the lands. Also big stones rolling from near by mountains now cover the cultivatable land. There is no land now for cultivation and agriculture."

When the respondents were asked about what could be done about this problem they said:

"Heavy machinery is needed to remove the huge stones and without their removal we can't restore our lands and our irrigation system to be able to cultivate our own land and begin our normal lives once again. The army is removing stones from the roads only to open these."

We also interviewed a few organizations in this regard and found that no organization was working to restore the agricultural lands even in the safer places. At the time of the study most of the organizations were still busy in the relief work, distributing food and material for shelters.

3.3.2 Loss of Livestock

Women are heavily involved in animal husbandry in the earthquake area. They are responsible for almost everything related to livestock and poultry at the household level: bringing fodder, grazing, milking and so on. These are very important sources of income for them. Cattle, small livestock and poultry are often kept in locally constructed housing or underneath human dwellings. In the earthquake many herds of livestock died as structures collapsed on them; mortality was as high as 100 per cent in some of the worst affected areas.

All of our women respondents told us that they have lost all of their livestock. Some of these livestock dispersed or were killed during the earthquake, while some were sold at very low prices during the move to safer places. As one of our respondents belonging to Balakot in the Kashmir Colony Camp told us:

“During the earthquake, the majority of the livestock died with the collapse of the buildings. While the others which were alive were either sold to the army or other people coming from other areas at very low prices, due to a fear of the livestock dying because of a lack of fodder and shelter.”

The following case study also reflects the importance of livestock to the people in the earthquake.

I lost all my cattle and also my one leg...

Muhammad Mirza, a 16-year old of Adyala Gura, AJK living in Al Fajir Foundation Camp in Gari Dupatta AJK, shared his own experience:

“At the time of the earthquake, as usual, I was in the grassy fields in the mountains grazing my cattle. Suddenly, the earthquake started and due to the landslides from the nearby mountains, I saw big stones rolling down at cruel and high speed, killing and injuring my cattle. The remaining animals ran away in fear and were lost. I was terrified and desperately running after them, when one stone hit my leg and I couldn't move any further. I was lying injured in the mountains for one week before the villagers found me and took me to the village. Luckily, I was taken in a Pak Army helicopter to Rawalpindi CMH, where the doctor cut off my fractured leg. Now I cannot move and also cannot play.”

In the aftermath of the earthquake, there is an urgent need to gather together free-roaming animals and to provide shelter and food for the winter season. Livestock is such an important source of livelihood that some family members, of families who have moved to the camps, have remained behind in very dangerous and damaged houses just to look after their livestock. A woman in a camp told us:

“Some of my male family members are living in the village to which I belong in order to feed and care for the saved livestock. The livestock are also dying from severe cold and lack of fodder. There is no shelter for livestock here in the camps or in our villages.”

3.3.3 Loss of Jobs and Usefulness

Most of the jobs in the affected provinces are in the agriculture and service sector. Much of this employment is in the informal sector, without a social safety net, and is supplemented by secondary income sources (such as off-farm jobs) and remittances. These jobs seldom provide opportunities for savings and only provide sufficient income for subsistence.

There are no income generation sources for the affected people in camps and outside the camps. The people in the camps are only waiting for ready-made rations and other supplies. They said the loss of their traditional work opportunities have made them feel useless. One of our female respondents said:

“We are worrying day and night. We can't go to our fields. We don't know what will happen. We have a lot of needs that we cannot fulfil due to the loss of employment of the male members of the family, as they are the main sources of income. Our men now remain here the whole day because there is no income opportunity for them.”

Another female respondent in Nawaz Sharif Camp, in Mansehra told us:

“We have skills but lack resources. It is most important that we are given some productive resources such as sewing machines and material for embroidery so that we can work and earn to restore back our damaged and weak family economy.”

In the Al Fajir camp at Gari Dupatta, AJK, we got similar responses. A woman there said:

“Kashmiri embroidery is popular all over the world and the majority of our women know this fine embroidery very well. But now due to this disaster, we have no resources to restart our embroidery.”

The relief organizations working in the camps and tent villages visited for this study did not have any income generating activities for women.

3.3.4 Loss of Financial Facilities

The earthquake damaged all infrastructure including banks and other such facilities. There are no facilities now available to people for credit to start a small business or for any other income generation resources. The majority of our respondents told us that they need small loans to restart their indigenous income generation or for a small business in their homes.

One of the respondents living in a camp established by Menhaj Trust foundation Lahore, near her collapsed home in Garlot village in Balakot suggested:

“We need small scale loans so that we can restart our destroyed indigenous income generation activities or start new small income generating schemes, but there is no such facility from which we can get a loan.”

Despite the dismal situation, people in general and specifically the women are full of motivation to stand on their own two feet again, to regain their self-respect and to bring back a sense of normalcy to their own and their family's lives. During our field visit we observed that there was no skill development or vocational training centres for women except in one camp established by Jumat ul Al Dawa, Lahore.

A majority of the female respondents expressed their desire to learn skills in order to help restore their normal life and to improve their livelihoods. As a 17-year old woman told us in Menhaj Welfare Trust camp in Garlot, Balakot:

“The earthquake has destroyed all our income generating sources. I was a school going girl of Metric class. Now because of the discontinuity of education I want to learn some technical or vocational training through which I can help my family.”

A respondent in Garlot, Balakot living in a tent near her collapsed house, who was a primary school teacher said:

“Due to the complete destruction of schools and discontinuity of education facilities in schools we sit idle in camp and it is very difficult to sustain our expenses. Now we need small income-generating sources like sewing and embroidery in camp to fulfil our economic needs.”

3.3.5 Loss of Self-Reliance and Increased Dependency

Besides the loss of employment, it was observed that people have also lost confidence. They lack the confidence to rebuild what took years evolving. The influx of relief aid has also contributed to their increased dependence—they wait for the organizations that come and make promises.



While interviewing a child in the scattered village tents at Shimplai (Bansaire) in Battagram, a lot of people were gathered. During the informal discussion that followed about the problems and needs of the affected people, especially women and children in the area, the councillor of the area remarked:

“Although everything has been destroyed by the earthquake, the promises and things given by relief organizations mean the people have become used to taking things. They have lost their traditional practices of self-help and self-reliance. The people are doing nothing for the whole day and you see them gathering around those who come for surveys or giving relief goods. They are just waiting for things to happen for them.”

3.3.6 Loss of Social Network

One of the widows belonging to Balakot, in Kashmir Colony camp at Mansehra expressed her feeling of being alone as follows:



I wish I had not been left alone...

“I along with my husband was cutting grass in the mountain fields. Suddenly the earthquake started happening and we saw big stones rolling from the very mountain we were on. One of the stones came and struck my husband and I saw with my own eyes his intestine and the kidneys oozing out from his stomach. I rushed madly to my home, leaving him there unattended, to see my children. With the blessing of Allah, all my children were safe...but when I went again to carry my wounded husband back home, I found him covered with big stones and dead... I wept and then removed the stones with the help of other people of the village and carried his dead body. Now there is no one to care for my children and me. I wish that instead of my husband, the children had died. It would have been much better than becoming all alone and bearing all the responsibilities.”

The social fabric is distorted. However, people are rebuilding it, new relationships are emerging giving hope for the future. The following reflects this situation.



Young married couple on their wedding day
(Al Fajir Camp, Gari Dupatta, AJK)

“We had dreams of a grand wedding before the earthquake but now we have married here with the simplicity of death. No spending, as you see, no relatives as none are left except the few survivors here in this camp with us. We don’t have any separate room decorated for our marriage. Only this separate portion of the tent, which has been given especially to us by the camp administration for our marriage. We just can’t imagine this could happen to us.”

3.4 No Education, No Hope

According to preliminary estimates 10,000 school buildings were affected by the earthquake and about 18,095 students and 853 teachers and educational staff died across NWFP and AJK. The death of teachers is no doubt a great loss and will also worsen the already delayed process of education. A large number of teachers and students may also suffer trauma and injuries that may limit their capabilities. We saw many survivors, girls and boys, who used to go to school regularly, now roaming idle. One such middle school girl told us:

“We don’t see the point, education couldn’t save our schools and our teachers and our dear friends, and we miss playing together.”

One challenge will be to locate teachers and to identify those who can act as temporary teachers until new recruitment can take place. In AJK especially, the challenge will be to support the physical institutional rehabilitation and restoration of administrative services in the education department, following widespread damage to government buildings and loss of life of officials and their families. A major challenge to getting all children back to school is to find safe, alternative shelters, with adequate facilities and services, which can be quickly established in very difficult mountainous terrain.

My uncle died in school...

Tuaeeb, a small school going child in Garlot Balakot, said,

“I do not like go to school because in schools the children die as my uncle died in school.”

In the camps we visited, there was no learning and teaching happening even though in almost all camps there is a school for children. There is a lack of interest on the part of the children, the existing teachers and the parents. Now the children have many psychological problems and fears, they are indifferent about their education. The parents of these children are more involved in getting relief goods for immediate needs than thinking of the strategic needs.

3.5 Health

We observed that health problems such as high blood pressure, heart problems, communicable respiratory tract diseases and pneumonia are wide spread among older people and children in the affected areas.

3.5.1 Lack of Health Facilities

As we know most of the hospitals were damaged or totally destroyed in the earthquake. There is a lack of even basic health facilities, including medicine and qualified staff, both inside and outside the camps. There is no special care for women and children. While interviewing women in the Kashmir Colony camp the majority of the respondents told us:

“There is only a tent hospital which is not able to fulfil our needs. There is no female doctor in this hospital and also no special doctor for children. There are no proper medicines, only ordinary tablets like pain killers are provided, the medical staff do not come regularly, they only come two or three times a week.”

In camps the provision of health facilities was found to be relatively better than in the villages where people are living in tents near their houses. We interviewed many such families in Mansehra, Balakot, Battagram and Kashmir. A vast majority of respondents mentioned that the health facilities in their area have totally collapsed and since they are not registered in any camp they do not get any health services.

One of our respondents in Gari Dupatta living in a tent near his collapsed home at a distance from Al Fajir camp told us:

“We have no health facility. And if someone is seriously ill they are taken to the main city (Muzaffarabad) for treatment. The near-by camp has a dispensary for first aid, but we are not allowed in this.”

One of the respondents from a village tent in Batta Mori in district Battagram told us:

“We have no health facilities. The facilities already established have been damaged. The people especially women and children have a lot of diseases. Only one organisation has so far organised a medical camp for one day in the nearby locality, they gave us medicine. Besides that we are not aware of any other health services.”

During interviews we came to know that there are many people both in the camps and from the village tents, who have still not been treated for their injuries from the earthquake. They are either not aware of where to go for treatment or due to the cultural constraints around women, they are very reluctant to go to the hospitals where they would be seen by male doctors and strangers. We also found out that most of these people are treated in their own traditional way at home and many fractured bones have not been properly fixed. As a result of this they are suffering from pain and permanent disability. The elderly, small children and pregnant and lactating women have suffered the most.

Scabies was observed as a common disease in all earthquake-affected areas. At Shimlai & Bansaie in Battagram most of the children said that they have acquired skin diseases. One of the children in this area told us:

“We all have skin problems like scabies. We are scratching our bodies all the time, using combs and other items, with no relief. It is spreading fast among women and children.”

As is the nature of children everywhere, these children were innocent and lively. At the time of the interview the children were giggling while scratching their bodies vigorously.

3.5.2 Disability, Dependency and Fear of Abandonment

One of the heartbreaking facts of the earthquake is the very high number of people, women and men, who became suddenly disabled and handicapped.

The lady in the picture, belonging to Adyala Gujra, living in Al Fajir camp in Gari Dupatta told us:

“I fear in the future I may be overlooked...”

Although my family members look after me at the moment, I fear that in the future I may be ignored. I need a special wheel-chair for the handicapped and also an artificial limb so that I can walk and handle my needs by myself and not be dependent and a burden on others.”



There are serious problems of integration, adjustment, loss of self-esteem and feelings of hopelessness for both fully and partially disabled people. This is especially difficult for women because in this culture they are more likely than men to be socially excluded because of their disability. In addition there is a lack of gender-based data on disability and therefore the help needed cannot be properly assessed. Many disabled women were asking for wheel chairs. We never saw a single wheel-chair and anyway these would not be appropriate for the mountainous areas.

There is a danger that disabled children will fall into perpetual self-pity. Estimates suggest that up to 50,000 children are seriously wounded; many of them will suffer permanent disability. These children may be excluded from education if special educational facilities are not provided.



Among disabled people some have the chance to recover or regain skills through treatment, but there is little or no hope for paraplegics, a condition where the lower half of the patient's body is paralyzed and cannot move. The case study of the woman in the photo reflects the issues of the paraplegic women in the affected areas.



She is totally paralysed...

The woman in the above picture is a paraplegic case in NATO established Mash field hospital Muzaffarabad (AJK). Her husband told us her sad story.

"During the earthquake my wife came out of the home but unfortunately she went to back in to bring out our young baby. Suddenly the house collapsed. She is now totally a dependent woman. She cannot move or do anything. Who will cook for me and for the children as my children are very small?"

3.6 Psychological Trauma

Psychological disorders in women and children are common. Almost everyone said that they were suffering from depression and anxiety. This is something that is not properly understood and addressed.

Memories of Our Loved Ones will Always Remain with Us, They are Part of Us

Over 10,000 children are estimated to have lost either both or one of their parents.

A boy belonging to Garlot village tents, Balakot, established by Menhaj Welfare Foundation, Lahore, while discussing the death of his mother in the earthquake added:

"I have nightmares while sleeping because the memories of the earthquake disaster always occupy my mind."



The small boy in the above picture is sitting beside his mother's grave. He was repeatedly saying:
"My mother died, I cannot live with out her, now who will make me go to sleep in the night...Mother, I really cannot live with out you."

For the women we talked to the memories of their lost loved ones seemed to be always on their mind. In the camp the women visited each other and moaned repeatedly while remembering their dead family members.

The following case studies illustrate the grief the women feel on the death of their family members.



The screams of my dead family are still echoing in my mind...

Resham Jan, an 86 years old lady living near her collapsed house in Lawacee, a small village in Gari Dupatta, AJK, shared her sad story. She told us that *"At the time of earthquake I was in the near by local bazaar buying vegetable, then suddenly the severe shocks of the earthquake jolted the land. All the buildings collapsed before my eyes. Like a mad person I quickly ran towards my home and found my home collapsed. I heard the cries of my family members, who were still alive under the collapsed roof. Suddenly another shock came, which collapsed the remaining part, silencing the screaming of my family members. Twelve of my family members died. I still remember the screaming voices of my family members, which is echoing all the time in my mind."*



Weeping all the time for the loss of my dear son....

This lady is Robina. She has a picture of her son in her hands. She told us: *"I cannot forget my child, who called me Ma Ma... (Weeping). I wish that I had died, why didn't I die rather than my beautiful son."*

3.6.2 Fear

Many mothers told us that their children are always screaming at night and also during the day when there are tremors and after shocks.

"Even now whenever there is a shock the children unconsciously stick to us. They fear even a small jolt. They have lost their confidence. Even now the children scream while travelling in a local bus or vehicle, which would jolt anyway."

They fear insecurity and have many apprehensions about the future:

"Camps are not like permanent houses. Here we are living a stressful life in exile. We are really afraid of the known and unknown things that can happen to us now and in the future"

3.7 Abuses and Exploitation

In addition to immense death and destruction, the earthquake has created and compounded vulnerabilities among the surviving population of women and children.

3.7.1 Domestic Violence Against Women and Children

The majority of the women told us that incidents of wife beating and child abuse are rapidly increasing. A woman told us confidentially:

"Living in tents is very hard. In general there is only one tent per family. There is no longer any privacy for married couples. We cannot fulfil the desires of our husbands because we are living in one tent. As a result tensions are developing and the whole family is suffering from depression."

3.7.2 Psychological and Physical Abuse by the Camp Administration

During the interviews it was found that the behaviour of the camp administration, especially in some of the army camps, is very bureaucratic and very strict. The respondents, especially the children, said they feel as if they are recruits in the army. They were saying that they have to be very disciplined and if they do not obey instructions, they are physically punished. Their only option is to obey what is ordered. There is no space to complain against anything.

In a few of the camps, the children were highly critical of the behaviour of the camp administration:

“On one side, we are living here with distress and on the other side the harsh behaviour of the administration personnel has made us scared. We are even beaten during relief goods distribution. We are frightened of obeying what they tell us.”

While interviewing women in Kashmir Colony Camp, Mansehra, one of the women told us:

“We are threatened by the camp personnel for even a small mistake. We fear a lot due to their harsh behaviour. For example, yesterday they announced that any woman found sitting outside the bathrooms for washing hair or any other purpose, their naked pictures will be taken and published in the newspaper.”

3.7.3 Fear of Harassment:

The camps are not like their previous homes with protective walls and separate rooms. There is one common water supply source; and also both male and female latrines and bathrooms are very close. These are visited by everyone including strangers for various purposes. Women shared their fears with us saying:

“The latrines and bathrooms are at the one corner of the camp, which is away from all the tents. We remain for the whole day in our tents because the people living in the camp and also the people visiting in the camp stare at us. We also feel shy to go to the latrine or bathrooms in front of men because there are no separate and covered bathrooms and latrines for females. We often wait the whole day and wait for darkness to go to the latrines at night. We bear the pain in our stomach for the whole day. Even in the night time going to the latrines is not without fear because of the darkness and lack of security, fear of being raped and kidnapped are also very strong, so we have to take family members along.”

Most of the respondents confirmed and we also observed that in majority of the affected areas, both in camps and also in village tents, there were no separate latrines for females.

3.7.4 Trafficking

In the initial days of the earthquake, many newspapers and reports recorded cases of women and children trafficking. The majority of respondents did not know of any cases. However, a woman belonging from Balakort, living in Kashmir colony camp in Mansehra, told us:

“In the initial days in this camp, when there were few tents, three women and one child were abducted by someone. They are still missing. This has created a fear of women and children moving outside the camp. We don't allow young girls and children outside of the camp due to fear of abduction.”

During informal discussions with different organisation workers in Battagram we were told that abduction cases are happening. While interview women in Maidan camp at Battagram, one of the women belonging to Alai told us:

“A few days ago, when we woke up in the morning we found that one lady had disappeared from our neighbouring tent. Later on we came to know that someone had kidnapped her. Now the army personnel have tightened the security in order to avoid such cases in future.”

Generally it seems that the situation has improved since the early days after the earthquake. One of the respondents told us:

“In the early days, people came from Lahore and other places and kidnapped children and we heard that some women and also children were smuggled to Lahore, but now the situation is better.”

Besides trafficking there are cases of separated children that have been taken by relatives from other villages.

One of the respondents in Garlot living near her collapsed house in Balakot said:

“In our neighbourhood, there were three young girls who were taken by their uncle to Chitral as family members, like his brother and father and mother had died and now there was no one to care for them. They were not compelled or forced but were taken with their consent.”

3.7.5 Child Adoption

In the initial days of the earthquake there were rumours reported by a few newspapers that people are freely adopting separated or orphaned children. However, when asked about this during our field interview, all of the respondents replied that the government, and particularly the army, have stopped such cases from happening. Where children have been adopted it seems to have been by their relatives rather than strangers.

During our field interview in Al Fajir camp in Gari Dupatta, AJK, one of our female team members asked for an orphaned child to adopt. The camp administration called the child's relatives, who were now responsible for their care. The relatives agreed to the adoption on condition that:

“The child is properly cared for and educated like your own children. Then we will agree to hand over the child to you.”

This reflects the apathy of the relatives in caring for the separated or orphaned child and the burden it places on them when they are already struggling to care for their own children.

3.8 Problems Observed in Addressing the Needs of Women and Children

Part of our research was to look at the degree to which current relief efforts were meeting the needs of women and children. It was observed that there was a great coming together of international and national help and food, blankets, shelter and medicine were being provided. However, we observed that there were some shortcomings in the suitability of goods and in their distribution. There are also some serious problems in addressing the needs of women.

3.8.1 Insufficient and Poor Quality Relief Goods

There are still people, especially women who due to cultural constraints and improper distribution of relief goods have still not received any substantial help. During interviews with respondents it was found that although to some extent the people living in organised camps have shelter they still need relief goods like warm clothes, blankets, sheets and above all in the wake



of cold weather snow proof tents and plastics sheet covers for tents during rains, stoves for cooking and warming tents, kitchen kits, kitchen utensils, family kits and other such relief goods. They also asked for warm clothes, underwear, and hygiene kits.

The food given also fails to meet the needs of the people. The women said that they and their families were fed up with the rice cooked every day; they would prefer to cook themselves. It was found that people were not receiving sufficient food and the quality of the food is poor. Above all they would like to prepare the food that they are used to.

One of our child respondents at Kashmir Colony camp, Mansehra told us:

“In the early days we were given good food along with fruits, but now they are giving us food which is not eatable. The tea is like grey water. The quality of food is very poor. We also cannot make our food because in the camp we are not allowed to light a fire due to strict restrictions from the army due to a fear of getting fire in the tents. They have established combined gas stoves, but it is near the tent of security personnel where our women cannot go due to fear of harassment. Besides this the food is not given to us on time. By the time they give us food our hunger is lost. During the night we eat our dinner like cattle, because there is no electricity in the camp and we eat in the dark.”

3.8.2 Disorganised Distribution of Relief Goods

On one hand we found that the earthquake affectees evidently need all sorts of relief help, but on the other hand we observed that a lot of relief material, in the form of clothes, shawls and shoes, were dumped, burnt and wasted. During the interviews we found that the material could not be distributed according to need. The communities



living in remote rural areas are very poor. However, the clothes were thrown in the

area near to the town of Balakot where relatively better off people resided who discarded the used clothes and shoes. Due to this many deserving people did not receive the help sent by people from all over the country.

A woman at a self made shelter, living near her collapsed home in village Lawacee near Gari Dupatta AJK expressed:

“Our village consists of 30 families but the facilities for drinking water, electricity, fuel for cooking the food, food, and medicines are not sufficient and no one has provided us the relief goods although 3 months have passed. Our relatives are helping us who are also very poor.”

Within the camps there was no system in place to ensure the fair distribution of relief goods. The distribution is vulnerable to exploitation by the guards. Guards appeared to be developing friendships with some of the women and children. It is possible that in the future the guards may favour people for whom they have particular sympathies.

3.8.3 Poor Conditions of Sanitation and Hygiene

We observed that the toilets and bathrooms were in a very poor condition. The sanitation and hygiene conditions were very bad, the debris of the destroyed buildings has blocked the drainage and there was no proper sewage system. We heard a lot of complaints during our interviews with respondents in the Nawaz Sharif camp in Mansehra.

“Every one comes and uses the latrine but no one bothers to clean it. Beside that there are only three or four latrines each for males and females in the whole camp.”

The sanitation and hygiene is a common problem in all earthquake-affected areas. During the interview with respondents at Batta Mori, Battagram, a woman said similar things:

“The drainage and sewerage system has been destroyed due to the earthquake. There is no proper ways for the used water as everywhere there is scattered and fallen materials from the houses, therefore the sanitation is very bad.”

Another respondent at Maidan tent village Battagram belonging to Alai said:

“Most of the people belong to rural remote mountainous areas. These people were using open places back in their villages, here they do not know how to use the latrine and how to clean it and there is no proper maintenance. Also the lack of water in the latrines means that most of the time they remain dirty.”

3.8.4 Lack of Special Health Facilities for Females

The health facilities that are provided are not designed to meet the needs of women and children. For example, a woman in a Mansehra camp told us that she needed to remove her IUD because she was bleeding excessively and anyhow her husband was no longer alive so she did not need it any more, but there was no provision for that in her camp. She was very anxious.

According to a UN report: “Fifty percent of the affected married women are pregnant. Both the mothers and newborns are at a high risk of tetanus and septicemia and are not allowed to see male doctors.” However, while some temporary hospitals are well equipped and are provided with all the latest medical facilities their number is negligible as compared to the huge number of women needing the help, especially in the remote and mountainous areas. A majority of our respondents confirmed the lack

of proper care for pregnant women and newborn babies. They said tents are not safe places for delivery or to keep the newborn baby in the severe cold.

She was pregnant and was taken to our relative's house in Abbotabad...

"A few days ago, in our family a pregnant woman was taken to the house of our relatives in Abbotabad because in the camp there were no proper facilities for a delivery or for the new born baby. There is severe cold in the camp. Besides that, due to cultural constraints there is no privacy in the tents. During the delivery, the mother who is very anaemic and gets fits, felt very embarrassed that she had to deliver at a distant relative's houses, which is culturally not acceptable. She thinks that may be she has committed some sin and is being punished by God for that. Her child is also suffering from malnutrition. We don't know if any of them will survive".

Following is one case study from Kashmir Colony camp in Mansehra regarding a pregnant woman who was taken to a relative's house before her delivery in the camp, due to a lack of health facilities for women.

A women belonging to Alai in Maidan camp in Battagram shared her own experiences and the painful story of her delivery. She was crying as she told us:

Delivery in severe cold in tent without attendant...

"I delivered a baby in this tent without visiting any maternity home. I couldn't go even to the dispensary within our camp due to the shame my husband felt about me delivering his baby. He said I mustn't raise my voice while delivering so that no one around our tent should hear my cries due to the labour pains. I had to bear all the pains quietly without any help, no lady doctor and no medicine. My baby is still at high risk of a fatal sickness while living in this tent in severe cold".

3.8.5 Problems Faced in Accessing Compensation Schemes

The government is giving compensation money to the head of the family on the presentation of Identity Cards. However most people lost their identity cards when their houses collapsed. Making new identity cards for females who have no male family member is very difficult, because they are unable to go to the issuing office without a male family member to accompany them. Another issue for some women is that photographs are required and they do not like to have their photo taken by male strangers.

During an interview at Battagram Shimlai and Bansaie, one of the respondents told us:

"I have not yet got the compensation money given by the government because I have lost my identity card in my collapsed house. This is very difficult and due to pardah constraints I can't go to make a new Identity card because my husband died in the earthquake and my children are very small."

4. Conclusion

The cultural constraints prevailing in the earthquake-affected area places hurdles in the way of the current relief attempts to meet or address the needs of women and children. As shown in this report the cultural context for women and children in Pakistan is making it even more difficult, possibly impossible, for women to adapt and rehabilitate themselves in what is already an incredibly difficult environment.

The aspects of this patriarchal system that have been found to have disastrous consequences for women are:

- Violence against women (wife beating, abuse etc)
- No role for women in the decision-making process
- Restrictions on women's mobility
- Strong purdah (veil) system
- Poor female education
- Difficulty for females in accessing their rights
- No freedom of expression for females
- Females not being trusted
- Limited access to resources for women
- Strong opposition to NGOs in the area (before the earthquake)

The restriction on women's mobility and their lack of decision-making power has prevented them from accessing the resources they need and from accessing their rights to compensation. Often they are restricted to their tents and have difficulty even going to the latrine. The horrendous conditions described above, of a woman giving birth in a tent without medical care and not even allowed to cry out because her husband was ashamed, illustrates the terrible consequences that are a result, not only of the earthquake, but of an abusive culture and a failure of relief organisations to address women's needs.

The lack of access to education for women leaves them more vulnerable to natural disasters as they do not have adaptable skills with which to generate income and support themselves. The culture leaves women highly dependent on men for resources, making them vulnerable to exploitation and scared of the future. Female-headed households face tremendous obstacles if they are to support themselves.

Women fear harassment from strangers and there have also been fears of trafficking and inappropriate adoption of children. These fears have become additional restrictions on their mobility but this also does not protect them from the very real danger of domestic violence. Other ways are needed for making women feel secure.

Women have to face all these issues in a disaster situation that is compounded by grief, trauma, loss of livelihood sources, disability and a loss of social support.

However, this is also a great opportunity to address some of the issues that have disempowered women and made them so vulnerable. Previously NGOs were unable to work in some of these areas but following the earthquake the needs of the people are so great that they are welcoming the presence of NGOs. It is important that we take advantage of this situation to bring about real and positive changes to the empowerment of women and children in the affected area.

5. Recommendations for the Case study

5.1 Providing shelter

Immediate actions

- Provision of bathrooms/latrines for women separate from the facilities for men with tolerable or satisfactory hygiene and cleanliness standards. The facilities should be adequately screened to allow women observing *pardah* to feel safe enough to use them at any time of the day or night. In addition, the camp administration should provide some form of support—perhaps even volunteer guards—for women and young girls to access this facility, especially at night.
- Adequate attention to ensuring women's security in the camps. The camp administration should hold awareness raising sessions for the men and women living in the camps about the security measures put in place to protect the women and younger children. This would help the administration in gaining the support of the people in managing these issues in the camps. This may require the support of organisations working on gender issues through training for the camp administration and relief organizations managing the camps.

5.2 Environment

5.2.1 Alternate energy

Immediate measures

- Exploring alternate fuel options to wood including kerosene and gas heaters and stoves. This can be through involving the people in the camp and by the camp administration as well.

Medium to long-term measures

- Training communities in using alternate fuel sources. Rehabilitation efforts should look into introducing tested alternate fuel sources such as biogas and solar energy which would help women save time and the effort of collecting fuel wood and help in conserving forests that could play a more vital role in maintaining watersheds and reducing soil erosion.

5.2.2 Water supply

Immediate measures

- Install small water filtration plants or use water purification techniques at each camp area to avoid the spread of water-borne diseases. Small-scale and inexpensive techniques could be utilised such as sand filtration and water purification tablets. Clean water availability on-site would reduce the problem faced by women of having to carry clean water from a distant source.

5.2.3 Facilitating management support

- Orienting and training the camp administration to manage issues specifically related to women and children and their life in the camps. This includes supporting those without male family members or heads of families and issues related to movement and mobility.
- Devise support mechanisms for women who face difficulty in moving around alone to fetch water, collect fuel wood, and use latrines and bath facilities. This would also address the problem of increased work load on the younger girls/boys of the family who have to bear the brunt of taking on work outside the home.

5.3 Restoring Livelihoods

Short terms measures

- NGOs and organizations to explore alternate sources of livelihoods for families living in camps, particularly those involving women and children. Options such as sewing, knitting, embroidery, producing small home-based items such as flower vases and toys could be explored. These products could fetch money for the women and their families.
- Young men and women can be involved in a number of services for the camps for which they could be paid.
- Organizations working for relief and rehabilitation to look into options for vocational training of young girls and women living in camps. This could include traditional training in sewing, embroidery and related craft. Those among the affected women who already have these skills could be hired as trainers, providing a source of income for them. Also training in some non-traditional skills such as literacy or even computers could be imparted to the women providing them with opportunities for new avenues of work when they are finally settled, in many cases, in new places.
- Special attention needs to be paid to disabled women and suitable vocational training needs to be arranged for them.

Medium term measures

- Organizations working in relief and reconstruction work in the earthquake areas should develop a formal plan of action to restore the livelihoods of the people.
- Restore land that could be used for agriculture and help people who were engaged in farming to resume their work through the provision of seed, water, manure and related resources. These organizations could also work with the government and other agencies to restore agricultural lands by removing boulders and stones that have rolled down the mountainsides and any related debris.
- Besides agriculture, provide options to restore the livelihoods of women who, previously, were extensively involved in managing livestock and poultry. Extend microfinance schemes—working with banks/organizations that are already engaged in this work in other areas/provinces—to communities to assist them in rebuilding their livestock herds and poultry flocks. However, care should be taken in the allocation of such loans, as many times it leads to livestock herd sizes beyond the carrying capacity of land, leading to problems of overgrazing and desertification. It would be worthwhile to engage both women and men of the households in the loan facility so that increased family ownership is developed and repayment ensured.

5.4 Strengthening Social Networks

- The camp administration and the relief organizations need to look into ways and means to increase interaction between people living in the same areas in the camps. It was observed that people coming from different areas were reluctant to mingle with each other due to security fears and cultural barriers. Involving people living in the camps in diverse cultural, educational and recreational activities—such as games, traditional music, theatre, lectures on topic such as health, hygiene, education and the environment—would increase familiarity, interaction and social bonding. It would also help in providing support to people who have lost the majority of their family members.

5.5 Realising the Educational Values

Short term measures

- Most of the schools set up in camps work on the models used in formal schooling. However, there is a need to see a broader role of schools as teaching and learning centres, beyond the given curricular boundaries.
- Encourage teachers to work as facilitators in order to cater to the needs of the affected children. Emphasize more on teaching methods which involve discussions, debates and group work that focus on sharing experiences of students who passed through the trauma rather than on just teaching traditional subjects which may not interest students in these far from normal situations. This would require involving students actively in their own and peers' learning through dialogues and debates on issues, aspirations and the role they could play in achieving what they want.
- Spend considerable time in vocational training (based on locally useful skills) which could enable students to support the family in sustaining livelihoods during residency in the camps and when they return back to their homes.
- Give special attention to students with disabilities. Their morale and motivation should be kept high through their involvement in activities and vocational training whereby they could engage in productive work for themselves and their families.
- Besides schools for children, initiate separate literacy programmes in camps for men and women that involve reading, writing as well as vocational training based on their needs, particularly catering to disabled men and women. These programmes should also engage men and women in sharing their experiences in camps and help them resolve issues on a self-help basis.
- Special focus on facilitating people to overcome their trauma and relieve their stress.

Medium and long term measures

- Government agencies and other organizations involved in rehabilitation work to ensure building earthquake resistant structures for schools. Give special consideration to the needs of female students, particularly in locating the schools near their homes and provision of other necessary facilities in them.
- Re-design the curriculum and pedagogy to be used in these schools/educational institutions according to the new needs of the area. Particular emphasis is required on themes such as natural disasters preparedness and management, natural resource conservation and environmental management, sustainable livelihoods, role of men and women in addressing emergency situations and overall education for sustainable development.
- Ensure that pedagogical processes emphasise inclusive education (whereby disabled students, with their specific needs, are also catered to in the same classes).

5.6 Health

- The camp administrators/ organizations providing relief to help facilitate health surveys of the camp inhabitants as well as those living in nearby villages, particularly women and children. Provide basic health facilities to people who have not received these due to direct injuries in the earthquake, those who developed diseases post-earthquake due to sanitation and other problems and also special cases such as diseases related to women, young girls, expectant mothers and children. Assist in providing emergency help to people in need. Facilitate female medical staff to increase the comfort level of women to access health facilities.

5.7 Support to Disabled People

Immediate measures

- Collect gender disaggregated data on disabled people in the wake of the earthquake. The government or some reputed organization should take up this exercise immediately. This would help in planning measures for such people in terms of their education, vocational training, psychological therapy and social adjustment, particularly women and children, who are more vulnerable in this situation.

5.8 Recreational Activities

Immediate measures

- In the state of tension and stress of living conditions not suitable for families in the camps, the camp administration/relief organizations should consider involving men and women in constructive activities such as helping in camp management, involvement in vocational training, searching for and involvement in alternate livelihoods. This would provide positive and productive activities for people that could help them address their frustrations till such time as they could find a permanent settlement for themselves.

Medium and long term measures

- In the long run these programmes should be part of trainings offered by various civil society organizations to prepare relief workers involved in natural disaster management.
- Additionally, disaster management courses which are planned to be offered in universities in general, and particularly in affected areas, should look into people management and psychotherapy, besides immediate relief services.

Annexure A: Areas Sampled

Area/Region/ Tehsil/District	Names of Camps	Names of Schools	Shelter/tents near Collapsed Houses	Names of Hospitals	Organisation	
NWFP	Mansehra	1. Nawaz Sharif 2. Al Dawa 3. Kashmir Colony 4. Al Dawa	1. Al Dawa Tent School 2. Kashmir Colony Tent Village School		1. Al Dawa Camp Hospital 2. Cantt. Field DHQ Hospital Mansehra 3. Women and Children Hospital Abottabad	1. Sungi Development Organisation, Abbotabad 2. ICRC 3. Acted France NGO
	Balakot	1. Pathan 2. Menhaj Welfare Trust	1. Menhaj Tent Village School	1. Menhaj Welfare Trust, Lahore	4. Spain Red Crescent Hospital, Pathan Tent Village	
	Battagram	1. Pandian 1 & 2	1. Shimali Tent School	1. Battagram City 2. Batta Mori 3. Shimlai & Bansaire		1. Women Online, Battagram
A J K	Muzaffarabad city				1. Turkish Red Crescent Hospital, Muzaffarabad 2. Mash	1. UNHCR, Muzaffarabad 2. WFP Muzaffarabad 3. IOM Muzaffarabad 4. UNICEF Muzaffarabad
	Gari Dupta	1. Al Fajir Camp	1. Al Fajir Tent Village School	1. Lawcee village	1. Al Fajir Tent Village Hospital	

Annexure B: Interview Guidelines for Earthquake Affectees (Women & Children)

Camp name: _____

Name of Agency/Organisation Administering the Camp: _____

Personal Information:
1. Personal information – name, age, sex, education, level of education, social status (married or single):
2. Name of your village? Union council, Tehsil, Distt:

SECTION A: EARTHQUAKE HISTORY

1. Pre-Earthquake History:

1. Number of family members before the earthquake?
2. What was your family occupation?
3. Family income?
4. Any other related questions?

2. During the Earthquake History:

1. What were you and your other family members doing during the earthquake? (write in detail)
2. What happened to you, your home and your family?
3. Have you or any of your family members got any injury?
4. Any loss to you? Family members, property, house etc?
5. How and who rescued you?
6. Any other questions: Ask question after question in detail?
7. Have you got any first aid (Medication)?
8. Who gave you medication?

3. Post Earthquake History:

1. How and who brought you to this camp?
2. What relief goods have you received?
3. Any other related question?

SECTION B: LIVING IN THE CAMP & ITS PROBLEMS

A. Immediate problems:

1. Have you received any relief goods e.g. shelter/tent, blankets, sweaters etc?
2. Are you satisfied with it?
3. Is there any problem to you in the camp while getting relief goods?
4. Are you receiving food? Properly or not?
5. Any other related immediate problems in the camp?

B. Health Facilities (ask in detail):

1. Are there proper health facilities in the camp? Like x-ray, ultrasound and like other facilities.
2. Any communicable disease in the camp? Any other common diseases?
3. Any diseases of the children, young adult girls, aged women etc?
4. Is there MCH (Mother and Child Care Centre) in the camp?
5. Are there any female doctors for women and for the children?
6. Are there patients with serious diseases/illness and special care for them like patient with diabetics, high blood pressure, heart problems etc?

-
7. Are there any other trained TBA or L.H.V., L.H.W in the camp?
 8. Is there any ambulance in the camp in case of an emergency?

C. Health facilities and needs for special women:

1. Is there any special health facility (gynaecologist, trained TBA) for pregnant women?

D. Education facilities in the camp:

1. Is there any school in camp? Primary, Middle, High?
2. Where are the displaced young high school and college going girls and boys going to school?
3. Facilities in the schools like books, teachers, seating etc?

E. Special Problems of Women & Children:

Female children

- Ask about child trafficking, camel jockey, child abuse, orphaned, separated, psychological trauma in children

Adult girls

- Fear of harassment, rape, trafficking at camps, at water places (taps) and at the latrines
- Artificial limbs for handicapped, psychological trauma,
- Social adjustment of handicapped or paraplegic young girls
- Single mother families – who is supporting them
- Young girls – especially with no mother (a) kidnapping
- Exploitation for relief goods

Married women

- Any fear during visiting latrine
- Fear of rape etc
- Fear of being divorced, ignorance

Older (aged) women

- Any diseases, heart, blood pressure etc
- Adjustment in camp

F. Violence: domestic violence due to trauma

- Psychological trauma of children, pregnancy, any obstruction
- Spouse life affected or not?
- Interfamily relations?

G. Special problems of children:

- Child abuse, trafficking, education, child labour, any other problem

H. Special problems of handicapped:

Problems of:

1. **Handicapped women (married)** (fear of divorce, fear of husband's second marriage)
2. **Handicapped children** (psychological, cannot play, cannot go to school) Is there any facility for special education)
3. **Handicapped young girls** (social adjustment, fear of ignorance, no marriage etc)
4. **Handicapped men** (social adjustment, not capable of earning, burden on family)

I. Income generation sources:

1. Earning sources female (who have lost their male or with no male)
2. Earning capacity now in the camp
3. Earning capacity after rehabilitation and reconstruction

J. Access to water

1. Easy access to water, supply of clean-drinking water (hygiene)

-
- Who provides it? Is it sufficient or not?
 - Any fear during water filling?

K. Access to food

1. Access to food (easy or not)? Who provide food? Sufficient and balanced diet or not?
2. Any exploitation for food or difficulty?

L. Sanitation facilities

- Latrines & Bathrooms: Separated for male and female?
 1. Latrine usage: how?
 2. Conditions of latrine
 3. Maintenance
 4. Cleanness of latrine

M. Personal hygiene of women and children:

1. Clothing (dirty, clean), where washing clothes? Hands of the children, Scarcity of place & water (for bathing etc)

N. Insecurity and Fear:

- Security of women in camps, hospitals, relief centres, while attending latrines
- Fear at tents when male members or not in tent?
- Fear due to living in close proximity in tents?

SECTION C: NEEDS OF WOMEN & CHILDREN

1. Relief goods got are sufficient for your family or not?
2. Your needs are properly addressed in this camp?
3. What do you need more or expect to get any more? Any other need like Utensil, stove, sewing machine, bed sheets, plastic sheets, fire woods, etc
4. Write in detail about needs of the women and Children?
5. Do you need any cash amount for daily expenses/buying commodities?

a. Tents village/ camps Issues:

- Commercial & for donor funding purposes

b. Live Stock:

- Shelter for livestock
- Fodder for livestock

SECTION D: LONG TERM: PROBLEMS & NEEDS:

[Rehabilitation and Reconstruction Period]

[Assessment of needs and problems of women and children, which are specially to be considered for them during rehabilitation and reconstruction period]

1. Do you have any skill?
2. Do you have any income generation opportunity in this camp?
3. What do you need and any problems for long term adjustment?
4. Beside house, what other things do you need to be done for you in the long term?
5. What specially should be done for you in rehabilitation and reconstruction period?
6. **Expectations of the people to be specially addressed for them during rehabilitation and reconstruction period (write in detail)**

Annexure C: Camp Assessment Form

IDENTIFICATION:

Name of the Camp: _____ Administered by: _____
Established by: _____ Establishment date: _____
District/ Region Name: _____ Union Council: _____
Total Number of families in the camp: _____
Total Population of the camp: _____
No. of Females: _____ No. of Children: _____ No. of Males: _____

The following points are important to be considered and observed:

1. Camp: who are the administrators (e.g. Army, NGO etc)?

2. How well is the camp organized?

3. What is the sanitation and hygiene situation in the camp?

4. How is the water supply and cleanliness?

5. Are there any bathrooms, latrines etc. ?

6. How are the following facilities in the camp:

Electricity _____

Schools _____

Hospitals _____

Any other _____

7. Do the people have access to food, medicines, other requirements

8. How many families, women, children and men are there in the camp

9. What number of handicapped people are present in the camp?

10. What are the daily activities of the people in the camp:

11. How is the personal health/hygiene of women, children and men?

12. Is the camp provided with a security system?

13. What is the status of camp school?

14. Are there any infectious diseases prevailing in the camp?

15. What is the reaction of women to people from outside the camp?

16. Are there any observable threats to women?

17. How is inter-relation of the people (families) in the camp?

ANY OTHER GENERAL OBSERVATION

COMMENTS OF THE OBSERVER:

Annexure D: Total Cost of the Earthquake Relief and Rehabilitation work

Category wise Cost		
Category	Million (US\$)	
Relief Work		1,092
Death and Injury Compensation		205
Early Recovery		301
Restoration of Livelihoods		97
<i>Reconstruction</i>		3,503
Short term Reconstruction	450	
Medium/Long term Reconstruction	3053	
Total		5,198
Sources:		
1. Relief, Death and Injury Compensation and Early Recovery -UN Agencies		
2. Reconstruction and Restoration of Livelihoods - ADB/WB Assessment Team		

Source: As reported by UN Agencies Recovery Needs Assessments and ADB/WB Preliminary Damage and Needs Assessment, November 2005.

Annexure E: Casualties

District-wise Detail of Earthquake Victims (Dead/Injured) in NWFP		
District	Deaths Confirmed	Injured Confirmed
Mansehra	24511	30585
Battagram	3232	3279
Shangla	423	957
Abbotabad	515	1730
Kohistan	661	639
Swat	7	88
Peshawar	3	9
Buner	7	28
Charsada	0	22
Mardan	1	33
Nowshera	0	2
Total	29360	37372

Source: Government of NWFP

Annexure F: Overall Damage

Table No. 1 District Wise Detail of Overall Damage

SR No	District	Total No Of Villagers	No Of Affected Villages	Causalities		Number of Buildings Damaged											
				Dead	Injured	Pukka Houses		Katcha Houses		Medical Facilites (Hospital,BHU's, RHC's etc)		Educational Institutions		Other Government Buildings		Miscellanouse Structurs (shops,Mousques etc)	
						Complete	Partial	Complete	Partial	Complete	Partial	Complete	Partial	Complete	Partial	Complete	Partial
1	Neelum	88	24	447	1013	50	120	3642	7095	0	9	0	75	0	2	0	0
2	Muzaffarabad	583	583	33724	21374	38562	6790	69595	10330	103	DNA	929	DNA	77	89	5945	1690
3	Bagh	231	231	8157	6644	17405	5048	30214	13178	49	40	511	240	186	76	DNA	DNA
4	RawlaKot	122	122	1025	1909	3872	7906	11214	17499	16	19	125	275	78	71	57	154
5	Sudhnoti	60	55	4	16	19	294	410	1425	0	2	1	54	0	0	0	DNA
6	Mirpur	229	0	6	11	0	0	0	0	0	0	0	0	0	0	0	2
	Total	1313	1050	43363	30967	59908	20158	115075	49527	168	70	1566	644	341	238	6002	1846

Source: Compiled by Government of AJK, dated: 26-10-2005

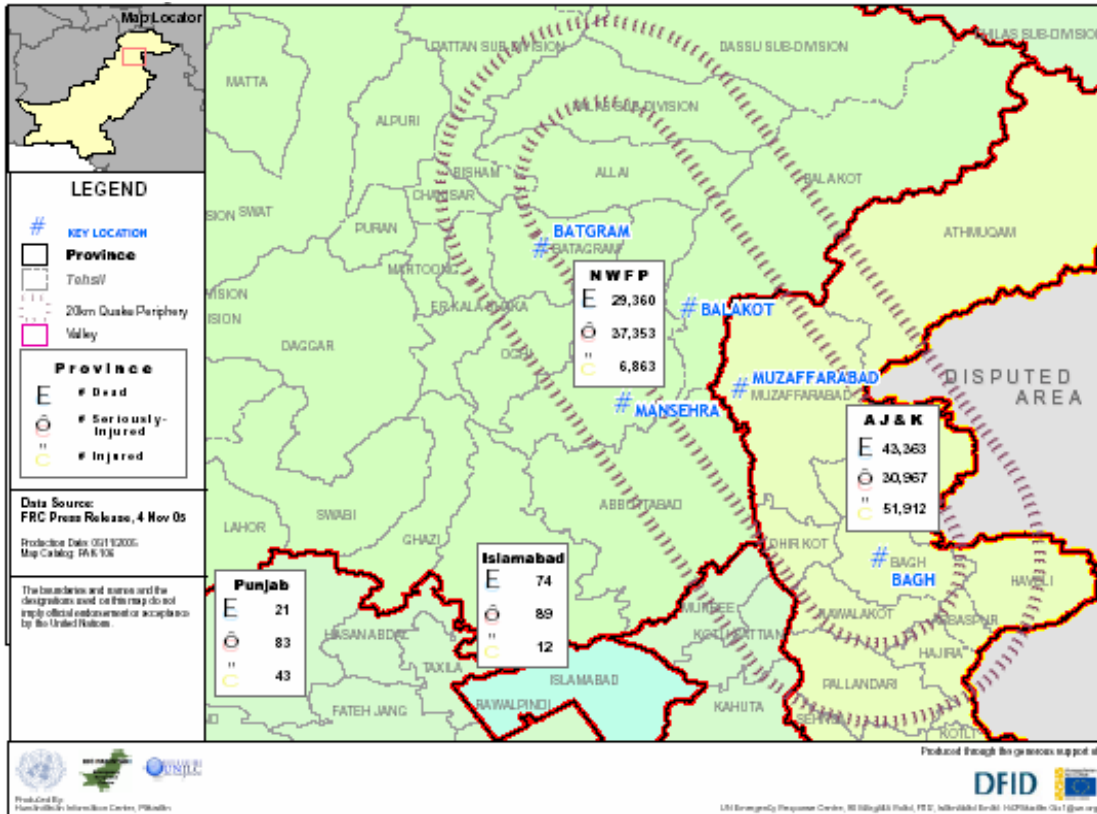
N.B.

DNA=Data Not Available

These figures are not 100% accurate and will keep on changing as fresh data keeps pouring in, but variation may not be more then $\pm 5\%$

However for Muzaffarabad city only, it could be $\pm 10\%$

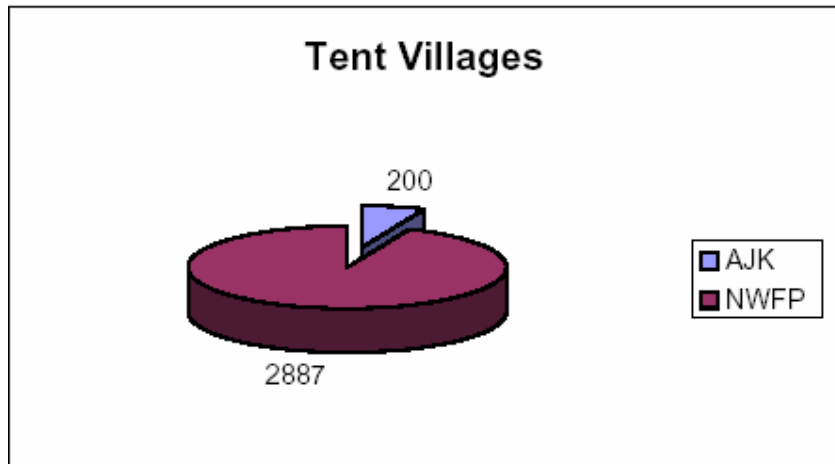
Annexure G: Map of Most Affected Area by Earthquake



**Annexure H: Tent Villages
(Installed by Government in NWFP & AJK)**

S. No	Location	No of Tents	No. of Persons Accommodated
	NWFP		
1	Nawaz Abad	16	
2	Bassian	402	
3	Hassa	257	2530
4	Jabri	70	
5	Balakot	25	
6	Bahli	3	75
7	Jabrr	11	132
8	Deoli	17	112
9	Battgram	30	64
10	Shamlai	58	28
11	Khashtra	300	
12	Shawaal	50	446
13	Bhanphora	8	
14	Garlat	8	50
15	Qadara Bad	10	
16	Bahjur	15	22
17	Sachan Kalan	10	8
18	Khrud	6	6
19	Dudr	10	8
20	Garhi Habib Ullah	400	11825
21	Traira Sayyadan		78
22	Munda Gucha	20	
23	Deedli	20	118
24	Khaira	30	132
25	Mohri	36	225
26	Jabbar Gali	35	
27	Cahppra	42	265
28	Kalsi	22	
29	Jasar	37	
30	Johcha	42	
31	Jasori	54	
32	Kolegah	5	26
33	Dadar	12	12
34	Bogharmeng	5	
35	Sahmiai	100	
36	Sarosh	20	
37	Rain	21	120
38	Shuhal Najaf Khan		100
39	Jigan	63	
40	Tari Banda	8	
41	Mang	25	105
42	Bhajuri	15	
43	Jigan	25	
44	Malkal Gali	49	
45	Rangeen Abad	30	
46	Vill Hill	50	
47	Bamori	30	10
48	Jasoi	15	10
49	Khang	32	30

50	Rashang	19	33
51	Pahsto	42	44
52	Bano	7	14
53	Bhogarmang	5	4
54	Mang	87	800
	Azad Kashmir		
	Muzaffarabad	200	



Source: www.presidentofpakistan.gov.pk
www.nwfp.gov.pk

Note: Total No of tents erected by Government in NWFP = 2887
Total No of tents erected by Government in AJK = 200

Annexure I: Key Impacts of the Earthquake

Indicator	Latest Estimate	Sources
Area affected	30,000 sq km	FRC*
Population affected	Between 3.2 million and 3.5 million	FRC
Deaths	73,000	FRC
Injured	79,000	FRC
Houses	400,153 (damaged and destroyed)	ADB/WB
Families affected	500,000 (seven persons per family on average)	UNOCHA
Number of food insecure persons	2.3 million	WFP/UNICEF
Latrines needed	160,000	UNICEF
Number of school children affected	955,000	UNICEF
Number of women affected (age 15-49)	800,000	UNFPA
<p>Sources:</p> <p>1. <i>Pakistan 2005 Earthquake, Early Recovery Framework (With Preliminary Costs of Proposed Interventions)</i> by United Nations System, Islamabad, Pakistan, November 2005</p> <p>2. (http://www.reliefweb.int/rw/rwb.nsf/db900SID/RMOI-6J89V9?OpenDocument)</p> <p>* Federal Relief Commission of Pakistan</p>		

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