In support of
Global Initiative to Support Parents

Case Study on Pakistan

Parenting support for flood-hit families

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The Pakistan emergency parenting support response coordinated numerous organisations in adapting, translating, and disseminating evidence-based parenting guidance to millions of families. Resources accessible to linguistically and culturally distinct, low-literacy communities helped families contend with the stresses, threats, and losses of their homes and communities, livelihoods, and bereavements. Anecdotal feedback is highly positive, with formal evaluations underway.

Results & Impact

Over 5.7 million families were estimated to be reached within the first weeks of flooding. Local implementing partners report that parenting support interventions have reduced familial violence against children, improved parent/child interaction and relationship, and instilled parenting confidence in caregivers. Evaluation study is in progress with 100+ parent/adolescent dyads by National Institute of Psychology, Quaid-i-Azam University, Islamabad, with pre- and post-testing completed in Rajanpur and Swat Valley. Additional formal evaluations are in progress by University of Oxford via on-the-ground disseminating organisations.

Key Parties

Co-led by Parenting for Lifelong Health at the University of Oxford, UK and the National Institute of Psychology at Quaid-i-Azam University, Pakistan, with the WHO, UNICEF, the Early Childhood Development Action Network, UNODC, the Global Initiative to Support Parents, International Rescue Committee, and other international agencies.

How

As catastrophic flooding beset Pakistan, a network of academics, international non-governmental organisations (INGOS), and non-governmental organisations (NGOs), which had previously collaborated on the Ukraine emergency parenting response reconvened, and drew in Pakistan-based academics and NGOs to provide similar emergency parenting support to flood-affected families. Resources devised for the Ukraine response and based on parenting guidance shown to be effective in preventing violence against children and promoting positive parenting in low-resource settings was reshaped to the Pakistan flood context, with cultural adaptation and language translations. In 12 “parenting tips”, the guidance sets out practical steps that parents and caregivers can take to improve their own and their children’s wellbeing, to keep their children safe, and to support them through trauma and loss. These messages were disseminated through in-person awareness sessions, pictorial aids, radio broadcast and other means, by an extensive network of community-based organisations.

Stage

Dissemination and partnership working ongoing; evaluation commencing.

Target Group

Parents and caregivers whose families were affected by the flooding of summer 2022, including those internally displaced.

Funding

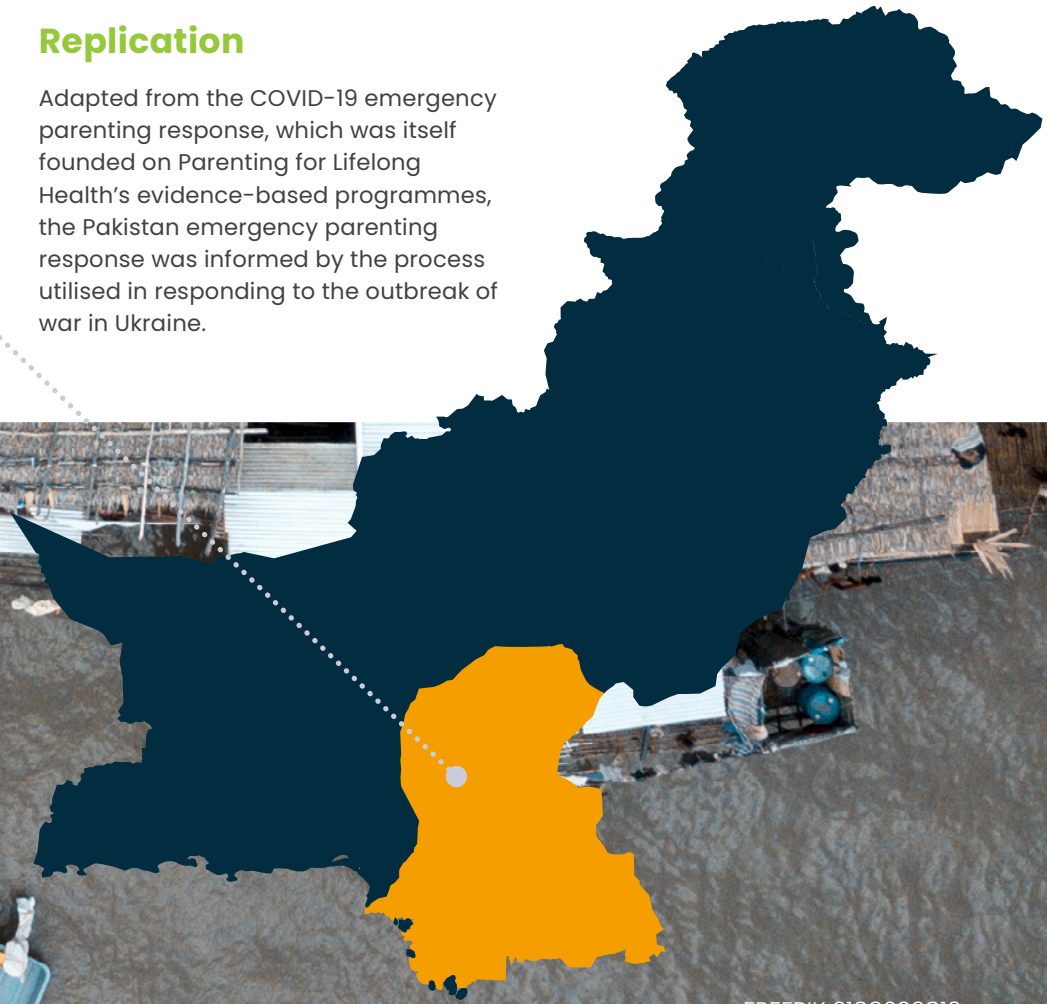
Funded by the partner organisations involved and donors including Oak Foundation, a UKRI GCRF and Newton Fund Consolidation Account (GNCA) award, and a private family trust that wishes to remain anonymous.

Where

Pakistan, particularly Sidh province.

Replication

Adapted from the COVID-19 emergency parenting response, which was itself founded on Parenting for Lifelong Health's evidence-based programmes, the Pakistan emergency parenting response was informed by the process utilised in responding to the outbreak of war in Ukraine.



An estimated 5.7 million families were reached within the first weeks of flooding

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Hurdles

Cultural and linguistic diversity and low-literacy rates presented challenges in providing support which was both accessible and acceptable to localised communities, with attitudinal and perceptual barriers in the unfamiliarity of 'positive parenting' as a concept. Lack of infrastructure (absence of electricity and internet) and of funding were barriers for disseminating organisations. Expectations and protocols of overseas coordinating partners placed additional burdens on overstretched local implementing partners. The COVID-19 pandemic had depleted governmental and in-country reserves of capacity to deal with this subsequent crisis.

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The Story

In summer 2022, the worst flooding in Pakistan's history inundated the country's capacity to respond along with its land. Aid and assistance flowed in from afar, as international emergency response efforts mobilised for swift action. Among these was a collaborative initiative of INGOs, NGOs, and university academics working to adapt, translate, and disseminate emergency parenting support resources to families in Pakistan, as had been done only months earlier for other families when war broke out in Ukraine.

Devised and digitised in response to the COVID-19 global pandemic, these innovative parenting-in-crisis materials and delivery modes have long legacies, owing their inspiration to UNODC's and the University of Manchester's previous and current experience of providing resources for caregiving in conflict, crisis, or stressful settings, first undertaken in Syria where printed parenting tips were provided with 'daily bread'. Meanwhile, the evidence-based content for these resources originates in Parenting for Lifelong Health (PLH) - a suite of open-access, non-commercialised parenting programmes to prevent violence against children in low-resource settings and shown to be highly effective in randomised control trials in multiple countries. The core content of the PLH in-person programmes was encapsulated and re-formed into COVID-19 parenting tips, then reshaped into Ukraine parenting tips, and were ready to be further evolved for Pakistan.

As Dr Sobia Masood, Assistant Professor at the National Institute of Psychology, Quaid-i-Azam University explains: "I was already working on parenting when the flooding came, so I undertook a rapid review of organisations working in the field and found that none were addressing parenting. Their focus was on providing medicines, clothes, shelter to the children and families affected. I asked them, 'What do you aim to focus on in the coming months?', and they noted hygiene, getting people back into work, but there was no mention of parenting, and it was clear to me that this is a real gap." Her team in Islamabad joined forces with the PLH team in Oxford, adapting and translating the COVID-19 parenting resources into 12 tip sheets in English, Urdu, Sindhi, Pushto, Saraiki, Punjabi, Hindko, and Balochi.

Downloadable and open-source, the tip sheets encourage parents and caregivers to share their sorrows and worries with others, to practice self-care, and to feel pride in their parenting in a crisis, bolstering their own resilience so that they can strengthen and support their children through practical actions and positive attitudes: listen, empathise, comfort; be truthful while instilling hopefulness; give focused attention; provide consistent routine, involve children in helping, and praise them; defuse tension, stress, and anger. There are specific tips on keeping children safe, protecting from sexual harassment, and supporting in bereavement. Masood recorded key tips into her mobile phone, with her teenage son as "cameraman", and uploaded these messages as Tik Tok videos to reach a population with low literacy rates.

Wide-scale dissemination of this emergency parenting guidance was routed through an interconnected network of international agencies with links to in-country NGOs, which in turn cascaded the resources to on-the-ground organisations and their grassroots local implementing partners. Through this chain, global initiatives undertaken in coordinated effectiveness reach to the most localised level of uptake, becoming integrated into the ongoing provision of community-based organisations, with outcomes and learnings reported back.

Sindh Rural Support Organization (SRSO) is one such NGO positioned at an optimal point in this complex chain. Senior Manager Naveed Memon recounts that "when the early warning systems alerted to flooding, most of our teams were already in place, and our district staff, our social mobilisers, our field teams directly connected with the families, immediately approaching them. Initially, there was the rescue process; later it was a relief and rehabilitation operation, and throughout we worked to support these families. We issued the parenting guidance to IDP camps, given out through FM radio announcements and directly interacting with the community systems." Alongside its immediacy to the flooding frontline, "SRSO has over seven years' presence of working with the relevant support offices in Government, the European Union, and donor organisations," giving it access to established infrastructure and locality data accumulated over many years, which SRSO was able both to utilise and to update in the current crisis.

Another NGO illustrates how partnership working can offer complementary services and can open conduits for parenting support provision. Cities for Children Founder and CEO Madeeha Ansari recalls that "the initial stage was, inevitably, emergency relief, making sure people had basic necessities. So, there was one round where we partnered with local groups to get life-saving materials to communities – food, water purifying tablets, things like that.

When the picture started to get a little bit clearer and we saw where communities were settling, we worked with two longstanding partners - Society for the Protection of the Rights of the Child and Charity Doings Foundation – to set up temporary learning centres in the heart of Sindh, one in an urban settlement in the outskirts of Hyderabad city, and the other in a more rural setting near Umerkot." While these centres focused on creating safe spaces for children to play and heal, preparing them academically and emotionally to re-enrol in schools, Cities for Children partnered with Parenting for Lifelong Health to support teachers and parents in learning positive caregiving and coping methods within this crisis context. Later, when the temporary shelters closed, "the PLH materials and team inspired us to look at the family home as a focus, and we moved to doing community-based awareness sessions, using a blend of PLH tip sheets and our own positive caregiving resources developed during COVID, giving continuing support to help traumatised parents and elders nurture their children in households struggling to make ends meet in the aftermath of the floods."

Pakistan Alliance for Girls Education (PAGE) similarly promoted parenting support through educational sites. Starting in December 2022, PAGE established 42 learning centres within flood affected areas, intentionally choosing premises of schools which had become non-functional since COVID-19 closures. Yasir Illyas highlights how PAGE "capitalised on the training process for newly recruited teachers by incorporating a classroom-based orientation on the Parenting for Lifelong Health parenting materials. This approach enabled the teachers to disseminate the information to parents of their pupils. By doing so, the knowledge gained from emergency response efforts was effectively integrated into the sustainable mainstream education provision."

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Reaching the Needs

Over 5.7 million families were estimated to be reached with emergency parenting support messages disseminated over national radio and by local field teams in the weeks immediately following the floods. According to Hafsa Ahmed, working on the Oxford coordinating team, "reach was far and wide, with the parenting resources shared with more than 20 organisations, who shared them onwards with their communities. There was feedback across the board how much this kind of support is needed, though it is often absent when we think of humanitarian crises, and this is understandable in acute emergency when the first priority is meeting people's physical survival needs. But the physical and the psychosocial are not mutually exclusive."

This is echoed by Masood, who highlights the value of providing training to disseminating organisations. "Informal feedback shows the resources were appreciated a lot, with many organisations requesting training sessions. Simply from getting to know the resources, training session participants saw their relevance and importance. Self-compassion and self-care are key, and easy to implement once you know what to do. There was much appreciation of the tips on preventing child abuse and harassment, as parents are anxious to protect their children in crisis. The small practical tips about how to keep your possessions and money safe were also appreciated. Training session participants said 'We will educate our own children about these and deliver to our communities'. The individuals who were in these training sessions were part of their communities, they knew how their communities would respond. We took care to involve field staff, who people in communities can identify with. They perceive positively those close to them; they are not outsiders with a different language."

The experience of Cities for Children illustrates the important interplay of interpersonal rapport and contextual relevance. Aunil Muntazir, who led focus groups with parents and training sessions for staff at the two temporary learning centres, notes that "initially parents were sceptical about how the temporary learning centre is going to make any difference on their lives. But then they got involved, visiting the centres on a day-to-day basis and inquiring about their children's behaviour and how they perform in the centres with the staff and the volunteers working there." Ansari adds that "the parenting conversations are powerful conversations to have. It's important to have them in a context where you already have a relationship with the families, where a level of trust exists. It was equally important to have something else going on with the community, something they see as being of value. The parents saw the temporary learning centres as being valuable for their kids. This made them open to engaging with the parenting support provision and created a sense of working collectively for their children's re-enrolment into schools as well as positive caregiving and disciplining."

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Muntazir observed further positive outcomes from this engagement. "Violence was a very common theme raised in the parenting sessions, from parent to child, and from child to child. After this intervention, parents, volunteers, and staff reported significant reduction in violence. There was also substance abuse, with children doing different kinds of drugs. This also reduced post-intervention. Before the intervention, children, and even the parents, were not concerned about cleanliness, personal hygiene.

Following the training, staff told us they made sure to have this constant conversation with parents and children how important cleanliness and personal hygiene is, and children started coming in in proper attire and with personal hygiene, combing their hair, brushing their teeth, and washing their hands and faces." Ansari adds, "The parenting support interventions introduced not just the facts of the impact that violence can have on your kids; the parenting sheets are very much about talk to your kids and see what's going on. A lot of the time, that's a new idea, because even if parents are invested in their kids' future, that dynamic of asking them what happened in their day wasn't really there. Parents acknowledged that they don't often talk to or engage deeply with their children, as the fathers may be busy with work or other activities (there is prevalence of gambling in the community) and mothers are busy with chores. There is prevalence of neglect due to high poverty levels and stress. Following a parenting session, one caregiver said, 'I will treat my children with love so that their brain develops well.' Another shared, 'We endured violence from our parents and our husbands. Now we want that our children do not go through that.'"

Some of the mechanisms and associated international-to-local linkages capable of generating such shifts in parental perspective are detailed in a report by Pakistan Youth Change Advocates (PYCA) of their "Parenting During Crisis" project. PYCA used the parenting tips and associated funding support extended to them by the Oxford-based emergency parenting response coordinating team to produce animated videos, four each in Urdu and Sindhi.

PYCA delivered virtual training on the parenting tips to two community-based organisations in provinces hard-hit by the flooding – Hamdam Development Organization in Khyber Pakhtunkhwa and Institute for Peace and Human Development (IPHD) in Sindh – which, in turn, delivered 11 awareness sessions, involving more than 600 participants including local activists, elders, and others of locally influential standing. Recorded highlights of these awareness sessions were posted on social media, pictorial posters of the parenting tips put up outside schools, health units, hospitals, and other key public places, and content shared with district administrators, to cascade learning and engender receptive awareness as session participants took the messages back into their communities. The profound impact on one family is shown in this case study.

The devasting flooding in her village had left S.K.'s family facing intense hardships and disruptions, and she and her husband were struggling to support their four young children, who had been deeply traumatised. During a one-day awareness session delivered by IPHD, S.K. received a detailed orientation on various parenting techniques, including Muraqabah (meditation). She gained a deeper understanding of how the flood had impacted her family and learned effective strategies to provide support to her children in overcoming the trauma they experienced. With the knowledge and practical skills gained from the session, S.K. acknowledged the disturbances her family endured from the flood and its aftermath, and expressed increased confidence in providing emotional support and stability to her children during such difficult times, using techniques such as giving focused time and attention to each child. S.K. expressed her desire to replicate the techniques and knowledge she acquired during the orientation session and committed to share these valuable insights with other females in her community. S.K.'s story serves as an inspiration for resilience and empowerment in the face of challenging circumstances.

Challenges in Implementation

Parenting in crisis necessitates responding, and rising, to a multiplicity of challenges – by parents and caregivers most of all, but also by those supporting them, whether close at hand or from a distance.

In multilingual Pakistan, "Urdu was spoken between organisations for co-ordination, but it is valuable to speak to people in their own tongue, especially in the intimate space of family, and in a situation of acute distress," says Ahmed. The Urdu resources were translated into six local languages, but Masood notes that "the flooding affected almost every province, and dialects differ in every district. So, we mix and match and merge into a version acceptable to all."

According to Illyas, the team at PAGE was "highly impressed with the parenting tips provided, especially since they were available in Urdu, Sindhi, and Balochi, the native languages of the provinces we operate in. However, as most of the community members are illiterate, it would be challenging for them to comprehend written materials, and we valued the fact that the Oxford team had already created videos." With the assistance of a microgrant provided through Oxford-linked funding, PAGE was able to acquire multimedia equipment and solar panels, "ensuring that these valuable resources could reach even those communities with limited access to traditional power sources."

Working in other provinces, PYCA encountered the same obstacles and relied on battery-run speakers and laptop screens to share the resources in small group gatherings. Masood observes that "frontline organisations often lacked funds to print the materials, so turned to social media, but there was often no internet. We proposed alternative methods to organisations, such as using loudspeakers at mosques." Without digital access, field staff had to travel to out-of-area locations to speak with the teams coordinating their operations. Cities for Children established one temporary learning centre in a remote location despite the communication difficulties, because, as Ansari explains, "we were keen to do it there because they were families that had been directly displaced and affected in a deeply traumatic way." It is those hardest to reach who are often in the greatest need.

Arranging in-person gatherings can be equally challenging. Coordinating from Oxford, Ahmed recalls that "in the rapidly changing circumstances, temporary camps were set up but then quickly disbanded, as people returned home or moved on to new locations. We could make a good plan with an on-the-ground group

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to disseminate within a camp, only for the camp to disband before the plan could be implemented." Life goes on, even in crisis, and at some points and places harvesting was underway, and parents couldn't step away from labouring for their livelihoods to attend parenting sessions. Sessions were, therefore, shifted to early morning and late evening, offering food so attendees could have their meal while learning.

Perceptual barriers are less practically surmounted. Ansari cautions to "be careful not to expect instant impact. Parenting more effectively was a novel concept and not seen as a priority by communities facing high levels of stress due to disruption in livelihoods and lives. There's a long pathway to go from introducing a new idea to effecting behavioural change. We haven't yet been able to follow the whole path, but we were able to work with partners and introduce these new ideas to communities. To bring about attitudinal and behavioural change, sustained effort is needed." Ahmed echoes this, stressing that "sharing of resources with partners was always done from an open perspective. Still, there was hesitancy around unfamiliarity with positive parenting as a concept. Our resources were adapted for cultural contexts, yes, but then the question arises

of how to introduce them sensitively and appropriately. Prioritising local knowledge is key, but there is no one body of local knowledge. Pakistan is a huge and hugely varied country. This can make piloting non-representative for country-wide distribution, and especially challenging to conduct at scale and in an emergency. A feasible middle ground is co-development of resources, with localised adaptation for delivery."

The external attention and resources attracted when crisis hits are not invariably helpful. Ahmed points out that "these are small NGOs, already stretched thin and in an unsupportive context. So much is being asked of them. Parenting support is very much needed. But local groups, with very stretched capacity, understandably prioritise support of physical needs, which can bring immediate effects. Organisations told us 'We are actively rescuing people, getting them food and shelter, fighting diseases. Come back in three months with these parenting resources.' This is why it is so important for those of us making efforts from outside to have people on the ground, themselves immersed in the active situation."

Illyas, who was actively involved in the field, emphasizes the limitations of in-country capacity, pointing out that "compared to the floods of 2010, the response from the government and military was significantly lower. During the 2010 floods, substantial funding was allocated to support the affected areas, but in the current situation, minimal assistance is being provided for backup support." Illyas notes how a previous crisis had already drained resources. "When the COVID pandemic hit Pakistan in 2020, there was a level of preparedness due to reserved financial and production capacity. People relied on those reserves to cope with the pandemic. However, when the floods struck, they had already exhausted their monetary and other savings, leaving them with nowhere to seek assistance."

After the Floods

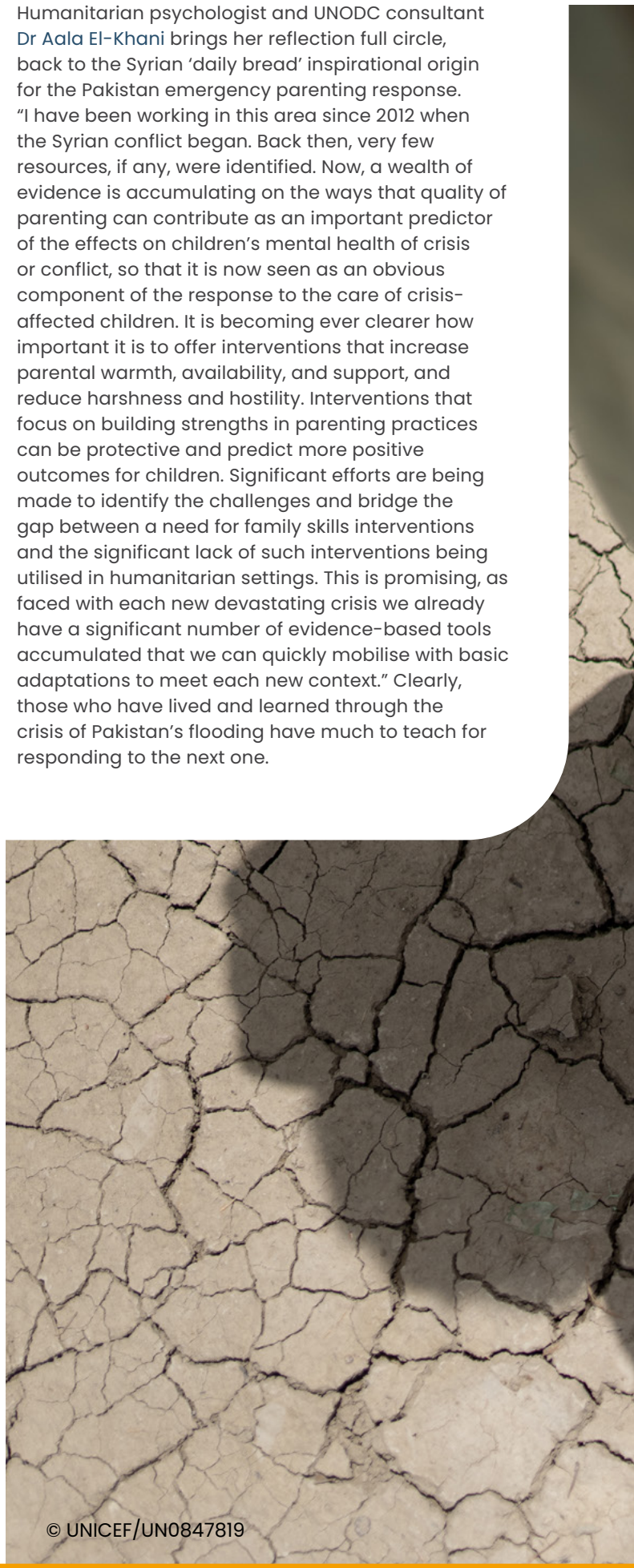
From the first, those offering support perceived that the flooding aftermath would not recede with the waters. Memon explains that "in responding immediately to the destitution and to the distress, we at SRSO saw that a main challenge was the trauma in this severe situation faced by families with children. They had never seen such a critical situation, and these people are still living in their trauma. They tell our field staff that they have dreams at night of how the water came, how our house was damaged, how we lost our assets, everything. NGOs, Government, all of us have to work on the trauma situation. This is everybody's long term, especially for children. It will take a long time, year on year, to restore them to a normal situation." Masood pinpoints "the absence of staff trained in psychological first aid. Some organisations sought trainers to train their teams in this. Most people, unfortunately, believe that only material issues are of importance in crisis. Stress and depression are seen as momentary, dissipating when the emergency phase is over, but they continue impacting lives."

Illyas contextualises the flooding within the broader spectrum of threats, particularly climate change, explaining how "ongoing frequent rain prevents farmers from cutting their wheat, as they require dry storage space. This is exacerbated by the absence of paved rural roads, with transportation severely affected by excessive rainfall. These continuing challenges further compound the damage caused by the floods, as farmers are left with damaged seeds, significantly impacting their livelihoods."

Muntazir strikes a stoic tone: "This flooding has become so rampant, it's happening twice or thrice a year. So here in Pakistan, people are getting used to it, no longer feeling such intensity about it. We are used to it now, whether it's flood or COVID."

And beyond stoicism, there are those within the parenting support sector who see cause for hopefulness. Amanda Germanio, Global Coordinator for the Global Initiative to Support Parents notes "the Ukraine effort could have been a 'one-off' in engaging global agencies and national governments in providing emergency parenting support. Then Pakistan showed otherwise. These resources are needed for all types of crises, and these crisis response efforts have brought parenting support to the fore. Parenting support needs are made visible by crisis contexts, but not limited to them. Parenting support has been shown to have strongly positive impacts in normal times and times of crisis. Universal parenting support is needed, with some families needing it more than others. Crisis makes more visible the value of this intensive, broad-based messaging."

Humanitarian psychologist and UNODC consultant Dr Aala El-Khani brings her reflection full circle, back to the Syrian 'daily bread' inspirational origin for the Pakistan emergency parenting response. "I have been working in this area since 2012 when the Syrian conflict began. Back then, very few resources, if any, were identified. Now, a wealth of evidence is accumulating on the ways that quality of parenting can contribute as an important predictor of the effects on children's mental health of crisis or conflict, so that it is now seen as an obvious component of the response to the care of crisis-affected children. It is becoming ever clearer how important it is to offer interventions that increase parental warmth, availability, and support, and reduce harshness and hostility. Interventions that focus on building strengths in parenting practices can be protective and predict more positive outcomes for children. Significant efforts are being made to identify the challenges and bridge the gap between a need for family skills interventions and the significant lack of such interventions being utilised in humanitarian settings. This is promising, as faced with each new devastating crisis we already have a significant number of evidence-based tools accumulated that we can quickly mobilise with basic adaptations to meet each new context." Clearly, those who have lived and learned through the crisis of Pakistan's flooding have much to teach for responding to the next one.



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