This Protection Analysis Update has been prepared by the Protection Sector Pakistan in collaboration with the GBV Child Protection Sub-sectors.
1. INTRODUCTION

Unprecedented torrential rains in Pakistan starting in June 2022 triggered one of the worst floods in decades in the country. Meteorological organizations reported that nationwide rainfall during the 2022 monsoon season is 2.87 times higher than the national 30-year average. It is estimated that over 33 million people, around 15% of the total population, have been affected by floods, causing human and livestock casualties. Authorities report that more than 1,600 people have died and 12,865 have been injured since mid-June 2022, including 579 children killed and over 4,000 children injured. There has been widespread destruction of homes, with more than 2 million homes damaged or destroyed, and infrastructure, including roads, health clinics and schools. More than 7.9 million people have become internally displaced persons (IDPs), of whom nearly 600,000 have been living in relief camps and millions living in thousands of other makeshift temporary sites.

In light of the above, the purpose of the first Protection Analysis Update (PAU) is to:

1. Present the methodology for determining People in Need (PiN) and prioritisation of districts for protection interventions based on the Global Protection Cluster Severity Score methodology;
2. Prioritise protection risks identified through the Multi-Sectoral Rapid Needs Assessments (MSRNAs) and informed by the Protection Analytical Framework (PAF) developed by the Global Protection Cluster which aims to track a standardised set of protection risks across emergencies; and
3. Propose recommendations to address the prioritised protection risks.

This report has been developed through a desk review of data and reports from various sources including Pakistan Protection Sector member monitoring reports, the Multi-sectoral Rapid Needs Assessments (MSRNA) and other secondary sources. Through this analysis, key protection risks are identified to inform humanitarian response planning led by the Government of the Pakistan (GoP), prioritize protection interventions, identify areas of intervention for strengthening mainstreaming efforts and guide advocacy. It is noted that operational constraints have impacted data collection required for gathering information among humanitarian actors and local authorities. Verification of displacement figures in particular is challenging given access constraints in the flooded affected areas of the country.

2. CONTEXT

The Pakistan Protection Sector has used a severity scale methodology to calculate the number of People in Need for protection services as a result of the floods. The severity scale is a measuring tool to score and identify the geographical areas most affected by the crisis. The severity ranking used by the Protection Sector is the same as the JIAF Inter-sectoral severity scale (from level 1 up to 5 as the most critical). Indicators included: whether the government has declared an emergency in the district, the percentage of population potentially exposed, the number of damaged houses, percentage of population displaced, the consolidation of pre-existing district level child protection and GBV data, and the IPC alert analysis. In addition to this, consideration was given to government-prioritised districts, districts measuring Severity level 3 and above were included in the calculation of the Protection Sector PIN. As such, the Pakistan Protection Sector estimates that 13.5 million people are in need of protection in Pakistan, of which 54% are children.

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The 15 districts have been classified in the highest category of severity 5 are: Kashmore, Shikarpur, Jacobabad, Kambar Shahdad Kot, Larkana, Dadu, Naushahro Feroze, Shaheed Benazir Abad, Jamshoro, Thatta, Sujawal, Mirpur Khas, Umer Kot in Sindh Province and D.I Khan in Khyber Pakhtunkhwa. The 9 districts that have been classified as severity 4 are: Gwadar, Harnai, Kharan, Killa Abdullah, Nushki, and Panjgur in Balochistan, Tank in Khyber Pakhtunkhwa, and Badin, Sanghar in Sindh.
3. PRIORITY PROTECTION RISKS

<table>
<thead>
<tr>
<th>Protection Risk</th>
<th>1. Forced Displacement</th>
<th>2. Gender-based violence (GBV) &amp; Access to GBV services</th>
<th>3. Theft, destruction of personal property and loss of civil documentation</th>
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</thead>
</table>
| Psychological Distress | Harmful coping mechanisms for children | Protection risk 1: Forced Displacement

Multi-Sectoral Rapid Needs Assessments (MSRNA) were conducted utilizing key information interview (KII) methodology to advise programming and strategy for humanitarian actors and government in a quickly changing environment. The first MSRNA was conducted in Baluchistan in August 2022 and was further rolled out in Sindh, Punjab and Khyber Pakhtunkhwa in October 2022. According to the findings on the MSRNAs informed by the Global Protection Cluster Protection Analytical Framework (PAF), as well as field reporting and assessments conducted, the prioritized Protection Risks are identified as:

- Forced Displacement
- Gender-based violence (GBV) and access to GBV services
- Theft, destruction of personal property and loss of civil documentation
- Psychological distress
- Harmful coping mechanisms for children

Approximately 7.9 million people have been estimated to have been displaced as a result of the flooding. The displacement ratio was significantly higher in Sindh where over 40% of the affected population has been displaced. The districts which were reported to have the highest proportion of those displaced include Dadu, Jamshoro, Kambar Shahdadkot, Nowshero Feroze, Sanghar and Shaheed Benazirabad.

Persons living with pre-existing vulnerabilities face higher risks in disasters and in situations of displacement. Persons living with disabilities are disproportionately more likely to be left behind in emergency responses and to fail to benefit from humanitarian services due to a range of environmental, physical and social barriers. According to the ADDTF, approximately 5 million persons living with disabilities have been affected by the floods as well as 2 million elderly people aged above 60 years. In addition, transgender individuals frequently encounter barriers accessing health services, including mental health and psychosocial support (MHPSS) services, as well as services that are respectful of their identities and appropriate for their health needs.

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6 2022 Multi-Sector Rapid Needs Assessment September 2022
7 Findings from the survey with humanitarian actors on the inclusion of older people and persons with disabilities in the flood response, Age, Disability and Diversity Task Force, October 2022, pages 2-3
In districts with a high proportion of displacement, the key protection risks that were reported by key informants include the below.

### Reported risks in districts with most displacement

<table>
<thead>
<tr>
<th>District</th>
<th>Inter-communal disputes</th>
<th>Theft/Robbery/Looting</th>
<th>Extortion</th>
<th>Physical assault</th>
<th>Harassment</th>
<th>Treatment by humanitarian workers</th>
<th>Gender based violence</th>
<th>Human trafficking</th>
<th>Increase in child marriage</th>
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<td>Dadu</td>
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<td>Shaheed Benazir Abad</td>
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In districts with a high proportion of displacement, the specific concerns affecting women and girls reported by key informants include the below.

### Most reported risks affecting women and girls in districts with high displacement

- Lack of information pertaining to...
- Women and girls are not consulted...
- Priority for aid distribution given to...
- Increase in child marriages
- House/dwelling is insecure/has no...
- Not enough privacy at home
- Unable to access services/resources
- Trafficking
- Being asked to marry by their...
- Security risk in the place where you...
- Risk of attack when moving within...
- Risk of attack when travelling...
- Violence in the home
- Sexual Violence/abuse
- No safe place in community

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Dadu  
Jamshoro  
Kambar Shahdad Kot  
Naushahro Feroze  
Sanghar  
Shaheed Benazir Abad
As the majority of the displaced and affected families reside outside formal camps, many of them sleep on the roads, on open spaces or in makeshift accommodations without basic services, including WASH facilities, and very limited privacy and security. This exposes them, children in particular, to physical risks and to unsafe and unhealthy environments. Risks of animal bites (mainly from wild dogs and snakes) rank high in problems described by key informants, in addition to the potential spread of water and vector-borne diseases.

According to 7% of the key informants, there were few children who were not living with their parents (neither father nor mother) or usual caregivers because of floods. Out of those key informants, two-thirds reported that most children separated from their usual caregivers were being cared for in kinship/extended family care arrangements, 10% mentioned neighbors, 7% reported community members and 8% child-headed households.

Capacities to address the protection risk

MSRNA conducted in Sindh, Khyber Pakhtunkhwa and Punjab measured perceived needs to enable those displaced to return home. 34% of key informants stated that the key need is rehabilitation of homes in the area of origin, 26% indicated improved livelihood opportunities in the area of origin, 20% indicated improved access to basic services in the area of origin and 13% indicated improved safety and security in the area of origin. Districts which indicated high needs for improvements to access to livelihoods and basic services include Badin, Jacobabad, Jamshoro, Kambar Shahdadkot and Nawshero Feroze in Sindh province.

In a recent development, the GoP has announced plans to relocate IDPs from various small spontaneous sites to the larger “tent city” settlements established by the GoP in the early weeks of the response. More information on this relocation process, the location of all of these “tent cities” and the protection concerns therein is being sought. Meanwhile, in some areas, it is reported that some IDPs have begun returning to their home areas. More information on return movements, locations, and protection concerns in areas of return is required.

Protection risk 2: Gender-based Violence (GBV) & Access to GBV Services

Displacement resulting from damaged houses has a strong impact on women and girls in terms of privacy, safety and security, and access to basic needs. The Pakistan Demographic and Health Survey (PDHS) 2017-18 reflects that 34 percent of ever married women (age 15 to 49) have experienced spousal physical, sexual, or emotional violence with province-wise prevalence at 48% in Balochistan 43% in Khyber Pakhtunkhwa, 18% in Sindh and 32% in Punjab. Women and girls are
considered to be the most at-risk across the affected provinces. Evidence from global humanitarian crises confirm that GBV risks are exacerbated during such situations. Although the MSRNA was not intended to estimate GBV prevalence, the PDHS provides a baseline to assess the pre-existing GBV situation in the country.

Adolescent girls during the current crisis situation are vulnerable and at increased risk of coercion, GBV and child marriage. Moreover, due to the disruption to the education system and damage to the infrastructure caused by flooding, a substantial increase in the number of out of school adolescents is expected, leaving them without a routine and more vulnerable to psychological issues (trauma, stress, anxiety etc.) and protection risks. Furthermore, without essential information about their sexual and reproductive health, their health and wellbeing will be at risk.

Security concerns for women and girls exist in all provinces of the country, with the highest levels of concern in Sindh province, and particularly in the District of Shaheed Benazir Abad where respondents reported that the targets at most risk of violence are girls (95%) and women (88%) with no safe place for women and girls

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8 The PDHS 2017-18 interviewed households, 94% of ever-married women aged 15-49 in Pakistan, 97% in Azad Jammu and Kashmir, and 94% in Gilgit Baltistan were interviewed. In the subsample of households selected for the male survey, 87% of ever-married men aged 15-49 in Pakistan, 94% in Azad Jammu and Kashmir, and 84% in Gilgit Baltistan were successfully interviewed.

9 23,900 schools were damaged or destroyed in the floods, with more than 5,000 still used as relief camps (UNICEF Sit Rep - Sep, 2022)

10 22.8m adolescents aged 5-16 are out of school in Pakistan (Pakistan Education Statistics 2016-17)
in their community and very poor knowledge about GBV referral services available (80%). Various forms of GBV, including sexual violence, were reported to be a risk. There were reportedly limited consultations with women and girls on their safety and wellbeing needs, which contribute to rising GBV risks if the humanitarian response does not meet their specific needs or provide them with adequate/safe access to services.

When asked if there are any specific concerns affecting women / girls, respondents replied one of the most concerning issues is the lack of safe place in community (62%), and therefore, the spread of harassment and sexual violence/abuse in their home (39%) and risk of attack when travelling outside home (51%).

**Capacities to address the protection risk**

The pre-existing GBV issues in flood affected have several contributing factors including socio-cultural barriers, economic dependency, lack of information, accessibility as well as lack of existence of support systems such as health care and psycho-social support services. Although, the GBV prevalence statistics do not represent the full extent of cases, the risk of gender-based violence is exacerbated in times of emergencies as the public services become overstretched, gender norms that regulate social behavior are weakened, separation of family members, lack of opportunities for meaningful participation and decision making for women, including in accessing relief services and goods are among few of several contributing factors. The worsening of the situation is further highlighted in the results of the MSRNAs. Women with disabilities have been found to form one of the most socially excluded group in any displaced or conflict-affected community. They have difficulty accessing humanitarian assistance programs, due to a variety of societal, attitudinal, environmental and communication barriers, and are at greater risk of violence than their nondisabled peers. Women and girls with disabilities are ‘particularly vulnerable to discrimination, exploitation and violence, including GBV, but they have difficulty accessing support and services that could reduce their risk and vulnerability.

The majority of respondents do not know what GBV services are available to them in their area (Sindh 85%, Punjab 69% KP 82%), which severely limits the ability of women and girls to access lifesaving GBV services. Of those who reported knowledge of the GBV services available, Punjab had the highest levels of awareness about the availability of multi-sectoral GBV services, in particular awareness of health and security services. In KP province, there were the highest levels of awareness about Psycho-social support services. Overall,
there was the most knowledge of how to access GBV services through health entry points.11

Protection risk 3: Theft, destruction of personal property and loss of documentation

Theft, robbery and looting is another protection risk flagged by key informants in affected areas (37% of respondents). The nature of this protection risk is linked to the overall insecurity of living in a situation of displacement, without secure shelters, and in some areas pre-existing security risks. This is reflected in the priority needs identified by key informants who identified the need for further emergency shelter and tents (both were prioritized by 57% of the key informants).

Factors that may be contributing to concerns about risks related to theft, robbery and looting include challenges in accessing humanitarian aid which is due to political interference as reported by 31% of key informants, disputes between recipients at distribution points as reported by 26% of key informants. Lack of documentation as reported by 20% of key informants across Sindh, Khyber Pakhtunkwa and Punjab due to loss or destruction also poses a barrier to accessing humanitarian aid. 29% of the key informants stated that children have lost their civil documentation (birth registration certificates) which in some cases constitutes an impediment to access assistance and social services, including education, and heightens their exposure to protection risks. Further, the priority needs that have been expressed by key informants indicate that basic needs are still unmet, which in addition to be a concern in of itself, also heightens the risk of sexual exploitation and abuse.

11 Based on RNA KI data in responses to questions, “Do you know about GBV referral services available to you” and, “Which services provider are available?”
Capacities to address the protection risk

According to the MSRNA the top five needs in the next 1-3 months are food (89%), healthcare (59%), medicine (57%), shelters (47%) and drinking water (47%). Without meeting basic needs, protection risks related to theft/robbery and looting are likely to continue, as affected communities face increasing pressures to meet their most basic needs.

Protection Risk 4: Psychological distress

Floods have undermined the resilience and psychosocial well-being of children and their caregivers, leaving many experiencing distress and weakening their protective environment. More than 50% of key informants in Sindh, Khyber Pakhtunkhwa and Punjab reported that they there was psychosocial and mental health issues in their communities, and notes that 81% feel nervous/anxious and 60% feel depressed. In addition, according to key informants, 31% of girls, 35% of boys and 35% of caregivers are showing signs of stress.

Assessments conducted by Child Protection actors have also indicated that one of the consequences of distress is an increase in the cases of physical violence against children.

Capacities to address the protection risk

Overall, 60% of key informants reported that people in their community are not seeking treatment and 35% indicated that people were relying on self-medication and not consulting with doctors or psychologists. 84% of key informants could not identify any resource persons, community groups or institutions providing support to children. Among the small percentage of key informants who could identify support structures, the most commonly cited was health (21%), while the least cited was psychosocial support (eight%).

Protection risk 5: Harmful coping mechanisms for children

18.1 million girls and boys under 18 years live in flood-affected areas and are at risk of multiple protection threats including different forms of abuse, neglect, exploitation, sexual violence, trafficking, and violence. The floods are undermining the resilience and psychosocial wellbeing of children and their caregivers, leaving many experiencing distress with limited or strained support systems. Before the devasting floods, pre-existing inequalities, gender discrimination and societal norms exacerbated and put place girls, particularly adolescent girls, at additional risk of violence. This includes child marriage and forms of sexual abuse and exploitation (rape, harassment, trafficking etc.) of children. The boys are also at a risk of getting involved in child labor (including the worst forms of child labor), migration or trafficking. Findings indicate that some families are already resorting to negative coping mechanisms to cope with loss of livelihoods and risks associated with displacement, for example, 4% of key informants indicated an increase in child marriage. Children who never went to school are at particular risk of child labor and child marriage. Many others have also lost access to education as many schools have either been closed or damaged, while many parents have lost the means to send them to school. Children with disabilities, refugee children, girls and other marginalized groups may also experience increased vulnerability, including due to disrupted access to essential services, and must be given specific consideration in the design and implementation of flood-related interventions.

An estimated 640,000 adolescent girls during the current crisis situation are vulnerable and at increased risk of coercion, GBV and child marriage. Conflict and disasters create socio-economic insecurity and safety issues for families, especially women-headed households and women living in camps, may also lead to increased child marriages.

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12 MISP calculator
Capacities to address the protection risk

Girls and boys are exposed to new physical risks and hazards as a result of the floods, bringing a critical need to raise awareness and support mitigation measures to address these risks. The most concerning data reported is if there are resource persons, community groups or institutions that can provide support to children (under 18 years) in this community, more than 80% of the respondents reported negatively; while among the small per centage of key informants who could identify support structures, the most commonly cited was health (21%), while the least cited was psychosocial support (8%), with weak consciousness of these poor structures.

4. RECOMMENDED ACTIONS

Based on the context and priority protection risks, the Pakistan Protection Sector recommends the following:

Protection risk 1: Forced Displacement

- Support the GoP to strengthen information management systems to identify and map displacement sites (formal and informal) and movements, including return and relocation movements and protection risks emerging.
- Strengthening community-based networks to mitigate protection risks in displacement settings and contribute to protection monitoring reporting.
- Strengthen protection mainstreaming particularly with respect to Shelter, CCCM, Health, WASH to ensure current protection risks apparent in displacement are mitigated.
- Support efforts to establish joint Accountability to Affected Population (AAP) structures, including PSEA, to ensure improved access to information and aid for those affected.
- Identification and reunification of the separated children with primary care givers and support to family based alternative care.
- Increased awareness, via capacity-strengthening, among all relevant responders and IDPs themselves of relevant provisions of the UN Guiding Principles on Internal Displacement and other protection standards.
Protection risk 2: Gender-based violence & Access to GBV services

- Continue to map available services and capacity and ensure context-specific referral pathways are developed and updated regularly based on needs.
- Develop key messages of available GBV services; and inform communities about their availability, accessibility and value.
- Ensure context-specific safe spaces for women and girls are available and equipped with trained staff and resources.
- Ensure frontline workers in humanitarian action are trained on how to safely handle disclosures of GBV incidents and link survivors with specialists.
- Ensure regular safety audits (with inputs from women and girls including those with disabilities) are conducted across all sectors to ensure women and girls’ safety needs are prioritized.
- Develop guidelines and allocate resources to include persons living with disabilities in GBV risk mitigation and response programs and services.
- Identify partners with technical capacity to review key GBV prevention, risk mitigation and response tools to address needs identified from the field through an intersectional lens.

Protection risk 3: Theft, destruction of personal property and loss of Documentation

- Service mapping of legal aid providers and functioning of law enforcement agencies in affected areas.
- Monitoring of the provision of aid to affected areas to ensure basic needs are met.
- Increase awareness and access to civil registration services (birth registration) for children.
- Advocate for waiving the charges for civil documentation and also the conditionalities for the provision of assistance and other social services subject to the production of civil documentation.

Protection risk 4: Psychological Distress

- Provision of gender and age specific community based MHPSS services for children, adolescent caregivers, women and other vulnerable girls.
- Conduct safe identification of children and adolescent survivors or at risk of violence, abuse and exploitation and refer them to specialized services.
- Develop practical guidelines for frontline workers to build their capacity on Physiological first Aid.
- Conduct adolescent and adult led MHPSS activities.
- Build parent’s capacity on positive parenting skills and support to children in psychosocial distress.
- Establish referral pathways for specialized MHPSS and undertake steps for making them available within easy access.
- Conduct orientation sessions and periodic mentoring for frontline psychosocial support counsellors and service providers to ensure delivery of quality of services.
- Provision of age and gender appropriate psychosocial support and specialized case management services which are accessible for persons living with disabilities.
Protection risk 5: Harmful Coping Mechanism (Child Marriage, school dropouts and Child Labor)

- Linking families and care givers with other sectoral services such as cash assistance and livelihood opportunities.
- Awareness raising on the negative consequences of child marriage and child labor through the engagement of community-based structures.
- Linking child survivors of violence, abuse and exploitation with case management and specialized services.
- Enhancing the capacities of the child protection work force on preventive and protective services.
- Working with the education sector to reintegrate out of school children (particularly girls), supporting temporary learning centers and referring children at risk to child-protection services when required.
- Provision of child protection preventive messages to the parents, caregivers and children, and information on assistance and services.
- Ensure access to child protection and other essential services through static and mobile outreach.

Contacts for the Pakistan Protection Sector
Protection Sector Coordinator: Nikola Errington, UNHCR
erringto@unhcr.org
Child Protection Sub-sector: Farzana Yasmin, UNICEF
fyasmin@unicef.org
GBV Sub-sector, Mahjabeen Qazi, UNFPA
mqazi@unfpa.org