

# PROGRAMME UPDATE



International Federation of Red Cross and Red Crescent Societies  
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge  
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja  
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

## AFGHANISTAN

27 September 2001

*This Programme Update is intended for reporting on Annual Appeals.*

*Appeal No. 01.34/2001*

*Appeal Target CHF 7,819,724*

*Programme Update No. 3 Period covered: 01 July - 20 September, 2001 (Programme Update No. 2 issued on 27 August 2001, covering 1 April - 30 June; Programme Update 1 issued on 28 June 2001 covering 1 January - 31 March.*

### “At a Glance”

*Appeal coverage: 39.3%*

*Related Appeals: South Asia Regional Programmes (01.33/01)*

*Outstanding needs: CHF 4,744,166*

*The current climate of uncertainty has cast doubt over Federation programmes in the immediate future but the Afghan Red Crescent Society continues to provide daily support to vulnerable people as well as liaising with the Federation. The ARCS's networks of health clinics, CBFA volunteers, TBAs, and mobile health teams will be a vital support for vulnerable people whose situation could soon deteriorate even further. Funding of health programmes at this time would be particularly helpful. The Federation has also faced great difficulties in finding experienced delegates for several vacant posts in the Afghanistan Delegation*

### **Operational Developments:**

In the aftermath of the 11 September tragedy in the U.S., thousands of Afghans, fearing a conflict situation, are reported to be leaving the major cities. Many are heading for the safety of smaller villages in rural areas, while thousands more are thought to be heading for the border crossing points with neighbouring Pakistan and Iran.

Given the current humanitarian situation in Afghanistan where hundreds of thousands are internally displaced and lacking in basic food security, some analysts are predicting that more than one million refugees may cross into Pakistan and other neighbouring countries in the coming weeks. As a security precaution, humanitarian agencies, including the UN, the ICRC, the Federation, and NGO's, have asked their international staff to leave Afghanistan temporarily. As soon as the security situation permits, Federation delegates will return to their duty stations. The Federation is seriously concerned about the effects of the reduction of humanitarian activities. Current events have also halted most Federation-supported activities in Afghanistan. However, national staff are keeping National Society and Federation offices open as well as maintaining daily contact with the Secretariat. As of 20 September over 15 Afghan Red Crescent Society (ARCS) clinics remained operational. Red Crescent

staff continued to treat patients on a daily basis in the central, western and northern regions, as well as the capital Kabul. No information was available yet as to whether clinics are open in other areas since no field trips are possible. ARCS trained volunteers will continue to use their acquired skills to provide first aid in their communities.

The Federation has withdrawn all expatriate delegates from Afghanistan temporarily, and they remain in their home countries on standby. The HoD was in Geneva last week for debriefings and consultation.

The effect of the recent events, as well as the death of Northern Alliance main commander, Ahmad Shah Masood, and reported increased lawlessness in Kabul, and the overall situation is still uncertain.

Early August, Taliban authorities detained eight foreign and 16 Afghan aid workers from the German based Shelter Now International for allegedly spreading Christianity, considered a serious crime and punishable by death under Taliban rule. Later in August, the Taliban asked all foreign aid workers of 'the International Assistance Mission' and 'SERVE' to leave Afghanistan, stating they were suspected also of proselytising Christianity.

A revision of the 2001 Annual Appeal budget was almost completed but could not be finalised due to the current situation. This revision would reflect the changes made to some of the planned activities, mostly due to insufficient donor commitments.

## ***Disaster Response***

### **Objective 1 - to further monitor the impact of the drought**

#### *Nutritional surveillance - southern/southwestern region*

During the period, only one mobile health team operating in two districts in Nimrooz has conducted nutritional screening of children presented to the team by applying MUAC (Mid Upper Arm Circumference measurement). The results found in two districts were: 3.9% severe malnutrition among 733 children in Dela Ram and 1% of 199 children in Ghurghuri.

#### *Recruitment and training of community based first aid volunteers*

In the period, ARCS recruited 61 volunteers from 7 districts in Ghor, Nimrooz, Helmand, Uruzgan and Zabul provinces. All volunteers received training in health education, water and sanitation, first aid, disaster preparedness, the ARCS and the International Red Cross and Red Crescent Movement. By the end of August, the total number of volunteers trained under the emergency programme reached 1,217 from 34 districts, or 85% of the target.

### **Objective number 2 - to provide preventive and curative community health care to vulnerable communities, especially women and children, in the drought stricken areas**

Following the various reviews of the drought programme and discussions on modifications, most activities were temporarily halted from mid-July until mid-August. Only one mobile health team continued its activities in Nimrooz. In this period, new health staff were recruited, in line with the modifications agreed upon with the ARCS.

As from mid-August, the team members participated in two important training workshops in line with the revised focus of the project, i.e. more emphasis on preventive activities. A two-day training was conducted on 18 and 19 August to familiarise all teams members on preventive activities, standardised diagnostics and treatments, weight-for-height measurement techniques and data collection. From end August through 4 September, the teams completed a workshop on the Expanded Programme of Immunisation (EPI) component conducted jointly with REMT, UNICEF and WHO.

This latter workshop had to be postponed due to the regional immunisation days against polio in the southern region, in which all teams participated from 21 through 23 August. The teams monitored the polio immunisation

activities in six districts in Kandahar and five districts Helmand province. The Kandahar mobile team carried out a three-day EPI campaign from 15 - 17 August among internally displaced in Regwa and Panjwai districts, where the team vaccinated 75 children and 15 women.

Due to the delays in obtaining clearance for the necessary cold chain logistics and vaccines for the immunisation component, the teams had to postpone their departure to the agreed project sites. Eventually, the teams left after the EPI workshop early September without vaccination tools, and were scheduled to remain in the field for only one week. Afterwards it was hoped that the tools needed for the vaccination activities would be received and the teams could start work in their originally assigned areas in Helmand, Kandahar, Zabul, Nimrooz and Uruzgan.

In August, the mobile team in Nimrooz responded together with the Ministry of Public Health and WHO for a week to an acute diarrhoea outbreak in Gulran district in Herat province. The team treated 150 patients, including three suspected cases of cholera.

Finally, ARCS CBFA volunteers handled 1,482 first aid cases during July and August.

Cumulative results of the mobile health teams' activities are:

- \* 7,175 children and 1,638 women have been vaccinated;
- \* 59,449 children under five were vaccinated against polio by 223 ARCS volunteers;
- \* 30,002 attendees received health education in group sessions and 14,780 persons individually, 76% of all patients;
- \* 10,777 people received health education from ARCS volunteers on preparing ORS, basic health, and water & sanitation;
- \* 58,206 patients have been treated by the five mobile health teams, well over the initial target of 35,000;
- \* ARCS CBFA volunteers handled 5,036 first aid cases.

#### *Supplementary feeding*

The Federation concludes that an immediate supplementary feeding programme is necessary in Shamulzai district, Zabul province, to address the evolving nutritional crisis there. The conclusion is based on: further analysis of malnutrition data obtained by the ARCS/Federation mobile health teams in May/June 2001; preliminary feedback from an OXFAM food security assessment in the district that confirmed the bad situation; the World Food Program decision to stop free food distribution in the district (although maintaining its support for OXFAM's food for assets creation schemes); and the fact that no other agencies are operating or planning to initiate needed food support in the area.

In this district, the Federation/ARCS recorded severe malnutrition in May/June - the average was 8.6% (166/1,923 with MUAC under 11 cms). As well, 1.4% of the sample group recorded oedema (in some villages up to 18% of the children). The sample group from 66 villages included 1,923 children under five, who were screened during a mass immunisation against measles (see Programme Update 2).

However, no concrete activities were started due to lack of human resources and logistical means. Due to the recent developments and the withdrawal of all foreign staff, these activities as well as those of the mobile health teams have been put on hold, as have many other drought related health activities. This will increase the risk facing vulnerable people.

#### **Objective 3 - to provide access to safe drinking water and sanitation facilities**

From 1 July to 10 September, 18 bore-holes were finished, bringing the total since the beginning of the project to 58 bore-holes and 2 shallow wells, including installation of hand pumps. The project currently offers safe drinking water for 1,520 families, or 9,125 individuals, in 34 villages in Farah and Kandahar provinces (50% of the initial target). Five drilling teams were operating.

During the same period, an additional 12 latrines have been rehabilitated in Kandahar city, bringing the total to 23. The low implementation rate is due to various complications, including problems to obtain written authorisation from the local authorities.

Ongoing monitoring indicated that three bore-holes were not operational, a failure rate of 7% which is within acceptable limits. The reasons are lack of commitment of the community mechanic as well as indiscriminate drilling for irrigation, lowering the aquifer of the bore-holes used for water for human consumption.

To check water quality, samples were taken during July and sent to the WHO in Islamabad for tests. Tentative results in August showed high lead and iron contents, and further examinations are needed. Equipment to regularly measure PH levels and conductivity has been purchased. The project engineers also study reference materials received from Bangladesh related to arsenic poisoning.

Security and failing coordination among the various Afghan and international agencies and authorities are among the constraints that slowed the implementation of the project. Also, soil conditions vary significantly in the different project sites, especially in Kandahar province where drilling is difficult due to hard rock strata or collapsing soils. Proper geological data is not available. At five sites drilling activities were stopped at 3.5 - 8 meters.

#### **Objective 4 - to set up stockpiles of emergency shelter materials in the event of drought related displacements**

The conditions of displaced populations have been continuously monitored by the Federation's staff in Herat, Kandahar, and Mazar-i-Sharif. No other activities have been carried out for this objective. Within the Disaster Preparedness Programme sufficient stocks are available for an initial response, if deemed necessary.

#### **Objective 5 - to develop - and reorient if necessary- further assistance strategies or phase out the emergency response activities**

As the effects of the drought continue, the ICRC, ARCS and Federation have agreed to continue the project after the deadline of 30 June for another year. Modifications to certain activities, especially the mobile health teams, are in progress. A stronger emphasis on prevention and the integration of the three components - mobile health teams, CBFA and water and sanitation - will be pursued.

### ***Disaster Preparedness***

#### **Objective 1 - to strengthen the managerial, administrative and human resource capacity of ARCS disaster preparedness structures at headquarters and regional levels.**

During three days in August, ARCS regional DP supervisors and the Federation's DP delegate and officers met in Kabul to discuss and draw up objectives and activities for 2002 and 2003 to be included in the Annual Appeal. The meeting agreed to emphasise preparation of a DP plan and conduct training. Prepositioning of stock will remain at the current levels, mostly to avoid high store keeping costs.

Normal administrative running costs and salary support was provided during the reporting period.

#### **Objective 2 - to develop a disaster preparedness plan and an efficient response capacity**

The DP supervisor in Herat established the second ARCS DP Task Force this year, with representatives from the Movement's three components - in addition to the one in Jalalabad formed in May. Further, in Jalalabad and Herat, ARCS established Emergency Rescue teams comprising 15 ARCS volunteers. These volunteers, who already received basic training on DP through the CBFA programme, are scheduled for further training in the specific tasks they will have as members of the rescue teams.

At the DP supervisors meeting, the second drafts of regional DP plans were shared and discussed and the results will be translated into a next generation of regional DP plans, ensuring consistency at countrywide level.

Several discussions were held on the previously submitted proposal for the renovation of the ARCS warehouse to gradually allow transfer of responsibility of DP stock management to ARCS (presently, all DP stocks are kept in

Federation rented stores). The Federation's engineer also assessed the proposal from a technical point of view. Eventually, it has been agreed upon that the Federation will provide the funds for all material needed, while ARCS will cover the labour. The intention is for the works to be completed this year.

In July, 500 tents were ordered in a joint procurement with the ICRC. The stock is of a similar standard to enable mutual exchange. It has been decided that no more relief stocks will be prepositioned and thus procured because of insufficient funds, satisfactory current stock levels, and a desire to prevent storage costs from rising.

From 28-30 August, the Federation's DP delegate participated in a three-day workshop on the *SPHERE* project organised by the International Rescue Committee (IRC) and attended by representatives from various NGOs.

No further workshops or training have been held, but were scheduled for September and following months.

**Objective 3 - to raise awareness on the issue of sustainability with the ARCS and work with the community to develop and mobilise local resources for disaster preparedness and the disaster plan.**

No activities during this reporting period.

## ***Health and Care***

### **Basic Health Care (Clinic Support) Component.**

A total of **1,216,000 health services** were provided from 1 January to 31 August. It should be noted that this figure and those below contain data from an average of 40 of the 48 ARCS clinics only.

**Objective 1 - To prevent outbreaks of communicable and preventable diseases through preventive health care services such as vaccination, health education and the routine collection of epidemiological data.**

Based on the Health Information System (HIS) data received, the health education sessions conducted at the ARCS clinics recorded 273,707 participants in groups and 98,600 in individual sessions. Health education is mostly given on common health problems, hygiene, sanitation and immunisation. Regular health data collection has been performed, but the data from only 40 clinics was received or processed by 10 September.

**Objective 2 - To reduce morbidity and mortality in the community through the provision of curative services such as case management on an outpatient basis, early diagnosis and early treatment, basic laboratory services and distribution of medicines.**

A total of 568,074 consultations and cases treated were recorded by the ARCS clinics that had submitted the HIS reports by early September, while 6,976 complicated cases were referred to hospitals. Around 340 medical kits were distributed since the beginning of 2001.

Since 1 January, 23,594 laboratory tests have been performed at the clinics. No further progress has been made for the remaining four laboratory facilities planned for 2001.

**Objective 3 - To maintain and strengthen ARCS primary health care capacity and to reinforce its programme management skills.**

Clinic running cost, staff incentives and basic medical supplies have been provided throughout the period to the clinics. Renovation work for five clinics is still in progress.

An international order was placed for an additional 500 medical kits in July, but the final shipment to Afghanistan has been temporarily halted due to the present circumstances.

Finally, in July and August various discussions were held with ARCS counterparts for the 2002-2003 Annual Appeal.

**Objective 4 - To increase the quality of services through advanced training of health staff.**

From 7 to 12 July, a four-day seminar was organised for female health educators from various clinics in the central and southern regions. Two male doctors from Logar and Wardak clinics attended a two-day training on Acute Flaccid Paralysis Surveillance, organised in collaboration with WHO. A similar one-day, training was attended by eight female doctors from Kabul's eight clinics end July, and at the end of August one nurse from Bamyan clinic received this training.

In collaboration with WHO, two male and eight female doctors from ARCS Kabul clinic participated in a two-day workshop on Control of Diarrhoeal Diseases from 21-22 July. Two male and eight female health educators from the same clinics subsequently received the training on 25 and 26 July.

**Maternal and Child Health Care Component**

**Objective 5 - To gradually develop and strengthen the maternal and child health component in the ARCS clinic network, with emphasis on disease prevention, health promotion, birth spacing and the promotion of reproductive health.**

*Community Based Reproductive Health component:* No data for the period could be obtained on the activities by ARCS trained Traditional Birth Attendants (TBAs) in four regions. Until 1 July, they conducted 2,545 deliveries (an average 150 TBAs per month), distributed 1,330 clean delivery kits, referred 96 risk cases and provided routine health education in their community. No TBA training was conducted during July and August.

*Clinic Based Reproductive Health component:* From 14-16 July, 13 midwives from ARCS central region clinics and those located in Badakhshan and Kandahar attended a three-day workshop on "Counselling on Maternal and Child Health Care (MCH) and Family Planning (FP), while nine female health educators from ARCS clinics in the central region were trained later.

Eight female dressing nurses attended a two-day workshop on the MCH concept and dressing from 26 and 27 August in Kabul.

*Immunisation:* Since 1 January, ARCS clinics provided 60,173 treatments to pregnant and non-pregnant mothers and 153,506 doses of different vaccines to children. Further, 9,798 children received Vitamin A since 1 January at the ARCS clinics, while another 36,783 children were given Vitamin A during the 2001 spring National Immunisation Days.

*Ante/post natal care and growth monitoring:* During the period, ARCS clinics reported 3,918 ante and post natal care services (for 1,696 pregnant women) although data was only received from an average of 15 clinics (out of the 20 clinics providing these services). 12,974 of such services have been provided to 6,216 pregnant women. Further, ARCS clinics provided 5,339 growth monitoring services for 3,343 children, with data received from an average of 15 clinics only (out of 20 clinics providing these services). Year-to-date 13,804 growth monitoring services have been provided to 9,099 children.

It should be noted that the new reporting formats for the different MCH components have been in use. Implementation of the new HIS forms is slower than predicted and all data has not been received in time. Other unreliable data has been excluded.

**Community Based First Aid Component**

**Objective 6 - To expand the network of trained, equipped and motivated volunteers in about 8,000 villages in Afghanistan and to assist them to carry out community and referral services (2001 and 2002).**

A total of 518 volunteers, covering 459 villages in 11 districts, were trained from 1 July through 31 August. Since the beginning of the year, a total of 1,983 volunteers have been recruited and trained, representing 79% of

the annual target of 2,500 volunteers. This period's round of training has expanded the countrywide network of ARCS volunteers to 8,172 in 85 districts or 14 provinces in all regions in Afghanistan. Each new volunteer received a First Aid bag and a Dari or Pashtu CBFA Manual after their training was completed.

ARCS regional supervisors and trainers met, on average, with 245 volunteer teams and district leaders of as many volunteer groups in each month. At these meetings, trainers and supervisors briefed the group leaders on volunteer activity reporting, and gave a variety of refresher courses. It should be noted that trainers should meet monthly with each volunteer team leader. In both July and August 66% of the target was achieved.

In July, follow-up meetings by trainers for volunteers were held with 137 volunteer groups in all regions, representing 107% of the target. In these meetings 2,434 volunteers participated, or 78% of the original trained number of volunteers in these groups. In August, such follow-up meetings were held with 204 volunteer groups or 3,590 volunteers, respectively 159% and 79% of the targets. During these follow-up meetings first aid bags were refilled, reports collected, while refresher courses were given on topics such as malaria, diarrhoea, malnutrition, preparation of ORS, sunburns and bleeding.

During the period, first aid competitions - aiming to motivate volunteers - continued at group, district and provincial levels. Since the beginning of the competitions in April, 3,858 volunteers from 252 groups or 52 districts participated in the first round. Second round competitions involved 2,753 volunteers from 41 districts.

One three-day volunteer team leader workshop was held in Kabul region with all 34 volunteer team leaders from 7 districts in Logar and Wardak provinces. These workshops, facilitated by Federation and ARCS programme staff and the ICRC dissemination officer, covered topics such as volunteerism, programme description, activity planning, reporting, follow-up procedures and a selected number of practical First Aid issues.

During the period, ARCS volunteers trained another 111 male and 114 female volunteers. For the first time since volunteers started to train relatives, these new recruits have been evaluated by the CBFA trainers. In the period 166 persons were evaluated of whom 135 passed successfully and are now officially recognised as ARCS volunteers.

According to the activity reports received during this reporting period, ARCS volunteers handled 54,621 cases, varying from the provision of first aid, referral to hospitals/other health facilities to providing advice. Most of the cases reported include wounds care, diarrhoea, bleeding, burns, fractures, and animal bites. Since the beginning of the year, volunteers handled 96,280 cases in total. However, the total number of cases is not as high as expected mainly due to the inability to collect the reports from all the regions.

Aiming to improve the community's understanding of health issues and increasing hygienic behaviour, ARCS volunteers disseminated the importance of safe drinking water, hygiene and vaccination, how to prevent diarrhoea, how to prepare ORS, and first aid to 93,867 individuals in July and August as well as holding mine-awareness sessions.

In the northern, eastern and central regions, volunteers were also engaged in various other activities such as road repair, building of bridges, digging wells and constructing latrines, some of these activities were under assistance schemes of non-governmental organisations and some were voluntary.

Based on additional reports received in July and August from the CBFA volunteers on their participation in the spring National Immunisation Days against polio, the revised figures indicate that 1,413 volunteers vaccinated 228,401 children under five years of age against polio in all regions and participated in mobilising more women and children during the campaign.

During the period, 7 ARCS booths were established bringing the total to 62 in the five regions. In general, these ARCS booths are used as village centres for providing first aid, conducting health education sessions and dissemination.

In view of projected funding shortfalls, it has become necessary to reduce the recruitment and training of new volunteers but focus instead on follow-up activities of existing volunteers. Consequently, budgets for training as

well as cost for first aid bags will be reduced. An additional reason for limiting planned training is that ARCS management capacity needs strengthening first as it currently risks failing to provide sufficient support and supervision.

### **Youth Component**

#### **Objective 7 - To expand the number of trained and equipped teacher volunteers and school youth.**

In July, 20 volunteer teachers from 10 schools were trained and recruited in Badghis province. During August, an additional 54 new volunteer teachers from 30 schools were trained and recruited in Kabul and Mazar-i-Sharif. Since the beginning of 2001, a total of 74 new volunteer teachers have been recruited and trained from 50 schools, where 1,067 new volunteer students have been identified.

The total number of schools participating in the programme since 1999 is 115, with 235 volunteer teachers and 2,875 students. Seven schools in Kabul that were included in the programme in 1999 could unfortunately not continue ARCS Youth activities for various reasons.

ARCS youth department staff paid monitoring visits to all 47 schools in Kabul and the 17 schools in Mazar-i-Sharif and organised meetings follow-up with all teachers. The volunteer teachers and the youth provided first aid to 1,172 people in Mazar and Kabul.

The Federation's CBFA delegate and field officer, together with the ARCS head of youth department, monitored activities in Mazar-i-Sharif, and Federation's field officer visited Herat for the same purpose.

### ***Institutional and Resource Development***

#### **Objective 1 - to raise awareness about the Fundamental Principles of the International Red Cross and Red Crescent Movement among ARCS staff and public.**

Due to funding shortfalls, scheduled National Society Leadership workshops for the eastern and western regions have been postponed and may even be cancelled if sufficient contributions are not received. Instead, Federation ID field officers and ARCS ID unit headquarters staff have been travelling to ARCS branches in the western region to follow up on progress made and to discuss any problems arising.

#### **Objective 2 - to strengthen ARCS staff management skills in planning, organising, directing and controlling with special focus on: strategic/operational planning, project management, financial accounting, reporting, self-assessment, evaluation and language/computer skills.**

Following an ARCS Strategic Planning (SP) and Country Assistance Strategy (CAS) workshop early June a report has been made and circulated to participants and other stakeholders. The scheduled visit by the Federation's regional ID delegate based in Sri Lanka, in October, to conduct a follow-up on the SP and CAS workshop and reports is now in doubt because of the current situation.

The ARCS has liaised with its sister national societies in the region to prepare the agenda for a regional Secretary Generals' meeting planned in Kabul for early October. The ARCS, ICRC and Federation also began various other preparations. However, because of the current situation, it is expected that the meeting cannot be held in Afghanistan.

During August, the ARCS commission, ICRC cooperation and Federation ID departments held several planning meetings for the new 2002 programme and general support agreements. Additionally, first discussions have been initiated on a revised method for ICRC and Federation support for ARCS core structure. The aim is to continue such support, but in the form of a service charge which will be (partly) subject to programme volume and will be more efficient and less time-consuming.

#### **Objective 3 - to improve ARCS capacity to approach and promote self-reliance, by evaluating, replicating and expanding successful resource development strategies.**

No significant activities have been conducted during the period.

**Objective 4 - to develop ARCS institutional capacity and structure, focused on: (a) enhancing and promoting ARCS membership system, (b) promoting ARCS statutes, (c) optimising ARCS organisational structure, (d) developing a recruitment system, and (e) improving budgeting, accounting and financial systems in a limited number of branches.**

The Federation's Finance Development Officer visited several ARCS branches in the central region and northern region during the period to review the branches' financial systems and strengthen the branch accountants technical know-how and improve the branches' financial management systems.

Due to the poor financial status of the ID/RD programme, currently all financial management workshops are postponed.

### ***Coordination and Management***

At the end of July and during August, several meetings were held between the delegation's head, programme managers and finance/administration delegate to harmonise the annual appeal planning process and ensure consistency between the programmes and their objectives.

The Federation's head of delegation further attended the Regional Planning Meeting in New Delhi from 16-18 July, to harmonise the regional appeal planning as well as to plan with regional delegates their support for Afghanistan (visits to Afghanistan were planned for October by the Federation's regional ID, DP and health delegates).

The Finance and Administration manager visited Kandahar and Mazar-i-Sharif to provide technical assistance in the accounting and financial management of the two field offices there.

Weekly meetings between the Head of Delegation of both the ICRC and Federation continued throughout the period as normal. Further, the Federation's acting head of delegation attended the cooperation section of ICRC's 2002 planning for results meeting, in Kabul in July.

Especially at the regional level, the Federation's field delegates and staff continued to attend regional coordination meetings with other international non-governmental organisations and UN specialised agencies to ensure a complimentary approach and avoid duplication of activities.

In general, financial management and accounting of transactions has been carried out as planned. Donations with specific financial reporting requirements have been followed (UNFPA, Netherlands Red Cross/Netherlands Government). Finally, the logistics department provided its general required support to programmes, varying from procurement, storage to transportation.

### ***Outstanding needs***

It is difficult to foresee how programmes will continue in Afghanistan in the current climate of uncertainty. However, it is clear that the ARCS's networks of health clinics, CBFA volunteers, TBAs, and mobile health teams, will be invaluable for vulnerable people whose situation would worsen. Donors are encouraged to consider further funding of health programmes in Afghanistan.

Further, the Federation has faced great difficulties finding experienced delegates for several vacant posts in the Afghanistan Delegation. National Societies interested in providing human resources to Afghanistan positions are asked to contact the Desk Officer or Human Resources Department at the Secretariat so that expatriate staff can be mobilised as soon as the situation permits.

The deficit in delegate costs for the Drought Operation has been covered through reallocation from the South Asia Drought Appeal (direct costs of the Afghanistan Drought Operation have been funded by ICRC as the lead-agency for the International Red Cross and Red Crescent Movement in Afghanistan).

Depending on the developments in Afghanistan, the revision of Appeal 2001 for the rest of this year based on the realistic funding possibilities may be completed at a later stage.

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*All International Federation Operations seek to adhere to the Code of Conduct and are committed to the Humanitarian Charter and Minimum Standards in Disaster Response (SPHERE Project) in delivering assistance to the most vulnerable.*

*For further information concerning Federation operations in this or other countries, please access the Federation website at <http://www.ifrc.org>.*

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Afghanistan						ANNEX 1
APPEAL No. 01.34/2001		PLEDGES RECEIVED			25.09.2001	
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
<b>CASH</b>						
REQUESTED IN APPEAL CHF ----->				<b>7'819'724</b>		<b>TOTAL COVERAGE 39.3%</b>
CASH CARRIED FORWARD						
AUSTRALIAN - RC		2'028	AUD	1'820	07.08.2001	
GERMAN - GOVT/RC		566'655	DEM	437'911	15.08.2001	355 MEDICAL KITS TO 48 ARCS CLINICS
NETHERLANDS - GOVT		1'000'000	NLG	689'292	28.02.01	HEALTH CARE & DISASTER PREPAREDNESS
NORWEGIAN - GOVT/RC		2'640'000	NOK	497'109	03.05.2001	COORDINATION & MANAGEMENT, CBFA, ID, DP, HEALTH
SWEDISH - RC		900'000	SEK	156'330	28.02.01	PRIMARY HEALTH CARE /CBFA/ID
SWEDISH - RC		200'000	SEK	34'740	28.02.01	MANAGEMENT & COORDINATION INCL PART FUNDING OF HOD
SWEDISH - GOVT		3'000'000	SEK	509'700	21.05.2001	HEALTH & CARE, CLINIC SUPPORT
SWEDISH - GOVT		600'000	SEK	101'940	21.05.2001	CBFA
UNFPA /AFG/977/PO1		120'882	USD	207'095	20.04.2001	MATERNAL PHC
PRIVATE ON LINE DONATIONS		10	USD	16	06.02.2001	
SUB/TOTAL RECEIVED IN CASH				2'635'953	CHF	33.7%
<b>KIND AND SERVICES (INCLUDING PERSONNEL)</b>						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
Denmark	Delegate(s)			34'825		
Greece	Delegate(s)			49'610		
Japan	Delegate(s)			90'184		
Norway	Delegate(s)			49'445		
Sweden	Delegate(s)			59'958		
Switzerland	Delegate(s)			32'033		
USA	Delegate(s)			47'967		
UNFPA /AFG/977/PO1		44'118	USD	75'583	20.04.2001	REPRODUCTIVE HEALTH KITS
SUB/TOTAL RECEIVED IN KIND/SERVICES				439'605	CHF	5.6%
<b>ADDITIONAL TO APPEAL BUDGET</b>						
DONOR	CATEGORY	QUANTITY	UNIT	VALUE CHF	DATE	COMMENT
IRANIAN - RC		292'250'000	IRR	291'665	14.04.2001	OIL, SUGAR, PULSES, TEA, SOAP, SHOES, CLOTHES, BLANKETS
SUB/TOTAL RECEIVED				291'665	CHF	