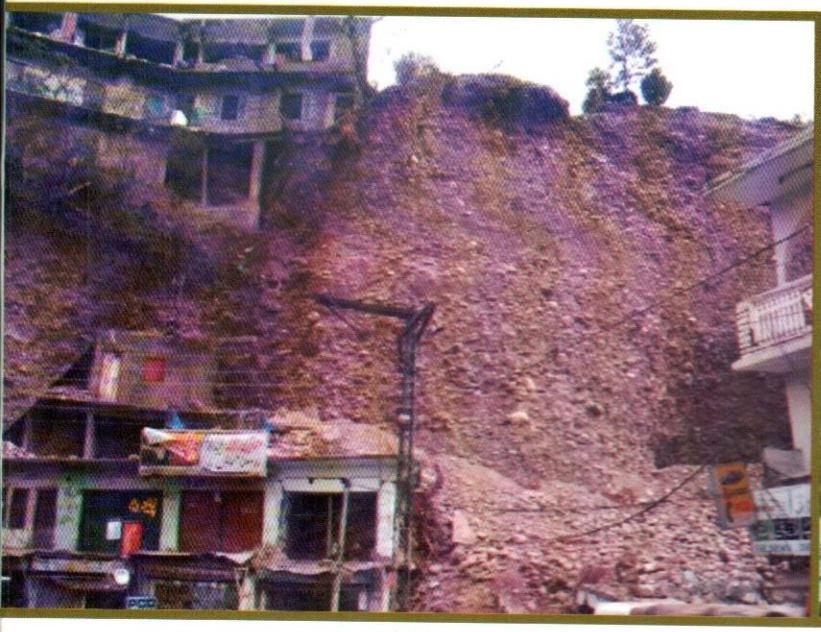
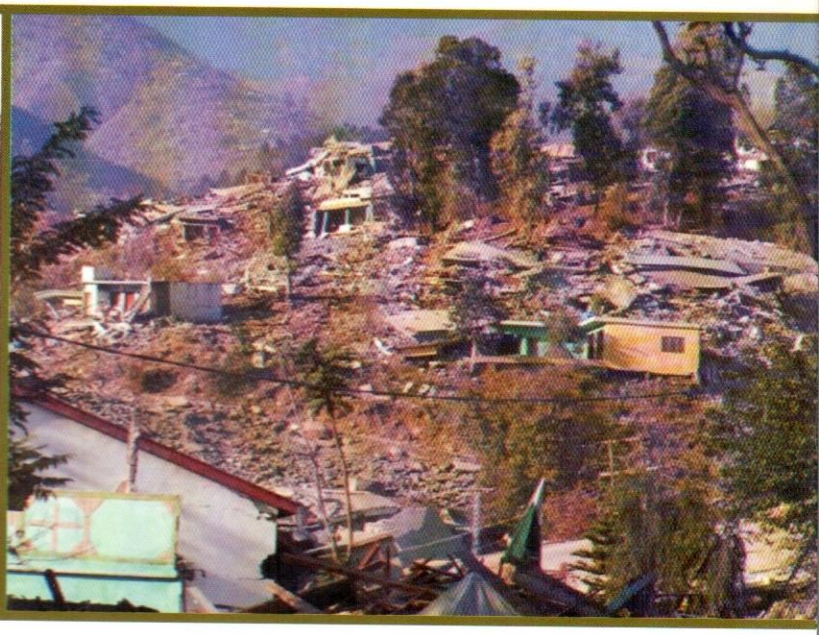
Socio Psychological and Demographic Realities in the Earthquake Hit Areas of AJK and NWFP

A Qualitative Perspective





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Foreword

The Study was conducted by the research team of National Institute of Population Studies in 2007 to identify the after effects of horrible earthquake in areas of AJK and NWFP. The study concluded that the huge task of rehabilitation lay ahead of the Government functionaries. The earthquake brought a great disaster with it in the form of psychological and physical illness. The remaining lonely women and children were a matter, seeking special attention of the Government. The affectees were in dire need of protection, nutrition, education and health. Pakistan needs to be ready to address such kind of disasters in future.

In Pakistan, the October 8 earthquake left widespread destruction in AJ&K and NWFP. Many people especially, women and children were killed, thousands were handicapped and millions rendered homeless. The catastrophes and disasters always pose an entirely different magnitude of challenge for health and population care providers to meet people's basic needs, including reproductive health care and family planning service.

The study explores the peripheral associations and correlations of disaster with Socio-Psychological and demographic realities. The study is important as it provides in-depth signals of change, particularity about the pattern of marriages, decision making, type of family, family size, contraception, abortion and broad issues of health and population.

Mr. Amanullah Bhatti's role as Project Director who has always been kind enough to provide his technical assistance in the finalization of the report is highly acknowledged. Mr. Mehboob Sultan former Director (R&S) went on LPR but his work and intelligent guidance for the study is appreciable.

Dr. Firdous Ashiq Awan Federal Minister for Population Welfare deserves special recognition in pursuing the study forward under-scoring the importance of the findings lest they lose their effectiveness and efficacy. Mr. Nayyar Agha, Secretary, Ministry of Population Welfare has always been supportive of NIPS. He also showed his keen interest in early finalization of the study with continuous follow up.

The authors of the study deserve appreciation for initiating a creative and innovative approach to analyze the impact of earthquake not only on earthquake affectees but on community as a whole. It gives me great pleasure to say that Mr. Zahir Hussain, Mr. Zafar Iqbal Qamar, Mr. Faateh-ud-din Ahmad and Ms. Rukshan Aziz have shown intelligence and diligence in completing this task.

Dr. Sajid Ahmad
Executive Director

Acknowledgment

The National Institute of Population Studies (NIPS) is an autonomous organization established by the Government of Pakistan in 1986 with a Board of Governors and an Advisory Committee of experts. The institute is responsible for undertaking applied and inter-disciplinary research in the field of population and development, evaluation and impact studies of the Population Welfare Programme and Human Resource Development. It provides research based support and analytical inputs in the area of population, reproductive health and development for planning and policy making to the Ministries of Population Welfare, Health and other concerned Federal Ministries and Departments of the Provincial Governments. The National Institute of Population Studies has undertaken the Study "Socio Psychological and Demographic Realities in the Earthquake Hit Areas of AJ&K and NWFP" in July 2007.

We would like to appreciate the services and contribution of Moderators and Note takers for reliable data collection. In addition, we pay thanks to all the Programme managers who devoted their services and cooperation in data collection.

The report was made possible with the contribution of all those who gave an advice and help during planning, conducting survey and report writing. The study was initiated when Dr. Saeed Shafqat was the Executive Director of this institute. We deeply acknowledge his guidance and motivation. The contribution and active involvement of Muhammad Ali Afridi Executive Director deserves special thanks. We are grateful to Ms. Sarah Javed for editing the report. We acknowledge and appreciate the support provided by Mr. Amanullah Bhatti, Project Director, who played a leading role. His contribution is highly commendable.

It is worthwhile to mention that an efficient system of project management implemented by Maj. (R) Dr. Sajid Ahmad, Executive Director, NIPS and his motivational approach has enabled us to achieve successful completion of the project. We are deeply grateful to the Executive Director for his active involvement in the supervision and monitoring of the study at all stages, which greatly facilitated the Researchers and encouraged us to finalize the report of the study in qualitative terms.

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Executive Summary

The last couple of years have not been sympathetic to man kind. For instance natural disasters devastate whole regions without warning, as the December 2004 Asian tsunami, the August 2005 New Orleans hurricane and the October 2005 Pakistan earthquake. Catastrophes and disasters are an entirely different magnitude of challenge for health and population care providers to meet people's basic needs, including reproductive health care, under crisis and adversity.

Women and children comprised the majority of those who died due to the October 2005 earthquake in Pakistan. Neither demographics can be changed and nor earthquakes can be prevented from happening. However preparedness and planning is vital especially in areas prone to earthquakes. The Azad Jammu and Kashmir (AJK) and North West Frontier Province (NWFP) earthquake showed that more people are dying with natural catastrophe as compared to natural deaths. The striking feature is the sharp increase in the number of people killed by catastrophes. As populations affected by such natural disasters have some special needs, which need to be understood and assessed in context of the prevailing socio-cultural and economic conditions.

The primary focus of the study was to observe and analyze socio-cultural and demographic patterns and trends among the earthquake affected communities pertaining to marriage, family system, family size, demand for family planning and reproductive health services in the rehabilitation process. Thus, it was a timely issue that an impact study was launched not only to assess the consequences but also its long term impact on individuals, and families.

A number of important issues were discussed regarding rehabilitation process and its impact on cultural and life style, micro and macro level community threat particularly, to culture and value systems due to influx of outsiders. Socio-physiological demographic realities were also discussed in detail

The study has been conducted through qualitative research tools like focus group discussions and in-depth interviews, in order to understand the attitudinal and behavior side of the people affected by natural disasters, and those involved in rescue and relief efforts. Twenty four focus groups with earthquake affactees and thirty in-depth interviews with disaster managers were conducted in Muzaffarabad, Bagh, Poonch, Abbottabad, Mansehrah, Bat agram. Purposive or convenience sampling was carried out to cover the groups of (FGDs) and (IDIs) in a representative manner.

Study Findings

There is little doubt in the minds of all those who were present on that fateful day and actually experienced the catastrophe that October 8th 2005 morning was a living nightmare, which destroyed thousands of lives. Most of the study respondents said it was a dooms day scenario and stated that it "was a Qayamat and great curse from Allah". While a few mentioned that scientists were of the view that plates of the earth had been separated which caused the earthquake and similar earthquakes will occur in the future as well.

The quake has unleashed a fierce debate as to whether it was natural or man made. Regarding causes other than nature most of the respondents are of the view that it was Gods curse and the poor quality of building and sub standard construction material used were the reasons for more deaths. As far as response for preparedness was concerned majority of the FGD participants mentioned that earthquake victims did not get the support he or she needed to put their lives together. There was also a cultural shock for the local people because of large influx of national and international NGOs and their staff members. Insecurity was also naturally felt by the females as many families had to reside in tents for several weeks and months, and spending nights in the open was scary for the women.

The disaster managers have given more or less the same observations as those of the participants of focus group discussions. Most of the disaster managers mentioned their own experiences and stories immediately after the earthquake.

Most of the disaster managers were of the view that environmental degradation, too much congestion of houses and substandard material used in buildings were the major reasons which increased the number of causalities. Lack of rescue service especially in rural and far flung areas were also one of the factors for large number of causalities.

The common perception of all disaster managers and earthquake affected population clearly indicated that it was an unbelievable and frightening experience. According to everyone consulted during this study, it was something they had never experienced in their lives and they would never forget it.
Some of the significant issues and perceptions reported by the study participants' are:

Community and Stakeholders' Perceptions Regarding the Disaster

- The civil society, public sector institutions, the world community and individuals, all have shown a remarkable contribution of generosity and magnanimity in extending all kind of assistance to the affected people. One of the most important factors of the relief and rescue operation was the speed and scale with which everyone responded showing the different collective action could bring about.
- During this study, two points of views were reflected regarding the relief and rehabilitation activities. The affactees were disappointed with the efforts of the rehabilitation agencies and expressed anger over the performance of most departments. On the other hand, development organizations and government departments felt quite proud of their work and showed satisfaction about the progress so far. A majority of disaster managers both men and women expressed their opinion that role of the civil society and institutions was appreciative and impressive particularly, in the early days of earthquake during relief and rescue phase.
- There is a great realization and recognition that it was a massive disaster. But across board, everyone recognized the enormous effort put in by many individuals and organizations to support and assist the affactees. The People

highly appreciated the role of media and people of Pakistan. The respondents recalled unbelievable gestures of sacrifice and help provided by the doctors and relief workers as they worked as a momentum team to save lives.

Institutional Support after the Earthquake

- There is a realization among those involved during the emergency period that concerned government institutions and other organizations were not prepared and organized enough to manage a situation of such magnitude. Respondents also claimed that no action was taken by the authorities although such an earthquake had been forecast years back for this region.
- People in general during the research expressed bitterness about the assistance and support they were extended by the Government authorities. Examples were quoted of the various perks the ERRA and SERRA staff members had received although their performance did not match the credits they got.
- In general, people appreciated the role of local government authorities and felt that they were mostly accessible and tried to play the role of effective facilitators between the larger institutions and the people. However, negative feedback was also reported mostly centering on corruption, nepotism and incompetence. Many respondents complained of political victimization especially during the compensation process. People were skeptical about many NGOs and felt that they were actually trying to cash in on the situation to receive funds from international donor organizations for their own organizations. In district Bagh there were more conflicts reported concerning NGOs, but the focus group participants still acknowledged the positive role played by NGOs.
- Local people felt weary of the women workers of NGOs, who were considered to be a threat to the local traditions and culture. Socio-cultural sensitivities should have been considered by the local authorities during the reconstruction activities and involvement of any outside organizations and agencies. In certain areas like Allai and Battagram, outside intervention is

neither encouraged nor accepted by the local population especially in context of women.

- The role of army was mentioned frequently by disaster managers as well as earthquake affactees as the top most contributing factor during rescue and relief. Some of the disaster managers felt that role of religion was also crucial in the disaster and there was a close linkage between the catastrophe and the current state of religious beliefs. In some areas, people said that the religious organizations were the first to reach them for help.

Role of Media and other Influential

- Almost all the participants and disaster managers mentioned the role of media as one of the most effective means to inform the rest of the nation and the world at large about the plight of the people in the affected region, otherwise, thousands would have been neglected and over-looked due to remote access to many areas as well as multiple other reasons.
- The presence of famous people/ personalities not only helped in terms of monetary and material assistance, but the events themselves were a diversion for the affected population, who got an opportunity to be a part of these occasions and forget about their everyday hassles and the uncertainty of their futures.
- According to the FGD participants in all the districts, influential people got four times more compensation amount as compared to the poor, who at times were deprived of even one installment. People felt that there was a lot of discrimination and injustice in the process and procedure.
- Overlapping efforts by several organizations and government agencies was a waste of both human and financial resources which could have been beneficial if used for other pressing issues required at the time. Many people also reported their dissatisfaction in terms of the performance and role of the AJK political leadership.
- The communities and disaster mangers were not at the same wave length. In focus group discussions there were complaints against the role of ERRA. Even

disaster managers were also not satisfied and they expressed their reservations about ERRA.

Post Earthquake Social Issues

- The issue of dependency on external assistance and support was discussed by almost all the research respondents. It is evident from other experiences of such disasters that it is natural for the victims to become dependent on external help due to the collapse of their own lives and means of livelihood. People just don't know where to start off from.
- Before the earthquake, the social support network mostly focused on relatives or influential of the area, but after the earthquake the announcements of relief and compensation decreased this dependency. At that time everyone regardless of their social and economic status were in similar situation and no one was richer and poorer then the other. People started living in nuclear families more, probably due to the compensation criteria, which only treated one family as a single unit under one roof whether joint or nuclear, but certainly altered the family system in the region.
- In Bagh and Batagram, the hostility between locals and NGOs were due to cultural clashes and breach of local traditions by outsiders. The local people were uncomfortable with female staff members of many organizations and did not approve of women activists exposing their females to outside intervention. It had an affect on their value system, resulting in social and cultural changes. The prominently given example was, that was female mobility. Earlier to the earthquake, women in these areas were mostly confined within the homes. While now, women could be seen roaming around for relief and help.
- According to the respondents, this catastrophe had a tremendous impact on moral value and increased the "number of nagy grabby and greedy people". There was no transparency in any of the processes during the relief and reconstruction operations and many people were unaware of how to approach the appropriate authorities for assistance.

- People also reported more early marriages in people's desire to settle down and start a new. Many disaster managers were aware of the negative affects of increased number of marriages and more so at early ages. It is now common knowledge that this changed pattern will have an impact on the number of children and thus the general population growth in the area.
- A trend emerging in all the six study districts shows that the earthquake has brought a significant change in the traditional family system. This trend like remarriages was also perceived to have an impact on fertility related issues. Due to compensation for house building the concept of nuclear family system has increased almost fifty percent. The participants and disaster managers are of the opinion that during the rescue and relief phase demand for son preference was badly felt. Discussions during the study clearly reveal people's desires for more sons.
- Although majority still believe that decision making is still in the hands of male members of household, but there is a definite shift in the role and status given to women in decision making at the household level.

Post Earthquake Psychological Issues

- There was consensus among disaster managers and FGD participants that cases of psychological disorders had increased, which is of serious concern. Almost all six districts people reported that number one problem is emotional impact and stress.
- The study clearly suggests that fear, hopelessness and sorrow never went away in these two years after the earthquake, in all six areas. Women, men, young, old affactees as well as disaster managers all had similar perception regarding the psychological upheavals of this disaster. Among men folk there was a common perception that population size is a challenge in the earthquake hit areas. Some people were of the view that the high death rate was due to the high population density in the area. Majority of the participants mentioned that change in marriage trends was a direct consequence of the earthquake.

Post Earthquake Demographic Trends

- Another perception was that demand for family planning would increase due to economic pressure, poverty inflation etc. Because of adversity, group marriages are arranged. Two thirds of the participants mentioned that pattern of women's freedom has not been affected at all rather women mobility after the earthquake is more controlled and restricted. Because before earthquake, their husbands were working in cities but after earthquake they are at home and decision making is entirely in the hands of male members.
- In many cases, the women have lost fathers, brothers, husbands and sons, who are no longer there to help them out. These women are in dire strait after losing their loved ones and still struggling to live without any adult male members. Some underlying causes such as illness, school drop out and poverty were mentioned as important and frequently discussed issues during the focus groups. Each family and every individual, male or female from all the affected districts, had their own story to tell in context of the loss, trauma and efforts of rebuilding their lives including the changes that have occurred in people's attitudes and behavior regarding their everyday lives.
- There is an increased trend of contraceptive usage in the affected areas, which was also endorsed and documented by service providers. According to the service providers, in the early days after the earthquake there was an over whelming demand for contraception.
- None of the local community members were willing to confirm any abortion cases in their respective areas and felt that issues of abortions were blown out of proportion by NGOs for their own publicity. Disaster managers also agreed with the community participants about false claims regarding abortions.
- Higher incidents of miscarriages were evident in the region, which is understandable. Due to high level of tension and stress and lack of proper prenatal care, miscarriages were frequently reported in the area. Many pregnant women lost their babies during and post earthquake attributed to stress and lack of care. It is still too early to comment on any changes in the

Infant Mortality Rate and Maternal Mortality Rates in the region. Although, MMR and IMR figures are not measured assessment, however no cases were reported even in Bagh and Mansehra. Although Bagh district is known for high MMR and IMR. Pakistan, 2005 Earthquake, CRPRID).

CHAPTER 1

INTRODUCTION

The last couple of years have not been sympathetic to man kind. For instance natural disasters devastate whole regions without warning, as the December 2004 Asian tsunami, the August 2005 New Orleans hurricane and the October 2005 Pakistan earthquake. Catastrophes and disasters are an entirely different magnitude of challenge for health and population care providers to meet people's basic needs, including reproductive health care, under the crisis and adversity. Each and every year natural disasters kill hundreds of thousands of people and inflict great suffering, while health care systems, often struggling to meet people's needs in the best of times, can be quickly overwhelmed by the added burden of injury and infectious diseases. At the same time, health systems themselves may be crippled by disaster.

Women and children comprised the majority of those who died due to the October 2005 earthquake in Pakistan. Neither demographics can be changed and nor earthquakes can be prevented from happening. However preparedness and planning is vital especially in areas prone to earthquakes. The Azad Jammu and Kashmir (AJK) and North West Frontier Province (NWFP) earthquake showed that more people are dying with natural catastrophe as compared to natural deaths. The striking feature is the sharp increase in the number of people killed by catastrophes. One explanation for the numbers is beyond dispute: Population growth. Areas where the earthquake struck, population had increased by an estimated more than 60% between1998-2005.

There were multiple lessons to be learned from the disaster and the unnecessary loss of so many lives which obviously can be prevented by responsible prevention, alertness, with quick rescue, relief and rehabilitation services.

The region affected by the October 2005 earthquake is in desperate need of policies that address the issues of population growth, urbanization, poverty, deteriorating infrastructure, environmental degradation, deforestation, a culture of corruption and self enrichment.

There is a need to devise a paradigm for coping with earthquake disasters other wise we are destined to be devastated by many more disasters for which population growth will not be the sole reason; however it will be one of the contributing factors for maximum causalities.

Therefore, the situation needs careful assessment, and it's prudent to take measures in a gradual and orderly manner with futuristic approaches on the bases of research. There are four important priorities in any crises rescue, relief, rehabilitation and reconstruction.

However, rehabilitation is an on going and the most important process in the phase of planning and preparedness. It is high time that we should recognize the fact that population growth has a real and extremely serious contribution in the tragedy and socio-psychological and demographic realities are more important to understand for future plan of action in the areas of health, population and social sector. In this way rehabilitation of their phobias can be negotiated. Only food, shelter and medicine can not be enough for rehabilitation. In this regard ideas and suggestions of the affactees are helpful to develop critical consciousness to improve their lives in future. These stories, case studies, and observations would provide a critical way of examining not only key actors and events but also cultural conventions and social norms.

The primary focus of the study was to observe and analyze socio-cultural and demographic patterns and trends among the earthquake affected communities pertaining to marriage, family system, family size, demand for family planning and reproductive health services in the rehabilitation process.

Literature Review

In 1986, a 7.1 magnitude earthquake killed only 63 people in San Francisco. On the other hand, the earthquake of 8th October destroyed 80% the city of Muzzaffarabad and killed more than eighty thousand people, while by contrast less than 100 people killed in city of Islamabad. There are solutions that can reduce the scale and magnitude of the loss by investing in innovative ways. Such as Bangladesh has managed to sharply cut death rates from flooding simply by building plat forms that allow people to escape high water. (Time Magazine, 2005)

The results of the vulnerability study conducted by population council showed that 5,408 orphans had lost their fathers before the earthquake and 2,218 children became fatherless due to the earthquake. Again, the majority of orphans (1163) were in the NWFP camps compared to the AJK (900) and ICT/Punjab camps (155). The loss of a mother has profound negative physical and psychological impacts on small children. Children who have lost their mothers may be in danger of inadequate care and attention by fathers who have to stay out of the house for long hours due to work. There were 4,580 children in the camps who had lost their mothers. Among them 1911 lost their mothers before the earthquake, and 2,669 children who lost their mothers during the earthquake. (Earthquake Vulnerability Assessment-Pakistan, 2005-06)

The Powerful earthquake of 8th October 2005 is considered to be the worst catastrophe in the history of the region, killing more than 80,000 people, leaving thousands injured and millions homeless. According to the official source 3.5 million people were affected by this calamity. The earthquake destroyed 203, 5791 housing units and damaged another 196,574. Nearly 3 million people were shelter less and without adequate food. More than 84 percent of the construction has been destroyed in Azad Kashmir and 36 percent in the affected area of North-West Frontier Province (NWFP). (Annual review 2005 to 2006, ERRA)

The most affected districts of Azad Kashmir are Muzaffarabad, Poonch and Bagh. The total population of these three districts is 18, 35817 as per 1998 census.

The total number of housing units destroyed and damaged are 2, 46,280, which is more than 80 percent of private houses in Azad Kashmir. Muzaffarabad is the capital of the Azad State of Jammu & Kashmir. It is situated at the convergence of the Jhelum & Neelum Rivers. The total population of Muzaffarabad district is 904,950. The household size is estimated at 7.1. The growth rate is estimated as 2.8 percent. Fifty-six percent of the population has piped water coverage. (Pakistan 2005 earthquake CRPRID).

Bagh is a very remote district of Azad Kashmir and remains underdeveloped. Total population of this district is 451,013. The total area of this district is 1368 sq.kms only. The population density is as high as 324 persons per sq.km. The growth rate is estimated as 2 percent and average household size is 7.4. The total numbers of villages are 208. Total number of primary, middle, and high schools are 336, 194 and 92 respectively. (Pakistan 2005 earthquake CRPRID).

One of the major earthquake affected district in NWFP is Mansehra, located in East-Central NWFP and is approximately 25 kilometers northeast of Abbottabad. The estimated population of Mansehra is 1,330,000 and 94.7 percent of the population lives in the rural areas. The average annual growth rate for the district during the 1981 to 1998 inter-census period was 2.4 percent. The Infant Mortality Rate (IMR) is quite high, and reported as 62 per 1000 live births for 1998-99. The Maternal Mortality Rate (MMR) is also very high, and reported as 560 per 100000 live births in 2001. (Pakistan 2005 Earthquake, CRPRID).

The overall literacy rate for Mansehra district is 36.3 percent. Female literacy rate is less then half i.e., 22.7 percent as against male literacy of 50.9 percent. Twenty percent of the total population is economically active. Forty five percent of the population is associated with agriculture, 7 percent are professionals. Almost 20 percent are involved in elementary occupations and about 0.8 percent are associated with the armed forces. Balakot was the town worst affected by the October 8 earthquakes. It is estimated that 80 percent of the buildings were destroyed. The total population of Balakot is 250,000 out of which 200,000 were

affected by this calamity. Half of the population consists of children and youth. Almost 90 percent of the houses in Balakot have collapsed with a heavy rate of casualties. While Balakot is accessible but land sliding has divided the town and the valley, completely cutting off Kaghan Valley and its 60 villages. (Pakistan 2005 Earthquake, CRPRID).

The results of the vulnerability study conducted by population council showed that 5, 408 orphans had lost their fathers before the earthquake and 2,218 children became fatherless due to the earthquake. Again, the majority of orphans (1163) were in the NWFP camps compared to the AJK (900) and ICT/Punjab camps (155).The loss of a mother has profound negative physical and psychological impacts on small children. Children who have lost their mothers may be in danger of inadequate care and attention by fathers who have to stay out of the house for long hours due to work. There were 4,580 children in the camps who had lost their mothers. Among them 1911 lost their mothers before the earthquake, and 2,669 children who lost their mothers during the earthquake.

The same study also showed that more vulnerable groups like elderly people are often neglected by disaster relief programs. Lack of community support and isolation from their families sharply increases the level of risk faced by the elderly 4,561 individuals (2,106 males and 2,455 females) amongst the 252073 people living in the tent camps are disabled. It also shows that a higher percentage of females are disabled than males in all the age groups, except amongst children below the age of 10, and the elderly over the age of 60 years.

The findings of the assessment showed that out of a total of 5,388 widows who were living in the camps, 768 had lost their husbands during the earthquake. The figure also depicted that higher proportions of younger women are affected by the earthquake. It showed that the women age 20-24 years comprised the highest proportion of women who lost their husbands due to the earthquake. Female-headed households are among the most vulnerable groups in the earthquake affected areas. The numbers of female-headed households make up

almost 10 percent of the total number of households in the tent camps. A disaster like the earthquake can have indirect consequences as well. During such periods, spontaneous abortions (miscarriages) can increase sharply from the physical and mental stress. It shows that more than 60 percent of the women of reproductive age are married.

The findings of the vulnerability study further showed that there were 2,778 pregnant women in the camps who needed proper nutritional and antenatal care. Almost 1200 of these women were expected to give birth within three months. Even under usual circumstances, 15 percent of pregnant women require emergency obstetric care to avoid maternal and infant deaths. Pregnancy and delivery can be dangerous for women in the best of circumstances. Due to the earthquake however, women are at an even greater risk since they generally cannot get prenatal or emergency obstetric care. Family planning services are especially important because the earthquake has destroyed the health services on which they depend. Family planning allows women and men to choose if, when and how often they want to have children. The assessment revealed that almost 10 percent of the married women reported a need for family planning services. These family planning services are required on an urgent basis.

In a society with son preference, at the arrival of each baby, couples may "calculate" consciously or unconsciously, the sex distribution of their children and decide whether or not to accept family planning, weighing their need of another son against their desired family size. When the family size norm has become small by choice or coercion son preference distorts the sex ratio of children through the use of sex selection technology or some other means such as failure to report female births. (Chaibin Park-Nan-Hooncho 1995)

This research also tries to capture the implications and consequences of natural disasters on people's life and their decision making as a result of such catastrophes. The focus of the research is on those life experiences (epiphanies) that radically alter and shape the meanings persons give to themselves and their

life projects. In epiphanies, personal character is manifested and made apparent. By recording these experiences in detail and by listening to the stories people tell about them, the researcher is able to illuminate the moments of crisis that occur in a person's life.... (Examples of epiphanies include religious conversions, divorces, incidents of family violence, rape, incest, murder and the loss of a job natural catastrophe." (Amanda Coffey Paul Atkinson). 1996.

As is evident, natural disasters such as the October 2005 earthquake in Pakistan, basic infrastructure and general social services get badly affected due to multiple reasons ranging from damage to the infrastructure to a collapse of the entire system. Such crises overwhelm health systems. When a crisis strikes, reproductive health programs often cannot accommodate the huge numbers of refugees who urgently need services. Crises come on top of existing problems. Since most conflicts occur in developing countries, where health conditions often are poor, many displaced groups already suffer from ill health, including malnutrition and STIs. Moreover, most refugees have few possessions left and cannot afford to buy health care, food, or much else. (Population report 2005).

In the years to come climatologists are warning every now and then that world in general and the poor countries in particularly may face more of such disasters. These could stem from global warming, urbanization, pollution, and over consumption of resources of land and forest mafia and poor legislation. These silent and invisible threat closely related to population growth recently have shown that nature, if treated unfairly seeks its own revenge. (Time 2006)

Justification

Keeping in view the literature review following is the justification of the study.

Existing studies showed what is known about a general area of inquiry and what is missing what has been done and has not been done and what questions were not asked at all. Were the questions asked of a usefully varied group of

people? Most of the previous studies discussed only statistics related to consequences of disaster and did not observe long term impact, perceptions, attitudes and behavior of affactees as well as disaster managers.

Therefore, it was important to unravel the feelings and perceptions of those who had directly gone through the experience and had felt the change caused by this catastrophe in the lives of their dear ones as well as the society in general. The study has been conducted through qualitative research tools like focus group discussions and in-depth interviews, in order to understand the attitudinal and behaviour side to the people affected by natural disasters, who suffered and were involved in rescue and relief efforts. Because these are the people who can actually tell what really happened and how quickly people of the area shaped and reshaped their attitude and behaviour, their perceptions and opinions about disaster and socio-psychological demographic realities.

The literature review has clearly and specifically figured out demographic, social, economic, medical and health implications of disaster. However these reports and data were based mostly during the phase of rescue and relief. Therefore, it was a timely issue that an impact study was launched not only to assess the consequences but also its long term impact on individuals, and families. The aim of the study was to observe qualitative changes in the life style, value system vis a vis impact on marriage pattern, desire for children, preference for children, their views on contraception, and abortion on the lives of the affectees.

It is evident that pessimism and depression may depress the birth rate and push up rates of morbidity particularly trauma, while bad memory is a factor in the development of schizophrenia. Such people can be brought back to their normal life and help other people put their lives back together with an intensive combination of group, individual and family psychotherapy and help with social skill.

In natural disaster situations, the flow of cash, influx of NGOs, donors, are also a significant threat to culture and life style of local community. Even in the 2005 earthquake affected areas, there were stories and talks that due to this tragedy people have not learned a lesson and moral degradation was at its peak- Greed, apathy, intolerance, political motives, ethnicity and role of institutions are also issues discussed by the affected population.

Objectives of the Study

This research study is based on three broad objectives:

(i) This is an exploratory and descriptive study to find out peripheral associations and correlations of disaster with socio-psychological and demographic realities.

(ii) To enquire about the role of institutions.

(iii) To find out specifically about pattern of marriage, decision making, type of family, family size, contraception, abortion, and broad issues of health and population in adversity.

CHAPTER 2

METHODOLOGY

The study was designed to conduct twenty four focus groups with earthquake affactees and thirty in-depth interviews from disaster managers. The field work was completed in six districts namely: Muzafarabad, Bagh, Poonch, Abottabad, Mansehra, and Batagram. Purposive sampling was carried out to cover the groups of (FGDs) and (IDIs) in a representative manner.

The Disaster managers were those who were involved right from rescue down to rehabilitation, while serving in the areas of Health, Population, Education, and Social Sector. Equal number of males and females were interviewed with an equal number of male and female focus group discussions. The interviews were recorded on one to one basis in their respective offices.

The respondents of FGDs were selected from an identified population of relevance to the topic, with focus on those who had lost their loved ones and belongings during the earthquake. Their names were kept secret; however their characteristics and profile were tabulated

In FGDs and IDIs, questions were asked from affactees as well as disaster managers, regarding knowledge, observations, experiences, and impressions. Questions revolved around the mistakes made during the process, their causes other than nature and ways and means that could have minimized the damage caused by the earthquake or any future natural calamity.

In addition, the role of civil society, institutions, Govt. institutions, NGOs, INGOs, CBOs, local leadership, their level of awareness and response to catastrophe were also recorded.

During discussions and interviews focus was on social and psychological problems of the people change in behavior and attitude after the earthquake on their life style, desires, and intentions for size of family and preference for children.

A number of important issues were discussed regarding rehabilitation process and its impact on cultural and life style, micro and macro level community threat particularly, threat to culture and value system due to influx of outsiders. Socio-physiological demographic realities were also discussed in detail.

Team Composition:

A group of ten qualified field researchers were recruited and engaged for data collection. Two teams consisting of four Moderators and note takers were involved with an equal representation of males and females. These teams were supervised by two coordinators. NIPS Researchers and senior staff were also involved in monitoring and supervision.

Group Composition:

Most focus groups were composed of 6 to 8 people. Because fewer than 6 participants makes a rather dull discussion, and more than 10 participants are always difficult for the moderator to manage.

Research Sites:

The study was designed to conduct 24 focus groups and 30 in-depth interviewers in six districts, Muzafarabad, Bagh, Poonch, Manserah, Abottabad and Batagram

NUMBER OF GROUPS PURPOSIVELY SAMPLED FOR FOCUS-GROUP DISCUSSIONS BY SEX AGE AND AREA AND NUMBER OF DISASTER MANAGERS BY SEX AND DISTRICT

District	Total	Male		Female		Disaster Managers	
		25-30	45-50	20-25	35-40	Male	Female
Muzafarabad	8	2	2	2	2	3	3
Bagh	5	1	2	1	1	2	2
Poonch	2	1	--	1	--	4	2
Mansehra	5	1	1	1	2	3	2
Batagram	2	1	1	--	--	3	2
Abbottabad	2	1	--	1	--	3	2

Strategies Used for Analysis

The Focus Group Discussions and interviews were transcribed and translated. Important notes were made in the field, edited and corrected for on going discussions. Then data were coded: attaching key words or tags and the data entry was completed keeping in view the strategy for report writing.

Content analysis was done for counting frequencies, sequences or locations of words and phrases. Then network of associations were developed for systematic conceptually coherent explanation of findings.

Due to human and economic loss particularly sharp decline in demographics of mothers and children could have an impact on their wider and broader socio-psychology particularly, life style, value system, change in types and patterns of marriage, family, family size, number of children and their value, son preference, and issue of widows and orphans. The study focused on interesting patterns not in terms of casual models or casual explanations, just examples of commonality differences, patterns, and structure.

CHAPTER 3

OBSERVATIONS, EXPERIENCES AND IMPRESSIONS OF THE AFFECTEES ABOUT THE EARTHQUAKE

This chapter analyzes the information collected through focus group discussions and in-depth interviews in context of "Socio-psychological demographic realities in earth-quake hit areas of NWFP and AJK". The main themes covered in this chapter are:

- Knowledge and Observation about earth-quake
- Causes of earth-quake other than nature Micro and Macro level community threat.

An attempt has been made in this chapter to identify the knowledge and observation of the people, and feedback of the people as to whether these causalities can be minimized and what are immediate communities for threats during the process of rehabilitation.

Knowledge and Observation

Majority of the respondents mentioned their experiences and observations about what exactly happened at the time of earthquake. Most of the respondents said it was a dooms day scenario and stated that it "was a Qayamat and great curse from Allah". There was smoke and nothing could be seen. Every thing was scattered here and there and it was a total catastrophe. Respondents also felt that it was a curse from God, because they were not being proper Muslims and not practicing according to religion. That's why it happened.

Few of the respondents mentioned, that scientists are of the view that plates of earth have been separated which causes the earthquake and it will also happen in future.

"We feel that it was a terrible and horrible day. Every one was scared and my sister and other 4-5 relative died in the earthquake, but that time nobody knew what was happening. The dead bodies were around and some of them had lost their hands and heads. Children were missing".

(Female FGD Abbottabad)

"The earthquake was so drastic, that my house fell on the ground and my mother came under it, she died. We found her body after three days."

(Female FGD Participant Abbottabad)

"We feel that it was the Day of Judgment. My mother-in- law and my wife died."

(Male FGD participant, Mansehra)

"There was smoke, nothing could be seen and my son died"

(Female FGD participant, Muzaffarabad)

"There are weaknesses in our doings; we do not remember God that's why it happened."

(Male FGD participant, Batgram)

"People died inside their houses and nobody knew where children and elders were."

(Female FGD participant, Batgram)

Causes other than nature and can causalities be minimized

The quake has unleashed a fierce debate as to whether it was natural or man made. Regarding causes other than nature most of the respondents are of the view that it was Gods curse and the poor quality of building and sub standard construction material used were the reasons for more deaths. Respondents were also of the view that the deaths caused by the earthquake could have been minimized, if right measures had been taken. Respondent's point of view is that medical facilities, food and even water was not available for injured persons and

people kept on crying for days. But now people are aware and trying to construct houses using material recommended by the concerned authorities. As far as response for preparedness was concerned majority of the FGD participants mentioned that earthquake victims did not get the support he or she needed to put their lives together.

Respondents of FGD stated that God knows better what the causes of earthquake are and most of the people were not aware of how the earthquake could damage buildings.

"God knows better, what the causes of this earthquake were?"

(Male FGD Participants, Abbottabad)

"It was natural. It could happen again. If I know it will happen again I would die due to fear."

(Male FGD participant Batagram)

"It was from God due to our wrong doings."

(Female, FGD participant Bagh)

"I would say that the main reason of causalities is the construction of our houses, as these were built with heavy stones and sands therefore these houses could not sustain the shocks. Even it is generally said that when the earthquake comes as a precautionary measure one should go inside the house and many did due to this reason. I believe if the earthquake comes now it would cause less causality than before."

(Female FGD participant, Batagram)

"We had houses made of mud, and did not know that earthquake could damage them easily".

(Female FGD participant, Bagh)

Micro and Macro Level Community Threats

It is a known fact that in disasters human beings are the most vulnerable with multiple issues pertaining to security, protection, basic needs and general well being. The catastrophic earthquake of 8th October 2005 in Pakistan was no

exception. In this study an attempt has been made to know what the micro and macro level threats are for the community and the people after the earthquake. People in earthquake areas were afraid of after shocks. Respondents were of the view that there were no threats as they were all living together in tents. On the other hand respondents mentioned problems of living together with the threat of spread of epidemic diseases.

Focus group participants stated that they were having great sense of insecurity, such as robbery, theft, gang rape. There were also rumors of kidnapping of girls from schools mentioned by few of the participants.

During the analysis of FGDs it was found that people developed a feeling that foreigners particularly Americans will work against our religion and will take over the control of Kashmir. There was also a cultural shock to the local people of the community because of large influx of national and international NGOs and their staff members. Fears of another earthquake, especially because of the continuous aftershocks, was a major threat mentioned by many FGD participants. Insecurity was also naturally felt by the females as many families had to reside in tents for several weeks and months, and spending nights in the open was scary for the women.

"Even at the day of earthquake two or three times after shocks were observed. We had the feeling that another earthquake will come and will destroy every thing. No one was mentally relaxed even after one month."

(Male FGD participant, Bagh)

"Apparently both good and bad people live in society. While living in a tent we were afraid of theft, robbery, gang rap etc. Aftershocks were constantly coming and we were afraid that next shock will be more dangerous and destroy the whole world."

(Female FGD participant, Bagh)

"Our males were on duty at night and we were living in tents and we could not sleep at night. We heard that girls were made unconscious by giving them medicines and were kidnapped and this was the major threat."

(Female FGD participant, Muzaffarabad)

"We did not have any threats rather we were feeling comfortable as we were living altogether."

(Female FGD participant, Rawalakot)

"At the time of earthquake we had the feeling that we will live and die together, but later on we realize that we can suffer from diseases and it was not possible to live together."

(Female FGD participant, Rawalakot)

"We had the feeling that foreigners would divide us and will takeover the control of our Kashmir. American were distributing books to our school children's and also asked them to bring these books to school to get attention of the children. This creates suspicions about foreigners"

(Female FGD participant, Mamsehra)

In-depth interviews were conducted of social activist, NGOs staff, population Welfare department , doctors, paramedic's and other government high officials who work as disaster managers were involved in relief and rehabilitation activities immediately after the earthquake. These people worked around the clock and their knowledge observation is of paramount importance for the study

The disaster managers have given more or less the same observations as those of the participants of focus group discussion. Most of the disaster managers mentioned their own experiences and stories immediately after the earthquake.

"It was a dooms day for people. No one was taking care of each other. People were upset. Every one was crying and weeping. People were pressed under the collapsed houses. But we were busy with patients and unaware about our own families and how they were coping with the situation."

(Male disaster manager, Rawalakot)

"It was not an earth quake it was the doomsday that took every thing upward. The situation was like as the earth moves on the other side. Then we said that it is not earthquake it is something else, it is a calamity."

(Male disaster manager, Batagram)

Most of the disaster managers were of the view that environmental degradation, too much congestion of houses and substandard material used in buildings were the major reasons which increased the number of causalities. Lack of rescue service especially in rural and far flung areas were also one of the factors for large number of causalities.

"The basic reason for high number of causalities was the construction of houses. This was absolutely substandard. The houses were not made by planning. If one house has fallen it damaged ten other houses. People were not aware of how to construct houses which were earthquake prone. It was a plan of their own demise."

(Female disaster manager, Mansehra)

"I think it was an environmental factor. Balakot city is totally destroyed because of high density and poor infrastructure."

(Female disaster manager, Balakot)

"Majority of the people died in earth-quake because of concrete roofs. All roads were blocked and no one knew what to do during an earth-quake. There was a huge panic."

(Female disaster manager, Batgram)

"A woman was taken out after one month from debris, but she was still alive. It means if we had reached the people on time, many lives could have been saved. At that time no facility by the Government was provided from Abbottabad."

(Male disaster manager, Abbottabad)

"Government buildings were faulty and it caused major loss of buildings and deaths of children in schools. Faulty structure is the basic reason, because buildings were not constructed properly."

(Male disaster manager, Abbottabad)

"This is rural area and people are not economically well off and the poor took the hardest blow. Their houses are traditionally constructed with stone to be safe. But these were not earth-quake proof houses. This factor caused more damage."

(Male disaster manager, Balakot)

Disaster managers mentioned different sorts of problems faced by them on the issue of micro and macro level community threats during the rehabilitation process. Fear of spread of diseases, unequal and unplanned distribution of food stuff and in some areas kidnapping of children were identified as major micro and macro level threats during the early days after the earthquake.

"There are many threats like security, harassment, child abuse, kidnapping. Macro level threats will appear when NGOs people will come and people feel insecure and have the feeling what will happen to our culture."

(Male Disaster, Manager Bagh)

The common perception of all disaster managers and earthquake affected population clearly indicated that it was an unbelievable and frightening experience. According to everyone consulted during this study, it was something they had never experienced in their lives and they would never forget it.

CHAPTER 4

ROLE OF INSTITUTIONS

In this chapter a wide range of issues regarding civil society and the role of Govt. institutions have been discussed at length. The research reveals that while there has been criticism of many unfulfilled expectations, people have also shown appreciation for many actions done by the government and other private organizations and donor community. It is easy to understand the varied sentiments of the people as many are still trying to bring their lives back to normal and are uncertain about the future.

The October 8th 2005 catastrophe was so massive that a sustained effort was required to cope with the situation, which is the main reason that this study included disaster managers, social activists as well as the opinion and perception of affactees about the whole tragedy. These were the people who were there when it happened and have been involved right from rescue to rehabilitation.

The civil society, public sector institutions, the world community and individuals, all have shown a remarkable contribution of generosity and magnanimity in extending all kind of assistance to the affected people. One of the most important factors of the relief and rescue operation was the speed and scale with which everyone responded showing the difference collective action could bring about.

The general perception of disaster managers was that people of Pakistan during this disaster rediscovered their sense of humanity, patriotism, and nationalism. People came forward with a single minded aim to ease the suffering

of those devastated by the catastrophe. However, it was not easy for everyone to work in such harsh and rough conditions. For many outside organizations, adapting to the local cultural and social conditions in addition to the psychological trauma of the affectees was not an easy task to handle.

During this study, two point of views were reflected regarding the relief and rehabilitation activities. The affectees were disappointed with the efforts of the rehabilitation agencies and expressed anger over the performance of most departments. On the other hand, development organizations and government departments felt quite proud of their work and showed satisfaction about the progress so far.

Main topics which were discussed during the data collection process were:

- Realization and reorganization of disaster
- Role of NGOs
- Role of Army
- An issue of tent
- Amount of compensation
- Mismanagement
- Role of religion
- Role of Media
- Missing links
- Role of international community.
- Celebrities come out in support.

A majority of disaster managers both men and women expressed their opinion that role of the civil society and institutions was appreciative and impressive particularly, in the early days of earthquake during relief and rescue phase. People are thankful for the support provided by NGOs and the Govt. but according to the people it was peanuts as compared to their loss.

"Bagh district still continues to be in ashes and debris during data collection. Similar situation was observed in Balakot"

(FGD female participant Manserah)

"Civil society of Pakistan played a remarkable role as compared to all Govt or Non Govt institutions. After that international community stands out remarkably .Civil society gave us courage and moral support to get up and move on. It was a nightmare for all of us. It was a defining moment in every ones life."

(Disaster manager Abbottabad)

"Role of local leadership was not satisfactory; The local Government institutions were supposed to help and guide the Pakistani and international community involved in the relief and rehabilitation work but even that guidance lacked wisdom."

(FGD Male participant Poonch)

"The contribution of AJK leaders and departments was pathetic. Reasons are obvious as because majority of them was also affected badly".

(Social activist Muzzaffarabad)

Realization and Reorganization

There is a great realization and recognition that it was a massive disaster. But across board, everyone recognized the enormous effort put in by many individuals and organizations to support and assist the affectees. The People highly appreciated the role of media and people of Pakistan. The respondents recalled unbelievable gestures of sacrifice and help provided by the doctors and relief workers as they worked as a momentum team to save lives.

This calamity brought forth recognition especially the role of the civil society in terms of their selfless help and generosity of spirit as compared to the government institutions. There is a realization among those involved during the emergency period that concerned government institutions and other organizations were not prepared and organized enough to manage a situation of such magnitude.

Respondents also claimed that no action was taken by the authorities although such an earthquake had been forecast years back for this region.

"The real problem at the time of disaster was that our institutions and systems were not at all prepared. Everything was haphazard and disorganized due to lack of inability to tackle the disaster. There were many distortions, half truths and lies. Some of the issues were blown out of proportion, if you just put them under microscope."

(Female disaster manager Poonch)

"The problem is that institutions have no clear vision and shallow approaches were adopted. Some experts had predicted this earthquake more than twenty years ago. But nobody took it seriously thats why there was no organized and quick response."

(Disaster manager male Muzzaffarabad)

The Role of Government Authorities

These were amazing stories however there is a flipside of the tragedy that the adversity became an opportunity for few which is really regrettable.

"These Govt institutions, NGOs and INGOs have not established good precedents. They were involved in disaster but their dresses, vehicles and the way they were behaving were not what people were used to. It seemed that they had come from other planet and they are super human beings and their tall claims and promises were never fulfilled".

(Social activist Poonch)

People in general during the research expressed bitterness about the assistance and support they were extended by the Government authorities. Examples were quoted of the various perks the ERRA and SERRA staff members had received although their performance did not match the credits they got.

"Irony is that people working in ERRA Islamabad the year after the earthquake, got six honorariums and those who worked day in and day out they did not get a single penny. They got it because they were busy in power point workshops arranged at the five star hotels of Islamabad which had absolutely nothing to do with ground realities."

(Social activist male Poonch)

In general, people appreciated the role of local government authorities and felt that they were mostly accessible and tried to play the role of effective facilitators between the larger institutions and the people. However, negative feedback was also reported mostly centering around corruption, nepotism and in competency. Many respondents complained of political victimization especially during the compensation process.

The Role of NGOs

It seems that the public sector agencies were not the only ones to be criticized by the affactees. Many respondents expressed their disappointment with the NGO sector as well. People were skeptical about many NGOs and felt that they were actually trying to cash in on the situation to receive funds from international donor organizations for their own organizations. .

"There were a few genuine NGOs; but some of the NGOs were big-time fraud. They made a lot of money from donor and did not spend that money on community of affactees. They improved their own life style and established their own organizations with well furnished offices and luxury vehicles."

(FGD old male participants Bagh)

However, a noticeable number of the participants were of the opinion that civil society and NGOs played a positive role during rescue and relief efforts.

Some of the study respondents felt that at the time when the government services were so overwhelmed with the tragedy, it was the International Community and civil society of Pakistan individually and collectively who came forward to share the burden and were of tremendous support to the people, a fact acknowledged by most of the respondents. Individual efforts were also recalled by several respondents and praised as equal contribution as institutions. Such individuals are our real unknown heroes.

In district Bagh there were more conflicts reported concerning NGOs, but the focus group participants still acknowledged the positive role played by NGOs.

"In our district Bagh in the phase of rescue and relief every body was impressed the way they (NGOs) helped us. Before earthquake we did not know what NGOs are doing but the tragedy clearly showed that the role of NGOs can not be underestimated in any way. However political connections played negative role in managing disaster."

(FGD young male participant Bagh)

Local people felt weary of the women workers of NGOs, who were considered to be a threat to the local traditions and culture. Socio-cultural sensitivities should have been considered by the local authorities during the reconstruction activities and involvement of any outside organizations and agencies. In certain areas like Allai and Battagram, outside intervention is neither encouraged nor accepted by the local population especially in context of women.

"Many social and cultural conflicts arose, due to the behavior of women hired by NGOs. For instance in these areas the handshake of woman is a tricky. There was even a linguistic problem. They do not have a level of sensitivity and an ability to communicate. They do not know basics of how to win friends and influence people"

(FGD female Muzzaffarabad)

"Battagram is a very religious and conservative society. They were very happy with army but hostile to NGOs so it was the fault of top management that they involved NGOs in an area which is already against them due to different factors".

(Disaster Manager Batagram Male)

Respondents also reported many conflicts between local community and NGOs, which they felt were for personal gains as they started cropping up increasingly as the money started pouring in.

"It was not a race of need, unfortunately it was a race of greed both among communities and NGOs. Lot of people came to help in Battagram but due to insecurity and hostility some how things were not under control".

(FGD participants Battagram male)

Role of Army

The role of army was mentioned frequently by disaster managers as well as earthquake affactees as the top most contributing factor during rescue and relief.

A number of army officers and civil authorities themselves were earthquake affactees and it was difficult for them to over-look their own tragedies, but they still made their best efforts to help others in need.

The role of army was appreciated by all the participants. There was a consensus among general public and disaster managers that army played a remarkable role.

"Pakistan army moved in swiftly and effectively did a great job in rescue actions all over the affected areas. What was heartening for all of us has been the overwhelming response of the average Pakistani to this national calamity. Some individuals were ahead of institutions and International organizations."

(Disaster manager male Abbottabad)

"Red Crescent, Shaukat Khanum and to some extent army played a major role as an institutions"

(Female participants of FGD Abbottabad)

"Army and NGOs were visible all over but I tell you there were so many unknown individual who also played a major role. They deserve credit".

(Male participant Abbottabad)

"Yes Army, The health department, and NGOs played their role according to their capacities and resources but you really have to give credit to health department in the area of Abbottabad, Mansehra and Allai. Allai was completely destroyed. If all the departments work whole heartedly then there are chances that these people may stand on their feet. But it will take time. It's a gigantic task; it can not be done over night. Role of (Al Khidmat) and a team of Cuban doctors were exceptionally good".

(Male Disaster Manager Abbottabad)

Case Study

Some of the individuals and army officers were outstanding; Disaster manager narrated two case studies of Rawalakot.

These people showed common sense, thought strategically and developed a management perspective and saved many lives. They were widely praised in the area. During rescue phase we had not enough money to refer casualties to Rawalpindi. There was an uneducated local leader. He managed around hundred thousand rupees in less than an hour, with that help we transported some of the injured to Rawalpindi and they got timely treatment. As a disaster manager, to me it was unbelievable.

We can be proud of our army as well as local volunteers the role they played during rescue efforts. Although Brigade Commander was one of the affactees and number of his soldiers and colleagues were affected but he first helped the civilians before rescuing military persons. It was unbelievable gesture we really salute their greatness. These stories clearly showed how community got united. It was not less than a miracle. These officers not only rose on occasion rather they did a remarkable job and intelligently saved number of lives.

Role of Religion and Religious Organizations

Some of the disaster managers felt that role of religion was also crucial in the disaster and there was a close linkage between the catastrophe and the current state of religious beliefs. Not only the cause and affect of people's religious beliefs was considered as a reason for the disaster, but the general generosity of the entire nation at that time was also thought to be attached to the Holy month of Ramdan as a month to repent and help other fellow mankind. In some areas, people said that the religious organizations were the first to reach them for help.

"Actually it was the month of Ramadan and many believe that due to fear of God nation, was really moved and played such a generous role. There are a number of amazing stories

of sacrifices which were not highlighted neither by media or were documented and recorded any where".

(Disaster manager Mansehra male)

"The first help to reach us was Al Khidmat, exactly next day of the earthquake. First few days were full of panic, anarchy each and every organization or individual was actually over whelmed by the tragedy. However circumstances became normal after a couple of weeks with the arrival of army and NGOs. This tragedy clearly showed that we Pakistani as a nation can stand up and deliver irrespective of our religious and political differences. Magnitude of the loss was much larger than the support, that's why many untoward incidents took place."

(Male Disaster Manager Mansehra)

Majority of the participants of Muzzaffrabad reported that it was Lashkar-e-Tayyeba a religious organization who came to their rescue and provided relief goods. The service rendered by this religious group was highly appreciated by FGD participants, community and even Govt. departments.

Role of Media

Almost all the participants and disaster managers mentioned the role of media as one of the most effective means to inform the rest of the nation and the world at large about the plight of the people in the affected region, otherwise, thousands would have been neglected and over-looked due to remote access to many areas as well as multiple other reasons.

Actually in early days every body was motivated by the coverage of media particularly the role of two anchor persons Talat Hussain and Hamid Mir was highly appreciated by majority of disaster managers and earthquake affactees. But the moment announcements of aids and pledges and hype created by media not only changed the attitude of affactees, unfortunately many departments also made this tragedy into an opportunity to grab what ever was legally or illegally possible.

"Actually our media played a great role but some times they play the role of tabloid and over project negativity rather than the positivism".

(Disaster manager Mansehra Female)

"Media, and health department played excellent role in Batagram. The world vision, Oxfam, Red cross, military, and particularly Red Cross were really outstanding"

(Disaster manager Battagram)

Role of International Community and Support of the Celebrities

Role of international community particularly the Turkish Government played a great role as mentioned by many disaster managers as well as participants of FGDs. The respondents were of the opinion that after the rescue and relief operations, the reconstruction process was not according to their expectations or matched the claims made by those involved in the implementation. As a result, people were more appreciative of those initiatives which were long term and sustainable, like infrastructure development etc.

Respondents recalled the arrival of high profile celebrities both national and international, who had visited the affected region to show their support for the victims. According to the people of the area, these visits certainly raised global awareness about their plight and many volunteers and philanthropists came forward to help out at the time of need.

The hospital in Muzzaffarabad was established by American army within a couple of weeks after the disaster and was later on visited by Dick Cheney, the UN Secretary General and Angelina Jolie. The presence of such famous people not only helped in terms of monetary and material assistance, but the events themselves were a diversion for the affected population, who got an opportunity to be a part of these occasions and forget about their everyday hassles and the uncertainty of their futures.

Amount of Compensation

It is understandable that for people already living in poverty and then completed devastated by a natural calamity would be completely focused on ways

and means to rebuild their lives, for which they need financial and technical assistance. Therefore, it was not surprising that several respondents mentioned their dissatisfaction regarding the compensation process for the affactees.

According to the FGD participants in all the districts, influential people got four times more compensation amount as compared to the poor, who at times were deprived of even one installment. People felt that there was a lot of discrimination and injustice in the process and procedure.

"An amount of Rs. 150,000 compensation for the construction of a house is a joke. With this meager amount one can not construct a bathroom. How you can construct a house with this? Hopes, promises, and political statements, have created more frustration especially when they are not implemented.

(FGD participant Mansehra)

"False promises of international standard of reconstruction and rehabilitation were made. But by God their concept of international standards was worse than even local and national ones".

(Social activist Poonch)

People consulted during the study felt that there was no proper system for the compensation process. At that time every one was perplexed and confused from top to bottom. People were not skilled and educated enough to understand the procedures and no one from the authorities was accessible to help or assist those affected. This tragedy could have been an opportunity for unskilled workers, if things were properly managed.

"There *was no need to create new departments like ERRA-SERRA. Because at the end of the day every thing was being done by revenue department and particularly patwari, whatever mess was made by all NGOs and INGOs etc. All the conflicts and controversies were resolved by local leadership and district management."*

(Disaster manager Battagram)

'Govt did not give any kind of support. They just distributed Rs. 25000 cheques and then humiliation started. In the process people lost all regard for NGOs as well as Govt.".

(FGD participants female)

The study indicates that if the compensation process had been better organized and less politicized, it would have created less distrust among the people regarding the role of the authorities. People doubted the objectivity of the process and felt that those were given priority who had any contacts. It was specifically mentioned by many respondents that lack of communication between the people and the concerned authorities was a major issue for the affectees. Many people said that the local government played an effective role in pacifying the issues of the people and helped many in resolving their problems.

Mismanagement

There were many cases of mismanagement mentioned by participants of FGD across all areas. Disorganized and haphazard arrangements and plans for the victims created further chaos and confusion. Many organizations were doing one and same activity for example there were number of organizations distributed blankets and some of the affactees received more blankets than their requirement. Therefore, overlapping efforts by several organizations and government agencies was a waste of both human and financial resources which could have been beneficial if used for other pressing issues required at the time.

Many people also reported their dissatisfaction in terms of the performance and role of the AJK political leadership.

"Role of AJK leadership was highly questionable, most of the MPs of that time were found busy *in snatching the relief goods. There are number of told and untold stories and AJK Govt was watching the situation like a mere spectator. In spite of all the rescue and relief operations as a success story, it could have been better organized with little efforts."*

(FGD young female participants Muzzaffarabad)

"In our area no conflict was reported during the rescue and relief phase. Rehabilitation is a complex process. I do not know whether we have the capacity to take this challenge. I am not sure really".

(Female Disaster Manager Abbottabad)

A significant level of distrust could be detected among the victims regarding the various processes of rehabilitation and relief. Participants in the various FGDs felt that many donated goods that had originally been sent for their assistance were instead diverted by the concerned authorities and organizations for their own personal benefits.

"All the institutions played a remarkable role during rescue phase however the material distributed was not that donated by international community. We know that Korea had sent blankets but those blankets were not distributed among the community. Some of the institutions are using those blankets and they are also being sold in the market.

(FGD young male participant Poonch)

"Story of relief is built around tents, blankets and the problems of their haphazard distribution. Things were smooth in the area of health. Because both our health departments, and community of international doctors really provided a great relief services. Their services will recognize for a long time among the people of community. The role of ERRA is under lot of criticism due to the distribution of compensation for house building. It was complete mess and haphazard. There were lot favours, injustices and discriminations reported".

(FGDs Female Mansehra)

There was virtually no system for conflict resolution, further aggravating the situation. At the community level, local politicians and local government played some kind of a role in facilitation and coordination between the implementing agencies and the communities. But there was mixed response from the people regarding the role of these mediators depending on everyone's personal experience.

The communities and disaster mangers were not at the same wave length. In focus group discussions there were complaints against the role of ERRA. Even disaster managers were also not satisfied and they expressed their reservations about ERRA.

CHAPTER 5

SOCIO PSYCHOLOGICAL AND DEMOGRAPHIC REALITIES

Signs, signals and sense of realities

Key Findings

The disappointment, the anger, the frustration and the depression against institutions, statements made by leaders and tall claims have changed the society and their out look about life.

Therefore, there is a need that things must be put into perspective and understood as to how things are happening after the earthquake and how relevant departments need to emphasize not just on rescue and relief, but also on sustainable future planning keeping in view the demography, sociology and psychology of the region after the earthquake. Thus, the opinion and perception of earthquake affactees are significant to understand.

Massive changes have taken place in the earthquake hit areas and continue to do so. People are shaping, reshaping, regrouping and getting back on their feet. They were down and out, and are still in transit; however It was an ordeal of the worst kind and a very traumatic experience. "It's an ongoing nightmare for earthquake affactees lives." However, they have not given up on their lives, rather they have altered their lives and in the paradigm of planning, preparedness and rehabilitation they are not only talking about rescue and relief, they are also talking about all kinds of social, psychological and demographic topics as their priority issues in the future.

The chapter covers what they think, what are their opinion and views, other than rescue, relief and rehabilitation; What are the important factors in their lives for future planning, and what kind of socio psychological and demographic realities are and how they need to be addressed?

The study has not identified any major changes. However there are signals of change and these are of course are only micro steps towards change. These signals can be classified and categorized as under.

(A) Social

(B) Psychological

(C) Demographic

It was a thoughtful and articulate survey of affactees whose losses have been multidimensional and many of who have also been involved in the rescue, relief and rehabilitation process. The study is suggestive and not conclusive, with most of the opinions and comments as subjective.

The study can not prove a cause and effect relationship. But such concepts, links, margins, and gaps, could make socio-psychological and demographic sense. In crises people do not have plenty of time to figure out the consequences and the implications.

There is skepticism which is entirely justified particularly among women folk with a sense of despair,. People feel that earthquake has over taken both their hope and personal life. An earthquake is a history but the survivors are not history.

Signals of social change

Majority of the participants mentioned that they had communication difficulties with NGOs, and INGOs, developed into a lack of trust regarding the service providers.

There is trust deficit or trust lost. People do not trust each other, cheating, corruption and moral degradation is on rise in society. Because people are scared and vulnerable.

Another perception was that demand for family planning would increase due to economic pressure, poverty inflation etc. The respondents felt that it was still too early to comment on infant and mothers death. It is not a long term planning, such scheme of things will work only in short term. As far as change in life style was concerned, people thought that they were better off before the earthquake, now they are like beggars. This earthquake of course has changed their lives altogether. Because of adversity, group marriages are arranged. A number of threats and fears were discussed by participants, which they faced in their daily lives.

"We are mentally retarded. We live like dead bodies. The cases of psychological disorders have increased. Social problem is that people do not care for each other they are more greedy and selfish. Children are so scared. If they hear any loud voice they get scared that there might be another earthquake".

(FGD young female Muzzaffarabad)

One third of the participants were of the view that their culture can not be influenced.

"The outside world has not influenced our tradition and culture. These are deep-rooted traditions. It takes decades to change the attitude and behaviour of people. In a couple of years culture can not be changed. In our area family size will neither decrease nor would it increase. Our opinions about medical facilities are quite different people are not getting enough psychological relief. There are more cases of psychiatry in earthquake hit areas as compared to the past."

(FGD young male Mansehra)

(i) Issue of women mobility

Two thirds of the participants mentioned that pattern of women's freedom has not been affected at all rather women mobility after the earthquake is more

controlled and restricted. Because before earthquake, their husbands were working in cities but after earthquake they are at home and decision making is entirely in the hands of male members.

"It is a conservative society decisions are made by men. Now people are more conscious about the whereabouts of their women. Women's freedom has been more restricted after earthquake."

(Female Disaster Manager Mansherah)

"As far as issue of women mobility and freedom are concerned in the villages, every body knows who we are, whose wife, whose daughter, Men always worry about our where abouts. Earlier, the men worked in the cities and would only come back home to visit once a year or so. But now they are at home after the earthquake and so they keep a strict watch over women's movement. Now women have to negotiate with male members. The restrictions on young and unmarried women have increased the most after the earthquake."

(FGD female Muzzaffarabad)

(ii) Women headed household

A large majority of women believe that earthquake has brought tremendous change in the power structure within the household level. In many cases, the women have lost fathers, brothers, husbands and sons and are no longer there to help them out. These women are in dire strait after losing their loved ones and still struggling to live without any adult male members.

For women, who are widowed with orphan children and are left as the sole providers for their families, the most urgent tasks is to rehabilitate or rebuild their daily life and to feed a family, take children to school, and shopping for basic necessities.

These challenges are critical to stabilize a society Institutions and disaster managers need to focus more attention on those women and children left alone. The upside of the whole tragedy is that study did not find any cases of female

violence, child harassment, and child trafficking as feared in the early days after the earthquake.

The study endorsed the findings of other studies that protection, nutrition, and education are key areas for the well being of the quake affected children. Participants and disaster managers also highlighted these issues. Some underlying causes such as illness, school drop out and poverty were mentioned as important and frequently discussed issues during the focus groups.

"Definitely large number of women and children died in earthquake. This tragedy clearly showed that women and children are the most vulnerable in our society in crisis. Yes there is a change in life style. Particularly female mobility has been affected. Contraceptive use increased after earthquake. Cases of psychological disturbances, remarriage and nuclear family have increased."

(FGD old female Batagram)

There is a change in those households where men died and household is headed by a woman. We all realize and understand that vast majority of children and women were the victim of this tragedy. Numbers of orphans and widows have increased.

(Disaster manager Muzzaffarabad)

(iii) Gender differences

Each family and every individual, male or female from all the affected districts, had their own story to tell in context of the loss, trauma and efforts of rebuilding their lives including the changes that have occurred in people's attitudes and behavior regarding their everyday lives. Many respondents and group participants talked of gender issues, which came forth not only in practical terms but also in the roles played by men and women respectively in the process of rebuilding and rehabilitation.

"Specific changes took place in the life style of people and one can observe that men and women felt different changes. Men are under economic pressures, while women are under

psychological pressures. There are stories of women who really laid down their lives for their children."

(iv) Dependency syndrome

The issue of dependency on external assistance and support was discussed by almost all the research respondents. It is evident from other experiences of such disasters that it is natural for the victims to become dependent on external help due to the collapse of their own lives and means of livelihood. People just don't know where to start off from. Some respondents were of the opinion that development partners and organizations working of reconstruction have created dependency of people by offering them services, which decreased their motivation and need to work.

"Dependency syndrome is the direct result of the consequences of adversity and it has an impact on socio-demographic realities. Issues of dependency syndrome have emerged, because people are still in shock. Even disaster manager themselves are struggling with the shock of tragedy."

(Disaster manager male Battagram)

"These NGOs are creating dependency syndrome and making people beggars. If compensation had been paid once then reconstruction process would have been completed much earlier but first they were planning in Islamabad, established their offices, bought luxury vehicles, arranged large salary packages and then they came to the hard hit areas. People here were down and out and had lost every thing."

(Male disaster Manserah)

(v) Impact of external interventions

It is inevitable that disasters of such magnitude bring about social change and people start to think and behave differently towards a lot of things. This social change is not only due to the affects of the disaster, but also due to the influx of international community and their interaction with local community over a period of time.

"Especially during the rescue and relief operations, people had a lot of exposure with international workers, who immediately arrived after the earthquake. These workers in many cases were present for extended periods to the nature of their work, which had quite an impact on the lives of those they closely interacted with."

(Female focus group, Muzaffarabad)

(vi) Change in social network

Before the earthquake, the social support network mostly focused on relatives or influential of the area, but after the earthquake the announcements of relief and compensation decreased this dependency. At that time everyone regardless of their social and economic status were in similar situation and no one was richer and poorer then the other.

In addition, due to the collapse of everything whether physical infrastructure or emotional, changes took place in many facets including family system. People started living in nuclear families more, probably due to the compensation criteria, which only treated one family as a single unit under one roof whether joint or nuclear, but certainly altered the family system in the region.

"Normalcy is coming back but pace is too slow that's why there is more psychological problem as well as social. Due to the growing trend of nuclear family, old supporting networks are on decline. So earthquake has changed our value system. People are no longer cooperative with each other. Housing pattern has also changed. Tradition of simplicity has re-emerged and even the dowry system has evaporated. So in many ways it is a good change."

(Female disaster manager Muzzaffarabad)

(vii) Cultural clash

As mentioned in the earlier parts of the report, there were reports of conflicts between the local populations and the authorities more so in case of private organizations and NGOs. Local people felt quite weary of the behavior and practices especially of NGOs team members.

In Bagh and Batagram, the hostility between locals and NGOs were due to cultural clashes and breach of local traditions by outsiders. The local people were uncomfortable with female staff members of many organizations and did not approve of women activists exposing their females to outside interventions.

"These NGOs have spoiled our culture. ERRA has sublet many projects to NGOS like NRSP. People have absolutely no respect for these NGOs. That's why many social and political conflicts arise. Due to NGO culture, vulgarity and obscenity is increasing. There is lot of complaints against some of the NGOs working the area. These NGOs have not rehabilited us rather they have humiliated our community. The way they treated us it is ridiculous. They are here for a cause. But they do not behave like missionaries and volunteers."

(FGD Participants Bagh)

Some of the participants were of the opinion that after becoming homeless, families were forced to live in camps, where their children got exposed to all kinds of things. Not only that security issues were also a major concern as people were forced to live outside the secure environments of their villages. Children were out of school and roaming around camp areas unsupervised.

"Now we are living in tent villages. It is not good for our children. They are adopting bad habits. So our life styles as well as our habits are changing. Children are mentally disturbed. They are scared to go to schools, because their school buildings had collapsed."

(Young male FGD Muzzaffarabad)

"As for as changes are concerned, I think it is too early to predict and observe any kind of change in people's attitude and behaviour. Marriages are celebrated as usual people are suffering so many psychological problems. People are still in physical and psychological trauma".

(Disaster manager male Muzzaffarabad)

According to many respondents, the earthquake had altered the social fabric of their society. It had an affect on their value system, resulting in social and cultural changes. The prominently given example was that was female mobility.

Earlier to the earthquake, women in these areas were mostly confined within the homes. While now, women could be seen roaming around for relief and help.

A few participants attributed the rigid behaviors of the people a hindrance towards rebuilding efforts. Some people were so caught up in preserving their traditions and refused to cooperate.

"Some people are obsessed with their traditions. There is a big stone in Rawalakot bazaar which is hurdle for traffic but the person whose father has fixed it, he does not allow removing it. These people are irritant egoist. I do not think this tragedy would have an impact on their life style. Even institutions are not that missionary and serious. They are just making money and passing time. At the end of the day every thing would be at square one."

(Social activist Poonch)

"After the earthquake a woman came to our hospital for delivery. But due to non availability of women doctor, her husband refused and took her back for home delivery."

(Male Disaster Manager Batagram)

(ix) Moral turpitude and element of corruption

A significant number of respondents mentioned corruption and inefficiency of government authorities and other development agencies for so many deaths as a consequence of the earthquake. People were of the view that deaths in schools could have been prevented if the contractors had not done substandard construction and the "officials" had actually performed their duties and supervised the quality of construction.

According to the respondents, this catastrophe had a tremendous impact on moral value and increased the "number of nagy, grabby and greedy people". There was no transparency in any of the processes during the relief and reconstruction operations and many people were unaware of how to approach the appropriate authorities for assistance.

"People know that their children died in schools. Buildings were not constructed according to normal standards and 90% people died due to faulty construction. But this issue has been swept under the rug due to unknown reasons."

(Disaster manager Muzzaffarabad)

"Majority of the students killed by the quake were buried in their classrooms for many days. The schools collapsed because these were shoddily built buildings. In one school more than 1000 students died. These Govt. schools and hospital buildings were built by commission mafia. We request that the matter should be investigated. We hold local Govt. officials and building contractors responsible for large number of deaths. In the hype of relief, rescue people have forgotten this aspect of corruption. Matter must be investigated."

(Old male FGD Muzzaffarabad)

" After earthquake people became more selfish and greedy. They now expect something in return for everything. No more love and sympathy for others. There was a race for collecting maximum, and the powerful and influential grabbed the opportunity. ".

(FGD young male Bagh)

Signals of psychological realities

(i) Psychological cycle of illness

People are still in need of help even after two years of the earthquake. Many are still agonized and traumatized because most of the images of devastation, suffering and miseries, still prevail. A sense of hopelessness continues, which the victims accept themselves considering the losses they have suffered.

There is consensus among disaster managers and FGD participants that cases of psychological disorders have increased, which is of serious concern. Almost all six districts people reported that number one problem is emotional impact and stress.

"People are mentally disturbed and everybody is in tension. They are struggling for normalcy. But they do not know what to do from where they should start, what should be their priority".

(FGD young female Batagram)

"In Muzzaffabad official figures are that more than 45000 people died, however people do not agree with this figure. Out of these 18000 were students. Psychiatric centers and trained staff are badly needed to reach all those who are suffering with psychological problems. The most common psychological problems observed are personality change, irritability, frustration and anger. This issue is of paramount importance and needs immediate attention.".

(Disaster manager Muzzaffarabad)

Although deaths of children and women have reduced considerably but cycle of illness and morbidity particularly psychological cases have increased".

(FGD male Abottabad)

(ii) Hopelessness and sorrow

A large number of earthquake affactees concede that they suffer from paranoia and have a tendency to blame everyone, believe the world is against them and life is unfair. Who can fix this problem? This is a daunting task for all concerned institutions, which are not really capable of managing this kind of trauma.

The study clearly suggests that fear, hopelessness and sorrow never went away in these two years after the earthquake, in all six areas. Women, men, young, old affactees as well as disaster managers all had similar perception regarding the psychological upheavals of this disaster.

"Their land is vulnerable and on epicenter. They are now on social and psychological epicenter. We did not find any great deal of change in their attitude and behavior. However number of psychological cases has increased."

(Female disaster manager Abbottabad)

"People have lost their hope. They have lost their homes. They have lost their children. It is such an adverse change. It is really a great challenge to rehabilitate these people. There is another horrific factor that they have been told that they are living in Red Zone. You can imagine what impact such information must have had on them. Cases of psychiatry has increased unbelievably. Every now and then we treat people with psychological problems.

We as a service providers think that challenge in the future in this region would be big time. We are already short of psychologists in these areas."

(Disaster manager Bagh)

"Hopelessness is a common problem among women. Still we are afraid that more earthquakes are possible. The greatest failure of our institutes and Govt. is that they have not removed this fear from the minds of people. We are living on fault lines. Due to this tragedy now we are also living on social and cultural fault lines in future. Our entire psyche has changed to a large extent".

(FGDS young female Muzzafarabad

"After earthquake we met a woman who had lost all her children and husband. She buried all of them with no one to help her. You can imagine what state of mind she must be in and what sort of rehabilitation she needs. How can she be compensated with material things? there are a number of cases like this in our district."

(FGDS young female Muzzafarabad)

Signals of Demographic Realities

(i) Rapid change in marriages and remarriages.

After the earthquake, there has been a change in the pattern of marriages and remarriages in the affected region. Among men folk there was a common perception that population size is a challenge in the earthquake hit areas. Some people were of the view that the high death rate was due to the high population density in the area. But as life goes on even in most traumatic of times, local community was trying to bring their lives back to normalcy. But with so many deaths and the increase in poverty, even two to three children were perceived as difficult to afford. However, marriages were on the rise in the area as a partial therapy towards a regular life.

While in case of re-marriages, there was an increase as many people had lost their spouses and needed someone to take care of the children. Trend of remarriages was more common among men as compared to women, who were generally unwilling for a remarriage due to socio-cultural barriers.

Majority of the participants mentioned that change in marriage trends was a direct consequence of the earthquake.

A common perception among all respondents was that due to high rate of marriages and remarriages there are chances that birth rate would increase.

Case study

There was a village in Muzaffarabad where twenty six marriages took place immediately after earthquake and exactly after nine months twenty five babies were born in twenty five households out of twenty six, a phenomenon of baby booming at micro level due to high nuputality rate.

"Almost hundred percent men get remarried. There is no question of not getting remarried".

(Disaster manager male Mansehra)

"Male folks do not wait for a long time to get married after their wives deaths. They get remarried as soon as possible".

(Social activist female Batagram)

"Number of births have increased due to remarriage and also because more male members are at home after the earthquake. Son preference has also increased after the earthquake as people realized the utility of another male hand to support in time of crisis. The higher the number of son's the easier is the relief collection is a common concept among people".

(FGD young female Mansehra)

People also reported more early marriages in people's desire to settle down and start anew. Many disaster managers were aware of the negative effect of increased number of marriages and more so at early ages. It is now common knowledge that this changed pattern will have an impact on the number of children and thus the general population growth in the area.

"There were genuine reasons for remarriage. Contraceptive use and abortion cases have increased. Actually stress has increased abortion cases. It is too early to comment on infant and maternal deaths. Right now definitely better medical facilities have controlled these problems".

(FGD male old Mansehra)

(ii) Change in type of family system.

Like the downside of every disaster and tragedy, this earthquake has also brought drastic changes in people's customs and traditions. A trend emerging in all the six study districts shows that the earthquake has brought a significant change in the traditional family system. This trend like remarriages was also perceived to have an impact on fertility related issues. Due to compensation for house building the concept of nuclear family system has increased almost fifty percent.

"There is a great change in housing pattern. Definitely a change will occur now they are living in compact and small houses. They are now also living in nuclear family system. There are many social and economic reasons."

(Disaster Manager Abbottabad)

"Yes earthquake has changed family system due to economic adversity as well as the amount of compensation for house building, specifically fixed for single unit families."

(FGD young male Mansehra)

"There is no more joint family system for support. Earthquake has completely changed the family system."

(FGD Female Bagh)

"Yes tremendous change in family system. I do not know whether it is positive or negative. Because our survival is always in the strength of joint family system. Biggest social support net work of our society has broken by this tragedy. In these areas people were getting lot of support from their overseas relatives. But the aid and relief has decreased this support."

(Social activist Poonch)

(iii) Family size and son preference

The participants and disaster managers are of the opinion that during the rescue and relief phase demand for son preference was badly felt. Discussions during the study clearly reveal people's desires for more sons after the earthquake but in general also aware of the benefits of a smaller family. Due to increased poverty after the disaster, people are finding it difficult to support large families and understand the advantages of small size families.

"Large family size is a norm in our society and earthquake has not changed this attitude and behaviour. Nevertheless family life has been greatly affected. Son preference has increased"

(FGD male old Batagram)

"Women with few children are sacrificing for their children. Yes family size trend has changed after earthquake people think that we should have few children. They still believe in large family size and son preference."

(Male Disaster Manager Batagram)

" Son preference definitely increased. As we know in every conflict or crisis importance of males increases due to various socio-political, psychological and economic reasons. This tragedy also exposed the same old theory that men are better in crisis as compared to women."

(Disaster manager Muzzaffarabad)

"They think that population is an issue which would multiply our problems. Remarriage is a reality whether it is cultural or demographic. No change in family size, rather desire has increased in our society for son preference."

(FGD male young Bagh)

"Among women there is a perception that we should have small families. Son preference has nothing to do with earthquake it is centuries old tradition in our area. This is considered something natural."

(FGD Female Manserah)

(iv) Demand for contraception

There is an increased trend of contraceptive usage in the affected areas, which was also endorsed and documented by service providers. According to the service providers, in the early days after the earthquake there was an over whelming demand for contraception. This perception was also endorsed majority of participants across all the districts also.

Contraceptive knowledge also increased after the earthquake as people were living in camps where they had access to more information and health and family planning service. Disaster managers in their interviews felt that contraception awareness had also gone up during this period.

"Contraceptive use has increased and even old men from very backward areas came to us for condoms. Therefore, we can say with authority that contraceptive use has increased and there is a demand."

(Male Disaster Manager Batagram)

"As a district population officer, it is my observation that awareness and use of contraception both increased after earthquake. Although it was a disaster, but there were many lessons and opportunities in it. It is my personal observation that people think that the family size should be small so as to manage properly."

(Disaster manager Poonch)

"Now people are motivated and committed for small family size that's why there is a demand for contraceptive especially among women. So use rate is also increasing and women talk about the issues of family size and all those methods which could plan and control their family size. Son preference also increased. Because in crisis and conflict people do not depend on women. Due to tension and stress miscarriages cases may have increased.".

(FGD old female Bagh)

(v) Changes in household decision making.

This tragedy has had a great impact on patterns of decision making further supported by the information gathered from the field. Although majority still believe that decision making is still in the hands of male members of household,

but there is a definite shift in the role and status given to women in decision making at the household level.

"Decision making is of course in the hands of male family members. However due to earthquake some of the households are also managed by females."

(Disaster manager Bagh)

(vi) Increase in miscarriages and abortion.

Abortions were a controversial subject among the participants and respondents, as they are in the larger Pakistani society as a whole.

None of the local community members were willing to confirm any abortion cases in their respective areas and felt that issues of abortions were blown out of proportion by NGOs for their own publicity. Disaster managers also agreed with the community participants about false claims regarding abortions.

"It is an urban area and awareness and use of contraceptive was also common even before earthquake. Abortion cases were not observed or reported any where, This issue is raised by NGO for their own motives. We did not observe any cases of abortion. In Muzzaffarabad babies were delivered at hospitals even before earthquake and now the trend has increased even in rural area. So definitely children and women are in safe hands."

(Old FGD female Muzzaffarabad)

Higher incidents of miscarriages were evident in the region, which is understandable. Due to high level of tension and stress and lack of proper prenatal care, miscarriages were frequently reported in the area. Many pregnant women lost their babies during and post earthquake attributed to stress and lack of care.

(vii) An issue of MMR and IMR.

It is still too early to comment on any changes in the Infant Mortality Rate and Maternal Mortality Rates in the region. However, local perceptions of the people and health care providers can Atleast provide some scanty trends. Participants said that due to quality medical services available at door step and the trend of hospital delivery maternal and infant mortality seems to have reduced and health of women and children has improved in the affected areas.

Although, MMR and IMR figures are not measured assessment, however no cases were reported even in Bagh and Manserah. These two districts are known for high MMR and IMR.

"Now babies are delivered in hospitals so there are less complications reported during delivery cases. Deliveries are much safer as compared to previous practices of hom deliveries.. It is a change and in future definitely this problem would be minimized and controlled. Because pattern has been established of delivery of babies at hospitals".

(Female disaster manager Poonch)

"Due to availability of medical facilities after earthquake MMR and IMR cases have been drastically decreased".

(Disaster manager female Mansehra)

"Definitely MMR and IMR decreased but we do not know how sustainable it would be. It's another challenge for health department".

(Disaster manager male Abbottabad)

"Due to better facilities and quality of drugs have decreased the cases of maternal and infant deaths".

(FGD old male Abbottabad)

"In this district MMR has always been high as compared to other districts. Definitely MMR and IMR decreased as compared to pre earthquake due to awareness and availability of medical services".

(Disaster manager female Mansehra)

CASE STUDY

A nurse from Sweden came here during earthquake. She motivated the community and our women folk cooperated and understood the importance of hospital delivery. So credit goes to her for a drop in cases of maternal and infant deaths. Now 100 percent women prefer to deliver their babies in hospitals.

(Disaster manager Bagh)

CHAPTER 6

SUGGESTIONS OF PARTICIPANTS AND DISASTER MANAGERS

At the end of the discussions questions were asked from the participants for their suggestions to improve the programme of health, population and education. Following suggestions were reported

- The community based training camps should be established to create awareness for the general population about health issues. Medicines and other facilities should also be provided to all hospitals.
- Small family norms need to be promoted and people should know that only few children can be provided better services and education.
- There is a strong perception that huge funding is allocated for providing basic facilities including health, education, population welfare, environment, provision of electricity, but in most of the cases even one third of allocated funds were not used. Therefore the authorities and concerned development partners need to be more communicative and transparent with the affactee population.
- There is a strong need to create awareness about the issues through media as media has become so powerful. Conducting workshops, seminars should be discouraged as most people in the area are neither educated enough to attend such forums nor have the time.
- There should be coordination and uniformity in the work of NGOs to avoid over-lapping efforts and to make the process more cost effective. All NGOs should follow the policy of the Government and need to be monitored by Government.

- There is an urgent need to fully involve the community and particularly religious teachers/ scholars in the population programme. Involvement of such influential will help in winning the trust of the people
- Majority of the respondents were in favor of appointing lady doctors as females feel hesitant in consulting male doctors.
- There is need to provide medicines and contraceptives in the camps as people are interested to use them but it is difficult for them to access them.
- After getting two installments from ERRA people started to construct their houses according to the specification provided by ERRA. But there are many problems faced by the people, improvement in rehabilitation process are needed. Another problem is for the people who were migrant, as they were not the owner of the house, they could not get money. The compensation was received by owners.
- There is an urgent need to have strong capacity building of the persons working in the areas of health, education and population according to the specific needs of the people of area. Culturally sensitive approaches need to be used by the development activists in order to be accepted by the local communities.
- The progress made in the education sector is not sufficient although schools have been constructed but in most of the schools teaching staff is not available.
- People from education department should convince and motivate the parents to send their children to schools and these teachers must train how to treat the scared children and also convince their parents. Because some of the parents don't send their children to schools because of the fear factor.

CONCLUSION AND RECOMMADATION

This report makes an attempt to document the Pakistan earthquake 2005 with a qualitative perspective with focus on socio, psychological and demographic realities. The study highlights a number of issues and challenges for service providers, policy makers, programme managers sociologists and psychologists. These challenges are multidimensional and complex in nature and should

generate academic and policy discussions in order to improve the effectiveness of the rehabilitation process.

It is a daunting task to tackle the social and psychological constraints in the earthquake affected areas. The study highlights the signals, margins, waves and prospects for service providers and policy makers.

The report is based on thirty in-depth interviews and discussions with more than two hundred earthquake affactees who have lost their loved ones and all belongings.

The information from the study indicates that people have now gone beyond the rescue and relief phases and is actually planning their future on long term basis keeping in view the prevailing demographic, economic, social and psychological conditions. However, the responses were not very directed and were more suggestive rather than conclusive, but still pointed out towards ways for future course of action.

Findings of these focus groups and in-depth interviews suggest that there is a universal demand for contraception and generally people are aware of the benefits of small families. Additionally findings suggest that preference of a male child would be a real challenge to address for the service providers and social activists.

The study suggests clearly that psychiatric cases have tremendously increased in all age groups particularly women and children are the worst victims due to the fear of another earthquake as well as the trauma of the October 2005 Earthquake. Pakistan is already short of trauma centers and trained psychiatrists, while the earthquake victims are in dire need of psychological support and counseling to bring their lives to normal.

ANNEX - I

FOCUS GROUP GUIDELINES

Moderator and Note taker's Names

We are a part of research project undertaken by NIPS.

Ice breaker and Introduction

Make sure, you are conducting an interview or focus group discussion in a private place. If it seems that the participant/or respondent is just repeating the party line or is not being can did, reassure him/her of the confidentially of the discussion or interview, that may help to put the respondent at ease and foster a frank interview/discussion. No right or wrong answer. No evaluative approach.

Make sure not to make impressions that may influence the interviews, or participant's response.

We are interested in hearing your thoughts about the issue. You have much to contribute to interview/discussion. What is important for us is to know what you think and feel about socio-demographic realities in earthquake. The study would identify key problems and patterns ground them in every day realities and translate the meanings of social world and social actors and construct the narratives.

OBJECTIVE

To record, document, understand, interpret the key issues and the key patterns of affactees knowledge, observations, experiences and impressions about

catastrophe and its impact on their perception attitude and behaviour, focusing on decision making, family size, fertility desires needs and broad issues of health and population, contraception, and role of institutions.

The following issues will be discussed in detail in Focus group guide/in-depth interview guide.

Knowledge and Observations

- Experiences and Impressions.
- Family implications.
- The causes other than nature.
- Is it any way avoidable and?
- Can casualties be minimized?

Role of Institutions

- The role of Govt. institutions, Role of civil society. NGOs, INGOs, Civil Society, CBOs, local leadership and local governments. (Threat to culture and value system due to influx of aliens).
- Micro and macro level community threat.
- Coping with earthquake and striving for normalcy.
- The factors enabling affectees for rehabilitation and the most important one.

Change in behavior and attitude of the people after the earthquake on their life style.

- After having lost their loved ones and belongings. The consequences of adversity and its impact on Socio-demographic realities
- Level of awareness.
- Social and psychological problems.
- Change in life style, marriage pattern, type of family, issues of birth, death children and mother, desires, and intentions for size of family and preference for children, change in needs and desires, demand for contraception, decision making, issues of abortion, IMR and MMR.

Suggestions to improve the programme of rehabilitation

- Health
- Population
- Education

Thank you very much. That was our last question. If you would like to share any issue with us, please do so. Again thank you for you time. The information you have shared with us has been very useful and a value able contribution to our study.

ANNEX - II

Table: Distribution of FGDs Participants by Background Characteristics

Background Characteristics		Muzafarabad	Bagh	Poonch	Mansehra	Batagram	Abbotabad	Total
Age groups	< 20	5.0				8.3		2.0
	20 – 29	12.5	29.7	71.4	30.0	41.7	18.2	25.5
	30 – 39	50.0	18.9	28.6	35.0	8.3	42.4	34.2
	40 – 49	30.0	43.2		35.0	41.7	30.3	33.6
	50 – 59	2.5	8.1				9.1	4.7
Gender	Male	17.1	56.8	100.0	100.0	100.0	39.4	53.3
	Female	82.9	43.2				60.6	46.7
Educational level	None	19.5	13.5		5.0		36.4	17.3
	Upto primary	17.1	5.4		40.0	66.7	42.4	26.0
	Upto middle	12.2	32.4	42.9	40.0	16.7	9.1	22.0
	Upto secondary	34.1	40.5	42.9	15.0	16.7	6.1	26.0
	Secondary +	17.1	8.1	14.3			6.1	8.7
Living children	0	26.8	8.1	28.6	15.0	100.0	15.2	24.0
	1	14.6	10.8	57.1	5.0		9.1	12.0
	2	12.2	24.3		10.0		3.0	11.3
	3	19.5	8.1	14.3	20.0		27.3	16.7
	4	9.8	10.8		20.0		21.2	12.7
	5+	17.1	37.8		30.0		24.2	23.3
Human losses	0	4.9						1.3
	1	70.7	67.6	85.7	75.0	50.0	81.8	72.0
	2	19.5	29.7		20.0	33.3	15.2	21.3
	3	2.4	2.7		5.0	8.3	3.0	3.3
	4+	2.4		14.3		8.3		2.0
Total	Percent	100.0	100.0	100.0	100.0	100.0	100.0	100.0
	Number	41	37	7	20	12	33	150
Mean number of living children		2.5	3.9	1.0	3.2	.0	3.1	2.8
Mean number of human losses		1.3	1.4	1.4	1.3	1.8	1.2	1.3

ANNEX - III

CHARACTERTISTICS OF DISASTER MANAGERS

IDIs							1=Married				
			1=Male				2=Never married			1=Yes	
			2=Female				3=Widow			2=No	

S. No.	District	Tehsil	Sex	Age	Position	Education	Marital Status	No. of Children	Human losses	Involve in DM	Type of involvement
1	Muzafarrabad	Muzafarrabad	2	28	Social activist	LLB	1	1	0	1	As a Social Activist
2	Abbottabad	Abbottabad	1	56	DSV	BA	1	5	0	1	Medical Aid
3	Buttgram	Buttgram	1	35	Engineer	Engineering	1	0	0	1	Construction
4	Rawalakot		2	45	Gynecolo gist	MBBS PGMI	1	3	0	1	Work as a Doctor
5	Abbottabad	Abbottabad	1	31	Medical Officer	MBBS	1	2	0	1	Medical Aid
6	Mansehra	Mansehra	1	40	DPWO	MBBS	1	5	0	2	Nil
7	Rawalakot	Rawalakot	1	42	DPWO	MBBS	1	0	0	1	Medical Facilitator
8	Mansehra	Mansehra	2	34	D.H.M.T	MBBS	2	0	0	2	Nil
9	Rawalakot	Rawalakot	2	41	Senior Medical Officer	MBBS	1	3	0	1	Work as a Doctor
10	Bagh	Bagh	2	35	Gynecolo gist	MBBS, MCPS	1	2	0	1	Work as a Doctor
11	Buttgram	Buttgram	1	47	DEDO	MBBS	1	4	0	2	Nil
12	Muzafarrabad	Muzafarrabad	1	48	DHO	MBBS, DP, MCPS	1	2	0	1	Health Management
13	Abbottabad	Abbottabad	1	54	MS THQ	MBBS	1	3	0	1	Medical Aid
14	Bagh	Bagh	1	46	Cardiologi st	MBBS in Cardiology	1	4	0	1	Medical Health Provider
15	Abbottabad	Abbottabad	1	49	DMS	MBBS	1	2	0	1	Medical Aid
16	Rawalakot	Rawalakot	2	41	Professor	M Phil (Education	1	1	0	1	Social Activist

S. No.	District	Tehsil	Sex	Age	Position	Education	Marital Status	No. of Children	Human losses	Involve in DM	Type of involvement
17	Mansehra	Mansehra`	1	49	M.T.A	MBBS	1	2	1	2	Nil
18	Rawalakot	Rawalakot	1	47	DHO	MBBS	1	3	0	1	Preventive Care
19	Mansehra	Balakot	2	40	M.O	MBBS	1	3	0	1	Medical Aid
20	Mansehra	Mansehra	1	28	Field Coordiant or	M.A	2	0	0	2	Nil
21	Rawalakot	Rawalakot	2	45	Deputy Education officer	M.A Political Science	3	3	0	1	Disaster Manager
22	Buttgram	Buttgram	1	33	F.P.O	B.A	1	2	0	1	Medical Aid
23	Buttgram	Buttgram	1	31	Managing Director	B.A Medical	1	3	0	1	Medical Aid
24	Bagh	Bagh	2	43	Project Manager	M.Sc Sociology	2	0	0	1	Social Activist
25	Muzafarrabad	Muzafarrabad	1	28	Assistant Director	M.Sc Sociology	1	0	0	1	Management Activist
26	Bagh	Bagh	1	59	Deo-Secondar y	M.A Political Science	1	6	0	1	Relief Distribution
27	Abbottabad	Abbottabad	1	37	D.D.P.W	MBA	1	2	0	1	Medical Aid
28	Muzafarrabad	Muzafarrabad	1	43	Additional Commissi oner	M.Phil in History	1	7	1	1	District Management
29	Poonch	Rawalakot	1	62	Social activist	B.A	1	1	0	1	Social Activist
30	Abbottabad	Abbottabad	1	47	Chilps Rights Adusor	M.A Economics	1	4	0	1	Social Work

ANNEX - IV

CHARACTERISTICS OF FGDs RESPONDENTS

			1=Married					
	1=Male		2=Never married					
	2=Female		3=Widow					

S. No.	Age	Sex	Marital Status	Education	Classes passed	Employment Status	No of living children	No of Human loss within family
1	32	1	1	5	5	Nil	3	1
2	33	1	1	5	5	Nil	4	1
3	34	1	1	10	10	Nil	5	1
4	28	1	1	5	5	Nil	5	1
5	35	1	1	5	5	Nil	4	1
6	23	1	1	8	8	Nil	6	1
1	49	1	1	5		Nil	4	1
2	48	1	1	4		Nil	3	1
3	43	1	1	2		Nil	2	1
4	42	1	1	4		Nil	5	1
5	51	1	1	5		Nil	6	2
6	50	1	1	2		Nil	4	1
7	52	1	3	3		Nil	3	1
1	31	1	1	5	5	Labour	3	1
2	30	1	1	8	8	Carpenter	1	1
3	28	1	1	10	10	Car Mechanic	3	2
4	29	1	1	10	10	Shop Keeper	1	1
5	27	1	1	5	5	Hotel	2	2
6	29	1	1	10	10	Tailor	1	1
7	26	1	1	8	8	Shop Keeper	1	1
1	43	Male	Married	8	8	Labour	2	2
2	44	1	1	10	10	Shop keeper	4	2
3	45	1	1	10	10	Driver	5	1
4	46	1	1	10	10	Imam	5	1
5	44	1	1	8	8	Peon	2	1
6	47	1	1	10	10	Labour	6	2
7	49	1	1	8	8	Nil	3	1
8	50	1	1	10	10	Nil	6	1

S. No.	Age	Sex	Marital Status	Education	Classes passed	Employment Status	No of living children	No of Human loss within family
1	45	1	1	8	8	Tailor	8	1
2	44	1	1	8	8	Labour	8	2
3	47	1	1	8	8	Labour	8	1
4	50	1	1	8	8	Labour	8	1
5	50	1	1	8	8	Labour	8	1
6	46	1	1	8	8	Labour	8	2
1	28	1	2	10	10	Nil	0	1
2	24	1	3	5	5	Nil	0	1
3	20	1	2	9	9	Nil	0	5
4	22	1	2	5	5	Nil	0	2
5	23	1	2	5	5	Nil	0	2
6	21	1	2	5	5	Nil	0	1
1	45	1	1	5	5	Nil	0	1
2	43	1	1	4	4	Nil	0	2
3	38	1	1	8	8	Nil	0	3
4	42	1	1	4	4	Nil	0	1
5	44	1	1	5	5	Lecturer	0	1
6	46	1	1	6	6	Lecturer	0	2
1	26	1	2	8	8	Nil	0	1
2	29	1	1	5	5	Nil	2	1
3	27	1	2	10	10	Nil	0	1
4	24	1	2	6	6	Nil	0	2
5	21	1	1	8	8	Nil	3	1
6	23	1	3	6	6	Nil	2	1
1	40	1	1	5	5	Nil	3	1
2	45	1	1	10	10	Employed	4	2
3	42	1	3	5	5	Nil	5	2
4	34	1	1	7	7	Nil	3	1
5	40	1	1	8	8	Nil	5	1
6	35	1	1	6	6	Nil	4	1
1	40	1	1	Primary	5	Labour	5	3
2	42	1	1	Hafiz qari		Hafiz Teacher	3	1
3	35	1	1	Primary	5	Driver	4	1
4	36	1	1	Middle	8	Mason	5	2
5	34	1	1	Primary	5	Tailor	5	1
6	38	1	1	Matric	10	Naib Qasid	4	1
7	40	1	1	Primary	5	Labour	5	1
8	39	1	1	Primary	5	Shop keeper	1	1

S. No.	Age	Sex	Marital Status	Education	Classes passed	Employment Status	No of living children	No of Human loss within family
1	49	1	1	Dars Nizami		Imam Masjid	4	1
2	44	1	1	Matric	10	Dozer Operator	0	2
3	46	1	1	Middle	8	Naib Qasid	1	1
4	50	1	1	Primary	5	Hotel	9	2
5	48	1	1	Middle	8	Shopkeeper	4	1
6	45	1	1	F.A	12	P.T	4	1
7	49	1	1	F.A	12	Govt Employee X	6	1
1	27	1	1	Matric	10	Shopkeeper	-	1
2	28	1	1	Matric	10	Labour	1	1
3	30	1	1	F.A	12	Labour	1	1
4	28	1	1	Matric	10	Labour	1	1
5	26	1	1	Middle	8	Labour	0	1
6	30	1	1	Middle	8	Labour	3	1
7	28	1	1	Middle	8	Private employee	1	4
1	25	2	1	10	10	Nil	Nil	1
2	27	2	3	14	14	Nil	Nil	1
3	26	2	1	10	10	Nil	Nil	1
4	30	2	1	12	12	L.H.W	2	2
5	29	2	1	9	9	Nil	2	2
6	28	2	1	10	10	Stitching	2	1
7	28	2	1	10	10	Nil	4	1
8	32	2	1	0	0	Nil	8	1
1	45	2	1	0	0	Nil	5	1
2	40	2	1	12	12	Teacher	2	1
3	45	2	1	0	0	Nil	7	1
4	40	2	1	10	10	Nil	2	2
5	35	2	1	9	9	Nil	2	3
6	38	2	1	0	0	Nil	4	1
7	45	2	1	o	0	Nil	7	1
8	35	2	1	7	7	Nil	4	2
1	22	2	2	10	10	Nil	-	1
2	30	2	1	5	5	Nil	1	3
3	21	2	1	5	5	Nil	1	1
4	32	2	1	8	8	Nil	4	1
5	28	2	1	8	8	Nil	3	1
6	32	2	1	14	14	Nil	3	1
7	21	2	2	11	11	Nil	0	2

S. No.	Age	Sex	Marital Status	Education	Classes passed	Employment Status	No of living children	No of Human loss within family
1	43	2	1	0	0	Nil	3	2
2	40	2	3	0	0	Nil	0	1
3	40	2	1	0	0	Nil	5	1
4	38	2	3	0	0	Nil	4	1
5	37	2	1	0	0	Nil	5	1
6	37	2	3	0	0	Nil	3	1
7	45	2	3	0	0	Nil	5	2
1	35	2	1	0	0	Nil	3	1
2	42	2	1	0	0	Nil	3	1
3	43	2	1	0	0	Nil	1	1
4	35	2	1	0	0	Nil	0	1
5	38	2	1	0	0	Nil	0	1
6	36	2	1	5	5	Nil	4	2
1	33	2	1	10	10	Nil	Nil	1
2	34	2	1	12	12	Nil	1	2
3	37	2	1	14	14	Nil	5	1
4	30	2	1	14	14	Nil	1	1
5	36	2	1	10	10	Nil	3	2
6	36	2	1	14	14	Nil	2	2
1	35	2	1	10	10	House Work	3	1
2	34	2	1	10	10	House Work	1	1
3	35	2	1	8	8	House Work	1	1
4	36	2	1	9	9	House Work	3	1
5	35	2	1	9	9	House Work	3	1
6	40	2	1	10	10	Teacher	3	1
1	36	2	1	3	3	H.W	3	1
2	40	2	3	0	0	Nil	9	1
3	35	2	1	10	10	Nil	1	1
4	36	2	1	8	8	Nil	5	2
5	35	2	1	0	0	Nil	5	1
6	34	2	1	5	0	Nil	0	2
7	40	2	1	0	0	Nil	4	4
1	42	2	3	5	5	H.W	2	1
2	43	2	1	8	8	Nil	7	2
3	42	2	1	10	10	Nil	2	1
4	35	2	1	10	10	Nil	3	1
5	35	2	3	12	12	L.H.V	2	3
6	37	2	1	0	0	H.W	3	1
7	34	2	1	0	0	Nil	2	1

S. No.	Age	Sex	Marital Status	Education	Classes passed	Employment Status	No of living children	No of Human loss within family
1	20	2	2	5	5	Nil	0	1
2	19	2	2	5	5	Nil	0	1
3		2	2		0	Nil	0	
4	22	2	1	10	10	Nil	0	0
5	25	2	2	5	5	Nil	0	1
6	22	2	2	10	10	Nil	0	1
7	23	2	2	5	5	Nil	0	1
8	25	2	2	9	9	Nil	0	1

References

Pakistani Focus Groups on Birth Spacing, "Qualitative Study in Pakistan, 2003, Catalyst Consortium, Pakistan.

Hearing their Voices, the Women and Children in the Earthquake Affected Areas of Pakistan, IUCN- The world Conservation Union, Pakistan Country Office

"The Impact of Franchised and Family Planning clinics in Poor urban areas of Pakistan" In *Studies in family planning, volume36, Number1 March 2005.*

Manzoor Khalida, "*Focus on Family Planning, Family Welfare Centers, marketing research,* National Institute of Population Studies, Islamabad 1991.

Pakistan 2005 Earthquake an Assessment of Impoverishment Risks, Centre for Research on Poverty Reduction and Income Distribution, Islamabad, 2006

Government of Pakistan Population Census Organization, "*District Census Reports of Muzaffarabad, Mansehra, Abbottabad, Bagh, Batagram, Rawlakot 1998.*

Government of Pakistan, Earthquake and Rehabilitation, *Authority, Annual Review 2006-2007.*