IRAN: BAM EARTHQUAKE
(FOCUS ON REHABILITATION)
DECEMBER 2004 – FEBRUARY 2005

The Federation’s mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world’s largest humanitarian organization and its millions of volunteers are active in over 181 countries.

In Brief

Appeal No. 25/03; Operations Update No. 20; Period covered: 1 December 2004 to 28 February 2005; Appeal Coverage: 89.7 % (Please click here to go directly to the Contributions List)

Appeal history:
- Revised Appeal launched on 8 January 2004 for CHF 51,913,000 (USD 44,068,425 or EUR 33,445,680) to assist 210,000 beneficiaries for 6 – 8 months
- Revised Plan of Action presented on 29 September 2004, to reflect on-going programming into 2005, under the overall Emergency Appeal. A revised appeal budget for the period December 2003 to end December 2005 reflects the revised Plan of Action, and totalling to CHF 53,288,000 (USD 45,231,315 or EURO 34,324,335).

Operational Summary

Based on policy agreements made in January-April 2004, the Federation and Iranian Red Crescent Society (IRCS) have been focusing on addressing the needs for longer-term rehabilitation, reconstruction and IRCS capacity building.

The Federation and IRCS have reached an agreement on the implementation modality of the construction projects which are to be completed before the end of 2005. Relevant agreements have been signed between the Federation, IRCS, and two ministries of the Islamic Republic of Iran (namely the Ministry of Education and the Ministry of Health).

With the support of participating national societies (PNSs), the Federation has mobilised the resources sufficient to build 10 schools (including 5 primary, 3 lower-secondary and 2 high schools), one urban health centre and one road relief rescue base.

The implementation of the rehabilitation programme has begun. An architect/engineering company has been identified and contracted to provide consultant services and technical support for the full length of the operation. Pre-qualification, tender process, land allocation and setting cooperation mechanisms are in progress.

The IRCS field hospital that has been bridging gaps in health services in Bam is preparing for a final phase out. It is planned to terminate the hospital activities by the end of March 2005, in accordance with the decision jointly taken by IRCS, World Health Organisation (WHO), Ministry of Health (MoH) and Federation.
The replenishment of the IRCS disaster preparedness stock is in progress. All replenishment activities are expected to be concluded by the end of March. Disaster management training workshops are conducted according to the plan of action agreed upon.

Background

On the morning of 26 December 2003 at 05:28 (local time), a major earthquake measuring 6.5 on the Richter scale struck the city of Bam, Kerman Province, south-eastern Iran. According to the latest estimates regarding the worst earthquake to hit the country in more than a decade, more than 26,000 people were killed, approximately 30,000 injured (of which some 10,000 were evacuated out of the area).

Although the impact of the earthquake was limited to a relatively small area of about 16 km in radius, in Bam city more than 85 percent of the buildings were completely destroyed. The impact on the surrounding rural areas was also severe. The 2,500 year-old historic city of Bam, an internationally renowned heritage site in the centre of Bam, was almost completely destroyed.

<table>
<thead>
<tr>
<th>Impact</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>People killed</td>
<td>26,000</td>
</tr>
<tr>
<td>People injured</td>
<td>22,628</td>
</tr>
<tr>
<td>Houses destroyed beyond repair</td>
<td>25,000 (out of 29,500)</td>
</tr>
<tr>
<td>(Bam City and surrounding villages)</td>
<td></td>
</tr>
<tr>
<td>People affected (by loss of economic activity and damage to property and infrastructure)</td>
<td>200,000</td>
</tr>
<tr>
<td>Inhabitants in the most affected areas:</td>
<td></td>
</tr>
<tr>
<td>Bam town</td>
<td>90,000</td>
</tr>
<tr>
<td>Baravat</td>
<td>15,000</td>
</tr>
<tr>
<td>Surrounding villages</td>
<td>10,000</td>
</tr>
<tr>
<td>Homeless people (March, 2004)</td>
<td>45,000 people; in addition, 20,000 stayed with extended family and 10,000 more were hospitalized</td>
</tr>
<tr>
<td>Number of schools destroyed or unusable:</td>
<td></td>
</tr>
<tr>
<td>Bam City</td>
<td>93</td>
</tr>
<tr>
<td>Surrounding villages</td>
<td>38</td>
</tr>
</tbody>
</table>

Reports from the Ministry of Education indicate that all 131 schools in Bam and the surrounding villages, with a combined capacity of 32,843 students, were either destroyed or rendered unusable. While 64 schools survived the impact of the earthquake, none of these schools were usable.

Virtually, all major public buildings, including the district governor’s office were partially or completely damaged and tents had to be set up to conduct public affairs. A substantial number of local civil servants from professional and managerial cadres also died, thus making it a human resource tragedy for the local, district and provincial government. Local health facilities were rendered almost completely unusable with irreparable damage to buildings.
Objectives, activities and results

Rehabilitation and Reconstruction

Objective: In close cooperation with the Iranian Authorities and the IRCS, to contribute to the rehabilitation and reconstruction of the education, health and social infrastructure of Bam.

Rehabilitation and reconstruction are complex and time-consuming processes, which are linked to the involvement of many players of the society. In case of Bam, this process has been complex and time-consuming since the scale of destruction was overwhelming. Any capital construction preparation phase takes time as it involves land ownership, allocation issues, building permissions, project design and the construction itself. A private house construction programme managed by the Ministry of Housing and Housing Foundation of the Government is still in the phase of planning.

Involved in the Bam reconstruction are also United Nations (UN) agencies, including United Nations Development Programme (UNDP), United Nations Children’s Fund (UNICEF), World Health Organisation (WHO), and non-governmental organisations (NGOs) like the World Vision, Mercy Corps, ASB Germany, CARITAS, Handicap International, MERLIN, as well as national Red Cross societies of Germany, Spain, Switzerland, France, Italy, Japan, Republic of Korea. Today, most of the international NGOs and national Red Cross societies have left Bam.

The following agreements had been under discussion and negotiation since July 2004 and were finally signed in January – February 2005:

- General Agreement between the IRCS and Federation on the scope of the construction programme,
- Tripartite Agreement on School Construction Programme, between the IRCS, Ministry of Education and Federation,
- Agreement on Urban Health Centre construction between the Ministry of Health and Federation,
- Agreement for Relief Rescue Base (Capacity Building Project) between the IRCS and Federation.

Coordination and Monitoring

Coordination mechanism has been set by the IRCS and the International Federation in relation to the defined projects.

Joint monitoring body will be formed for the implementation period, comprising of representatives from concerned Ministries (Ministry of Education and Ministry of Health) in Tehran, Kerman-Bam Offices, Bam City Council, IRCS Construction Department, IRCS Local Branch, Task Force and Federation Office in Tehran and Bam. The programme requires maintaining a clear communication system between the parties and all parties will be kept informed and involved in the process of close cooperation.

The working relations with the state authorities in Tehran and Kerman province have been regular and balanced. The Federation is well recognized and authorities have high expectations. Task Force calls upon meetings every 45 days and as per necessity. In addition, the Bam City Council and Municipality personnel have been helpful during the process of construction sites’ allocation for Schools and Urban Health Centre.

Scope of the Construction Programme

School Construction Project:
The initial plan provided the construction of the ten standard schools. However, in the process of planning, the International Federation was requested to accommodate some specific requirements, namely to contribute to the reconstruction of the education facilities for the handicapped children and to participate in the establishment of the modern school complex which is intended to be the model for similar institutions in the country. The latter is to be implemented in close cooperation with United Nations Educational, Scientific and Cultural Organisation (UNESCO). The UNESCO contribution is related to the UNICEF concept of “Child friendly schools” and to an architectural concept respecting the close neighbouring historical city of Bam. The International Federation contribution will consist of the physical construction of the new educational complex.
a. General Standard Schools
There are three primary and two high schools to be constructed according to the Ministry of Education standard plans. The Consultant Architect/Engineer Company has been working on the adaptation of the plans for the five projects since the beginning of January 2005 and its work was completed by the beginning of March 2005. Pre-qualification of construction companies have been completed and short listed potential general contractors will be invited to tender for five schools in mid-March 2005. The implementation time frame for these capital construction projects will be 8-10 months.

b. Special Schools
One primary and two guidance schools for handicapped children are included in the School Construction Programme in response to the request of the Ministry of Education. The Ministry is in the process of developing adequate plans and maps for the projects. Tender for handicap schools are planned for the end of March 2005.

c. Inclusive Education, Bam Model School Complex:
The model educational complex will be located next to the Arg-e-Bam historical heritage. UNESCO, in cooperation with the Ministry of Education of Iran, facilitates introduction of the concept of the inclusive educational model, provides coordination for the project implementation and facilitates training of personnel.

The Federation’s role consists of building one primary and one lower-secondary type of school, whereas, the CARITAS builds one pre-school. An International Consultant/Advisor will be delegated to the Consultant/Architect-Engineer Company, contracted by the Federation, in order to produce architect plans and documentation. The planning process will take up to 1.5 months and is expected to be completed by the 31st of March, 2005. Construction of these two model schools is scheduled to be completed within 8 months.

2) Urban Health Centre Project
An agreement has been signed with the Ministry of Health and pre-qualification of the Construction Companies has been completed. The tender has been announced and the expected time to start the physical implementation is the beginning of April 2005. The construction phase is expected to be completed within 4-5 months.

3) Road Relief Rescue Base Project
The project planning phase has been completed The IRCS Construction Department is responsible for setting the operational plan of action for the construction. Relevant documentation has been produced by the consultant hired by the Federation.

At present, the co-funding needs are under discussion with the IRCS. The implementation time frame for this project, according to the IRCS, is 12 months from the moment a construction company is contracted for this operation.

**Health**

**Objective: Gaps in the health system between the emergency and long-term solutions are bridged through the IRCS referral hospital**

The IRCS field hospital has been an essential component of the Bam health care system, as to fill in the gaps between the emergency and the long-term solutions. The hospital, with the full support services required for qualified treatment of patients, is providing services for emergency cases at present.

The ERU hospital was deployed after the Bam earthquake (26th December, 2003) and was handed over to Iranian Red Crescent in April 2004. By August 2004, the field hospital was accommodated in 30 containers with a 60 bed capacity. In September 2004, IRCS began to accept only emergency cases for the inpatient treatment, and closed maternity and paediatrics. The out patients department sees 250-300 cases per day, and 4 ambulances are also attached. Due to the delay in the opening of the new Ministry of Health hospital, the IRCS and Federation have had to operate and finance the field hospital beyond what was initially planned. Current projections may see the opening of the Ministry of Health hospital facility in March-April 2005.
The Federation has continued financial support to the running costs of the IRCS Hospital, as well as general support to and monitoring of its activities. Phasing out of the IRCS Hospital and consequent relocation of the equipment, containers, etc. is considered to be an important logistics operation and will be supported by the Federation Offices in Tehran and Bam.

Joint regular meetings with the WHO, Ministry of Health, and IRCS helped the International Federation to bring further clarification on the intentions and clearly define the mandate of the IRCS Hospital and its operational timeframe. No financial contribution has been forthcoming from the Ministry of Health in spite of its promise.

In December 2004, a joint assessment of the hospital was conducted by a team of experts from the IRCS and the Federation. The assessment team recommended the hospital operation to be extended until the end of March 2005.

**Results of the Assessment:**
The IRCS container hospital in the city of Bam (population estimated at 100,000, including the surrounding villages) is currently fulfilling a critical role in meeting the emergency medical needs of the population. The hospital, operating at 24 beds (out of the maximum 60 bed) capacity and four ambulances with 115 staff, is housed in 30 containers and includes basic laboratory and radiology services. Currently, road traffic accidents make up the bulk of emergency admissions. The reputation and image of the IRCS and the hospital are very positive amongst the population and professionals. The IRCS has further plans to store this hospital as part of future disaster response challenges. Regrettably, most of the staff have come through a private firm and will leave upon the closure of the field hospital.

The WHO states that ‘significant health risks still prevail upon the population, caused by environmental threats regarding water, food, solid wastes, sewage systems, and inappropriate living conditions’.

Seizing operations prior to the opening of the new Ministry of Health hospital would leave the gap in secondary health care in Bam, thus, adversely affecting the health of the population. The current load of 250-300 visits/day to the IRCS hospital clinic, basic laboratory and radiology services, as well as ambulance transfers, would have to be absorbed by other clinics and hospitals. Those facilities are running at full capacity.

The new 96-bed Ministry of Health hospital is due to open in March 2005. The Ministry of Health has also contracted 70 beds from the private Aflatonian Hospital. This hospital is running near full capacity and offers only paediatric, neo-natal, surgery (CCU), and inpatient ward services. Clinics throughout Bam are functioning near full capacity and primarily refer cases to the private hospital, as the IRCS container hospital is viewed as an ‘emergency only facility’ as announced by IRCS in September 2004.

All operational health facilities still transfer critical cases on a daily basis to Kerman. An estimated 10 to 15 cases are sent from Bam to Kerman daily (head injuries and complicated orthopaedics), as Bam has no radiologists. A new maternity hospital has been operational with neo-natal services since January 2005 and a 15-bed pre-fabricated psychiatric hospital is operational too.

The joint assessment of the IRCS-Federation in December 2004 suggested that the IRCS hospital does not seize operations till handing over to the new Ministry of Health hospital. The summary of recommendations can be outlined as follows:

1. Maintain current operational status with focus on emergencies and out patients department (OPD).
2. Establish arrangements (numbers and types of cases) with Aflatonian Hospital for transfer of cases to IRCS hospital during high occupancy periods.
3. Focus on ambulance transfer to/from Kerman and training of ambulance medics and management/telecommunications (IRCS operates four ambulances and Ministry of Health operates two new ambulances).
4. To ensure that knowledge is not lost, use the hospital to train IRCS medical and non-medical teams on setting up, managing, and packing the container. This can also include improving the current set up, training team leaders from various provinces in Iran, training water/sanitation emergency response unit (ERU), and a systematic re-packing plan that can ensure rapid future deployment within 24 hours. Terms of Reference, operational plans and standard operating procedures can be developed during this period.
5. Contractual arrangements with Ministry of Health to include financial commitment, clear handover of health services date, and defined role of IRCS hospital.
While the IRCS does not provide hospital care in Iran, it has a specific mandate for the disaster situations. The experience gained through the one year operation from a tent ERU hospital to the current container format has raised the capacity of IRCS and its future readiness to deploy an emergency hospital nationally within 24 hours.

**Table 2 Statistics of activities of the IRCS field hospital in Bam**

<table>
<thead>
<tr>
<th>Statistics of Wards</th>
<th>November (15-30)</th>
<th>December</th>
<th>January</th>
<th>February (1-25)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below 5 years old</td>
<td>156</td>
<td>359</td>
<td>537</td>
<td>421</td>
<td>1,473</td>
</tr>
<tr>
<td>Total registration</td>
<td>2,181</td>
<td>5,266</td>
<td>6,910</td>
<td>5,787</td>
<td>20,144</td>
</tr>
<tr>
<td>Morning statistics of wards</td>
<td>63</td>
<td>136</td>
<td>279</td>
<td>242</td>
<td>720</td>
</tr>
<tr>
<td>Registration of wards</td>
<td>29</td>
<td>57</td>
<td>109</td>
<td>77</td>
<td>272</td>
</tr>
<tr>
<td>Discharging ward patients</td>
<td>28</td>
<td>53</td>
<td>96</td>
<td>81</td>
<td>258</td>
</tr>
<tr>
<td>Operation</td>
<td>5</td>
<td>8</td>
<td>10</td>
<td>20</td>
<td>43</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>985</td>
<td>3,337</td>
<td>5,114</td>
<td>4,918</td>
<td>14,354</td>
</tr>
<tr>
<td>Emergency ward registration</td>
<td>1,057</td>
<td>2,113</td>
<td>2,228</td>
<td>1,679</td>
<td>7,077</td>
</tr>
<tr>
<td>Out patient registration</td>
<td>1,321</td>
<td>3,163</td>
<td>4,609</td>
<td>4,108</td>
<td>13,201</td>
</tr>
<tr>
<td>X-Ray</td>
<td>569</td>
<td>892</td>
<td>1,256</td>
<td>1,172</td>
<td>3,889</td>
</tr>
<tr>
<td>Laboratory</td>
<td>526</td>
<td>1,239</td>
<td>1,632</td>
<td>1,168</td>
<td>4,565</td>
</tr>
<tr>
<td>Mortality</td>
<td>1</td>
<td>4</td>
<td>1</td>
<td>5</td>
<td>11</td>
</tr>
<tr>
<td>Transfer from wards</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>Transfer from Emergency ward</td>
<td>32</td>
<td>45</td>
<td>3</td>
<td>0</td>
<td>80</td>
</tr>
<tr>
<td>Orthopaedics</td>
<td>0</td>
<td>0</td>
<td>57</td>
<td>0</td>
<td>57</td>
</tr>
<tr>
<td>Out patient operation</td>
<td>0</td>
<td>0</td>
<td>317</td>
<td>285</td>
<td>602</td>
</tr>
<tr>
<td>Transfer to Kerman</td>
<td>0</td>
<td>0</td>
<td>20</td>
<td>45</td>
<td>65</td>
</tr>
</tbody>
</table>

**Objective: The suffering and risks for development of severe trauma of 20,000 quake survivors are reduced.**

The Psycho-social Support Programme (PSP) played an important role in reducing the suffering and trauma of earthquake survivors. Various PSP courses in Bam such as drawing, computer, embroidery, toy making and other classes are going on. The programme provided the IRCS with an opportunity to develop its PSP capacity, with the technical support of the Danish/Icelandic Red Cross\(^1\) and Italian Red Cross\(^2\). With this experience, the IRCS deployed 5 psychosocial support teams in Zarand immediately following the earthquake on 22 February 2005 and provided necessary psychosocial support to the traumatized people. The PSP programme for Zarand earthquake is now extending its activities by organizing tent to tent visits, building the confidence of the affected population, and inviting the most affected persons visited to come to individual and/or group sessions in the tented PSP centers. On 28 February, the IRCS managers met in Tehran in regards to the PSP developments for Zarand earthquake and an eventual international cooperation project proposal.

The Federation Delegation and the IRCS are working together to extend PSP to other provinces. They have already held a series of discussions on this issue, particularly on integrating the PSP with the overall Disaster Management (DM) activities, and agreed to take a step-by-step approach. As the first step to this end, a PSP session has been included in the five disaster management (DM) and Community Based First Aid (CBFA) training workshops held in November 2004-January 2005. Dr. Hamed Farsad, Head of the Psychosocial Training Department of the Relief and Rescue Organization of the IRCS, and his team made the presentation on ways of psychosocial support and their uses in different circumstances and facilitated group discussions by using different case studies.

\(^1\) The bilateral IRCS-Danish/Icelandic Red Cross PSP project in Bam is ending in the course of March. This project has been managed by the national IRCS PSP team and the responsibility will be handed over to the IRCS Provincial branch and to the IRCS branch in Bam. Currently, an extension of the programme for a period of six months is secured. The IRCS PSP national team will supervise the activities, and is advising to run the PSP programme in Bam for another 12 months. The PSP team in Bam will also be part of the IRCS programme of deployment of psychologists from each region, to eventual disaster sites.

\(^2\) The bilateral IRCS-Italian Red Cross PSP programme has ended on 28 February 2005. An extension of one month has been requested by the Italian Red Cross and has been agreed verbally by the IRCS.
During the visit to Iran by a regional psychological consultant from the Danish Red Cross, the Delegation discussed with her various issues concerning the expansion of the PSP beyond Bam, in particular in Khorasan, Kerman and Sistan-Baluchestan Provinces, where PSP is supposed to be implemented as part of the project funded by the Capacity Building Fund (CBF) and aimed at increasing women’s role in Red Crescent activities.

As of December 2004, the number of psychologists working in Bam has been reduced from 25 to 12, therefore, the activities have been adapted accordingly. In addition, during this reporting period, the number of individual counselling has been increased and the number of group counselling has been reduced.

### Table 3 IRCS PSP activities in Bam

<table>
<thead>
<tr>
<th></th>
<th>Dec 04</th>
<th>Jan 05</th>
<th>Feb 05</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counselling patients</td>
<td>187</td>
<td>781</td>
<td>162</td>
<td>Individual and group sessions. At the occasion of the anniversary of the disaster, 100 psychotherapists came during four days from the IRCS Provincial PSP teams and worked with 46 groups of four to six patients.</td>
</tr>
<tr>
<td>Play-therapy children</td>
<td>70</td>
<td>70</td>
<td>70</td>
<td>Sessions for children suffering from agressiveness, hyperactivity e.t.c. Different beneficiaries / month were selected. Some children attended sessions up to six weeks and some children were referred to Social activities.</td>
</tr>
<tr>
<td>Support in camps (Beneficiaries)</td>
<td>198</td>
<td>200</td>
<td>193</td>
<td>Activities in prefabricated camps hosting earthquake victims.</td>
</tr>
<tr>
<td>Social workers (Beneficiaries)</td>
<td>19</td>
<td>23</td>
<td>16</td>
<td>Home visits from social workers including assistance to job research.</td>
</tr>
<tr>
<td>Drug addiction (Beneficiaries)</td>
<td>10</td>
<td>8</td>
<td>6</td>
<td>Major need in Bam sensitive issue.</td>
</tr>
<tr>
<td>Debriefing for psychotherapists sessions</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>As standard PSP procedure, the Psychotherapists have two debriefing sessions per month.</td>
</tr>
<tr>
<td>Training of staff sessions</td>
<td>2 (2x4hours)</td>
<td>6 (6x2hours)</td>
<td>4 (4x4hours)</td>
<td>Training sessions chaired by an IRCS PSP specialist or by a consultant</td>
</tr>
<tr>
<td>Social activities</td>
<td>562 females 38 males 600</td>
<td>602 females 80 males 682</td>
<td>590 females 72 males 662</td>
<td>11 different activities. Different beneficiaries each month with exception according to individual beneficiaries’ needs</td>
</tr>
<tr>
<td>Sub-totals</td>
<td>1,084</td>
<td>1,764</td>
<td>1,109</td>
<td></td>
</tr>
<tr>
<td>Total beneficiaries during reporting period</td>
<td>3,957</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Disaster Preparedness and Capacity Building

**Overall Objective:** The IRCS capacity in disaster management has been strengthened at all levels.

Based on the priority items listed by the IRCS for replenishment, the Logistics Department in Geneva has done what is necessary for their procurement.

In January 2005, the IRCS received 5 hydraulic relief and rescue sets with accessories and 2,250 rolls of plastic sheeting for covering tents. These sets and plastic sheeting are stored at a warehouse of the IRCS Relief and Rescue Organization in Tehran. After being sorted out, they will be distributed to provincial branches.

The two other items, 7,012 rolls of canvas for making tents and 50,000 kerosene lanterns, are in the pipeline. Some of the canvas has already arrived in Bandar-e Abbas port in February 2005. In January, an IRCS representative paid a three-day visit to a factory of the canvas supplier in Karachi in order to check the quality.
Disaster management training workshops were organized in accordance with the DM Plan of Action which had been worked out in close cooperation with the Relief and Rescue Organization of the IRCS. The following workshops were held in the reporting period:

<table>
<thead>
<tr>
<th>No</th>
<th>Workshop</th>
<th>Dates</th>
<th>Place</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>DM Workshop</td>
<td>4-6 December 2004</td>
<td>Tehran</td>
<td>40 heads of relief operations of IRCS provincial branches</td>
</tr>
<tr>
<td>2</td>
<td>DM Workshop</td>
<td>13-15 December 2004</td>
<td>Tehran</td>
<td>45 heads of logistics departments of IRCS provincial branches</td>
</tr>
<tr>
<td>3</td>
<td>DM Workshop</td>
<td>3-5 January 2005</td>
<td>Kerman</td>
<td>35 heads of IRCS city branches in Kerman Province</td>
</tr>
</tbody>
</table>

During the above workshops, the participants learnt and discussed disaster preparedness and emergency response policies, disaster response & disaster preparedness tools and logistics system of the Federation, as well as various assessment tools, SPHERE use at different stages of the operation, integration of PSP into DM, coordination, reporting, and distribution procedures. In addition, practical and technical issues as those that were raised during the Bam earthquake operation were discussed too.

Relief, operational and logistic managers of the 28 IRCS provincial branches were given an opportunity to familiarise themselves with key policies, procedures and tools that have to be followed or applied to international operations with the support of the Federation and PNSs.

These and other workshops held so far were helpful in meeting the recommendations made for the IRCS in the Operations Review of the Red Cross & Red Crescent Movement response to the Bam earthquake, which had been conducted in February-March 2004, particularly with regard to:

- Developing standard team structures and defined roles in disaster response for the staff and volunteers of provincial and local branches
- Improving information and reporting systems, especially regarding the reception, warehousing, distribution and reporting of relief items
- Improving disaster risk mapping, camp management, medical triage
- Improving the IRCS branch awareness of ERUs and their function
- Improving decision making in emergencies
- Improving logistics systems and raising international donor confidence in IRCS ability to manage relief distributions
- Standardizing first aid training by using the Federation’s training manuals
- Preventing overlapping with different ministries and provincial authorities
- Modifying the counterpart system for working in Federation operations.

The Delegation prepared training manuals for community-based disaster preparedness (CBDP), which will be used in the DM workshops to be held in the months to come. Based on training requests from IRCS provincial branches, a training calendar for 2005 has been finalized.

**Coordination**

A new office building for the IRCS was completed and the International Affairs Department and other key departments have moved into it in January 2005. The Federation Delegation will follow suit as soon as necessary arrangements have been done.
The Federation Delegation organized a reporting workshop on 15-16 January 2005, in order to improve the quality of reports by delegates and staff of the Delegation and the IRCS. 20 people from the Delegation and the National Society took part in the workshop, which was facilitated by the Head of the Regional Reporting Unit in Ankara.

Monthly IRCS/PNS and Federation Coordination meetings in Tehran continued during the reporting period. The meeting has expanded, and the IRCS invited all relevant technical departments (Relief & Rescue Organization; Treatment Department, Treasury/Logistics, etc). This creates a potential of tackling issues, speed up decision making process and enrich information sharing.

During the reporting period, coordination with UNESCO regarding the "Inclusive Education", as well as the monthly IRCS/MoH/WHO and Federation forum continued in Tehran. Initially, the major focus was on the Bam Hospital, the MoH/IRCS cooperation and opening of the new hospital in Bam. At present, the forum is expanded and it discusses broader issues around the IRCS Tehran Contingency Plan, cooperation on Risk Mapping, HIV/AIDS, psychological support etc.

Three IRCS Managers (the Secretary General; Director General of the International Affairs Department; and the Director General of the Construction Department) visited Geneva during 30th January to 4th February 2005. As they are new in their positions, and they have cooperation roles in the Federation's activities, the purpose was to have an induction to the Secretariat and the International Committee of the Red Cross (ICRC).

Tehran Based IRCS/ICRC/Delegation coordination meetings are resuming on a monthly basis. Currently, the organization of the Regional Basic Training Course in Iran, which is supported by the ICRC, is on the top of the agenda.

Regular meetings are taking place between the Federation office in Bam and the IRCS Head of Bam branch. These meetings are facilitated as the Federation office in Bam is located in the IRCS Bam branch office. Monthly coordination meetings are taking place in Bam, chaired by the Federation, involving IRCS officers, PNS representatives and Federation Delegates.

The Bam based Federation Delegates are attending the Bam Task Force, health coordination meeting and education coordination meeting. The Task Force meeting is now scheduled for every 45 days and the Health and Education meetings are scheduled once a month. The Bam office established constructive and quality relations with the local offices of Ministry of Health and Ministry of Education, as well as with the City Council.

On 15 February, a detailed presentation of Red Cross and Red Crescent activities in Bam has been made for the Head of Task Force and three of his assistants. The meeting was chaired by the Federation Programme Coordinator in Bam the IRCS Head of Bam branch presented the IRCS activities and the bilateral activities, and the bilaterals presented their activities (Spanish Red Cross and French Red Cross, the Swiss Red Cross Delegate was on duty in Tehran).

On 17-18 March 2005, Middle East and North Africa Department of the Federation Secretariat held an information meeting for the donor national societies in Geneva. Detailed information on the progress in all areas of Bam programme was presented to the representatives of 14 national societies and the ICRC which attended this meeting.

Activities of PNSs Present in Bam

**French Red Cross:** A National Programme Officer has been appointed in order to monitor the activities of the French Red Cross in Bam. The actual activities are related to the programme of shower-latrine units and Qanat rehabilitation project. The project of the construction of a Faculty of Nursing is still at the planning phase. The construction site has been allocated and a selected consultant is working on the project. A new delegate from the French Red Cross was to arrive by the beginning of March 2005.

**German Red Cross:** The German Red Cross continued implementation of several construction and renovation projects in Bam, namely construction of the Orthopedic and medical centres, Bam IRCS office, warehouse and gym (used for several months as a warehouse). This construction programme is planned to be completed by the end of 2006.
Spanish Red Cross: The Spanish Red Cross has continued to work on the programme of distribution and installation of showers and latrines units, with six months delay compared to the plan.

Italian Red Cross: The future of the PSP activities is uncertain, as the Memorandum of Understanding for the construction of the PSP centre is not yet signed with the IRCS. A new Italian Red Cross delegate may arrive in March 2005.

Swiss Red Cross: The Swiss Red Cross has recently pulled out of the construction of two Urban Health Centres in Bam. This decision was taken following an investigation of the situation of the health care system in the area and the conclusion that the construction of the planned two Urban Health Centres in the town would place unreasonable demands on the health services whilst not substantially affecting the health care situation for the people of the town, given the plethora of other health care units in the process of being built. Alternatively, the Swiss Red Cross has moved to support the needs of members of the Extremely Vulnerable Individual (EVI) community in Bam, particularly those of the disabled, single parent female headed households and orphans. In coordination with a local partner, the Swiss Red Cross is providing material supplies for the development of several workshops in the town which will employ people from these three specific community groups who at this time are cut adrift from many of the normal contacts they enjoyed prior to the earthquake.

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All International Federation assistance seeks to adhere to the Code of Conduct and is committed to the Humanitarian Charter and Minimum Standards in Disaster Response in delivering assistance to the most vulnerable.

For support to or for further information concerning Federation programmes or operations in this or other countries, or for a full description of the national society profile, please access the Federation's website at http://www.ifrc.org.

The Iranian Red Crescent Society (IRCS) maintains a website at http://www.rcs.ir both in English and Farsi which also provides the latest information, operational updates, reports, interviews and news on the Bam operation to the public.