

RAPID NEEDS ASSESMENT REPORT OF SWAT DISTRICT N.W.F.P., PAKISTAN.



Contracted by:
HOPE'87

Conducted by:
Swat Youth Front (SYF)
www.syfswat.org
syf@syfswat.org

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Executive Summary:

After the start of return process of the IDPs to District Swat, N.W.F.P., Pakistan in the month of July, 2009 and gradual improvement of the security situation in the district Swat, HOPE'87 in collaboration with Swat Youth Front (SYF) conducted a Rapid Needs Assessment between the 6th and the 11th of August, 2009. The eight person's team conducted an assessment in the seven Tehsils of district Swat namely Babozai, Kabal, Barikot, Khwazakhela, Charbagh, Behrain and Matta.

The primary focus of the assessment was to evaluate the existing social, economic, security, food security, water & sanitation and health & hygiene situation before and after the crisis. Besides providing statistics and simple analysis, this document also presents key issues related to the needs and expectations of local residents.

The core objectives of the study were :(1) to assess the general socio economic conditions of the population in Swat before and after the return (2) to gather information regarding the people's awareness about sanitation & hygiene practices (3) to assess the food security situation (4) to identify immediate needs/priorities of the victims of the conflict.

The data collection for the survey was based on a primary data collection through interview schedule/questionnaire. In total 200 respondents (83% men and 17% women) were interviewed, comprising of recently returned IDPs, people who stayed back in conflict zone and host families in the seven Tehsils of Swat.

The major findings of the assessment are as follows;

- Before the crisis 28% of the responded had a monthly income of more than 40,000 PKR (348 Euro), while only 8% had a monthly income of up to 5000 PKR (44 Euro). After the crisis only 4% has a monthly income of 30,000 PKR while 35 % have no monthly income, these 35% respondents are mostly labourers, business men, and farmers.
- Currently 96% of the respondents have access to water through piped water supply, protected and unprotected hand pumps, protected wells, protected and unprotected springs are/were the most accessible/available and expected source of water for drinking, house hold washing and livestock. 16.5% of the functioning water sources have been depleted after the crisis.
- The majority of households (144 respondents) have closed water storage facilities, 0.5% families filter the water before using, 39.5% respondents have no awareness regarding the water quality, 55% believe they are

using contaminated water, while only 5% believe they are using pure drinking water.

- 98% of the respondents do not boil the water before drinking, mainly due to lack of fuel, time consumption, devoid of facility, unawareness and in general there is no tendency to boil the water.
- The 80.9% of the household members are using family and shared latrine facilities, whereas 30.5% of men also use the open field for defecation in the rural areas.
- 83% of the household members are using only water to wash their hands before food preparation, eating and after latrine use, whereas 15% of the respondents are using water and soap to wash their hands. Only 2% do not clean their hands after defecation.
- 79% of the households dispose of their solid waste off site, while the remaining 21% dispose of it on site.
- The survey data showed that only 12.5% received NFIs and hygiene kits during the displacement and the crisis.
- 66.5% of the households have no food reserves. 33.5% have food reserves and among them 73.5% have food reserves for up to 15 days and 26.5% have food for about 15 to 30 days.
- Diarrhoea, skin rash, cold/flu, fever and respiratory problems were the most common health problems faced by the respondents within the last 15 days. 81.5% (163 respondents) have received health services from multiple facilities within the last 15 days. Among these 92 respondents received health care from the government health facilities, 105 respondents received from private clinics, while 11 respondents relied on traditional healers.
- In response to highlight top 5 priorities for next 30 days and for next 6-8 months, the households prioritized the needs in same manner, which are food, health services, hygiene kits, education facilities, water pumps & tube wells and water purification tablets, respectively.

BACKGROUND:

The Swat district has been under the spell of Talibanization, militancy and terrorism for the last three years. A powerful cleric and head of the prototype Taliban, Mullana Fazal Ullah has considerable sway over the conservative population of the region and led a campaign in Swat denouncing television cum cable network and satellite receiver, music, polio drops, women empowerment, western life style and education for girls through statements in local and national mass media and speeches on his illegal clandestine FM Radio station.

After the implementation of the Nazame Adal Regulation¹ and peace deal with government of Pakistan, the Taliban militants breached the peace agreement and seized much of the area at district Swat. Taliban seized key government offices and main squares in the area, leading Pakistan security forces to initiate a security operation in the region. The armed conflict between the army and the militants caused the major displacement of the local population including the district Swat, Buner and Lower Dir. More than 1.3 million IDPs from Swat and 2.6 million IDPs in total of Malakand region were displaced.

With gradual improvement of the security situation in district swat and the return of the IDPs, HOPE'87 in collaboration with a local NGO in Swat, "Swat Youth Front (SYF) conducted a Rapid Needs Assessments for the area between the 6th and the 11th of August, 2009. The eight person's team conducted assessment in the seven Tehsils of district Swat namely Babozai, Kabal, Barikot, Khwazakhela, Charbagh, Behrain and Matta.

The primary focus of the assessment was to evaluate the existing social, economic, water & sanitation, health & hygiene, and security situation before and after the crisis, along with identifying the immediate and future needs of the victims of the conflict for next 6-8 months.

This document contains the findings of that assessment in order to provide a "snapshot" of the situation in the district Swat regarding specific parameters. These parameters are; General information of the respondent, living status, problem faced by the returnees, availability, sources and quality of drinking water, sanitation ,health & hygiene, and assistance received by affected households. In addition to that it provides statistics and simple analysis, presents key issues related to the immediate and future needs and of local residents.

¹ The justice system based on Islamic laws agreed under the peace deal between Taliban and Government of Pakistan (GoP) specifically for the area of Swat.

OBJECTIVES OF THE STUDY:

- To assess the general socio economic conditions of the population in Swat before and after the return.
- To assess the water & sanitation, health & hygiene and nutrition situation before and after the crises/return.
- To gather information about the awareness of the people regarding sanitation & hygiene practices.
- To explore current household food security and management.
- To assess the impact of displacement on the livelihood and economy

METHODOLOGY:

The assessment methodology was based on a data collection from a primary data source in the assessment process. Data collection tool was questionnaires with structured and unstructured questions, which were used to gather information including both quantitative and qualitative data.

The total size of the sample for the household questionnaire was 200 respondents (men and women).

The randomly interviewed respondents were from the seven Tehsils of district Swat, namely, Babozai, Barikot, Kabal, Matta, Behrain, Khwazakhela and Charbagh. Owing to conservative culture, the team made sure that women were interviewed by three female enumerators in the assessment process. It is important to note that no respondent was forced to provide information against his or her will.

LIMITATION OF THE STUDY:

This was a rapid assessment which was carried out by a small team within six days – thus a number of respondents were 200.

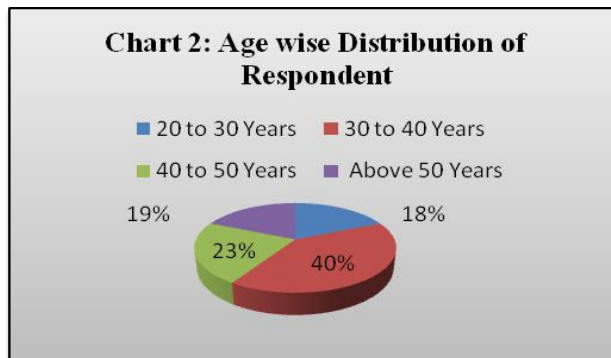
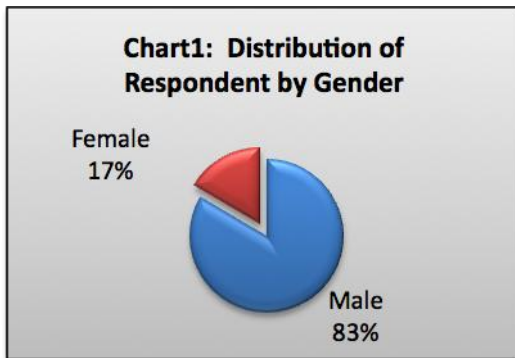
The uncertain security situation and the imposition of curfews in the area compelled the team to waive conducting assessments in certain areas of Tehsil Kabal and Tehsil Charbagh. The affected people of Tehsil Kabal and Charbagh, who are currently living with the host families / rented houses in Mingora and the adjoining areas, were interviewed.

Limited number of women was interviewed due to cultural and traditional rigidity.

Due to time limitations, busy schedule and the visit of the prime minister, chief minister, chief of army staff and others dignitaries, the government officials could not be interviewed during the assessment.

SAMPLE CHARACTERISTICS:

During the six days of assessment both men (83%) and women (17%) were interviewed (see chart 1 below for respondent distribution). Only a small number of women headed households were interviewed. That is because of cultural constraints and a lack of awareness on a part of the woman respondents. Within this sample size of 200 respondents, the majority of the respondent’s age was between 30 years and 40 years (40%). See chart 2 below for break up of age of respondents.



General Information about the Respondents:

Education:

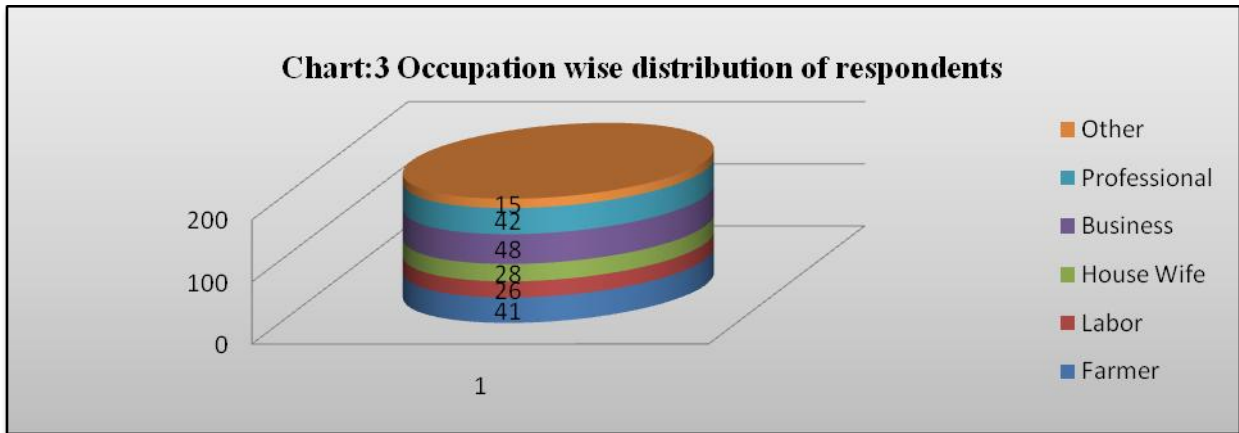
Out of 200 respondents 33.5% are illiterate as they belong to the backward and less developed Tehsils of Swat as indicated by the table 1 below. 76.5% respondents have educational background from primary to post graduate level.

Male	Female	Tehsils	Illiterate	Primary	Middle	Metric ²	Inter-mediate	Bachelor	Master	Others
44	6	Babozai	6	3	1	8	9	11	8	4
22	5	Barikot	7	2	1	6	3	4	3	1
12	4	Behrain	5	1	0	2	2	4	2	0
11	5	Kabal	8	1	1	3	0	1	2	0
10	3	Khwazakhela	5	3	1	3	1	0	0	0
42	5	Matta	21	5	3	6	9	2	1	0
26	5	Charbagh	15	2	3	7	1	2	1	0
167	33	Total in no.	67	17	10	35	25	24	17	5
		Total in %	33.5%	8.5%	5%	17.5%	12.5%	12%	8.5%	2.5%

Occupation of the Respondents:

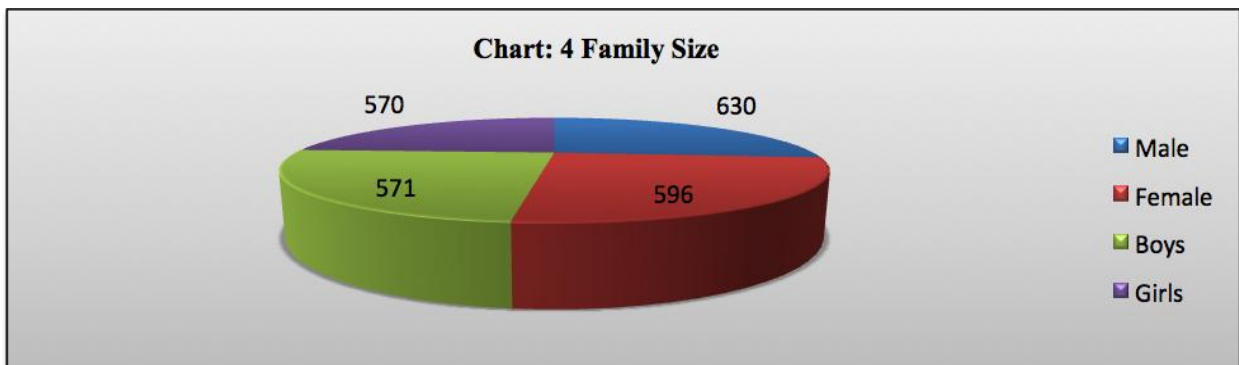
Among the respondents the majority is the business community (48 respondents) mostly from Matta, Babozai and Charbagh Tehsils. 42 respondents are professionals (doctors, teachers, journalist, engineers etc.) mainly from Matta, Babozai and Charbagh Tehsils, whereas 41 respondents are farmers mostly from Matta, Charbagh, Khwazakhela and Babozai Tehsil. Out of the total respondents 28 are house wives. Whereas 26 respondents are labours and 15 respondents had other occupation like policemen and overseas returned workers etc.

² Metric; Completion of 10 years of school education.



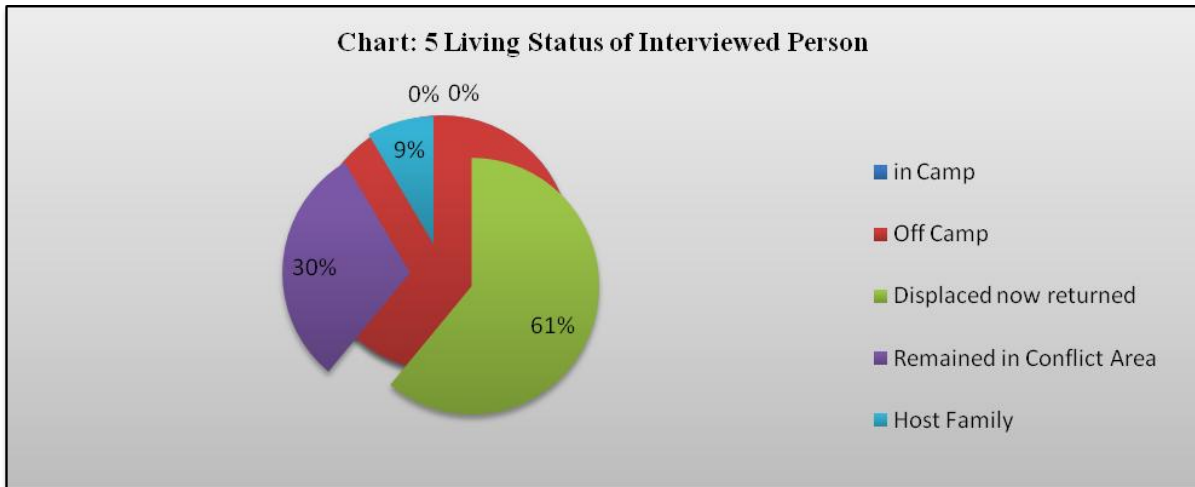
Family size:

Of the 200 responding households there are 630 men, 596 women, 571 boys and 570 girls. The average family size is 11.8 persons. The total numbers of family member is 2,367.



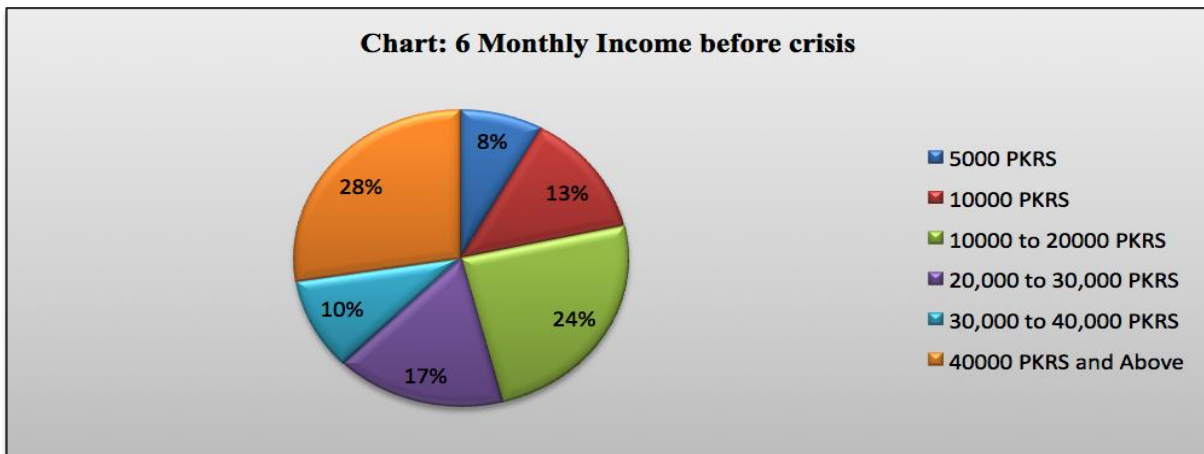
Living status of respondents:

At the time of assessment there was no camp established in the valley of Swat, meaning all respondents were living off camp. 61 % of the respondents were IDPs but now returned back home, whereas, 30% of the respondents mostly from Babozai, Matta and Khwazakhela Tehsils have never left the conflict areas. The remaining 9% of the interviewees are living with host families.

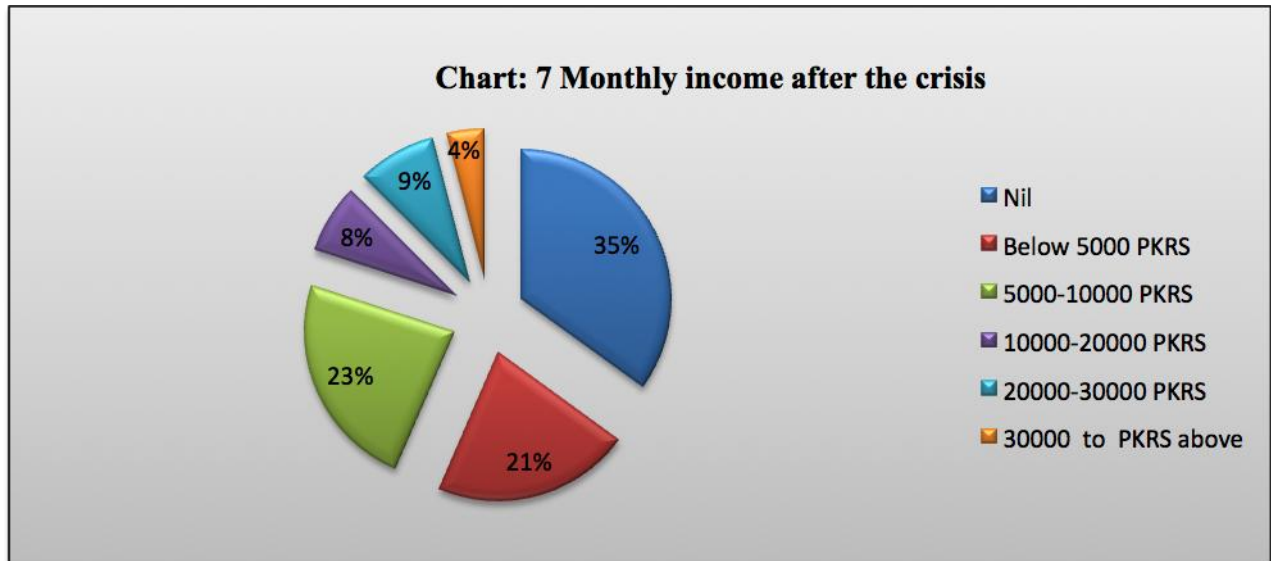


Income before and after the crisis:

Income of the households before and after the crises is based on the monthly income of the head of the family, who are mostly the men because it is a male dominated society in this area. Before the crisis 28% of the responded had a monthly income of more than 40,000 PKR (348 Euro), while only 8% had a monthly income of up to 5000 PKR (44 Euro).



After the crisis only 4% has a monthly income of 30,000 PKR while 35 % have no monthly income, these 35% respondents are mostly labourers, business men, and farmers. Continuous curfews destruction of agricultural land and fruit orchards due to security operation in the region are the major causes for the lack of income and economic activities/opportunities.



Problems and risks for the next 6 -8 months:

The respondents were questioned about the problems they are most worried about for the next 6-8 months by providing a multiple choice table, proposing key issues related to: security, health & hygiene, water & sanitation, nutrition, governance, infrastructure, agriculture and livelihood.

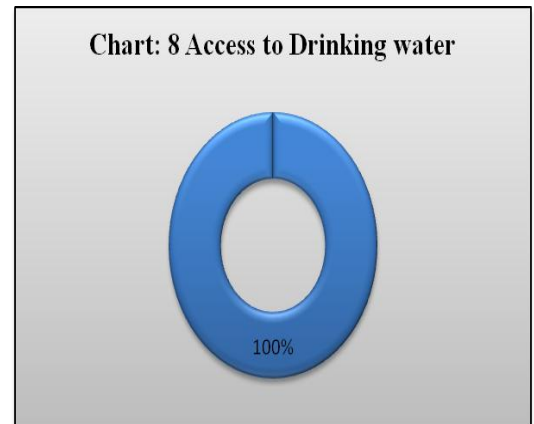
Total	Issue Mentioned	Total	Issue Mentioned
73	Continued fighting; land mines; security problems	2	Problems between different groups in village
34	Security risks in the village/ back home	58	Children's Education
19	How to restart agriculture	13	Children's problems
105	How to get Money/ work	3	Government problems
120	Is food available, food quality	3	Lacking facilities in the village
106	Drinking water availability	17	Women's Safety
13	Finding, repairing, rebuilding house	10	Others
13	Electricity	0	Do not know
4	Land problems	0	No Answer
12	Health		

The assessment indicates that the availability of quality food (120 replies), availability of drinking water (106 replies), how to get money/ work (105 replies), security problems (73 replies) and the education of children (58) are the most current and expected problems identified by the respondents for next 6-8 months.

Access to water, sources, quality & storage:

The assessment gathered information regarding the availability of drinking water sources. 96% of the respondents have access to drinking water while the remaining 4% has responded that they get water from the far flung places and hence has no easy access to drinking water and face much difficulty as far as the transportation is concerned.

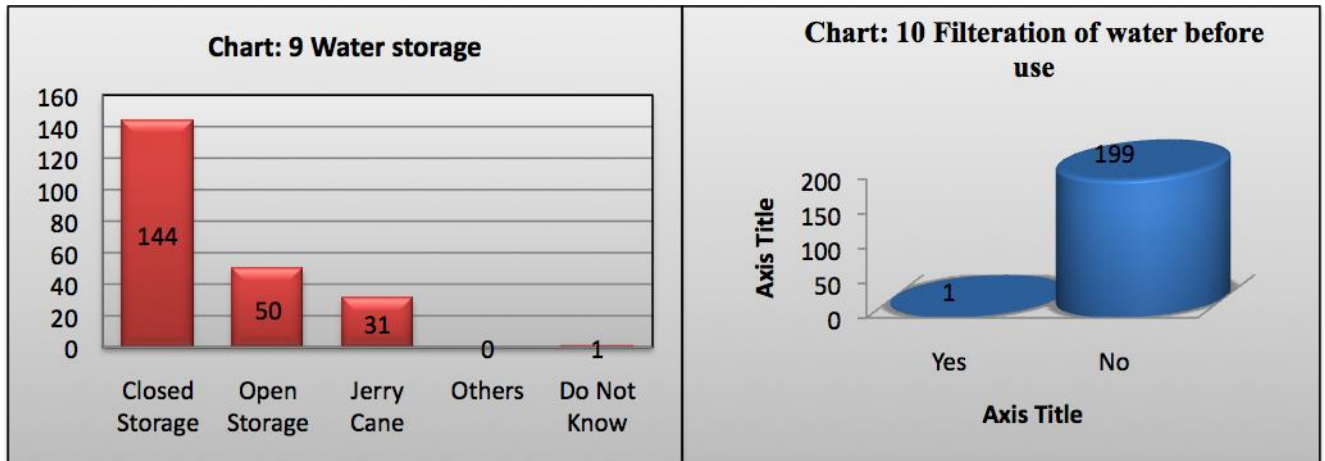
The respondents were also asked regarding the current and expected sources of drinking water and its availability as indicated in the following table:



No	Source of drinking water	Before Crises	Was it functioning?		Current source of drinking water	Expected source of water for next 6 months
			Y	N		
1	Canals/ Ponds/ Rivers	2	1	1	3	4
2	Unprotected springs	28	27	1	31	27
3	Protected Wells/ Springs	29	29		29	31
4	Un protected hand pump	12	10	2	10	14
5	Protected hand pump	43	40	3	32	44
6	Piped water supply	157	143	14	106	145
7	Tanker	5	4	1	1	4
8	Other	0	0	0	0	0
9	Do not know / No Answer	0	0	0	0	0
	Total	276	254	22	212	269

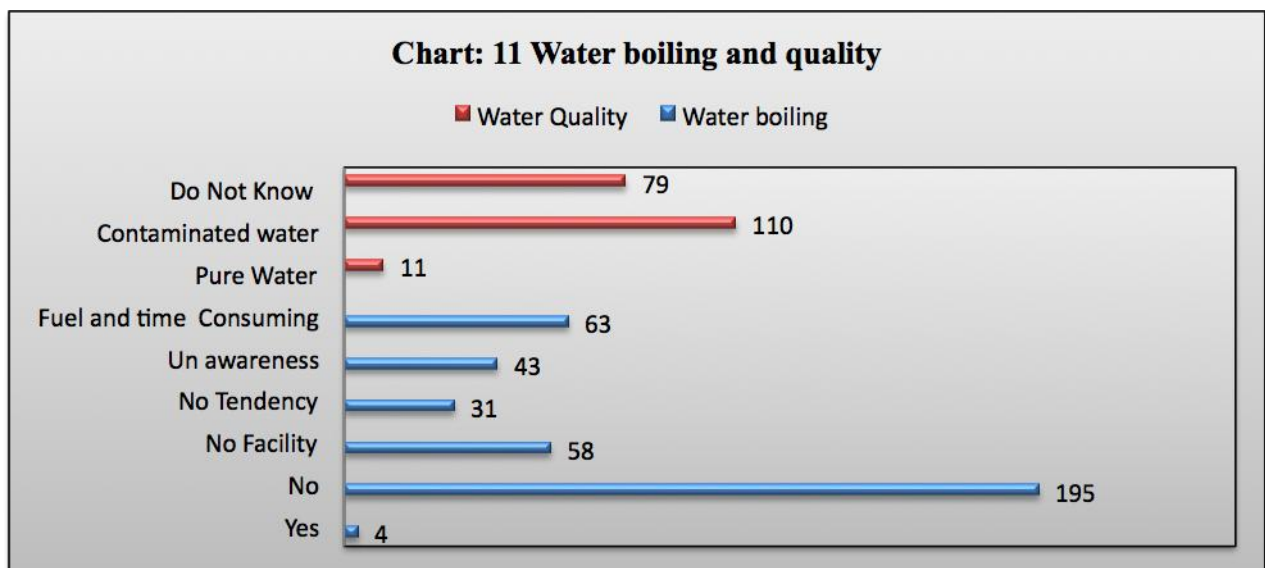
The most available and expected sources of drinking water before and after the crises were/are piped water supply, protected hand pumps, protected wells/springs and unprotected springs respectively. The data reveals that 16.5% of the functioning water sources have been depleted after the crisis. Further there is a slight shift from piped water supply to surface water and unprotected springs. The most damaged sources of water supply are piped water and protected hand pumps.

The following tables also depict information regarding water storage and filtration. The majority of households (144 respondents) have closed water storage facilities, while only 0.5% families filter the water before they use it.

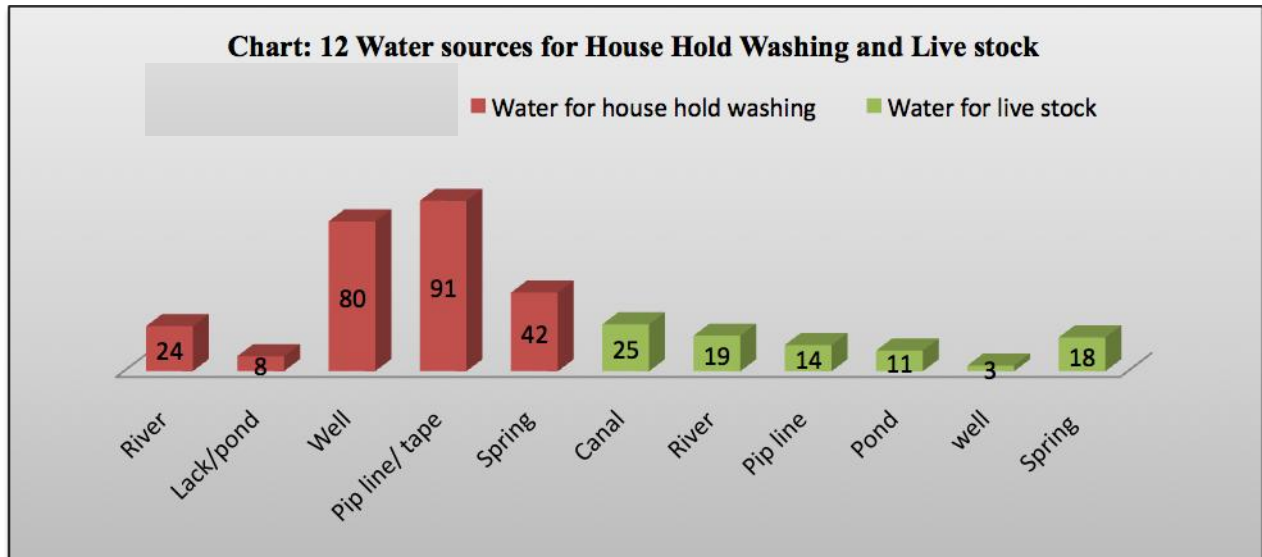


The respondents were asked about the knowledge of water quality. 39.5% respondents have no awareness regarding the water quality, 55% believe they are using contaminated water, while only 5% believe they are using pure drinking water.

The survey found out that only 2% of the respondents are boiling the water before drinking, whereas 98% are not boiling the water. The reasons behind it are mostly lack of fuel and time consumption, devoid of facility, unawareness and in general there is no tendency to boil the water.

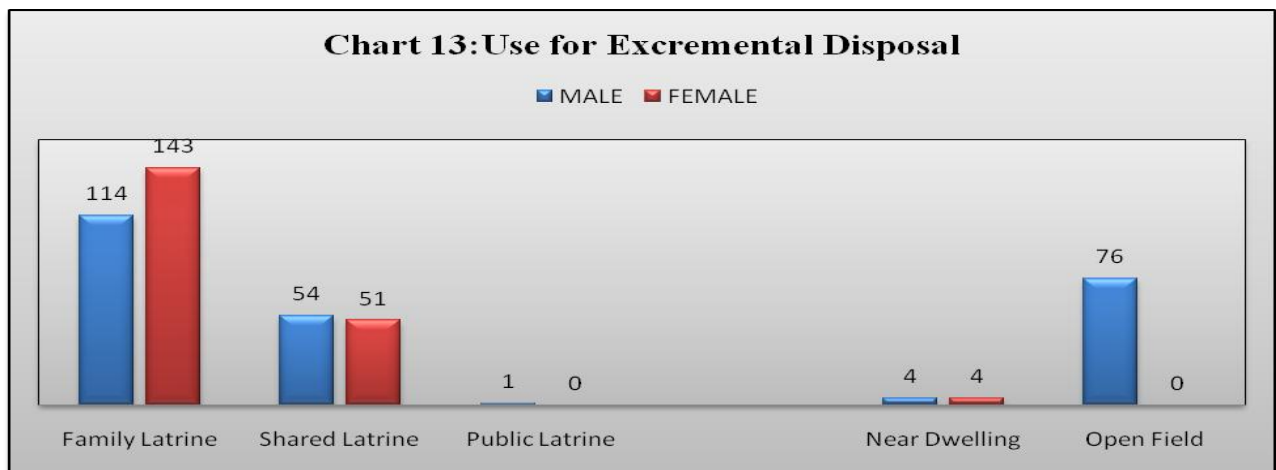


Pipelines, wells and springs are the primary sources for households for washing and canals, rivers and springs are the most commonly used sources for the livestock.



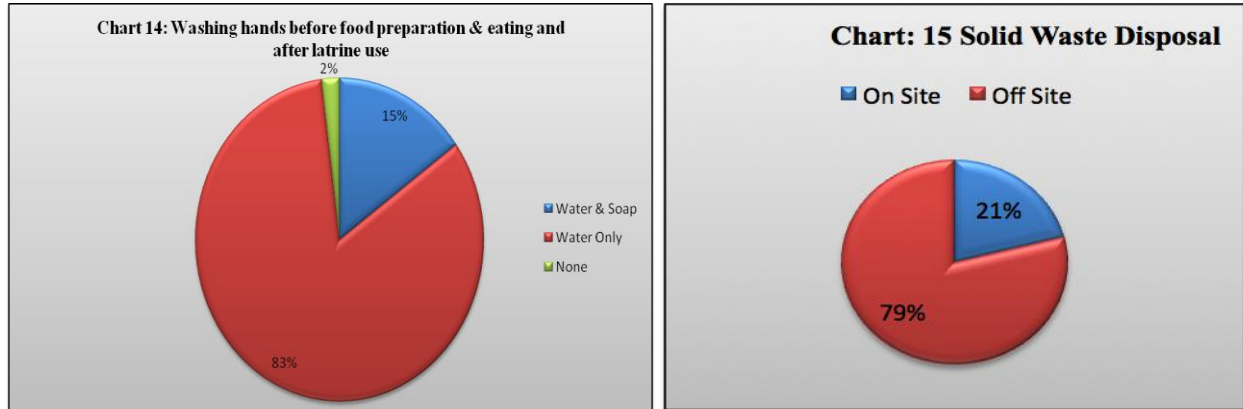
Sanitation and hygiene situation:

The enumerators assessed the availability of latrine facilities for the households. The 80.9% of the household member are using family and shared latrine facilities, whereas 30.5% of men also use the open field for defecation in the rural areas.



It was found out that 83% of the household members are using only water to wash their hands before food preparation, eating and after latrine use, whereas 15% of the respondents are using water and soap to wash their hands. Only 2% do not clean their hands after defecation.

Regarding solid waste disposal, 79% of the households remove their solid waste off site, while the remaining 21% dispose off on site.



Relief Assistance:

To discover if the respondents did receive any non food and hygiene items during the displacement/crisis, it has been identified that only 12.5% received NFIs and hygiene kits. These NFI were distributed by various NGOs and INGOs. The main items received by the households have been soap, nail cutters, washing powder, towels and coolers.

Tehsil			Distributor			
	Yes	No	NGO	INGO	Army	Other
Babozai	7	43	5	2	0	0
Barikot	3	24	3	0	0	0
Behrain	1	15	1	1	0	0
Kabal	7	9	2	6	0	0
Khwazakhela	0	13	0	0	0	0
Matta	2	45	2	2	0	0
Charbagh	5	26	4	0	0	0
Total	25	175	17	11		

Food security and nutrition:

The following table depicts that 66.5% of the households have no food reserves. 33.5% have food reserves and among them 73.5% have food reserves for up to 15 days and 26.5% have food for about 15 to 30 days.

Tehsil	Food Reserve		Food reserve		Food Management for Winter			
	Yes	No	1 to 15 days	15-30 days	Purchase	Production	Borrow	Purchase & Production
Babozai	14	36	30	20	44	0	0	6
Barikot	25	2	15	12	13	3	1	9
Behrain	5	11	6	10	11	0	0	5
Kabal	1	15	16	0	15	0	0	1
Khwazakhe la	1	12	13	0	11	0	0	2
Matta	14	33	38	9	28	0	3	20
Charbagh	7	24	29	2	28	0	0	3
Total	67	133	147	53	150	3	4	46

The following table reveals the frequency of meal intake per day for adults and children (less than 10 years of age). 36.5% of the adults and 82.5 % of the children in the households eat three meals a day, respectively. 21% of the household adults eat one time a day, 42.5% of the adults eat twice a day. 17.5% children eat two times or less per day.

Tehsil	Adult			Children under 10 years		
	1 time	2 time	3 time	1 time	2 time	3/ above time
Babozai	0	31	19	0	7	43
Barikot	0	7	20	0	1	26
Behrain	0	10	6	0	3	13
Kabal	0	4	12	0	3	13
Khwazakhe la	0	9	4	1	2	10
Matta	42	5	0	0	10	37
Charbagh	0	19	12	0	8	23
Total	42	85	73	1	34	165

Health service & facilities during & after the conflict:

The crisis has deteriorated the quality/availability of health services in the districts of Swat, Lower Dir and Bunair by the destruction of health units, migration of doctors and health workers.

The study reveals that diarrhoea, skin rash, cold/flu, fever and respiratory problems were the most common health problems faced by the respondents within the last 15 days.

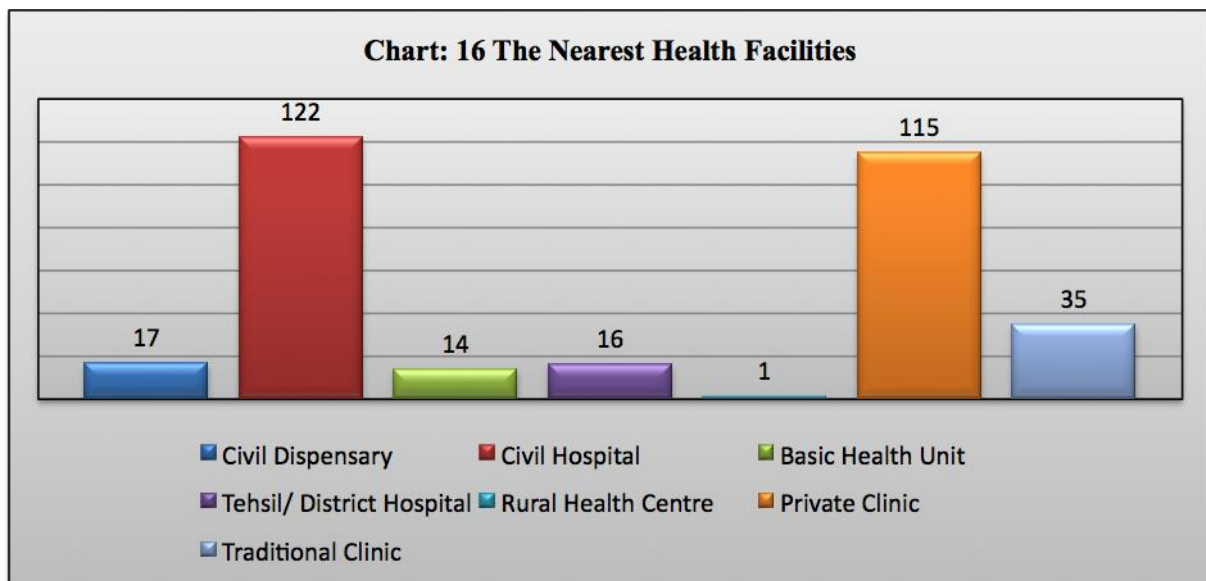
Total	Disease	Total	Disease
100	Diarrhoea	63	Skin rash
6	Injury/ Conflict Wounds	13	Lactating mother/newborn baby problems (MCH)
25	Respiratory Problem/ Cough	14	Other
62	Cold/ flu	0	Do not Know
62	Fever	15	No Answer
4	Jaundice		
5	Malaria		

To cure the afore-mentioned diseases 81.5% (163 respondents) have received health services from multiple facilities within the last 15 days. Among these 92 respondents received health care from the government health facilities, 105 respondents from Private clinics, while 11 respondents relied on traditional healers.

Tehsil	Yes	No	If Yes from where?		
			Govt Health Facility	Private Clinic	Traditional Healer
Babozai	44	6	15	34	4
Barikot	26	1	20	24	0
Behrain	9	7	6	4	1

Kabal	15	1	8	6	3
Khwazakhela	9	4	4	4	1
Matta	33	14	21	17	2
Charbagh	27	4	18	16	0
Total	163	37	92	105	11

Before the crisis the rural population had access to Basic Health Units (BHU) and Rural Health Units (RHU). At the time of this assessment only 4.6% have access to the nearest BHUs and RHU. 10.9% have received treatment from traditional healers. Nearest access for 38% respondents is a civil hospital located in Saidu Sharif and for 36% the nearest health service available is private clinics. For the remaining 10.5% the nearest health facilities are civil dispensaries and Tehsil hospitals.



Households' priorities:

During the assessment, the team asked the respondents to identify five priorities according to their needs for the next 30 days and for 6 to 8 months. The need for the next 30 days and for 6-8 months were prioritized by the households in the same manner, which are food, health services, hygiene kits, education facilities, water pumps & tube wells and water purification tablets. The table below details the results.

Items	In next 30 days			In 6-8 months		
	Low	Med	High	Low	Med	High
Food	7	31	152	3	20	126
Shelter	3	3	9	2	1	8
Tool kit (axe, spade, hammer, saw, plough etc)	1	7	4	1	3	5
Kitchen utensils (bucket, pots, spoons etc)	4	17	11	1	8	19
Stove, fuel, lighting	1	5	3	0	1	7
Hygiene kits (laundry & bath soap, towel etc.)	5	48	90	3	32	84
Educational items (umbrella, school bag etc)	2	8	9	0	6	10
Poultry (chicken, ducks etc)	2	1	0	0	1	1
Livestock (cows, goats etc)	2	9	18	0	4	20
Furniture	1	1	0	0	1	0
Clothes	0	6	0	0	1	4
Seeds / fertilizers	2	7	11	0	7	9
Water pumps / tube wells	6	22	38	0	12	42
Water purification tablets	0	14	31	2	8	36
Health services	6	20	105	2	13	114
Education facilities – schools /orphanage	1	8	47	0	5	46

Conclusion:

The survey was conducted in seven Tehsils of the district Swat and 200 respondents were interviewed and during the interview separate questionnaires were used to record observation of the team to support or contradict the respondent's responses. Based on the analysis of findings the following conclusions are made:

The crises have severely hit economy of the area. Swat's main economy has been based on three specific sectors — tourism, emeralds and orchards. When the operations started in May 2009, the wheat crop and the fruits, mainly apricots and plum, were about to be harvested. The tourism, emeralds and fruits were the mainstay of Swat's economy but both have been heavily affected; especially orchards being a cash crop has affected the farmers even more. Before the crises those household who were earning monthly income of more than 40,000 PKR, are now hardly earning 5,000 PKR. A vast majority of household male members have now no source of income. These facts call for immediate interventions for economic revival as societal recovery will no doubt take a long time.

96% of respondents have access to water mostly from rivers, unprotected springs, wells and piped water. The study finds out that 16.5% water sources have been depleted after the crises. 98% are not boiling the water mainly due to lack of fuel, time consumption, devoid of facility, unawareness and in general there is no tendency to boil the water.

The study assessed the sanitation and hygiene situation after the complex emergency situation in Swat. An overwhelming of male members in rural areas do not use latrine as they commonly use open field for defecation and very few use water and soap after defecation. This shows lack of awareness in the general masses regarding using the safe hygiene practices in preventing common diseases. Similarly, solid waste is mostly disposed off on site, which indicates a poor solid waste management in the communities.

Food security is the main issue of population as very few households have food reserve for coming months. The finding reveals that for their daily food consumption great number of respondents rely on purchase of food items where they are already suffering from financial crises.

The assessment shows that diarrhoea, cold flue, fever, skin rashes and respiratory problems were the common health problems faced by the majority of households and in last 15 days. Due to unavailability of doctors & health staff and shortage of medicines the access to BHU and RHU units in the respective areas has declined, leading to increased burden on two Civil Hospitals of district Swat situated at Saidu Sharif (capital of district Swat).

During the assessment the respondents prioritized food, health services, hygiene kits, education facilities, followed by water pumps, tube wells and water purification tablets as immediate needs for next 30 days and for next 6-8 months.

The civilian exodus in large numbers in the area and especially in district Swat caused shortage of transport and exponential increase in the fare rates. The most vulnerable and poor people have no means and resources to bear such heavy expenditures and they have no other options, but to travel by foot. For example it is extremely difficult for returnees like women, especially the pregnant women, children and old people to pass the 35 kilometres distance from Landakai to Mingora city by foot.

By reviewing and analyzing the entire variables one comes to the conclusion that there is a great need for intervention in these areas, holistically.