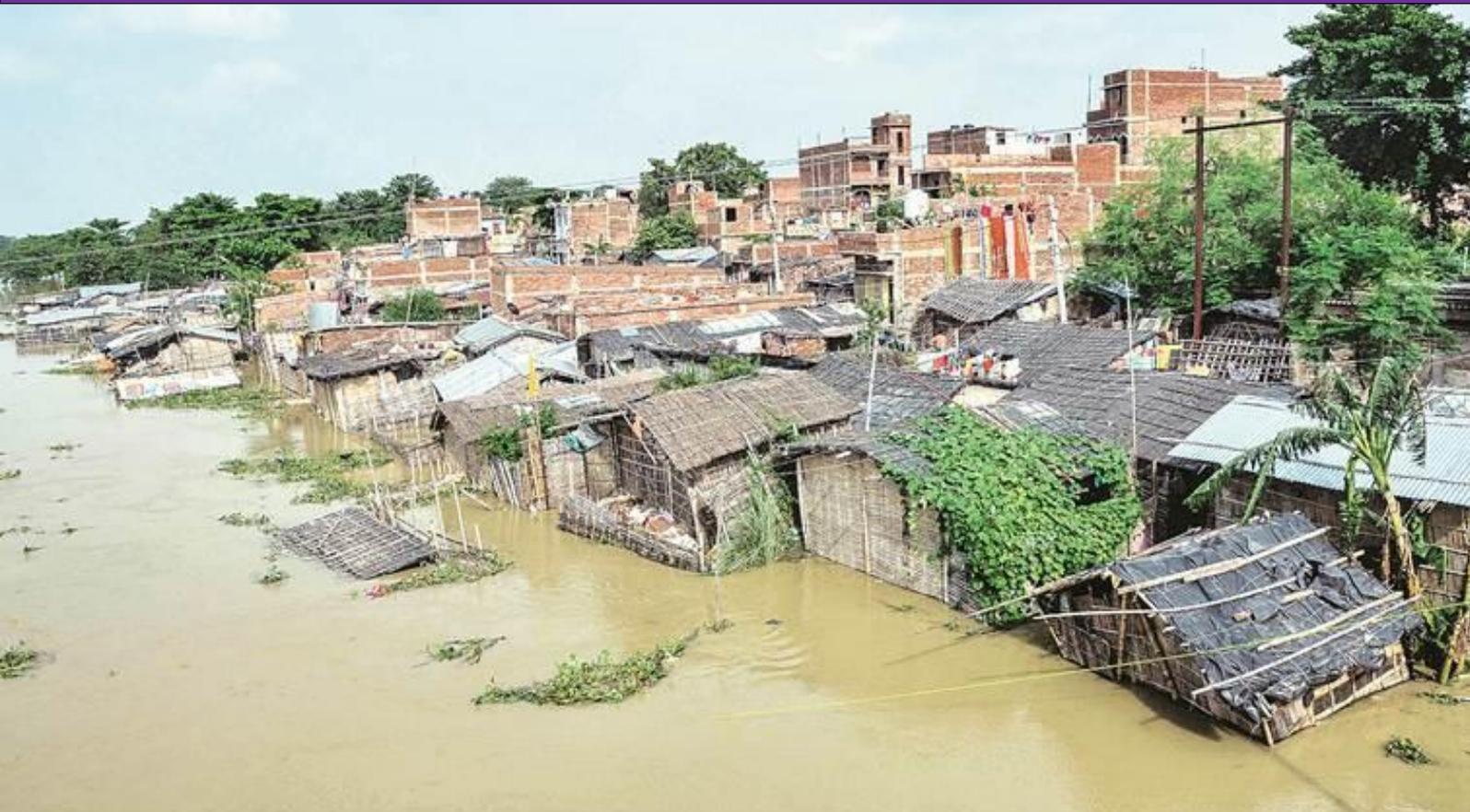


# JOINT RAPID NEEDS ASSESSMENT

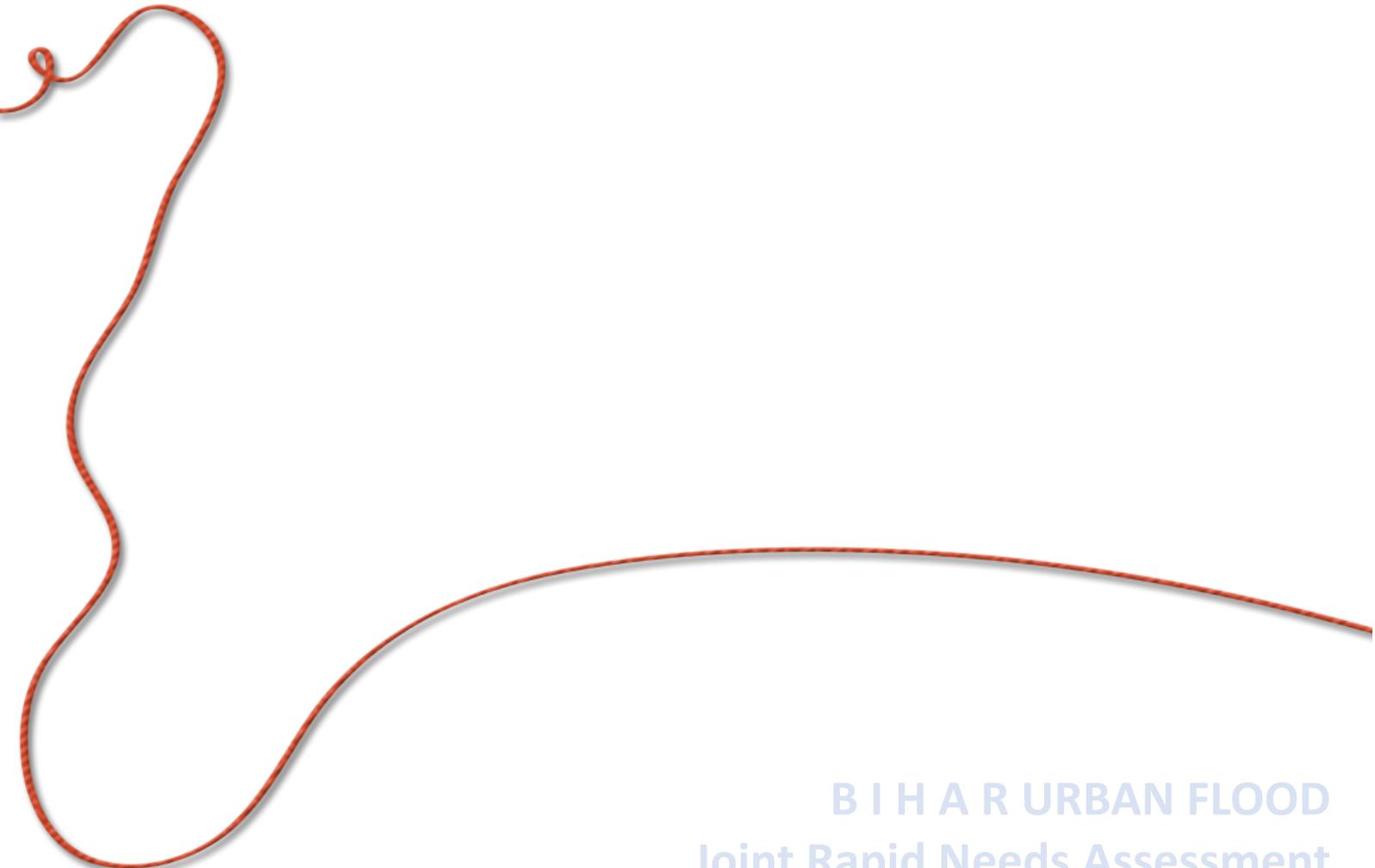
Bihar urban floods, 2019



## BIAG INITIATIVE

### JOINT RAPID NEEDS ASSESSMENT REPORT

This report contains the compilation of the RNA –Phase 01 actions in the state of Bihar, India. Bihar owing to incessant rainfall have created havoc across the many districts in the state that inundated slums, cities, towns, streets in all 38 districts. The capital Patna was among the worst affected district. For the second phase of flood in a row, heavy rains in the state of Bihar have proven deadly for people.



**B I H A R URBAN FLOOD**  
**Joint Rapid Needs Assessment**  
**2 0 1 9**

**Disclaimer:** The interpretations, data, views and opinions expressed in this report are collected from Interagency field assessments Under Joint Rapid Need assessment (JRNA) Process, Block Officers, individual aid agencies assessments and from media sources are being presented in the Document. It does not necessarily carry the views and opinion of individual aid agencies, NGOs, BIAG or Sphere India platform (Coalition of humanitarian organisations in India) directly or indirectly.

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### BIAG Secretariat

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C/o Yuganter  
296, MIGH Rd, Kankarbagh Colony, Lohia Nagar, Patna,  
Bihar- 800020  
E: sanjaypandeyindia@yahoo.com

### Sphere India Secretariat

---

C/O Plan India  
1, Community Centre, Zamrudpur, Kailash Colony Extension  
New Delhi - 110048 (INDIA)  
Phone: +91-11-46558484 Ext : 402  
E: info@sphereindia.org.in Web: info@sphereindia.org.in

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## 1. Background

Bihar is a state in eastern India. Bihar has a diverse climate. Its temperature is subtropical in general, with hot summers and cold winters. Bihar is a vast stretch of fertile plain. It is drained by the Ganges River, including its northern tributaries Gandak and Koshi, originating in the Nepal Himalayas and the Bagmati originating in the Kathmandu Valley that regularly flood parts of the Bihar plains.

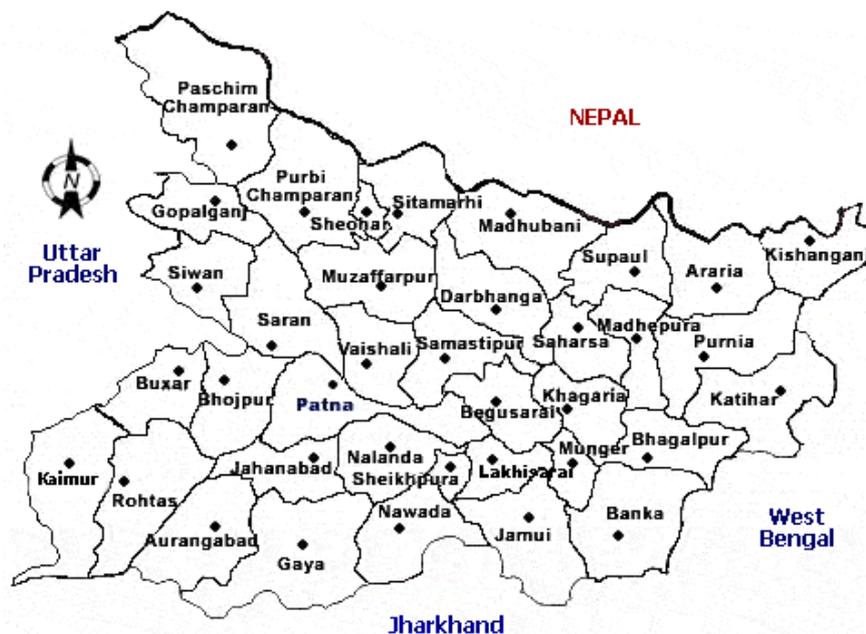


Figure 1 Map of the State of Bihar

Many areas of Bihar have been raining heavily since 21st September. Water has entered 80% of the houses in the capital Patna. The four rivers near Patna, Son, Ganga, Gandak and Punpun, have risen above the danger mark. The release of 2.75 lakhs cusecs of water from Indrapuri barrage across the Sone river has worsened the situation in river Ganga which caused panic among people living in Patna. 24 districts including the capital city Patna is affected. 35 people have died in Bihar after incessant rain in the area, including capital Patna. During the flood, some of worst impacted areas were slums in Patna. The slum areas of Rajendra Nagar area, Ramakrishna Nagar, Kankarbagh, boring road, Nala Road, Gandhi Maidan are among the worst-affected localities in Patna. The Pataliputra Colony and Kurji are also severely water logged. These slums faced severe flooding; causing damages to the houses and remained inhabitable for many days afterwards. The unhygienic living conditions in slums and water accumulation during and after rain, which makes the situation more worse and slum areas flood almost each year now.

Estimates of humanitarian impact - Till date (during current monsoon season):

10,38,04,637 total population of Bihar State (2011 Census)	
<b>Affected districts</b>	<b>28</b> (Araria, Kishanganj, Madhubani, East Champaran, Sitamarhi, Sheohar, Supaul, Darbhanga, Muzaffarpur, Saharsa, Katihar, Purnea, West Champaran, Buxar, Bhojpur, Samastipur, Lakhisarai, Begusarai, Khagaria, Bhagalpur, Munger, Patna, Saran, Vaishali, Arwal, Jehanabad, Nalanda and Nawada)

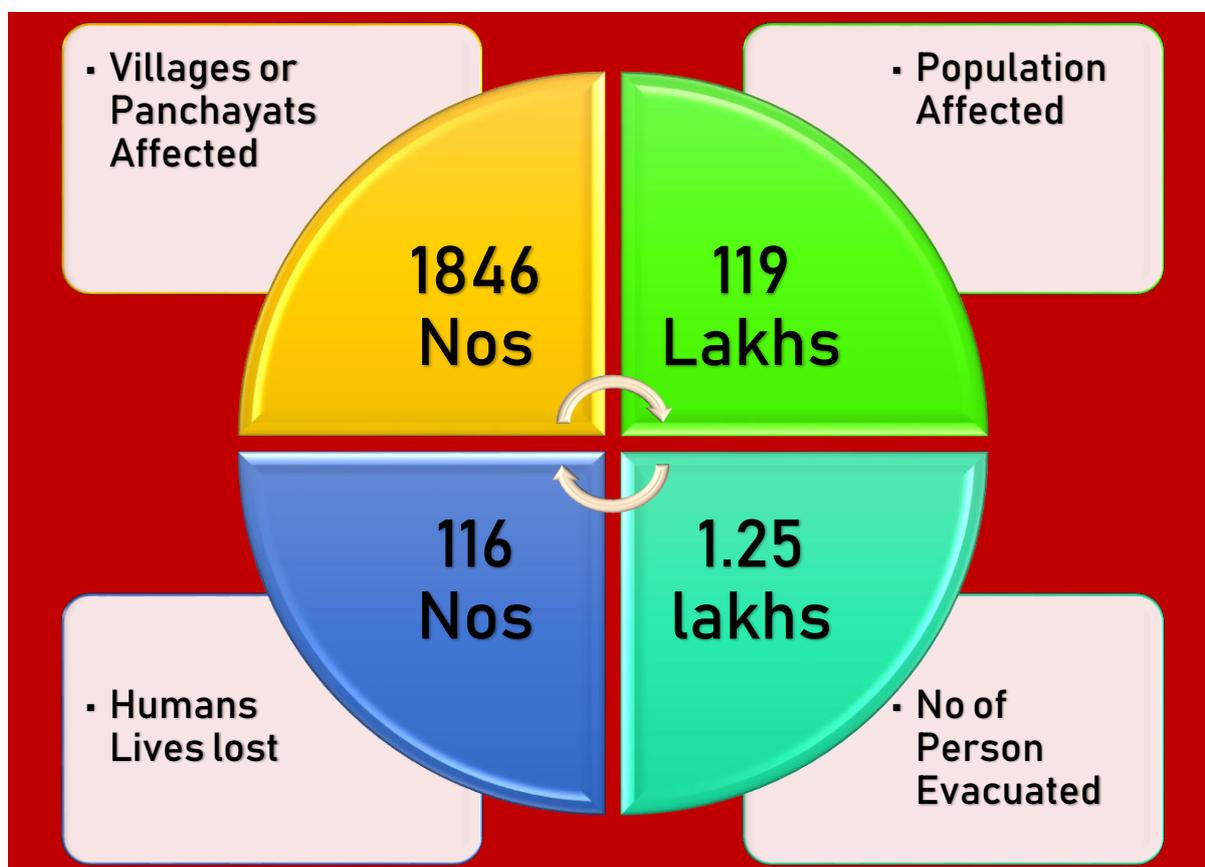


Figure 2. Impact of the flood - till date as on 14<sup>th</sup> October 2019

## 2. Relief measures by GO & NGOs

Several teams of National Disaster Response Force (NDRF) and SDRF are out in the Patna streets to rescue people. Meanwhile, three more NDRF teams have been deployed in Patna to rescue people. The slum areas of Rajendra Nagar area, Ramakrishna Nagar, Kankarbagh, boring road, Nala Road, Gandhi Maidan are among the worst-affected localities in Patna. The Pataliputra Colony and Kurji are also severely waterlogged.

### Government initiatives

- NDRF, SDRF, Army are deployed for rescue operation.to moving stranded people to safer places.
- Local administration started supply of drinking water through tankering in the Islampur Taluka. The administration felt that this is insufficient as they could able to mobilised only 5 tankers and them also looking for more tanker to supply to the unreachable areas.
- Government started distribution dry food distribution and ready to eat meal to the relief camps.

### CBO & individual efforts:

Many local CBOs including BIAG members and individuals, small companies came and distributed dry food, biscuits, water packet, cloths etc. But most of them distributed on the main road and, they did not enter into the slums.

### Relief measure by NGO:

The URS Matrix's for resource mapping and planning for Bihar flood 2019 - including Patna city- Slum Area can be in accessed at below pasted link

Sphere India and BIAG has shared a link to the following spreadsheet:

[URS Matrix's: Resource Mapping and Planning for Bihar Flood 2019 \( including Patna city- Slum Area\)](#)

[Open in Sheets](#)

Or

[https://docs.google.com/spreadsheets/d/1X33ZKq8TZiN1ckMEDReLki51TSvQI\\_73D4AEneIdtUM/edit?ts=5daab0dc#gid=290131655](https://docs.google.com/spreadsheets/d/1X33ZKq8TZiN1ckMEDReLki51TSvQI_73D4AEneIdtUM/edit?ts=5daab0dc#gid=290131655)

## 3. Field assessment:

The Joint Rapid Needs Assessment was carried out in the worst flood affected slums in Patna City, Bihar by individual agencies, BIAG members and Sphere India member organisation like Caritas India, Caritas Swiss, Plan India, Dalit Adhikar Manch , Yuganter, World Vision India UNICEF India, ADRA India OXFAM India, Save the Children and their local presence in the district of Patna. BDO were directly consulted for updates and identification of the worst affected slums.

## 4. Sectorial wise emerging needs:

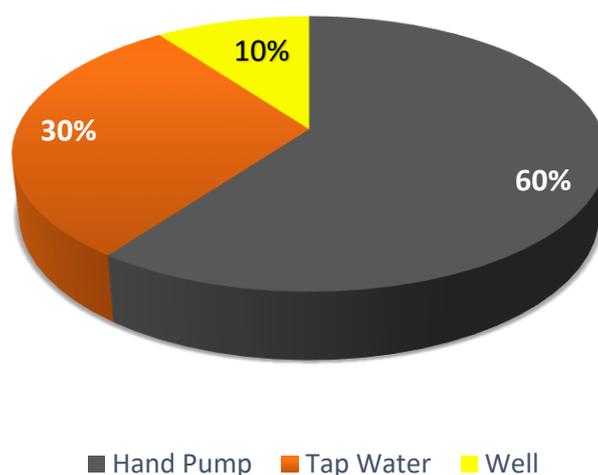
### 4.1. Water, Sanitation and Hygiene (WASH)

Water Sanitation and Hygiene (WASH) is the major sector of every community especially during and post disaster stages because WASH covers most important factors of human Life. After the Bihar Flood the state was witnessing heavy problem in WASH sector and humanitarian intervention is very essential during the recovery stage of response.

#### Water

- As per the census 2011 only 52 percent of rural households in Bihar get their daily supply of water. Throughout the year from piped water at home or public tap/standpipe (both for drinking and other household use), 66 percent have no bathing facility, and 82 percent have no latrine access at home Situation is almost similar in current scenario and the situation will be more crucial during the time of any Disaster.
- As per (Rapid needs assessment JRNA there are 40 slums are fully affected by the flood and 16825 families were the victims of flood. In most of the slums water level was 3 feet and 4 slums are not in accessible condition. The water resources are fully contaminated due to the situation, 66.52 % families were denied by safe drinking water too.

### Major sources of Drinking water

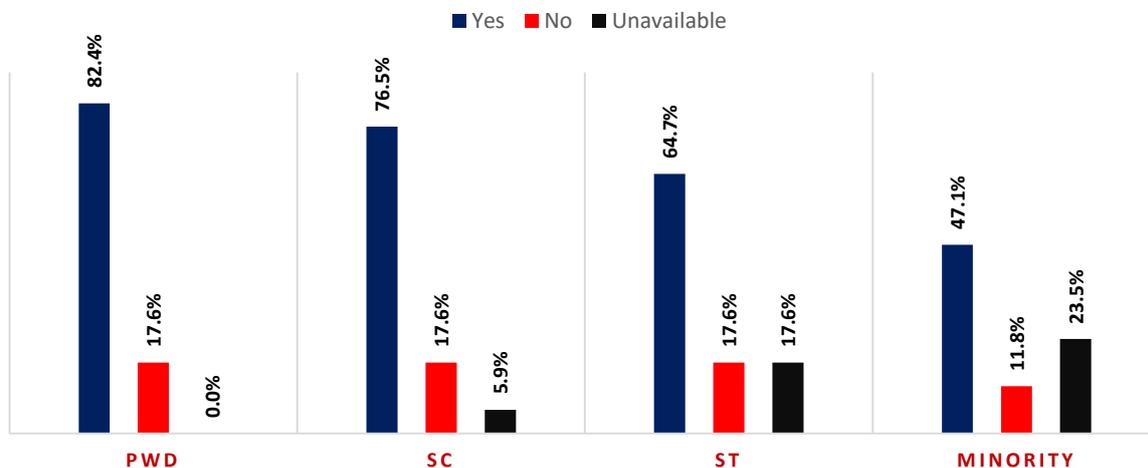


Graph 1 Sources of drinking water

- Greater part of the population i.e. 60% are depending on hand pumps, where as 30% of the population are using taped water. Only 10% depends on well water.
- In case of hand pumps, most of the pumps are submerged in flood and community is unable to access the same. Another fact is, there is huge damage occurred to hand pumps in the area. It leads the scarcity in drinking water facilities in the affected area. Situation

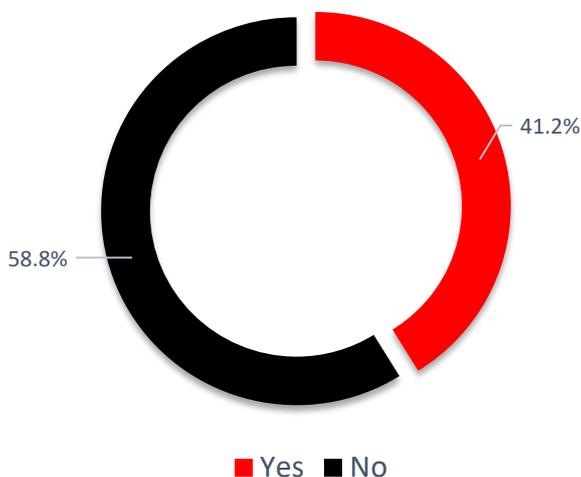
is similar in the case of tap water and well water since the government could not restart the water supply through pipeline system.

### ACCESS TO WATER



Graph 2 Access to water

### Availability of Safe drinking water to women



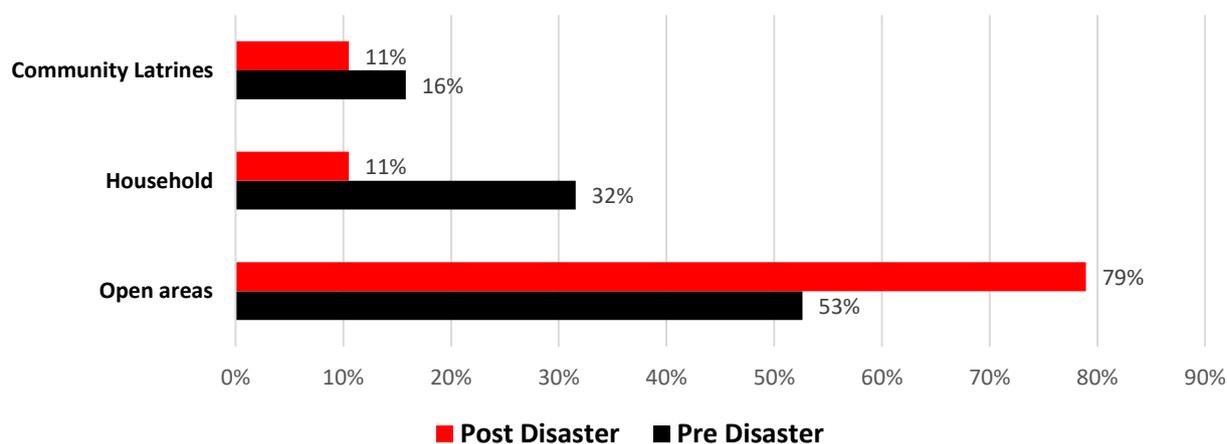
Graph 3 Availability of Safe Drinking Water to Women

Accessibility of safe drinking water to women is also considered during the emergency situation. Only 41% of the population have access to safe drinking water, 58.8% of the women population are facing the problem to get safe drinking water during the emergency. These women category includes pregnant ladies, lactating women and girl child. This information has a great value in addressing the health hazards of women in disaster setting.

### Sanitation

Sanitation is another major concern of Humanitarian aid; Bihar is not at all ODF state since there are many urban belts which are practicing open defecation. This is the situation in non-emergency situation therefore the situation will be crucial during emergency time.

#### Excreta Disposal Practices



Graph 4 Excreta Disposal Practices

The diagram shows the excreta disposals pre/post disaster during the non-emergency situation. Communities are using either community latrine or house hold latrine for their primary needs. 79% of the total population are defecating in open space. In any disaster situation finding a place to defecate is not easy when nearby area are water-logged or the pit latrines overflow. The concern also aroused in disposal of children’s excreta because there are 13054 children is below 6 years. If the open defecation during the flood situation is high obviously there will be epidemical outbreak like diarrhoea, leptospirosis etc.

### Hygiene

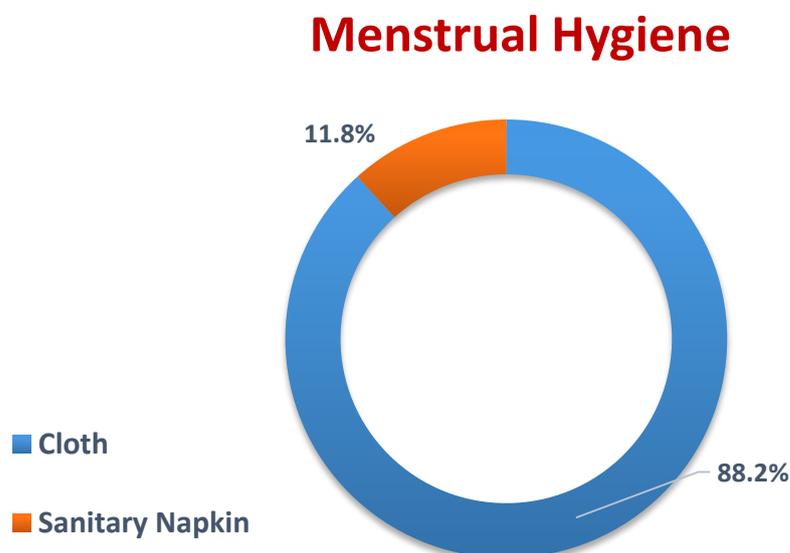
Promoting hygiene practice after disaster is important to prevent the epidemic outbreak and to ensure better health condition. Hence the community does not have safe- hygienic sanitation practice there will not have a standard hygienic condition.

### Bathing and Hand wash

Bathing and hand wash practice are the major component of proper hygiene practice. The data clearly showing there are many slums where they don’t have access to drinking water or water for domestic purposes. Most of the drainage system is collapsed and contaminated water becomes the water recourse to the communities. The people are forced to use the available water for their domestic purposes and that water is not sufficient to meet their basic needs.

### Hygiene among women

During the emergency time the major concern of hygiene lays on the hygienic practice of women especially their menstrual hygiene,



Graph 5 Menstrual Hygiene

The diagram shows that most of the women used cloths for their menstrual hygiene. During the flood situation there is scarcity of water or incapacity in accessing water resources. Therefore the women cannot maintain proper menstrual practice in a disaster setting. The focus on high risk exposure to reproductive tract infections (RTI), urinary tract infections (UTI), and Human papilloma virus (HPV infection which causes cervical cancer) are part of improper menstrual hygiene practice.

### 4.2. Shelter

Flood in Patna impacted the shelter in slums in various ways. The impact ranges from complete collapse of houses to partial damages and minor damages. The slum dwellers need support to help them recover from the impact of flood. In many places, people who lost their homes were unable to return to their home and getting back to normalcy

3.3% of the houses were completely collapsed and these houses will require reconstruction and major repair work. Shelter support should include options from provision of material and technical support to labour and cash. It is also observed that the families lost their homes were staying at relief camps.

For agencies planning to support in shelter reconstruction, it is important to understand the type of assistance required as per the demands.

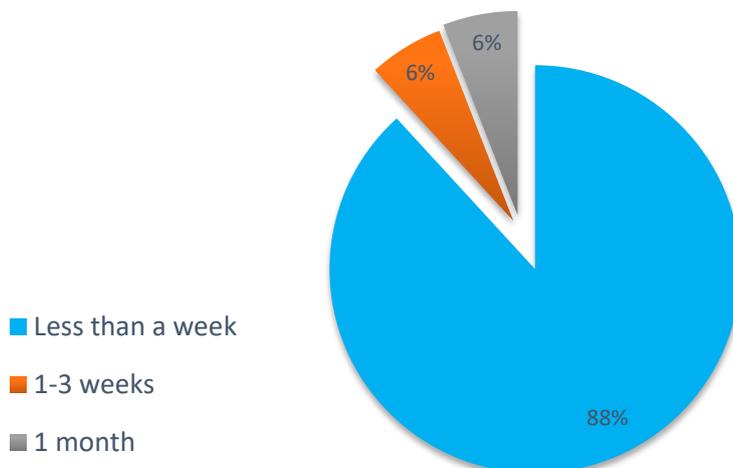
- Water Logging is acknowledged as the major problem in 3 blocks viz., Patna Sadar, Sadar and Patna Block of Patna
- About 550 House Holds are in need of Immediate Shelter.
- Coming to the case of Relief Shelters, the Patna Sadar Block has around 505 shelters which are fully damaged and 13 partially damaged shelters.
- In Sadar Block about 9 shelters were fully damaged out of which 4 shelters are Pakka houses.
- The block also has 64 partially damaged shelters out of which 55 shelters comes under the category of pakka shelters.
- In the third block viz., Patna block, 490 shelters were fully damaged due to water logging and around 1185 shelters were partially damaged
- When it comes to the exposure of shelters to various threats, the shelters are more vulnerable towards Rain, Cold and snake bites which indicate the inadequate criterions predominant in the shelters.
- Coming to the needs prevailing in the shelters the inmates of all blocks are in great need of essential commodities like blankets, Torch lights, hygiene materials, bed sheets, fuel, cloths and stove. Out of which the need for blankets, torch lights and hygiene materials hits the top list.

### 4.3. Food and Nutrition

A related concern is that anthropometric indicators of nutrition in India, for both adults and children, are among the worst in the world. Furthermore, the improvement of these measures of nutrition appears to be slow relative to what might be expected in the light of international experience and of India's recent high rates of economic growth. Indeed, according to the National Family Health Survey, the proportion of underweight children remained virtually unchanged between 1998-99 and 2005-06 (from 47% to 46 % for the age group of 0-3 years). While considering the disaster situation with the above data, any section of the community is in trouble to cope up with the basic necessities like food, shelter, clothing and water.

- Food availability in the affected area - 88% reported it as less than a week  
This shows the emphasis on how in a disaster setting people can cope with scarcity of food as it is a basic need.

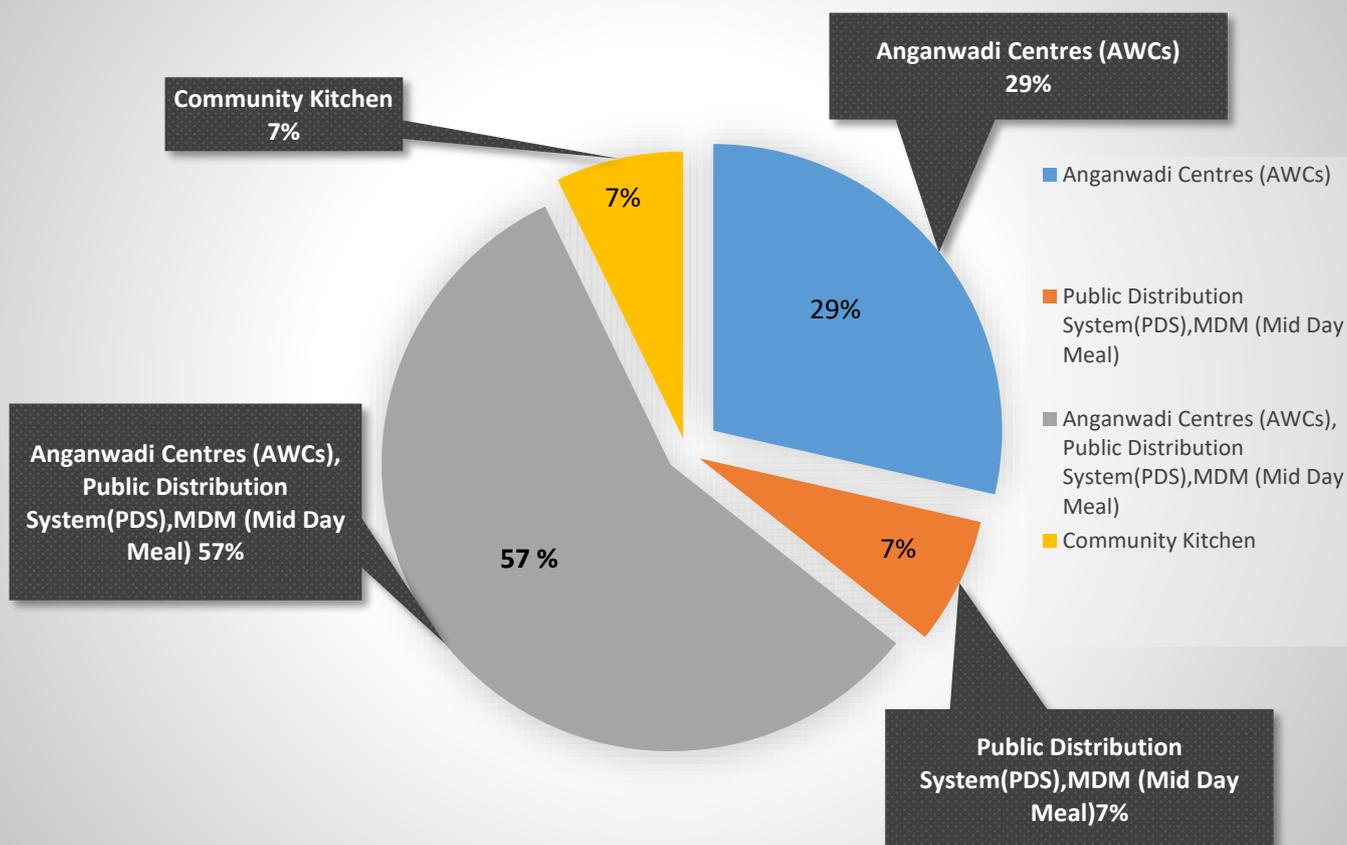
## Food availability of the area



Graph 6 Food availability of the area

- While considering the significant changes in the total amount of food that people are eating since the disaster, it shows a decrease in intake in both male and female, also among children. Children nutrition is major concern and it has been assumed that malnourishment cases will increase during this period.
- All the Government schemes like AWC, PWD, MDM are not functioning properly (less than 50%) to ensure the inhabitants livelihood management. Since most of the inhabitants are daily wages workers so their livelihood is affected and due to this they are not able to meet the daily expenses, especially consumption of food is on lower side as most of the families do not have enough stocks.

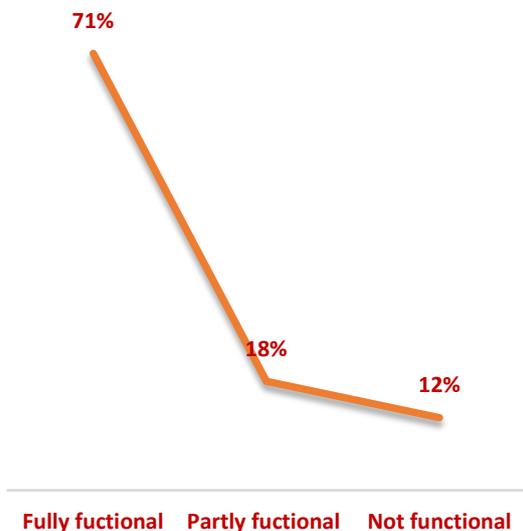
## Access to Govt. Programs on Food and Nutrition



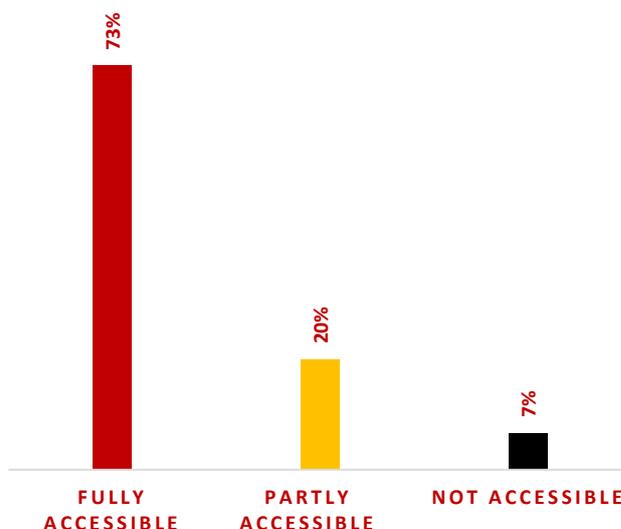
Graph 7 Access to Govt. Programs on Food and Nutrition

- Nutrition of pregnant and lactating women, elderly and people suffering from diseases is also of concern since there are no availability of foods after a week period.
- The easy accessibility and functioning of market place are other important aspect while considering the availability of food grains and other basic edibles. This has been reported as quite satisfactorily (More than 50% is fully functioning as per the data).

### Functionality of the markets after Floods



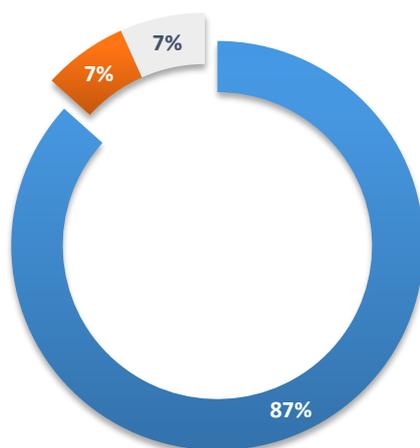
### Market accessibility



Graph 8 Functionality of the markets after Floods

- Bihar has high agricultural production making it one of the strongest sectors of the state. About 80 percent of the state's population is employed in agriculture, which is higher as compared to India's average. Which means the importance of livestock feed is a must in the agrarian community. The below graphical representation shows the availability of fodder in the affected areas, 87% shows it lasts for less than a week.

### Availability of fodder in the affected area

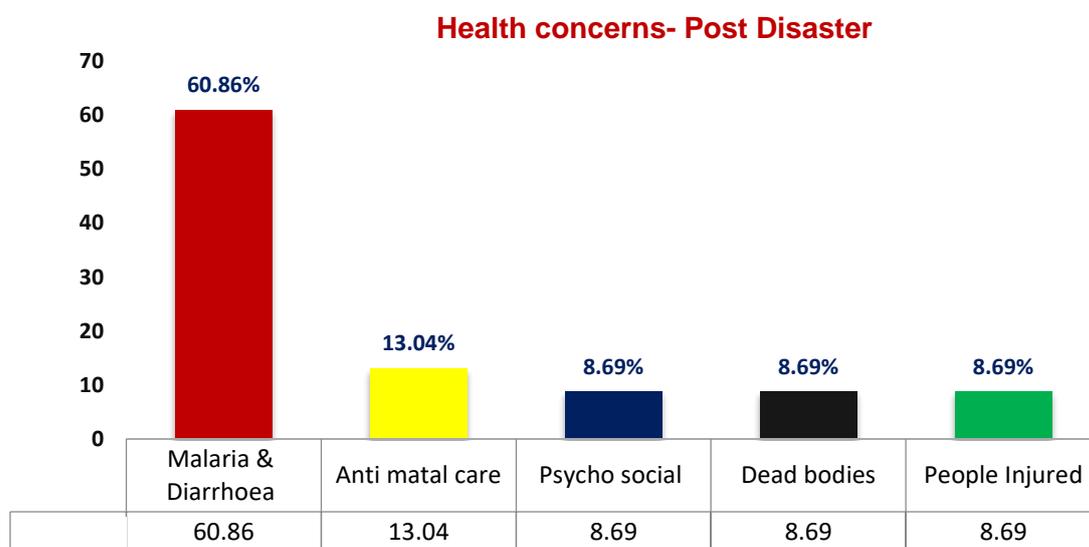


Graph 9 Availability of fodder in the affected area

As per the analysis the livelihood of both male and female were affected badly by the devastating floods. For female -Domestic works, wage labour, Households chores as domestic maids, Rag pickers, Tailoring labours were affected. For male’s construction workers, self employe, daily wages workers, rickshaw puller, street vendor’s labours were affected. It indicates the incapacity of the community members to have proper nutritious food availability in their households.

#### 4.4. Health

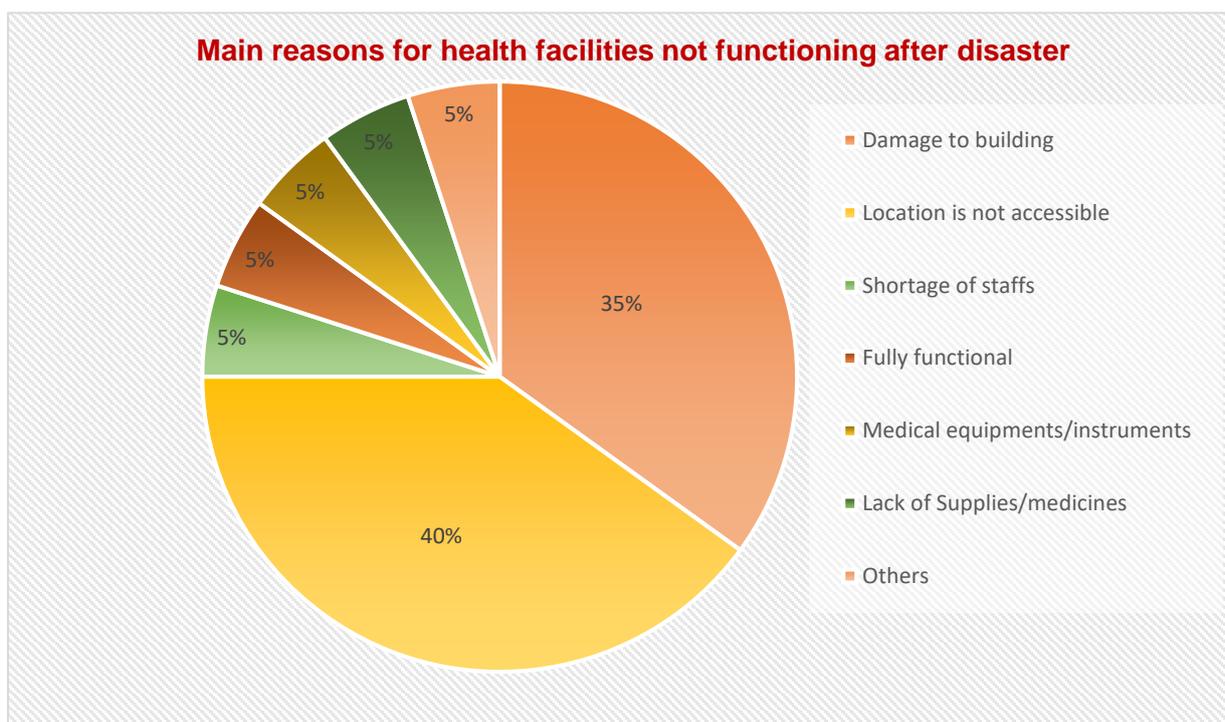
- Both health sub - centers and Primary health centres in majority of villages are not functioning properly during pre and post disaster period.
- The villages lack VNHM services while ASHA, ANM and Anganwadi centres are much active even after disaster.
- It is identified that there is no doctors or medical in charge before and after the disaster in the city of Patna.
- The health services in the villages given below are so pathetic. It is to be noted that these villages don’t have even basic health facilities. The people in these villages are mostly affected by skin diseases, wounds, stomach infection and diarrhea.



Graph 10 Health concerns- Post Disaster

- Lalu Nagar, Konharwa Tola, Maura path & Gulhariya tola of Rukanpura area, West Yarpur, Cheenakothi.
- Only 23 villages of Patna block is having all health facilities .Even though certain reasons like shortage of staffs, damage to building, lack of medical equipments at the time of disaster led to health issues and increased death rate in these villages. It is also identified that the people in these areas have access to emergency essential obstetric care as well as post matal checkups after the disaster.

- The East Lohanipur area of Sadar block and 23 villages of Patna block are the only areas having health camps after the flood. Similarly both the areas have the service of informal provider during pre and post disaster period.
- There is huge outbreak of malaria and diarrhorria in almost all villages of Patna.
- It is identified that the main reason behind not functioning of health services in majority of areas is mainly due to the location of health services in accessible areas and damage to building.



Graph 11 Main reasons for health facilities not functioning after Disaster

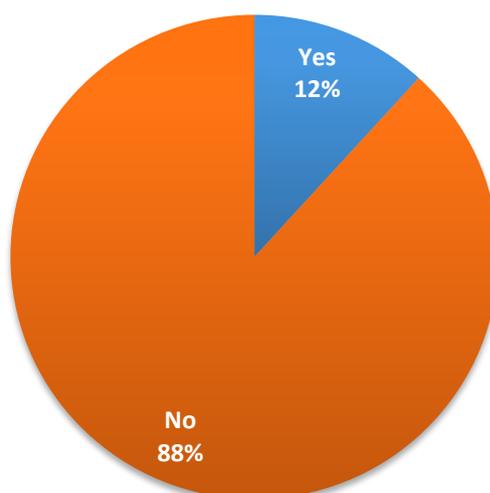
- Bahadurpur Slum of Patna block is the only area having anti matal care as a serious health concern after the disaster.
- Health accessibility is poor in Bhadurpur Mushurtol slum in Sadar block. This slum needs urgent attention in ANC and other facilities. The Children health in this area needs much attention and also identified that in normal days Immunization of children is irregular. People are mostly dependent on quacks as this practice should be taken in serious concern by the authorities.
- Three slums in Patna sadar block have access to routine immunization.
- 90 % of people are ignorant about the information regarding the accessibility of heath services provided in major areas of Patna during post disaster period.
- The East Lohanipur area of Sadar block is the only area having 35 – 40 number of pregnant womens in 7 – 8 month while the Tv sadar area of Patna Sadar block is having the least of only one women.Other areas in the district is having 7 – 10 number of pregnant women.

#### 4.5. Education

##### During Disasters

The above data represents the children going to schools and educational institutions during the time of disaster. During the situation, 88 % are not attending the school and only 12 are attending the school.

#### Are children going to school/educational institution during disaster?

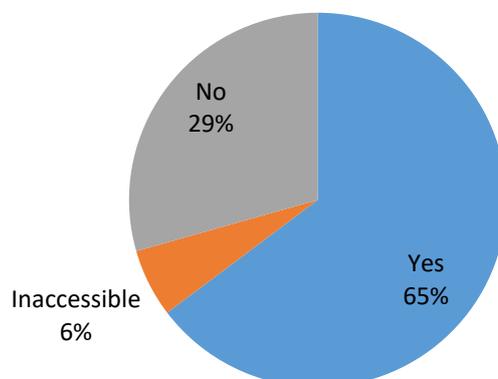


Graph 12 Are children going to school/educational institution during disaster?

- The situation of non-availability of Anganwadi worker (AWW) during the floods was on a rise resulting in a roll out of students from the institutions.
- There is significance damage to the education infrastructure and loss of property. The conditions are unsafe at the institutions, making it vulnerable to continue academics. The educational institutions were not accessible to the children at the time of floods and water logging.
- The situation to take home ration is also a factor where the children were not going to schools or education institutions.
- There is a serious decline among the children attending the school in crisis situation.

## Post- Disaster

### Are children going to school/educational institution post-disaster?



Graph 13 Are children going to school/educational institution post-disaster?

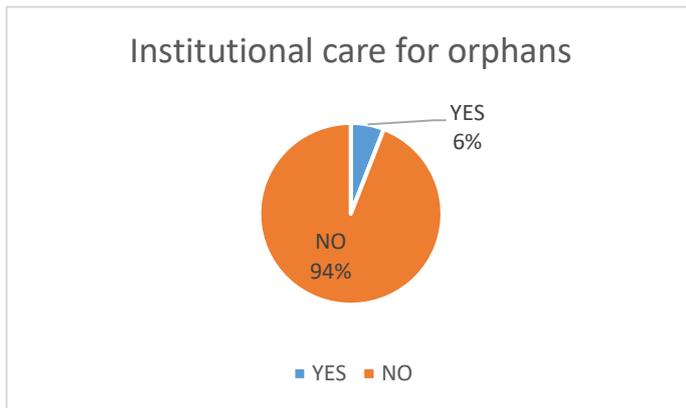
The above chart explains about the children going to school/ educational institutions in a post-disaster situation where the percentage of children attending the school/ educational institution is 65% whereas the children not attending school is 29% and children with no access to attend school post- disaster situation is 6%.

#### 4.6. Protection

Considering the current scenario and understanding the situation at the slums, its importance in any state in catering the people rights are vital.

- The data analysis indicates the risk factors in the post disaster situation pointed in marginalised and vulnerable communities in the state of Bihar. Domestic Violence, Child abuse and exploitation and Harmful traditional practices are the major concerns raised from the above category. This is valid information to have immediate response in human life protection in disaster management settings. This also focusing the vulnerable categories in the affected area, as regard to the daily life management shall be a great challenge if there is a lack in legal protection as per the principles of domestic violence act 2005.
- The data also shows, none of the members reported breakdown of law and order in terms of looting crime, theft etc. It shows the proper functioning and immediate response of police force and other law affirming authorities in the community.
- As per the data there is no violence(s) between members of displaced community and/or host community reported.

- As comparing with any other disaster setting, loss of legal documents reported very less or even we can say a nominal figure.



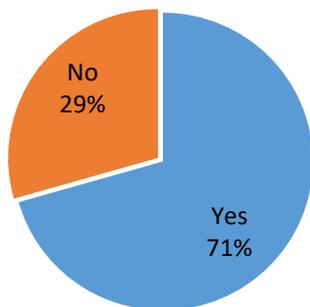
Graph 14 Institutional care for orphans

- From the analysis it is evident that, there is a lack in institutions such as children homes in the affected area to provide care for orphans or separated children. More than 90% of the people reported the issue as a major concern. It clearly indicates the possibility

of increased crime rate and other issues related to children in disaster settings. To prove this, children in the affected community who are involved in types of work that are harsh and dangerous for them reported as more than 50 %.

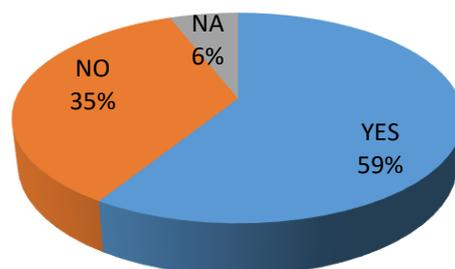
- There is 71 % of Split families (family members separated from others) in the affected area. In a slum community setting this is a vital update to understand the need of having special focus in children from broken families.

### Split Families



Graph 15 Split Families

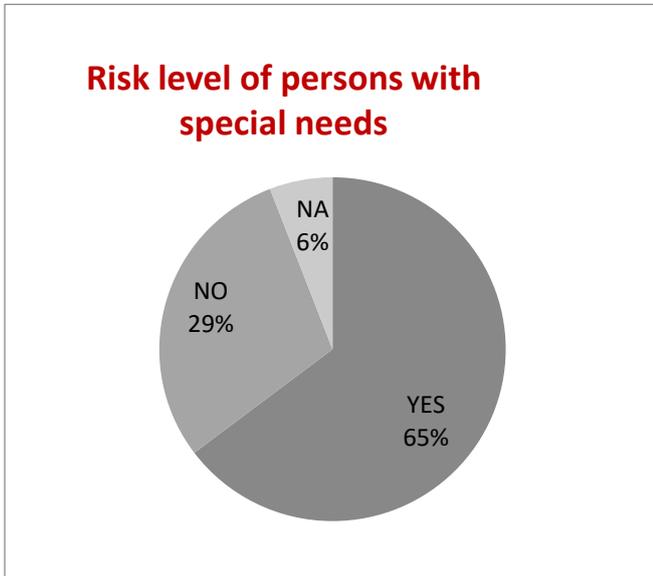
### Discrimination against caste



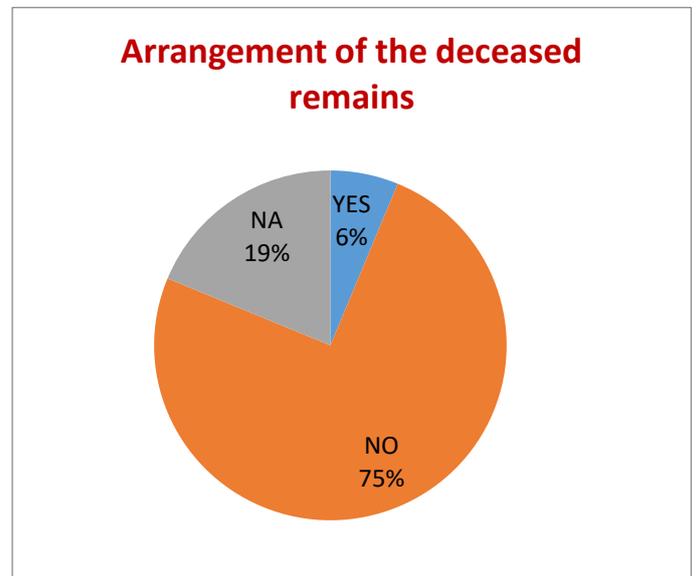
Graph 16 Discrimination against caste

- Caste discrimination reported as 59%. It shows a clear neglect of Article 15 (Article 15 of the Constitution of India prohibits discrimination based on caste and Article 17 declared the practice of untouchability to be illegal). As regard to the post flood disaster management situation the seriousness in discrimination on any subject have to be taken with great importance.
- The data analysis also emphasis the rights of people with special needs. More tha 70 % reported there are no arrangements for the remains of the deceased/ carcasses.

And the persons with special needs were more at risk. There are law implied on persons with disability (2006) and it clearly indicates the protection of those people who needs special attention. The information showcases the marginalised category in the disaster setting especially addressing the lack of legal protection.



Graph 17 Risk level of persons with special needs



Graph 18 Arrangement of the deceased remains

## 5. Recommendations sector wise – Immediate innervations

### Food and livelihood

- Unconditional cash transfer: Most of the families have lost their livelihoods. Even they do not have cash to purchase anything by their own choice for meet their unmet needs. Local market is functional and unconditional cash transfer helps the most vulnerable families come back their normal life with dignity and their own choice.
- Debris cleaning through cash for work: Most of the slums are under the water and after receding the slums can be cleaned for fresh environment of the slums and reduce health hazard.
- Community kitchen should be setup to provide regular meal to local people
- There is immediate need to supply food in slum area as
  - they do not keep stock for long time
  - they do not have mean to earn money for next few days

### Shelter:

- Setting up temporary tent for safe temporally accommodation.
  - People are living in water logged conditions
- Distribution of Tarpaulin, Ground sheets, bed sheet mosquito nets and water filter: Many people lost their shelter made by plastic, tile are completely damaged. Selected beneficiaries of the slums can provide the shelter materials like tarpaulin, ground sheet, bed sheet, mosquito net, blanket for protect their family members specially women and children.
- Providing NFI kits like Plastic bucket with mug, kitchen utensils: Most of the families are lost utensils, storage of drinking water. Plastic buckets are vital as they do not react with chlorine tablets.

### WASH

- Supply of drinking water through tank: There is a huge need of drinking water at least next 7 days. Government is supplying water through tank but limiting to main road and actual affected people unable to access the drinking water.
- Chlorination and maintenance of hand pumps, water tanks & water source rehabilitation: Pipeline supply is one of the main source of water for drinking and household purpose and severely damaged all the pumps due to submerged of flood water last 5 days. The water storage tanks immediate needs for chlorination, cleaning, motor needs repair and whole water supply system needs rehabilitated for clean water supply to entire slums. Also hand pumps are need to chlorinate in the affected slums.
- Mobile toilet: Many slums are still under water. There are hardly toilet facilities in the affected areas. So initial higher of mobile toilets is recommended for next 7-15 days until temporary toilets are constructed.
- Construction of temporary toilets with bathing cubicles: Most of the slums are under the water and after receding the slums temporary toilets with bathing cubicles are

immediate need for affected population for their protection, dignity, arrest contamination and clean environment.

- Distribution of bucket, mug, sanitary napkin, ORS, anti-bacterial and detergent soaps as part of hygiene kit: It was observed that hand-washing with water and soap at critical times is less. People have limited access to soaps and skin infections are increasing. There is also huge need of sanitary napkin and ORS.
- Public Health Promotion activities
- Hygiene Kits (Sanitary Pad, soaps, menstrual hygiene materials, nail cutters etc.)

#### **EFSVL**

- Unconditional cash Transfer (UCT). Special school dress, books for the school going children

#### **Education**

- Study materials (Educational Kit) including uniform should be provided to children for their studies
- Temporary arrangement for teaching at slums for keeping children engaged.

#### **Protection**

- Child protection awareness: There is risk of child trafficking. Evidence suggest that poor people tends to sell/send their children to work due to their weak economic condition.

## 6. Assessment methodology:

### 6.1. Methodology:

The assessment was entirely qualitative in nature. It entailed interaction with affected men and women. Discussions were held with affected community in mixed as well as separate groups. Also met with Block officials. Field observation also formed part of the assessment such as: water and sanitation facilities for women, condition of relief centres and damages of shelters, livelihood assets in affected slums.

Others methodologies followed are:

- Telephonic interview were conducted with other key informants involved in flood relief who have experienced the problem during the Patna flood.
- Observations: Visual observations related to living condition, children space, people' activities and their immediate concern.
- Photographic analysis: Flood pictures are collected from volunteers and other partner team members and analyse to identify the current community issue.

## 7. Annexures:

### 7.1. Assessment formats (Hindi & English version)

#### Hindi version

- [JRNA Hindi – India Rapid Assessment](#)
- [Format-VILLAGE \(HINDI\) – Shivashish Sinha, PGVS](#)

#### English version

Guidance note – JRNA and TOR Template

- [GuidanceNote-RJNA-dcp-ver2.0](#)
- [TOR Template RJNA](#)

JRNA – Assessment Report Format

- [Format- Assessment Report](#)

JRNA District & Village Tools revised

- [JRNA District Tool Revised](#)
- [JRNA- Village Tool Revised](#)

## 7.2. List of team leaders with team members and respective area for JRNA (03.10.2019)

Sl. No.	Team Leader	Team Member			Area				Relief Camp
01	Mrs. Keerti - CS	Lokesh Ranjan - CI	Rajesh Kumar - DAM	Chanderkant Yuganter 9304647971	Laloonagar (Patlipura Station)	Yarpur (Gardanibagh)	Paswantoli/Musahartoli (Rukanpura)	Chinakothi (Boring Road)	1
02	Mr. Ajit - DAM	Vakeel Ram - DAM	Rajkumar - DAM	Jojendra Arya - DAM	Sampatchak	Punpun	Hulasi Tola-76 Maner (Haldi Chapra)		1
03	Mr. Sanjeev - PI		Sanjay Tewary Yuganter 8789382072		Purvi Lohanipur (Rajendra Nagar)	Mushartoli / Housing Colony (Bahadurpur)	Saidpur Stadium (Saidpur)		1
04	Mr. Binay Kumar-U	Mrs. Sharad Kumari - AI	Uday Kumar Yuganter 7549820251		Dusaditola (Kankadbagh)	Nayatola (Kumhrar Park)	Domtoli (Kankadbagh)		1
05	Mr. Pawan Dubey-U	Rakesh Kumar , ADRA 9471687009	ADRA		khajekala (Patna City)	Kamla Nehru Nagar (Patna Club)	Adalatganj (Adalatganj)		1

Acronyms: CS-CARITAS SWISS, CI-CRITAS INDIA, DAM-Dalit Adhikar Manch, U-UNICEF, PI-PLAN INDIA, Yuganter

### 7.3. Contacts of the key stakeholders:

- 7.3.1. List of Sphere member's local partners in Bihar can be accessed at <https://sphereindiablog.files.wordpress.com/2018/01/annexure-iv-bihar-iag-members-and-sphere-member-s-local-partners.pdf>
- 7.3.2. Contacts details Of State Disaster Management Authorities in India can be accessed at <https://sphereindiablog.files.wordpress.com/2019/01/annexure-3-1-contacts-details-of-state-disaster-management-authorities-in-india.pdf>

### 7.4. Secondary Data- Demographic (2011 Census)

Description	2011	2001
Approximate Population	10.41 Crores	8.30 Crore
Actual Population	104,099,452	82,998,509
Male	54,278,157	43,243,795
Female	49,821,295	39,754,714
Population Growth	25.42%	28.43%
Percentage of total Population	8.60%	8.07%
Sex Ratio	918	919
Child Sex Ratio	935	942
Density/km <sup>2</sup>	1,106	881
Density/mi <sup>2</sup>	2,863	2,283
Area(Km <sup>2</sup> )	94,163	94,163
Area mi <sup>2</sup>	36,357	36,357
Total Child Population (0-6 Age)	19,133,964	16,806,063
Male Population (0-6 Age)	9,887,239	8,652,705
Female Population (0-6 Age)	9,246,725	8,153,358
Literacy	61.80 %	47.00 %
Male Literacy	71.20 %	59.68 %

Description	2011	2001
Female Literacy	51.50 %	33.12 %
Total Literate	52,504,553	31,109,577
Male Literate	31,608,023	20,644,376

## Bihar Urban Population 2011

Description	Rural	Urban
Population (%)	88.71 %	11.29 %
Total Population	92,341,436	11,758,016
Male Population	48,073,850	6,204,307
Female Population	44,267,586	5,553,709
Population Growth	24.25 %	35.43 %
Sex Ratio	921	895
Child Sex Ratio (0-6)	938	912
Child Population (0-6)	17,383,701	1,750,263
Child Percentage (0-6)	18.83 %	14.89 %
Literates	44,812,152	7,692,401
Average Literacy	59.78 %	76.86 %
Male Literacy	69.67 %	82.56 %
Female Literacy	44.30 %	61.95 %

## Bihar Metropolitan/City Population

Big Cities	Population	Male	Female
<u>Patna</u> (Municipal Corporation)	1,684,222	893,399	790,823
<u>Gaya</u> (Municipal Corporation)	468,614	247,131	221,483
<u>Bhagalpur</u> (Municipal Corporation)	400,146	212,813	187,333

Big Cities	Population	Male	Female
<u>Muzaffarpur</u> (Municipal Corporation)	354,462	187,564	166,898
<u>Biharsharif</u> (Municipal Corporation)	297,268	155,216	142,052
<u>Darbhanga</u> (Municipal Corporation)	296,039	155,637	140,402
<u>Purnia</u> (Municipal Corporation)	282,248	148,077	134,171
<u>Arrah</u> (Municipal Corporation)	261,430	138,804	122,626
<u>Begusarai</u> (Municipal Corporation)	252,008	133,722	118,286
<u>Katihar</u> (Municipal Corporation)	226,261	119,574	106,687

Large Metropolitan Region	Population	Male	Female
<u>Patna</u>	2,049,156	1,087,285	961,871

#### 7.5. Distribution of Population, Sex Ratio, Density, Child Population and Population Aged 7 Years and Above by Sex Affected by Flood

1.	Total population affected	Person	<b>119.03 lakhs</b>
		Male	Not available
		Female	Not available
		Any others	Not available
2.	Sex Ratio of affected population	Female per 1000 Males	Not available
		Density (Per sq. km)	Not available
3.	Child Population in the age group 0-6 by sex affected	Person	Not available
		Male	Not available
		Female	Not available
4.	Population aged 7 years and above by sex affected	Person	Not available
		Male	Not available
		Female	Not available

## 8. Acknowledgement

We acknowledge and give our thanks to humanitarian agencies for their efforts to carry out Joint Rapid Need Assessment and writing report on situation analysis along with recommendation for immediate interventions.

And, Sphere India Secretariat team leading in writing the report and data analysis and assessment teams from individual agencies, BIAG members and Sphere India member organisation like Caritas India, Caritas Swiss, Plan India, Dalit Adhikar Manch , Yuganter, World Vision India, UNICEF India, ADRA India OXFAM India, Save the Children and their local presence in the district of Patna.

Special thanks to local administration for supporting the process of conducting Joint Rapid Needs Assessment in the flood affected slums and providing relevant information about damages and relief initiative.

Overall technical support for the entire process by Sphere India Secretariat and its members.

**Pictures of flood affected areas in Patna, Bihar**

*(Some of the flood images shared by Caritas India, Oxfam India, Plan India and Save the Children through the individual assessment report submitted to Sphere).*



