



EARLY NEEDS IDENTIFICATION (ENI)

Balochistan's flood affected districts of Jhal Magsi,
Lasbela, Qila Saifullah and Nushki

Conducted by

International Rescue Committee (IRC) and
Medical Emergency Resilience Foundation (MERF)

August 2022

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ACRONYMS

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

1. EXECUTIVE SUMMARY

This Early Needs Identification (ENI) exercise was jointly conducted by the International Rescue Committee (IRC) and Medical Emergency & Resilience Foundation (MERF) in four districts, i.e., Jhal Magsi, Lasbela, Qila Saifullah, and Nushki of Balochistan province. The ENI was carried out in the first week of August 2022, in which both the primary and secondary data was collected with the purpose to provide a quick overview of the humanitarian situation by identifying the immediate and evolving basic needs of vulnerable population dwelling in the flood affected areas of Balochistan. The ENI provides a base for developing a response plan for addressing the needs identified on the ground. For primary data collection around the most recent situations, a total of 40 Key Informant Interviews (KIIs) were conducted with the local key informants (both men and women), representatives of NGOs/INGOs/UN agencies and government departments. The secondary data was collected from the national and provincial disaster management authorities and other humanitarian agencies. The data thus generated from the primary and secondary sources were triangulated to identify the priority needs of the target population and availability and access to basic services.

The current monsoon spell that started in the second week of July has caused widespread flooding and has led to extensive human and infrastructure damage across many parts of Pakistan. According to the National Disaster Management Authority (NDMA)' Monsoon Situation Report on August 07 1, 571 people died and 922 got injured in the country. Around 49,991 houses were damaged (including 39,481 fully and 10,510 partially damaged). In addition to this around 2,813 KM road infrastructures vanished, 119 Bridges collapsed, many shops have been destructed and 25,000 animals died. Balochistan has been most adversely affected by the heavy rainfall in Pakistan. The Provincial Disaster Management Authority (PDMA) Balochistan reported 166 Deaths and 62 severely injured. Around, 30,000 houses have been damaged. Moreover, 670 KM of road infrastructures vanished, 16 Bridges collapsed, 600 schools damaged and 23,013 livestock perished in the province. PDMA also reported that around 500,000 acres of crops were damaged in the province.

Furthermore, IRC's ENI report findings help to understand the impact of floods on vulnerable groups including but not limited to women, adolescent girls, children and persons with disabilities. It also helps to identify health, protection, WASH, shelter/NFI and other basic needs of affected population in targeted districts/province. The IRC Pakistan through its local partners has been responding to the emergency needs of the people at the ground level since the onset of the emergency, and ENI will help to inform IRC's flood response plan. Following are the ENI key findings.

Health: Overall, 30% to 40% respondents mentioned inaccessibility to health services (43% in Jhal Magsi, 40% in Lasbela, 35% in Qila Saifullah and 35% in Nushki). The remaining people access the nearest health care services including BHUs, RHCs, Civil Dispensaries, THQs and DHQs. While assessing the prevalence of major health concerns, Diarrhea, Skin Infections (scabies), Gastrointestinal illness and other diseases are reported as most prevailing diseases by the respondents. Furthermore, a significant increase was reported in diarrhea occurrence than usual reported highest percentage of the respondents (52%), followed by an increase in skin infections and Malaria with 37% responses for each, Cough (25%), High temperature (21%), dengue with 5% response rate. Besides this other increase was also reported in feces/stool worms and others.

WASH: Overall 71% of the respondents reported that affected communities don't have access to sufficient and clean drinking water in the current situation. Regarding safe access of women and girls to toilets, 87% reported that women and girls don't have safe latrine facilities while 13% have somehow safe toilet facilities for women and girls. Overall, 84% respondents reported that women and girls don't have access to women and girls' specific

1 <http://cms.ndma.gov.pk/storage/app/public/situation-reports/August2022/PWjO0uBRtoIYFXHpRrvd.pdf>

hygiene supplies in the current situation. The respondents mentioned that due to the unavailability of hygiene supplies, people are facing difficulties in ensuring personal hygiene, particularly women, girls and persons with disabilities and older people.

Safety: The majority 60% of the respondents reported that in current situation members of community are not at all feeling safe, 30% ranked it not so safe, and 3% were of the view that community is feeling relatively safe while remaining were not aware of that. Respondents who reported not safe were further probed for the reason, half of those reported that they are having life threats due to continuous rain, 20% reported community conflicts, followed by risk of harassment with 5% response rate and violence with 3% responses.

Vulnerable groups: According to the ENI data, pregnant and lactating women are highly vulnerable as reported by 63% of respondents, followed by women and adolescent girls (reported by 55% respondents) children, persons with different abilities, persons with chronic illnesses and minority groups.

Protection: Overall, 65% respondents were of the view that protection concerns increased very significantly in current situation in the area, 9% reported significant increase while 13% said that protection-related concerns neither increased nor decreased but remained same in the current situation. The remaining 13% were not aware of that. The ENI found that the respondents pointed out several protection issues in the communities. Among these the top mostly reported issues are No access to information due to communication barriers, no access to other essential services, no access to health services, Psychosocial trauma, stress, and anxiety, Labor force / economic exploitation, and discrimination. Respondents were further asked to enlist the protection issues which affect women and girls in the community. Major protection issues reported, including lack of proper shelter facility and security in the area, no access to information and communication barriers faced by women, violence and/or abuse with the family or household, and Psychosocial trauma. Likewise, women and girls, and children are also a marginalized group and are exposed to protection-related issues. Further, there is a risk of increase in child labor accounted for 43% of responses (highest in Jhal Magsi), violence against children and no access to education accounted for 18% each (highest in Killa Saifullah), child abuse with 14% response rate (highest in Nushki).

Education: Around 38% respondents reported that government schools are available, followed by Madrassas (27%) and private schools. 9% respondents reported availability of any NGO-supported schools in the local communities. At the government level, respondents noted that 100% of school children are at home as after floods the schools are closed and currently the children are not going to school. Respondents who reported availability of education facilities in their area were further probed if children have access to and/or going to school after floods in their area. Overall, 72% confirmed access of children to school while remaining 28% said that children are not going to or have no access to available education facilities due to lack of remedial support at home or otherwise, damaged school buildings, limited schools in the area, far distance, child engagement in labor work, protections risks, debris in school building, limited enrollment capacity in available schools and socio-cultural barriers.

Economic Wellbeing & Food Security: The stored food is wasted and also the livelihood is shattered, markets are closed or not fully functional and the families became highly vulnerable to food security and livelihood issues. Families are displaced due to damages to their homes and the crops are damaged/flooded away during this disastrous situation. 98% respondents reported that the affected people face problems in getting sufficient food and other basic needs for their families. The data show that the situation is almost same in all districts except Qilla Saifullah where 90% of respondents reported this issue. The field findings indicate regarding changes in total amount of food consumption since flood disaster, 68% reported that it has decreased, 5% reported that it has

increased while 28% reported that they don't know about any such change. Overall, 61% of respondents reported that local markets are functional and somehow accessible to affected population. However, around 39% of respondents were of the view that local markets are not functional or accessible during these days. Negative coping mechanisms included selling of assets (reported by 43% respondents) followed by domestic violence (23%), and child labor (13%). Some other negative aspects were also reported including an increase in aggression among people.

Risk communication and community engagement: 70% respondents reported that they and their community don't have information about the basic services available to them. The people are not aware of where to go and seek assistance in this disastrous situation. Respondents also preferred information regarding food assistance and disaster early warning so that they could have enough time for preparedness. Some of the respondents in all the districts were interested to get information on relief assistance, prevailing risks, their safety, and protection-related information. Below table indicates the rationale of preferred channels to receive the information.

Priority Needs: Cash support and Health were reported as topmost priority needs, followed by food, shelter, WASH, Education, Livelihood and NFIs. However, it was reported that different relief agencies have been engaged in food and shelter provision services. The gaps were found in health services provision and dire need for cash assistance. Majority of the respondents across the districts reported that there were serious problems in their communities because people don't have enough income, money, and resources to live in the current situation. Overall, 61% of respondents reported that local markets are functional and somehow accessible to affected population. However, around 39% of respondents were of the view that local markets are not functional or accessible during these days.

2. BACKGROUND AND CONTEXT

- Pakistan has received 60% of total normal monsoon rainfall in just three weeks since the start of the monsoon season. Heavy rains have resulted in urban and flash floods, landslides, and Glacial Lake Outburst Floods (GLOF) across Pakistan, particularly affecting Balochistan, Khyber Pakhtunkhwa, and Sindh Provinces.
- As of 7th August, the National Disaster Management Authority (NDMA) reported that the floods have resulted in 571 deaths (including 219 children, 240 men and 112 women) and 922 people have been injured (including 458 Men, 271 women and 193 Children).
- As per the NDMA updated report, 46,190 houses have been damaged (including 36,683 fully and 9,507 partially damaged), moreover, 2445 KM roads infrastructures have vanished, 118 Bridges collapsed, 42 shops have been destructed and 24,862 animals also perished.
- As per PDMA Balochistan reports 176 Deaths (including 77 man, 44 women and 55 Children) and 62 persons has been severely injured. Meanwhile, 15,331 houses have been damaged (including 3872 fully and 11,465 partially damaged), moreover, 670 KM road infrastructures have vanished and 16 Bridges collapsed 600 schools and 23,013 livestock perished.
- The Provincial Disaster Management Authority had declared 18 out of a total of 26 districts in Balochistan as calamity-hit areas. (OCHA, 25 Jul 2022). The actual number of damages and losses is not exactly known due to the absence of proper assessment and lack of functional communication with affected areas. According to the active humanitarian actors present on ground and local activists, the losses and damages might be much more than reported by Disaster management authorities.
- The provincial government/PDMA raised a request to the humanitarian community for supporting the flood-affected communities in Balochistan. The letter of request is annexed at end of this report.

The Early Needs Identification (ENI) exercise was conducted in four districts of Baluchistan province, including Jhal Magsi, Lasbella, Qila Saifullah, and Nushki. Primary data was collected from the key informants from the affected population. In these four highly affected districts of Baluchistan, the severity of damages was high and based on this these districts were chosen for the assessment.

The purpose of this ENI is to provide a quick overview of the situation to identify the immediate and basic evolving needs of flood and heavy rainfall affected population. Therefore, the multisector assessment approach was adopted to identify the sector-wise needs and proprietaries of the target population. The ENI exercise was jointly conducted by MERF and IRC having a strong footing in the province of Baluchistan. Specific objectives of the need assessment were.

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

2.1. Demographic profile of districts

As per the 2017 census, Jhal Magsi district has a population of 148,900, of which 76,726 were males and 72,173 females. Rural population was 141,085 (94.75%) while the urban population was 7,815 (5.25%). The literacy rate was 23.46% - the male literacy rate was 31.87% while the female literacy rate was 14.60%.

The Lasbella district has a population of 236,631, of which 123,639 were males and 112,986 females. Rural population was 182,605 (77.17%) while the urban population was 54,026 (22.83%). The literacy rate was 32.47% - the male literacy rate was 43.49% while the female literacy rate was 20.25%.

The Qila Saifullah district has a population of 342,932, of which 181,806 were males and 161,121 females. Rural population was 279,639 (81.54%) while the urban population was 63,293 (18.46%). The literacy rate was 32.77% - the male literacy rate was 43.22% while the female literacy rate was 21%.

The Nushki district has a population of 178,947, of which 92,571 were males and 86,373 females. Rural population was 132,551 (74.07%) while the urban population was 46,396 (25.93%). The literacy rate was 51.67% - the male literacy rate was 63.99% while the female literacy rate was 38.45%. All four districts are among the severely affected districts of Baluchistan province.

3. ASSESSMENT METHODOLOGY

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

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

Tool: In this exercise, certain questions were adapted from the Multi-Cluster/Sector Initial Rapid Assessment (MIRA)² tool, RNI tool and RNA-HST tool. A KII tool was developed and executed with the following categories of respondents.

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

Districts	Key Informant interviews with			Total
	Community elders	Government staff	INGO, NGOs, UN staff	
Jhal Magsi	4	4	2	10
Lasbela	5	4	1	10
Qila Saifullah	2	5	3	10
Nushki	4	3	3	10
Total	15	16	9	40

Data collection team: In total 40 KIIs were conducted with different stakeholders including women and men key informants from communities. The data collection team was gender-balanced, trained in data collection with ethical considerations, and aware of the local culture. The KIIs tool for the stakeholders was administered by a senior-level staff.

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

Secondary Data review:

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

1. *Situational Report on Flood by SPO*
2. *Rapid Need Assessment Report by Dehi Terquaiti Tanzeem Sibi*
3. *Rapid Need Assessment Report by Youth Organization*
4. *Initial Rapid Need Assessment Report by Human Organization for Peaceful Environment (HOPE)*
5. *Flood Update Report by Tameer e Khalq Foundation*
6. *Flood Update Report by HANDS*

² MIRA is standard tool developed by Inter-Agency Standing Committee (IASC) to assess the humanitarian needs

7. Situation Updates from NDMA and PDMA

Limitations:

The first challenge was that in some of the areas access was a greater issue therefore, some of the interviews were conducted telephonically in those areas. Secondly, initially, it was planned that 50% respondents would be females however, due to time and access constraints, we gathered data from a small proportion of women respondents. Similarly, due to the evolving situation on ground, some figures might change because at this stage respondents were reluctant to provide exact figures rather provided estimated figures. Also, it was found that government institutions are still trying to gather data from the field on the exact damages to public and private infrastructure and services. Therefore, in coming days the situation will be further clearer in terms of field-level information.

Our field teams will get some fresh information from the field and will be triangulated with the government updated information, so the ENI report will be updated accordingly after two weeks.

4. STUDY FINDINGS

4.1. Damages Information

The National Disaster Management Authority (NDMA) reported that the floods have resulted in 571 deaths and 922 people have been injured. As per the NDMA updated report, 49,991 houses have been damaged (including 39,481 fully and 10,510 partially damaged), moreover, 2813 KM roads infrastructures have vanished, 119 Bridges collapsed, 42 shops have been destructed and 25,000 animals also perished.

As per PDMA Balochistan reports 166 Deaths (including 68 man, 43 women and 55 Children) and 62 persons has been severely injured. Around, 30,000 houses have been damaged moreover, 670 KM road infrastructures have vanished, and 16 Bridges are collapsed 600 schools and 23,013 livestock perished. As per PDMA Sind reported 121 Deaths (including 51 men, 10 women and 60 Children) and 111 persons have been severely injured. Meanwhile, 25,541 (including 16873 fully and 2856 partially) houses have been damaged, moreover, 388.5 KM roads infrastructures have vanished, 03 shops have destructed and 03 Bridges are collapsed. PDMA also reported that around 500,000 acres of crops damaged in the province.

Following are the Needs identified by Disaster Management Authorities

- Shelter
- Food
- Cash
- Health
- Clothes
- Drinking water
- Solar panels
- Boats for evacuation
- Hygiene kits

Following are the reported damages in these 4 districts

The following section describes the findings of the KII conducted with men and women in the different localities of the four districts of Baluchistan.

Damages/Losses	Jhal Magsi	Lasbela	Qila Saifullah	Nushki
# of Deaths	14	11	15	02
# of severely injured	37	46	19	35
# of houses fully damaged	970	6,320	1,268	5,000
# of houses partially damaged	1,540	8,300	250	6,500
# of people affected	95,000	88,000	31,164	44,100
Camps established for IDPs	Yes	Yes	Yes	no

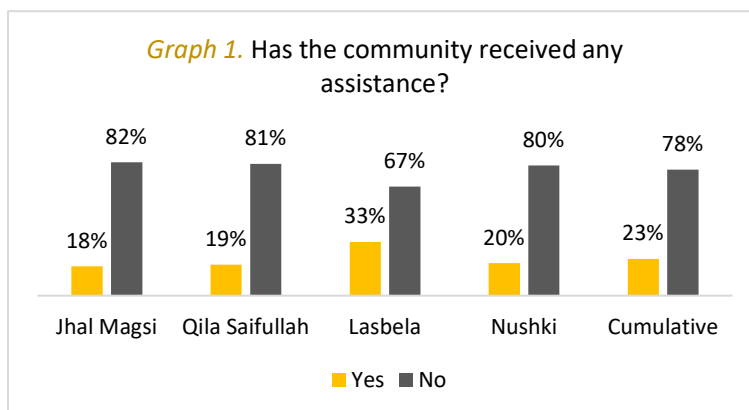
The above data was reported by Youth Organization

4.2. Assistance received

Overall, 23% of the respondents reported receiving assistance in flood situations from different service providers including Government departments, PDMA and other humanitarian organizations. *Graph 1 depicts district-wise results.*

Graph-2 indicates that Food was the top-most reported assistance in all the assessed districts followed by medicine, and tents for those whose houses were shattered in floods. Similarly, other received assistance includes Water, blankets, cooking utensils and clothes, etc.

Community reported on the following items they have received.



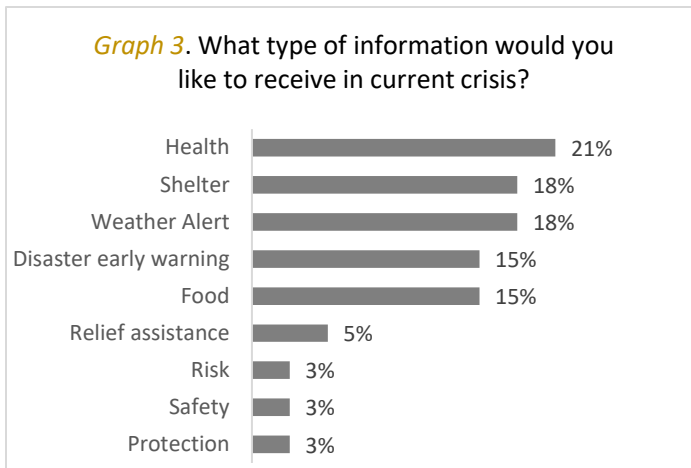
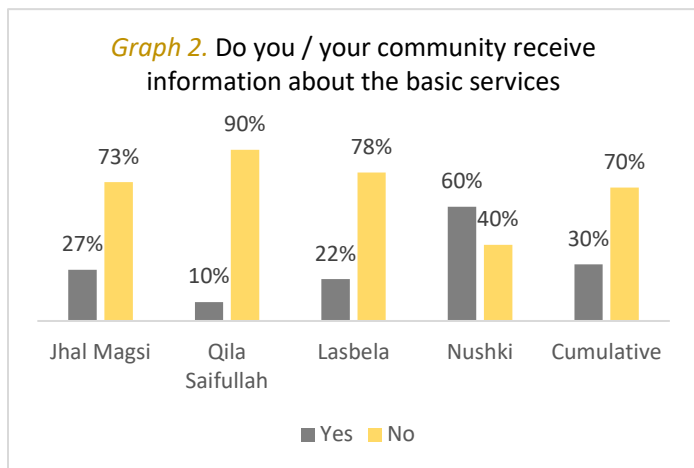
Assistance type	Remarks
Food	Majority reported that they have been receiving food
Medicine/health services	To some extent necessary medicines have been provided however, there was greater need for health
Tents/shelter	Good-some of reported that the affected HH have received tents
Blanket	Some respondents reported on blankets
Water/water kits	Some respondents reported on water, however, they needed to rehabilitate their existing water sources
Clothes	A few respondents reported on clothes
Cooking utensils	A few respondents reported on utensils and other NFIs
Mosquito nets	A few respondents reported on mosquito nets

4.3. Access to information

Chart-2 depicts overall 70% respondents reported that they and their community don't have information about the basic services available to them. The people are not aware of where to go and seek assistance in this disastrous situation.

Graph 3 indicates that information about health services was overall on the top, followed by information related to shelter and weather alerts.

Respondents also preferred information regarding food assistance and disaster early warning so that they could have enough time for preparedness. Some of the respondents in all the districts were interested to get information on relief assistance, prevailing risks, their safety, and protection-related information. Below table indicates the rationale of preferred channels to receive the information.

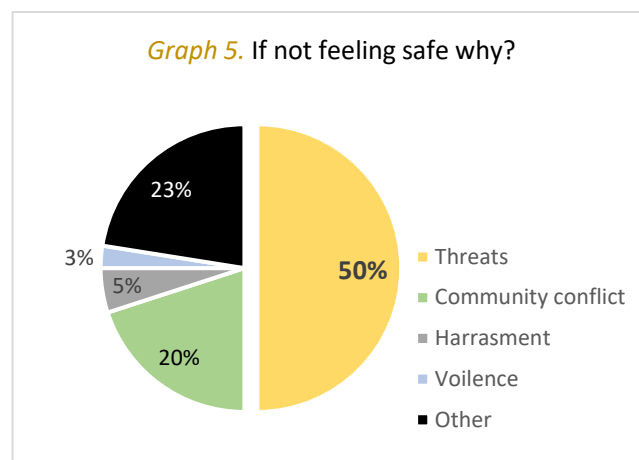
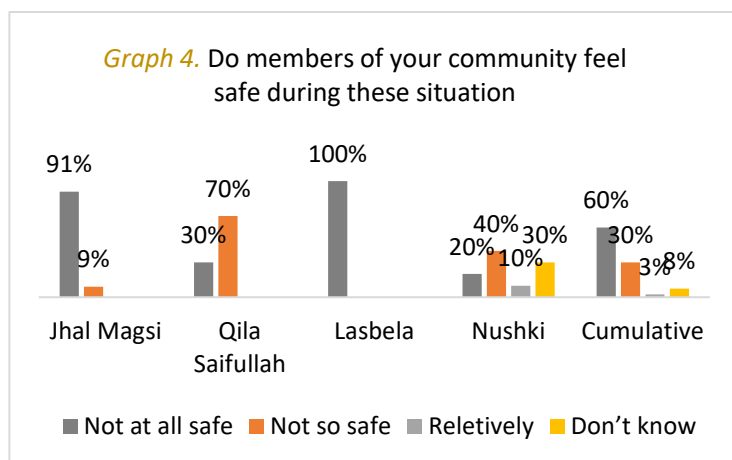


Preferred channels of information receiving							
District	Mobile	Social Worker	NGO Rep	TV	Community meeting	Radio	Neighbor
Jhal Magsi	39%	28%	0%	11%	0%	22%	0%
Qila Saifullah	40%	20%	7%	33%	0%	0%	0%
Lasbela	47%	5%	26%	0%	16%	0%	5%
Nushki	29%	17%	29%	8%	8%	0%	8%
Cumulative	38%	17%	17%	12%	7%	5%	4%

As shown in table above, Mobile was ranked high with 38% response rate as key preferred source of information, followed by social workers and NGO representatives each with 17% response rate, Television (12%), community meetings counted by 7%, while 5% respondent prefers to receive information from radio, and remaining 2% counted to hear from neighbors and/or community members.

4.4. Safety during current situation.

With regards to safety, the majority 60% of the sampled respondents reported that in current situation members of community are not at all feeling safe, 30% ranked it not so safe, 3% were of the view that community is feeling relatively safe while remaining were not aware of that. Respondents who reported not safe were further probed



for the reason, Half of those reported that they are having life threats, 20% reported community conflicts, followed by risk of harassment with 5% response rate and violence with 3% responses.

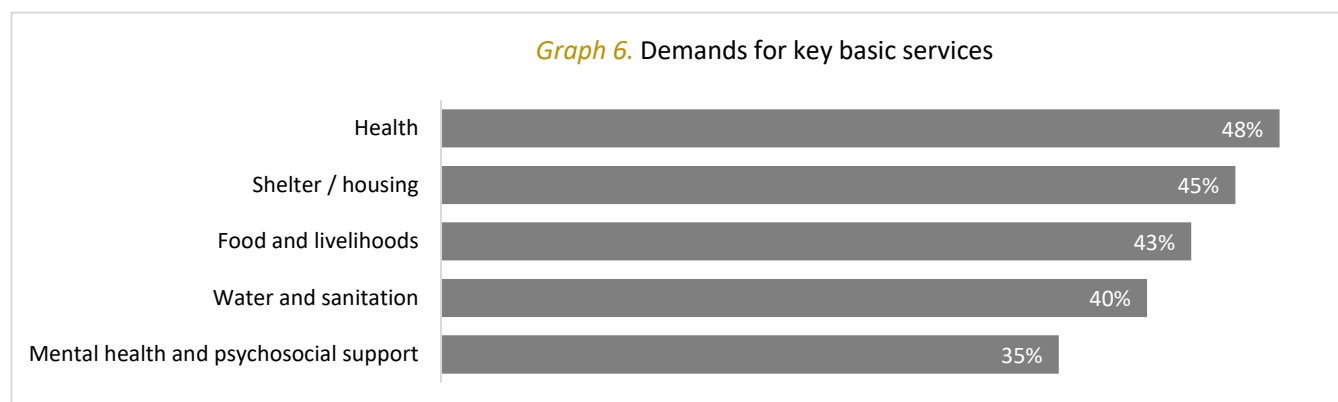
4.5. Availability of basic services

The overall analysis of availability of basic services depicts that there is scarcity of these services in these districts, majority of them reported the limited basic services available as result of flood emergency. Shelter, Water and Sanitation, Food and Livelihood, education, women and children protection, legal assistance mental health psychosocial support are the key identified services not available to most of the affected population. The below table shows the overall and district wise picture.

Availability of basic services (% Yes)					
Basic Services	Jhal Magsi	Lasbela	Nushki	Qila Saifullah	Overall
Health	20%	29%	25%	43%	29%
Food and livelihoods	21%	25%	37%	47%	33%
Water and sanitation	20%	23%	37%	38%	30%
Shelter/housing	19%	25%	45%	45%	34%
Mental health and psychosocial support	15%	16%	25%	18%	19%
Education	25%	25%	37%	38%	31%
Women Protection	10%	15%	12%	20%	14%
Child protection	10%	13%	20%	18%	15%
Legal assistance	10%	14%	10%	10%	11%

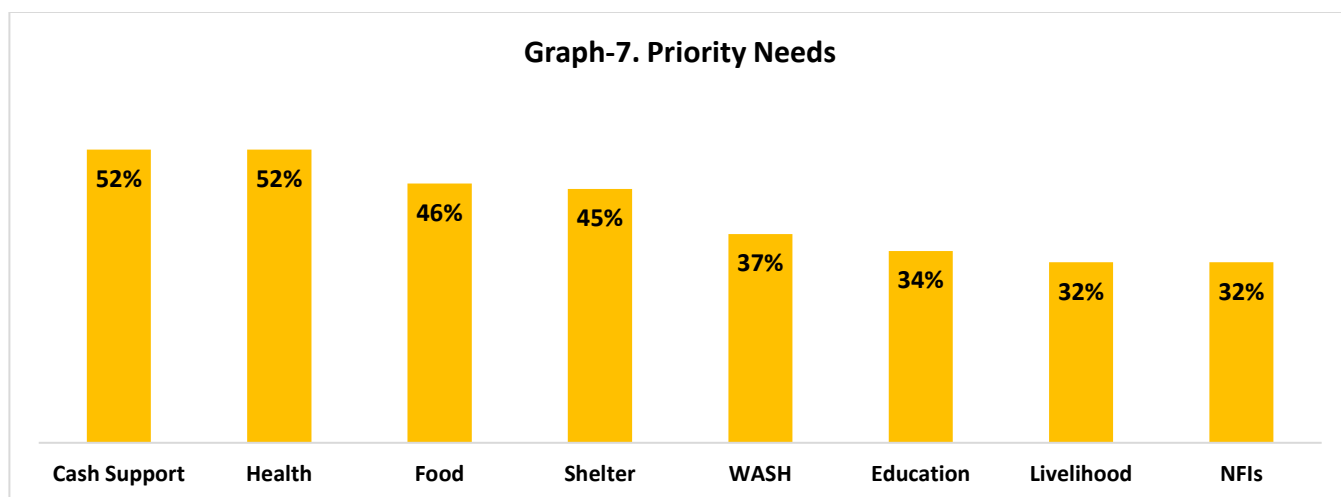
Regarding accessing the existing services and needs, the data shows that overall, majority of respondents reported limited access to services. Regarding the un-accessible services, the data shows that health, shelter, food, water, and sanitation are the most reported services that are not accessible to affected populations.

Unavailability of services, not being able to pay for the services, not-inclusiveness, discrimination, and safety issues were the main reasons being reported for low or no access to the mentioned services.



4.6. Priority Needs

Cash support and health were reported as to topmost priority needs, followed by food, shelter, WASH, Education, Livelihood and NFIs.



The district wise analysis of priority needs is given in below table.

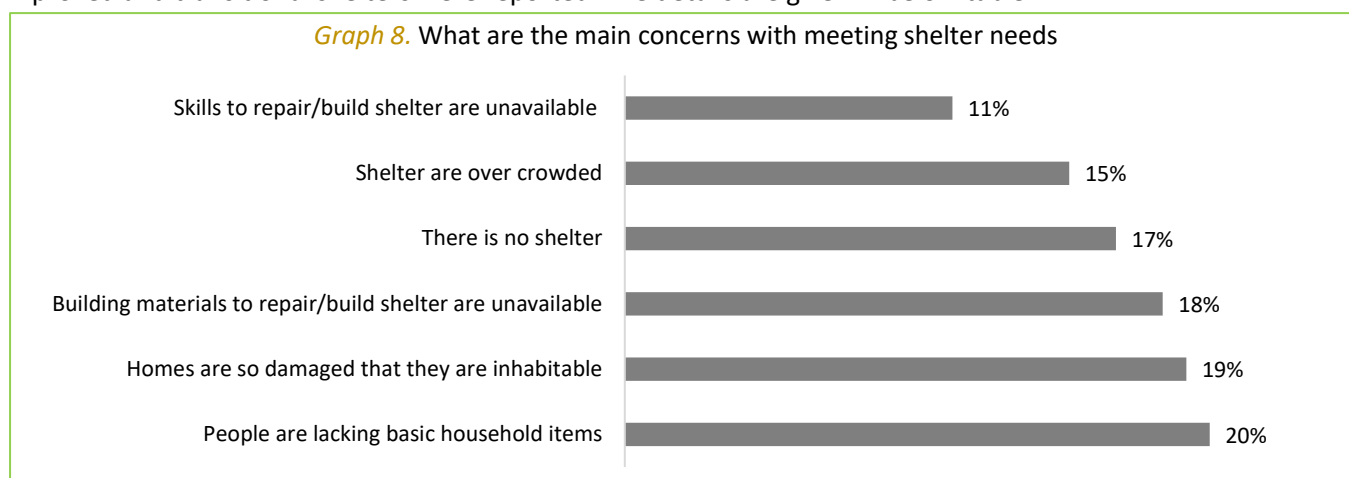
Needs	Jhal Magsi	Qila Saifullah	Lasbela	Nushki	Total
Cash Support	38%	40%	100%	30%	52%
Health	60%	40%	89%	20%	52%
Food	64%	40%	11%	70%	46%
Shelter	30%	80%	11%	60%	45%
WASH	27%	20%	89%	10%	37%
Education	38%	30%	39%	30%	34%
Livelihood	36%	10%	40%	40%	32%
NFIs	27%	30%	30%	40%	32%

4.7. Vulnerable Groups

According to the ENI data, pregnant and lactating women are highly vulnerable as reported by 63% of respondents, followed by women and adolescent girls (reported by 55% respondents) children, persons with different abilities, persons with chronic illnesses and minority groups.

4.8. Shelter

The respondents from the target districts were probed about main types of shelter in their communities being used by the people to live in during the current situation. They opted for multiple options in each district. In Jhal Magsi, houses, and transitional shelters were the main shelter types. Similarly, in Qila Saifullah, houses, tents, improved and transitional shelters were reported. The details are given in below table.



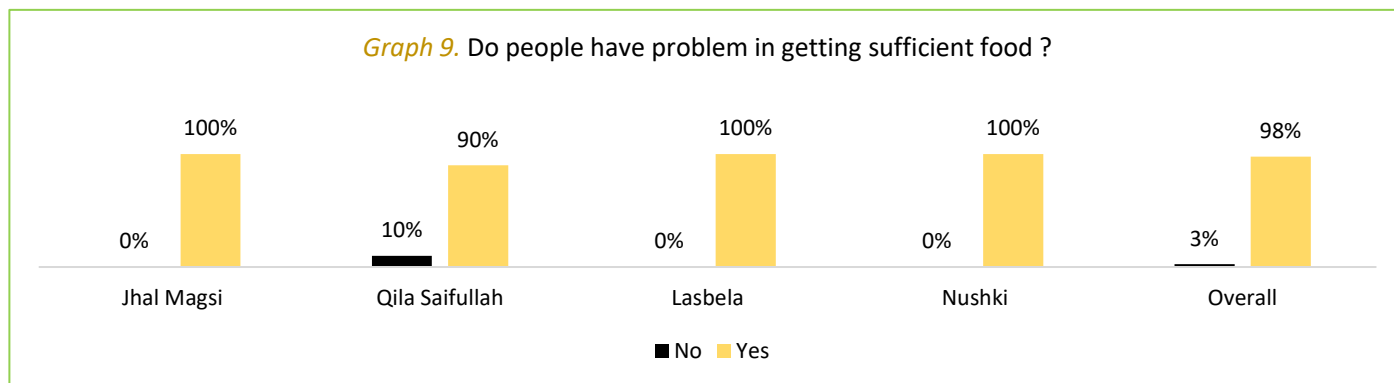
Shelter types under use	Jhal Magsi	Qila Saifullah	Lasbella	Nushki	Overall
House	57%	31%	60%	25%	41%
Tents	5%	14%	15%	15%	19%
Planned temporary or transitional shelter other than tents	29%	13%	40%	0%	17%
Improvised shelter	0%	13%	0%	33%	14%
No Shelter	7%	0%	0%	8%	4%
Other buildings	7%	0%	0%	4%	3%
Buildings used as collective accommodation	0%	0%	0%	4%	1%

4.9. Food and Livelihood

In the targeted 04 districts, total 0.9 million population is living as per 2017 census report. The monsoon rains followed by floods have adversely affected their access to food and livelihoods. The stored food is wasted, and the livelihood shattered, and the families became highly vulnerable to food security and livelihood issues. Families are displaced due to damages to their homes and the crops are damaged/flooded away during this disastrous situation.

Districts	Population		
	Males	Females	Total
Jhal Magsi	76,726	72,174	148,900
Lasbella	123,639	112,992	236,631
Qila Saifullah	181,806	161,126	342,932
Nushki	92,571	86,376	178,947
Total	474,742	432,668	907,410

Overall, 98% respondents reported that the affected people face problems in getting sufficient food for their families. The graph depicts that the situation is almost same in all districts except Qilla Saifullah where 90% of respondents reported this issue.



The field findings indicate regarding changes in total amount of food consumption since flood disaster, overall, 68% reported that it has decreased, 5% reported that it has increased while 28% reported that they don't know about any such change.

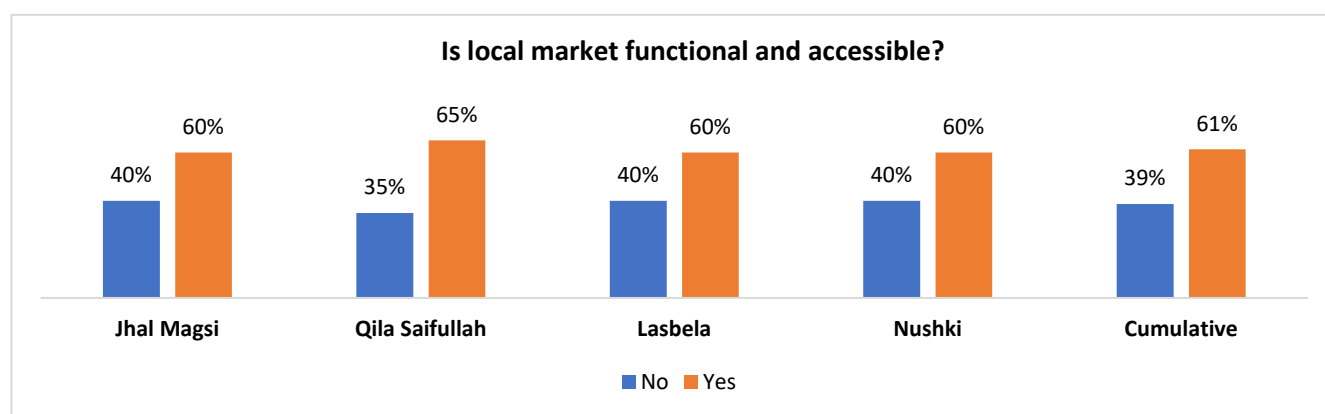
Impact on food consumption			
Districts	% Reported Increase	% Reported decrease	% Don't know
Jhal Magsi	0%	100%	0%
Lasbella	20%	60%	20%
Qila Abdullah	0%	100%	0%
Nushki	0%	10%	0%
Overall	5%	68%	28%

Regarding the main sources of food in the current situation, the respondents opted for local markets as a major source. In case of case assistance provision, a fresh market assessment may be required after two weeks. The district wise details are given in below table.

What are the main sources of food in your community?					
Sources	Jhal Magsi	Qila Saifullah	Lasbela	Nushki	Overall
Local market	100%	89%	41%	77%	69%
Humanitarian assistance	0%	0%	41%	0%	16%
Subsistence production	0%	11%	9%	15%	9%
Other	0%	0%	9%	8%	5%
Overall	100%	100%	100%	100%	100%

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

Overall, 61% of respondents reported that local markets are functional and somehow accessible to affected population. However, around 39% of respondents were of the view that local markets are not functional or accessible during these days. The district wise analysis is given in below chart.



Regarding the availability of food in local markets, the ENI data depict that 32% respondents report no sufficient availability of food in local markets while 68% reported somewhat availability. The district wise analysis is given in below table.

Food available in the local market					
	Jhal Magsi	Qila Saifullah	Lasbela	Nushki	Overall
No	35%	30%	30%	35%	32%
Yes	65%	70%	70%	65%	68%

Regarding traditional main sources of income by majority of the communities, the respondents reported Livestock, Small businesses, Agriculture, and daily waging as main sources. The details are given in below table.

Traditional main sources of income					
Income Sources	Jhal Magsi	Qila Saifullah	Lasbela	Nushki	Overall
Agriculture	33%	36%	30%	12%	28%
Daily work	18%	29%	23%	40%	28%
Livestock	33%	21%	23%	20%	24%

Small businesses/trading	9%	14%	0%	16%	10%
Other (Specify) ¹⁶	1%	0%	23%	8%	8%
Skills to repair/build shelter are unavailable	6%	0%	1%	4%	3%

4.10. Health

Around 35% to 40% people have issues in accessing health services in these four districts. The district wise analysis is available in the table.

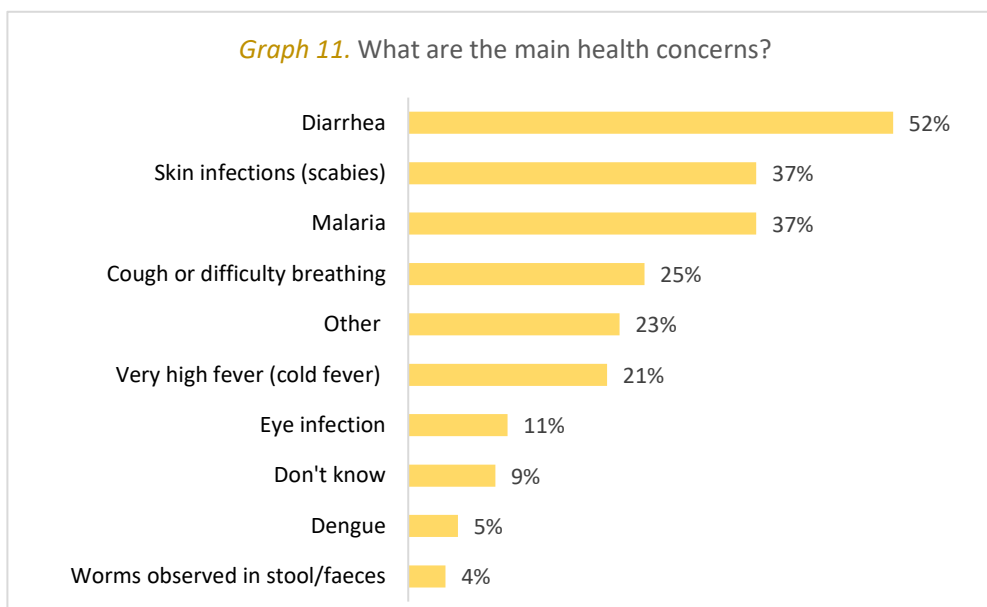
District	Type of facility in people access						
	BHU	Other	Dispensary	THQ	RHC	DHQ	None
Jhal Magsi	15%	13%	0%	11%	9%	9%	43%
Qila Saifullah	12%	11%	12%	10%	10%	10%	35%
Lasbella	11%	10%	12%	11%	10%	6%	40%
Nushki	19%	9%	10%	10%	9%	8%	35%

While assessing the prevalence of major health concerns, Diarrhea, Skin Infections (scabies), Gastrointestinal illness and other diseases are reported by the respondents. The details are given in below table.

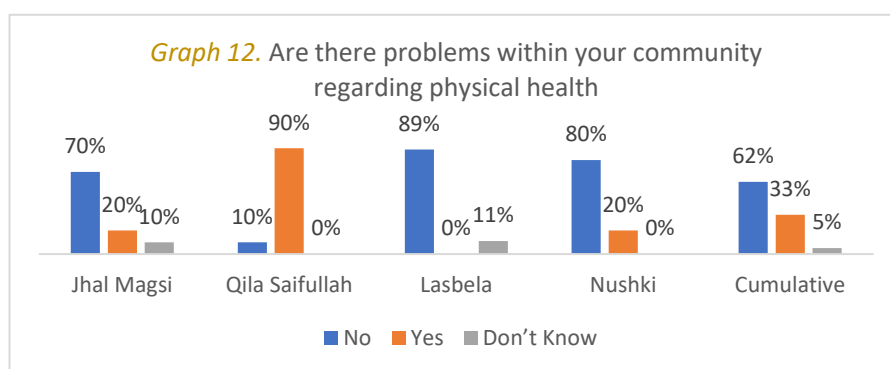
Districts	% of major Health concerns			
	Diarrhea	Skin infections (scabies)	Other	Other gastrointestinal illnesses
Jhal Magsi	65%	35%	0%	0%
Qila Saifullah	32%	26%	29%	13%
Lasbella	25%	25%	25%	25%
Nushki	40%	40%	4%	16%
Cumulative	37%	30%	17%	16%

Below table indicated major health concerns occurrence which increases in current situation than usual.

In current situation, an increase was reported in diarrhea occurrence than usual reported by highest percentage of the respondents (52%), followed by an increase in skin infections and Malaria with 37% responses for each, Cough (25%), High temperature (21%), dengue with 5% response rate. Besides this other increase was also reported in feces/stool worms and others. Graph 11 depicts detailed results.



33% of the respondent from all the districts mentioned that physical health-related problems exist in the community including physical illness, injuries, and physical disabilities, 62% reported the contrary while remaining 5% were not aware of it. As shown in chart, existence of physical health-related issues is high in district Killa Saifullah with 90% response rate.



Access to nearest functional primary health facility

Overall, **70% respondents mentioned inaccessibility** to nearest primary health facility (highest in Killa Saifullah, Lasbella and Nushki). 28% of the respondents reported that nearest health care facilities are accessible while remaining 2% were not aware.

Respondents who reported accessibility to nearest health facility were further asked if these facilities are equally accessible to persons with disabilities, 72% confirmed accessibility to persons living with physical disabilities while the remaining reported the contrary.

Do people in your area have access to nearest functional primary Health facility?			
Districts	No	Yes	Don't know
Jhal Magsi	18%	73%	9%
Qila Saifullah	90%	10%	0%
Lasbella	100%	0%	0%
Nushki	80%	20%	0%
Cumulative	70%	28%	3%

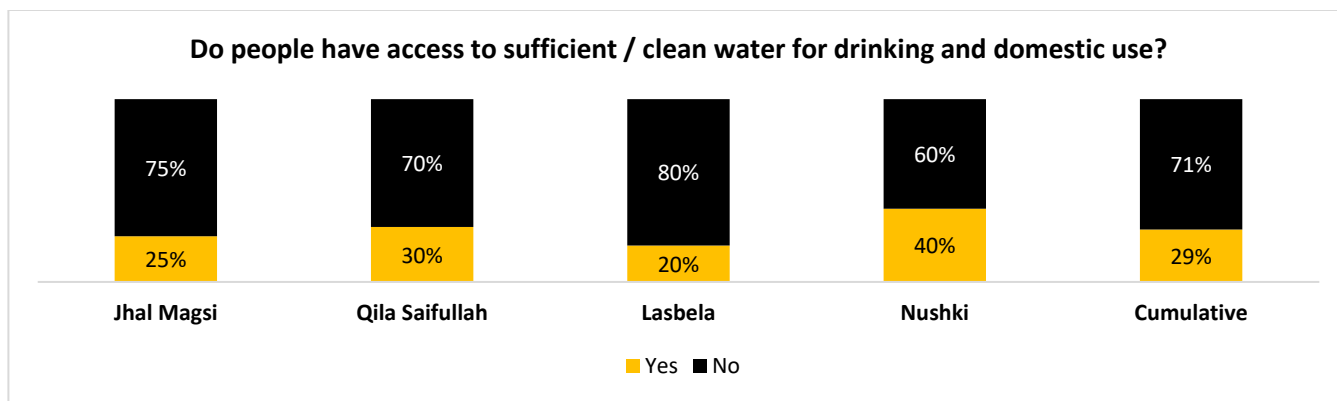
Crises impact on health services

Has there been any impact on the quality of health services since crisis?					
	Jhal Magsi	Qila Saifullah	Lasbella	Nushki	Cumulative
Quality of services has deteriorated	0%	24%	0%	0%	5%
It's the same as before the disaster	28%	24%	19%	0%	20%
Mental Health and Psychosocial Support (MHPSS)	31%	59%	35%	0%	33%
Frequent stock out of essential medicines and commodities at health facilities	7%	6%	12%	33%	12%
Health services have become inaccessible due to increased patient loads in hospitals	34%	12%	35%	67%	35%

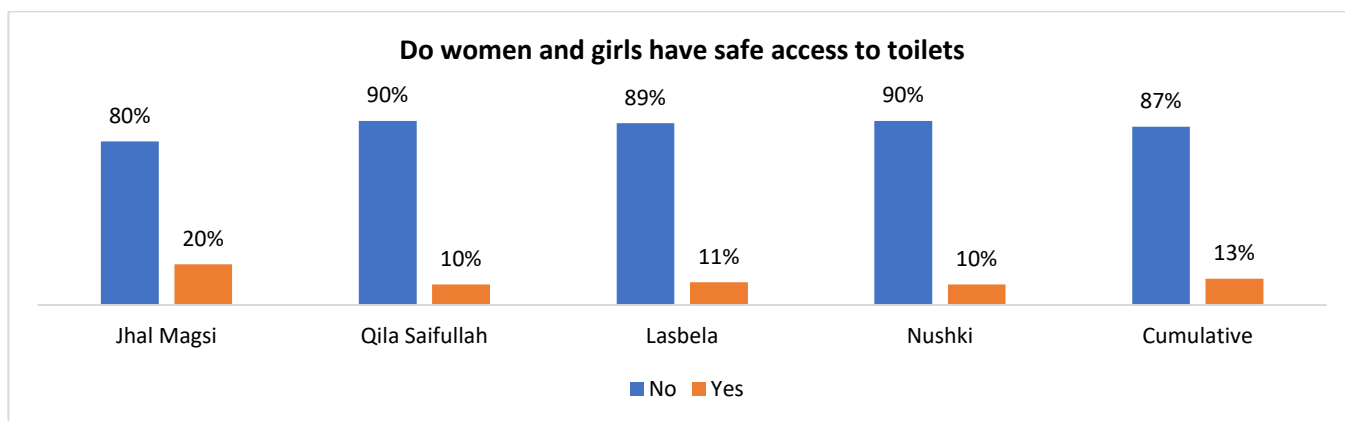
The above table indicated that current crises have major impact on the different aspects related to availing health services. Due to current crises health services have become inaccessible due to increased patient loads in hospitals reported by 35% of the respondents, effect on MHPSS services was reported by 33%, and frequent stock out of medicines and commodities from health facilities was reported by 33% of the respondents. 20% respondents reported no change in health services. Only 5% respondents reported quality of services has deteriorated due to current crises in the area.

4.11. WASH

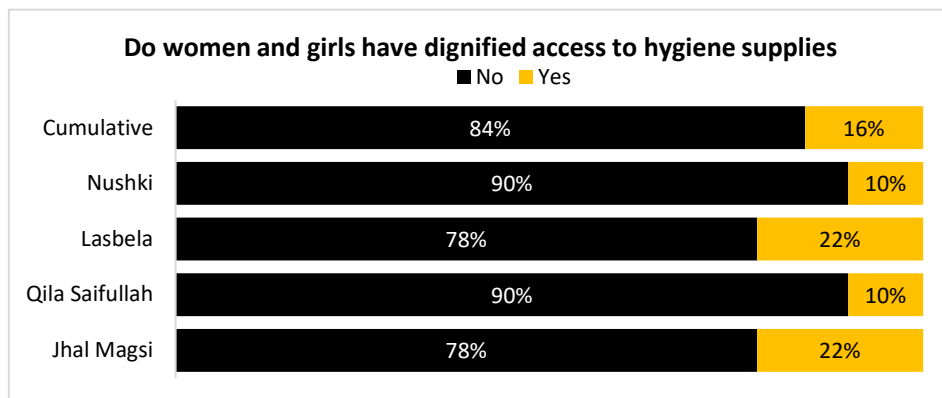
The ENI findings depict that overall, 71% of the respondents reported that affected communities don't have access to sufficient and clean drinking water in the current situation.



Regarding safe access of women and girls to toilets, overall, 87% don't have safe latrine facilities while 13% have somehow safe toilet facilities for women and girls. The district wise analysis is given in below chart.



Regarding the dignified access of women and girls to gender-specific hygiene supplies, overall, 84% respondents reported that they don't have access to those women and girls' specific hygiene supplies in the current situation. The district wise analysis is given in chart.

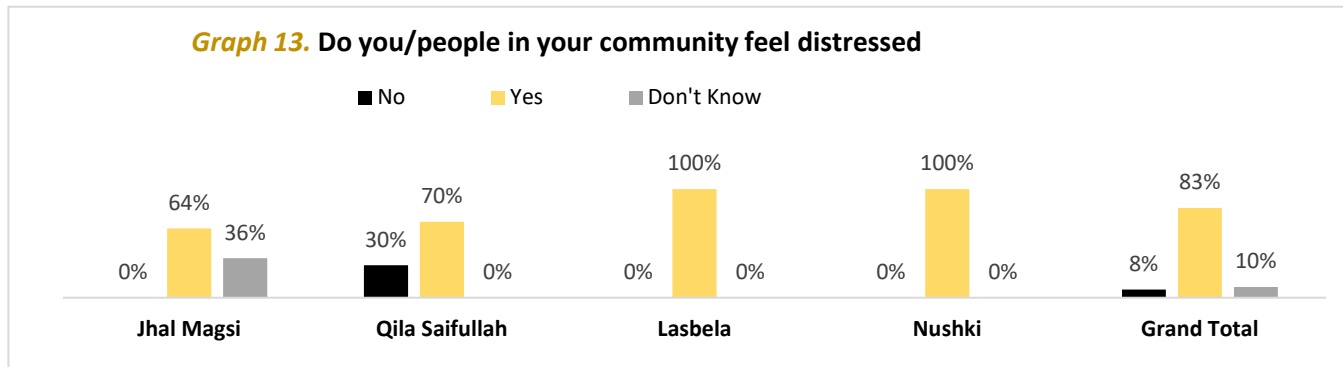


The respondents mentioned that due to the unavailability of hygiene supplies, people are facing difficulties in ensuring personal hygiene, particularly women, girls and persons with disabilities and older people.

4.12. Mental Health and Psychosocial Support:

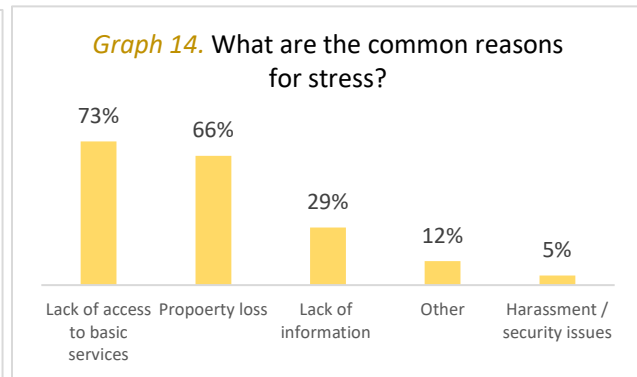
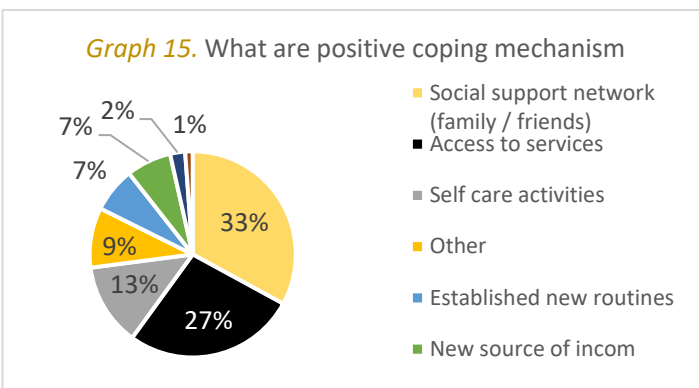
Overall, 83% respondents reported that people in their community felt distressed due to current crises in their area, 8% reported the contrary while remaining 10% were not aware of that. Further respondents were asked to share their reasons for distress, Majority of them (73%) reported lack of access to basic services, 66% reported

property loss as the basic reason of distress among the community, followed by lack of information (29%), harassment and/or security issue (5%) while remaining 12% reported other reasons.

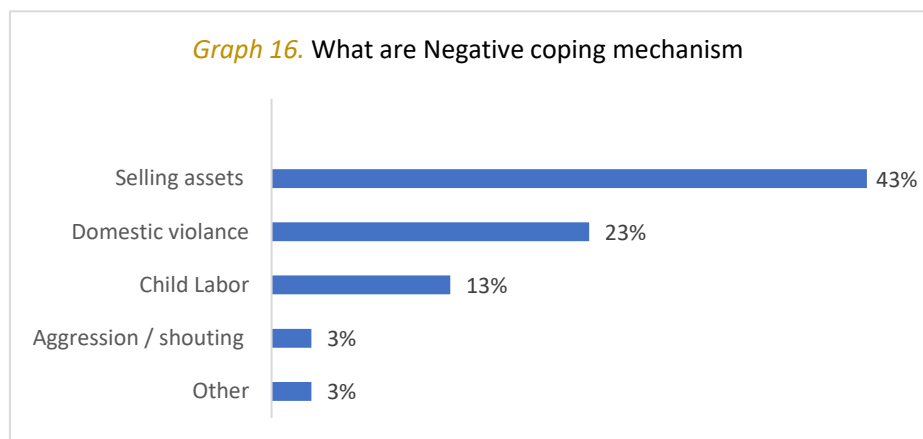


Positive and Negative Coping Mechanism adopted by affected population

Social support network (family and/or Friends) was reported as the top-most positive coping mechanism or positive aspect of the current crises in community including the strengthening of social support networks (family and/or friends) reported by 33% respondents) followed by more focus on access to services (27%), self-care activities (13%), and establishment of new routine (9%). While another positive mechanism was also reported including the generation of new income sources, etc.



Negative coping mechanisms included selling of assets (reported by 43% respondents) followed by domestic violence (23%), and child labor (13%). Some other negative aspects were also reported including an increase in aggression among people. Detailed results are shown in graph 16.



4.13. Protection

The ENI found that the respondents identified several protection issues in the communities. Among these the top mostly reported issues are No access to information due to communication barriers, no access to other essential services, No access to health services, Psychosocial trauma, stress, and anxiety, Labor force / economic exploitation, and discrimination. The details with district wise prevalence of these issues are given in below table.

What are the main protection issues people in your community are facing					
Protection issues	Jhal Magsi	Qila Saifullah	Lasbella	Nushki	Cumulative
No access to information due to communication barriers	38%	35%	31%	29%	33%
No access to other essential services	25%	0%	31%	17%	20%
No access to health services	0%	6%	35%	21%	16%
Psychological trauma, stress, and anxiety	21%	6%	0%	17%	11%
Labor force / economic exploitation	17%	6%	0%	17%	10%
Domestic violence	0%	41%	0%	0%	8%
Marginalization and discrimination	0%	6%	4%	0%	2%

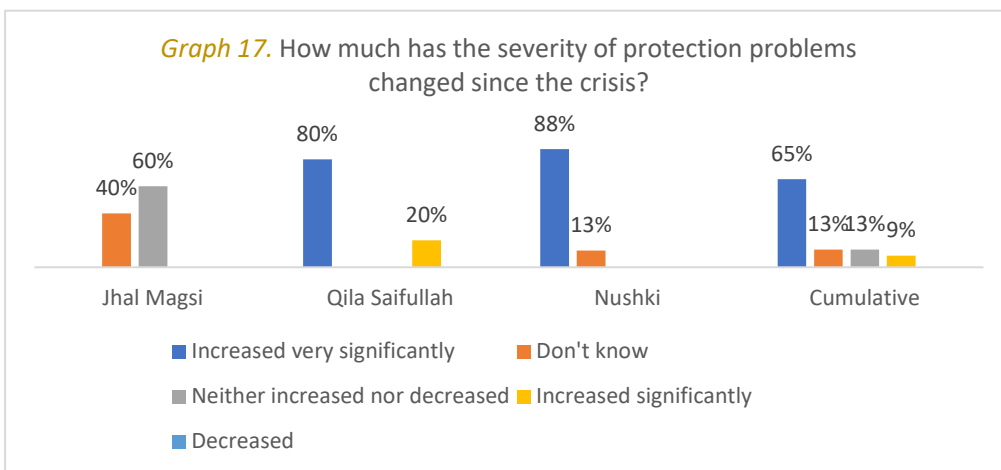
Respondents were further asked to enlist the protection issues which affect women and girls in the community. Major protection issues reported included lack of proper sheltering facility and security in the area, no access to information and communication barriers faced by women, violence and/or abuse with the family or household, Psychosocial trauma and early and/or forced marriages. Details are given in below table.

What are the main protection issues affecting women and girls in your community?					
Protection issues	Jhal Magsi	Qila Saifullah	Lasbella	Nushki	Cumulative
Lack of shelter and security in the area	20%	27%	50%	18%	28%
No access to information due to communication barriers	40%	31%	0%	18%	23%
Violence or abuse in the family/household	0%	4%	50%	18%	16%
Psychosocial trauma, stress, and anxiety	33%	4%	0%	29%	15%
Restricted access to health services	0%	4%	0%	12%	4%

Likewise, women and girls, and children are also a marginalized group and are exposed to protection-related issues. Respondents also shared protection issues relevant to children as below. These included chances of child labor accounted for 43% responses (highest in Jhal Magsi), violence against children and no access to education accounted for 18% each (highest in Killa Saifullah), and child abuse with 14% response rate (highest in Nushki). Below table shows district wise results.

What are the main protection issues affecting children in your community					
Protection issues	Jhal Magsi	Qila Saifullah	Lasbella	Nushki	Grand Total
Chances of child labor	80%	35%	0%	32%	43%
Violence against children	0%	25%	0%	21%	18%
No access to education	10%	25%	0%	16%	18%
Child abuse	10%	10%	0%	21%	14%

Overall, 65% respondents were of the view that protection concerns increased very significantly in current situation in the area, 9% reported a significant increase while 13% said that protection-related concerns neither increased nor decreased but remained same in the current situation. The remaining 13% were not aware of that. Chart 17 shows district wise detailed results.



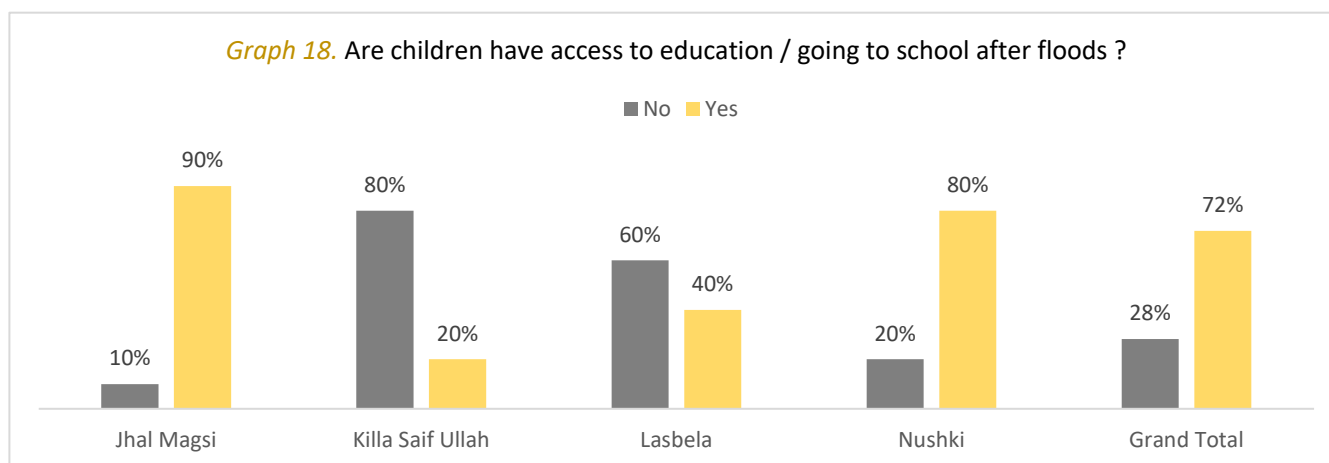
4.14. Education

Findings from Primary data:

38% respondents reported that government schools are available, followed by Madrassas (27%) and private schools. 9% respondents reported availability of any NGO supported schools in the local communities. After floods, the schools are closed and currently, the children are not going to school.

Availability of education services in communities					
Districts	Jhal Magsi	Lasbela	Qila Saifullah	Nushki	Overall
Government School	48%	41%	32%	35%	38%
Madrassa	35%	9%	32%	31%	27%
No Education Facility exists	0%	27%	32%	0%	15%
Private school	13%	14%	0%	15%	10%
NGO managed schools	4%	9%	4%	19%	9%

Respondents who reported availability of education facilities in their area were further probed if children have access to and/or going to school after floods in their area. Overall, 72% confirmed access of children to school while remaining 28% said that children are not going to or have no access to available education facilities. District-wise results are shown in graph 18 below.



Furthermore, those who reported no or limited access of children to school highlighted key barriers in accessing education facilities or not sending their children to schools including lack of remedial support at home or

otherwise, damaged school buildings, limited schools in the area, far distance, child engagement in labor work, protections risks, etc. Below graph depicts detailed results.

Graph 19. If not, what are the key barriers in accessing education facilities?

