

Health Emergency: Situation Report #7

Monsoon and Floods - 2025

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SITUATION OVERVIEW

As of **28 August 2025**, Pakistan remains in the grip of the monsoon season. Since late June, continuous heavy rains, intensified by flash floods and glacial lake outburst floods (GLOFs) have caused widespread devastation. In Khyber Pakhtunkhwa (KP) particularly in mid-August, cloudbursts and intense rainfall triggered catastrophic flash floods and landslides in districts such as Bajaur, Shangla, Swat, Lower Dir, Upper Dir, Torghar, and Mansehra. Punjab has also been severely affected, with the Ravi, Chenab, and Sutlej rivers at "very high to extremely high" flood levels - particularly downstream of key barrages including Qadirabad, Khanki, and Marala. The army has been deployed in 8 districts of Punjab, where 769 villages have been submerged, and 239,243 people have been evacuated. At the national level, between 26 June and 28 August, the National Disaster Management Authority (NDMA) has reported 819 fatalities and 1,111 injuries. Infrastructure damage includes 104 health facilities (7 completely destroyed), 60 Lady Health Workers Houses, 8,658 houses, 238 bridges, 658 km of roads, and the loss of 6,138 head of livestock. Since the onset of the monsoon, 814 relief camps have supported 29,558 people, 312 medical camps have provided care to 7,509 patients, and 1,494 rescue operations have saved 255,676



Health facility affected by the floods in Faisalabad, Punjab. Photo: WHO Pakistan

people. According to the **Pakistan Meteorological Department**, between **29 August and 3 September 2025**, hot and humid weather will prevail across much of the country, with frequent rain-wind/thundershowers expected in Punjab, Khyber Pakhtunkhwa, Pakistan-administered Kashmir, Gilgit-Baltistan, northeast Balochistan, and the Pothohar region, occasionally accompanied by heavy falls, particularly from **30 August to 2 September**. Scattered rains are also likely in parts of **Sindh and coastal areas**.

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HEALTH IMPACT

Mortality and Injuries

Among the 819 reported deaths, 493 were men, 123 women, and 203 children. Of the 1,111 injured, 546 are men, 270 women, and 295 children. The provincial breakdown of deaths is as follows: Punjab (182), Khyber Pakhtunkhwa – KP (479), Sindh (57), Balochistan (24), Gilgit-Baltistan (41), Islamabad Capital Territory – ICT (8), and Pakistan-administrative Kashmir – PAK (28). In the past 24 hours, 14 new fatalities and 4 injuries have been reported from Punjab and KP Province.

Communicable Diseases

- Vector-borne diseases: Malaria and dengue cases are on the rise. Over the past six weeks, suspected dengue cases have increased by 41.1%, Similarly, suspected malaria cases have risen by 26.4% since June 2025.
- Waterborne diseases: Outbreaks of Acute Watery Diarrhea (AWD) were reported and responded to in Khuzdar District, Balochistan, and Shaheed Benazirabad, Sindh.
- Other health concerns: Cases of skin diseases (particularly scabies), snake bites, and dog bites are reported at significantly higher levels, posing major public health concerns in Khyber Pakhtunkhwa (KP).

Damage to Health Facilities / Lady Health Workers Houses

A total of 104 damaged health facilities have been reported: Sindh (25), Khyber Pakhtunkhwa (60), Punjab (12) and Gilgit-Baltistan (7). Of these, 97 sustained partial damage, while 7 were completely damaged – 2 in Sindh, 3 in Khyber Pakhtunkhwa and 2 in Gilgit-Baltistan. In Khyber Pakhtunkhwa, a total of 60 Lady Health Worker (LHW) houses were reported damaged, of which 28 were partially damaged and 32 completely destroyed.

KEY FIGURES



819



1,111Injured



8,658
Houses



104

Houses Health Facilities
Damaged Damaged

Access to Health Care

Of the **104 damaged health facilities, 97 remain functional and accessible**. However, services are entirely disrupted at 7 facilities that were completely damaged in Sindh, Gilgit-Baltistan and Khyber Pakhtunkhwa, limiting access to essential healthcare for the affected population. In Punjab, some areas are facing road damage and accessibility issues.



HEALTH WORKFORCE AND SUPPLIES

Workforce

This week, health authorities in both Khyber Pakhtunkhwa and Punjab have sustained the deployment of doctors, nurses, and allied health staff across health facilities to ensure uninterrupted service delivery despite ongoing floods, with district rapid response teams remaining fully engaged and operational. In Khyber Pakhtunkhwa, **255 medical camps** have been established for flood-affected populations, while in Punjab 319 medical camps have been set up and supported by the deployment of additional human resources. WHO leadership visit to affected areas in Swabi district confirmed that adequate medical camps with available female medical staff have been deployed by the Ministry of Health and the Population Welfare department.

Medical Supplies

- The Punjab and KP Health Department are actively responding to the crisis by ensuring the supply and distribution of essential medicines and medical supplies in the affected districts to address urgent health
- The Ambulatory Service (Rescue 1122) has been playing a critical role in Punjab's flood response by leading evacuation operations, providing emergency medical care, and ensuring safe transportation of affected populations to relief camps and health facilities. In addition, it is supporting the establishment of emergency medical camps, facilitating the referral of critical patients, and working closely with health authorities to ensure the continuity of lifesaving services during the ongoing floods.



COORDINATION, RESPONSE AND NEEDS

Response by the Government

- The Chief Minister of Punjab convened an emergency meeting with heads of line departments and district administrations to ensure the safety of populations in flood-affected areas and the effective **implementation** of advisories issued by NDMA and PDMA. Following the CM's directions, all departments have been instructed to take necessary measures for timely evacuations and emergency operations, while the **Health** Minister of Punjab has issued specific instructions to all District Health Authorities to strengthen health response efforts.
- PDMA Punjab dispatched additional rescue and relief supplies, including tents, life jackets, life rings, food hampers, plastic mats, dewatering sets, blankets, and mattresses to multiple vulnerable districts. This measure is intended to support uninterrupted response operations and enhance the protection and safety of affected communities.
- **Health and Nutrition Services:** Mobile health trucks were deployed in Buner, Outpatient therapeutic program (OTP) sites were established in Buner, Swat, Lower Dir, and Swabi for treatment of severe acute malnutrition, while malaria camps were set up in Buner. Monitoring staff have also been deployed to supervise immunization activities.
- WASH, Surveillance, and Assessments: A water filtration plant was installed in Beshoni and rapid diagnostic testing teams deployed in Buner for disease surveillance, while field teams are ensuring data recording for early outbreak detection. In addition, extensive Damage and Needs Assessments are underway with reports to be submitted to the Health Department.
- In Gilgit Baltistan, medical camps and a field hospital were established to provide healthcare services to flood-affected populations, while Lady Health Workers (LHWs) conducted health education sessions. In addition, ambulance services were made available to ensure timely access to medical care.
- Since the onset of the monsoon emergency, a total of **1,494 rescue operations** have been conducted nationwide, leading to the evacuation of **255,676 people**. Of these, Punjab accounted for **1,227 rescue** operations, evacuating 239,243 individuals.
- To date, **910 relief camps** have been established across the country, currently sheltering **29,558 people.** In Punjab alone, **588 relief camps** are operational.
- A total of **6,325 mosquito nets** and **3,171 hygiene kits** have been provided to affected populations, with other relief items distributed across all provinces.

WHO Contribution

- Weekly Health Sector Coordination Meetings are being consistently held, the most recent on 25 August 2025 under the leadership of the MoNHSRC and co-chaired by WHO. The meeting underscored the heightened risk of post-flood disease outbreaks and emphasized the urgent need for early public health interventions to contain the spread of epidemic-prone diseases. It was also highlighted the critical importance of proactive surveillance, effective risk communication, and the timely provision of essential supplies and health services to mitigate potential public health impacts.
- During the current week, with continued technical support from WHO Sub-Offices, provincial health departments have activated their Health Monsoon Contingency Plans and operationalized flood control rooms in high-risk districts. Coordination with PDMAs and district administrations has been further strengthened to ensure a timely and effective response to emerging health risks.
- WHO Sub-office in KP is supporting Flood Emergency Control Rooms along with an Emergency Flood
 Disease System to enhance real-time monitoring, early detection, and rapid response to potential health threats in flood-affected areas.
- WHO Sub-Office Punjab has been actively engaged in daily Flood Cell coordination meetings with high-risk districts, providing technical support to the Department of Health for flood response and contingency plan implementation at both district and provincial levels. WHO teams are also conducting daily disease surveillance and analysis, and assisting PDSRU in generating daily surveillance and response reports. In addition, WHO is supporting needs assessments for medicines and supplies.
- One day after the floods hit Khyber Pakhtunkhwa, WHO urgently dispatched health supplies to treat up to 15,000 patients to the Government of Khyber Pakhtunkhwa. Since June, WHO has sent medical supplies nationwide for pre-positioning and support the emergency response, enough to assist up to 380,000 floodaffected and displaced persons. In addition, 50,000 oral rehydration salts (ORS) sachets are being distributed by the WHO Sub-Office in Punjab to the worst-affected flood areas.
- WHO is ready to deliver more supplies and to support coordination mechanisms at all levels, strengthening surveillance and outbreaks response and access to essential health care services for affected populations.
- WHO has also sent nutritional supplies (therapeutic food) to 48 stabilization centres of GB, KP and Pakistan-administered Kashmir to ensure 35,000 feeds and treat 5200 children affected by severe acute malnutrition with medical complications.

Immediate Priorities

The immediate priorities in response to the Punjab floods are to urgently ensure access to **essential health services**, including the **provision of medicines and medical supplies**, **diagnostic kits**, **and mental health and psychosocial support** for affected populations, alongside treatment of injuries and prevention of **water-and vector-borne diseases**. Simultaneously, provision of emergency shelter, food, clean water, and non-food items (NFIs) remain critical to meet the needs of displaced populations. Equally important are **WASH interventions** to reduce **outbreak risks**, the protection of vulnerable groups in relief camps and strengthened **coordination among government, military, and humanitarian partners** to enable a timely and effective response.



Relief and Medical Camps Established

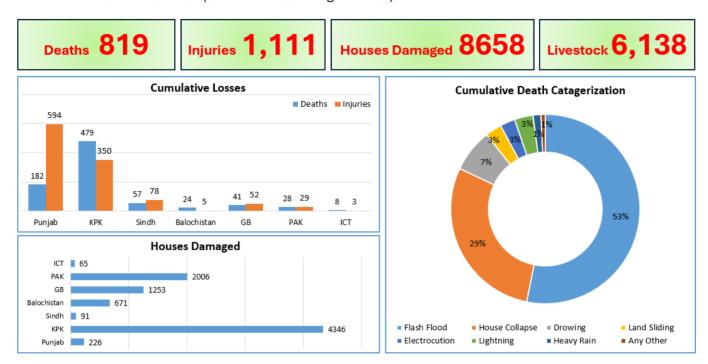
Province	Relief Camps	Persons in Relief Camps	Medical Camps	Persons Treated
Punjab	588	315	319	15,316
KP	308	25,927	255	44,302
Sindh	02	176	16	5,496
Balochistan	-	-	01	250
GB	11	3,140	19	7,874
PAK	-	-	-	-
ICT	01	-	-	-
Grand Total	910	29,558	610	73,238
Source: National	Disaster Management Aut	thority (NDMA) & Provincial Dep	artment of Health	

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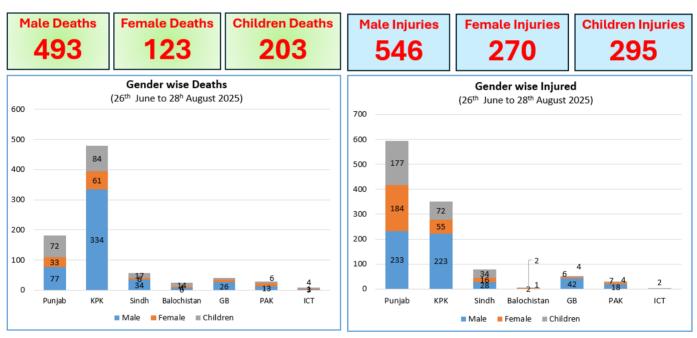
Annex A:

Key Figures on Monsoon-Related Health and Humanitarian Impact - 2025

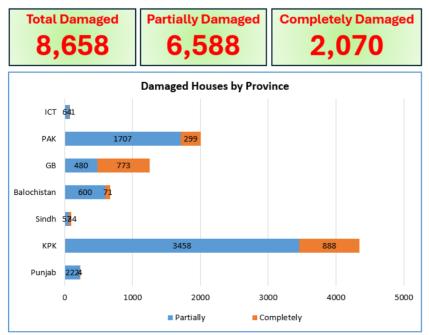
Cumulative (26th June to 28th August 2025)

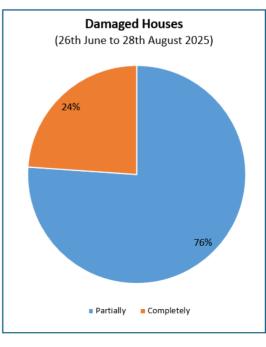


Gender wise detail (26th June to 28th August 2025)



Damaged Houses (26th June to 28th August 2025)





Source: National Disaster Management Authority (NDMA).

Annex B:

Health Sector Partner Response (other than WHO)

Mercy Corps	 Approved by HQ the procurement of 500 NFI kits, 500 hygiene kits, and 500 food baskets for distribution. TB screening camps across KP are being converted into general health camps in coordination with district health authorities to avoid duplications. Medicines are being delivered at doorsteps to TB patients missing follow-up visits. 		
DOPASI	Conducting active TB case finding in collaboration with DHO Kyamadi.		
Foundation	 Initiated medical camps in flood-affected areas; details to be shared in the next meeting. 		
UNICEF	 UNICEF is mobilizing an additional shipment of medicines, totaling approximately 6.5 tons. The consignment includes ORS, clean delivery kits, paracetamol, amoxicillin, newborn kits, doxycycline, cefixime, ibuprofen, salbutamol, and nystatin. 		
Pakistan Red Crescent Society (PRCS)	 Deployed 2 Mobile Health Units (MHUs) in Buner (1 short-term, 1 for 3 months under IFRC funding ~1M Swiss Francs). Planned deployment of MHUs in 7 districts (KP: Buner, Lower Dir, Swat GB: Skardu, Ghizer PAK: Neelum, Muzaffarabad). Services include PHC, health promotion, disease prevention, MHPSS (male & female PFA officers). Distributions: 7,500 cooked food parcels, 5,200 water bottles, hygiene kits, jerry cans, safe delivery kits, and dignity kits. 1 water treatment plant (WTP) operational in Buner; 3 more in pipeline; total 23 WTPs available nationwide. Volunteer training on MHPSS, epidemic control, and RCCE ongoing. 		
Nation Nageh Sangar	 Supporting response in KP and Punjab in coordination with DG Health KP. Deploying 2 medical health units for 2 months (starting this week). Providing medicines, MHPSS services, and nutrition support (1,000 RUTF cartons). Distribution planned: 275 hygiene kits, 275 shelter kits, 500 dignity kits. Water supply interventions: water trucking, rehabilitation of water sources, and construction of emergency latrines. 		
Helping Hand for Relief and Development (HHRD)	 HHRD's Emergency Relief program has provided Medical Assistance to 3,659 individuals, as well as 200 Hygiene Kits and bottles of drinking water at Punjab (Chakwal & Rawalpindi) and Khyber Pakhtunkhwa (Buner, Swat & Mansehra). The total beneficiaries are 36,340. 16 free medical camps conducted in flood-affected areas. 		
Islamic Relief Pakistan	 Islamic Relief conducted a Rapid Needs Assessment in 3 districts of Khyber Pakhtunkhwa, including Buner, Swat and Shangla. According to the RNA, nearly 72% of health facilities in Buner and 65% in Swat have been either completely damaged or rendered partially functional, while approximately 58% of basic health units in Shangla also compromised. 		
Muslim Hands	 Muslim Hands, with a donation from FCDO-UKAID, implemented emergency activities related to health, including 30 mobile medical camps and the distribution of 500 Hygiene and dignity kits. 		
Action Against Hunger	 Two temporary health units established for two months, staffed with doctors, LHV, dispenser, and psychologist, providing primary, maternal/child health and psychosocial services. 1,000 cartons of RUTF supplied for malnourished children: one staff member supported the Nutrition Information System in Buner. Safe drinking water provision, rehabilitation of water sources, construction of emergency latrines, and AquaTabs provided to 275 families. Dignity/MHM kits for 500 women, hygiene kits and mosquito nets for 275 families, and kitchen sets for 100 families. 		
International Federation Red Cross and Red Crescent Societies (IFRC).	 Deployment of two Mobile Health Units (MHUs) in GB, two in PAK, and one in Buner, in addition to Cash for Health assistance to the P&L women. Currently assessing the situation; potential for a scaled-up operation if conditions worsen. Preparing community volunteer training packages (lay counsellors, PFA, RCCE). 		