



## RELIEF AREA

### VISIT TO PAKISTAN 13<sup>TH</sup> – 26<sup>TH</sup> JUNE 2013

#### 1. Introduction and acknowledgements

The Anglican Alliance brings together development, relief and advocacy across the Anglican Communion. We were established as an initiative of the Archbishop of Canterbury and the Anglican Communion, starting our operations in January 2011 with a series of global consultations with partner churches and agencies. These consultations identified as a priority for the relief pillar of our work the need for capacity building through the provision of training schemes and tools developed with local churches and agencies working with communities in disaster-prone areas. Furthermore, it was decided that one focus for this work should be on the preparedness stage, aimed at mobilising churches and communities to take preventive measure before disasters strike.

For the last three Monsoon seasons Pakistan has been severely affected by heavy rain and floods. Particularly hard hit in 2011 was the Diocese of Hyderabad which covers the Sindh Province, excluding Karachi which forms its own diocese. Unusual rain patterns and unpredictable weather conditions have made people fear that floods might come at any time during the year. Furthermore, there is a pessimistic weather forecast for the 2013 monsoon season.

To encourage the communities to be prepared before the oncoming Monsoon season, the Alliance engaged in a collaborative process to produce a resource that could be used by the community for discussion and mobilisation in preparation for flooding. Through consultation we developed a large cloth book, measuring approximately 1 metre by 1 metre, made from a very durable and high quality nylon fabric (made from recycled plastic bottles). Drawing from more high level publications, we developed a series of brightly-coloured, culturally-appropriate drawings, with simple messaging and discussion points written in Urdu on alternate pages. (An English copy of the words is attached at the end of the report), the aim was to provide a community empowerment aid that could survive being used in a variety of challenging contexts and weather conditions, be taken village to village and used for community empowerment and mobilisation. We called it “The cloth-book”. Its production was collaboration between the Anglican Alliance, Naveed Khurram, administrator of Kunri Hospital in Sindh Province, Revd Rana Khan, artist Jane Birch, and students from Northampton High School to whom we are extremely grateful for the technical production.

This resource starts with a reflection about the story of Noah’s Ark and continues with the following sections:

- Community mobilisation - Getting the community together, including women, children, teenagers, the elderly, people with disabilities and other marginalised groups.
- Identification of risks to the community -Floods, earthquake, drought, storms or conflict
- Risk assessment: people at risk

- Inclusion and protection of people with disabilities
- Risk assessment: property, livestock crops and mapping of risks
- Community planning: prevent, prepare, protect
- Resource mobilisation: People resources needed, people with knowledge, skills and resources
- Resource mobilisation: Physical resources needed
- Learning the lessons after the disaster is over.

The cloth-book was designed to be used during workshops and to encourage an interactive process with the communities.

This mission would not have been possible without the very generous support of a number of individuals. Thanks are due to Bishop Saddiq Daniel from the diocese of Karachi, Bishop Kaleem John from the Diocese of Hyderabad, Mr Naveed Khurram, administrator of the Kunri Christian Hospital and to all his team including doctors, nurses and the support staff who guaranteed the logistics of this mission. We would like also to thank Rev. Qaiser Lal from the Kunri Ashram Church and Rev. Fr James from the St' Benedict Church for their openness and engagement with the purpose of this visit.

## **2. General information about the area and the communities**

The target area to pilot the cloth-book was the rural area of the Kunri town, located in the Umerkot district, and also some areas of the Tharparkar district, Sindh Province, South-Eastern part of Pakistan.

The point of reference was the Kunri Christian Hospital which is part of a bigger compound that includes an Anglican church, Catholic church, nurses' residence and staff housing. The land is the property of the Catholic church and the compound is run by the Anglican Diocese of Hyderabad. The Hospital is the only one in the Kunri area and the staff members are Christians, Ahemadis and Muslims. It serves a wide and multi-faith population. Many of the patients are pregnant women and children.

### *Floods experienced in the Kunri area in 2011*



People fleeing to the roads since these are on higher ground

During the 2011 Monsoon season heavy rain caused floods of unprecedented severity affecting the southern parts of the Sindh Province, including areas of the Thar Desert on the border with India. In the whole province 8.9 million people were affected, 414 died and over a million acres of crops and agricultural lands were damaged. In the Umerkot district alone 31 people died, 3,769 villages were affected, 821,179 people were affected and 122,103 houses were damaged. In Tharparkar 28 people died, 2,284 villages were affected, 907,179 people were affected and 178,356 houses were damaged.<sup>1</sup> This was a devastating level of loss for an already desperately impoverished community: yet it barely reached national, let alone international attention, and the community has had little assistance with recovery.

The cumulative rainfall in Sindh ranged from 400 to 1299 m<sup>2</sup>. Large extensions of land were inundated for months, leaving several communities in remote areas trapped without food, water, shelter or access health services. The hospital provided outreach services in the form of “mobile health camps” run out of a caravan that was taken around remote community areas after the floods. During the health camps the health staff found people in a desperate situation, without clean water and starving. People were asking for medicines just to provide basic nutrition. Others had been given lentils by an NGO, but without any means of cooking them, they had been forced to eat them raw.

Properties, livestock, crops, seeds and fodder were washed away. Several communities were displaced seeking higher ground, mainly on the roads. Shops and markets places were damaged or destroyed, resulting in low food supplies and high prices. Roads, bridges and communications systems were damaged or destroyed, increasing the isolation of those in remote areas. Many people died or injured because the houses made of mud collapsed.

Furthermore, since the topography of the province is almost flat, the drainage of standing water is slow. This causes waterborne diseases and the outbreak of epidemics such as cholera, measles, typhus, diarrhoea, and pneumonia. It also results in an increase in malaria, dengue fever, and leads to plagues of locusts.

### **2.1. Social Characteristics in the targeted area of Kunri in Umerkot and Tharparkar**

The population in Sindh comprises 16.098 million men and 14.342 million women. It is predominantly an agricultural and pastoral economy. The principal crops are wheat, rice, cotton, oilseeds, sugarcane, vegetables and fruits. Sheep, cattle, camels, and poultry are raised, and there is also a fishing industry. The literacy rate is 45.29%; 54.50% for men and 34.78% for women. In the rural areas it is 25.73% - men 37.89% and women 12.23%.<sup>3</sup>

The poorest people in the rural area include Muslims, Christians and Hindus. The last two are minorities within the country and experience discrimination. Furthermore, within the Hindu caste

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<sup>1</sup> Government of Sindh Rehabilitation Department Provincial Disaster Management Authority, “Sindh Provincial Monsoon/floods contingency plan 2012”. P. 9

<sup>2</sup> SUPARCO, UN OOSA, FAO, Pakistan Floods / Rains 2012: Rapid Crop Damage Assessment: Series No. 4 p. 3,

<sup>3</sup> Ibid, Government of Sindh Rehabilitation Department.... P. 2 – 4

system, the lowest castes, Kohli, Mehgwar and Bheel, are the poorest of the poor. Christians in this area work for the wellbeing of these multi-faith communities. However, during the response and rehabilitation process after the 2011 floods, they were frequently left out of the humanitarian aid.

## 2.2. Land and housing issues

Pakistan has a feudal system, with landlords owning large tracts of land and monopolising the political and economic power. Some of them have bonded labour systems, with people working the landlords' lands to repay a loan or other debt and receiving some food and very little money. These debts are passed down generation to generation. Families are not allowed to move and are limited in what they can do with the portion of land on which they live. For example they might be barred from taking simple disaster risk reduction measures such as using different building materials or adjusting the houses to cope with floods. Because they are illiterate they are unable to keep records of their debts. This was particularly difficult during the floods when crops were washed away, leaving communities without food or any income and forcing people to get more loans. This situation disempowers communities and discourages them to look for alternatives.

Most rural housing is built with mud. Frequently, households have neither water nor electricity supplies. According to some people interviewed, the substantial international funding pro-poor development has not reached the most marginalised people. There is malnutrition among children, lack of clean water and pump water is highly salted causing several waterborne diseases. People share their water supply with their animals and there are no sanitation facilities.

The poorest communities do not have resources to pay for transport to go to hospital, to buy medicine or for vaccinations. Families are large with eight to 15 children: people believe this is the result of God's will.



Communities near Kunri Christian Hospital



Roshanabad community



### 2.3. Women's issues

Women in general have a lower position than men and are confined to the domestic domain. Values of honour and shame bear down particularly hard on women. There is a high rate of gender-based violence but given cultural constraints and mistrust in the justice system, abuses are not reported. Girls normally do not attend school, saying, "It is useless", and instead stay at home helping with the housework, waiting to be married and bear children for their husbands. Widows, in particular, have very low status and are considered a burden on society.

Reproductive rights are denied and maternal health standards are very poor since women do not receive proper antenatal care. They are assisted by traditional birth attendants, and if they go to hospital, they are either not allowed or do not want to be examined by a male doctor. Women are overworked since they are expected to both work on the land and carry out domestic chores. Early and forced marriages are very common and there are several cases of sexual abuse by outsiders as well as kidnappings to force women to convert to another faith.



Women from communities near Kunri Christian Hospital

### **3. Working with the CLOTH – BOOK**

The initial plan was to carry out a workshop with members of the communities, with people working in pairs or groups and recording their ideas in writing or pictures. This had to be adjusted for the following reasons:

- People did not seem willing to have long discussion sessions - priest and staff advised to keep the sessions short – people would not stay for long periods.
  - Communities are very disempowered and oppressed. They think about natural disaster with resignation, as being God’s will. Furthermore, they feel very constrained due to the land issues, mentioned above, and believe they can do nothing e.g. move to a safer place, adapt houses.
  - Communities expect something from the visitors in terms of aid or resources
  - The need to use two translators (English – Urdu – Sindhi)
  - The meetings normally took place outdoors in scorching heat (around 45 degrees Celsius)
  - There are lots of children in the communities and they made noise and were distracting

In such circumstances, we adapted and found three ways to mobilise the communities using the Cloth-book:

- a. During church services
- b. Visiting the communities –teaming up with the priest
- c. Focused work with community workers

#### **a. Church services**

During two services we presented the cloth-book, going through its different parts and then the priest continued with a sermon based on the story of Noah’s ark and the need to be prepared for the floods.

With the Anglican communities it was possible to arrange further meetings and emphasise the message about preparedness.



Christian Kunri Ashram Church



St' Benedict Catholic Church

## **b. Visits to Anglican Communities**

Accompanied by Rev. Qaiser Lal from the Kunri Ashram Church and the Hospital's administrator Naveed Khurram we visited three different communities. The meetings were organised by the priest and the community workers.

### Thar Nabi Sar Community



This is a small community and the meeting here was held mainly with women since the men were working on the land, although some of them arrived later during the meeting. We initiated the session with the reflection about Nosh's ark by Rev Quaiser. We then went through the cloth-book; it was an interactive process with discussions while we were giving key information and raising awareness. The participants identified floods and the collapse of houses as the main risks they faced. They said that in 2011 they lost two members of the community and had to leave their homes and move to the roads. We were specifically aiming to speak to people about supporting those with disabilities during the floods: the community said there were no people with disabilities, although there were several older people.

While the Anglican Alliance's relief manager was presenting the cloth-book, the community worker in this community and the Hospital outreach officer encouraged the community and emphasised the content of the cloth-book with local examples. Given that the majority of participants were women, we highlighted the key role that women can play in disaster preparedness. Thereafter, the priest continued the reflection dealing with the often raised issue of whether the floods and rain were a result of God's will.



### Pandra Water Community



This community is more remote, far from the main road and town. People do not have any local facilities such as schools, hospitals, buildings or churches. The meeting in this community gathered more people than in Thar Nabi Sar, including men, women, older people, children and people with disabilities. Some of them had been at the Sunday service and the community worker in Pandra played a key role in the presentation of the cloth-book. The community identified as their main risk factors violence, floods and the collapse of houses. They said that in 2011, nobody died but they lost all their animals. There were two people with disabilities: a young boy with a mental disability, probably congenital, and an old man who was hearing impaired. There were also several older persons.

This community seemed to be more organised, in terms of hygiene and the configuration of homes. However, they were very pessimistic about doing anything without the approval of the landlord. As in the previous community, Rev Qaiser presented a reflection on the story of Noah's Ark and emphasised several points of the preparedness plan.

### Dohro Mori Gihapno Community





The last Anglican community we visited gathered a substantial number of people, also including some who had attended the Sunday service, which made it easier to present the key message about disaster preparedness. Unlike previous meetings, the Dohro Mori Ghapna event also included young people. In the 2011 floods four people in the community died as well as all the animals. People identified floods and violence as the main risks. It was in this community that loud whistling by people going around the houses was identified as the way to alert the community and to get people to evacuate. We did an exercise to see if people could follow the whistle: and it showed how people could use available – in this case free – resources. This was followed by a discussion about the sound that animals make before the rain. Despite these positive outcomes, this community, like the Pandra Water Community, was also very pessimistic about their options because of fear of the landlord. Perhaps this was the most disempowered community we visited.

This community acknowledged six people with disabilities, but they were not visible during the visit. The community worker was also present and he called out the people to come to the meeting. The women in this group were shyer and less keen to talk or show their houses to the Alliance's relief manager.

### **Visit to the Catholic settlement of Roshanabad**

Accompanied by Rev. Fr James from St Benedict Church and the Hospital's administrator Naveed Khurram we visited the Roshanabad community two hours away from Kunri Town in the Thar Desert. The meeting with the community was organised by the priest.

This community has some distinctive characteristics. The 400 people living there are not debt-bonded. Some years ago a Catholic missionary from Ireland paid off people's debts with the landlord and bought a large tract of land that now belongs to the Catholic Church on which people live. Each family has six acres of land that they can cultivate. The houses in this community have been built on higher ground, made possible because of the absence of a feudal landlord. With the support of a German NGO, 35 houses have been built on bamboo stilts so that they can resist the floods and even mudslides. The same NGO also built community toilets on higher ground to protect them from floods.



Toilet on higher ground



House built with bamboo

The school, the church and an extra house were built of brick so that they can be used as a refuge. One of the households managed to get electricity and the community get together to watch the TV or listen to the radio. This is particularly important regarding early warnings or information about rains and floods. Nuns work closely with the community which is formed by Muslims, Hindus and Christians.

### *Cloth – Book Session*

In Roshanabad the work with the cloth–book was organised differently. Firstly, it took place within the church building, which was more comfortable in the very hot weather and allowed more time for discussion. Secondly, after the session, the hospital carried out a “Health camp” with the paediatrician and nurses doing health checks. This had a positive impact since it encouraged more people to come but it also had a negative impact since some participants were more interested in coming to the camp but did not focus on the discussion.

The participants in this meeting included Muslims, Hindus and Christians. They discussed the difficulties they faced in 2011. Some of them lost relatives and others walked up to 3000 kilometres looking for food only to end up begging on the streets. The community feared floods and violence from other communities. There were several people with disabilities and the community did not have any difficulties in identifying them: a couple who cannot walk, a mother with a learning difficulty, a older couple who can neither walk nor see, a blind seven year old girl.



Cloth – Book Session



Health Camp

Women in this group engaged in the discussion but, despite their freedom from debt bondage, they had difficulties identifying resources within the community or actions to carry out in preparation for the floods. They are very poor, with huge families and living in the middle of the desert.

### c. Focused work with community workers

The Anglican Diocese of Hyderabad has a group of 11 part time community workers in 33 different villages in Kunri area. They carry out literacy, public health and sanitation activities to raise awareness and mobilise the communities. With the endorsement of Bishop Kaleem and the coordinator of the workers, Mr Nadeem David, it was possible to work with them to look at how they can mobilise local communities to be prepared for the oncoming Monsoon season.



We had two sessions with them. The first one was to get them familiarised with the Cloth – book before we visited some of the communities they work with. The second meeting was more detailed and longer and focused on the following three components:

- How to trigger the interest in the community
- The resources assessment and preparedness activities– concentrating on what we have rather than what we need
- The inclusion of women in preparedness work

#### *How to trigger interest in the community*

Given the difficulties of mobilising the communities, we started with this discussion and the workers provided these explanations:

- People are overwhelmed by their daily needs

- There is a passive resignation – even during heavy rain the workers said they have to force people to evacuate their houses before they collapse and killed them – “we warned a lady sitting leaning against the wall to move away as the wall would collapse but she did not and died as a result”.



- The community lives together but does not necessarily watch out for other members, in times of disasters people only look out for themselves.

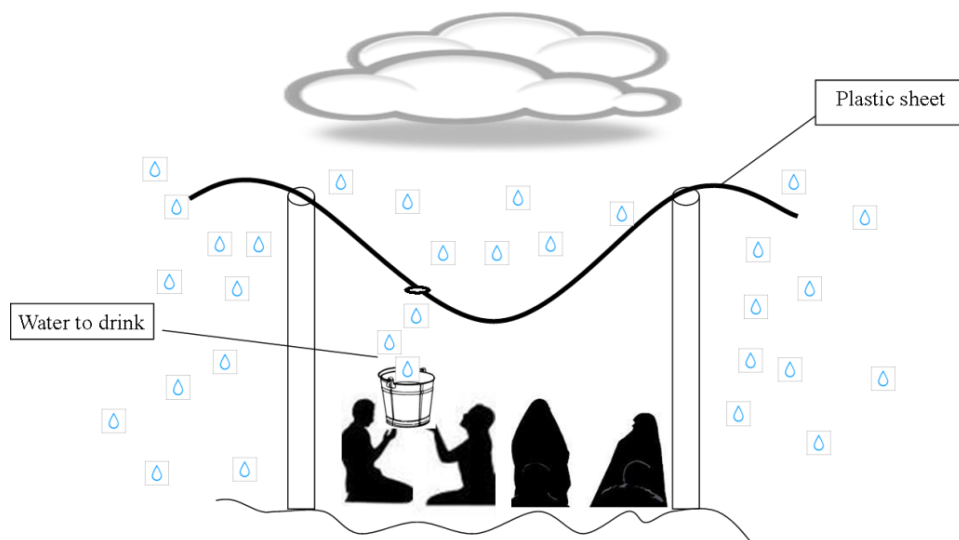
- People said that they understood the importance of being prepared before the floods but said “were helpless because of the restrictions imposed by landlords”.

*The resources assessment and preparedness activities – concentrating on what people had rather than what they needed.*

Since communities frequently concentrated on what they lacked, we did an exercise asking the community workers to give an example of a local resource they had, and the answers were: a bike, a tyre to float, bike, a woman worker built a house in higher ground and she said can be used as stock or shelter; strong hands to lift children and people in difficulties; ability to whistle to alert people of impending disaster; a priest and a teacher who said they could teach people and transmit confidence.

The community workers also identified the sound of animals alerting people to the rains. After a long conversation the community workers shared some of the spontaneous techniques they used to survive the floods in 2011:

One, illustrated below, involved using plastic sheeting to catch rain for drinking water as well as providing shelter:



A second involved tying two plastic containers together under a bed to form a crude raft as illustrated below.



Other resources and preparedness actions they identified included:

- Having mobile phones charged with extra batteries and with credit- living without electricity they charge the mobiles on motor bikes or at church. We had to counter the perception that having mobiles switched on would attract lightning that will kill people.
- Stockpiling plastic sheeting
- Stockpiling instant food like porridge that is easy to cook, and protecting people against the high prices that arise when there are food shortages during emergencies.
- Keeping torches, because in the dark they are unable to identify animals such as snakes and scorpions
- Stockpiling water purification tablets and water containers with proper lids to prevent the water becoming dirty
- Reinforcing mud houses with sticks which are more resistant to destruction in floods.
- During heavy and constant rain it is important to make good use of the rain breaks since this time can be utilised to gather resources or move people away
- More information on waterborne diseases and mosquito transmitted deceases since the community does not know how to identify and treat them.

All these ideas were scattered and anecdotal. These, however, if acknowledged and compiled, can be the basis for a better plan and could be improved for the next emergency.

#### *The inclusion of women in the preparedness work*

Three women are part of the community workers group and one in particular was very active during the discussions. The workers, however, mentioned that the role of the women is not appreciated and they agreed it is necessary to value their contribution. More work needs to be done with both women and men to include women in discussions and planning meetings (men do not allow women to sit with them) and to overcome their low status among the community.

Community workers mentioned that women need to be trained in midwifery because very often women become pregnant and nobody has skills to help them to give birth. Basic information and procedures are essential.

#### **4. Feedback regarding the cloth-book**

From the two weeks work it was possible to have some feedback on the cloth book:

##### *Positive factors*

- The cloth-book was very welcome because it attracted people's attention. Community workers said it was necessary to keep this style of resources: large, with illustrations and durable
- The community was very receptive and keen to plan for the oncoming monsoon season
- People appreciated the effort of the Alliance visiting remote villages to give advice and they appreciated the Alliance caring for their wellbeing
- Women saw the sessions as an invitation to protect themselves and save their animals.
- Some people took the experience as a wakeup call to think ahead and avoid the previous negative experience.

##### *Negative factors*

- Despite the community acknowledging the importance of being prepared they think that to do this they need resources and freedom that they do not have.
- There was a need for emphasis on protection of particular community assets - especially animals that were central for people's livelihoods.
- The sessions raised expectations among the community that other resources will be provided.
- Some pictures were not appropriate or clear enough such as the volcano or the earthquake and some examples of resources including electricity, water supplies or buildings were not appropriate for the context since these were non-existent.
- Communities complained that nothing was given to them. The exception was Roshanabad where the Health camp took place and more than 160 patients were given medicine and examined.
- Language was a major issue. Only a few people were literate in Urdu.

#### **5. Unexpected risks:**

There were constraints on the visit which had been discussed in advance, including security, weather and the particular cultural context. However some unexpected hazards also arose:

- There were anecdotal reports that landlords were becoming agitated at our presence since we might encourage people to leave the land.
- Some people became afraid at the prospect of floods.



- There were concerns that the experience might have attracted attention to already marginalised and afraid Christian and Hindu communities.

## **6. Ways forward**

There were many lessons to draw both from the use the cloth book as a community empowerment aid, and from the experience of visiting the very marginalised rural communities:

- The importance of the community workers, and their continued commitment to work on disaster preparedness. They developed proposals of ideas and actions to take forward the work, and the Alliance's relief manager is working on developing those with them.

- With the endorsement of Bishop Kaleem, the Coordinator of the community workers will translate the content of the cloth-book into Sindhi and other local languages.

- The Anglican Alliance and the Christian Kunri Hospital are looking for different funding opportunities to improve access to health and train women in midwifery. This in turn will render communities more resilient. The Anglican Alliance is also considering making its 2015 Commonwealth Professional Fellowship Scheme for women health administrators.

- The basic model of the cloth book, a community empowerment resource provided in a durable material, with large, bright, simple, culturally relevant graphics and clear, simple but well researched and correct messaging, was a good one and should continue to be used by the Alliance. We will identify a manufacturer who can make these books: the technology used by the school was very sophisticated, and production costs were low - £18 for the whole book.

- Many resources already available for Disaster Risk Reduction are aimed at development professionals. They are complicated, long and full of technical jargon for community workers. Resources like the cloth-book can address this gap as it can be easily managed and understood.

- Women represented a large audience in the different communities where the sessions took place. Although it is not clear why women attended in substantial numbers, this kind of exercise was designed to be inclusive. One possible encouragement for them was that the Anglican Alliance's relief manager is a woman and this generated some confidence. Future exercises should target women and at the same time highlight the message to the wider community (in particular with the men and older people) about the important and central role of women.

- The cloth book is cost effective, considering the cost per "reader or "user" and the fact that one book can benefit a substantial group of people. For future exercises it will be important to consider how many people will use each cloth book.

## **ANNEX 1**

### **ENGLISH TEXT CLOTH – BOOK**

#### **1. Bible Study**

Noah's Ark

Discuss the story about how Noah built an ark to save his family and all the animals from the flood  
What do we learn about:

Risks and warnings - Why did Noah build the Ark?

Preparing for a disaster - How detailed were the plans for the Ark?

Putting plans into action - Did Noah carry out the plans?

Planning for life after the disaster - Were Noah and his family prepared for life after the floods?

What happened to the rest of the people?

#### **2. What are the local risks**

Every community can face disaster. How is your community at risk?

- Floods      ○ Drought
- Cyclones or storms
- Volcano      ○ Earthquake
- Civil unrest, riots, conflict or war

When was the last disaster?

Was any action taken to protect the community?

Does it happen regularly? Could it happen again?

#### **3. Getting the community together**

Who should be involved?

- People from excluded groups - women, old people, children
  - People from minority communities – other faiths, ethnic groups, castes, tribes
  - Faith leaders
  - Other community leaders
  - Political or local government leaders
  - Public figures like teachers, doctors, media
- Where is the best place to meet? What is the best time?
- How are you going to call people to the meeting?

#### **4. Risks assessment**

##### **4.1 Risks to people**

How many people are at risk of injury or death?

- Women - pregnant women and widows

- Old people
  - People with a disability or illness
  - Children, especially the fatherless
  - Landless, outcast and very poor people
  - Any other vulnerable groups – name them
- Where do they live? What help do they need? How do you reach them?

You, the people, are the only ones who can answer these questions.

#### 4.2 Protecting people with disabilities

- Do you care for someone in your family with a disability?  
Do you know other people in the community with a disability?
- How can we help them to be safe?
- How can we make sure they are cared for during the emergency?
- Who will do this?

#### 4.3 Risks to property

- How many houses are at risk of damage or destruction?  
DRAW A MAP OR PICTURE OF THE HOUSES AT RISK
- How many farm animals are at risk?
- What crops are at risk?
- What key structures are at risk e.g. power lines, roads, bridges, water supplies.
- What services are at risk e.g. hospitals, schools, shops, toilets.

You, the people, are the only ones who can answer these questions.

### 5. Making a plan

What to do - make a plan to reduce the **RISKS** to your community, for example

#### PREVENT

- Plant trees
- Plan flood defences
- Reconcile groups in conflict

#### PREPARE

- Safeguard homes, and water and food supplies
- Make links with relief and aid services



- Set up early warning system, ringing church bells, visiting people at risk

#### PROTECT

- Escape to shelter
- Arrange distribution of food, water
- Medical care for the sick and injured

### 6. Resource assessment

#### 6.1 What do you need to carry out your plan? **People**

Knowledge - People who **know**

- The community, the vulnerable people and where they are
- where the safe places are
- where the key services are – like bridges, water, power lines
- how to contact the authorities

Skills - People who **can**

- cook, write, do first aid, drive, organise, care for children

Materials – People who **have**

- tools, a bike, a car, a first aid kit, medicine

#### 6.2 What do you need to carry out your plan? **Physical resources**

Make a list of all the things in the community that you need for your plan, such as:

- Buildings like schools, public offices, faith buildings that can be used as shelters
- Essential services such as hospitals, clinics, water, warehouse
- Transport including buses, cars, bicycles, carriages
- Communications such as public phones, power lines, roads
- Equipment and tools such as water pumps, cooking equipment, building equipment, radios, mobile phones
- Plastic sheeting, spare clothing

### 7. Learning lessons

Plan a community meeting once the emergency has passed

Repeat the steps before about who should be involved

Ask everyone to say what they have learned

- What helped to protect people?
- What went wrong?
- How do we rebuild livelihoods?
- How could we improve things for the future?

Make a plan and decide how you are going to carry it out.