

# Losing the 'great game': Pakistan in turmoil

November 2005

Pakistan has long been a country in turmoil. Following the partition of British India in 1947, unresolved boundary disputes have caused two wars and continuing strife with India ever since. In this current era of terrorism, Pakistan has been at the heart of the 'War on Terror', making many enemies in the process. To further compound these difficulties, on 8 October at 8.55am, at a time when small children were at school and most women in their homes, Northern Pakistan was hit by a devastating earthquake measuring 7.6 on the Richter scale. The epicentre was located in the north of Pakistan and instantly resulted in 3.3 million people being made homeless and over 86,000 fatalities at last count.

The media rushed to Pakistan but left soon after. There were no Westerners killed and no devastation of high profile beach resorts — just one of the world's poorest and most remote areas in the Himalayan range. Here, travel is limited thanks to the arduous terrain, cruel weather and ongoing military tensions with India.

Pakistan does not have an emergency response organisation, and relies on the army for relief efforts, but even the Pakistani armed forces were devastated by the earthquake, with many soldiers also perishing in their quarters. Pakistan requested immediate international assistance as the scale of the devastation became apparent. The Pakistani government lacked sufficient personnel, experience in disasters of this scope, and funds to cope with the event. The army mobilised as quickly as it could, clearing roads, rescuing people from buildings, homes and schools, returning electricity and helping those wounded. But the remoteness and difficult terrain of the mountain regions made it impossible to reach most of the affected people quickly. Many died in the hours and days immediately following the quake

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while waiting for basic medical assistance.

Non-governmental organisations such as Australian Aid International (AAI) were quick to respond to the crisis. AAI is a non-profit, non-governmental organisation committed to

mitigating the double burden of poverty and poor access to quality health care in regions where health systems and medical infrastructure have collapsed. AAI regards health as a fundamental human right, and aims for this right to be realised in some of the most remote and dangerous regions in the world, targeting those communities with the greatest needs. By promoting partnerships with local communities and capacity-building of existing infrastructure, and by providing other humanitarian aid initiatives, AAI focuses on under-served and vulnerable populations and individuals that may not ordinarily enjoy assistance from governments or other international organisations. AAI provides small, specialised services that examine the causes of problems, and supports community activities that encourage sustainable solutions.

AAI sent its Emergency Response Team, made up of volunteer doctors, medics, nurses, solicitors, police officers and cartographers, to Pakistan. AAI personnel made a rapid assessment of the immediate needs of the population. It was quickly established that many areas were not serviced in any way by the large international aid organisations already at work in major Pakistani cities and towns (including Islamabad, Muzaffarabad and Balakot). AAI recognised the immediate need to operate in these remote places, and to put in place a plan to service these communities and help the people who were unable to reach the major cities or towns. Most were the young, the old or traumatised villagers unwilling or unable to seek help due to location and various social and cultural reasons.

AAI was immediately assigned to work in the most remote areas of Kashmir, where aid and medical relief had not yet reached victims. Whole mountains had opened up and moved. Hillsides fell and swallowed up roads entirely, making crossing them even on foot dangerous as aftershocks were still being experienced weeks after the initial earthquake. AAI team members used helicopters, overworked 4X4 vehicles or undertook hours of mountain trekking with heavy packs to reach affected areas.

After meeting with the Pakistani army, it was decided that AAI would set up camp in Lasdana, close to the Line of Control (the de facto Pakistani-Indian border) and at an altitude of close to 10,000 feet. From there we could access the more remote villages in Kashmir's Bagh district. This beautiful landscape has been the scene of constant struggle since partition, against Indian forces only five miles away, the harsh Himalayan elements, and now the very earth these people have risked their lives to occupy.

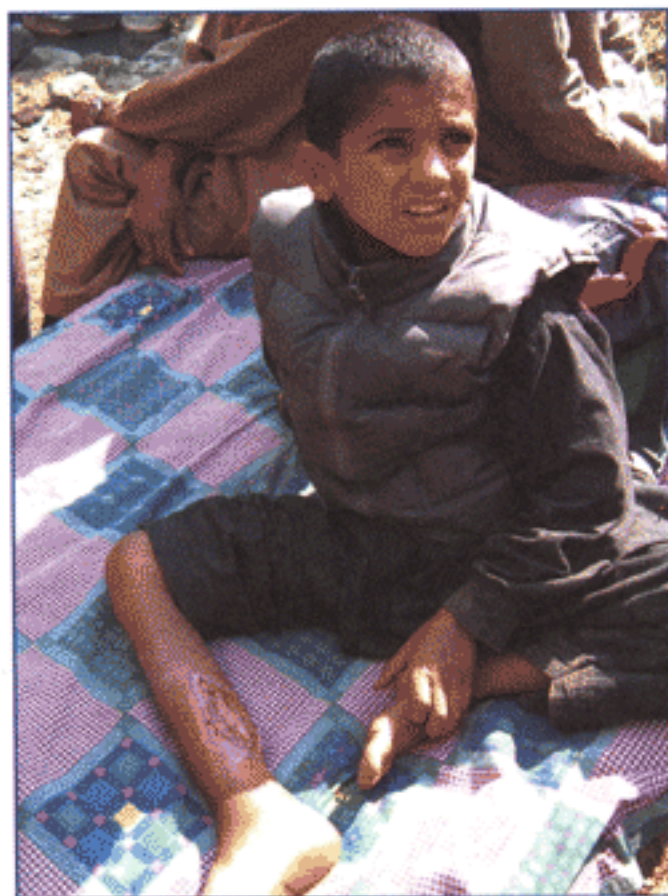
For miles and miles the hills, ridges and valleys are dotted with fallen houses. Poorly built to begin with, these structures stood no chance against the earthquake's fury; their occupants' hope for survival was therefore further diminished. The dwellings in these remote villages were built without effective foundations, just large rocks piled on top of each other to act as walls, and roofs made of the same large



stones and foot-wide wooden beams held together with two feet of mud. When the earthquake struck there was no time for people to evacuate their homes, as most buildings toppled in the first few seconds, burying people alive or instantly killing them as heavy roof beams and 100-kilogram rocks fell on them.

After arriving in remote villages we were met at once by many people requiring immediate treatment. It was instantly apparent that the children and women were the worst affected; two weeks after the earthquake we were still treating children with infected, gaping wounds in their legs and arms that, if left untreated any longer, would have meant amputation. In many cases, we were amazed they had survived this long without treatment.

The village of Mirchkot had no paved roads, no walking paths and nowhere to land a helicopter due to its steepness. We trekked two hours to the town, descending 2,000 feet to reach this very small village where no houses remained standing. Families were living usually ten to a tent, with most infected with scabies. Communities such as these could easily suffer from outbreaks of cholera if the situation continues unchecked. In one of the tents was a woman who had a broken leg, and had been unable to move since the earthquake. Fellow villagers could not carry her out of the village, and she had been sitting on the ground (see top picture on next page) in the same spot for two weeks, without even basic toilet or sanitary conditions. The AAI team quickly tried to treat her, but due to religious reasons and modesty we





were unable to get close enough to examine her. After half an hour of trying to convince her we were there to help, we fashioned a bush splint to stabilise her leg and evacuated her from the village by foot to a road where a four-wheel drive took her to a field hospital in Bagh, 1.5 hours away. Had the snow arrived and prevented transport, she would not have survived.

Winter is fast approaching, and some of the areas AAI is working in are expected to receive fifteen feet of snow. Villages are usually snowed in for the winter, but unlike previous years the villagers now have little or no shelter. The food stocks they had gathered during the warmer months have been destroyed, as well as substantial numbers of livestock. Those lucky enough to receive a tent will not be spared the harsh Kashmiri winter weather as the tents are of light-weight construction and not even waterproof, let alone capable of withstanding Himalayan winters. As I write this article the AAI team in Kashmir is organising a hypothermia program, as at least one million people are at risk of exposure to hypothermia in the coming months. The earthquake has taken 86,000 lives, but the winter, hunger and disease will take many more if we do not act now.



AAI's programs are assisting thousands of earthquake-affected people but are dangerously close to shutting down as operational funds are running low. Some organisations are commenting that they have only received five million dollars instead of 500 million. They may have huge overheads but they must have funds to continue. AAI, though smaller than some international aid groups, has had a huge influence in the Kashmir region. If it is unable to continue assisting people in the remote areas in which it is currently operating, then no other group will be operating in these most difficult areas.

To date, AAI has been fully self-funded by volunteers and a few donations from community-spirited members of the public. This means all operational costs, travel, food and the myriad peripheral expenses have been met by the individuals who have been motivated to give up their time to assist in the field. All camping gear, extreme weather clothing and medical equipment have been supplied by these selfless people. AAI is proud to say that all donations have been used only by our volunteers in the field, where they have had a direct and appreciable effect on the lives of the victims of the disaster. No money is allocated to support operations or the collection or eliciting of funding in Australia. These costs are met entirely by our support staff and people generously offering their expertise and energy.

AAI has not yet secured any funding from traditional aid sources, and this has been a continual frustration and impediment to AAI operations.

**Donations from the public, private and government sectors are desperately sought.** Any donation counts. Any donation will allow AAI to operate for more time in the region and continue to provide much needed medical aid and emergency shelters. Please visit our website at <<http://www.aai.org.au>> to make a donation, and be assured that donations are channelled directly to the beneficiaries. We also urgently require doctors, nurses and other medically qualified personnel for work in Pakistan right now. For more details, check the AAI website.

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