



## South Asia Quake Disaster



*CARE is helping communities rebuild their lives and livelihoods after October's devastating earthquake. Faz Alireham and his grandson Naveed sit in front of the remains of their home in Rabat Bala, Pakistan, where CARE helped build 41 latrines and 21 washrooms.*

## Earthquake Relief Fund Six-Month Report

### Overview

A magnitude 7.6 earthquake shook the South Asian subcontinent in the morning hours of October 8, 2005. Pakistan suffered the brunt of the quake, with the epicenter near Muzaffarabad — about 60 miles northeast of the nation's capital, Islamabad. Widespread devastation affected at least 5 million people throughout both India and Pakistan and claimed more than 87,000 lives. Moreover, the destruction of homes and infrastructure left survivors with few if any resources to begin rebuilding their lives.

In Pakistan's Allai Valley alone, where CARE is concentrating relief and reconstruction efforts, homes and health facilities in a 200-mile radius were destroyed, water and sanitation systems were rendered inoperable and irrigation systems, the lifeblood of this dense agricultural region, were ruined. In terms of education, more than 95 percent of all schools were either completely demolished or rendered unsafe by government authorities, leaving children especially vulnerable in the aftermath of the quake.

Exposed to the elements, fierce winter weather forced more than 300,000 people to leave their communities for the relative safety of displacement camps miles away. With a government

mandate to close all settlement camps this spring, communities and homeowners alike are now preparing for a massive reconstruction effort across the affected area.

Leveraging support from private and institutional donors throughout the United States, CARE has raised a total of \$7.7 million dollars towards our \$12 million goal for relief and rehabilitation efforts in the affected areas of India and Pakistan.<sup>1</sup> Your generous support allows our staff the flexible funding needed to ensure that earthquake-ravaged communities can rebuild their lives and livelihoods in the aftermath of this tremendous disaster. This report provides an update on our relief, recovery and initial reconstruction efforts since October 2005.

## **Pakistan**



*Due to snow, landslides and the remoteness of the area, many supplies had to be delivered by helicopter.*

At the quake's epicenter, Pakistan bore the brunt of casualties, with a death toll of more than 86,000 and over 100,000 people injured. A total of four million people have been affected in Pakistan's North West Frontier and Azad Jammu and Kashmir provinces. In some areas, nearly every home was destroyed and countless others were rendered unsafe. There was also significant damage to roads, schools, health clinics and hospitals throughout the earthquake zone.

CARE is working in three districts of Pakistan's North West Frontier Province (NWFP) – Battagram, Mansehra and Shangla – with a focus on Battagram's remote Allai Valley. Even before the

earthquake, the Allai Valley was an area of high poverty and weak infrastructure, with little attention from other relief agencies or even the government of Pakistan. The people in this remote area are characterized by acute poverty, a lack of employment opportunities, poor education (less than 10 percent of adult males are literate) and physical isolation from the rest of the country.

### **Emergency Relief**

The immediate goal of CARE's emergency response in Pakistan was to ensure that survivors had adequate shelter and sanitation facilities to ensure their safety in the direct aftermath of the quake and its aftershocks. During the initial emergency relief phase (October – November 2005) of our three-part response strategy, CARE provided nearly 75,000 survivors in Pakistan with:

- 4,500 tents;
- 8,000 blankets;
- 4,000 plastic mats and sheets;
- 14,600 shawls;
- 8,500 water bottles;
- 6,500 hygiene kits; and
- 75,000 water purification kits.

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<sup>1</sup> CARE's emergency response in India came to a close in December 2005 after the distribution of relief supplies to more than 7,500 households.

CARE focused relief efforts in the Allai Valley, Battagram District, because of the extent of the devastation, the remoteness of the area and the lack of aid there from other sources. Our emergency response began immediately after the crisis took place in order to get as much life-saving assistance to as many people as possible, by the most effective means available.

### **Relief and Maintenance**

During the relief and maintenance phase of CARE's response, roughly December 2005-February 2006, we continued with relief activities, with a concentrated effort on making sure that families were equipped to survive the harsh Himalayan winter.

CARE developed and distributed a winterization package for an estimated 50,000 people who faced the approaching Allai Valley winter without adequate shelter. We assisted these individuals to either completely winterize their tents and damaged homes or to establish one "warm room" for sleeping. Winterization packages consisted of:

- Two fuel efficient stoves;
- Adequate blankets and quilts;
- Hygiene kits for women;
- Corrugated, galvanized iron sheets for roofing;
- Plastic sheeting for insulation; and
- Shovels, pick axes, hammers, saws, rope, wheel barrows, nails, and washers to improve existing buildings.



*CARE distributed corrugated iron sheeting and other winterization materials to more than 50,000 people.*

To facilitate the efficient distribution of these and other supplies, CARE established a main distribution center in Chatter Plain, where goods were airlifted by helicopter to the Allai Valley, a four-hour drive under favorable conditions<sup>2</sup>. CARE also trained local staff in warehouse management and distribution to further facilitate smooth delivery of these vital supplies.

Working with local partners, CARE developed community-based emergency health and trauma centers for psychological and physical rehabilitation. Patients and their immediate families were provided with medical assistance and shelter for as long as necessary to complete emergency treatment. Health centers relied on local volunteers who functioned as community health workers and educators and who were trained by CARE staff in basic health and emergency relief. These community volunteers delivered public health education and counseling to as many as 450,000 survivors.

### **Reconstruction**

In March 2006, with the retreat of the winter snows, CARE began the reconstruction phase of our response. With residents repairing their homes, rebuilding livestock pens and preparing fields for planting, the need for improved infrastructure, such as roads, culverts, bridges, community centers and schools is immediate. CARE is also pursuing opportunities to help families regain

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<sup>2</sup> Heavy snowfall and subsequent landslides made the treacherous mountain roadways to the Allai Valley inaccessible for much of the winter.

their livelihoods, improve access to education and health services, promote human rights and build the capacity of local partners to continue to work with communities after our earthquake response is complete. Leveraging the strength of local partners enables a multiplier effect in responding to both immediate emergency needs and longer-term rehabilitation. In Pakistan, CARE is working primarily with six local organizations:

- Action Aid Pakistan
- Awaz
- Environment Protection Society of Pakistan (EPS)
- National Rural Support Program (NRSP)
- Sarhad Rural Support Program (SRSP)
- Sungi

CARE is also leveraging the strength and knowledge of communities by meeting regularly with village leaders and local partners to allow project participants to define their greatest areas of need. With this in mind, CARE is adapting its activities to serve the specific needs of the affected villages.

### ***Education***

Of the Allai Valley's 215 schools, about 200 were badly damaged or completely destroyed by October's earthquake. School buildings were ill equipped to withstand the force of the disaster; as a result, the area's education services came to a virtual standstill. One of CARE's primary recovery objectives is to provide places of learning where children can resume their studies as quickly, and as safely, as possible.



*Until safe schools are constructed, children must attend class outdoors when the weather permits.*

Building permanent schools across the Allai Valley could take as long as three to five years. Other nongovernmental organizations and the government of Pakistan have distributed large classroom-sized tents to various communities, but these structures only last about six months, and their transience tends to remind children of the devastation that surrounds them. In order to minimize children's trauma and ensure their return to the classroom, CARE is building transitional schools in communities throughout the Allai Valley. Constructed of wood beams, drywall and corrugated iron on a concrete foundation, these semi-permanent two-room structures<sup>3</sup> are considerably more safe and durable than

tents and will last a minimum of ten years. Perhaps even more important, they look and feel like traditional classrooms and can be built quickly, allowing children to regain a sense of normalcy as soon as possible while permanent structures are being erected nearby. Once permanent classrooms are in place, the transitional buildings will be used as school offices or community centers<sup>4</sup>.

<sup>3</sup> To promote safe hygiene in schools, each transitional school also includes boys' and girls' latrines.

<sup>4</sup> Community centers will be used for vocational education for unskilled labor and health/gender/financial education for out-of-school girls and women.

CARE is working closely with government authorities and communities themselves to determine the best locations for all new school buildings. In addition, we are helping form parent-teacher associations (PTAs) to involve parents and communities in the education process and to improve education for girls.<sup>5</sup> CARE has already opened three transitional schools in Banna, Kar and Kassey, and another 13 schools are under construction. We have helped hire a total of 58 teachers and enrolled 2,371 students for the upcoming academic year. CARE has gained permission from the NWFP provincial government to start the construction of five permanent primary and secondary school buildings serving 12 villages and over 800 girls and boys, and we anticipate that these numbers will continue to grow.

To help students cope with and prepare for future disasters, CARE plans to work with teachers and communities to include emergency preparedness and prevention in the curriculum. This includes identifying threats, such as landslides, aftershocks and future quakes, and teaching children how to respond. Children, in turn, will take this information back to their families and communities.

Psychosocial activities also are an important part of CARE's response in the aftermath of this disaster. To help children return to their normal lives, CARE is sponsoring sporting events<sup>6</sup> and establishing safe play areas in communities throughout the region. The earthquake has caused families and communities to become physically and emotionally isolated. By bringing children and their families together for sporting events, CARE is helping to strengthen the bonds between communities. In addition to providing a venue for such tournaments, CARE is also establishing playgrounds in 12 villages that will provide a safe area for boys and girls to play, away from the potential hazards of unstable buildings and debris.

### ***Water and Sanitation***

During the relief phase of our response, CARE's water and sanitation program focused primarily on immediate needs, such as the distribution of hygiene kits, jerry cans and water purification packets. Now that those basic needs have been met, we are turning to more long-term activities to help communities not only rebuild their water and sanitation infrastructure, but also to improve their facilities.

Most water supply structures and sanitation facilities were severely damaged after the quake and in need of immediate attention. CARE is working with 24 communities to build<sup>7</sup> or repair latrines for nearly 10,000 people. In the villages of Rabat and Pokol, CARE has already helped 480 families (3,360 people) build 150 new latrines. To promote a greater sense of community involvement,



*CARE has helped build more than 150 latrines, like this one, and over 75 wash rooms.*

<sup>5</sup> Education is compulsory for both boys and girls through primary school. To date, middle and secondary school facilities in the area were only available for boys. Within the next year, CARE plans to build the first middle school for girls in the Allai Valley.

<sup>6</sup> Current organized sports include two national pastimes: cricket, strictly for boys, and archery, for men and boys of all ages. CARE is working to sponsor events for women and girls as well, but in this conservative society, few social opportunities exist for women outside the home.

<sup>7</sup> Latrine coverage throughout the Allai valley was less than 10 percent, even before the earthquake.

CARE, and our partner, SRSP, meet with villagers to help determine the best location for each facility. We then supply households with construction materials and assembly instructions, but individual project participants build the latrines themselves<sup>8</sup>. CARE also offers education on latrine maintenance, as well as hygiene and sanitation.

In this densely agrarian region, water needs are not just confined to drinking water and sanitation; irrigation also plays a crucial role in the food supply for most of the population. When the earthquake struck, hundreds of miles of stone irrigation channels were destroyed, affecting tens of thousands of acres of cropland. CARE is working with local communities to help repair canals, water mills and hydro-power generators serving 39,050 people. CARE supplies the technical expertise and reconstruction management, while community members provide basic building supplies, such as stone and gravel, and labor. As of mid April, CARE has helped rehabilitate a total of six water mills, nine hydro-power generators and irrigation canals covering more than 14,000 acres of farmland and benefiting over 11,000 people.

### ***Health Care***

More than 654 clinics, hospitals and other health care facilities were destroyed in the quake-affected areas in Pakistan. To help address the immediate need for medical treatment, CARE established 41 half-way homes, where 640 patients and their families could rehabilitate from emergency medical procedures. After initial emergency treatment had been administered and most serious injuries were addressed, CARE closed the half-way homes<sup>9</sup>, but the need for medical attention in the affected area remained. CARE met with communities and our local partners to assess the situation and determine the best course of action to meet local health care needs.



*CARE is training both male and female volunteers, as well as hiring female doctors, to improve health care access for women.*

Even before the earthquake, access to health care was a significant hurdle throughout the Allai Valley. Facilities were spread out over great distances, making it especially difficult for women and children to obtain regular treatment. With the destruction of those facilities, CARE began operating a series of village-based tent clinics. Each tent clinic serves two to three villages and is staffed with CARE-trained community volunteers to administer first aid, post surgery follow-up and treatment and identification of minor ailments. A licensed physician visits each community on a weekly basis, and other trained health professionals remain on call for emergencies.

To date, CARE has trained a total of 84 volunteers who have treated nearly 2,000 patients for everything from skin diseases due to lack of proper sanitation to heart disease and influenza. CARE is also in the process of hiring traditional

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<sup>8</sup> Latrines are easily assembled and disassembled, to allow for easy relocation, should families move or expand their households.

<sup>9</sup> Tents from CARE's half-way homes are now being used as community centers for vocational education.

birth attendants to assist in family planning and pre- and post-natal care. And to provide improved access to health care for women, CARE is committed to finding and training equal numbers of male and female staff and volunteers.

### ***Livelihood Development***

For people left with no home, no job, no belongings, and in many cases, no spouse or family, what to do next became a very real and immediate issue. To help people move forward after the devastation, CARE is implementing several programs that allow survivors to not only earn a living, but also to contribute to the revitalization of their communities. Activities include:

- **Seed and fertilizer distribution.** These items help farmers to fortify crops and reduce agriculture shortages for the coming harvest. So far, CARE has delivered 9,197 kilograms of fertilizer and 47,334 kilograms of rice seed to 1,386 farmers.
- **Agriculture extension services.** CARE has hired consultants from the agriculture departments of universities in Peshawar to work with local farmers and advise them on maximizing crop yield.
- **Vocational training.** CARE is teaching masons to build earthquake-resistant structures in order to help minimize casualties as a result of aftershocks or another quake.
- **Natural resource conservation.** Landslides have been a common occurrence since the earthquake. To help deter soil erosion and prevent future sliding, CARE is procuring saplings from local nurseries and paying community members to plant them throughout the affected area. Once mature, these trees will also replenish the lumber supply that has been greatly affected by reconstruction. As of mid April, a total of 339,980 trees were planted over a total of 790 square acres.
- **Cash for work.** From early February through mid March, CARE employed 300 laborers from local communities to clear roadways and footpaths blocked by landslides. By the end of March, CARE has disbursed a total of \$6,938 in salaries to the day laborers.



*More than 300 workers in CARE's cash-for-work program have earned a total of nearly \$7,000 over the past month.*

### ***Gender Equity***

Moving forward, CARE is looking for ways to promote women in the community decision-making process and to help single women and mothers to improve their livelihoods. In the Allai Valley, traditional beliefs prevent many women from leaving their own homes or even interacting with other women. CARE is committed to addressing the specific needs and concerns of women in all aspects of our work in Pakistan, starting with gender sensitivity training for all CARE staff and our partner organizations.

In the aftermath of a disaster such as October's earthquake, emergency response training will allow CARE to open the door toward women's education. By teaching women how to safeguard their homes and their families, we will have an opportunity to introduce them to vocational training, and eventually savings and credit opportunities. CARE staff are

currently assessing needs and preparing to train community volunteers, who will conduct emergency response education. The entire process is expected to take roughly one year in the Allai Valley, and less time in other, more progressive, areas.

### ***India***

In India, where the earthquake's devastation was less acute, more than 1,400 people lost their lives and an additional 75,000 were injured. Nearly 200,000 survivors were left homeless. With generous support from our donors, CARE utilized monies from the pooled Pakistan and India Earthquake Relief Fund to deliver lifesaving emergency relief, including:

- 22,000 blankets;
- 7,500 water storage tanks;
- 2,000 hygiene kits;
- 7,500 waterproof tents;
- 10,000 plastic floor mats;
- 15,000 cold weather outer garments, called *pherans*; and
- 15,000 traditional *kangdi* heaters.

With your help, CARE was able to reach more than 37,500 women, children and men in India's hard-hit Uri and Tangdhar Districts with immediate relief. CARE did not previously work in the highly militarized area of quake-affected Kashmir. While affected areas experienced considerable destruction, CARE's response in India ended after the initial delivery of emergency supplies to more than 7,500 families.

### ***Conclusion***

CARE has 60 years of proven disaster relief experience. We were already in place in Pakistan and India before the recent crisis struck, so we know the communities and cultures, and we work well with local partner organizations. We also know that careful coordination is key to mounting an effective reconstruction effort. With the flexible resources in our Earthquake Relief Fund, CARE will continue to help hundreds of thousands of families rebuild their shattered lives.

We thank you for your generous support of these efforts.

*April, 2006*