The programme supports the reconstruction efforts after the earthquake that devastated parts of Kashmir and Northern Pakistan in October 2005. UNICEF seeks to rebuild 55 health centres, train and employ 4,000 community health workers, construct water systems for some 4,000 schools and communities, build 500 elementary schools, support the school system and strengthen a range of protection networks for children. About 1.5 million children live in the earthquake-hit areas. All will, to varying degrees, benefit from the programme.

Summary of UNICEF financial needs for 2008

<table>
<thead>
<tr>
<th>Sector</th>
<th>US$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and nutrition</td>
<td>34,571,000</td>
</tr>
<tr>
<td>Water, sanitation and hygiene</td>
<td>8,203,000</td>
</tr>
<tr>
<td>Education</td>
<td>26,202,000</td>
</tr>
<tr>
<td>Child protection</td>
<td>5,277,000</td>
</tr>
<tr>
<td>Total*</td>
<td>74,253,000</td>
</tr>
</tbody>
</table>

* The total includes a maximum recovery rate of 7 per cent. The actual recovery rate on contributions will be calculated in accordance with UNICEF Executive Board Decision 2006/7 dated 9 June 2006.
1. CRITICAL ISSUES FOR CHILDREN

Pakistan suffered its worst ever natural disaster on the morning of 8 October 2005, when an earthquake measuring 7.6 on the Richter scale struck the vast valleys and hilly areas of Pakistan’s North West Frontier Province and Azad Jammu and Kashmir. An estimated 73,000 people died and some 150,000 people were seriously injured; 42,000 children were orphaned; and some 3.3 million people were left homeless. Most physical infrastructure was devastated with more than 500 health delivery facilities and 6,000 schools destroyed. Water systems were also badly hit with some 3,500 of them destroyed or severely damaged.

An efficient six-month emergency relief effort, followed by a large-scale early recovery programme, has ensured good relief and rehabilitation results in the two years following the earthquake. The emergency phase lasted through the first winter, and extraordinary collective efforts from all involved agencies prevented a second wave of suffering and deaths following the quake.

The earthquake programme now seeks to rebuild infrastructure under the motto ‘Build Back Better’. UNICEF will rebuild and re-equip schools, rebuild and restaff damaged health centres, train a network of female community health workers, rehabilitate rural water systems and ensure adequate public and communal protection measures for vulnerable groups and children. If work in the rehabilitation stage succeeds as well as during relief and early recovery, then work in post-earthquake Pakistan would be among the most successful disaster relief and rehabilitation programmes ever to be launched.

2. KEY ACTIONS AND ACHIEVEMENTS IN 2007

UNICEF has continued to respond to the humanitarian needs in the early recovery phase for the earthquake with a focus on the priority areas of health and nutrition, water, sanitation and hygiene, education and child protection.

In health and nutrition, UNICEF supported the basic services of the Ministry of Health. This implied continued support to the expanded programme on immunization (EPI) and supply and staff support to ensure that rural health services continued to operate from tents and temporary shelters. The programme also identified and started training some 2,600 rural female health workers and constructing permanent health centres.

Child-friendly spaces, set up by UNICEF in tented facilities, continued to provide educational, recreational and counselling services to vulnerable children in the post-traumatic period of the emergency. The programme also started work on reform of policies, laws and enforcement systems to protect children in the earthquake areas from violence, abuse, neglect and exploitation.

UNICEF’s education programme provided material support to schools and students. Some 5,000 tents were supplied with accompanying educational equipment to be used for classrooms in communities without school buildings. UNICEF also constructed about 100 temporary classrooms for communities where school tents were not a practical solution. And UNICEF started construction work on 25 elementary schools. UNICEF also supported a range of training components for different groups of people in the school community.

UNICEF’s water, sanitation and hygiene programme installed rural water systems in affected communities. Some 500 schemes were completed and another 300 started. Water and sanitation facilities were provided to some 2,500 tented schools to ensure that education would not suffer in spite of the earthquake. UNICEF supported hygiene and sanitation promotion programmes to ensure behaviour change.

3. PLANNED HUMANITARIAN ACTION FOR 2008

**Coordination and partnership**

All agencies work under the general guidance of the Earthquake Reconstruction and Rehabilitation Authority (ERRA), who coordinates all post-earthquake rehabilitation work. UNICEF also coordinates closely with UN agencies, technical government departments and NGOs that implement the programme.
Regular programme
The earthquake programme is closely linked with the Pakistan Country Programme. The two programmes seek to tackle the same issues, though the earthquake programme naturally has a larger infrastructure rebuilding programme than the regular programme. The UNICEF staffing structures in Islamabad are now integrated, so that the same sections work for both programmes.

Health and nutrition (US$ 34,571,000)
Some 500,000 people will benefit from the following services and outputs:

- Eighty per cent of children and families in target areas will practise behaviours that are essential to prevent and manage illness, so that they will achieve their full physical and intellectual potential. This will be achieved through persuasive personal communication of some 4,000 trained, professional female community health workers who will work with women and children in the target communities. The health workers will be local women who will enter the programme with basic education. The programme will train them as community health workers, and they will then operate directly in the communities with a specifically assigned number of about 100 families per worker. The health workers will focus their work on health education and preventive medicine.

- At least 400,000 people will have access to primary health-care services through stationary health facilities and community-based outreach services. UNICEF will construct 50 basic health units and five of the slightly larger rural health centres. These facilities will generally be placed in rural areas and have adequate medication, equipment and supplies to provide essential health services for the first 12 months. All static expanded programme on immunization (EPI) services will be integrated in these facilities to ensure full vaccination coverage for the relevant target populations. The health workers described in the first bullet point will also contribute to the provision of health services, as they will perform basic diagnostic and curative functions.

- The district health management systems will be strengthened through a wide range of activities: 120 senior health managers will be trained, health facilities will be equipped with IT supplies and equipment, and key baseline data will be collected and assessed. All efforts will be made to ensure thorough monitoring of programme developments so that the programme will have a learning function for the wider health community as well as benefiting the target communities. The programme’s overall aim is to serve as a long-term model for primary health-care development in Pakistan on a national level.

Water, sanitation and hygiene (US$ 8,203,000)
Some 600,000 people, particularly women and children, will be reached through the following key activities and outputs:

- Schoolchildren in some 1,000 elementary schools will have access to basic water and sanitation facilities with water taps and toiletry installations in all UNICEF-supported permanent, temporary and tented schools. The programme will either extend water connections to schools from existing water systems, or build and create new systems. These systems most often use surface water sources rather than well-drilling. Entire communities also stand to benefit from the new water systems, as pipes can then be extended from school systems to community water points as well. Training will be provided to 6,800 schoolteachers to be better able to promote and advocate hygienic behaviours among their students, and other child-to-child activities for hygiene promotion will be arranged. This programme has a positive influence on girls’ school attendance, as inadequate sanitary facilities are a significant deterrent for girls’ enrolment and retention in education.

- Some 500 communities with about 600,000 inhabitants, where water systems were either damaged or destroyed, will have their old systems restored or new water systems constructed. Most of these communities are located in hilly terrain where water is available, but not easily accessible, from brooks and rivers. The impact of the restoration of these water systems is immense and goes beyond the mere convenience of having easily accessible water. Both child health and sanitation, and the workloads for women, benefit. Sound hygienic practices depend totally on the availability of water. And, fetching and carrying water long distances is traditionally women’s work in the target areas. When this time is freed for other activities, then the quality of life for women increases correspondingly.

- Family-level hygiene and sanitation practices determine the overall health of communities. The programme will therefore work with partners to ensure that some 1.5 million people are reached with
appropriate hygiene messages on the importance of using clean water. Other hygiene messages, construction and use of sanitary latrines, handwashing with soap, the connection between hygiene and diarrhoeal diseases and related themes will also be promoted.

- All health centres in the targeted communities will also have access to clean water piped to the centres.

**Education (US$ 26,202,000)**

A total of 400,000 earthquake-affected children and 20,000 teachers will benefit from the programme through the following key activities:

- Some 10,000 schools were damaged or destroyed during the earthquake, and these will now be rebuilt. Many actors will participate in this ambitious rebuilding programme. UNICEF has agreed with the authorities to construct, furnish and re-equip 500 elementary schools in five districts. The schools vary in size from two to five classrooms, and most are located in remote and inaccessible areas. UNICEF has produced child-friendly school designs for permanent school buildings in the spirit of the ‘Build Back Better’ strategy. Initial designs are for brick and mortar buildings, and light steel frame structures may be used for construction in places close to geological fault lines.

- The above rebuilding of the school will take time, and in the mean time education takes place in temporary shelters. UNICEF will support these temporary shelters with provision of tents to be used as classrooms. UNICEF will also construct basic classrooms of sheet metal and plywood in weather-beaten places where tents are not a practical solution. UNICEF will provide 4,000 such classrooms, and the majority of these will be tented. UNICEF will also provide educational equipment, both the ‘school-in-a-box’ set and other supplies, such as schoolbags and exercise books for children, with each classroom. Through maintaining schools in temporary structures UNICEF will also sustain and increase demand for education in the affected areas to ensure that enrolment rates will not drop following the earthquake.

- UNICEF will also support the non-material components of education development in the earthquake-hit areas. Support here will include teachers’ training; some 20,000 primary schoolteachers will complete training on psychosocial skills and on establishing and maintaining well-managed, supportive multigrade school environments in temporary structures. The programme also includes a component to rebuild the education management and administrative systems in six districts, as these too were severely damaged in the earthquake.

- There will be emphasis on creating inclusive schools with healthy learners. The health status of the schoolchildren will be monitored, and referral links will be established to the health systems and for nutritional interventions in 2,400 temporary schools. De-worming, for example, will be pursued. Though local topography and terrain are sometimes prohibitive and limit access to the schools, the needs of learners with disabilities will still be kept in mind.

**Child protection (US$ 5,277,000)**

It is estimated that some 42,000 children lost one or both parents in the earthquake and that 23,000 acquired long-term or permanent disability. For these and other particularly vulnerable children the programme will:

- Establish a comprehensive and integrated protective environment to ensure that children will not fall victims to violence, abuse, neglect or exploitation from family and community level to the district level in six target districts. Parents and caregivers of vulnerable children will be empowered with knowledge on parental skills, child rights and child rearing to enable them to fulfil their protective roles.

- Access to inclusive and non-discriminatory basic services for 60 per cent of the orphans and other children vulnerable to violence, abuse, neglect and exploitation will be established in severely affected areas in six districts. Some 1,800 intersectoral government officials will be trained on child protection issues such as birth registration, gender-based violence, orphaning, referral and child rights.

- Strengthen policies, laws and enforcement systems to protect children in earthquake-affected areas from violence, abuse, neglect and exploitation. There will be new policies on family-based care for orphans and other vulnerable children, and there will be standards and guidelines for use of institutional care as a last resort. And, 150 government officials will be informed about the legal and policy frameworks involving orphans and other vulnerable children.

- Monitor, assess and report on child protection interventions undertaken in the best interests of the child. Thus monitoring systems will be developed and put in place at federal, provincial, state and district levels. These will be reviewed and reported on quarterly with government agencies and other implementing partners.